



Public Health
England

Protecting and improving the nation's health

The Cold Weather Plan Seminar 2014: Convened by Extreme Events and Health Protection, Public Health England

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. It does this through advocacy, partnerships, world-class science, knowledge and intelligence, and the delivery of specialist public health services. PHE is an operationally autonomous executive agency of the Department of Health.

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Caveat

This report has been taken from the direct delegate feedback and seminar discussions. It summarises the key issues and is not an attempt to relay all comments made during the day. The remarks included do not necessarily reflect the views and opinions of Public Health England.

Acknowledgements

On behalf of PHE, we would like to thank all those who attended the seminar, presented their work and offered their feedback on the Cold Weather Plan. Thanks to all those who facilitated and scribed for the individual discussion sessions. We would also like to acknowledge the help and support of the PHE Events team and in particular Jacqueline Cox without whom the day could not have run smoothly.

Background

There are around 25,000 excess winter deaths each year in England. Many of these deaths are understood to be preventable and therefore amenable to public health intervention. As part of Public Health England's commitments to addressing the impacts of cold weather on health, the Cold Weather Plan for England ('the plan')¹ was reviewed at a stakeholder engagement seminar on Monday 7th July in London.

The seminar was attended by 35 delegates representing a wide range of organisations including Public Health England, the NHS, central government departments, local government, the voluntary and community sector, professional bodies and academic institutions.

The aim of the morning session was to discuss the preliminary findings from a literature review on indoor temperature thresholds with a view to informing future recommendations within the plan. Delegates were also offered the opportunity to hear more about and comment on the Department of Energy and Climate Change (DECC) vulnerable consumer programme and also the PHE led local partnership survey.

In the afternoon, the focus was moved to the future of the plan and the alerts system. Delegates were invited to give feedback on whether we should move towards a joint heatwave and cold weather plan and to comment on the proposal of aligning the current Met Office Heatwave Alerts with the **National Severe Weather Warning Service (NSWWS)**. Both these topics had previously been raised at the Heatwave Plan seminar in March 2014. This session offered the opportunity to give those familiar with the ideas an update on progress and also gather the feedback from those who were new to the proposals.

Presentations are available on the **PHE events website**.

¹ Public Health England (2013) The Cold Weather Plan for England; protecting health and reducing harm from cold weather. Available at: <https://www.gov.uk/government/publications/cold-weather-plan-for-england-2013> (accessed 25/7/2014)

Discussion summary

The following summaries have been taken from the direct delegate feedback and seminar discussions. They provide an overview of some of the key issues and do not attempt to relay all comments made during the day. The remarks included do not necessarily reflect the views and opinions of Public Health England.

Advising on indoor temperature thresholds for health

In light of the preliminary findings of the literature review presented at the beginning of the seminar, the group were asked to discuss the future of the current minimum indoor temperature recommendations for health. They discussed whether the plan should adopt targeted advice for high risk groups around indoor temperature thresholds or whether advice should be aimed at the whole population. They were also asked whether the recommendations should focus on a minimum temperature only or continue with the current range of 18-21°C.

The favoured approach for future temperature threshold recommendations in terms of public health impact was to adopt elements of both a targeted and population based approach to messaging. Delegates emphasised the importance of developing simple, effective, easy to interpret messaging that is relevant to the whole population. With this in mind, it was considered more beneficial to move away from a range of temperatures and towards a single threshold of at least 18°C. However, consideration needs to be given as to how best to communicate such a change in the message to avoid any unnecessary confusion.

The NICE guidance on excess winter deaths and illnesses

Following the publication of the draft NICE guidance, delegates discussed the draft recommendations and what can be done to achieve these. A particular focus was given to ensuring up to date information is available for both professionals and the public on how cold homes can affect people's health and how PHE can use technology to protect the health of those most vulnerable to cold.

Moving towards one plan

At the Heatwave Plan seminar in March, delegates gave feedback on whether we should move towards one plan (ie a single plan that includes both heatwave and cold weather plans). Overall, there was support for this idea with further engagement of other end users required. At the Cold Weather Plan seminar, this idea was progressed further

with delegates being asked for their input into what one plan would look like, how it would operate and how best to engage others.

Despite concerns about potentially increasing complexity, overall there was support for moving towards a joint plan. Operationally, an interactive modular approach that supports the local level with tools, information and evidence of good practice seemed the preferable option. Local actors could then decide how to tailor the plan to the needs of their population.

Stakeholder engagement involving health and wellbeing boards, local resilience fora, the voluntary and community sector, housing, transport, hospitals and public focus groups was recognised as a necessary next step in the planning and development of one plan. This wider engagement could take the form of an electronic survey for some sectors. Finally, it was recognised that a decision on what name a joint plan would take is of significant importance as this would influence how it is viewed and how likely it is to be used throughout the year.

Developing a new cold weather and heatwave alerts system

Overall the increased granularity, consistency to existing alert services (eg NSWWS) and ease of use offered by the proposed new system was considered a significant improvement to the existing system. Delegates welcomed the lead time of 5 days to prepare, plan and anticipate impact on acute and community care services and remarked that the new system is less open to interpretation than the current system. This would all potentially benefit the user at the local level.

However, there was concern raised that with a longer range forecast, there could be potential for forecasts to change and this would reduce confidence in the system. There was also a request for clarity on what defines a 'red' alert and how frequently these would be issued, and a call was made for more detailed interpretations to be issued alongside each forecast (in the form of an 'expert forecaster summary' or similar). Delegates also fed back that although many responders (eg local resilience fora) regularly use similar systems, health professionals would need time to familiarise themselves with how to interpret the various alerts. For example, where the 'tick' is placed on the matrix of an alert changes what actions local responders may take.

Conclusion

The constructive feedback received at the seminar builds on that of the Heatwave Plan seminar will be used to develop the plan and alerts system further. Partners in attendance advised that the current indoor temperature recommendations within the plan should be updated in light of the evidence presented and resulting discussions. Recommendations should focus on advising a minimum temperature threshold (of 'at least 18°C') in place of the current range and adopt both a population and targeted approach in terms of messaging.

Delegates echoed the statements of those present at the Heatwave Plan seminar in supporting the idea of moving towards a joint plan. Further partner engagement to include health and wellbeing boards, local resilience fora, the voluntary and community sector, housing, transport, hospitals and public focus groups was considered essential.

Next steps

1. PHE will revise the indoor temperature threshold recommendations within the plan in line with the advice received from the seminar and the evidence presented within the recent literature review.
2. Further engagement will be sought from those who use the plans to gather more feedback on moving towards a joint plan
3. Ongoing development and refinement of the alerts system will be undertaken alongside Reading University researchers and Met Office colleagues taking into account all the comments made during the seminar.
4. The Extreme Events team will coordinate feedback on behalf of PHE in response to the consultation on the draft NICE guidance on excess winter deaths and illnesses. It will take account of the feedback on how the recommendations intended for PHE can be best achieved and ensure actions are taken now and in the future.