



HM Government

# **Identifying and supporting persons who are vulnerable in an emergency**

Supporting guidance for  
Local Resilience Forums in England

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## Version control

Version	Version Date	Author	Reason for Amendment
-	February 2008	Cabinet Office	Guidance published
1.0	March 2024	Cabinet Office	Review of 2008 guidance Issued to ResilienceDirect
1.1	April 2025	Cabinet Office	Review Publication to GOV.UK

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## Summary

**Part one** of this guidance establishes its scope and aim. The responsibilities of Category 1 and 2 responders to plan for and meet the needs of those who may be vulnerable in emergencies are summarised.

**Part two** sets out the four stages of establishing a plan for identifying and supporting persons and groups who are vulnerable in an emergency. The stages provide a clear structure to help inform planning and approaches in Local Resilience Forums (LRFs):

**Building networks.** The most effective way to identify and support vulnerable persons is to work with those organisations who best understand their needs and/or hold information about them. Category 1 and 2 responders have a duty to cooperate and share information for the purposes of emergency planning and response. Organisations without formal responsibilities, such as those in the voluntary, community and faith sector, should be identified and included to ensure effective planning.

**Identifying vulnerabilities and vulnerable persons.** Planning and providing for the needs of vulnerable persons will involve a large amount of complicated and changing information. It would be impossible to maintain a central, up-to-date, list of vulnerable people. The guidance recommends that lists of relevant organisations and establishments are made, who can be contacted in the event of an emergency to provide information they hold. During a response, dynamic risks assessments carried out by individual agencies will refine situational awareness and priority groups requiring support.

**Agreeing data sharing protocols.** Planning to meet the needs of vulnerable persons in emergencies can only be done effectively through the proper sharing of data. When relevant agencies have been identified and networks developed, agreed data sharing procedures can be put in place, which should have the flexibility to adjust to changing circumstances with clear agreed triggers between responders. Arrangements and agreement for the sharing of information should be established by Category 1 and 2 responders in advance of an emergency. Trying to agree data sharing plans in an emergency is time consuming and could lead to worse public health and safety outcomes, particularly for vulnerable persons.

**Determining the scale and requirements.** By building networks and agreeing data sharing protocols, the potential scale of requirements of vulnerable persons can be estimated in advance of an emergency, without divulging information about individuals. This information can inform emergency planning in terms of resources and equipment.

**Part three** provides examples of multi-agency partnership activity that could support community resilience building and reduce the vulnerability of persons who may be impacted during an emergency. It also considers vulnerability in the recovery phase of an emergency.

## Definition of vulnerability

In line with Emergency Preparedness statutory guidance<sup>1</sup> this guidance considers vulnerable to mean:

*People who are less able to help themselves in the circumstances of an emergency, who must be given special consideration in plans.*

Frequently, a distinction is made between people deemed to be largely self-reliant either in everyday life or in emergency situations, and those who are not and are therefore more vulnerable in emergencies. Whilst anyone can become vulnerable in an emergency, it is assumed generally that people who are more self-reliant will be more easily able to respond to the requirements of an emergency promptly. Vulnerable persons are likely to require special assistance or accommodations in taking appropriate actions.

Not all actions that can be taken to support vulnerable persons during an emergency can be identified as part of pre-defined plans. Additional measures will require consideration during response and recovery as the nature of the emergency develops.

1. Defining in advance, and for planning purposes, which vulnerable groups require consideration in emergency planning can be challenging. It is made easier by identifying and building relationships with organisations who interact and/or support vulnerable people, so that the potential scale and mechanism for response can be understood and agreed before an emergency occurs.
2. Responder agencies play an important role in mitigating the disproportionate impacts on these individuals and communities. While every scenario is different, consideration must be given in all emergency planning to the approach for identifying and supporting vulnerable persons and groups.
3. The definition in this guidance should not prevent local planners from taking a broad and flexible approach for the purposes of emergency planning. Vulnerability is complex, situational, and is not static. There are some important considerations for emergency planners:
  - a. **Different agencies and organisations will have different definitions of vulnerability** in relation to the services they provide. These differences should be understood within the context of the LRFs planning for identifying and supporting vulnerable persons.
  - b. **A disproportionate exposure to risk can affect the ability of individuals, households, groups or communities to respond and recover in an emergency.** Exposure can be the product of a broad range of social,

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<sup>1</sup> [Emergency Preparedness](#) (2012) *Guidance on Part 1 of the Civil Contingencies Act 2004, its associated Regulations and non-statutory arrangements*. Chapter 5, Paragraph 5.99, 'The vulnerable'. Cabinet Office.

financial, physical and mental health, disability and environmental determinants: these determinants may be permanent or transient and their significance might vary depending on the type of emergency.

- c. **The definition does not recognise the contextual factors or complexities associated with vulnerability**, for example, concurrent fuel poverty or food bank reliance that may increase a person's vulnerability. The compounding and additional effects of multiple and intersecting determinants should be recognised as a factor that can increase the need for specific support. The longevity of the response should be recognised as influencing vulnerability, as the impacts from an emergency can change over time.
- d. **Individuals who do not usually consider themselves vulnerable can require support during an emergency.** For planning purposes, the focus may necessarily be on those known to responders, or with characteristics that mean additional support will likely be required. Additionally, it may be challenging to recognise vulnerability during emergencies if individuals are inaccessible (e.g. through isolation, avoidance of support networks and services, or as a result of social or cultural factors) or lack sufficient social support to be readily identifiable as requiring assistance.
- e. **A person's existing support networks may mitigate some of the impacts from emergencies.** Someone with complex needs but a strong support network may not be as vulnerable when compared to someone with fewer needs, but who has fewer social networks or is socially isolated.
- f. **Vulnerability is not absolute.** People may want to offer support to others who have been affected by an emergency, or have relevant skills and knowledge to contribute to the community response.



## **Part one**

Overview of the guidance and responsibilities to plan for the needs of vulnerable persons

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# Introduction

## Aim of the guidance

4. The guidance should support the development of local action plans for identifying and supporting individuals and groups who may be vulnerable in an emergency. It is intended for those involved in local emergency planning, particularly within an LRF, who have leadership roles and statutory responsibilities in the identification and support of vulnerable persons in an emergency. It does not introduce new standards or regulations.
5. The guidance has been developed by the Cabinet Office in collaboration with emergency planning professionals from Local Resilience Forums and UK Government departments. It expands on elements of Evacuation and Shelter Guidance that deal with vulnerable people<sup>2</sup> and Emergency Preparedness Guidance on Part 1 of the Civil Contingencies Act 2004.<sup>3</sup> It supersedes and replaces previous guidance on *Identifying people who are vulnerable in a crisis* (2008).

## Scope of the guidance

6. It is not possible to capture every scenario that could lead to the need for support, however it is recommended that the guidance is used to support the planning for, response to and recovery from emergencies.
7. The guidance provides a common approach and principles for identifying and building relationships with agencies and organisations responsible for supporting vulnerable persons, and organisations working with vulnerable persons, so that the potential scale and mechanism of support to a response can be agreed before an emergency. Other organisations may benefit from familiarity with the approach in this guidance if they are involved in planning or providing for the needs of vulnerable persons.
8. The guidance has been written with English LRFs in mind. There may be elements relevant to emergency responders in Scotland, Wales and Northern Ireland, however the nature of the devolution settlement for each nation means that there will be variations in the way this guidance could be applied.
9. The term Local Resilience Forum “LRF” is used throughout, but could apply to similar emergency planning structures in other nations. This document supports the work of Category 1 and 2 responders and should not prevent the development of local policies.

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<sup>2</sup> [Evacuation and Shelter](#) (2014) Non-statutory guidance to complement *Emergency Preparedness and Emergency Response*. Cabinet Office.

<sup>3</sup> [Emergency Preparedness](#) *Guidance on Part 1 of the Civil Contingencies Act 2004, its associated Regulations and non-statutory arrangements*. Particularly Chapter 5, Paragraph 5.98, ‘The vulnerable’. Cabinet Office.

# Responsibilities

## Planning for vulnerable persons

Category 1 and 2 responders have responsibilities and obligations to plan for and meet the needs of those who may be vulnerable in emergencies. The UK Government considers that all local emergency plans should have regard to the needs of vulnerable persons during an emergency. This guidance sets out a process to support planning for vulnerable persons at the local tier.

LRFs may choose to consolidate their planning through a single 'Vulnerable Persons Plan'; embed planning for vulnerable persons throughout their wider planning work; or both. In any case, the LRF should be able to demonstrate that multi-agency planning has taken place for the needs of vulnerable persons during an emergency.

10. The statutory guidance *Emergency Preparedness Guidance on Part 1 of the Civil Contingencies Act 2004, its associated Regulations and non-statutory arrangements* sets out the responsibilities to meet the needs of vulnerable persons, which are broadly summarised below:

- a. **Making and maintaining plans**<sup>4</sup> for reducing, controlling or mitigating the effects of an emergency. Specific consideration is to be given to vulnerable persons during emergency planning and in the development of response plans.
- b. **Public communications and warning & informing**<sup>5</sup> must consider the needs of vulnerable persons, including those who may have difficulty understanding or receiving warning and informing messages. Category 1 responders with lead responsibility for communicating with the public, both in public awareness programmes and in an emergency, need to be assured that vulnerable persons can be contacted.
- c. **Business continuity**<sup>6</sup> As part of business continuity management in an emergency, responders may consider including advice on the identification of persons who may be vulnerable in an emergency. Building community resilience through good business continuity planning will help reduce reliance on public sector bodies in the event of an emergency, enabling Category 1 and 2 responders to focus their resources on the most vulnerable.

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<sup>4</sup> Emergency Preparedness (2011) [Chapter 5 Emergency Planning](#); paragraphs 5.97 to 5.103 detail 'the vulnerable' as 'people who are less able to help themselves in the circumstances of an emergency'. Cabinet Office.

<sup>5</sup> Emergency Preparedness (2012) [Chapter 7 Communicating with the Public](#); paragraphs 7.72 to 7.77: reaching vulnerable persons. Cabinet Office.

<sup>6</sup> Emergency Preparedness (2012) [Chapter 8 Business continuity advice](#). Cabinet Office

## Interaction with other legislation

11. A Local Resilience Forum is not a legal entity. The Civil Contingencies Act 2004 (CCA) and the CCA 2004 (Contingency Planning) Regulations 2005 (2005 Regulations) impose duties on Category 1 and 2 responders individually, rather than on the Local Resilience Forum as whole.
12. Nevertheless, the 2005 Regulations provide that responders, through the Forum, have a collective responsibility to plan, prepare and communicate in a multi-agency environment. In particular, the 2005 Regulations require Category 1 responders with functions exercisable in particular local areas in England and Wales to cooperate with each other in exercising their duties under s.2(1) of the CCA to assess, plan and advise in relation to emergencies. It is this cooperation that is referred to as the Local Resilience Forum. Category 2 responders are required to cooperate with Category 1 responders to assist them in the performance of all aspects of their duties under the s.2(1) of the CCA. They may ask or be asked to participate in the Local Resilience Forum.
13. As the duties fall on categorised responders, individual categorised responder agencies should seek advice from their legal teams when planning for emergencies, to ensure they are complying with the duties imposed on them by the CCA and its Regulations.
14. Emergency Preparedness guidance<sup>7</sup> supports Category 1 and 2 responders to consider interactions with responsibilities under other emergency management and site-specific legislation as they fulfil their legal duties contained in the Civil Contingencies Act 2004, its accompanying regulations, and sector specific legislation. The interaction between these legislative frameworks is particularly relevant for informing contingency and emergency planning, putting in place arrangements to make information available to the public about civil protection matters, and maintaining arrangements to warn, inform and advise the public in the event of an emergency.
15. Responding organisations must also consider wider legislative regimes as they fulfil their civil contingencies responsibilities. This guidance highlights legislation in regard to the need to eliminate discrimination, progress equality and ensure the lawful use of personal data.

## Equality Act 2010

16. The Equality Act 2010 legally protects people from discrimination in the workplace and in wider society. It replaced previous anti-discrimination laws with a single Act, making the law easier to understand and strengthening protection in some situations. It sets out different ways in which it is unlawful to treat someone less advantageously on the basis of their protected characteristics, including their race, or disability.
17. The Public Sector Equality Duty (PSED) contained within the Equality Act requires public bodies to proactively consider how they can positively contribute to the advancement of

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<sup>7</sup> Emergency Preparedness (2011) [Chapter 19 The Fit with Other Legislation](#). Cabinet Office.

equality and the prevention of discrimination by taking into account the potential effects of their policies, functions and service delivery on different groups with differing protected characteristics.

18. PSED applies to public authorities (as set out by Schedule 19 to the Equality Act 2010) in England, Scotland and Wales, including Fire and Rescue Services, Police Forces, local authorities and government departments, all of whom play a role in supporting the public during emergencies and are expected to consider PSED as part of their assessments and planning for emergencies. Public bodies are encouraged to gather data that will help with their equality analyses. Seeking input from disproportionately impacted groups during the development and testing of policies and plans may help to ensure that those policies and plans are suitable.

- a. Emergencies can lead to changes in available support for some people, either from the impacts of the emergency or from policy and operational responses to the emergency. Statutory, formal and voluntary support services can become interrupted, which is likely to disproportionately impact at-risk groups. Equality impact assessments should be used in emergency planning and response, to identify and pre-empt impacts to service and support provision that are particularly essential for at-risk groups.

## UK General Data Protection Regulation (UK GDPR) and the Data Protection Act (DPA) (2018)

19. The UK GDPR and DPA 2018 provide a framework for the lawful use of personal data (i.e. data about individuals unless anonymous). Category 1 and 2 responders are expected to consider in advance of an emergency the types of relevant personal data that might need to be shared in an emergency as part of their assessment and planning for risks, and how and in what appropriate format that information should be shared. Data sharing is covered in greater detail in the [agreeing data sharing protocols](#) section of this guidance.

## Part two

Considerations for identifying and supporting persons who are vulnerable in an emergency

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## Building networks

**The benefits of a participatory and networked approach to emergency management are well understood.**

For Category 1 and 2 responders, expectations are clear: they must engage as part of the multi-agency LRF to fulfil their duties under the Civil Contingencies Act and associated regulations. This includes contributing relevant data, information and expertise to support the development of appropriate plans for identifying and supporting vulnerable persons.

### Agreeing a lead agency

20. **The LRF should agree an overall lead agency** for the management of vulnerable persons in emergencies. As much of the day-to-day service provision to persons with factors that can lead to increased vulnerability in an emergency is coordinated by departments within local authorities, it will generally be the local authority who is given the lead.
21. The lead agency may differ between LRFs due to different geographical administrative arrangements. LRFs may agree to have the same or different agencies for planning and response activities.

For example:

- In planning, the local authority's emergency planning team could lead on the coordination and production of the multi-agency plan for vulnerable persons (or considerations for vulnerable persons across emergency plans).
- During response, the Strategic Coordinating Group nominates (if not pre-determined through LRF plans) a different agency or team to Chair the Vulnerable Persons/Humanitarian Assistance cell or sub-group, e.g. the local authority's adult social care team or a representative from the Integrated Care Board.
- In any scenario, a shared understanding of the LRFs approach to, and plans for, supporting vulnerable persons is important.

22. Appointment of a lead agency means that one organisation holds responsibility for ensuring considerations for vulnerable persons are maintained in plans, and where applicable, creating and maintaining a consolidated plan. **Other Category 1 and 2 responders must cooperate with the lead agency, providing information and support where required.**
23. When the lead agency for planning is established, the LRF should agree a strategic approach to identifying and supporting vulnerable persons in their area. The Humanitarian Assistance (or other appropriate sub/coordinating) group of the LRF should be tasked to bring together partners and manage the overall planning process for identifying and supporting vulnerable persons.

Where LRFs choose to create a consolidated plan for identifying and supporting vulnerable persons, a suggested minimum content for that plan is set out in [Annex A](#).

24. As part of its role, the lead agency should coordinate the development of a pre-agreed method for gathering, combining and cleaning data. Vulnerable persons' data will come from different sources, chiefly local authorities, health partners and utility companies. There are clear expectations for all Category 1 and 2 responders to proactively share information. In an emergency, time will be wasted and response activities delayed if other agencies are required to request data and information.
25. **The lead agency model does not remove individual organisation responsibilities** for assisting in the identification of vulnerable people, sharing relevant information ahead of an emergency, and providing support in an emergency. This responsibility includes appropriate implementation of PSED and the anticipatory duty around reasonable adjustments.



## Organisations with an interest

26. The involvement of local organisations who hold information on, or can act as a communications channel to vulnerable persons is vital during emergency planning. Some organisations have specific responsibilities towards those with characteristics that mean they are generally more at risk from the impacts of an emergency, and are therefore critical for effective network building, to gain information and understand resource.

### Local Authorities

27. Since the Local Government Act 2000, councils have been responsible for the economic, social, and environmental wellbeing of their areas. The Localism Act 2011, along with more recent changes to the way that public health, welfare, and the police are organised, have given councils and communities more influence over the way their local area is managed. In an emergency, the local authority works with other emergency responders in mitigating the impacts on the local population, taking a leading role in humanitarian assistance and recovery. Local authorities and their constituent departments should work closely with the various other agencies and relevant organisations in all aspects of emergency planning and response.

### Emergency Planning

28. All local authorities have a responsibility to undertake emergency planning. Emergency Planning functions will be appropriate to the local authority area and LRF arrangements. Those involved in emergency planning will be closely involved in planning and identifying the needs of vulnerable people in emergencies.

### Adult Social Care

29. Adult social care covers care and support for older people and working age adults with disabilities, as well as support for their carers. Under the Care Act 2014, local authorities are required to ensure that local residents have a range of high-quality, sustainable and person-centred care options available to them, and that they can access the services that best meet their needs. Local authorities – county, metropolitan, London boroughs and unitary councils – are best placed to understand, plan and provide social care services for the needs of their local populations.
30. Local authorities are responsible for commissioning care, mostly from private and voluntary sector providers, often in conjunction with local NHS providers and organisations. All of these service providers may have a role to play in identifying vulnerable people and providing for their needs in emergencies.
31. Whilst local authorities are best placed to understand and plan for the care needs of their populations, this is not to say that local authorities have details of all those that may be vulnerable in all circumstances. It is important to remember that emergencies affect different people in different ways. Identifying those who may be vulnerable will not be achieved solely through the records of the local authority adult social care department.

### Children's Social Care

32. Under the Children Act 2004, a range of agencies in England, including local authorities, the police and health services, are under a duty to ensure they consider the need to safeguard and promote the welfare of children when carrying out their functions (section 11). A similar duty is placed on other agencies (for example, schools) by other legislation, such as the Education Act 2002. The Children and Social Work Act 2017 amended the Children Act 2004 to establish new local arrangements for safeguarding and promoting the welfare of children.
33. A central feature of the arrangements is that three safeguarding partners – the local authority, NHS Integrated Care Boards (ICBs) and police forces – are responsible for determining how safeguarding arrangements should work in their area for them and relevant agencies. Relevant agencies are those organisations and agencies whose involvement the safeguarding partners consider are required to safeguard and promote the welfare of local children. A list of organisations that meet the criteria to be included as a relevant agency is set out in [The Child Safeguarding Practice Review and Relevant Agency \(England\) Regulations 2018](#).
34. Department for Education guidance<sup>8</sup> on emergency planning and response for education, childcare and children's social care settings sets out that local authorities and children's social care providers should continue to work with local safeguarding partners. This will ensure the continuity and consistency of support throughout any emergency. Local authorities should:
- a. follow the [statutory guidance on promoting the health and wellbeing of looked-after children](#),
  - b. look out for issues that may affect looked-after children's mental health and wellbeing,
  - c. encourage looked-after children to speak to their social worker, carer or other trusted adult about how they are feeling, and
  - d. ensure they get the help and support they need.
35. County, Metropolitan, London Boroughs and Unitary Councils provide children's social care services. District/Borough in two tier systems do not provide children's social care services but do run supportive services, such as housing and community support. Consideration should be given during planning and response to the networks that children's social care departments are likely to have access to. Local authorities hold information regarding children with special educational needs and disabilities, children looked after, children in need, children on child protection plans, and children who are subject to a deprivation of liberty order. Children's social care teams will not hold details of all children and young people that may be vulnerable in all circumstances.

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<sup>8</sup> [Emergency planning and response for education, childcare, and children's social care settings](#) (2023). Department for Education.

## Department for Work and Pensions

36. Department for Work and Pensions (DWP) provide financial support for the most vulnerable in society. As the UK's biggest public service department, it administers the State Pension and a range of working age, disability and ill health benefits to around 20 million claimants and customers. In an emergency, vulnerable persons may require DWP's assistance to access financial support. DWP deliver this assistance through its network of Jobcentres or through telephony and digital tools, as well as co-locating in other premises, such as evacuation centres, during emergencies to support vulnerable people with any queries regarding their claims or with making a new claim to benefit as a result of the event.

## Police and Fire & Rescue Service

37. The police are likely to collate information during an emergency that includes details of survivors and casualties of an incident. Police may hold information on vulnerable persons in their area through their community policing role.
38. Police and the Fire and Rescue Service may have useful real-time intelligence of the effects of the incident on local populations, and therefore who is or may become vulnerable. Partners should consider how police and fire intelligence and data can support multi-agency situational awareness in line with the principles described in the guidance.

## Health

### NHS England and Integrated Care Boards (ICBs)

39. As Category 1 responders under the CCA, the Secretary of State for Health and Social Care, NHS England, ICBs and NHS Trusts have responsibilities as set out in the statutory guidance '*Emergency Preparedness – Guidance on Part 1 of the Civil Contingencies Act 2004, its associated Regulations and non-statutory arrangements*' and supporting NHS England guidance.<sup>9</sup> These organisations have duties from The Equality Act 2010 and The National Health Service Act 2006 in relation to both equality and health inequalities.
40. The Health and Care Act 2022 introduced a range of new duties on NHS bodies in relation to health inequalities. This includes a new duty on health inequalities for ICBs where, during the exercise of its functions, it should have regard to the need to reduce inequalities between persons with respect to their ability to access health services, and, reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services.

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<sup>9</sup> [NHS Emergency Preparedness, Resilience and Response Framework](#) (2022). NHS England.

## Utilities

41. Utilities providers, as Category 2 responders, must collaborate with other local partners, such as local authorities and health authorities to establish how and when they can share, as far as possible, information regarding vulnerable customers.

### Water

42. Under the Security and Emergency Measures Direction (2022) (section 4.4.d), water companies are required to identify and prioritise vulnerable customers. This is supported by Defra's supplementary Emergency Planning Guidance which specifies water companies follow Ofwat's guidance for maintaining up-to-date Priority Services Registers (PSR). These plans must also account for transient vulnerabilities and customers that are not registered on the PSR.
43. Emergency plans must ensure a rapid process to identify vulnerable customers and the implementation of appropriate provisions. This includes procedures for rapidly scaling-up these services, with consideration for customers that self-identify as vulnerable during an event, and the increased quantities of water needed by some vulnerable customers.

### Gas and Electricity

44. Gas and Electricity Suppliers have a licence obligation to establish and maintain a Priority Services Register (PSR) of its domestic customers, who, due to their personal characteristics or otherwise being in a vulnerable situation, may require priority services. While industry parties should be identifying these customers during the course of their interactions and offering to add them to the relevant PSRs, it is possible that not all eligible customers will be on a PSR. This could be for a number of reasons including that the customer does not consider themselves as vulnerable.

#### Electricity

- a. Distribution Network Operators (DNOs) have a licence obligation to establish and maintain a PSR, including the criteria for a consumer to be eligible for the PSR. This licence also sets out the requirements placed on DNOs regarding treatment of those who are on the PSR. These include giving customers information about what to do in the event of an interruption to their electricity supply, providing PSR customers with information ahead of any planned interruption, and ensuring in the case of any unplanned interruptions that PSR customers are informed of when supply will be restored and the help that may be available to them. This licence obligation also requires DNOs to share their PSR list with both electricity suppliers and gas transporters.

#### Gas

- b. The Gas Transporter Licence mirrors much of what is in the Electricity Distribution Licence. Overall, most PSR arrangements mirror each other in overall obligations: providing information primarily and sharing information.

### Liquid Petroleum Gas and Heating Oil

45. The respective trade associations, Liquid Gas UK (LPG) and UK & Ireland Fuel Distributors Association (HO), have customer charters in place which members of the trade associations have signed up to. In the event of shortages in the supply of off grid gas fuels, the respective industries would prioritise deliveries to their most vulnerable customers and would take appropriate steps to ensure fuel availability to those aged 75 or older and those chronically ill or registered disabled. Member companies of the respective trade associations will also consider temporary extenuating circumstances which may warrant priority delivery treatment (such as pregnancy and children under the age of 2). Companies who supply bulk LPG and are LGUK members agree to abide to the principles set out in the Vulnerable People's Protocol. This is a non-legally binding customer charter that the industry strives to abide by.

### Telecommunications

46. Ofcom's General Conditions of Entitlement<sup>10</sup> (part C5) states that communication providers must establish, publish and comply with clear and effective policies and procedures for the fair and appropriate treatment of Consumers whose circumstances may make them vulnerable. Policies and procedures must cover how information on vulnerable consumers is recorded and how channels of communication are managed. Other requirements include the need to offer an Emergency Video Relay Service as an alternative way to contact the emergency services and to provide a priority fault repair service to those end-users with a disability who would have need of an urgent repair.
47. General Condition A3.2(b) states that providers must "take all necessary measures" to ensure "uninterrupted access to Emergency Organisations as part of any Publicly Available Telephone Services offered". In 2018, Ofcom issued guidance<sup>11</sup> stating that providers must provide customers with access to at least one solution, for a minimum of one hour, that enables access to emergency organisations in the event of a power cut. Any solution must be made available free of charge to customers who providers determine are reliant on their landline to make emergency calls during a power cut.

### Civil Nuclear

48. There are existing requirements for the identification of vulnerable persons under regulations for civil nuclear sites. The Radiation (Emergency Preparedness and Public Information) Regulations 2019, include: Regulation 8(1):

The local authority must determine the detailed emergency planning zone on the basis of the operator's recommendation made under (paragraph 2) of Schedule 4 and may extend that area in consideration of—

- (a) local geographic, demographic and practical implementation issues;

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<sup>10</sup> [General Conditions of Entitlement](#), Ofcom.

<sup>11</sup> [Protecting access to emergency organisations when there is a power cut at the customer's premises](#) (2018). Ofcom.

- (b) the need to avoid, where practicable, the bisection of local communities; and
- (c) the inclusion of vulnerable groups immediately adjacent to the area proposed by the operator.

49. The regulations and supporting guidance<sup>12</sup> provide further detail on expectations for the preparedness for managing vulnerable groups during emergencies.

### Educational and residential settings

50. As all children are less able to help themselves in the circumstances of an emergency, they should be considered vulnerable, especially those under 5. Some children have additional vulnerabilities that require special consideration within the context of an emergency, e.g. certain types of disability or health conditions. These children may attend a mainstream education or a specialist setting.
51. Responsibility for a child's welfare ordinarily lies with their parent, or other adult with parental responsibility or with whom they usually live. Responsibility for the safety of children while in an education or residential setting lies with the setting. Guidance from the Department for Education<sup>13</sup> sets out expectations and leading practice for emergency planning and response in education and childcare setting.

#### En route to/from educational settings

52. Some children and young people have their travel to and from their education setting arranged by their local authority. Some education settings also arrange travel for their pupils/students. Depending on the age and vulnerability of the children/young people concerned, the adults who are responsible for them while travelling (e.g. the driver, passenger assistant) may need to remain responsible for them until relieved of that responsibility by another suitable adult e.g. a parent, the emergency services, or staff from the education setting.
- a. The local authority or education setting (whichever has arranged the travel) should ensure that adults responsible for children and/or young people on transport know what action to take in an emergency, and who to notify of the emergency/their situation, for example the driver's employer (the transport provider), the local authority, or the education setting.

### The role of voluntary, community and faith organisations

53. Voluntary, community and faith organisations can often access certain sections of the community who, for many reasons, do not have regular formal contact with local authorities and other authority-representing organisations. Responders should engage with non-statutory partners in the development of plans and planned activity, integrating their capabilities and capacities into emergency management, as

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<sup>12</sup> Radiation (Emergency Preparedness and Public Information) Regulations 2019 (REPPiR), [the Approved Code of Practice](#). Office for Nuclear Regulation.

<sup>13</sup> [Emergency planning and response for education, childcare, and children's social care settings](#) (2023). Department for Education.

appropriate. Responders are encouraged to consider the role of voluntary, community-representative and faith organisations in advising on the creation of appropriate and effective inclusive communications for different groups of people.

54. The involvement of regional and local community organisations with an interest in vulnerable persons is vital during emergency planning. Civil society and faith organisations can provide routes for engagement and support with vulnerable persons. Effective network building and information sharing with non-statutory partners helps local responders to better understand how impacts from emergencies can affect local populations.
55. The voluntary sector contribution to emergency planning and response is large and diverse, offering a range of skills and expertise. Emergency Preparedness guidance on the role of the voluntary sector<sup>14</sup> and the Community Resilience Development Framework<sup>15</sup> provide advice on the capabilities that voluntary organisations can offer, and how to engage with them for the purposes of emergency planning and response.

#### Spontaneous Community Response

56. Spontaneous community support groups are common in emergencies. Local Resilience Forums are advised<sup>16</sup> to have an approach for advising and directing spontaneous volunteers and offers of support. As part of planning for identifying and supporting vulnerable persons, the LRF should identify contacts within their individual agencies who work with communities as part of business as usual activities, for example community development staff and police community support officers, and who have the skills and networks to quickly link into spontaneous community response efforts during an emergency.
57. Planners should consider in advance how they recognise the emergence of, and subsequently engage with, community support and mutual aid groups, including those that can provide information about the impacts of emergencies on specific communities. Technology allows for the rapid creation of these groups by campaigners and community organisers. These groups can offer valuable input and their potential to support affected individuals and communities during times of crisis should be understood.

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<sup>14</sup> Emergency Preparedness (2011) [Chapter 14 The role of the voluntary sector](#). Cabinet Office.

<sup>15</sup> [Community Resilience Development Framework](#) (2019). Cabinet Office.

<sup>16</sup> [Planning the coordination of spontaneous volunteers](#) (2019). Cabinet Office.



## Identifying vulnerabilities and vulnerable persons

Identifying, planning and providing for the needs of vulnerable persons will involve a large number of partners, bringing together a large amount of complicated and changing information. The process for identifying vulnerabilities and vulnerable persons will be resource intensive. Planning helps to alleviate the pressure of bringing information together during an emergency. Responders should invest time in developing their approach as part of their planning cycle.

**Category 1 and 2 responders are expected to take part in the process for identifying vulnerable persons and their needs, contributing relevant information and expertise.**

### Principles for identifying vulnerable persons and vulnerabilities

58. In order for emergency plans to give special consideration to vulnerable persons, as required by statutory guidance, plans must be able to distinguish this group from the self-reliant. While all people caught up in an emergency could be (and in some circumstances will be) defined as vulnerable due to their proximity to the event, planning and response arrangements should focus on those who are assessed as needing external assistance, support, or accommodations to become safe.

59. **Processes for identifying vulnerable persons should be reviewed and updated at regular intervals agreed by the LRF, at least yearly, and after any significant learning has been identified from emergency response or exercising.** The review should take account of the changing nature of demographics and determinants of vulnerability within an area.

### Compiling lists of vulnerability data holders

60. Compiling a list of data holders is a useful approach to support the identification of vulnerable persons. The list (sometimes referred to as the list of lists approach) is not a central list of vulnerable persons, but lists of partners and organisations and their up-to-date contact details, that can be used to gather relevant information about vulnerable persons in the event of an emergency. Lists of contacts should be regularly reviewed and kept up-to-date, allowing the response to vulnerable persons to be activated as soon as required.

61. It may be unrealistic for many LRFs to have any other approach than compiling a list of data holders, as data will change too frequently to have a single compiled list of vulnerable persons.



62. Within each multi-agency partnership, the building of lists will likely vary, but could include:

- a. **List of planning partners.** Those key organisations who hold and maintain the data and information on vulnerable persons, with an agreement to provide it in the planning and response to an emergency.

[Annex B](#) sets out a non-exhaustive list of partners who should be involved in the process of planning to meet the needs of vulnerable persons.

- b. **List of vulnerable premises.** Identifying premises likely to require additional support in business continuity planning, or specific support during the response to an emergency.

A non-exhaustive list of potentially vulnerable premises is at [Annex C](#).

- c. **List of types of vulnerability.** Identifying the potential range of vulnerable persons and groups with specific needs within a local area in advance of an emergency will assist with planning and response.

Factors that can increase vulnerability to an emergency are provided at [Table 1](#), including a summary of organisations who may be able to support the identification of, or communication with, vulnerable persons.

63. LRFs should consider how to communicate to response partners where lists of information are held and how the information can be accessed. ResilienceDirect<sup>17</sup> provides a secure web service for Category 1 and 2 emergency planners and responders to host and share information.

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<sup>17</sup> ResilienceDirect is an auditable service, from which emergency planners and responders can monitor and review access to data. To support multi-agency sharing of information, emergency practitioners should use ResilienceDirect to work together – across geographical and organisational boundaries – during the preparation, response and recovery phases of an event or emergency. The service enables organisations to undertake planning and exercising for and managing live incidents leading to enhanced multi-agency working practices, ensuring that information is readily and consistently available to users. Group Administrators editors are responsible for managing their organisational group membership and pages.

## Identifying types of vulnerability

64. During **planning**, as part of the approach to support the identification of vulnerable persons, the LRF should consider:

- a. **Each agency's definition of 'vulnerable'**, which is likely aligned to the services it offers. It is an important first step for partners to understand the different definitions used, rather than try to agree on a universal definition for the purposes of planning and data sharing, and recognising the context-specific nature of vulnerability in emergency planning.
- b. **Impacts from emergencies in their area, which might cause someone to become vulnerable or require support.** Impacts should be informed by the work of the LRF Risk Assessment Working Group. Development and communication of the risk assessment should consider groups who might be adversely affected by specific risks materialising, including, but not limited to, whether known vulnerable groups have been considered adequately in terms of the risks impacts, and the mitigating actions required.<sup>18</sup>
- c. **Individuals known to existing service providers through priority service registers and databases.** Others may be identifiable as they live in, or are present at, potentially vulnerable premises such as adult and children's social care settings, wider healthcare facilities, independent living residencies, special schools and specialist post-16 institutions. There will be those who, for a variety of reasons, are more difficult to identify and where engagement with a wide range of non-statutory and community partners can support outreach and communications activities and provide routes to access.
- d. **The full range of multi-agency data available from partners to support identification and planning.** Expectations should be set about how data will be shared and made available during emergency response. Working with aggregate data for the purposes of planning will generally mean there are limitations on the level of detail that can be shared, however, the LRF can use partner data to provide an indicative range for the prevalence of at-risk populations and relevant community characteristics within local geographic areas.
- e. **Types of support that might be required** and how that support will meet the needs of vulnerable persons in an emergency.

General and specific support considerations are listed at [Annex D](#). It also shows how the main categories listed in Table 1 can be further broken down to identify groups within each that have specific needs.

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<sup>18</sup> The government is committed to improving the assessment of risk impacts to vulnerable persons. This is addressed in the National Security Risk Assessment (NSRA) methodology, where this is already an impact indicator. Cabinet Office will continue to explore improvements to the quality of assessment in this area, including consulting the NSRA expert group on vulnerable people.

- f. **Its approach for communicating with vulnerable persons before, during and after an emergency.** The approach should include considerations for how perspectives can be gained from communities likely to be impacted by emergencies, to help inform planning. To support this, LRFs should identify local organisations who engage with vulnerable persons, including voluntary and community sector organisations, faith groups, advocacy groups, residents' interest groups and community resilience groups.

Principles for [communicating with vulnerable persons](#) are set out in further detail in part three of this guidance.

65. Being in one of the categories in Table 1 does not automatically denote vulnerability and stereotyping should be avoided. Whether someone is vulnerable to the impacts of an emergency will largely depend on:

- a. **The type of emergency.** Plans should be tailored and proportionate to the risks faced by the community, as identified in the LRFs Community Risk Register.
- b. **The type of response required.** A response to an emergency which requires an evacuation is likely to determine a higher number of vulnerable people compared to a response which requires sheltering in situ.
- c. **The availability of support.** This refers to support that individuals normally receive from family, friends, carers and other social networks, which can mitigate the impacts of an emergency.

## Identification of persons who may pose a risk to responders

66. The safety of responders and those supporting vulnerable persons is important. Consideration should be given to the identification of vulnerable and non-vulnerable persons who may pose a risk or danger to responders or certain responding agencies, including violence towards staff, particularly women and those with protected characteristics.
67. As part of the identification process, the partnership should identify agencies holding information about persons who pose a risk to responders. Agreement should be reached between those agencies before an emergency about where and how information will be brought together and held, e.g. markers on databases against name/property, and how the information will be shared with operational staff.
68. During evacuation to a reception centre or other setting, the protection of responders, operational staff, and other people who may have been evacuated will require consideration and appropriate risk assessment.

## Dynamic risk assessment and MAICs

69. During **response**, the changing nature of an emergency means that responders need to continually assess impacts and apply appropriate control measures. Primary and cascading impacts from emergencies will require consideration as part of dynamic risk assessment processes. **Responders should consider how they will prioritise support to vulnerable persons.** Prioritisation will be dependent on the nature of the emergency and the number of persons considered vulnerable.
70. New information about vulnerable persons must be shared between partners to ensure continued and effective interoperability and for consideration of actions needed to mitigate further impacts to affected and at-risk groups.
71. LRFs should consider the role of the Multi-Agency Information Cell (MAIC) in supporting the management of information related to vulnerable persons. One of the primary roles of the MAIC is to enhance coordination between responders during emergencies, where complex information from agencies requires collation, assessment and dissemination to support joint decision making. The MAIC could provide support to the Vulnerable Persons/Humanitarian Assistance cell/sub-group with specific response tasks, such as providing:
  - a. a mechanism for gathering, processing and disseminating information about vulnerable persons from response partners
  - b. specific data on community characteristics and other population-level data for geographical areas impacted by an incident.
72. A process should be in place for the Chair of the Humanitarian Assistance/Vulnerable Persons cell to provide updates and escalate any issues or requests for resources to

support vulnerable persons to the Tactical Coordinating Group (TCG); this may be through attendance of the Chair of the cell at TCG, or via other locally agreed cell coordination arrangements.

## Scientific and Technical Advice Cells

73. Additionally, during **response or recovery**, the Strategic or Recovery Coordinating Group (S/RCG) could seek to draw additional and coordinated scientific, technical, public health and environmental input through the formation of a scientific and technical advice cell (STAC). STAC activation can provide support in a range of scenarios including, but not limited to, local and national public health emergencies, industrial accidents, flooding and wider environmental emergencies.
74. A primary role of the STAC is to support the strategic group. In relation to the public (and at-risk or vulnerable populations) it may be asked to advise on actions that could be taken to protect the public from harm, including any health, public safety, or environmental implications; effects of mitigation strategies; and likely consequences of evacuation or shelter in place policies.

**Table 1. Identifying vulnerability and communicating through organisations**

This table sets out a **non-exhaustive summary** of potentially contributing factors that can increase vulnerability in the event of an emergency. It outlines the broad organisations who can identify and/or engage with at-risk persons. LRFs should consider additional contributing factors based on their area profile, as well as recent and historic incidents to further refine understanding of vulnerability factors. This table focuses on those who are likely to require additional support to become safe in the event of an emergency.

The table does not focus on wider societal factors that can increase vulnerability. Emergency planners should consider the impact of their plans and policies through Public Sector Equality Duty impact assessments and through the consideration and identification of community-level characteristics, set out in the chapter below.

Contributing factors may intersect, e.g. older people with loss of physical or mental functions. Planners and responders should consider specific support needs where characteristics leading to increased risk overlap.

Contributing factor	Organisation with relevant information	Notes
Physical / mobility impairment	<ul style="list-style-type: none"> <li>Local authorities</li> <li>Health service providers</li> <li>Fire and Rescue Service</li> <li>Utilities providers</li> <li>Adult social and residential care settings</li> <li>Education and residential settings</li> <li>Voluntary organisations</li> </ul>	<p>For example: mobility-aid users (wheelchairs, crutches), or immobile/slow-movers, including being unable to leave their bed, to use stairs, or to leave their home.</p> <p>Local authorities in England have a duty to hold registers detailing voluntarily provided information about children and young people in its area with special educational needs or disability.</p>
Children and young people <i>(see note at the foot of the table)</i>	<ul style="list-style-type: none"> <li>Local authorities</li> <li>Mainstream and special schools</li> <li>Multi-academy trusts and academies</li> <li>Early years premises (crèches/playgroups/nurseries)</li> <li>Further and Higher Education providers (colleges/universities/apprenticeship providers)</li> <li>Childminders</li> <li>Children's social care residential providers</li> <li>Alternative provision settings, including hospital schools</li> <li>Faith-based groups and organisations</li> </ul>	<p>Local authorities hold information about children with special educational needs and disabilities, children looked after, children in need, children on child protection plans, and children who are subject to a deprivation of liberty order.</p> <p>Certain specialist settings may require more attention than others. For example, special schools and specialist post-16 institutions (some of which are residential), alternative provision, children's homes, secure children's homes, supported accommodation, and early years settings will have a higher concentration of particularly vulnerable children.</p>

	<ul style="list-style-type: none"> <li>• Voluntary organisations</li> </ul>	
Older people	<ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Adult social and residential care settings</li> <li>• Health service providers</li> <li>• Voluntary organisations e.g. Age UK</li> <li>• Faith-based groups and organisations</li> <li>• Department for Work and Pensions</li> </ul>	Some older people including those of ill health requiring regular medication and/or medical support equipment. They can also be particularly vulnerable in extreme heat and cold settings.
Mental or cognitive function impairment	<ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Adult social and residential care settings</li> <li>• Health service providers</li> <li>• Utilities providers</li> <li>• Voluntary organisations</li> </ul>	For example: developmental disabilities; clinical psychiatric needs; autism or autistic spectrum disorder; profound and multiple learning disability; people with dementia.
Sensory impairment / loss	<ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Health service providers</li> <li>• Adult social and residential care settings</li> <li>• Utilities providers</li> <li>• Voluntary organisations</li> </ul>	<p>For example: visual or hearing impairments; speech and other communication impairment.</p> <p>Local authorities will hold additional information on persons with sensory impairments through e.g. sight loss registers.</p> <p>People may have varying degrees of sensory loss that impact their ability to respond in an emergency situation and not all adjustments or levels of support will be the same.</p>
Individuals supported by local or health authorities	<ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Health service provider</li> <li>• Social care providers</li> </ul>	Local authorities and health providers will hold additional information on persons who may require additional support with day-to-day activities e.g. local authority assisted bin collection.
Digitally excluded and socially isolated	<ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Health and social care providers</li> <li>• Voluntary and community organisations</li> <li>• Faith-based groups and organisations</li> </ul>	<p>Social isolation, especially among older people, those with some mental health conditions, or those in marginalised groups, can impact support needs.</p> <p>People who are digitally excluded face challenges in accessing emergency updates, information, or support services. Shifts to digital engagement risks excluding some older adults, disabled people, and others - who may find engagement through this route challenging.</p>
Acute, chronic or terminal medical conditions requiring additional support	<ul style="list-style-type: none"> <li>• Health service providers, covering primary, secondary, community and charitable care support</li> <li>• Local authorities</li> <li>• Adult social and residential care settings</li> <li>• Utilities providers</li> <li>• Voluntary and community organisations</li> </ul>	<p>Encompassing:</p> <ul style="list-style-type: none"> <li>• those requiring regular medical attention (e.g. oxygen or a specialist supply of medicines),</li> <li>• those reliant on regular use of at-home or in-care setting medical devices,</li> <li>• those with chronic / terminal illnesses that may be exacerbated or destabilised as a result of an evacuation or without regular access to medication, particularly where storage or administration considerations are needed (e.g. temperature control or access to sterile equipment).</li> </ul>

Carers and individuals cared for by a partner, relative or friend	<ul style="list-style-type: none"> <li>Local authorities</li> <li>Health service providers, particularly primary and community</li> <li>Utilities</li> <li>Voluntary and community organisations, including faith-based groups</li> </ul>	Including unpaid carers, who may be directly impacted by an emergency or may need to provide in-person or at-a-distance support to a person impacted by emergency. Carers require information both to support themselves and the people they care for, and they can become at-risk when information specific to their circumstances as a carer is not available i.e. where and how to access additional support.
Those in sheltered housing and on the periphery of adult social care, including those who are homeless or rough sleeping	<ul style="list-style-type: none"> <li>Local authorities, including through commissioned support services</li> <li>Non-LA commissioned support services and schemes</li> <li>Domestic abuse refuge services</li> <li>Hostels and shelters</li> <li>Voluntary and community organisations</li> <li>Department for Work and Pensions</li> </ul>	<p>A potentially large group - including those in supported housing, specialist retirement housing for older, disabled and other vulnerable people including victims of domestic abuse, and people at risk of homelessness and rough sleeping - which can also include:</p> <ul style="list-style-type: none"> <li>care leavers,</li> <li>homeless young people,</li> <li>homeless families,</li> <li>prison leavers,</li> <li>people struggling with substance misuse,</li> <li>veterans,</li> <li>people with mental health issues,</li> <li>people with multiple complex needs,</li> <li>victims of domestic abuse, who may struggle to access emergency services or safe spaces due to the risk of further harm, fear of identification, or lack of family and social support.</li> </ul> <p>Homeless and rough sleepers are particularly vulnerable to extreme weather events as they may have poor access to adequate shelter, and/or basic supplies such as clean water.</p>
Pregnant women	<ul style="list-style-type: none"> <li>Health service providers, particularly primary and community healthcare providers</li> <li>Department for Work and Pensions</li> </ul>	Specific needs arising for pregnant women and new mothers and their children, both in terms of health needs and the provision of safe spaces / maternity care.
Minority language speakers or those with other communication needs	<ul style="list-style-type: none"> <li>Local authorities</li> <li>Health service providers</li> <li>Faith organisations</li> <li>Voluntary and community organisations</li> <li>Department for Work and Pensions</li> </ul>	Including the D/deaf community.
Asylum seekers and migrants	<ul style="list-style-type: none"> <li>Local authorities</li> <li>Strategic Migration Partnerships</li> <li>Asylum centres</li> <li>Faith organisations</li> <li>Voluntary and community organisations</li> <li>Department for Work and Pensions</li> </ul>	Including issues related to barriers in communication and accessibility of information; social isolation; unfamiliarity with service providers and emergency systems; and, legal and administrative barriers i.e. concerns about their immigration status might deter migrants from seeking help or engaging with authorities during emergencies.



Telecare service users	<p>Telecare services are commissioned and provided by a range of organisations (the majority of which are local authorities). The following organisations will hold information about service users:</p> <ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Private telecare service providers</li> <li>• Telecommunications providers</li> <li>• Charities</li> <li>• Housing providers</li> </ul>	<p>There are ~2million telecare users in England. Telecare helps some people, such as the elderly or those with a disability, live independently at home for longer. The care needs of individual telecare users varies considerably.</p> <p>If telecare services fail to work as expected, there could be a range of adverse effects for service users, some of which could be fatal. This could result in increased demand on emergency, secondary, and more formal care services.</p> <p>The migration of analogue to digital telephone lines ('PSTN migration') means that telecare services will be at increased risk of power outages. Digital phone lines will not work in a power cut without a source of backup, meaning that vulnerable individuals may be left without a working telecare device. Some newer telecare devices make use of mobile (GSM) connectivity, this provides some resilience to power outages in the home, but the devices are still reliant on mobile network infrastructure functioning so may not work in the event of a regional power outage.</p>
Tourists	<ul style="list-style-type: none"> <li>• Transport hubs</li> <li>• Travel companies</li> <li>• Hoteliers</li> </ul>	<p>Tourism partnerships and networks who understand local tourist areas and who may have links with the tourism industry may be able to provide additional advice to responders, to help inform and target their response activities and communications.</p>
Travelling community	<ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Police liaison</li> <li>• Gypsy and Traveller charities (limited in coverage and capacity: LRFs should consider engaging across a regional level)</li> </ul>	<p>Many Local Authority site residents are elderly and/or disproportionately include disabled people or those with chronic illnesses. Location and isolation mean that sites may be at higher risk during some emergencies. Local Authority sites are often managed separately from housing and often by County Councils; site manager staff may not be linked in through the expected channels. Information held by Local Authorities and Police about site locations should be built into resilience planning.</p> <p>Many of the 300,000 Gypsies and Travellers in housing or in caravans will travel in touring caravans at some point in the year, for work, family visits, holidays and fairs. They are often refused entry by caravan parks and so may resort to unauthorised camping at short notice. Marginalisation and prejudice mean that trust in mainstream services is low.</p>
Isolated and cut off properties and communities	<ul style="list-style-type: none"> <li>• Local authorities</li> <li>• Utilities</li> <li>• Community groups</li> </ul>	<p>Living in properties and communities at risk of isolation or being cut off can contribute to vulnerability and exacerbate impacts in emergencies due to a combination of:</p> <ul style="list-style-type: none"> <li>• limited access to emergency services,</li> <li>• communication barriers and limited access to reliable communication networks,</li> <li>• social isolation,</li> <li>• transportation and evacuation challenges,</li> <li>• infrastructure vulnerabilities, and</li> <li>• limitations on self-reliance, where limited resources and specialised skills may not be sufficient to cope with large-scale emergencies or prolonged disruptions.</li> </ul>

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### **A note on children and young people**

Given their reliance on adults for the provision of their needs, all children and young people are “less able to help themselves”, especially those under 5, and are therefore vulnerable in an emergency. A pragmatic approach should be taken to identify children and young people considered most vulnerable in an emergency, in line with the principles outlined in the section above.

In the context of ongoing recovery and safeguarding, other children and young people may also be considered vulnerable. Multiple sources of evidence show that a lack of schooling increases inequalities, reduces the life chances of children and can exacerbate physical and mental health issues, therefore in all circumstances vulnerable children and young people should be prioritised for face-to-face education and childcare.

Department for Education guidance<sup>19</sup> explains which vulnerable children and young people may need prioritised face-to-face education provision during an emergency. While the majority of children can be supported at home, some will have particularly complex needs requiring residential provision organised by the state. Contingency planning should ensure that residential provision (for example children’s homes and residential special schools or residential specialist post-16 institutions) should be prioritised for support where necessary.

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<sup>19</sup> [Vulnerable children and young people, and critical workers](#) (2023) Department for Education.

## Identifying community characteristics and analysing population-level data and information

75. During the **risk assessment and preparation phases**, the LRF should consider the relevant characteristics of the community and how wider determinants could impact the local population's ability to prepare for, respond to, and recover from an emergency. Identifying and evaluating community characteristics can help reach an informed understanding of the likely risk and resilience of communities. Characteristics that could affect a community's risk and resilience include:

- a. **Social and demographic contexts**, such as, socioeconomic status; gender; age; changes in demographics; health inequalities and health determinants; disability; ethnicity; religious, cultural and language factors.
- b. **Business and economic contexts** of the area, including interdependencies between service providers and users; levels of tourism and other transient populations; numbers of economically vulnerable people and those in insecure work.
- c. **Infrastructural factors** include impacts on providers of essential services, critical supply networks and health and finance hubs. Potential denial of access to physical assets and essential infrastructure, including transport routes and accessibility considerations. The quality of housing stock, including adequate housing that provides shelter from extreme weather events, particularly cold and heat events.
- d. **Environmental factors** and local vulnerabilities, such as poor coastal or river defences; differences in rural and urban locations and their populations.
- e. **Social and community networks**, including prevalence and reach of voluntary and community groups; barriers to public inclusion in consultations on emergency planning; access to shared resources.

## Using data to develop area profiles

76. The LRF should use Census and other appropriate data to assist responders in understanding their community profiles and demographics. Examples of appropriate datasets include, but are not limited to, the latest Census (2021), Indices of Multiple Deprivation, and data collected and held by local authorities. There are various subnational data and analysis tools that can be used to search, access, compare and download relevant data to inform local area profiles.

[Annex F](#) provides examples of publicly available data sets and analysis tools that can be used in LRFs to support the development of area profiles. The data sets are provided across six domains: Census; Financial; Environmental/Housing; Health; Social; Infrastructure/Transport.

77. The Office for National Statistics, including the Data Science Campus have an ongoing project to develop more spatially granular, more timely and more coherent statistics that are easily accessible in one place in line with the Government Statistical Service subnational data strategy. This project is being delivered in collaboration with the Ministry of Housing, Communities and Local Government. This means that some of the data sources that have been listed at [Annex F](#) will likely be continually updated and developed over time.

78. Responders need to be aware of the challenges of using data sets, which can include:

<b>Aggregate data</b>	Published statistics are usually aggregated and so cannot be used to identify individual persons or households with vulnerabilities. They can however be used to inform area profiles and indicate the prevalence of vulnerability within local areas.
<b>Geography</b>	<p>There are a range of different statistical, administrative, and other types of geographies which do not always easily map to each other. The ONS provides an overview of the different geographies at which official statistics are available, and a more detailed guide. For certain data, aggregating local authorities to produce the region will be sufficient and straightforward, whereas others will require mapping between the different geographies.</p> <p>The <a href="#">ONS Open Geography Portal</a> provides downloadable lookups for mapping between geographies. For training and more detailed information, the online <a href="#">Geography for Statistics Training</a> provides courses and guidance on using geography and statistics. Furthermore, the Analysis Function developed a tool to generate accessible spreadsheets for geography data. The ONS also published guidance on building 2021 Census estimates from output areas and producing 2021 population weighted centroids.</p>
<b>Data types</b>	<p>Official statistics published by Government departments such as the Office for National Statistics are based on two main sources – data gathered from statistical surveys, including the Census, and data extracted from other organisations' administrative or management systems. These administrative and management data will have been initially collected for purposes such as operational monitoring and analysis, policy development, analysis of the effect of policy changes, forecasting, resource allocation, answering Parliamentary Questions and Freedom of Information requests.</p> <p>A further subset of administrative data used is open data location or geospatial data, which includes data such as Ordnance Survey, satellite images, maps and transport timetables. It is important to read and consider associated methodology and notation associated with data sources to ensure they are being used in an appropriate manner.</p>
<b>Local authority data</b>	Local authorities and other levels of local government hold data that can be used to provide an up-to-date insight on specific vulnerabilities within areas. For instance, local authorities hold data on adult and children's social care provision, free school meal eligibility, benefit claimants, people living in social housing and council tax payments that can be used to identify vulnerable households or specific areas with higher or lower prevalence of vulnerabilities.
<b>Data coverage</b>	Some datasets do not cover the whole of the UK due to the devolved nature of some policy areas. Analysts across the Government Statistical Service (GSS) are working together to improve the coherence of statistics across the UK.

## Agreeing data sharing protocols

**Meeting the needs of vulnerable persons in emergencies can only be done effectively through the proper sharing of data.**

Trying to agree data sharing plans in an emergency is time consuming and could lead to worse public health and safety outcomes, particularly for vulnerable persons. It is expected that Category 1 and 2 responders, as part of the multi-agency partnership, plan ahead and consider their approach to data and information sharing, preventing delays when an emergency happens.

The starting point for emergency responders should be to consider the risks and potential harm that may arise if they do not share information. When in doubt, organisations should seek advice from their internal Data Protection Teams.

79. The following section is a summary of data sharing guidance. It does not introduce new policy or legal requirements. It seeks to provide a clear and understandable overview of the legislative framework surrounding personal data to empower Category 1 and 2 responders to handle and share personal data confidently in the planning for, and response to, emergencies.
80. Responders may have concerns about data protection or be reluctant to share certain types of personal data and information. The misinterpretation of data protection laws by some agencies and individuals may create a reluctance in sharing details of vulnerable persons ahead of an incident being declared, or even during the response to an emergency. This should not be the case.

Detailed guidance on data protection compliance in relation to emergency planning can be found in [\*Data Sharing in Emergency Preparedness, Response and Recovery\*](#), available to responders on ResilienceDirect.

## UK General Data Protection Regulation (UK GDPR) and the Data Protection Act (2018)

81. The principal components of the UK data protection framework are the UK General Data Protection Regulation, which is supplemented by the Data Protection Act 2018. This framework sets out the rules for the processing of personal data (i.e. data about individuals, unless anonymous).
82. The DPA and UK GDPR do not prevent the sharing of data when it is appropriate to do so. This includes the data and personal information of vulnerable persons. During or in the imminent face of emergencies, it might be more harmful not to share data than to share it. Responders should factor in the risks involved in not sharing the

data. In particular, Article 6(1)(d) UK GDPR provides a lawful basis for sharing personal data where it is necessary to protect the vital interests (e.g. life, safety) of individuals. In addition, paragraph 30 of Schedule 1 to the Data Protection Act 2018 provides a lawful basis for sharing special category data (e.g. health data) in those circumstances.<sup>20</sup>

## Sharing personal data in an emergency

83. In a serious emergency (e.g. where there is a risk of serious harm to human life) it should be assumed that it is lawful to share personal data if it is necessary to do so to respond to that emergency. The Information Commissioner is the independent data protection regulator. The Information Commissioner's [guidance on data sharing](#) makes clear that personal data can be shared in an emergency:

***“In an emergency you should go ahead and share data as is necessary and proportionate.”***

84. During an emergency, it may not always be necessary to share or obtain the specific details of the vulnerability.

For example:

- If organisation A (local authority adult social services) believes that an identified group of people are vulnerable, then organisation B (local authority emergency planning unit) will sometimes only need the name and location details of the individuals. Where the prioritisation of services requires additional information about the nature of vulnerabilities, there may be an unavoidable need to share this information.

85. In the aftermath of an emergency, Category 1 and 2 responders should consult with data protection and legal experts as necessary to ensure that data has been handled appropriately, and to make any decisions about the future disposition of any data shared during the emergency.

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<sup>20</sup> The Data (Use and Access) Bill currently before Parliament [as of April 2025] will create a new lawful ground in Article 6 of the UK GDPR, which will also support the sharing of personal data in an emergency situation. The new ground, to be added at new Article 6(1)(ea) of the UK GDPR, will permit processing by non-public bodies where necessary for a specified 'recognised legitimate interest'. Processing which is necessary for the purposes of responding to an emergency is one such interest. This guidance will be updated when the new lawful ground comes into force.

## Sharing personal data as part of planning for an emergency

86. During the planning stages, agencies should share less detailed information, for example an indication of the type and indicative numbers of vulnerabilities that may exist in certain geographic areas. It may be enough for planning purposes to know an informed range for the numbers of people within a certain geographic area that require specific support. This can allow preliminary allocation of resources. The details of who those people are may only need to be shared when an incident is imminent.
87. Category 1 and 2 responders are expected to consider in advance of an emergency the types of relevant data that might need to be shared in an emergency as part of their assessment and planning for risks, and how and in what appropriate format that information should be shared.
88. A mechanism for this already exists in the form of a Data Sharing Agreement, which is a data protection tool. Data Sharing Agreements are typically used where one organisation ('data controller') is sharing personal data with another in an ongoing or repeated way. A Data Sharing Agreement can help to facilitate the sharing of data for planning purposes. A Data Sharing Agreement might also be helpful in allaying concerns from organisations who are reluctant to share personal data in an emergency.
89. Category 1 and 2 responders are strongly encouraged to have pre-agreed Data Sharing Agreements between responding agencies of the LRF. The geographical distribution of some responders or agencies across two or more LRFs is not a legitimate basis for refusal to participate in multiple LRF agreements. **The absence of Data Sharing Agreements does not mean that information cannot be shared.**
90. The Information Commissioner [provides guidance on Data Sharing Agreements](#). The guidance recommends that a Data Sharing Agreement covers the following:
- An explanation of the purpose of the data sharing
  - A description of the organisations involved in the data sharing
  - The roles, in data protection terms, of the participating organisations (e.g. controllers, joint controllers)
  - The items of personal data that will be shared
  - The Article 6 UK GDPR lawful basis relied upon for the sharing (different organisations may rely on different lawful bases)
  - Whether any special category data, or criminal offence data, will be shared, and which condition in Schedule 1 to the Data Protection Act 2018 is being relied upon.
  - How individual rights requests will be handled.
  - The information governance arrangements that should be in place to ensure all parties act in accordance with the Data Sharing Agreement.



91. In preparing a Data Sharing Agreement you should seek advice from your data protection team and Data Protection Officer.

To help you determine the lawful basis for information and sharing processing, the ICO has developed an [interactive tool](#) to support considerations around lawful data sharing.

92. **All organisations should agree what level of information will be shared and when**, on the declaration of an emergency. For example, prior to an emergency, an estimate of numbers might be shared. During a developing emergency, accurate numbers for at risk areas might be shared. In the event of assistance being required or an evacuation, specific details of individuals and their needs might be shared. Sharing contact details allows agencies to proactively reach people who may welcome help, and allows the individual to choose whether or not to take up offers of assistance.

#### **Case study: Sussex Resilience Forum – data sharing arrangements**

##### ***Ensuring effective data sharing about vulnerable people, during an emergency***

In February 2022, Storm Eunice and Storm Franklin caused widespread power disruption across parts of the UK. In Sussex, loss of power led to water outages at over 100 sites across the county, causing issues with intermittent or complete loss of supply. Some properties were without water for over a week.

As part of the response debrief, a recommendation was made to establish an improved process for responsible, secure data sharing between multi-agency partners during the response to an emergency.

A working group was established within Sussex Resilience Forum to develop the process. Following discussion with other Local Resilience Forums about their own approach to data sharing, and after extensive consultation with partners across Sussex, including local authorities, NHS services, and utility companies, a new process for data sharing data was developed. Partners agreed that ResilienceDirect, as a secure and accessible platform, should be used for the purposes of data sharing.

In December 2022, some 20,000 properties in Sussex were left without water before Christmas, due to widespread water supply issues caused by rapid freeze and thaw. The new vulnerable people data-sharing process was activated for the response phase of the incident. The process was reviewed post-incident. Additional learning was identified and suggested improvements were shared with partners at a workshop looking at impacts to at-risk and vulnerable people.

Sussex's *Vulnerable People Data Sharing Standard Operating Procedure* (SOP) was again activated during preparations for Storm Ciarán in October 2023. Collaborative working on ResilienceDirect allowed partners to be ready to engage with data sharing, as required. The Data Sharing SOP is now fully embedded into Sussex Resilience Forum response procedures. It is available to other Local Resilience Forums who would like to share learning.



## Information sharing under the Civil Contingencies Act 2004

93. The Civil Contingencies Act (CCA) 2004 provides the legislative framework for civil protection in the UK. Legal power to share information and data in certain circumstances is found in secondary legislation made under the CCA 2004,<sup>21</sup> which creates an information-sharing regime for Category 1 and 2 responders as defined in Schedule 1 to the Act.
94. Additional details about the information-sharing regime for Category 1 and 2 responders can be found in [\*Data Sharing in Emergency Preparedness, Response and Recovery\*](#), available to responders on ResilienceDirect

## Additional considerations to support data sharing arrangements

### Reviewing data management procedures

95. The LRFs Humanitarian Assistance (HA) (or other related sub-group) group should be responsible for regularly reviewing the management of data and information sharing protocols and procedures in respect of vulnerable persons. The review process should include representation from all Category 1 and 2 responders, and other relevant non-statutory partners as required.

### Accuracy of organisation-level data

96. It is the responsibility of individual agencies to make sure that their data is as accurate as possible, and suitable for sharing when requested. Data Sharing Agreements (see above) can help with identifying any potential blockages, uncertainties or ambiguities in advance. Where access to databases is provided to partner agencies, or where inaccuracies are found in data, each organisation has a responsibility to highlight errors for correction by the data owner.

### Training and exercising

97. Multi-agency training and exercising activity should be undertaken to validate and improve planning and response. Procedures to access data, particularly during out of hours, should be included as part of exercising, helping to surface barriers and issues that require consideration by the LRF.
98. Non-statutory partners, including voluntary, community and faith sector representatives, should be invited to participate in training, exercising and debriefs, as appropriate. The inclusion of wider partners in these activities will help build networks and increase understanding of available support capacities and capabilities.

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<sup>21</sup> [Civil Contingencies Act 2004 \(Contingency Planning\) Regulations 2005](#). Regulations 45 to 54.

### Materials to support LRF or single agency exercise activity

The Cabinet Office has developed a set of 'off the shelf' baseline exercise materials, to support responders in exercising their approach to vulnerable person planning.

The materials have been co-designed with partners from national government and local agencies. The materials are intended to allow local responders (in a single or multi-agency setting) to consider their planning for vulnerable persons and improve preparedness to respond effectively to the needs of vulnerable persons in an emergency.

The exercise can be tailored to local needs and instructions are provided for setting up, planning, delivery, and post-exercise activity, including a feedback mechanism to help improve the materials.

The materials can be accessed at ResilienceDirect: [Exercise in a Box \(Exercise TOLLARD\)](#).

## Sharing data across organisations

99. Data presentation can become a barrier to good data provision, particularly where information from multi-agency partners is presented in different formats. It can be time consuming to convert multi-data sources into usable data when different organisational systems are used, or when technology and software compatibility issues delay or restrict timely information sharing.
100. As part of planning, agreed data headings and formats should be established and documented in advance of an emergency. Agreeing data sharing methods and formats in advance through a Data Sharing Agreement increases the speed at which usable data can be accessed across the partnership, reducing the likelihood that requests will need to be made to re-share data in a different format.
101. The Unique Property Reference Number (UPRN) is the unique identifier for every addressable location in the UK. When used in multiple data systems both within an organisation, and multi-agency, **UPRNs can support interoperability to link matching records in different databases together.** This makes it particularly useful for sharing between organisations whilst maintaining a level of obfuscation.
  - Users should be aware that each premises normally has two addresses consisting of a Local Property Identifier and Delivery Point Address, which if not managed correctly can lead to duplication of address data and have a commensurate impact on effort/resourcing. The Local Property Identifier is the official address produced by the local authority and the Delivery Point Address is created by Royal Mail with the aim of providing a delivery address.

These two addresses are not always identical, but go through an extensive matching process by [GeoPlace](#).

- Ordnance Survey releases updates to its products on a regular basis, the frequency varies by product. To ensure their own data integrity, users must update and maintain their holdings regularly. This will ensure all users are using the same data and there is not a conflict in versioning.
- Unique Property Reference Numbers are now openly available and royalty-free for use on Open Government Licence (OGL) terms from Ordnance Survey. The UPRN is the [public sector standard for referencing and sharing property information](#). Ordnance Survey provides additional information about UPRNs at its [Ordnance Survey Open UPRN site](#).

## Determining the scale and requirements

Having established networks, developed lists of data holders with information about vulnerable persons and premises, and agreed information sharing protocols, multi-agency partners should have a reasonable basis for planning and an indication to establish the potential scale of response required to assist vulnerable persons in the event of an emergency in their area.

**For the purposes of planning, an estimate of the range of numbers of potentially vulnerable persons for an area should be established by each organisation within the LRF network.**

102. Understanding known indicative numbers and concentrations of potentially vulnerable persons can assist responders in considering the scale of response and resource required to support individuals and communities during an emergency. For example, estimates of the number of people who might need to be evacuated or require sheltering, or community characteristics such as population ages, languages spoken, faith aspects, or other sociodemographic considerations that can assist planning, response and recovery needs.
103. In planning, geographical information of where vulnerable persons might be found - e.g. in a particular hospital, tourist area or housing area/types - can support planning, response and recovery arrangements.
104. Most emergencies have a strong geographical dimension, since their location and spread will determine their impacts and how they should be managed. Mapping and geographical information systems can provide a valuable tool in supporting the planning for and response to emergencies.
105. Mapping can assist emergency responders to identify and take account of demographic aspects of an emergency (such as its location, extent, consequences, and who will be affected). Pre-sharing of vulnerable establishments and sites, for example education settings, children's homes, children's residential care settings or adult social care settings, through geographically referenced mapping will assist responders during an emergency.
106. [Table 2](#) provides an example of information that could be provided by organisations for planning purposes in advance of an emergency, and which could be used to support mapping. Even though the information is approximate and, in some places, sparse, it provides a good indication of scale to allow for appropriate planning.
107. [Annex E](#) outlines potential requirements of different types of vulnerable persons at different points during an emergency. These examples can be used for scenario testing to plan for resource requirements, even in the absence of detailed information about individuals.

## Geospatial information capabilities for emergency planning and response

108. The capability to quickly locate and support vulnerable individuals is paramount. Geospatial data, encompassing precise locations, addresses and contextual mapping are essential enablers. Geospatial data and technology enable emergency responders and humanitarian organisations to pinpoint the exact locations of vulnerable people, including those residing in remote or scattered and hard-to-reach areas.
109. The integration of addresses and geospatial information into emergency management systems enhances the efficiency of resource allocation and response efforts. Emergency responders can accurately map out evacuation routes, establish temporary shelters, and deploy medical, fuel and food aid to areas where vulnerable individuals are most in need.
110. Geospatial data can provide emergency responders with situational awareness at a glance and can provide a visual representation of the locations and distribution of premises occupied by vulnerable people. During an incident this can help responders plan effectively and efficiently. Examples of where geospatial data can provide essential added value in an emergency impacting vulnerable people:
- **Flooding.** Identifying properties in a flood zone and detecting access by using address and road data.
  - **High rise properties.** Identifying where vulnerable people are in a dangerous situation by using address and building data.
  - **Extreme snow event.** Identifying and zoning of premises with vulnerable people to prioritise helicopter delivery of urgent medical, fuel and food supplies, for example in East Cumbria in March 2018.

## ResilienceDirect Mapping

111. ResilienceDirect (RD) is a 24/7/365, free, secure, digital service provided by the Cabinet Office for Category 1 and 2 responders across the UK, Devolved Administrations and Overseas Territories. The service should be used by LRFs to support the secure sharing of information during planning, exercising, response and recovery. RD supports local and national planners by providing access to three core applications: Collaborate, Mapping and Joint Organisational Learning Online. Guidance documents and plans can be securely saved in the Collaborate application.
112. The Mapping application is used to support live incidents and exercises along with other scenarios: search and rescue operations, events management and business continuity planning. Information on vulnerable establishments, locations and persons can be added and overlaid on the Mapping application and shared with those who require access to support planning, response and recovery. The mapping function also allows maps to be shared with non-ResilienceDirect users via a “live link” for up to 24 hours.
- a. Users decide who to share their maps with. A user can create a copy of their map that does not contain any vulnerable persons or locations information, and share the copy via live link. The original map, containing vulnerable persons and locations data, can be restricted and shared via ResilienceDirect Mapping with only those that need to see it.
113. RD Maps offers ten Base Layer maps to support situational awareness for the full cycle of emergency preparedness. The service is designed to be intuitive and easy to use and no pre-existing experience of Geographic Information Systems is required. Additional information can be added to Maps to better inform responder situational awareness. Responders are able to create bespoke maps or use the pre-populated ‘Toolkits’ which have been created to cover some of the more common emergency scenarios such as flooding and wildfires. Created maps can easily be shared with individuals or groups for shared situational awareness.

### RD Mapping support and training

114. Users can access free multi-agency training covering Mapping, Collaborate and Group Administrator roles and responsibilities.<sup>22</sup> The Service includes a training library, containing videos on key aspects of Mapping, orientation of the key features of the mapping application, a User Guide, and a list of most commonly used resources in Mapping.<sup>23</sup> The RD National User Group provides recorded user-led training sessions, including on the topic of Mapping. These sessions are available for RD users to access.<sup>24</sup>

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<sup>22</sup> Details on how to access training can be found on ResilienceDirect. Service users can email the Support Desk Team email at [support@resilience.gov.uk](mailto:support@resilience.gov.uk) to request training.

<sup>23</sup> [ResilienceDirect Mapping User Guides](#)

<sup>24</sup> [ResilienceDirect User-Led Training Sessions](#)

## Ordnance Survey (OS): providing national mapping services to Great Britain

115. The [Public Sector Geospatial Agreement](#) (PSGA) is a contract between Ordnance Survey (OS) and the Geospatial Commission (Department for Science, Innovation and Technology, HM Government), on behalf of the public sector in England, Wales, and Scotland. Under the PSGA, OS provides Great Britain's national mapping services. This includes updating and maintaining the National Geographic Database, comprising the data that describes the geography of Britain, and also a range of supporting activities around geospatial data standards, research, education and customer support services.

You can engage with OS through the customer and technical support that OS provides without charge to public sector customers under the PSGA.

This support covers general customer and technical support services, including getting started and making the most from PSGA data and services, as well as more enhanced technical support.

- Contact [OS online](#).
- Online LiveChat and telephone services 03453 75 75 95 are open between 8:00am and 6:00pm, Monday to Friday.

## Accessing OS Data and Services

116. The [OS Data Hub](#) enables direct and immediate access to a range of OS datasets, including addressing information, topographic data describing the physical features of Great Britain,<sup>25</sup> road networks and property-level data. Data can either be downloaded or accessed via APIs which can be integrated with user software to enable direct access to OS data quicker and more cost effectively. Customers can choose the data they want which is supplied in a range of formats.

## Addressing

117. Address data is one of the most important datasets for identifying the location of vulnerable people. Using Ordnance Survey (OS) address data will assign coordinates of premises and information about the address, such as floor level or type of building (i.e. terraced, semi-detached, detached). When linked with buildings data a user can get even more information about the property, including building height. This supports all stakeholders and agencies in planning and responding to vulnerable persons in an emergency.

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<sup>25</sup> Ordnance Survey provides data for Great Britain with the exception of addresses, which is provided for the United Kingdom.

118. Data will need to be matched or recorded against OS addressing data to be able to attach the Unique Property Reference Number (UPRN) to a record. This process provides the additional information associated with the address as described above.

## OS supporting emergency response: 'Mapping for Emergencies'

119. OS provides the 'Mapping for Emergencies' (MfE) support service to the public sector during any emergency or major incident, whether it is responding to natural disasters or security threats. The service is primarily aimed at Category 1 and 2 responders. However, if another part of the public sector or a commercial business urgently needs help with mapping during an emergency, they are also encouraged to get in contact.

120. Support is delivered by OS expert analysts, specifically trained in resilience, and can be provided remotely, or in situ such as at a related crisis management facility e.g. SCG, TCG, MAIC location. In the past, OS has provided emergency support, including:

- Geospatial analysis (address matching/querying, routing, cordon analysis, geo-location)
- Data manipulation and custom formatting
- Bespoke mapping
- Large-volume map printing
- Geo-visualisation
- Situational awareness products

121. Outputs can be delivered in a range of formats, for example as data that can be used for further analysis, loaded directly into common information sharing platforms, or as finished graphics, which can be used within presentations or situation reports.

For emergency support call 03456 050505. Mapping for Emergencies is provided under the PSGA and is a service which is free at the point of use to the end user.



Table 2. Example of generic information used for planning for vulnerable persons

Potential vulnerability	Location	Address	Network contact	Contact details	Estimated numbers	Estimated support needed in emergency	Notes
Children	Green Fields Primary School	5, High Street, XX1 1AA	[Organisation] Jan John 0000 22 33 44	Head Teacher Mr S Smith 0000 111 1111	300 Children	None	No evacuation plan
	Green Fields Infants Community Special School	10, High street, XX1 1BB	[Organisation] John James 0000 22 33 44	Head Teacher Mrs J Jones 0000 222 2222	50 Children	20 with severe learning difficulty 20 with hearing or visual impairment 10 with Autism Spectrum Disorder	No evacuation plan
Older People	The Elms Retirement Home	1, Low Street, XX3 2CC	[Organisation] James June 0000 44 55 99	Manager Mr D Davies 0000 333 3333	60 People	10 wheelchair users	Some hearing difficulties and visual impairment. Evacuation plan in place.
	Northside Sheltered Housing Estate	Off High Street XX2	[Organisation] June Jake 0000 33 66 44	Manager Mr D Davies 0000 333 3333	200 People	Some wheelchairs and possibly oxygen	Mixed population
Travelling Community	South Fields	Lower Street, XX1 1DD	[Organisation] Jake Jan 0000 33 66 55	N/A	Provision for 10 caravans approx. 50 people	Not known	Currently not occupied
Last Updated: DD MMM 20YY				Document owner:			

## Part three

Building community resilience, communicating with vulnerable persons and recovery considerations

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## Building community resilience

To support community resilience, responders partner with the public by sharing knowledge, enabling independent and collective action, and utilising public knowledge and capabilities.

Community resilience is enabled when the public are empowered to harness local resources and expertise to help themselves and their communities to prepare, respond and recover from disruptive challenges, in a way that complements the activity of Category 1 and 2 emergency responders. Community resilience is a factor in the mitigation of impacts from emergencies. Approaches to community resilience should allow local populations to plan for and adapt to long-term social and environmental changes to ensure their future prosperity and resilience.

**The partnership should consider its strategic approach to building community resilience, and develop a shared understanding of individual agencies' activity that can support efforts to mitigate impacts of emergencies on individuals and communities, particularly those likely to be disproportionately affected.**

122. Communities are not passive bystanders, they are active contributors before, during and after emergencies, supporting themselves and others when impacts happen. We regularly see the generosity of people coming forward to help their communities and the capacity of communities to support those in need: from emergency responders and networks of businesses, voluntary groups and local volunteers, to smaller community groups and individuals.
123. Community resilience development requires a participatory approach to emergency management. The Cabinet Office [Community Resilience Development Framework](#) provides a comprehensive guide for statutory responders to consider strategic approaches to building community resilience, in collaboration with non-statutory partners. The National Resilience Standard for community resilience<sup>26</sup> should be consulted for mandatory requirements, as well as good and leading practice.
124. To ensure community plans and resilience activity will have a sustained effect, real community empowerment and ownership of their resilience is required. Community members, including businesses, should contribute to emergency planning. Statutory agencies should provide information where possible and support communities to understand their capabilities, facilitating and advising community networks.

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<sup>26</sup> [National Resilience Standards](#) (2020) *Standard 5: Community resilience development*. Cabinet Office.

[GOV.UK/Prepare](https://www.gov.uk/prepare)

GOV.UK/Prepare provides a range of advice for the public, including:

- simple and effective actions that the public can consider taking to prepare for emergencies,
- specific advice for disabled persons and carers with British Sign Language and Easy Read interpretation,
- information about specific risks that an individual, household or community may face, that can be used to think about the impacts that risks might have on people's day to day lives,
- information to support individuals and community groups to volunteer safely and build networks to support communities before, during and after an emergency,
- a volunteering directory to signpost people to different volunteering opportunities.

Not everyone will be able to undertake all of these actions, particularly the ones that cost money. However, everyone can and should think through how they and those around them would manage during an emergency, such as a power cut, and see if there's anything they can do now that would make it easier to cope if one occurred.

The content on GOV.UK/Prepare was developed with expert advice from local and national government, the responder community, voluntary sector organisations and academia, drawing in lessons from recent crises and emergencies, and is kept under review.

125. Partners should consider how their approach to building community resilience can increase awareness and skills in supporting and working with vulnerable persons. This could include:

- Engaging with local, regional and national organisations who hold specialist knowledge**, including relevant lived experience, on the needs of vulnerable persons or those with characteristics that increase their risk of being impacted during an emergency.
- Making information publicly available** which helps individuals, businesses and communities understand how they can support vulnerable persons before, during and after an emergency. Information should be provided in accessible formats whenever possible.
- Understanding the general and specific skills that are needed** in responder organisations to work with vulnerable persons, identifying where there are gaps in skills and knowledge.
  - Responder organisations should identify people within their organisations who do this as part of their business as usual role, but

who may not necessarily understand emergency response activities and could find it difficult to link into the coordination structures.

- d. **Building capacity and capability through regular training** and advisory sessions, ensuring responders and wider staff have the skills and knowledge to provide support to vulnerable persons safely.

126. People who are vulnerable in emergencies may want to offer their skills to assist in response and recovery, or provide support to others who have been affected by an emergency. Cabinet Office guidance on [planning the coordination of spontaneous volunteers](#) assists LRFs in considering their approach to managing offers of support from the public during an emergency.

127. As part of planning, agencies should consider their approach to how vulnerable persons could provide assistance to others. An appropriate risk assessment should be carried out for all volunteering activities and while vulnerable persons may require additional support when assisting others this should not preclude their involvement.

## Communicating with vulnerable persons

128. Emergency preparedness guidance on *communicating with the public*<sup>27</sup> sets out expectations for Category 1 responders to communicate with the public, both in advance of an emergency and warning and keeping the public informed in the event of an emergency. The guidance contains information on reaching vulnerable persons and those who have difficulty understanding information and warnings.
129. Warning and informing the public is already an essential part of emergency management and Category 1 and 2 responders should have a well-developed approach. With regard to vulnerable persons, there are two additional contexts of communication handling which you should develop:
- a. **Pushing** information and messages out in appropriate and diverse formats. Those who can be identified ahead of an incident should be contacted or provided with information on services that can be accessed and what to do in the event of an emergency.
  - b. **Pulling** people towards the offer of services by putting information into the public domain to encourage those who may not be identifiable ahead of an incident to think about their circumstances.

## Principles for communicating with vulnerable persons

130. The multi-agency partnership, and its individual agencies, should consider their approach for communicating with vulnerable persons in preparation for, response to, and recovery from an emergency.
- a. Alternative communication methods should be used to communicate with specific groups with additional needs (e.g. braille and sign language).
  - b. Information and advice should be tailored to specific groups (e.g. by translating into different languages or taking into account local cultures and norms). Care should be taken when using specific terminology as literal translations of words and phrases can sometimes not retain the same meaning and cultural context, resulting in abstract terms that are unfamiliar, which in turn may lead to a lack of engagement with the message.
  - c. Information and messages should be co-produced and pre-tested with the intended audience. If reading skills are limited, consider using other methods such as audio files, animations and Easy Read formats. Evaluation activities with specific groups of interest can provide critical insights into how information has been received and understood, and the extent to which it has been acted upon.

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<sup>27</sup> Emergency Preparedness Guidance (2012) [Chapter 7 Communicating with the Public](#). Cabinet Office.

- d. Consider the use of language when communicating with individuals who may not identify as 'vulnerable' or 'at-risk'. Where possible, gather insights on what concerns motivate them and what barriers exist for them in terms of preparedness and response actions, in order to inform messaging content.
- e. Multiple familiar, trusted sources should be used to communicate information to the intended audience - these include, but are not limited to, faith groups and community leaders. These individuals should ideally be recruited and trained before an emergency.
- f. Consider the use of 'community champions' to share information before, during and following an emergency, and to reach individuals that might be isolated or marginalised. This could be particularly useful in communities where trust in authorities is low. Community champions are volunteers who are closely linked to their local community. In addition to being peer-educators they can have a useful role to play in co-production of communication materials.

### **Case study: Community Champions programme**

Community champions is a public health approach where community members volunteer to promote health and wellbeing or improve conditions in their local community. They have been utilised within many countries in emergency response situations. Champions use their social networks and life experience to address barriers to engagement and improve connections between services and disadvantaged communities. Champions are key connectors in communities and their work can help to address health inequalities, both in the context of short-term emergency response and longer-term health promotion and prevention. The model can be used to create the space for communities to be heard and have their concerns addressed.

During the COVID-19 pandemic in 2021, the UK Government developed a Community Champions programme and provided funding to local authorities and the voluntary and community sector to improve the reach of official public health guidance into specific places and communities most at risk. Using trusted local voices from within the communities, the programme supported those groups at greater risk, to ensure key public health advice was understood and safer behaviours followed. The scheme was central to combating issues such as vaccine equity, health disparities and regional inequalities where there was enduring transmission of Covid-19. The approach is likely to be effective in situations where trust is low, helping to reduce barriers to health seeking behaviour and increase social cohesion through locally generated solutions.

[Community Champions guidance](#) provides an overview of **evidence and resources to inform and support those designing and implementing community champions programmes** in local areas. This includes a range of settings such as local authorities, health and social care, and the voluntary and community sector.

## Communications and preparations before an emergency

131. As part of the communications approach ahead of an emergency, partners should:

- a. Communicate practical information about preparing for emergencies, with a focus on the benefits of preparing. Include where and how to source information if an emergency does occur.
- b. Make vulnerable persons aware of the plans of different organisations and how they'll be supported if an emergency happens e.g. what will utilities providers, health organisations or other responders do in the event of an emergency.
- c. Identify general information that can be provided to all vulnerable persons e.g. how people can support themselves or others during an emergency; information about what to expect in the event of an emergency requiring evacuation.
- d. Identify specific information to be made available dependent on risk e.g. arrangements and provisions for service animals in the event of an emergency; evacuation procedures.
- e. Remind individuals who think they might need additional support during an emergency of the existence of Priority Service Registers. Wider public communications can also include a reminder for informal/unpaid carers to double check with the individuals they provide care for whether they are registered for this additional support.

## Communications during and after an emergency

132. As part of the communications approach during and after an emergency, partners should:

- a. Communicate practical information on what vulnerable persons should do, including how to access any special assistance provided.
- b. Provide as much information as possible on what is happening during the emergency, including:
  - i. what will happen in the days and weeks to come,
  - ii. descriptions of any processes or procedures that individuals will need to undertake (such as evacuation/shelter or decontamination),
  - iii. using images to supplement written communication,
  - iv. information on expected timescales, such as how long individuals might be expected to be away from their property, and
  - v. details relevant for specific groups with additional needs, such as on assistance animals and mobility aids.



- c. For wider public communications, messages should emphasise values of community and social support, encouraging people to look out for, and pass important information to, friends, family or neighbours who might need additional help during an emergency.

## Additional considerations for recovery

133. Recovery is a complex and long-running process that will involve many more agencies and participants than the response phase. The purpose of providing recovery support is to assist the affected community towards management of its own recovery. Where a community experiences a significant emergency, there is a need to supplement the personal and community structures which have been disrupted.
134. The Cabinet Office published [National Recovery Guidance](#), providing a reference for local responders dealing with the recovery phase of an emergency. The National Resilience Standard for local recovery management<sup>28</sup> should be consulted for mandatory requirements, as well as good and leading practice.
135. Information and data sharing during recovery can often be complex and challenging, involving a larger number of organisations seeking to deliver specific outcomes for individuals across multiple services. **The need to share information between organisations is not diminished following the emergency response.**
136. Vulnerable persons are likely to require additional support during recovery. Responders should take steps to understand the additional practical, medical and psychosocial needs of vulnerable persons during recovery, and consider mechanisms for their delivery through business as usual activities or the commissioning of appropriate services. Support considerations should recognise the longer recovery time and concurrent issues that impact vulnerable persons, including compounding factors external to the emergency.
137. Responders should engage with known at-risk groups during planning stages to support understanding of potential needs during recovery and co-produce plans. Information gathered during the response and through dynamic risk assessment processes will refine understanding of those needs.
138. Recovery considerations to alleviate the negative effects of vulnerability exacerbated by an emergency will generally be transactional in nature. Baseline assumptions for support required during recovery should be robust, taking into account those people who would not usually consider themselves vulnerable in an emergency and who are not likely to be present on organisational 'lists'.
139. Where the emergency is the result of a crime, there should be engagement with Police and Crime Commissioners (PCCs) to understand what local support is available to victims and witnesses. PCCs commission local practical, emotional, and therapeutic support services for victims of all crime types. More information for victims and witnesses of crime, including how to access support, is available at the [Victim and Witness Information website](#).

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<sup>28</sup> [National Resilience Standards](#) (2020) *Standard 13: Local recovery management*. Cabinet Office.

# Guidance

This section contains additional guidance to support responders.

## Cabinet Office

- [Emergency Preparedness](#). Guidance on part 1 of the Civil Contingencies Act 2004, its associated regulations and non-statutory arrangements.
- [National Resilience Standards for Local Resilience Forums](#) (2020). A set of individual standards for LRFs to consistently identify good and leading practice, and help self-assure their capabilities and overall level of readiness.
- [UK National Leadership for Risk Identification, Emergency Preparedness, Response and Recovery](#) (2023). This document sets out which UK government department, devolved administrations or other public body leads for different types of emergency, at different stages.
- [National Risk Register](#). The National Risk Register is the external version of the National Security Risk Assessment, which is the government's assessment of the most serious risks facing the UK. It provides the government's updated assessment of the likelihood and potential impact of a broad range of risks that may directly affect the UK and its interests.

## Department for Education

- [Emergency planning and response for education, childcare, and children's social care settings](#). How educational and childcare settings should plan for and deal with emergencies, including significant public health incidents and severe weather.

## Environment Agency

Digital services from Environment Agency Flood Coastal Risk Management.

- [Flood warnings](#) and the flood forecast for the next 5 days.
- [Flood Guidance Statement](#). The Flood Guidance Statement is a product provided by the Flood Forecasting Centre for Category 1 and 2 responders. It provides a notice period of likely risk localities which should prompt partners to take proactive action particularly in terms of considering at-risk members of the community who may be in the catchment.
- [River Levels and Forecast](#). Landing page and link to live flood map service.
- [Summary figures of properties at risk for river and sea flooding](#) (open data).
- [Risk of Flooding from Rivers and Sea](#). These documents are designed to provide a simple, easy to refer to analysis of the numbers of people, property and extent of land within areas at risk of flooding taken from the risk of flooding from rivers and sea products. The [Risk of Flooding from Rivers and Sea - key summary information](#) provides additional details about the products.
- [The Flood Map for Planning \(Rivers and Sea\)](#). Shows areas of land at risk of flooding from rivers and/or the sea, ignoring the presence of existing flood defences so the

extent of the natural floodplain is understood. This maps flood zones 2 and 3, but does not separately denote zone 3b (functional flood plain). This information is available in the relevant Local Planning Authority's Strategic Flood Risk Assessment.

- [Coastal erosion risk](#). Find out the risk of coastal erosion for an area in England.

### **Government Communication Service**

- [Behaviour change guidance](#). This guidance can be used to set more effective and audience-centred communication activities.

### **Met Office**

- [WeatherReady](#). These pages provide up-to-date, expert seasonal advice from carefully selected organisations to help individuals and communities prepare for and respond to the weather, to stay safe and protect themselves, their homes and businesses.

### **UK Health Security Agency**

- [Flooding: health guidance and advice](#). Flooding presents a number of risks to health. This guidance helps professionals and the public address those risks and clean up safely.
- [Adverse Weather and Health Plan](#). The Adverse Weather and Health Plan aims to protect individuals and communities from the health effects of adverse weather and to build community resilience.
- [Weather-Health Alerting System](#). The alerting system provides an early warning when adverse temperatures are likely to impact on the health and wellbeing of the population.

[Cold weather and health: guidance and advice](#). This information helps to prevent the major avoidable effects of cold weather on health.

[Hot weather and health: guidance and advice](#). Extreme heat presents a number of risks to health. This guidance helps professionals and the public address those risks.

## Annexes

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## Annex A: Considerations for an LRF Vulnerable Persons Plan

The LRF Vulnerable Persons Plan, as a separate document or integrated into wider Humanitarian Assistance plans, should detail the actions that multi-agency partners will take to identify and support vulnerable persons during an emergency. Support to those affected and especially vulnerable people should be part of any preparation, response or recovery activity. As a minimum, the plan should set out:

<b>Version control</b>	Who can update and what is the process for requesting an update to the plan? How will partners be made aware of updates?
<b>The aim and objectives of the plan</b>	The agreed multi-agency approach for how partners will work together to identify and support vulnerable persons who have been impacted by an emergency or who are at-risk from impacts.
<b>Introduction</b>	<p>A summary of the scope of the plan and its contents, including the agreed definition of 'vulnerable/vulnerability'.</p> <p>Links to other plans that should be read in conjunction e.g. multi-agency procedures in an emergency and incident response plan(s).</p>
<b>Roles and Responsibilities</b>	<p>Partner roles and responsibilities in relation to identifying and supporting vulnerable persons, including specific roles required on activation of the plan.</p> <p>The purpose of the Humanitarian Assistance (HA) or Vulnerable Persons (VP) cell (if activated) e.g. identifying and prioritising vulnerable persons affected by the incident; consideration of safeguarding issues; identifying potential evacuation sites; recommending options and resources to support those affected to the Tactical Coordinating Group.</p>
<b>Triggers</b>	<p>Events that will trigger the activation of the plan, for example:</p> <ol style="list-style-type: none"> <li>the materialisation or high risk of materialisation of serious impacts resulting from an emergency situation, such as severe weather or utilities failure;</li> <li>expectation of an evacuation or shelter in place or advice;</li> <li>the declaration of a major incident which has triggered other LRF plans or the formation of a Strategic/Tactical Coordinating Group, Tactical Coordinating Group which considers the activation of the plan necessary.</li> </ol>
<b>Activation</b>	<p>Procedures for activating the plan, including:</p> <ol style="list-style-type: none"> <li>who can activate the plan;</li> <li>how the plan is activated and the procedure for bringing partners together;</li> <li>information on how to access relevant information in other Command and Control plans relevant to the LRF, SCG, or TCG;</li> <li>who should Chair the initial meeting (if activating a Humanitarian Assistance or Vulnerable Persons cell) and a draft agenda that includes setting the strategy intent and objectives for HA/VP support;</li> <li>suggested membership of the HA/VP cell.</li> </ol>

	<p>Expectations of individual organisations on activation of the plan, including:</p> <ol style="list-style-type: none"> <li>their role and responsibilities; immediate actions to be taken by agencies; information required from agencies; resources available from the agency; gathering and sharing agency-level information and data on vulnerable persons and establishments in the affected area.</li> </ol>
<b>Interventions</b>	Tactical options for supporting the vulnerable (i.e. details on 'how' the LRF can support vulnerable persons once identified, rather than just who to support) and desired outcome.
<b>Data Sharing Agreement / Policy</b>	<p>Category 1 and 2 responders should, as a minimum, discuss the type of data held by each organisation. The partnership should seek to develop a data sharing agreement to set out what data will be shared, how and when.</p> <p>The plan could contain a suggested template that partners will use to supply vulnerable persons data register headings.</p>
<b>Data and Record Management</b>	<p>Setting out data <u>management</u> protocols for multi-agency/LRF use of shared data, including what information is required and when; what can be shared on ResilienceDirect and how; where and in what format the information will be archived post incident e.g. GDPR compliance and the removal of personal details.</p> <p>Instructions for record management and keeping, including how decisions will be logged at meetings. Setting out retention and destruction policy for each agency in relation to vulnerable persons' data.</p>
<b>Communications</b>	<p>Detail arrangements on how the partnership will communicate with vulnerable persons, including:</p> <ul style="list-style-type: none"> <li>best conduits with trust and reach such as relationships with voluntary and community sector organisations, representative bodies or faith groups;</li> <li>where to access latest demographic information for the area;</li> <li>translation services available in the area;</li> <li>links to any pre-agreed communications materials;</li> <li>social media and media handling;</li> <li>addressing misinformation.</li> </ul>
<b>Recovery and stand-down procedures</b>	Detail arrangements on how the partnership will be informed of the stand-up of recovery arrangements or the stand down of activity related to vulnerable persons, including the role of HA or VP cell during recovery, the conditions for transfer, ensuring any transition is seamless and arrangements for establishing a smooth exit strategy.
<b>Business continuity arrangements</b>	<p>Link to wider BCM plans held by responders that detail how they will continue to exercise their functions in the event of an emergency. Detail specific actions to be taken in relation to the vulnerable persons plan, including:</p> <ol style="list-style-type: none"> <li>denial of access to IT that contains information about vulnerable persons;</li> <li>denial of access to infrastructure set up to support vulnerable persons e.g. HA/Reception centres.</li> </ol>

## Annex B: Non-exhaustive list of partners for the purposes of identifying and supporting vulnerable persons

### Local Authorities

- Adult Social Care Services, who have experience of engaging with adults with physical, mental, cognitive and sensory disabilities and impairment
- Housing and Homelessness Services, particularly where responsible as social landlords or responsibilities for sheltered accommodation and hostels
- Children's services, who have information on children with disabilities and special educational needs, where the LA is responsible for children and young people while at school, in early years settings, children looked-after (i.e. in children's care homes, particularly secure children's homes and residential special schools and specialist post-16 institutions), and children at risk of neglect and abuse
- Broader LA support services, including registration for assisted bin or clinical waste collections, or those in receipt of benefits

### Health

- Local Health Resilience Partnership
- Local Authority Public Health, including Directors of Public Health and health services commissioned through the local authority
- Wider integrated care provision, including through the Integrated Care Boards, community health services, mental health providers and primary care
- NHS England area team

**Fire and Rescue Service**, who may hold additional information on vulnerable persons from safeguarding and risk assessment referrals, lists of some bariatric patients, and users of home Oxygen

**Police**, who may hold additional information on vulnerable persons from safeguarding referrals or information on persons who may be a risk to responders

### Utility suppliers

- Electricity, Gas, Water, Communications and Liquid Petroleum Gas and Heating Oil suppliers cover broad geographic areas and may have different ways of operating. Liaison should take place before an emergency to establish coordination arrangements

**Education and care settings**, who hold information on the vulnerable persons within their settings

- Mainstream education settings, including those with special units for those with special educational needs



- Special schools
- Residential special schools
- Special post-16 institutions
- Alternative provision settings
- Children's social care resilience providers (including secure children's homes)

### **Other organisations**

- Parish and ward councils
- Formal voluntary and community sector organisations
- Local, regional and national organisations with experience and knowledge of supporting at-risk persons, including those run by people with lived experience (i.e. Disabled People's organisations)
- Faith organisations
- Community emergency response teams and flood wardens
- Asylum centres
- Adult and youth detention centres
- Probation services
- Department for Work and Pensions

## Annex C: Vulnerable premises

As part of business continuity management in an emergency, responders should consider how they can support potentially vulnerable premises through good business continuity planning. This will help reduce reliance on public sector bodies in the event of an emergency, enabling Category 1 and 2 responders to focus their resources on the most vulnerable. This could include simple activities like signposting to business continuity advice or maintaining a list of premises that contain people who may require additional assistance in an emergency.

### **Care and medical support (residential and transient):**

- Elderly residential care homes
- Residential and Nursing care homes
- Mental health facilities
- Learning disability residential and respite care homes
- Adult day centres
- Respite and hospice facilities
- Supported living residencies

### **Adult and children (residential, semi-residential and transient)**

- Hospitals, in-patient units and health centres
- Traveller and gypsy sites
- Sheltered housing and hostels
- High-rise buildings
- Community centres
- Religious centres
- Universities and colleges
- Prisons and probation settings (e.g. probation lodgings/ accommodation linked to the requirements of probation)
- Low quality housing

### **Children specific (residential, semi-residential and transient)**

- Mainstream schools (all types, including private with boarding facilities and those with special educational needs units) and higher, further and post-16 education facilities
- Special schools, specialist post-16 institutions and alternative provision settings
- Children's centres and disabled children's facilities
- Early years settings
- Youth centres
- Children's homes and Secure Children's Homes
- Independent training/ learning providers

### **Transport**

- Transport hubs impacted by an emergency
- Public transport networks impacted by an emergency

## Annex D: General and specific support considerations

The UK government's guidance on [Human Aspects in Emergencies](#) provides information and advice for the wide range of stakeholders involved in planning and delivering activities to address the Human Aspects during and following an emergency. Its primary purpose is to support local practitioners in planning and coordinating frontline activities to address Human Aspects in response and recovery.

Responders should consider general and specific types of support for those affected by the impacts of an emergency. This section below sets out a non-exhaustive list of potential support needed for broad and narrow groups of vulnerable persons.

### General considerations

Support that could be offered to broad groups of impacted persons:

- a. Providing advice about where to find information about the emergency response or how to register for support, including through:
  - i. targeted distribution of accessible information to affected households,
  - ii. setting up a response website / helpline to provide information about the emergency and how to access support if required.
- b. Access to Humanitarian Assistance / Reception Centres. Centres should provide a basic level of physical comfort and ensure appropriate hygiene, child caring, cultural and religious needs can be met. Centres should provide means for vulnerable persons to contact relatives, friends or support networks. Centres should include accessible toilet and shower facilities, as well as other accessible features, such as a hearing loop for hearing aid wearers, and access to remote interpretation if possible for deaf BSL users. Access to a specific diet may be needed.
- c. Home/mobile telephone calls or home visits/door knocking to affected properties, provided by local authorities, health services, private care providers, utilities providers, and/or voluntary and community sector organisations.
- d. Distribution or access to emergency resources, such as food, bottled water, fan heaters. Access to a pre-identified cadre of emergency drivers should be considered.
- e. Providing emergency accommodation and support to return to previous or new housing.
- f. Providing accessible transport during an emergency and information on publicly available transportation.
- g. Providing broad health and social care support, including through:
  - i. information on health and welfare services available,

- ii. access to medical supplies and medication for the management of medical conditions,
  - iii. access to mental health support,
  - iv. the provision of staff/carers trained in supporting vulnerable persons (e.g. where hygiene or other persons requirements can only be met with support).
- h. Providing information before an emergency about how to transport and look after domestic pets during an emergency, and making provisions at Rest Centres/temporary accommodation for the needs of service animals during an emergency.

## Specific considerations

This section sets out potential support needed for narrower groups of vulnerable persons, both for day-to-day living and specific support that may be required in an emergency situation.

	Potential nature of vulnerability	Support needed in <b>non-emergency situation</b>	Support needed in <b>emergency situation</b>
Mobility Impaired	Inability / limited ability to walk or to walk more than short distances.	<ul style="list-style-type: none"> <li>• Accessible housing and/or transport.</li> <li>• Access to education and employment.</li> <li>• Home care/day care/residential care.</li> </ul>	<ul style="list-style-type: none"> <li>• Assistance if a wheelchair is impeded and mobility support is required.</li> <li>• Special assistance for evacuations, such as the Fire and Rescue Service assisting Bariatric patients.</li> <li>• Accessible services.</li> <li>• Replacement mobility equipment.</li> </ul>
	Inability / limited ability to walk without assistance and/or requires a mobility aid.	<ul style="list-style-type: none"> <li>• Accessible housing and/or transport.</li> <li>• Access to education and employment.</li> <li>• Home care/day care/residential care.</li> </ul>	<ul style="list-style-type: none"> <li>• Assistance if mobility is required, particularly if speed is important.</li> <li>• Accessible services.</li> <li>• Medical assistance.</li> <li>• Replacement mobility equipment.</li> </ul>
	Inability / limited ability to walk, or an inability to move from bed, including paralysis.	<ul style="list-style-type: none"> <li>• Home or residential care and/or rehabilitation.</li> <li>• Use of equipment or aids for everyday living, including assistive software such as voice recognition</li> </ul>	<ul style="list-style-type: none"> <li>• Accessible services including transport from home.</li> <li>• Medical assistance and the provision of equipment e.g. specialist beds.</li> </ul>
	Inability / limited ability to move quickly.	<ul style="list-style-type: none"> <li>• Use of equipment or aids for everyday living.</li> <li>• Home alterations and / or occasional home care.</li> <li>• Accessible transport.</li> </ul>	<ul style="list-style-type: none"> <li>• Assistance if mobility support is required.</li> <li>• Accessible services.</li> <li>• Medical assistance.</li> </ul>
Sensory Impairment	Full or partial sight loss	<ul style="list-style-type: none"> <li>• Sight and mobility aids.</li> <li>• Guide dog.</li> <li>• Equipment (e.g. for talking books).</li> <li>• Training in use of Braille.</li> <li>• Information in accessible formats.</li> <li>• Assistive technology.</li> <li>• Tactile signage and tactile paving to aid with everyday tasks as well as wayfinding.</li> <li>• Clear pavements for following routes.</li> </ul>	<ul style="list-style-type: none"> <li>• Accessible information.</li> <li>• Assistance in following routes/moving down stairs.</li> <li>• Transport.</li> <li>• Provision for service animals.</li> <li>• One to one support (24/7 if possible) for lone individuals as the environment will be new for them and their assistance dog.</li> <li>• Power sources to charge technology which might be providing access to information through screen reading or other assistive technology.</li> </ul>
	Full or partial hearing loss / deafness / deaf sign language user	<ul style="list-style-type: none"> <li>• Hearing equipment such as hearing aids or cochlear implant.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Note:</b> this may not be a visible disability and people with mild/ moderate hearing loss may not identify themselves</li> </ul>

		<ul style="list-style-type: none"> <li>Hearing equipment, such as hearing loops or telephone accessories.</li> <li>Assistance dog.</li> <li>Captioning.</li> <li>Quiet environment to make communication easier.</li> </ul>	<ul style="list-style-type: none"> <li>as deaf and needing extra support.</li> <li>Accessible information, in written, Easy Read and British Sign Language formats.</li> <li>Sign language interpreters in person or accessible remotely in reception centres.</li> <li>Provision for service animals.</li> <li>Hearing loops in emergency centres.</li> <li>Mobile phone / text relay to contact family, friends and services.</li> <li>Sensitivity and understanding from workers.</li> </ul>
	Difficulty communicating through speech.	<ul style="list-style-type: none"> <li>Communication aids.</li> <li>Speech therapy.</li> <li>Access to education.</li> </ul>	<ul style="list-style-type: none"> <li>Workers need to be patient.</li> <li>Provision of materials to communicate through writing if speech is too difficult.</li> <li>Mobile phone/text relay to contact family, friends and services.</li> </ul>
<b>Mental/Cognitive Impairment</b>	Severe chronic condition - impairment in physical, cognitive, speech or language, or self-care areas.	<ul style="list-style-type: none"> <li>Home or residential care.</li> <li>Access to education, housing, employment.</li> </ul>	<ul style="list-style-type: none"> <li>Workers need to be understanding.</li> <li>Information and directions repeated in a straightforward manner.</li> </ul>
	Conditions which can affect moods, perceptions of reality, behaviour. Can sometimes be controlled with medication.	<ul style="list-style-type: none"> <li>Mental health support services, including access to psychiatrists, GPs, community health nurses, volunteer and support groups.</li> <li>Appropriate medication.</li> <li>Access to education, housing, employment.</li> </ul>	<ul style="list-style-type: none"> <li>Sensitivity and understanding from workers.</li> <li>Reassurance and support.</li> <li>Emergency prescription medication.</li> <li>Mental health support services.</li> <li>Hospitalisation.</li> </ul>
	<p>Difficulty in understanding sounds, including spoken words.</p> <p>Conditions or neurodiversity which affects communication, language, memory.</p>	<ul style="list-style-type: none"> <li>Assistance with reading, writing, oral, maths, and organisation and planning skills, as well as financial, personal and medical needs.</li> <li>Access to education.</li> </ul>	<ul style="list-style-type: none"> <li>May need support in remembering or responding to instructions/directions.</li> <li>Disability may not be visible and the person may not ask for help, and so difficult to identify.</li> <li>May require assistance with registering, filling out claim forms.</li> </ul>
	Motor skills and cognitive levels are lower, plus increased vulnerability medically.	<ul style="list-style-type: none"> <li>Appropriate care from parents, childminders, or other carers.</li> </ul>	<ul style="list-style-type: none"> <li>Adult (DBS checked) to take charge.</li> <li>Assistance for carer.</li> <li>Safe transport.</li> <li>Child facilities and entertainment.</li> <li>Emotional support.</li> </ul>

Other Vulnerable Groups	Motor skills and cognitive levels might be lower, plus increased vulnerability medically.	<ul style="list-style-type: none"> <li>• Appropriate care from parents, teachers, childminders, or other carers.</li> <li>• Access to education.</li> </ul>	<ul style="list-style-type: none"> <li>• Adult (DBS checked) to take charge.</li> <li>• Assistance for carer.</li> <li>• Safe transport.</li> <li>• Child facilities and entertainment.</li> <li>• Emotional support.</li> </ul>
	Diseases associated with old age, such as heart disease, arthritis, progressive degenerative diseases e.g. Alzheimer's, Parkinson's.	<ul style="list-style-type: none"> <li>• Equipment or home alterations, or additional at-home support.</li> <li>• Residential care.</li> <li>• Accessible transport.</li> <li>• Mobility aids.</li> </ul>	<ul style="list-style-type: none"> <li>• Assistance if mobility is required and speed is important.</li> <li>• Accessible services.</li> <li>• Medical assistance.</li> </ul>
	Affected by chronic, temporary or fluctuating illnesses that require medication, without which life could be seriously affected / threatened.	<ul style="list-style-type: none"> <li>• Access to a GP, chemists.</li> <li>• Regular medication.</li> <li>• Making people aware of the condition and treatment (e.g. diabetic might need to teach family how to give insulin injection).</li> </ul>	<ul style="list-style-type: none"> <li>• Workers to remind people to bring medication.</li> <li>• Assistance if mobility impeded (e.g. respiratory condition).</li> <li>• Medical attention and/or treatment.</li> <li>• Provision of emergency prescription medication.</li> </ul>
	Affected by chronic or temporary illnesses that require treatment via medical support equipment, without which life could be seriously affected / threatened.	<ul style="list-style-type: none"> <li>• Medical equipment and the knowledge to use it.</li> <li>• Access to a GP or other clinicians.</li> <li>• Access to medical treatment.</li> <li>• Home alterations or at-home support</li> <li>• Residential care.</li> </ul>	<ul style="list-style-type: none"> <li>• Assistance in handling and moving equipment.</li> <li>• As little separation from equipment as possible.</li> <li>• Replacement equipment available.</li> </ul>
	Inability to understand, speak or write in the English language.	<ul style="list-style-type: none"> <li>• Accessible information.</li> <li>• Help with translations.</li> <li>• Access to education.</li> </ul>	<ul style="list-style-type: none"> <li>• Accessible information e.g. translations.</li> <li>• Translators available in person or remotely, including for British Sign Language users.</li> <li>• Workers should keep communications as simple as possible, avoiding jargon.</li> </ul>

## Annex E: Scenario testing

Scenario testing can be used to plan for resource requirements, even in the absence of detailed information on individuals. The scenarios in this section outline the potential requirements of different types of vulnerable persons at different points during an emergency.

The scenarios are based on four broad categories of vulnerability:

- a. Mobility impairment
- b. Sensory impairment
- c. Mental or cognitive impairment
- d. Other vulnerable groups such as those with chronic illnesses, limited communication abilities and children and young people

There are six scenarios considered for each category:

- a. >4 hours stay in home
- b. >4 hours evacuation to local reception centre
- c. >12 hours stay in home
- d. >12 hours evacuation to local reception centre
- e. >24 hours evacuation to local reception centre
- f. 48 hours+ evacuation to remote location

These requirements are not exhaustive and potentially affected populations should be consulted to better understand local needs.



## a. Mobility impairment

Potential nature of vulnerability	A: Scenario >4hr stay in home	B: Scenario >4hr evacuation to local reception centre	C: Scenario >12hr stay in home	D: Scenario >12hr evacuation to local reception centre	E: Scenario >24hr evacuation to local reception centre	F: Scenario 48hr+ evacuation to remote location
<b>Inability / limited ability to walk. Inability to walk more than short distances.</b>	Ensure vital facilities/ equipment/medicines are available E.g. If power out might not have a battery for an electric wheelchair.	Accessible transport might be required. Centre & facilities need to be accessible. Replacement mobility aids may be needed.	Ensure vital facilities / equipment are available.	Accessible transport might be required. Centre & facilities need to be accessible. Replacement mobility aids may be needed. Consider how persons with physical limitations will be assisted e.g. trained staff.		
<b>Inability / limited ability to walk without assistance or a mobility aid.</b>		Assistance, transport, medical assistance. Accessible facilities. Replacement mobility aids may be needed.		Transport and medical assistance, including accessible facilities. Replacement mobility aids may be needed. Consider how persons with physical limitations will be assisted e.g. trained staff.		
<b>Inability / limited ability to walk. Inability to move from bed, including paralysis.</b>	Ensure vital facilities/ equipment/medicines are available.	Access to transport, centre, facilities & medical care.	Ensure vital facilities/ equipment/medicines are available.	Access to/provision of transport, specialist facilities and medical care.		
<b>Inability to move quickly.</b>	Ensure vital facilities/ equipment/medicines are available.	Assistance, transport, medical assistance. Accessible facilities. Those who struggle to stand for long periods should have facilities to rest (e.g. if long queues occur).	Ensure vital facilities/ equipment/medicines are available.	Transport and medical assistance, including accessible facilities. Those who struggle to stand for long periods should have facilities to rest (e.g. if long queues occur).		

## b. Sensory impairment

Potential nature of vulnerability	A: Scenario >4hr stay in home	B: Scenario >4hr evacuation to local reception centre	C: Scenario >12hr stay in home	D: Scenario >12hr evacuation to local reception centre	E: Scenario >24hr evacuation to local reception centre	F: Scenario 48hr+ evacuation to remote location
<b>Full or partial sight loss</b>	Warnings/info need to be in accessible formats. Double check the warning was received.	May need assistance following evacuation, including provision of transport. Accessible info in centres. Provision for service animal.  Power sources to charge technology	Warnings/info need to be in accessible formats. Double check the warning was received. Updates must be accessible.	May need assistance following evacuation, including provision of transport. Accessible information in centres - including audio versions of information Provision for service animals.  Power sources to charge technology which might be providing access to information through screen reading or other assistive technology.		
<b>Full of partial hearing loss / deafness</b>	Warnings/info need to be in accessible formats, including written, Easy Read and BSL. Double check the warning was received in an accessible way.	Sign language interpreters in-person or remotely at centres. Spoken info also presented in written format (e.g. notices posted)	Warnings/info & updates need to be in accessible formats (symbols to demonstrate warnings/ information where possible). Double check the warning was received in an accessible way.	Sign language interpreters at centres. Spoken info also presented in written format (e.g. notices posted) and British Sign Language.		
<b>Difficulty communicating through speech.</b>	If person has info to communicate, workers need to be patient. Could communicate through writing if speech too difficult.	If person has info to communicate, workers need to be patient. Could communicate through writing if speech too difficult.	If person has info to communicate, workers need to be patient. Could communicate through writing if speech too difficult.	If a person has information to communicate, workers need to be patient. Could communicate through writing if speech is too difficult.		

### c. Mental / cognitive impairment

Potential nature of vulnerability	A: Scenario >4hr stay in home	B: Scenario >4hr evacuation to local reception centre	C: Scenario >12hr stay in home	D: Scenario >12hr evacuation to local reception centre	E: Scenario >24hr evacuation to local reception centre	F: Scenario 48hr+ evacuation to remote location
<b>Severe chronic condition – impairment in physical, cognitive, speech or language, or self-care areas</b>	Warnings/info should be communicated simply. Patience & understanding is needed. Ensure vital facilities/equipment/ medicines are available.	Transport, accessible facilities. Assistance in the centre from a person with experience of working with people with these types of disabilities.  For children, check whether the child has medical or disability needs that require appropriate attention or access to specialist medical equipment.	Warnings/info should be communicated simply. Patience & understanding is needed. Ensure vital facilities/equipment/ medicines are available.	Access to transport. Accessible facilities. Assistance in the centre from a person with experience of working with people with these types of disabilities.  For children, check whether the child has medical or disability needs that require appropriate attention or access to specialist medical equipment.		
<b>Conditions which can affect moods, perceptions of reality, behaviour. Sometimes controlled with medication.</b>	Extra understanding / reassurance may be needed from workers.	Ensure people carry necessary prescription medication. Extra understanding/reassurance may be needed, plus further psychiatric support.	Extra understanding / reassurance may be needed from workers. Ensure people have sufficient supplies of prescription medication.	Access to emergency prescription medication. Extra understanding/reassurance may be needed, plus further psychiatric support.		Access to emergency prescription medication. Further psychiatric support may be required, as could be severely affected by disruption.
<b>Have average or above average intelligence, but a processing deficit, e.g. in communication, language, memory.</b>	Warnings/info should be communicated simply. Patience and understanding are needed, particularly as these types of disabilities are usually not easily visible.	Transport, accessible facilities. Understand that people may be unable to complete even simple forms. Assistance in the centre from a person with experience.	Warnings/info should be communicated simply. Patience & understanding is needed, particularly as these types of disabilities are usually not easily visible.	Patience & understanding is needed, particularly as these types of disabilities are usually not easily visible. Access to transport. Accessible facilities. Understand that people may be unable to complete simple forms. Assistance in the centre from a person with experience of working with people with these types of disabilities.		

#### d. Other vulnerable groups

Potential nature of vulnerability	A: Scenario >4hr stay in home	B: Scenario >4hr evacuation to local reception centre	C: Scenario >12hr stay in home	D: Scenario >12hr evacuation to local reception centre	E: Scenario >24hr evacuation to local reception centre	F: Scenario 48hr+ evacuation to remote location
<b>Motor skills &amp; cognitive levels are lower, plus increased vulnerability medically.</b>	Ensure vital facilities / equipment are available.	Safe transport. Appropriate care.	Ensure vital facilities / equipment are available.	Access to transport. Accessible facilities and access to appropriate medical care.		
<b>Motor skills &amp; cognitive levels might be lower, plus increased vulnerability medically.</b>	Ensure vital facilities/ equipment are available.	Safe transport. Appropriate care.	Ensure vital facilities/ equipment are available.	Access to transport. Accessible facilities and access to appropriate medical care.		
<b>Affected by conditions such as heart disease, arthritis, Alzheimer's, Parkinson's.</b>  <b>Old age.</b>	Ensure vital facilities/ equipment/medication are available. Extra sensitivity / reassurance may be needed, & workers should be patient.	Assistance, transport, medical assistance. Accessible facilities, incl. regular access to toilets. Workers should remember that the elderly can be more prone to mental disorders such as dementia.	Ensure vital facilities/ equipment/medication are available. Extra sensitivity / reassurance may be needed. Workers should be patient.	Access to transport and medical assistance, including accessible facilities  Those who struggle to stand for long periods should have facilities to rest (e.g. if long queues occur).  Hearing and sight loss are also more common among older people and therefore staff should be deaf aware.		
<b>Affected by chronic or temporary illnesses that require medication,</b>	Ensure they have all the medication they will require for the period of time.	Remind people to carry necessary prescription medication. Further medical care may be needed.	Ensure they have all the medication they will require for the period of time.	Remind people to carry necessary prescription medication. Further medical care may be needed.	Access to emergency prescription medication. Further medical care may be needed.	

<b>without which life could be seriously affected / threatened.</b>					
<b>Affected by chronic or temporary illnesses that require treatment via medical support equipment, without which life could be seriously affected / threatened.</b>	Ensure vital facilities / equipment is available.	Assistance in handling/moving equipment may be needed. Replacement equipment (e.g. oxygen bottles) & further medical care may be needed.	Ensure vital facilities / equipment is available.	Assistance in handling/moving equipment may be needed. Replacement equipment (e.g. oxygen bottles) & further medical care may be needed.	
<b>Inability to understand, speak or write in the English language.</b>	Communication should be kept as simple as possible (e.g. the use of Easy Read). Translations used where possible.	Centres should be staffed in-person or remotely with interpreters. Written information should be presented in different languages.	Communication should be kept as simple as possible. Translations should be used where possible.	Centres should be staffed with interpreters. Written information should be presented in different languages. Video versions in BSL or access to sign language interpretation should be provided.	
<b>Children and young people</b>	Ensure a parent or carer is present and is able to care for the child/ children. If not, consider alternative arrangements involving suitably assessed adult care recognising safeguarding risks.	Safe transport.  Ensure a parent or carer is present and is able to care for the child/ children. If not, consider alternative arrangements involving suitably assessed adult	Ensure a parent or carer is present and is able to care for the child/children. If not, consider alternative arrangements involving suitably assessed adult care recognising safeguarding risks.	<p>Safe transport.</p> <p>Ensure a parent or carer is present and is able to care for the child/children. If not consider alternative arrangements involving suitably assessed adult care recognising safeguarding risks.</p> <p>Ensure child appropriate facilities and activities.</p> <p>For babies, ensure that essentials such as infant formula, sanitising equipment and nappies are in adequate supply. Ensure that sleep surfaces are firm, flat and kept clear, and that an appropriate space is made available for sanitary needs and feeding.</p>	

	For babies, ensure that essentials such as infant formula, sanitising equipment and nappies are in adequate supply.	<p>care recognising safeguarding risks.</p> <p>For babies, ensure that essentials such as infant formula, sanitising equipment and nappies are in adequate supply.</p> <p>Baby changing and feeding facilities.</p>	For babies, ensure that essentials such as infant formula, sanitising equipment and nappies are in adequate supply.	
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## Annex F: Publicly available population-level data sets

Data set	Notes	Coverage	Source	Update Frequency
<b>Census</b>				
<a href="#">Census</a>	<p>The census is undertaken by ONS every 10 years and gives a picture of all the people and households in England and Wales. It can be used by local authorities in England and Wales to:</p> <ul style="list-style-type: none"> <li>• develop policies,</li> <li>• plan and run services,</li> <li>• decide how to allocate funds</li> </ul> <p>Users can <a href="#">create Census 2021 custom datasets</a> by different population types, including:</p> <ul style="list-style-type: none"> <li>- all households</li> <li>- all household reference persons</li> <li>- all usual residents</li> <li>- all usual residents in households</li> <li>- all usual residents in communal establishments</li> </ul> <p>The full data from Census 2021 are available on <a href="#">Nomis</a> as several hundred separate tables, covering the whole range of population characteristics and subject areas, and as Area Profiles. <a href="#">Area Profiles</a> allow users to view local statistics across different topics and compare them to national statistics.</p>	England and Wales	ONS	Every 10 years
<a href="#">Census 2021 maps</a>	Interactive map to visually analyse Census 2021 data on several topics (population, education, identity, housing, health, work) by drilling down to very granular areas.	England and Wales	ONS	N/A

<a href="#">Census 2021 Build a custom area profile</a>	Interactive tool to create a customised area profile for local authorities, combined authorities, wards, parishes and parliamentary constituencies, including data on a wide range of Census 2021 related topics. Users can either type in their area of interest in the search bar or draw their own area on the map.	England and Wales	ONS	N/A
<a href="#">Census 2021 Create a population group profile</a>	Interactive tool for exploring Census 2021 data on groups of the population of England and Wales, and for seeing how these groups compare to the whole population across a variety of measures including health, education and employment.	England and Wales	ONS	N/A
<a href="#">Scotland's Census</a>	<p>Scotland's first Census 2022 data is now available, with more outputs to be made available in 2024. As with other Censuses, it is undertaken every 10 years and gives a picture of all the people and households.</p> <p>It can be used by local authorities in to:</p> <ul style="list-style-type: none"> <li>• develop policies,</li> <li>• plan and run services,</li> <li>• decide how to allocate funds.</li> </ul>	Scotland	Scotland's Census	Every 10 years
<a href="#">Census 2021 in Northern Ireland</a>	<p>As with other Censuses, Northern Ireland's 2021 Census is undertaken every 10 years and gives a picture of all the people and households.</p> <p>It can be used by local authorities in to:</p> <ul style="list-style-type: none"> <li>• develop policies,</li> <li>• plan and run services,</li> <li>• decide how to allocate funds.</li> </ul>	Northern Ireland	NISRA (Northern Ireland Statistics and Research Agency)	Every 10 years



Financial contexts				
<a href="#">Financial vulnerabilities by country and region of England, urban/rural areas and Index of Multiple Deprivation</a> <sup>[1]</sup>	<p>Impact of increased cost of living on adults across Great Britain.</p> <p>About this Dataset: People in Great Britain's experiences of and actions following increases in their costs of living, and how these differed by a range of personal characteristics.</p>	Great Britain (GB)	ONS	Quarterly
<a href="#">Fuel poverty</a>	<p>How fuel poverty is measured in the UK: March 2023</p> <p>The similarities and differences in how fuel poverty is measured across the UK.</p>	UK	ONS	Guidance (updated infrequently)
<a href="#">Exploring local income deprivation</a>	<p>Interactive article to explore levels of income deprivation using Census 2021 data.</p> <p>Available at LSOA level. Last updated May 2021.</p>	England	ONS	N/A

Environmental/housing contexts				
<a href="#">Energy efficiency of housing in England and Wales</a>	<p>Insight on energy efficiency, environmental impact, carbon dioxide emissions and central heating main fuel type for new and existing homes by property type, tenure and property age</p> <p>Available at local authority districts and MSOA as well as country and region.</p>	England and Wales	ONS	Annual
<a href="#">Social Housing Lettings in England (CORE)</a>	<p><a href="#">Social housing lettings in England, 2023/24 subnational data explorer</a>. Presents subnational data on <b>new</b> social lettings starting between April 2023 and March 2024. The data covers new social lettings made by local authorities and private registered providers at social, affordable and intermediate rents, with information on tenants (e.g. age, gender, economic status, ethnicity and nationality), tenancy type and length, rents and properties.</p>	England	MHCLG	Annual

<a href="#">Rough sleeping in the UK: 2002 to 2021</a>	Report on the latest trends from rough sleeping statistics across the UK and how existing statistics can be compared.	UK	ONS	Infrequent
<a href="#">"Hidden" homelessness in the UK: evidence review</a>	The ONS has also produced an article that summarises existing data on different types of homelessness across the UK and highlights some of the main data gaps.			

Health contexts				
<a href="#">How health has changed in your area: 2015 to 2021</a>	Interactive tool to see how health changed in each local authority area across England between 2015 and 2021, according to the Health Index which covers several subdomains grouped in three domains: Healthy People, Healthy Lives, Healthy Places. Last updated June 2023	England	ONS	Infrequent
<a href="#">Impact of winter pressures on adults in Great Britain</a> <a href="#">Tracking the impact of winter pressures in Great Britain: November 2022 to February 2023</a>	Insights from an ONS winter survey providing updates on how increases in the cost of living and difficulty accessing NHS services are impacting people's lives during the autumn and winter months.  Most recently updated in April 2023.	GB	ONS	Irregular
<a href="#">DHSC SHAPE</a>	SHAPE is an online, interactive, data mapping, analysis and insight tool that supports service planning and estates strategy development.	England	DHSC	N/A
<a href="#">Local Inequalities Explorer Tool</a>	Interactive tool to explore inequalities within areas at a ward level using indicators from <a href="#">Local Health</a> , an existing Office for Health Improvements and Disparities (OHID) Geographical System (GIS) tool. It also includes information on trends in life expectancy and disease burden at an area level.	England	OHID	Annual

Social contexts				
<a href="#">UK Measures of National Wellbeing</a>	A visual overview of how people in the UK are doing across 10 domains of national well-being, at national level.	UK	ONS	Quarterly
<a href="#">Explore Local Statistics service</a>	Statistical dissemination service to find out more about local authorities, combined authorities, countries and regions, covering a wide range of themes, including some economic indicators, trade, labour market, education, health, well-being. Published February 2024 and updated as and when the original data sources are updated.	UK, with some indicators available only for England, England and Wales, or Great Britain	ONS, including datasets originally published by OGDs	On an ongoing basis
<a href="#">Nomis local authority profile</a>	<p>As well as census, NOMIS allows users to explore labour market profiles for local authorities in Great Britain, which present data on:</p> <ul style="list-style-type: none"> <li>• Resident population</li> <li>• Employment and unemployment</li> <li>• Economic inactivity</li> <li>• Workless households</li> <li>• Employment by occupation</li> <li>• Qualifications</li> <li>• Earnings by place of residence</li> <li>• Out-of-work benefits</li> <li>• Jobs (total jobs / employee jobs)</li> <li>• Businesses</li> </ul> <p>Users can create a further query of these datasets – for example, to view the age breakdowns (age bands) of the population.</p>	GB	ONS	Regular

<a href="#">State of the Nation: Social Mobility Index</a>	<p>State of the Nation is an annual report into social mobility in the UK. It uses original data and analysis from the Social Mobility Commission.</p> <p>There are 4 'composite measures' of social mobility by region:</p> <ul style="list-style-type: none"> <li>• Promising prospects</li> <li>• Conditions of childhood</li> <li>• Labour market opportunities for young people</li> <li>• Innovation and growth</li> </ul> <p>Each of these measures combines data from multiple indicators into a single 'composite' score to give a more reliable picture of geographical patterns.</p>	UK	Social Mobility Commission	Annual
<a href="#">Indices of Deprivation 2019 local authority dashboard</a> and <a href="#">Indices of Deprivation 2019 explorer</a>	<p>The Indices of Deprivation 2019 local authority dashboard allows users to explore the range of summary measures across the indices of deprivation 2019 at local authority level and the lower-layer super output areas (LSOAs) within each district. There are seven Deprivation Domains:</p> <ul style="list-style-type: none"> <li>• Income</li> <li>• Employment</li> <li>• Education, Skills and training</li> <li>• Health and Disability</li> <li>• Crime</li> <li>• Living Environment</li> <li>• Barriers to Housing and Services</li> </ul> <p>The Indices of Deprivation 2019 explorer shows the relative deprivation of neighbourhoods for selected areas according to the indices of deprivation 2019 and indices of deprivation 2015 and allows users to search by a place name or postcode.</p>	England	MHCLG	Irregular

<a href="#">StatsWales Community safety and social inclusion</a>	<p>StatsWales' Community safety and social inclusion data catalogue.</p> <p>The statistics contain a comprehensive set of information on community safety and social inclusion in Wales. They cover a range of topics including fire and crime, poverty (HBAI) and deprivation (WIMD), and Communities First.</p>	Wales	Welsh Government	Irregular
<a href="#">Scottish Index of Multiple Deprivation 2020</a>	<p>The Scottish Index of Multiple Deprivation is a relative measure of deprivation across small areas. If an area is identified as 'deprived', this can relate to people having a low income but it can also mean fewer resources or opportunities. SIMD looks at the extent to which an area is deprived across seven domains: income, employment, education, health, access to services, crime and housing.</p> <p>SIMD is the Scottish Government's standard approach to identify areas of multiple deprivation in Scotland. It can help improve understanding about the outcomes and circumstances of people living in the most deprived areas in Scotland. It can also allow effective targeting of policies and funding where the aim is to wholly or partly tackle or take account of area concentrations of multiple deprivation.</p>	Scotland	Scottish Government	Irregular
<a href="#">Northern Ireland Multiple Deprivation Measure</a>	<p>Measures that describe the spatial distribution of deprivation or disadvantage have been developed and used by Government and others in Northern Ireland since the 1970s. They have played a pivotal role in both informing the targeting of resources to the most deprived areas in Northern Ireland and monitoring the spatial impact of policy interventions.</p> <p>The latest Multiple Deprivation Measures (NIMDM2017) replace the NIMDM 2010 as the official measure of deprivation in Northern Ireland.</p>	Northern Ireland	NISRA (Northern Ireland Statistics and Research Agency)	Irregular

Infrastructure/Transport				
<a href="#">Feasible travel using public transport. Open Geography Portal (statistics.gov.uk)</a>	The ONS Data Science Campus (DSC) has actively developed experimental, UK wide, transport metrics on hyperlocal scales. The aim is to understand how transport networks vary within and between local areas, for example, comparing one side of a town with another. This helps identify groups of households that might not be able to access important surrounding towns and cities within a certain timeframe.	UK	ONS	Ongoing development
Measuring Transport performance <a href="#">open-source codebase</a>	The Data Science Campus is working to better <a href="#">understand the relationship between transport network and productivity</a> . ONS is developing an <a href="#">open-source codebase</a> to improve the data landscape in this domain, by measuring transport performance. This is the ability of a transport network to move people into and around an area (e.g. a city). It is in essence the percentage of the nearby people who can reach a destination by a certain modality (e.g., public transport, cycling, walking) within a certain amount of time.	Newport, Leeds, Marseille and London with plans to increase over time	ONS	Ongoing development

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<sup>[1]</sup> Associated written publication: [Impact of increased cost of living on adults across Great Britain: February to March 2023](#) (see Section 3 on financial vulnerability).

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