

# Managing Extreme Weather Conditions Policy

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All Caregivers	11	Winter Weather Contingency	
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		to include Heatwaves in	
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Version



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#### 1. Introduction

Holy Cross Hospital recognises that extreme weather conditions—whether caused by snow, wind, flooding, or heatwaves—pose potential risks to patients, Caregivers and service delivery. This policy outlines our approach to identifying, minimising, and managing these risks to ensure safe and effective operations across the hospital. This policy will be reviewed every three years, or sooner if there are significant changes in national guidance, legislation, or following a major weather-related incident or learning outcome.

### 2. Purpose

To provide a structured and proactive approach to planning, responding, and mitigating the impact of adverse weather events on patients, Caregivers, and services at Holy Cross Hospital.

#### 3. Objectives of this Policy or Procedure

- To protect the health, safety, and wellbeing of patients, visitors, and Caregivers during extreme weather.
- To ensure business continuity and maintain core services.
- To outline roles, responsibilities, and specific preparedness and response actions.
- To comply with relevant national guidance and regulatory expectations.

#### 4. Policy Statement

Holy Cross Hospital is committed to planning and preparing for extreme weather. Whether experiencing storms, heavy snowfall, extreme cold or heatwaves, the hospital has robust systems in place to manage risk, ensure patient safety, and maintain service delivery.

### 5. Scope

This policy applies to all departments, services, Caregivers, patients, and visitors at Holy Cross Hospital and covers all weather-related risks, including storms, snow and ice, heatwaves, and drought-related impact

### 6. Responsibilities

Responsibility for managing extreme weather events is shared across leadership, operational, and clinical teams. Clear delineation of duties ensures timely action, effective communication, and the protection of Caregivers, patients, and services.

# Chief Executive Officer (CEO)

- Has overall accountability for ensuring the organisation is prepared for, and responds effectively to, extreme weather events.
- Ensures that appropriate governance structures are in place to oversee weather-related risk management and business continuity.
- Supports the activation of emergency or resilience plans where needed and provides strategic oversight.



## **Director of Operations**

- Acts as the designated Extreme Weather Lead for the organisation.
- Ensures the implementation and review of this policy and integration with the hospital's Business Continuity Plan (BCP).
- Leads the cascade of official weather alerts (e.g. UKHSA Heat-Health Alerts, Met Office warnings) to key staff groups and departments.
- Coordinates multi-departmental planning meetings if necessary in response to escalating risk levels.
- Oversees the Health and Safety management of weather-related risks, including:
  - Ensuring dynamic and seasonal risk assessments are undertaken (e.g. Thermal Comfort Assessments, ice, flooding).
  - Promoting safety measures for Caregivers such as rest breaks, hydration, PPE, and shaded or ventilated areas.
  - Monitoring incident reports for weather-related events and leading on any learning or improvement actions.
- Ensures that scheduled inspections (e.g. tree safety reports, flat roof integrity checks, gutter/drain maintenance) are completed and any remedial actions addressed promptly.

#### Maintenance Team

- Maintains all estate systems critical to weather resilience (e.g. heating, cooling, ventilation, blinds, and storm drainage).
- Manages snow and ice clearance, storm and wind damage mitigation, and summer overheating controls.
- Conducts or facilitates and records essential planned preventative maintenance (PPM), including:
  - Regular tree safety inspections (carried out by Qualified Contractor with monthly checks made by Maintenance Officers)
  - o Site Safety inspections and remedial action
  - o Gutter and drain clearance (seasonal)
- Ensures fuel supplies, grit, and flooding kits are available, checked, and replenished.

### Ward and Departmental Managers

- Ensure weather alerts are communicated to Caregivers and responded to appropriately within each area.
- Adapt staffing, patient care, and activity planning in response to weather conditions (e.g. avoiding outdoor activity during heat or storms).
- Monitor at-risk patients and liaise with the senior team regarding care adjustments or concerns.
- Promote a culture of safety, encouraging Caregivers to escalate any weather-related issues or incidents.

# Caregivers (Clinical Team)

- Deliver patient care in line with weather-related adaptations (e.g. increased fluids, appropriate clothing, and avoiding exposure).
- Monitor for signs of patient distress (e.g. overheating, dehydration, cold stress) and act accordingly.



- Follow infection control and manual handling guidelines when operating in adverse weather (e.g. slippery surfaces, wet equipment).
- Raise concerns where weather may impact safety or care quality.

#### Human Resources (HR)

- Maintains the Caregivers Handbook, including provisions for adverse weather-related absence and flexible working.
- Supports managers in implementing flexible or remote working where feasible (e.g. during snow, heatwave alerts).

### All Caregivers

- Are expected to:
  - o Follow guidance set out in this policy and related procedures.
  - Take appropriate steps to ensure their own safety and that of others during adverse weather conditions.
  - Report any incidents, hazards, or near misses promptly through established channels
  - Support patient safety by adapting care practices based on weather conditions and alerts.

#### 7. Definitions

#### Extreme Weather

Severe or unseasonal environmental conditions that have the potential to disrupt normal operations, affect patient safety, or pose a health and safety risk to Caregivers, visitors, or infrastructure. This includes events such as:

- o Heavy snowfall: leading to access disruption and cold-related health risks
- o Storms and high winds: risking structural damage and injury from debris
- o Flooding: either localised or regional, impacting access, utilities, and drainage
- Heatwaves: prolonged periods of excessively high temperatures that may cause heat stress, dehydration, and complications for vulnerable individuals
- Heat-Health Watch System (UKHSA / Met Office)
  - A national alert framework designed to help health and social care services prepare for and respond to periods of extreme heat. It includes escalating alert levels (Yellow, Amber, Red) to reflect the likelihood and severity of health impacts, based on forecast temperatures. These levels prompt defined actions across clinical and operational areas to reduce heat-related illness and safeguard vulnerable populations.
- Drought Orders (Temporary Use Bans)
   Legal restrictions implemented under the Water Industry Act 1991 during periods of severe
   or prolonged drought. They limit non-essential water use, such as watering gardens, filling
   pools, or washing vehicles, and may impact hospital operations by requiring modified
   practices (e.g. water-saving measures, coordination with suppliers, and patient care
   adaptations). Although unlikely to affect core care delivery, hospitals should be aware of
   potential restrictions during prolonged high-temperature events.
- Cool Room / Area
  - A designated indoor space maintained at a temperature below 26°C, used to safeguard patients and Caregivers from the effects of heat during hot weather or heatwave alerts. Cool areas should be:



- o Equipped with fans or air-conditioning
- o Monitored for temperature compliance
- Easily accessible to patients most at risk of heat-related illness (e.g. elderly, those
  with neurological injuries or reduced mobility)
   Examples at Holy Cross Hospital include the Inpatient and Outpatient Gyms, which
  are air-conditioned and used as part of the formal Heatwave Preparedness
  Procedure.

#### 8. Policy or Procedure Implementation

This policy is implemented through proactive seasonal planning, structured communication, and coordinated operational responses to Met Office and UKHSA alerts. It ensures that Holy Cross Hospital is prepared to protect patients, Caregivers, and service delivery throughout all phases of extreme weather events.

Implementation is achieved through:

- Monitoring of national and local weather alerts
- Timely cascade of alerts and instructions by the Director of Operations
- Departmental adjustments to care delivery, staffing, and patient safety measures
- Planned maintenance and site readiness checks
- Activation of business continuity arrangements when necessary

The following appendices outline the hospital's key weather-specific procedures:

- **Appendix 2** Storms and Wind Preparedness Procedure
- Appendix 3 Snow and Ice Preparedness Procedure
- **Appendix 4** Snow Clearance, Ice and Gritting Procedure
- Appendix 5 Caregiver Accommodation and Welfare
- **Appendix 6** Supplies and Fuel Contingencies
- Appendix 7 Flood Risk Assessment
- Appendix 8 Heatwave Preparedness Procedure

Each appendix provides detailed actions, responsible roles, and escalation steps to ensure a safe and consistent response to seasonal and extreme weather conditions.

### 9. Regulatory Requirements/ References

This policy has been developed in accordance with the following statutory, regulatory, and best-practice guidance documents to ensure organisational compliance and the protection of Caregivers, patients, and services during extreme weather events:

#### ACAS Guidance

- Provides practical advice for employers on managing workplace issues during extreme weather, including employee rights, absence management, flexible working arrangements, and safe working conditions. It supports fair and consistent treatment of Caregivers, particularly during periods of disruption such as heatwaves, snow, or flooding.
- NHS Heatwave Plan (now part of the UKHSA's Adverse Weather and Health Plan)
   A national strategic framework outlining how health and social care organisations should prepare for and respond to high temperatures. It includes key actions for Level 0–4 heathealth alerts, with an emphasis on protecting vulnerable individuals, maintaining continuity of care, and reducing pressure on health services.



- Gov.uk Hot Weather and Health Guidance (UKHSA / Met Office)
   This government-issued guidance includes detailed information on the health impacts of hot weather, prevention strategies, environmental adaptations (e.g. cool zones), and roles and responsibilities across care settings. It informs alert cascades and mitigation actions aligned with national alert levels.
- Workplace (Health, Safety and Welfare) Regulations 1992
   Legal requirements under these regulations oblige employers to maintain a working environment that is safe and without health risks, including temperature control, ventilation, and adequate welfare facilities. These obligations are critical in extreme weather scenarios to safeguard Caregivers health.
- Business Continuity Plan (BCP)
   The hospital's BCP outlines essential service priorities, communication strategies, contingency planning, and resource mobilisation to ensure continuity of patient care during weather-related disruptions such as power outages, transport failure, or building access issues.
- Caregivers Handbook (Inclement Weather Provisions)
   Sets out local HR policies for managing Caregivers attendance and safety during severe weather, including provisions for remote working, adjusted shift patterns, absence reporting, and expectations during heatwaves, snowfall, flooding, and other adverse events. It ensures a fair, transparent approach to workforce management during disruptions.

#### 10. Evaluation Measures

Holy Cross Hospital is committed to continuous improvement in the management of extreme weather events. The following evaluation measures are in place to assess the effectiveness of this policy, identify areas for learning, and strengthen future preparedness:

#### Post-Incident Reviews

Following any significant weather-related event (e.g. heatwave, heavy snowfall, storm damage, or flood risk activation), a structured post-incident review will be undertaken by the Director of Operations. This includes:

- Evaluation of the hospital's response in real time
- Feedback from ward managers, Caregivers, maintenance officers, and affected departments
- Identification of delays, service impacts, patient safety concerns, or communication issues
- Documentation of lessons learned and incorporation into updated procedures or training

Outcomes are summarised in the next Health & Safety Committee meeting and shared with relevant operational leads.

### • Monthly Health & Safety Reports

Weather-related incidents, hazards, or near-misses are logged and reported in the monthly Health & Safety Report. This includes:

- Slips, trips, or falls linked to icy conditions
- Patient symptoms or distress during heatwaves
- Equipment failure (e.g. air conditioning units, blocked drains)
- Caregivers' safety concerns or fatigue related to weather extremes



These reports are monitored for patterns and used to prioritise corrective actions or risk control measures.

• Monitoring of Patient and Caregiver Outcomes

During periods of extreme weather, clinical teams and department leads will monitor and record:

- Patient wellbeing indicators (hydration, blood pressure, temperature, skin integrity, and behavioural changes)
- Caregiver-reported fatigue or adverse effects linked to heat/cold exposure
- Any increased clinical incidents or changes to normal routines

This data contributes to internal risk reviews, care plan adjustments, and service delivery assessments during and after extreme weather conditions.

• Annual Review at the Health & Safety Committee

This policy, along with its related appendices is formally reviewed annually at the Health & Safety Committee meeting. The review includes:

- Effectiveness of current protocols and Caregivers compliance
- Summary of incident trends and seasonal performance
- Updates to national guidance or Met Office/UKHSA alert frameworks
- Review of departmental feedback and training needs

# 11. Related Documents

#### Caregivers Handbook

Outlines HR procedures for adverse weather, including absence, flexible working, and Caregivers welfare during heatwaves, snow, or travel disruption.

# • Risk Assessment/Risk Management/Care plans

Ensures weather-related risks (e.g. slips, overheating) are identified, assessed, and managed as part of the hospital's risk register and governance framework.

### • Business Continuity Plan (BCP)

Sets out how critical services are maintained during weather-related disruptions, including fuel shortages, blocked access, or Caregivers shortages.

### • Major Utilities Failure Policy

Provides response procedures for power, water, or heating failure due to storms, heatwaves, or cold weather, ensuring patient care continues safely.

#### 12. Appendices



# Appendix 1 - Equality Impact Assessment (EIA) Tool

To be considered and where judged appropriate, completed and attached to any policy document when submitted to the appropriate committee for consideration and approval.

Policy Title	Managing Extreme Weather Conditions
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		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	Race		The policy applies equally to all Caregivers, patients, and visitors regardless of race. During adverse weather, translation support or interpreters can be provided if English is not the first language.
	Gender reassignment		No differential impact is anticipated. Access to welfare facilities and extreme-weather adaptations (e.g. accommodation, PPE) are inclusive and non-discriminatory.
	Marriage & civil partnership	No	The policy does not treat people differently based on marital or partnership status. Support and welfare provisions apply equally to all
	Pregnancy & maternity		The policy supports safe working during extreme weather. Managers are expected to make reasonable adjustments for pregnant staff (e.g. avoiding outdoor duties, access to cool rooms during heatwaves). No negative impact identified
	Ethnic origins (including gypsies and travelers)	No	All weather-related procedures (e.g. evacuation, accommodation, signage) are applied equitably. Cultural needs can be accommodated where relevant (e.g. privacy, diet in welfare packs).
	Nationality		No negative impact identified. Information and alerts can be communicated in accessible formats or with language support where required.
	Sex		Policy applies equally to male and female individuals; no differential impact identified.
	Culture		Security checks and visitor protocols are applied fairly across cultural groups, with sensitivity to cultural practices when appropriate.



	Holy Cross Hospital		
	Religion or belief	No	No discriminatory impact identified.
	Sexual orientation	No	No impact identified. The policy is neutral in respect of sexual orientation and applies equally to all Caregivers, patients, and visitors.
	Age	No	Older or younger Caregivers may be more vulnerable to extreme temperatures. The policy includes proactive monitoring, hydration, and welfare measures to safeguard at-risk age groups. Additional support (e.g. help with transport or PPE) can be offered as needed
	Disability- both mental and physical impairments	No	The policy recognises the need to ensure accessibility during adverse weather (e.g. gritting of accessible routes, accessible cool areas, and support with evacuation or relocation). Reasonable adjustments will be made to ensure disabled individuals are not disadvantaged.
2.	Is there any evidence that some groups are affected differently?	No	
3.	Is the impact of the policy/guidance likely to be negative?	No	
4.	If so can the impact be avoided?	N/A	
5.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
6.	Can we reduce the impact by taking different action?	N/A	
7.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	NO	



## **Appendix 2: Storms and Wind Preparedness Procedure**

#### Purpose:

To outline procedures to prepare for and manage risks associated with stormy or high wind conditions that could impact building integrity, safety, and operations.

### Preparedness Measures:

- Regular inspection and clearing of drains and gullies to prevent water accumulation.
- An Annual Tree Safety Report is completed by a qualified contractor to assess risk from overhanging or unstable trees. Identified hazards are actioned promptly to reduce risk of storm-related damage
- Backup generator maintenance and fuel stock checks to ensure continuity during power loss.
- Routine inspection and maintenance of heating systems.
- Doors and windows checked regularly for secure operation and weather resilience.
- Annual external building condition surveys to identify potential vulnerabilities.
- Rooftop inspections by Maintenance Officers for damage or risk of wind uplift.
- All flat roofs are subject to an annual inspection by a competent contractor to identify leaks, pooling water, or deterioration that may lead to internal water damage during severe weather.
- A planned preventative maintenance (PPM) schedule for guttering and downpipes is in place. Gutters and roof drains are cleaned and inspected biannually to prevent water ingress during periods of heavy rainfall
- Wheeled bins stored securely in the compound to prevent movement or hazards.

#### Action in the Event of Storm Forecast:

- Director of Operations to review Met Office updates and initiate storm readiness.
- Non-essential external activities postponed.
- Maintenance officers to check loose items around the site and secure or remove hazards.
- Confirm emergency contact availability and Maintenance officer's rota for rapid response.
- Clinical and facilities teams advised to monitor vulnerable areas

### Post-Storm Actions:

- Immediate site inspection for damage, fallen branches, or debris.
- Report and address any structural or safety issues.
- Assess impact on operations and communicate updates to all departments.
- Include lessons learned in the next Health and Safety Committee review.



## **Appendix 3: Snow and Ice Preparedness Procedure**

#### Purpose:

To outline site readiness, clearance responsibilities, and contingency planning to reduce risks to Caregivers, patients, and visitors caused by snow and ice accumulation.

# Preparedness Measures:

- Drains and gullies regularly inspected and cleared.
- Annual inspection of heating plant and generator with adequate fuel reserves.
- Pre-winter check of snow-clearing equipment (tractor, snow plough and hand tools).
- Minimum of 100 bags of road salt to be maintained during snowy conditions.
- Salt bins positioned and refilled before 1 November each year.
- Empty Caregiver accommodation rooms prepared for potential overnight stays.

### Action in the Event of Snow/Ice Forecast:

- Met Office weather warnings monitored daily by the Director of Operations (November– March).
- Maintenance Officer availability confirmed to enable early snow/ice clearance.
- Caregivers offered accommodation if travel is unsafe, welfare packs available on site.
- Adjustments made to working rotas to support Caregivers with altered travel routes.
- Communications issued with lift-sharing options updated and circulated via Reception and Nurse Leads.

### Snow and Ice Clearance Responsibilities:

- Priority areas: main drive, emergency access, building entrances, paths, and parking.
- Maintenance Officers responsible for clearance and spreading of salt/de-icer.
- Maintenance Officers to dress appropriately and take regular breaks (warm meals and drinks provided).
- Night Sister to alert Maintenance Officers if snow is settling overnight.
- Barriers may be used to restrict unsafe access routes until cleared.

## Post-Weather Monitoring:

- Ongoing treatment of pathways where temperature remains below freezing.
- Monitoring of site conditions and reporting of hazards or injuries.
- Review effectiveness of procedure and document in Health & Safety monthly report.



### **Appendix 4: Procedure for Snow Clearance, Ice and Gritting During Icy Weather:**

### Purpose:

To document safe and effective snow and ice clearance practices to prevent slips, maintain safe access routes, and ensure the safety of patients, Caregivers, and visitors during periods of cold weather. This procedure supports the continuity of care and minimises risk from falls and adverse conditions.

### Triggers for Action

Snow and ice clearance and gritting must be initiated when:

- A Met Office warning for ice, frost, or snow is issued.
- Temperatures are forecast to fall below 3°C, particularly with clear skies and no wind.
- Icy conditions are already evident onsite.
- An alert is issued via the Extreme Weather Cascade led by the Director of Operations.
- Night Sisters may initiate an overnight call-out to Maintenance Officers if snow or ice poses a significant early morning access risk.

#### Responsibilities

- Director of Operations:
  - o Oversees implementation of the procedure.
  - o Ensures appropriate staffing, gritting supplies, and weather alerts are cascaded.
- Maintenance Officers:
  - Monitor stock levels (salt, grit, tools)
  - o Carry out snow and ice clearance and apply grit.
  - Wear appropriate PPE and work in pairs where possible for safety.
  - Record all activity in Daily task log.
  - Take breaks every 90 minutes. Maintenance officers are provided with hot meals during prolonged tasks.
- Night Sister (or Senior Nurse on Duty at weekends):
  - Monitors conditions overnight/at weekends and arranges call-out to Maintenance Officers when needed.
- All Caregivers:
  - Report unsafe conditions immediately and avoid walking in uncleared or restricted areas.

Priority Areas for Clearance and Gritting

Clearance and gritting must be prioritised in the following order:

Priority 1 – High-Risk & Essential Routes

- Main driveway and drop-off points
- Paths to main building entrances (Caregivers, patients, visitors)
- Emergency exits and fire routes
- Access to clinical areas (e.g. therapy suites, hydrotherapy pool)



• Disabled parking bays and pathways from car parks

### Priority 2 – General Access and Support Areas

- Caregivers and visitor car park pathways
- External ramps and steps
- Access routes to waste and delivery areas
- Walkways around outbuildings and equipment storage

#### Actions and Method

- Snow Clearance:
  - Snow should be cleared as early as possible each day and throughout the day if conditions worsen.
  - o Snow must be moved to safe areas where it won't block access or drains.
  - Shovels and mechanical tools should be used safely and with consideration to underfoot conditions.
- Gritting:
  - o Grit is applied both proactively (based on forecast) and reactively (in response to conditions).
  - o Apply 10–15g of rock salt per square metre on lightly frosted surfaces.
  - o For snow-covered areas, clear first and apply a heavier layer of salt.
  - Use grit spreader where possible to ensure even distribution.
- Safety Controls:
  - o Barriers and signage must be used to restrict access to untreated or unsafe areas.
  - o Use of high-visibility clothing and suitable footwear is mandatory.
  - o Avoid blocking drains, emergency exits, or pathways with displaced snow or salt.

# **Equipment and Supplies**

- Grit bins must be filled and checked monthly from October to March.
- Gritting and clearance equipment (e.g. spreaders, snow shovels, barriers, PPE) should be accessible and maintained.
- Caregivers must be trained in safe manual handling and use of equipment.

### **Record Keeping**

All gritting and snow clearance activities must be recorded in the daily Task log including:

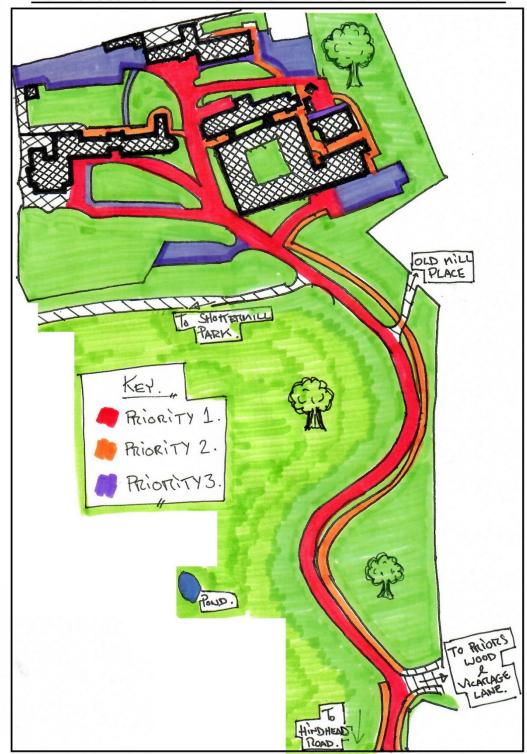
- Date and time of action
- Areas treated
- Name of Caregivers involved
- Weather conditions at the time
- Any issues encountered

# Monitoring and Review

- This procedure is reviewed annually before winter or following any incident involving slips, falls, or access issues.
- Incident trends and feedback will inform improvements.



# **HOLY CROSS HOSPITAL - SNOW CLEARANCE ORDER OF PRIORITY**





### **Appendix 5: Caregiver Accommodation and Welfare**

#### Purpose:

To ensure Caregivers can safely remain onsite if weather prevents travel.

#### Key Measures:

- Empty Caregiver rooms made ready each winter.
- Facilities and Housekeeping Lead ensures availability of toiletries, duvets, pillows.
- Additional bedding stocked for shift-sharing if needed.
- HR coordinates shared travel lists and updates them annually by 1st December.
- Adjusted shift rotas to accommodate travel issues.
- Welfare support includes access to food, rest areas, and temperature-appropriate clothing.

### **Appendix 6: Supplies and Fuel Contingencies**

#### Purpose:

To ensure continuity of services and maintain safe operations during adverse weather by planning for potential supply chain disruptions.

#### **Key Provisions:**

- Fuel: Monthly checks of generator and tractor diesel levels by Maintenance Officers; minimum order of 500L. Alternative fuel suppliers identified.
- Road Salt: Checked by September and maintained at a minimum of 100 bags during forecasted snow.
- Food Supplies: Head Chef to liaise with suppliers to ensure critical food stock.
- Clinical Supplies: Stock monitored by Director of Patient Services rate of use adjusted during shortages.
- Medicines and Oxygen: Reviewed and increased as necessary, including reserve cylinders and additional stock by Ward Manager.
- Waste: Overflow to be safely segregated and stored if collections are missed.

#### **Appendix 7: Flood Risk Assessment**

#### Purpose:

To assess and manage flood risk at Holy Cross Hospital and outline mitigation measures in line with NHS emergency preparedness guidance.

#### Flood Risk Overview:

Holy Cross Hospital is situated at the top of a hill, significantly reducing the likelihood of river or surface water flooding.

The site is not in a designated flood zone and is geographically distant from major watercourses.

# Potential Risks:

Heavy rainfall or blocked drainage may cause localised pooling or minor ingress.

Disruption to utilities, deliveries, or emergency vehicle access in surrounding areas due to regional flooding.



Increased risk of groundwater saturation near outbuildings or storage.

#### Mitigation Measures:

- Annual inspection and cleaning of gutters, drains, and soakaways to maintain proper runoff.
- Drainage plans and emergency contact for drainage contractors available in Estates.
- Maintenance Officers monitor drainage performance during sustained rainfall and take immediate remedial action if pooling is observed.

#### **Business Continuity Planning:**

Flood risk included in the hospital's Business Continuity Plan.

#### Review:

This assessment is reviewed annually or after any adverse weather event that exposes new risks.

#### Appendix 8: Heatwave Preparedness Procedure.

#### Purpose:

To minimise health risks to patients, Caregivers, and visitors during prolonged periods of high temperatures, in alignment with the UKHSA Heatwave Plan and NHS guidance.

#### Heat-Health Alert Levels (UKHSA):

- Yellow Warning of potential impact to health of vulnerable people.
- Amber Likely impact to health and delivery of services; activate internal protocols.
- Red National emergency; extreme impact across health and social care.

### Alert Cascade and Monitoring:

- The Director of Operations checks Met Office and UKHSA alerts daily from 1 June–30 September.
- Upon receiving an alert, they cascade this to all Caregivers via email and coordinate response
- Support Services, clinical leads, and Maintenance Officers are briefed with necessary action steps.

## Hospital Preparedness Measures:

- Reflective blinds/curtains on all patient east-facing windows.
- Thermometers in all wards, common rooms, and clinical areas.
- Air-conditioned cool rooms designated: Inpatient and Outpatient Gyms.
- Mobile cooling units available and tested.
- Fans and chilled drinking water available in all departments.
- Stock of sunscreen, sunhats, and hydration aids maintained.

# Action Plan during High Temperatures:

- Curtains and blinds closed in sun-facing areas; open windows only when outdoor air is cooler than indoor.
- Record temperature four times daily and log any fluctuations by Ward Managers.
- Reposition vulnerable patients to cooler areas; avoid activity during peak heat (11am-3pm).
- Encourage high fluid intake and monitor hydration levels, urine output, blood pressure, and temperature.



- Use cool compresses, damp cloths, and where possible, schedule cool showers.
- Apply high-factor sunscreen to all exposed skin for patients outdoors.
- Emergency Response to Heat Illness:
- Suspected heatstroke: Call 999 immediately.
- Move individual to a shaded or air-conditioned space.
- Remove excess clothing and apply cool damp sheets or fans.
- If conscious, offer water; do not give paracetamol or aspirin.

### Additional Measures:

- Maintenance Officers to check operation of air conditioning and fan distribution as required.
- Ward Managers to review any signs of patient heat-related illness and amend care plans.
- Communication posters and visitor notices to be displayed during red alerts.
- Support Services to monitor supplies of water and cooling equipment.

#### Review and Assurance:

- Heatwave response reviewed post-alert or annually at the Health and Safety Committee.
- Lessons learned incorporated into the next year's operational plan.

# Heat-Health Alert Summary Table

Alert Level	Definition	Hospital Response Summary	Lead Responsible
Yellow	impact on vulnerable	- Monitor forecasts daily (1 June–30 Sept) - Confirm equipment readiness (fans, cool rooms, thermometers) - Reinforce hydration reminders and signage	Director of Operations
Amber	significant impact on health and services	- Cascade alert to all Caregivers and departments - Record internal temps 4x daily - Reposition at-risk patients to cooler rooms - Ensure fans, cooling units, and hydration stations are functioning - Limit outdoor activity during peak heat	Director of Operations, HoDs
Red	sustained extreme heat affecting health systems	- Activate Business Continuity protocols - Implement emergency response (e.g. transfer vulnerable patients to cool zones) - Close blinds, restrict physical activity 11am–3pm - Prepare for potential Caregivers shortages and service disruption	CEO & Director of Operations