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Tackling excess winter deaths and illnesses

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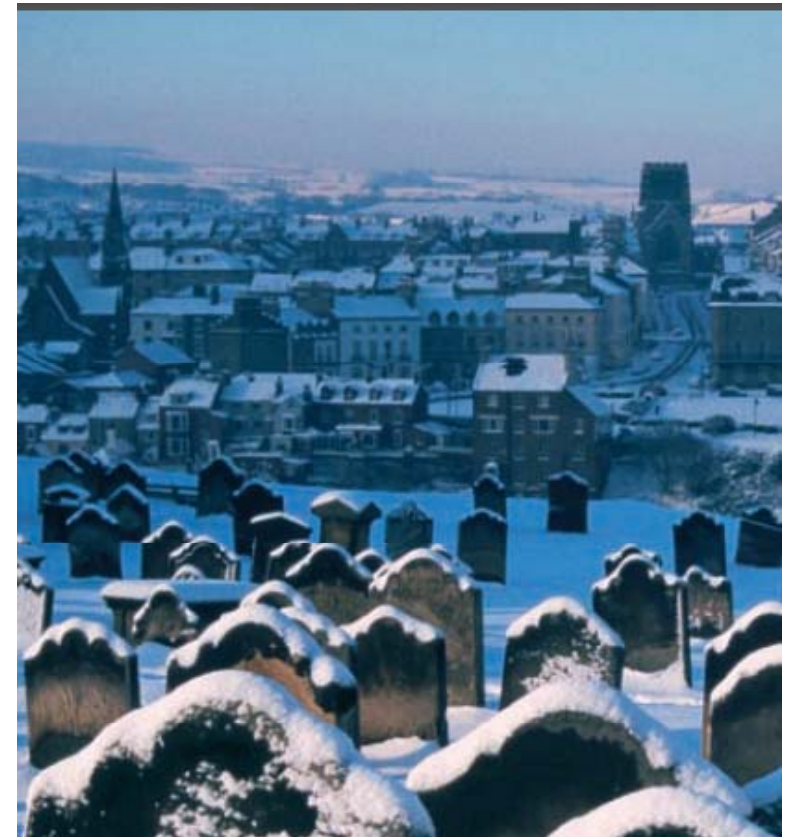
Protecting and improving the nation's health



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Cold Weather and mortality and morbidity

- More people die during the winter than at other times of the year
- Average number of 'excess' winter deaths in **England** around 24,000 (2001-12)
- 34,000 deaths in winter 2008
- 22,900 in 2011-12
- Last winter = 29,200 (England 31,100)



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UK's coldest spring since 1963 claims 5,000 lives: Pensioners worst affected - and experts say final toll could be 'horrendous'

- 2,000 extra deaths registered in just the first two weeks of March
- And for February, 3,057 extra deaths registered in England and Wales
- Campaigners warn weather could prove deadly for thousands more

By PADRAIC FLANAGAN

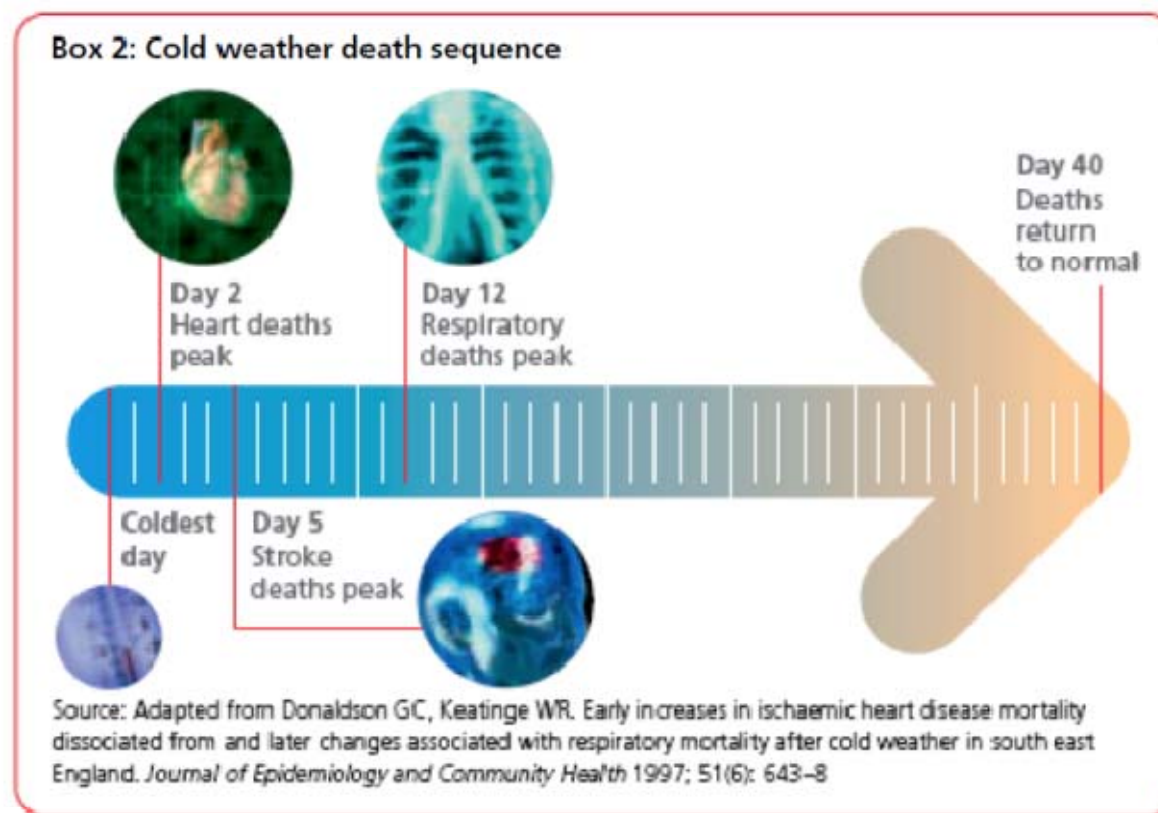


Cold Weather and Health

Direct effects	Heart attacks, stroke, respiratory disease, flu, falls & injuries, hypothermia
Indirect effects	Poor mental health, carbon monoxide poisoning
Health services	Increased demand on health & emergency services



The health effects of cold weather





**Provider organisations: health and social care
(community services, hospitals, care homes and prisons)**

Level 0: Long-term planning – All year

- ensure that you are engaged with local emergency preparedness response and recovery and other strategic arrangements – especially for winter planning
- ensure your organisation can identify those most vulnerable to cold weather and draw up plans for joined-up support with partner organisations. Agree data-sharing arrangements within information governance principles
- assess the longer-term implications of climate change, reduction in carbon emissions, and sustainability for longer-term business continuity
- consider how best to mobilise and engage community organisations and support the development of community emergency plans
- make sure that staff members have identified all those vulnerable to cold weather and that arrangements are in place to support and protect them appropriately
- work with staff on risk reduction awareness, information and education. Encourage staff to be vaccinated against flu before winter starts
- ensure that the business continuity plan includes severe winter weather. Plan for a winter surge in demand for services
- consider carers' needs and support they can continue to give
- work with environmental health officers on Housing Health and Safety Rating System hazard identification

**Level 1: Winter preparedness and action programme –
1 November to 31 March**

- undertake internal reviews to ensure that cold weather alerts are going to the right staff and that appropriate actions are agreed and able to be implemented when received, especially to protect vulnerable service users
- make sure that staff members have identified all those vulnerable to cold weather and that arrangements are in place to support and protect them appropriately
- ensure staff members are undertaking appropriate home checks when visiting clients, eg room temperature; medications and food supplies
- hospitals and care, residential and nursing homes: ensure that rooms, particularly living rooms and bedrooms are kept warm and that staff are taking appropriate action to protect residents from cold weather
- work with partner agencies to co-ordinate cold weather plans; ensure data sharing and referral arrangements are in place
- continue to work with staff on risk reduction awareness, information and education. Encourage staff to be vaccinated against flu, if not already
- work with local authority teams to identify accident hotspots on pavements or roads, advise on gritting priorities to prevent accidents, and ensure access by utilities and other essential services
- ensure staff are aware of the business continuity plan for winter weather; plan for a winter surge in demand
- ensure carers are receiving advice and support



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

- communicate alerts to staff and ensure that locally agreed Cold Weather Plan actions take place, especially those to protect vulnerable service users
- continue to ensure local actions for the vulnerable such as:
 - arranging daily contacts/visits
 - ensuring staff are undertaking appropriate home checks when visiting clients, eg room temperature; medications and food supplies
 - ensuring carers are receiving appropriate advice and support
- hospitals and care, residential and nursing homes: ensure that rooms, particularly living rooms and bedrooms, are kept warm
- activate business continuity arrangements and emergency plans as required. Activate plans to deal with a surge in demand for services

**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

- communicate alerts to staff and ensure that locally agreed actions take place, especially those to protect vulnerable service users
- implement local plans for contacting the vulnerable. Consider daily visits/phone calls for high-risk individuals living on their own who have no regular contacts
- ensure carers are receiving appropriate advice and support
- implement plans to deal with surge in demand
- implement business continuity arrangements

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

- continue actions as per level 3 unless advised to the contrary
- implementation of national emergency response arrangements by central government



Who is the CWP for?

- Commissioners (health and social care)
- Health and social care providers (all sectors)
- Front-line staff (all settings)
- Communities, voluntary sector, individuals
- LRFs, LHRPs and HWBs



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Cold Weather Plan levels

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



Role of local authorities: all alert levels

- Responsible for population health outcomes
- All levels
- Protecting people and infrastructure
- Supporting improved building design and energy efficiency
- Tackling fuel poverty



Role of local authorities: all alert levels



Commissioners (health and social care) and local authorities

Level 0: Long-term planning – All year

- work with partner agencies to ensure that cold weather planning features within wider winter resilience planning
- work with partners to ensure that a strategic approach to the reduction of excess winter deaths (EWDs) and fuel poverty is taken across the local health and social care economy
- work with partner agencies to:
 - develop a shared understanding of EWDs and what partners can do to reduce them
 - identify those most at risk from seasonal variations
 - improve winter resilience of those at risk
 - ensure a local, joined-up programme is in place to support improved housing, heating and insulation, including uptake of energy-efficient, low-carbon solutions
 - achieve a reduction in carbon emissions and assess the implications of climate change
- consider how your winter plans can help to reduce health inequalities, how they might target high-risk groups and address the wider determinants of health
- ensure that organisations and staff are prompted to signpost vulnerable clients onwards (eg for energy efficiency measures, benefits or related advice)
- work with partners and staff on risk reduction awareness (eg flu vaccination for staff in September/October), information and education
- engage with local CVS organisations for planning and implementation of all stages of the plan

Level 1: Winter preparedness and action programme – 1 November to 31 March

- communicate public health media messages
- consider the revisions to the 2013 Cold Weather Plan and ensure that the changes are understood across the system. Work with partner agencies to coordinate locally appropriate cold weather plans
- ensure key partners, including all managers of care, residential and nursing homes are aware of the alert system and can access advice
- review the distribution of the cold weather alerts across the system and ensure staff are aware of winter plans and advice
- ensure that local organisations and professionals are taking appropriate actions in light of the cold weather alerts in accordance with the local and national Cold Weather Plan
- ensure that organisations and staff are prompted to signpost vulnerable clients onwards (eg for energy efficiency measures, benefits or related advice)
- liaise with providers of emergency shelter for homeless people to agree plans for severe weather and ensure capacity to scale up provision
- support communities to help those at risk. Support the development of community emergency plans
- identify which local health, social care and voluntary sector organisations are most vulnerable to the effects of winter weather. Agree plans for winter surge in demand for services. Make sure emergency contacts are up to date

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

- continue to communicate public health media messages
- communicate alerts to staff and make sure that they can take appropriate actions
- ensure key partners, including all managers of care, residential and nursing homes, are aware of the alerts and can access Department of Health and other advice
- ensure that organisations and staff are prompted to signpost vulnerable clients onwards (eg for energy efficiency measures, benefits or related advice)
- support local community organisations to activate community emergency plans
- activate business continuity arrangements and emergency plans as required
- consider how to make best use of available capacity, for example by using community beds for at-risk patients who do not need an acute bed and enabling access to step-down care and respite
- work with partner agencies (eg transport) to ensure road/ pavement gritting preparations are in place to allow access to critical services and pedestrian hotspots

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

- continue to communicate public health media messages
- communicate alerts to staff and make sure that winter plans are in operation
- ensure key partners are undertaking action in response to alerts
- support local community organisations to mobilise community emergency plans
- ensure continuity arrangements are working with provider organisations
- work with partner agencies (eg transport) to ensure road and pavement gritting arrangements are in effect to allow access to critical services and pedestrian hotspots

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

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Outcome 1) Increased healthy life expectancy

Outcome 2) Reduced differences in life expectancy and healthy life expectancy between communities

1. Improving the wider determinants of health

1.1 Children in Poverty

1.3 Pupil absence

1.6 Adults in contact with secondary mental health services in stable accommodation

1.9 Sickness absence rate

1.17 Fuel poverty

1.18 Social isolation

2. Health Improvement

2.11 Diet

2.23 Self reported well-being

2.24 Falls/injuries in >65's

3. Health Protection

3.3 Population vaccination coverage

3.6 Public Sector Orgs with SDMP

3.7 Public health incident plans

4. Healthcare PH & Reducing Premature Mortality

4.3 Preventable Mortality

4.4 <75 cv mortality

4.7 <75 resp. mortality

4.8 Mortality from infectious disease

4.11 Emergency readmissions

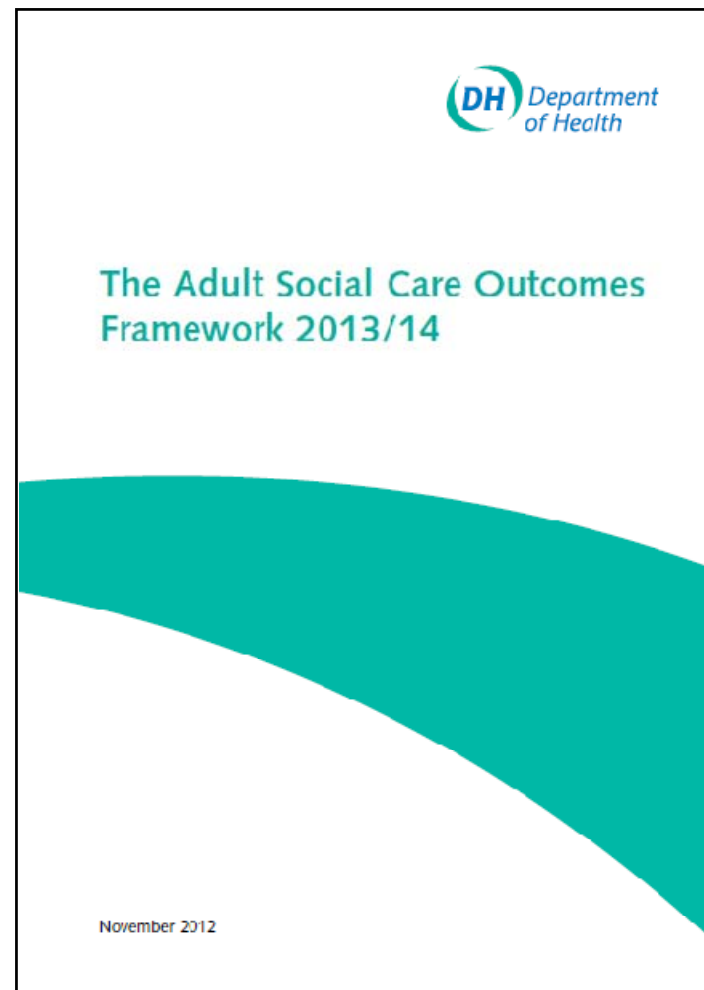
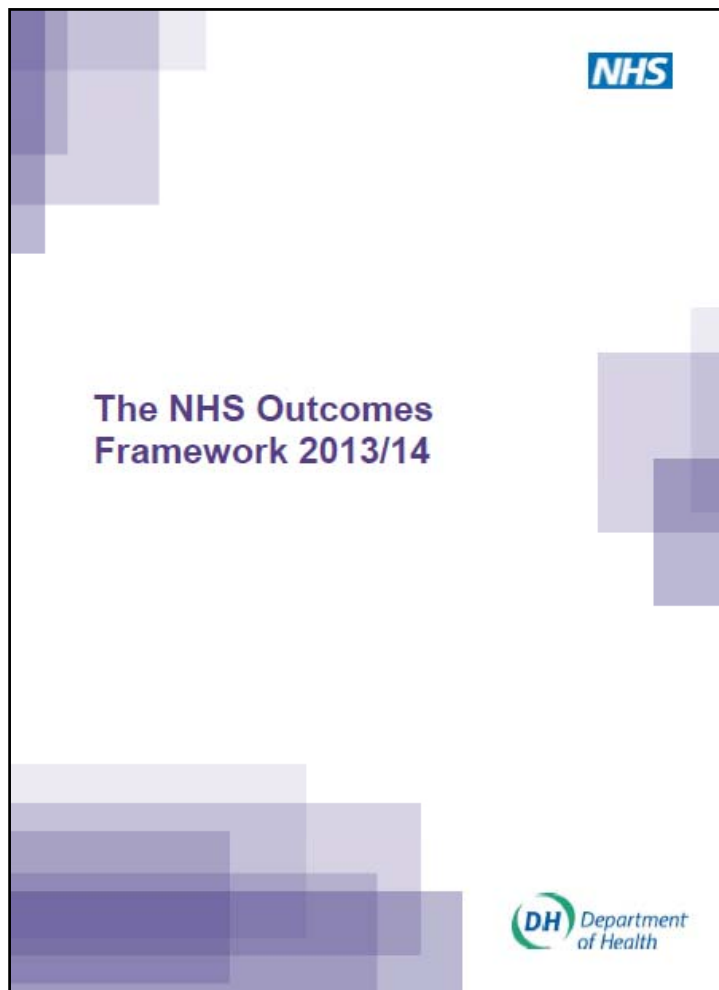
4.13 Health-related QOL for older people

4.14 Hip fractures in older people

4.15 Excess winter deaths



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The Warm Homes Healthy People fund 2012-13: evaluation report

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1 October 2014



Background

- 22,800 excess winter deaths (EWDs) in England between December 2011 and March 2012
- First fund announced in 2011; in 2012, £20m available to upper tier local authorities (LAs)
- 149 successful proposals in 135 'Upper-tier' local authorities
- *'To support local authorities and partners in reducing death and illness in England due to cold housing in winter amongst most vulnerable'*
- Aims aligned with Cold Weather Plan for England





Aim & Objectives

To evaluate the success of the fund, through identifying:

- impacts of the interventions;
- challenges faced in implementing projects; and
- innovative approaches to reducing cold-weather related illness and death.





Methods

Mixed methods approach:

- Online survey (n=116)
- Interviews (n=14)
- Local evaluation (n=21)



Results – outputs



- Schemes aimed to provide range of services, but were focused on:
 - Delivery of warm goods (warm packs, electric blankets, hot meals)
 - Structural interventions (insulation, upgrading heating, falls prevention)
 - Income maximisation schemes (switching energy tariffs, benefits advice)





- Community effects: local economy, work experience, groups, cohesion
- Economic effects: falls prevention cost, DECC framework (QALY)
- Working together: strengthening relationships
- Wider determinants of health







Results – challenges

- Timescale
- Messaging
- Identifying vulnerable groups and data sharing
- Response from health sector
- Public perception of the scheme





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Conclusion and Recommendations

- WHHP schemes should be a commissioning priority for both LAs and CCGs
- Fuel poverty and EWD to be included onto JSNAs to inform commissioning
- Long term planning with emphasis on prevention; sustainable sources of funding would allow this
- Benefits should be framed in terms of effect on measurable outcomes (PHOF)
- Simple messages for maximum inclusivity
- Partnerships should develop explicit data sharing approach; HCPs could be more engaged



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