

## SEVERE WEATHER POLICY

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## **1.0 INTRODUCTION**

There are many types of severe weather that can have a serious local impact in the UK. The main types of severe weather that we need to plan for include storms, gales, low temperatures, heavy snow, heatwaves and drought.

The varied nature of Sussex's landscape and the widely spread population mean that weather can have a great impact on the county. Our reliance on the road network to go about our daily lives becomes evident when it is disrupted by severe weather events.

There is nothing we can do at a local level to reduce the likelihood of severe weather events, however we can be prepared for these events in order to stay safe and maintain essential services.

### **1.1 Purpose of Policy**

The severe weather plan is intended to inform and guide those managing the response to severe weather which disrupts, or threatens to disrupt, services. The plan will be reviewed annually taking into account new severe weather risk information and outcomes from incidents and exercises.

This plan should be used in conjunction with the Trust's Major Incident Plan and Business Continuity Policy.

### **1.2 Scope of Policy**

This guidance covers the potential incidents arising from severe weather that will affect or impact on the Trust area. It will cover a range of severe weather conditions except heatwave, which has its own plan that can be found on the Trust intranet pages.

Severe weather can cause interruption to the business of the Trust, as well as posing significant risks to health either from injury or exacerbation of weather affected health conditions. The following risks are the major severe weather conditions we are likely to encounter, but the list is not exhaustive:

- Low temperature
- Heavy snow
- High winds – storm force and above
- Flooding (coastal, rivers and streams and flash flooding)
- Heatwaves

## **2.0 DUTIES**

### **2.1 Roles and Responsibilities**

#### **2.1.1 Chief Executive and Executive Team**

The CEO has overall responsibility for business continuity arrangements within the Trust, supported by the executive team and the EPRR Lead. The main responsibility for the CEO and executive team is to ensure that they are able to respond to a significant adverse weather event, by activating the Severe Weather Plan if necessary, and supporting the CDSs to deliver their critical services. If the plan is activated, the CEO or

designated deputy will set up the Incident Control Centre and assume command and control of the incident, as described in the Major Incident Plan.

The emergency response to severe weather is inextricably linked to the Major Incident Plan and Business Continuity Policy for the Trust. Severe weather could lead to the activation of the Major incident plan.

In the event of severe weather triggering a major incident, the Gold Commander will establish Gold command and consider the following:

- The health of community based patients
- The health, safety and wellbeing of staff
- Business continuity of operational services
- Business continuity of the Trust's estate
- Business continuity of staff levels trustwide
- Co-operation with partner agencies.

### **2.1.2 Service Managers**

The General Managers and Matrons have an overall view of daily operational pressures and are likely to be the first to recognise the effects. The GM/Matron is therefore pivotal to the intelligence gathering and to the escalation of the incident.

The inability of staff to travel due to severe weather conditions may be related to a range of difficulties, such as blocked roads due to debris, floods, snow, unsuitable transport for the conditions, or ongoing severe weather preventing travel.

At all times the health, safety and welfare of the staff and service users must be paramount and neither should be put at danger. In adverse weather conditions the action taken with regard to service user care would always be proportionate to the presenting clinical situation.

- An assessment of need would take place, by telephone if necessary, using all of the information available regarding the service user to make a balanced decision about the need for a home visit.
- Where a home visit is the only option the services should consider what services are available locally to the service user to facilitate a home visit.
- This may include using services from other teams and could also include GP based services.
- The two guiding principles are that a service user in need must never be left unattended to and staff and service users should not be put at unnecessary risk.
- In the event of severe weather, the Human Resources (HR) directorate will set up a central point for managers to report into, via a mobile phone if landlines are unavailable, to report in any difficulties in relation to the weather and their ability to work effectively. HR will advise the where appropriate.

- Where it is deemed a member of staff is critical to safe clinical operations Service managers & the on call team can request 4x4 transport the details of which and the process is listed elsewhere in this plan & local Disaster Recovery Plans.

### **2.1.3 Staff**

In the event of adverse weather staff are expected to make every reasonable effort to attend for work, either at their usual workplace, or where practicable at their nearest workplace.

If you are going to be late please inform your manager as per normal.

If you are unable to attend work it is essential that you phone your line manager immediately to inform them of the situation. Your line manager will then look at the options available and discuss them with you, such as considering the use of 4x4 transport (if you are a critical member of staff), working from home, arranging shifts for other days to compensate for missed shifts, or taking TOIL or annual/special leave to cover missed shifts. Where bad weather is predicted this is not an emergency situation and therefore alternate arrangements should be sought.

If you are able to get to work but your normal place of work is closed please discuss with your line manager regarding redeployment or alternatively contact the *on call team* or *Incident Coordination Centre (ICC)* if one has been established to discuss redeployment options.

If you are able to get to an alternate SPFT site please discuss with your line managers regarding redeployment.

If none of the above options are possible please consider going to your closest hospital or health facility to offer your help. Please approve this with your line manager first.

If appropriate and available you may be offered 4x4 transport. If this is the case you may need to walk to a central point to be picked up or be ready to come to work earlier than usual.

If the weather improves the 4x4 transport will be stood down therefore staff need to ensure they have a way of getting home should they be brought in to work by 4x4 transport (public transport, taxi, walking etc.)

In some instances e.g. closure of schools, emergency leave can be considered. If there is no alternate care provision that can be made, emergency leave should be given for the first day only after which alternate arrangements should be made.

Any member of staff who believes a request for special leave has been unreasonably refused can appeal within two weeks of the date of refusal to the Director of Human Resources.

### **2.1.4 CDS Directors and Heads of Departments**

CDS Directors and Heads of Departments have the responsibility to ensure that robust BC plans are in place for identified critical services and priorities, and within the severe weather plan, robust plans must be in place to ensure such services are able to be run when severe weather impacts on such dependencies as staff attendance, supplies and services, albeit at and agreed acceptable minimum.

CDS Directors and Heads of Departments need to:

- Ensure that service business continuity plans are up to date, which identify their critical services and plan to protect the delivery of such services. This must include a process of how to ensure sufficient staff are able attend for duty. This may include, where agreed with staff, extension of working hours with agreed time in lieu; the contact details of staff who have vehicles appropriate for adverse weather travelling, and who would be prepared to offer car sharing/buddy travelling arrangements to colleagues who live on the said member of staff's route to work.
- Have in place a system whereby staff contact details are up to date, including mobile telephone numbers in order to be able to liaise appropriately with them. This list needs to be tested every six months and any corrections made. It needs to be accessible by on call managers and their designated senior staff out of hours.
- Be sensitive to the needs of all staff. This includes ensuring that messages/explanations are given using plain language and are easily understood
- Ensure that staff are aware of their responsibilities for communicating with the Trust about potential problems caused by inclement weather in accordance with this plan.
- Ensure that appropriate records are kept relating to time lost due to inclement weather, and all appropriate request forms e.g. annual leave/short-term unpaid leave are received and actioned accordingly.
- Consider each case on its merits whilst ensuring a fair and consistent approach – take advice from HR advisors.
- In exceptional circumstances, consider whether an individual could safely undertake their duties from home. If they agree that an individual could temporarily work from home they must ensure that the individual has clear duties/objectives agreed for the home working period, a telephone and/ or other contact arrangements are agreed. confirm that 'home' provides a safe and confidential environment to enable them to continue with their duties.
- Where it is deemed a member of staff is critical to safe clinical operations Service managers & the on call team can request 4x4 transport the details of which and the process is listed elsewhere in this plan & Disaster Recovery Plans.
- Identify which staff have 4x4 vehicles and have business insurance. With a view of keeping a record to be held by the EPRR Department.

### **2.1.5 Estates and Facilities Lead**

In the event of severe weather triggering a major incident, the Gold Commander will appoint a Gold Command Estates and Facilities lead. The estates and facilities lead will assess the damage to/failure of the estate of the Trust and advise the Gold commander on the best course of action to resolve failures or loss of estate.

### **2.1.6 Sussex Resilience Forum**

Sussex Resilience Forum (SRF):

- Monitor the situation for significant weather changes or new warnings being issued;
- Consider declaration of Multi-Agency Incident or Major Incident, as appropriate
- Identify requirements for any cross-agency staff or resources from Multi-Agency partners;
- Provision of coordinated public warnings and advice in response to hazardous situations

### **2.1.7 Highways Agency**

A Highways Agency Winter Service is operated from the 1st October to the 31st April each year. A daily road weather forecast enables winter decisions to be made.

### **2.1.8 Sussex 4x4 Response**

Endeavor to provide critical (as deemed by service/on call managers) transport to and from work to enable the trust to provide clinical operations. Sussex 4x4 Response are a local charity that provides logistical support to Category 1 & 2 Responders normally in the event of severe weather but not exclusively. All their members are volunteers.

### 3.0 THE SEVERE WEATHER CONTEXT IN SUSSEX

The Sussex Resilience Forum has assessed the risk of severe weather across Sussex:

<p><b>RISK IMPACTS</b></p> <p>Storms and Gales</p> <ul style="list-style-type: none"><li>• Danger to life from windswept objects and structural failures</li><li>• Damage to property</li><li>• Damage to infrastructure and communications networks</li><li>• Travel disruption.</li></ul> <p>Low Temperatures and Heavy Snow</p> <ul style="list-style-type: none"><li>• Travel disruption</li><li>• Vulnerable people exposed to health threatening temperatures</li><li>• Power and water failures</li><li>• School and public building closures.</li></ul> <p>Heatwaves</p> <ul style="list-style-type: none"><li>• An increased number of admissions to hospital and consultations with GPs due to sunburn, heat exhaustion, respiratory problems and other illnesses such as food poisoning</li><li>• Increased vehicle breakdowns due to overheating engines</li><li>• Road surfaces deteriorating as tarmac begins to melt.</li></ul>	<p><b>CONSEQUENCES</b></p> <p>The consequences of severe weather are varied, some common issues include road and travel disruptions, damage and disruption to basic utilities, and damage to property.</p> <p>These have a knock-on consequence to individuals, businesses and the ability for organisations to deliver essential functions to the community.</p> 
<p><b>WHAT DO YOU NEED TO DO?</b></p> <ul style="list-style-type: none"><li>• Listen to weather forecasts and heed any warnings of extreme weather.</li><li>• Plan any journeys or activities with the weather in mind.</li><li>• If you have to travel in severe weather make sure you have adequate clothing and emergency supplies in your vehicle.</li></ul>	<p><b>WHAT ARE WE DOING IN SUSSEX?</b></p> <ul style="list-style-type: none"><li>• Production of multi-agency plans to manage severe weather events.</li><li>• Consideration of weather forecasts prior to any large events in the county.</li><li>• Receiving and distributing early notifications of severe weather.</li></ul>

### 4.0 SEVERE WEATHER ALERT LEVELS AND RESPONSE ACTIONS

Information from the Met office will support more effective healthcare planning and delivery. By building high-quality weather information into the decision-making process, the Trust can:

- Plan operations and activities with greater confidence.
- Monitor report on and manage workload more effectively.
- Deploy staff more effectively.
- Make the best use of resources, targeting them when and where they are needed most.

The EPRR Lead receives the health related weather reports and will cascade these as appropriate.

Further information on the health related weather service can be found at:

<http://www.metoffice.gov.uk/health/about.html>

## 4.1 Heatwave

The Heat-Health Watch system operates from 1 June to 15 September each year. The Met Office uses this system to trigger heatwave warnings where the regional threshold temperatures are met or exceeded. The average threshold temperatures for this region are:

- Day time temperature of 30°C or more.
- Night time minimum threshold temperature of 15°C or more.

Level 0	Long-term planning All year
Level 1	Heatwave and Summer preparedness programme 1 June – 15 September
Level 2	Heatwave is forecast – Alert and readiness 60% risk of heatwave in the next 2–3 days
Level 3	Heatwave Action Temperature reached in one or more Met Office National Severe Weather Warning Service regions
Level 4	Major incident – Emergency response Central Government will declare a Level 4 alert in the event of severe or prolonged heatwave affecting sectors other than health

See **Appendix A for Heatwave Action Grid** taken from the Heatwave plan for England.

## 4.2 Cold Watch

A Cold Watch system will operate in England and Wales from 1st November to 31st March each year. During this period, the Met Office consults with the Department of Health, the Cabinet Office and other experts to raise alerts at appropriate level in response to the weather forecasts and their likely impacts.

Level 0	Long-term planning All year
Level 1	Winter preparedness and action programme 1 November - 31 March
Level 2	Severe winter weather is forecast – Alert and readiness Mean temperature of 2°C and/or widespread ice and heavy snow are predicted within 48 hours, with 60% confidence.
Level 3	Response to severe winter weather – Severe weather action Severe winter weather is now occurring: mean temperature of 2°C or less and/or widespread ice and heavy snow.
Level 4	Major incident – Emergency response Central Government will declare a Level 4 alert in the event of severe or prolonged cold weather affecting sectors other than health

See **Appendix B for Cold Watch Action Grid** taken from the Cold Watch plan for England.

### 4.3 Response Management

The management of severe weather events is split into 4 levels; these mirror the alert levels for the specific response plans:

#### 4.3.1 Level 1 – Preparedness

- Identify Emergency Services and other multi-agency partners likely to be affected by severe weather event
- Review plans, contingency arrangements and responsibilities in the pre -seasonal period.

#### 4.3.2 Level 2 – Prevention

- At start of appropriate severe weather season, review public information and advice.
- Issue general preparation messages to public and multi-agency partners.

#### 4.3.3 Level 3 – Response

On receipt of specific severe weather warnings, Emergency Managers conduct risk assessments and either monitor situation or:

- Implement response plan activities.
- Issue messages to public and other multi-agency partners.

#### 4.3.4 Level 4 – Emergency Response

As appropriate, implement multi-agency coordination or Major Incident command and control when services are being severely affected (power failure, major transport disruption, etc.).

## 5.0 RISK GROUPS

### 5.1 Heatwave Risk Groups

During a heatwave there are certain disease conditions and health factors that increase an individual's risk to becoming ill. These include:

- Older age: especially women over 75 years old, or those living on their own who are socially isolated, or in a care home.
- Having a chronic or severe illness: including heart conditions, diabetes, respiratory or renal (kidney) insufficiency, Parkinson's disease or **severe mental illness**. Medications that potentially affect renal function, the body's ability to sweat, impact on thermoregulation or electrolyte balance can make this group more vulnerable to the effects of heat.
- Those unable to adapt their behaviour to keep cool: having Alzheimer's, a disability, being bed bound, drinking too much alcohol, babies and the very young.
- Environmental factors and overexposure: living in urban areas and south facing top floor flats, being homeless, activities or jobs that are in hot places or outdoors and include high levels of physical exertion.

In a moderate heat wave, it is mainly the high risk groups mentioned above who are affected.

## **5.2 Cold Watch Risk Groups**

The Trust has identified the following groups of being at risk during a cold watch period: Those people who are/have:

- Over 75 years old
- Frail
- Pre-existing cardiovascular or respiratory illnesses and other chronic medical conditions
- Severe mental illness
- Dementia
- Learning difficulties
- Arthritis, limited mobility or otherwise at risk of falls
- Young children
- Living in deprived circumstances
- Living in homes with mould
- Fuel poor (needing to spend 10% or more of household income on heating home)
- Elderly people living on their own
- Homeless or people sleeping rough
- Other marginalised groups

## **6.0 ACTION PLANNING – SEVERE HOT WEATHER**

Please also refer to **Appendix A**.

### **6.1 Level 1 – Summer preparedness and long-term planning**

- Check the resilience of estates and equipment, especially medical and IT systems, to ensure that where necessary, they can be maintained at working temperatures and there is no risk of system failure through overheating.
- Staff to ensure that measures are taken into account when planning vulnerable patient discharge
- Identify individuals at risk from extreme heat
- Identify any changes to individual care plans
- Ensure awareness of the dangers of heat and how to keep cool
- Review surge capacity and the need for, and availability of, staff support in the event of a heatwave
- Install indoor thermometers in each room that vulnerable individuals may spend a substantial amount of time – and monitor temperatures four times a day
- Aim to ensure that cool rooms do not exceed 26°C

## **6.2 Level 2 – Alert and readiness**

- NHS England (South) will advise the CEO office and EPRR lead of escalation to this status, and via the met office website.
- In conjunction with community partners, all ward staff are to ensure that discharge arrangements for vulnerable people include consideration for the potential heat situation.
- The impact of a potential heatwave will be discussed at daily clinical operations meeting, and all wards will be asked to consider the implications for their discharged patients, staff and clinical environment. Feedback from all ward and department areas will be encouraged to the CDS EPRR lead (details on the EPRR pages of the intranet).
- Escalation to a higher status will be communicated to all Trust Staff via the intranet, e-mail system and through group meetings.

## **6.3 Level 3 – heatwave action**

- NHS England (South) will advise the CEO office and EPRR lead of escalation to this status, and via the met office website.
- Further notification to all Trust staff will be made.
- Estates staff and the Risk Management team will assess areas for the need for further cooling equipment, to ensure maximum comfort for patients and staff

## **6.4 Level 4 - Emergency**

- NHS England (South) will advise the CEO office and EPRR lead of escalation to this status, and via the met office website.
- The CEO or on-call Director will consider declaring a major incident and establishing an incident control centre in accordance with the Major Incident Plan.

# **7.0 CONTINGENCY PLANNING – SEVERE COLD WEATHER**

## **7.1 General Principles**

If there are extreme weather conditions, employees are expected to make every reasonable effort to get to work, adapting means of travel if necessary, even if this means they may arrive late. Managers will exercise discretion when approving late arrival for and early departure from duty. In exceptional circumstances, staff may be required to carry out duties not normally associated with their normal role. Staff should not be permitted to undertake duties that would require them to undertake additional training or would put them or others at risk. Staff should ensure that they do not undertake tasks/roles outside their normal competence levels.

This plan is not intended to be prescriptive but should be used as an additional resource to local disaster recovery and BC plans, and aid pragmatic decisions that may need to be taken by managers and staff depending on the prevailing incident.

## **7.2 Absence Reporting**

If staff find they are definitely unable to attend work because of the weather conditions, they must notify their manager within one hour of the usual start time. In this case, if the normal work base is open, staff would normally be expected to take the time as annual leave/flexi time to cover the time lost. Any exceptions to this would be at the discretion of the line manager.

Failure to notify an appropriate manager that a member of staff is unable to attend work would count as unauthorised absence and could therefore be unpaid. Staff may be required to work from an alternative base or it may be possible for staff to work from home. These options should be discussed and agreed with line managers in advance and included in service business continuity plans.

## **7.3 Late Arrival/Early Departure**

If staff do arrive late because of inclement weather, they will not normally be expected to make up the time lost. Some staff, such as those with dependents, medical conditions or those with long homeward journeys may need to be released from duty earlier than others. This will be at the discretion of individual line managers.

Regular updates of weather and road conditions will be obtained by the Communications Team who will ensure that regular communications are made available to the senior management team and other line managers, in order to assist with decisions about releasing staff earlier. Line managers are responsible for keeping their staff informed, monitoring staffing levels and using discretion where necessary depending on individual staff circumstances.

These decisions may need to be taken on a site by site basis depending on the prevailing conditions. Staff dismissed early from duty will not be required to make up lost hours.

## **7.4 Alternative Working Arrangements**

In some circumstances staff may be able to provide assistance at the nearest appropriate site of the Trust. Staff should agree this with their line manager in the first instance before approaching an appropriate manager in the alternative workplace to establish if they can be of assistance.

Staff will not be asked to provide any services or undertake any tasks that they are not qualified to do. Staff should carefully assess whether it is safe to travel to work on foot due to the increased risk of slips, trips and falls.

Staff with access to appropriate IT capability that enables them to work from home should contact their line manager to seek agreement and agree a schedule of work where appropriate.

## **7.5 Staff Returning from Holiday Destinations**

If a member of staff's return from a holiday is disrupted by severe weather, they must make contact with their manager at the earliest opportunity to let him/her know that the staff member's return to work delayed and when the likely return date will be. On return to work of the staff member, the line manager will discuss how this leave can best be managed.

## **8.0 ESCALATION**

### **8.1 Triggers**

- Met Office alerts advising of increasingly inclement weather within the region and locally.
- Increasing numbers of staff unable to attend work due to adverse weather affecting road/rail systems.
- Increasing operational pressures identified as a result of adverse weather through the routine operational meetings.
- Another partner activating their own plans as a result of their inability to provide all but critical services, which then impacts on the Trust ability to deliver services as normal e.g. Ambulance Service activates its plan and runs emergency services only;
- Essential supplies unable to be delivered.
- A combination of all or any of the above.

### **8.2 During Office Hours**

The decision to activate the major incident plan triggered as a result of severe weather will be at the discretion of the Chief Executive, Chief Operating Officer or the Accountable Emergency Officer (Chief Finance Officer) during normal working hours. If necessary, the major incident gold command will be activated as identified in the Major Incident Plan

Intelligence from previous severe weather events suggest that an executive led control room should be set up earlier rather than later – it can always be stood down if the event does not escalate beyond what is anticipated.

### **8.3 Out of Hours**

Severe weather warnings received are escalated by following the routine out of hours on call rota, to the Senior Manager on Call. The Senior Manager will if necessary, escalate to the on call Director. Activation of the major incident plan will be at the discretion of the On Call Director.

## **9.0 SEVERE WEATHER MAJOR INCIDENT**

In accordance with the actions agreed in Major Incident Plan the Incident Control Centre (ICC) will be set and the incident will be managed from there, across all sites. In addition to the Chief Executive or his deputy, and Loggists, there will be a requirement for the COO, Chief Nurse and Chief Medical Officer to be available to support the Incident Control Centre.

A senior representative from the People's Directorate will support decision making about staff attendance/non-attendance issues. This person will be a key representative in the Incident Control Centre.

Silver commanders will provide sitreps into the Incident Control Centre in order to contribute to decision making about service delivery. As well as supporting the Bronze commanders to manage business continuity arrangements, the major incident team will liaise with Clinical Commissioning Groups (CCGs), Local Authorities and other external partners as necessary. This is to ensure they are aware of the impact of severe weather on the Trust's ability to continue to deliver services and seek mutual aid where appropriate

## **10.0 COMMUNICATIONS**

The major incident communications lead will ensure that all key messages are cascaded as appropriate to staff at timely intervals, using whatever means are most appropriate, to reach the widest audience.

These channels include: intranet homepage (news section and alert bar); all-user emails; Twitter; Trust website; and posters/flyers.

### **10.1 Immediate Actions**

- Major incident team to appoint a communications lead asap
- Communications lead will activate cascade.
- Communications lead to attend the ICC and be updated as appropriate.

### **10.2 Next Steps**

- Communications team to post 'Severe Weather' message in News section of intranet and EPRR web pages. News story will explain Trust is coping with severe weather and that all important updates will be posted on intranet, so please keep checking it.
- Communications team to send all-user alert explaining all information will be posted on intranet and asking staff to make sure they keep colleagues not on email informed.

- Communications team to post guidance for patients, visitors and non-confidential staff information in News section of external website, with message explaining it will be updated regularly as situation develops.
- Communications team to use social media as additional cascade for any information that can be in the public domain.
- Gold Command Communications lead to attend Control Room briefings and post agreed updates on intranet (and website, where appropriate) following briefings or changes to the situation. Content to be approved by Gold commander
- Communications team to send all-user alert when key updates posted on intranet.
- All managers and teams to cascade information and updates to colleagues, especially those not on email – print information where staff don't have access to computers and place in areas they will be able to access it.
- Managers and teams to inform major incident team of any updates or information that needs to be posted on intranet/website.

## **11.0 RECORD-KEEPING**

Each individual involved in the response to an emergency should record all communications and activities in a log which will then:

- Serve as a true record of events.
- Act as a personal aide-memoir.
- Assist operational decision making.
- Facilitate handovers of responsibility.
- Aid the compilation of post operational reports.
- Be available for debriefing and any subsequent enquiries.

A log of actions in a serious severe weather should be recorded on the Log of Activities, in accordance with good practice. This can be found in the major incident supplies box, or in Appendix D of the Major incident plan and business continuity policy.

## **12.0 DEBRIEF AND EVALUATION OF RESPONSE**

- After the all clear has been given, the Gold Command will decide a timetable for the debrief and evaluation of the response.
- The Disaster Recovery Group will implement their recovery plan, and this will be communicated at the time of the debrief.

- All of the documents and records relating to the flood will be gathered, collated and reviewed and learning drawn together into a report which will be disseminated appropriately by the Disaster Recovery Group.
- The Major Incident Plan and the Flooding Contingency Plan will be reviewed and amended where appropriate to take learning from the incident into account.

## APPENDIX A – HEATWAVE ACTION GRID

Level 0	Level 1	Level 2	Level 3	Level 4
<p><b>Long-term planning</b> All year See accompanying document 'Making the Case' for more detail</p>	<p><b>Heatwave and summer preparedness programme</b> 1 June to 15 September</p>	<p><b>Heatwave is forecast – alert and readiness</b> 60% risk of heatwave in the next 2 to 3 days</p>	<p><b>Heatwave action</b> Temperature reached in one or more Met Office National Severe Weather Warning Service regions</p>	<p><b>Major incident – emergency response</b> Central government will declare a Level 4 alert in the event of severe or prolonged heatwave affecting sectors other than health</p>
<p><b>Professional staff (all settings):</b></p> <ul style="list-style-type: none"> <li>develop systems to identify and improve resilience of high-risk individuals</li> <li>request an HHSRS assessment from EH for clients at particular risk</li> <li>encourage cycling/walking where possible to reduce heat levels and poor air quality in urban areas</li> </ul> <p><b>Care homes and hospitals:</b></p> <ul style="list-style-type: none"> <li>work with commissioners to develop longer term plans to prepare for heatwaves</li> <li>make environmental improvements to provide a safe environment for clients in the event of a heatwave</li> <li>prepare business continuity plans to cover the event of a heatwave (eg storage of medicines, computer resilience, etc)</li> <li>work with partners and staff to raise awareness of the impacts of severe heat and on risk reduction awareness (key public health messages – box 1)</li> </ul>	<p><b>Professional staff (all settings):</b></p> <ul style="list-style-type: none"> <li>identify high-risk individuals on your caseload and raise awareness of heat illnesses and their prevention among clients and carers (see key public health messages – box 1)</li> <li>include risk in care records and consider whether changes might be necessary to care plans in the event of a heatwave (eg initiating daily visits by formal or informal care givers for those living alone)</li> </ul> <p><b>Care homes and hospitals:</b></p> <ul style="list-style-type: none"> <li>ensure business continuity plans are in place and implement as required; ensure appropriate contact details are provided to LA/NHS emergency planning officers to facilitate transfer of emergency information</li> <li>identify or create cool rooms/areas (able to be maintained below 26°C)</li> <li>install thermometers where vulnerable individuals spend substantial time</li> </ul>	<p><b>Professional staff (all settings):</b></p> <ul style="list-style-type: none"> <li>check high-risk people have visitor/ phone call arrangements in place</li> <li>reconfirm key public health messages to clients</li> <li>check client's room temperature if visiting</li> </ul> <p><b>Care homes and hospitals:</b></p> <ul style="list-style-type: none"> <li>check indoor temperatures are recorded regularly during the hottest periods for all areas where patients reside</li> <li>ensure cool areas are below 26°C</li> <li>review and prioritise high-risk people</li> <li>ensure sufficient cold water and ice</li> <li>consider weighing clients regularly to identify dehydration and rescheduling physio to cooler hours</li> <li>communicate alerts to staff and make sure that they are aware of heatwave plans</li> <li>ensure sufficient staffing</li> <li>implement business continuity</li> </ul>	<p><b>Professional staff (all settings):</b></p> <ul style="list-style-type: none"> <li>visit/phone high-risk people</li> <li>reconfirm key public health messages to clients</li> <li>advise carers to contact GP if concerns re health</li> </ul> <p><b>Care homes and hospitals:</b></p> <ul style="list-style-type: none"> <li>activate plans to maintain business continuity – including a possible surge in demand</li> <li>check indoor temperatures are recorded regularly during the hottest periods for all areas where patients reside</li> <li>ensure staff can help and advise clients including access to cool rooms, close monitoring of vulnerable individuals, reducing internal temperatures through shading, turning off unnecessary lights/equipment, cooling building at night, ensuring discharge planning takes home temperatures and support into account</li> </ul>	<p><b>National emergency</b> Continue actions as per Level 3 unless advised to the contrary</p> <p><b>Central government will declare a Level 4 alert in the event of severe or prolonged heatwave affecting sectors other than health and if requiring coordinated multi-agency response</b></p>
<p><b>High-risk groups</b>  <b>Community:</b> Over 75, female, living on own and isolated, severe physical or mental illness; urban areas, south-facing top flat; alcohol and/or drug dependency, homeless, babies and young children, multiple medications and over-exertion  <b>Care home or hospital:</b> over 75, female, frail, severe physical or mental illness; multiple medications; babies and young children (hospitals).</p>				
<p>*Because Level 2 is based on a prediction, there may be jumps between levels. Following Level 3, wait until temperatures cool to Level 1 before stopping Level 3 actions.  ** Level 4: A decision to issue a Level 4 alert at national level will be taken in light of a cross-government assessment of the weather conditions, co-ordinated by the Civil Contingencies Secretariat</p>				

## APPENDIX B – COLD WATCH ACTION GRID

Level 0	Level 1	Level 2	Level 3	Level 4
<p><b>Year round planning</b></p> <p>All Year</p>	<p><b>Winter preparedness and action</b> 1 November to 31 March</p>	<p><b>Severe winter weather forecast – Alert and readiness</b> Mean temperature of 2 degrees and/or widespread ice and heavy snow predicted with 60% confidence</p>	<p><b>Severe weather action</b> Main temperature of 2 degrees and/or widespread ice and heavy snow</p>	<p><b>Major incident – emergency response</b></p>
<p>1) Ensure organisation can identify and support most vulnerable.</p> <p>2) Plan for joined up support with partner organisations.</p> <p>3) Work with partners and staff on risk reduction awareness (eg flu vaccinations, signposting for winter warmth initiatives).</p>	<p>1) Ensure cold weather alerts are going to right staff and actions agreed and implemented.</p> <p>2) Ensure staff in all settings are considering room temperature.</p> <p>3) Ensure data sharing and referral arrangements in place.</p> <ul style="list-style-type: none"> <li>Identify individuals who are at particular risk from severe cold weather. A key worker should oversee prevention/management arrangements, especially for frail elderly people living alone.</li> <li>Identify any changes to individual care plans for those in high-risk groups</li> <li>Work with at-risk individuals, their families and carers to ensure that they are aware of the dangers of cold weather and how to keep warm. Help them to put simple protective measures in place, such as ensuring that they have adequate warm clothing and receive warm meals every day.</li> </ul>	<p>1) Continue level 1 actions.</p> <p>2) Ensure carers receiving support and advice.</p> <p>3) Activate business continuity arrangements as required; plan for surge in demand.</p> <ul style="list-style-type: none"> <li>Make sure that all those at high risk from cold weather have been identified and that arrangements are in place to visit them and take appropriate action to protect them against severe winter weather.</li> <li>When visiting clients check room temperatures to ensure that clients are warm. Ensure that they have at least one room which meets recommended room temperatures (see below)</li> <li>Check that clients have supplies of food and medication</li> <li>Remind clients of the action they can take to protect themselves from the effects of severe cold.</li> </ul>	<p>1) Continue level 2.</p> <p>2) Implement emergency and business continuity plans; expect surge in demand in near future.</p> <p>3) Implement local plans to ensure vulnerable people contacted.</p> <ul style="list-style-type: none"> <li>Ensure that staff are aware of cold weather health risks and are able to advise clients how to protect against them.</li> <li>Consider daily visits/phone calls for high-risk individuals living on their own who have no regular daily contacts.</li> <li>Advise carers to contact the patient's GP if there are concerns about an individual's health.</li> <li>Ensure that rooms, particularly living rooms and bedrooms, are kept warm.</li> </ul>	<p>Level 4 alert issued at national level in light of cross-government assessment of the weather conditions, coordinated by the Civil Contingencies Secretariat (CCS) based in the Cabinet Office.</p> <p>All level 3 responsibilities to be maintained unless advised to the contrary.</p> <ul style="list-style-type: none"> <li>Health and social care services and local authorities should ensure that Level 3</li> </ul>

	<ul style="list-style-type: none"> <li>• Encourage flu vaccinations.</li> <li>• Ensure that the actions in this plan are brought to the attention of relevant staff, and particularly that staff are aware of all the guidance on minimising and coping with cold weather-related health risks.</li> <li>• Consider who your partners may be in protecting the health of the local population against cold – these may include police and fire authorities and voluntary and community sector organisations.</li> <li>• Identify which local health, social care and voluntary sector organisations are themselves most vulnerable to the effects of severe winter weather.</li> <li>• All community staff who identify clients living in homes that are too cold should know how to get assistance for their clients.</li> <li>• Explore and encourage the uptake of energy efficient, low-carbon solutions for insulating and heating of homes and social care and health institutions.</li> </ul>	<ul style="list-style-type: none"> <li>• Prepare for a potential increase of weather-related injuries and illnesses in staff and patients.</li> <li>• Consider how the forecast weather conditions may impact e.g. snow and icy roads delaying home visits.</li> <li>• Communicate cold weather alerts to staff, particularly those in community</li> <li>• Ensure that all key staff are aware of winter plans and arrangements and have access to relevant advice.</li> <li>• Encourage staff to have flu vaccination.</li> <li>• Consider accommodating key staff on site overnight if there is a risk that transport networks may be disrupted.</li> <li>• Ensure readily accessible supplies of warmed fluids.</li> <li>• Plans to deal with consequences of disrupted transport links, including disrupted access to patients' homes and care homes and possible delays in pharmaceutical supplies.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure that patients and residents wear warm clothing that is appropriate to the temperature and weather conditions, indoors and outdoors.</li> <li>• Identify particularly high-risk individuals (see list on level 1 tab)</li> <li>• Ensure that patients and residents take warm drinks and food regularly.</li> <li>• Ensure that staffing levels will be sufficient to cover the anticipated period of severe weather.</li> <li>• Repeat messages on risk and protective measures to staff.</li> <li>• Mental health trusts and community teams should also ensure that visits or phone calls are made to check on high-risk individuals with severe mental illness who are living on their own or have no regular contact with a carer.</li> </ul>	<p>actions continue during the emergency period.</p> <ul style="list-style-type: none"> <li>• Measures should be taken to ensure that local healthcare providers that are most vulnerable to extreme winter conditions can continue to operate, for example adequate clearing of snow and gritting to ensure safe emergency access.</li> </ul>
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## **APPENDIX C - WARNING AND INFORMING; ADVICE FOR STAFF**

### **1) DRIVING IN SEVERE COLD WEATHER**

#### **a) Driving in severe weather**

Drive with caution during freezing weather. Before setting out on a wintery day all staff should:

- Consider whether the journey is absolutely necessary
- If it is, check the local and national weather forecasts. Check the weather forecast for this area with the [Met Office](#)
- When driving, listen to local or national radio stations for travel news
- Even if roads have been gritted, do not assume that they are free from ice and frost.

Please remember that not all roads are salted, usually only main (A) roads. Information on which roads are gritted is available on Local and County Council web pages.

#### **b) Before setting off**

Before setting off on a journey all staff should ensure they have:

- Warm clothes and a blanket
- Ice scraper and de-icer
- First aid kit
- Torch and spare batteries
- Reflective warning sign
- Jump leads
- Food and a warm drink in a thermos flask
- Clear the snow from the bottom of shoes to prevent slippage

#### **c) Whilst driving**

- Remember it can take up to 10 times longer to stop in snow and ice
- Make gentle manoeuvres to remain in control
- Select second gear when pulling away to avoid wheel spin
- If climbing a hill, try and avoid stopping on the hill. Try and leave lots of distance between you and the car in front. Try to keep at a constant speed and select the best gear before you get to the hill
- When driving downhill, use engine braking by selecting lower gears. Leave plenty of room between you and the car in front
- When using the brakes, use them gently. If you start to skid, take your foot off the brakes and reapply
- If you do get stuck in the snow, straighten the steering and clear the snow from the wheels. Put a sack or old rug in front of the driving wheels to give the tyres some grip
- Avoid rapid accelerations, harsh braking and sharp turns of the steering wheel.

#### **d) Driving in ice and slush**

- It can take 10 times longer to stop in these conditions
- Drive slowly and allow extra room to slow down and stop
- Use the highest gear possible to avoid wheel spin
- To brake without locking the wheels, get into a low gear earlier than normal, allow the speed to fall and use the brakes gently
- If the car skids, ease off the accelerator but do not brake suddenly
- The same driving tips apply for freezing conditions as driving in snow
- Beware of shady areas where ice may not have melted.

#### **e) Driving in fog**

- Slow down, keep an appropriate distance from the car in front.
- Ensure lights are turned on
- Use fog lights if visibility is seriously reduced, but remember to switch them off when visibility improves
- Do not hang onto the tail lights of the vehicle in front, it may be closer than you think
- Do not speed up, even if it seems to be clearing, thick fog can descend quickly.

#### **f) Driving in flood conditions**

- Stay in first gear and drive slowly
- Semi engage the clutch to keep a high engine speed and avoid stalling
- Avoid the deepest water, usually near the cur
- Test brakes after driving through the flood, before driving at normal speed

#### **g) Driving in winter sun**

- Dazzle from low winter sun can make driving conditions dangerous, try and keep a pair of sunglasses to hand
- Ensure the windscreen is kept clean and washers topped up.

## **2) WALKING IN FREEZING WEATHER**

In slippery and icy conditions it is vital to recognise the hazards of walking on these surfaces:

- Avoid wearing shoes with smooth surfaces. Try putting stretch socks over shoes to aid grip
- Be aware of ground surface. Avoid running.
- Avoid putting hands in pockets when walking and avoid carrying heavy loads which could imbalance you
- Try and remove as much snow as possible from the bottom of your shoes as you are walking
- Walk "small". Avoid a tall, erect marching walk
- Just because a path has been cleared, do not assume it is free from ice and won't be slippery
- Assume all wet and dark areas on pavement are slippery and icy

- Be careful when getting in and out of vehicles. Use the vehicle as support when getting in and out
- Try and walk on grassed areas where possible as this gives better traction
- Point your feet out slightly. Spreading your feet like this will increase your centre of gravity. Extend your arms to maintain balance and take short steps
- If you are going to fall, try and fall on your side. Avoid falling on your knees, spine or trying to stop your fall by putting your arm out
- If falling, try and relax your muscles. You will injure yourself less if you are relaxed
- Watch where you are stepping and go SLOWLY!

### **3) CLEARING SNOW**

Follow the snow code when clearing snow and ice safely.

#### **a) Clearing snow & ice from pavements**

- Apply table salt to paths and driveways. During frosty and icy conditions one tablespoon per square metre is all that is needed
- Salt/grit mixes can be used from locally placed salt/grit bins to apply to roads and pavements if necessary.

#### **b) Prevent slips**

- Pay extra attention to clear snow and ice from steps and steep pathways - you might need to use more salt on these areas
- If clearing snow and ice, be careful - don't make the pathways more dangerous by causing them to refreeze.
- Remember, people walking on snow and ice have responsibility to be careful themselves. Follow the advice below to make sure you clear the pathway safely and effectively.

#### **c) Clear the snow or ice early in the day**

It's easier to move fresh, loose snow rather than hard snow that has packed together from people walking on it. So if possible, start removing the snow and ice in the morning. If you remove the top layer of snow in the morning, any sunshine during the day will help melt any ice beneath. You can then cover the path with salt before nightfall to stop it refreezing overnight.

#### **d) Use salt or sand - not water**

- Water may refreeze and turn to black ice. Black ice increases the risk of injuries as it is invisible and very slippery. Prevent black ice by spreading some salt on the area cleared. You can use ordinary table or dishwasher salt - a tablespoon for each square metre you clear should work.
- Don't use the salt found in salting bins - this will be needed to keep the roads clear
- Be careful not to spread salt on plants or grass as it may damage them
- If you don't have enough salt, you can also use sand or ash. These won't stop the path icing over as well as salt, but will provide good grip under foot.

#### **e) Take care where you move the snow**

When shovelling snow, take care not to block people's paths or drains. Make sure a path down the middle of the area is cleared first, so there is a clear surface to walk on. Then shovel the snow from the centre of the path to the sides.

### **4) MANAGING THE HEAT**

Staff should consider the following measures to keeping cool and preventing heat related illness or death:

#### **a) Stay out of the heat**

- Keep out of the sun between 11.00am and 3.00pm.
- If you have to go out in the heat, walk in the shade, apply sunscreen and wear a hat and light scarf.
- Avoid extreme physical exertion.
- Wear light, loose fitting cotton clothes.

#### **b) Cool yourself down:**

- Have plenty of cold drinks, but avoid caffeine
- Eat cold foods, particularly salads and fruit with high water content.
- Take a cool shower, bath or body wash.
- Lightly spray water over the skin or clothing, or keep a damp cloth on the back of your neck.

#### **c) Keep the environment cool:**

- Place a thermometer in your main living room and bedroom to keep a check on the temperature.
- Keep windows that are exposed to the sun closed during the day, and open windows at night when the temperature has dropped.
- Care should be taken with metal blinds and dark curtains, as these can absorb heat – consider replacing or putting reflective material in between them and the window space.
- Consider putting up external shading outside windows.
- Have your loft and cavity walls insulated – this keeps the heat in when it is cold and out when it is hot.
- Use pale, reflective external paints.
- Turn off nonessential lights and electrical equipment – they generate heat.
- Grow trees and leafy plants near windows to act as natural air conditioners.
- Keep indoor plants and bowls of water in the house as evaporation helps cool the air.
- If possible, move into a cooler room, especially for sleeping.

## APPENDIX D – SUSSEX 4x4 Response MOU

**SUSSEX**

**4x4**

**RESPONSE**

### Memorandum of Understanding Sussex 4x4 Response and Sussex Partnership NHS Foundation Trust

Period covered by this agreement: September 2018 until revoked

#### **1.0 Purpose**

- 1.1 This document outlines the arrangements for Sussex Partnership NHS Foundation Trust to request assistance from Sussex 4x4 Response, in providing essential transportation needs in emergency or business continuity incidents.

#### **2.0 Scope/Provisions**

- 2.1 The service offered by Sussex 4x4 Response is provided on a voluntary basis. It involves transporting staff, equipment and items that rely on private transportation to provide critical clinical services or on call duties. The service will be available for these purposes in weather conditions that prevent their safe travel in the vehicles at their disposal, for example in flooding or snow or when other facilities are unable to provide such services.
- 2.2 It remains at all times the responsibility of individual staff members to get to work. If it is possible and safe to walk, if public transport is available or if it is practicable to get a taxi, it is expected that staff will undertake these measures. Staff should refer to their organisation adverse weather policy or equivalent.
- 2.3 Managers considering the need to request aid from Sussex 4x4 Response should have first undertaken a Business Impact Analysis (BIA), listing critical clinical related functions that must be prioritised and an internal assessment of 4x4 availability, reallocating these resources to meet critical functions.
- 2.4 The decision making process for requesting assistance from Sussex 4x4 Response in times of adverse weather can be found in Annex A, with the alerting/request procedure in Annex B.
- 2.5 Indicators of success in this understanding will involve the following qualities in requests and response:
  - i. Requests for short well thought through journeys.

- ii. Journeys that result directly in the provision of critical clinical services or on call that could not have otherwise been provided.
- iii. Timely response and safe transportation of all from door to door.
- iv. Requests being infrequent enough as not to overwhelm the service.
- v. Drivers gaining satisfaction from what they are doing, understanding the benefits of the critical clinical related services they are helping to provide and subsequently continuing to volunteer.

2.6 This agreement is limited by the resources available to Sussex 4x4 Response at any one time and does not warrant a level of service or response time we can provide. It should therefore not be assumed that the group would be able to respond to every request.

2.7 Whilst volunteers give their time freely, they will be reimbursed by the relevant organisation for the cost of fuel used on all authorised journeys and an administration / service charge will be made to cover the cost of servicing the call. Fuel expenses will be paid to responders at the HMRC rate (currently £ plus per passenger).

2.8 The costs are reviewed regularly and we will enter into discussions with all service users before changing these:

Cost per mile (for the first 20 miles)	£
Cost per mile (thereafter)	£

### 3.0 Out of Scope

3.1 It is beyond the scope of this Understanding to provide transportation assistance to any organisations in continuing non-essential business arrangements. Including clerical and non-medical or essential dispatch bases staff.

## 4.0 Terms of agreement

4.1 User groups requesting assistance will be required to:

- i. Provide a single point of contact and a deputy, those so designated will ensure that due consideration is given to the use of alternative options before 4X4 Response is requested.
- ii. Carry out an internal assessment of 4x4 availability, reallocating resources **before** requesting assistance from the voluntary sector.
- iii. Declare a Major/Business Continuity Incident in consultation with their organisation's senior management team (if appropriate to the situation).
- iv. Follow a predetermined decision making process for requesting aid in times of adverse weather. An example of this process is given in Annex A.
- v. Follow the alerting/request procedure as per Annex B of this document.

- vi. Individual organisations are responsible for remitting any fuel and administration costs incurred by their requests, as detailed by Sussex 4x4 Response through appropriate Organisation payment processes.
- vii. Provide suitable refreshment when possible to Sussex 4x4 Response personnel following any deployment when appropriate.
- viii. Make payments due to Sussex 4x4 Response on NET 30 day terms.

#### 4.2 User Groups receiving assistance will:

- i. Have no other reasonable method to reach the base at which they provide their critical service(s) or the patients who need critical care in their home or in a residential or nursing home.
- ii. Be familiar with the organisations lone working policy, making extra calls to their manager over and above this as they see fit.
- iii. Not enter a vehicle if they feel for any reason that it is not safe to do so.
- iv. Report any incidents to their manager at the earliest practicable juncture.

#### 4.3 Sussex 4x4 Response will:

- i. Inform the organisation upon request of the expected number of resources they have available at a given time.
- ii. Provide upon request appropriate 4x4 vehicles (if available), with competent drivers, to assist with transportation needs that the requesting Trust view as critical.
- iii. Request a backfill of volunteers from surrounding regions, should this be necessary in providing lifesaving assistance to a localised Emergency or Business Continuity incident.
- iv. Continue to recruit local volunteers from across the County.

#### 4.4 Responding members of Sussex 4x4 Response will:

- i. Be official members of Sussex 4x4 Response.
- ii. Be working as volunteers.
- iii. Have in place appropriate insurance to fully cover public liability.
- iv. Be appropriately skilled and equipped to drive in possibly hazardous road conditions.

## 5.0 Dispute Resolution

- 5.1 Sussex 4x4 Response are a registered charity and the decision to offer assistance will ultimately be theirs in any given situation.

- 5.2 Should a Strategic Coordination Group (SCG) be established, this will be responsible for co-ordinating the emergency response in Sussex. This may include, if necessary, making decisions regarding the allocation of available voluntary service resources to responding organisations.
- 5.3 This agreement will be governed under the laws of England and Wales, and does not constitute a binding contract to provide transportation.

## **6.0 Termination**

- 6.1 This Memorandum of Understanding (MOU) will be terminated with the disbandment of Sussex 4x4 Response.
- 6.2 If any of the relevant parties (refer to section 9.3) wish to terminate their involvement in this agreement, a 60 day notice period should be given in writing.
- 6.3 This agreement may be terminated in part or in full with immediate effect during its invocation if it can be evidenced that any relevant party is not acting in accordance with this MOU and that upon informing said party of their breach of the understanding, no action deemed sufficient to the aggrieved party is taken to address this.

## **7.0 Status**

- 7.1 All relevant parties will be consulted in the formation of this document. In agreeing to the contents of this document, relevant parties are confirming their commitment to any roles, responsibilities and expectations placed upon them therein.
- 7.2 Review of this document should be undertaken upon request from any of the relevant parties, and should be considered after each activation of the understanding, or annually (whichever comes first) reflecting any lessons identified from its enactment.

## **8.0 Definitions**

### **8.1 Reasonable method**

#### **8.1.1 That which:**

- i. Can be achieved without fear of personal injury or damage to property.
- ii. Will not incur a fiscal penalty deemed by the staff member and their manager to be unreasonable.
- iii. Will not (in the managers opinion) incur a time penalty that will make it non conducive for the staff member to undertake the journey.

### **8.2 Critical clinical services**

#### **8.2.1 Critical clinical services will be prioritised by user groups as follows:**

- i. Activities to reduce mortality, morbidity and significant progression of disease.

- ii. Activities that will alleviate human suffering, including palliative care.
- iii. Activities that meet any legal obligations, such as those contained in The Children Act 2004, Mental Health Act 2007 and others.
- iv. All other emergency clinical and social services.

**NB: for the transportation of vulnerable adults and children, a responsible person will need to accompany**

8.2.2 Non-emergency or routine services will not be considered for assistance by Sussex 4x4 Response.

8.3 Relevant parties

8.3.1 Refers to the organisations that may be involved in the understanding. They are as follows: -

[ORGANISATION]

## **9.0 Assumptions**

9.1 This MOU assumes that staff who may be involved in the request for assistance between the relevant parties will be made aware of this document and will subsequently follow the instructions therein.

## **10.0 Risks**

10.1 Risks to the service being terminated include; staff making inappropriate requests of the service, overwhelming the service by making too many requests, or by making requests from too many different sources.

10.2 These risks have been addressed in this document by formalising a decision making process, allowing informed self-assessment as to what requests are appropriate, and by enforcing a structured alerting system, creating single points of contact, in keeping with emergency command and control arrangements.

# APPENDIX E – SUSSEX 4x4 Response CALL OUT INFORMATION.

**If there is an immediate lifesaving need for transportation call  
999**

Is 4x4 assistance with transportation required immediately to prevent an imminent 999 lifesaving situation?  
*[If a patient will require hospitalisation if they do not receive immediate assistance from a community nurse etc, do not wait and consider 4x4 assistance, call immediately.]*

No

Yes

Have you undertaken an internal assessment of 4x4 resources?

Are **ALL** of your 4x4 resources working on critical services?

Has a Major Incident or Business Continuity Incident been declared by your organisation?

Is voluntary 4x4 assistance required to deliver a **critical** service? (As defined in section 9.2 of this document)

Could the journey be undertaken by a member of staff closer to the destination?

Is there no other reasonable method to undertake the journey?

If between 22:30hrs and 06:30hrs, could the journey wait until the next day?

Follow the request/alerting procedure

**If you have answered yes to any of the above questions (excluding the 999 box), please reconsider the need for your request, and if necessary contact your Single Point of contact to discuss.**

**Nominated single point of contact for relevant party**



**Sussex 4x4 Response**  
**Contact name: Duty Controller**  
**Contact number:**

**General queries**  
**Contact number:**



Contacts:

Single point of contact: Chris McGonigall

Tel:

Mob:

Deputy point of contact: On Call Manager/Director

Tel:

Mob:

Agreement signatures:

For: Sussex 4X4 Response

Print name: Alex Barrett

Role: Chairman

Signature:

Date:

For: Sussex Partnership NHS Foundation Trust

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Print name: Simone Button

Role: Chief Operating Officer

Signature:

Date: