



HM Prison &
Probation Service

Heatwave Guidance for Prisons England & Wales

Version 2.0
May 2023

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Version 1	Summer 2022
Version 2	<p>The 4 key goals of UKHSA heat health plan have been updated within the policy principles section</p> <p>Dynamic risk assessment for COVID management during extreme heat has been removed in line with current guidelines</p> <p>The new heat health alert system has been updated along with links to register and view guidance</p> <p>Heat health action cards have been updated to reflect the changes within the alerting system</p> <p>Links to the adverse weather plan, supporting vulnerable people during a heat wave and beat the heat resource links have been added</p> <p>A section on Wales indicating the different weather alerting system</p>

1. Introduction

The climate is changing and the current analysis in the UK climate change risk assessment demonstrates that we are experiencing higher maximum temperatures and longer warm spells. [UK Climate change risk assessment](#)

Excessive exposure to high temperatures can be fatal, particularly for those with underlying medical conditions. The construction and fabric of a prison can vary but with different levels of ventilation, shared cells and large numbers of people living and working in proximity, the prison environment presents additional challenges that needs to be carefully managed.

This document outlines preparatory steps that Governors can consider prior to a spell of hot weather/heatwave and actions when one occurs.

1.1 Policy Principles - England

The UK Health Security Agency (UKHSA) [Adverse Weather and Health Plan](#) and associated *Heatwave Guidance* sets out the basis for planning and response to heatwaves in England. The aims of the plan are to prepare, alert and prevent the major avoidable effects on health during periods of severe heat in England. The plan strives to meet 4 key goals:

- 1. Prevent the increase in years of life lost due to adverse weather events
- 2. Prevent mortality due to adverse weather events
- 3. Prevent morbidity due to adverse weather events
- 4. Reduce the use of healthcare services due to adverse weather events

In line with other weather warning systems in operation within England warnings will be issued when the weather conditions have the potential to impact the health and wellbeing of the population. The alerts will be given a colour (yellow, amber, or red) based on the combination of the impact the weather conditions could have, and the likelihood of those impacts being realised. These assessments are made in conjunction with the Met Office when adverse weather conditions are indicated within the forecast.

1.2 Heat Health Alerts

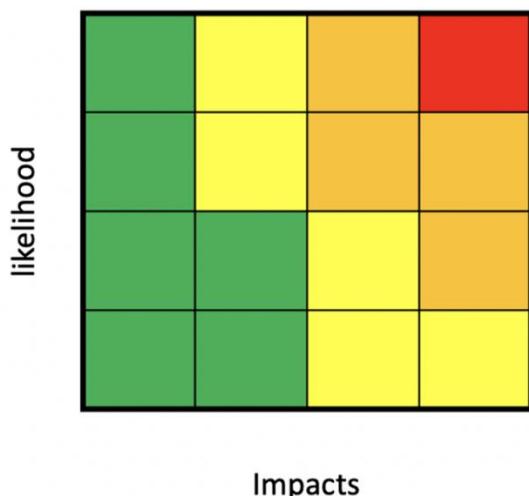
The Heat Health Alerts only relate to England. Section 1.3 sets out policy principles for Wales and details the Welsh weather alerting process.

Prisons need to assure themselves that they have up to date service delivery plans which cover preparedness, resilience, and response to hot weather events. The new weather and health alerting actions are available on [GOV.UK](#) and have been amended below for operational use within the prison environment.

Yellow and amber alert assessments cover a range of potential impacts (for example impacts on specific vulnerable groups, through to wider impacts on the general population) as well as the likelihood (low to high) of those impacts occurring. This information should aid making decisions about the appropriate level of response during an alert period. Within the alert that is issued, the combination of impact and likelihood will be displayed within a risk matrix as illustrated below.

Once the decision is made to issue an alert (yellow, amber, or red), these will be cascaded to those [registered to receive the alerts and made available on the new dedicated web-platform](#). Alerts will be issued with as much lead time to the event as is possible to allow users time to make their local assessments and to initiate all appropriate actions to reduce harm to health. Users should review every alert when issued to ensure they fully understand the potential impacts and how likely they are to occur.

The details of the Weather-Health Alerts can be found in its [user manual](#).



Green (summer preparedness) – No alert will be issued as the conditions are likely to have minimal impact on health. However, during periods where the risk is minimal it is important that organisations ensure that they have plans in place and are prepared to respond should an alert (yellow, amber, or red) be issued.

Yellow (response) – These alerts cover a range of situations. Yellow alerts may be issued during periods of heat in which would be unlikely to impact most people, but those who are particularly vulnerable (for example, the elderly with multiple health conditions and on multiple medications) are likely to struggle to cope and where action is required within the health and

social care sector specifically. A yellow alert may also be issued if the confidence in the weather forecast is low, but there could be more significant impacts if the worst-case scenario is realised. In this situation the alert may be upgraded as the confidence in both the weather forecast and the likelihood of observing those impacts improves.

Amber (enhanced response) – An amber alert would represent a situation in which the expected impacts are likely to be felt across the whole health service, with potential for the whole population to be at risk and where other sectors apart from health may also start to observe impacts, indicating that a coordinated response is required. In addition, in some circumstances a National Severe Weather Warning Service (NSWWS) Extreme Heat warning may be issued in conjunction with and aligned to the UKHSA Heat Health Alert. This situation would indicate that significant impacts are expected across multiple sectors.

Red (emergency response) – A red alert would indicate significant risk to life for even the healthy population. A red warning would be issued in conjunction with and aligned to a red National Severe Weather Warning Service (NSWWS) Extreme Heat Warning. Severe impacts would be expected across all sectors with a coordinated response essential.

1.3 Policy Principles - Wales

Public health advice relating to the weather is provided for Wales by Public Health Wales (PHW). While the advice is usually the very similar to advice provided for England, the processes for issuing advice are different and the timings and temperatures that “trigger” advice may differ.

Weather conditions may be very different across individual prisons in Wales and the local environment will also influence how the weather affects the prison and the prison population. Local decisions will need to be taken about which advice to act on.

When the Met Office Wales forecasts extreme or unusual weather the Environmental Public Health Service (EPHS) within PHW will consider issuing advice to the public. This is via social media with web links to more detailed information.

This advice is intended to be balanced and proportionate. PHW consider the current context; for example, is the weather event the first of its kind of a season, when we are less used to the impacts of heat or cold, or does it coincide with public holidays when normal routines and activities are changed. Advice is available all year round with no tiers of response. Consequently, the advice we have available can be used at any time when local need arises.

PHW provides specific health advice for hot and cold weather as well as for coping during and after a flood. Public health advice is also available for other weather-related health hazards including from wildfire smoke, storms, high pollen counts, blue-green algal blooms and for those who have lost their water supply.

PHW's public health advice is available, bilingually all year round at:

<https://phw.nhs.wales/services-and-teams/environmental-public-health/extreme-weather-events/>

2. Risk Factors and Heat Related Illnesses

UKHSA has identified certain factors that increase an individual's risk during a Heatwave. Prisons will be caring for many prisoners who fall within these categories. These include:

- **Those over 65 years old**, those living on their own and who may be unable to care for themselves. Those who depend on others for routine activities or who are socially isolated, or in a care facility such as a prison. Older prisoners are the fastest growing age demographic in prisons.
- **Medical conditions** including heart, kidney and lung conditions, diabetes, peripheral vascular disease, Parkinson's disease, dementia, or severe mental illness.
- **Medications** that potentially affect heart or kidney function or an individual's behaviour, cognition, or ability to sweat can make this group more vulnerable to the effects of heat.
- **Infants** and children under 5 years of age are vulnerable to heat due to immature thermoregulation, high dependency level and greater dehydration risk.
- **People with alcohol dependence and drug dependence** often have poorer overall health and increased social isolation which can increase their risk of heat stress.
- **Inability to adapt behaviour to keep cool**. Having dementia, a disability, or being bed bound.
- **Environmental factors and overexposure to heat**. Living in urban areas and south facing top floor accommodation. Activities or jobs that are in hot places or outdoors and include high levels of physical exertion.

In a moderate heatwave, it is mainly the high-risk groups that are affected. However, during an extreme heatwave other people may also be affected.

Staff should be aware of which prisoners are at increased risk due to the factors listed above and their locations in the prison. Regular checks should be undertaken on these prisoners during a heatwave.

Collaborative working with health professionals is vital to ensuring early intervention can be made on the most vulnerable groups.

Specific heat related illnesses include:

- **Heat cramps** caused by dehydration and loss of electrolytes, often following exercise.
- **Heat rash** (prickly heat) small, red, itchy papules.
- **Heat oedema** (swelling) mainly in the ankles, due to changes to the blood vessels and retention of fluid.
- **Heat syncope** dizziness and fainting, due to dehydration, vasodilation, cardiovascular disease, and certain medications.
- **Heat exhaustion** occurs when the body overheats and can't cool down. Common symptoms of heat exhaustion include tiredness, weakness, feeling faint, headache, muscle cramps, feeling or being sick, heavy sweating and intense thirst. Heat exhaustion does not usually need emergency medical attention if the person can cool down within 30 minutes. If not, heat exhaustion can lead to heatstroke.
- **Heatstroke** can become a point of no return whereby the body's thermoregulation mechanism fails. Common symptoms of heatstroke include confusion, lack of coordination, fast heartbeat, fast breathing or shortness of breath, hot skin that is not

sweating, and seizures. Heatstroke is a medical emergency that leads to multiple organ failure and can be fatal without prompt treatment.

If you think someone has heatstroke you should dial 999 and then try to cool them down

Further information on heat exhaustion and heatstroke symptoms at can be found on the [NHS.uk website.](https://www.nhs.uk/conditions/heat-exhaustion/)

How to cool someone down:

How to cool down someone else has symptoms of heat exhaustion:

- Move to a cooler place such as a room with air conditioning or somewhere in the shade.
- Remove all unnecessary clothing like a jacket or socks.
- Drink cool water, a sports or rehydration drink or eat cold and water rich foods like ice-lollies.
- Apply cool water by spray or sponge to exposed skin. Cold packs wrapped in a cloth and put under the armpits or on the neck can also help.

They should start to cool down and feel better within 30 minutes.

If the individual doesn't show signs of recovery in 30 mins, and symptoms persist or change this could be **turning from heat exhaustion to heat stroke and an ambulance should be called.**

3. Staff Advice and Support during Hot Weather

Staff working in warm/hot conditions should consider:

- During breaks, find somewhere cool to rest if permissible and safe to do so.
- Stay hydrated with water or electrolyte / sport drinks.
- Be aware of the signs and symptoms of heat stress and dehydration (thirst, dry mouth, dark or strong-smelling urine, urinating infrequently or in small amounts, inability to concentrate, muscle cramps, fainting). Don't wait until you start to feel unwell before you act.
- Work with your team to look out for the signs of heat stress for each other (e.g., confusion, looking pale or clammy, fast breathing).
- Between shifts, try to stay cool as this will give your body a chance to recover.
- Avoid alcohol.
- Avoid direct sunlight and ensure there is access to ample fluids throughout the day.

3.1 Health and Safety Advice

The Workplace (Health Safety and Welfare) Regulations 1992 require employers to maintain a reasonable temperature in all indoor workplaces unless it is impractical to do so. Where a reasonably comfortable temperature cannot be achieved throughout a workplace, the Approved Code of Practice (ACOP) focusses on provision of local cooling, and in extremely hot weather, the use of fans and increased ventilation instead of local cooling. Other factors such as worker clothing, personal protective equipment (PPE), levels of physical activity, radiant heat, humidity, air movement and task duration should be considered.

In addition, the Code of Practice requires employers to provide a suitable number of thermometers to enable workers to check temperatures in indoor workplaces.

The regulations require employers to provide 'effective and suitable ventilation'. Fire doors, which provide compartmentation to minimise the spread of fire within a building, should not be wedged open to improve ventilation.

There is also guidance to the regulations that say that protection from the excessive effects of the sun in buildings can be achieved by introducing shading and using reflective materials. Some examples of the measures which can achieve this, either in isolation or in combination, are:

- Introducing awnings.
- Internal or external louvered blinds.
- Using dense vegetation, e.g., trees to provide shading of windows.
- Use of reflective glazing, e.g., by using films or upgrading glazing.
- Introducing overhangs or recesses to windows.

Governors may wish to discuss such measures with MOJ property services where necessary.

All employers have a general duty to protect the health and safety of the workforce, and to assess and control risks from working in hot temperatures, indoors or outdoors, or exposure to the sun, (this may include tasks such as outside patrols, work party supervisors etc).

Process risk assessments for indoor and outdoor activities should seek to put in place control measures to eliminate or reduce risks, including excess sun exposure, sun stroke, heat stress or dehydration.

Practical control measures may include:

- Local cooling, ventilation, or air movement.
- Changing the times of day where outdoor tasks are completed to cooler times of the day.
- Staff and prisoner rotation to reduce potential exposure times.
- Use of shading and respite areas.
- Appropriate clothing to provide protection from sun exposure.
- Availability of drinking water to maintain hydration.
- PPE.

In periods of hot weather PPE worn routinely for the task needs to be selected to minimise the build-up of heat to protect the worker. Where this cannot be achieved other controls such as task rotation and hydration may need to be considered. PPE required for protection against process hazards should not be discounted to achieve thermal comfort.

Other regulations covering manual handling and display screen equipment also consider excess heat and recommend appropriate solutions to minimise risks to workers. Governors and managers must pay particular attention to the welfare of staff who are pregnant or who may have existing medical conditions that mean they tolerate heat less well. Thermal comfort should be considered in new and expectant mothers risk assessments.

The HoBA is the health and safety sponsor and is best placed to oversee arrangements for managing excess heat processes on behalf of the Governor, with advice and support from Health and Safety advisors, MOJ property services, Healthcare and Health Resilience leads where these are appointed. Existing forums such as Health and Safety committees and estates tripartite meetings may provide useful platforms for discussion and appropriate actions to manage periods of excess heat.

Workplace (Health Safety and Welfare) Regulations 1992: [Workplace health, safety and welfare. Workplace \(Health, Safety and Welfare\) Regulations 1992. Approved Code of Practice and guidance L24 \(hse.gov.uk\)](https://www.hse.gov.uk/legislation/regulations/1992/1992-regulations.html)

HSE Guidance on temperature: [Temperature \(hse.gov.uk\)](https://www.hse.gov.uk/temperature.html)

3.2 Advice for Dog Handlers

NDTSG advise the following measures to support handlers and their dogs during extreme heat:

- All handlers should have a cooling mat and cooling jacket available for the dog.
- Handlers should have awareness of the signs and symptoms of heat stroke.
- Handlers should complete the dog first aid to be able to administer emergency first aid if they see signs of heat stroke.
- There is a policy for the transportation of dogs and the temperature of vehicles that must be adhered to.
- Any journey over 30 minutes long, the handler should make regular stops and check on the welfare of the dogs.
- Tarmac test when carrying out patrols on concrete to avoid unnecessary injury to the dogs.
- Adjust working times where possible, such as searching in the morning or late afternoon.
- Risk assess any impact of searches/patrols not taking place and include the risk of harm to the dog if the activity is to take place.
- When dogs are stood down have access to water, cooling mats, fans etc.
- Use temperature alarms in vehicles.

4. Supporting Prisoners during hot weather

4.1 Mother & Baby Units

Further guidance is available from [UKHSA](https://www.ukhsa.gov.uk) and the [NHS](https://www.nhs.uk)

Follow the health and safety advice and practical measures listed in this guidance and in addition consider:

- Fully breastfed babies do not need any water until they have started eating solid foods. During hot weather they may want to breastfeed more than usual.

- Babies that are being bottle fed in addition to their usual milk feeds can be given a little cooled boiled water.
- Remember you can ask nursery staff and/or health professional for advice about any baby or childcare issue, advice will then be tailored to meet their needs.
- Babies and infants should be kept out of direct sunlight.
- Once babies have been introduced to solid foods, they can be offered sips of water from a cup or beaker with meals.
- Remember that breastmilk or infant formula should be their main drinks during the first year. In hot weather, you may need to offer some additional water outside of mealtimes.
- During the hot weather baby's nightwear and bedclothes can be kept to a minimum. If babies kick or pushes off the covers during the night, they can be put in just a nappy with a single well-secured sheet that will not work loose and cover their face or get entangled during the night.

4.2 Supporting Pregnant Women

- Enable pregnant women to avoid the heat where possible by staying out of the sun during the day.
- Promote the use of lukewarm/ cooling showers and baths. Cold showers/baths can cause the body to retain heat.
- Shut windows when it is hotter outside. You can open the windows for ventilation when it is cooler.
- Stay in the shade. Pregnant women may find their skin more sensitive to the sun during hot weather.
- Enable pregnant women to keep hydrated by keeping a water bottle with them and keep this refilled.
- Pregnant women may benefit from sleeping more and in a cool room.
- Dress to keep cool by wearing loose, light clothing.
- Ensure pregnant women have access to seating where possible. To avoid swollen feet minimise time spent standing, wear comfortable shoes, put your feet up regularly.
- Pregnant women should be supported to access health information from their midwife.

4.3 Heat Health Advice During Ramadan

Many members of the Muslim community may be fasting during the daylight hours in the month of Ramadan. All local areas should familiarise themselves with the dates of Ramadan each year and build appropriate actions into their local plans if it falls during the summer months. During hot weather, dehydration is a common and serious risk.

If anyone observing Ramadan starts to feel unwell, disoriented or confused, or collapse or faint, advice is to stop fasting and to drink cool water or other fluids. If any specific guidance is needed around observing Ramadan during a period of hot weather, you should contact the HMPPS Muslim Faith Advisor via chaplaincyhqenquiries@justice.gov.uk.

4.4 Heat Health Action Cards

Action	✓
Suggested actions to consider all year round to support summer preparedness.	
Identify people who are at particular risk from extreme heat. Work with the health care team to develop approaches to include hot weather risk factors in care records and consider whether changes might be necessary to care plans in the event of hot weather.	
Develop a Training Plan to ensure that staff are aware of the local hot weather plans and ready for hot weather.	
Ensure appropriate data-sharing agreements or protocols are in place to allow organisations to share data or intelligence, including details of the most vulnerable people where appropriate.	
Consider surveillance and monitoring to enable evaluation of the effectiveness of any hot weather interventions that are established locally, including locally relevant indicators and metrics.	
Consider environmental improvements that could be made to provide a safe environment during hot weather. Identify any local and national support available to make environmental improvements.	
Action	✓
(Preparedness & Action – 1 June – 15 September – All Alert Levels)	
Audit organisational Business Continuity Plans (BCPs) and/or hot weather plans to ensure that these are up to date, including reviewing up to date information published by UKHSA/PHW, NHS and the Met Office regarding hot weather.	
Ensure that an effective cascade system is in place for informing and alerting staff of hot weather alerts and advice and has been tested in advance.	
Ensure relevant staff are aware of and understand BCP and/or hot weather plans, including ensuring relevant staff have received training where applicable.	
Consider installing thermometers to allow accurate monitoring of indoor temperatures and agree a process for identifying areas of concern for overheating.	
Liaise with communications team for the preparation and publication of staff alerts related to hot weather via intranet and staff update messages.	
Ensure appropriate contact details are available for relevant stakeholders for any information exchange that would be required in the preparation for or response to hot weather.	
Ensure that food and drinks in prisoner areas is safely stored and transported.	
Identify issues relating to excessive temperatures of food & drinks and ensure appropriate action is taken to reduce risk.	
Ensure that any temporary cooling areas, devices, fans, portable air-conditioning units are: <ol style="list-style-type: none"> 1. Risk assessed. 2. Have cleaning schedules/arrangements in place which are compliant with Infection Prevention and Control requirements PRIOR to ordering/installation. 	
Review the practical measures for prisons list and order relevant stock items.	
Agree a communication process between healthcare and the prison for those prisoners who are vulnerable and high risk.	
Review the Health and Safety advice and prepare response plan.	

Action	✓
Suggested actions to consider once a Yellow Alert is issued	

Ensure relevant staff members are aware of and understand BCP and/or hot weather plans, including cascading plans to relevant members of staff.	
Use the Heat-Health Alert impact matrix to inform the local risk assessment for and response to hot weather.	
Identify people who are at particular risk from extreme heat, identify any changes to care, work with individuals and give advice.	
Consider rearranging the regime to avoid activities during very hot conditions.	
If appropriate, consider creating cool areas or rooms (able to be maintained below 26 degrees Celsius).	
Collate and maintain a list of practicing Muslims during Ramadan and other groups who may fast. Ensure you understand what is expected and support them to take healthcare and pastoral advice before fasting.	
Prepare a health promotion campaign to raise awareness of heat illnesses and their prevention.	
Ensure Business Continuity Plans are up to date to cope with hot temperatures, which might result in power or water shortages to prisons.	
Provide a suitable number of thermometers to enable workers to check temperatures in indoor workplaces. Ensure staff know how to check, record, and follow internal procedures if a cause for concern is identified.	
Suggested actions to consider once a Yellow Alert is in effect	
Review and implement the suggested actions issued for the Yellow Alert Above.	
Ensure that health promotion leaflets are distributed to prisoners to raise awareness of heat illnesses and their prevention.	
Check and ensure that wherever possible cells have curtains for shading.	
Prepare to move high risk prisoners to single cells or cells that are on lower floors and not south facing.	
Supply water and review the food plan to ensure that water-rich foods such as fruits, yoghurt and salads are available to prisoners.	
Initiate daily welfare checks to high risk and vulnerable prisoners.	
Record room temperatures and notify a manager if the temperature exceeds 26 degrees.	
Check that prisoners have light, loose fitting cotton clothing to wear and encourage wearing in the event of a Heatwave.	
Process risk assessments for outdoor activities should be considered with practical control measures – See Health and Safety section.	
Review storage of medicines. Most medicines should be kept below 25 degrees Celsius, so they should be stored somewhere cool, dry, out of direct sunlight and away from windowsills. Medicines should only be stored in the in fridge if specified. The NHS Specialist Pharmacy Service has further guidance.	
Assess refrigeration capacity to ensure sufficient cold water and ice are available to minimise risks from dehydration. Keep stocked with food and medication.	
Review, prioritise and monitor individuals most vulnerable to heat-related illnesses. Ensure that the health care team are regularly monitoring body temperature, heart and respiration rates, blood pressure and hydration levels in vulnerable patients. For individuals who cannot be moved to cool areas, or for whom a move might be too disorienting, take actions to cool them down (for example, liquids, cool wipes) and enhance surveillance.	
Suggested actions to consider for an Amber Alert	
Invoke local BCP and/or hot weather plans, including cascading alert to relevant members of staff and accounting for a possible surge in demand.	
Use the Heat-Health Alert impact matrix to inform the local risk assessment for and response to hot weather. Monitor the local and national weather forecast.	

Review, prioritise and monitor individuals most vulnerable to heat-related illnesses. Speak to healthcare providers to see if it is possible to regularly monitor body temperature, heart and respiration rates, blood pressure and hydration levels in vulnerable patients. For individuals who cannot be moved to cool areas, or for whom a move might be too disorienting, take actions to cool them down (for example, liquids, cool wipes) and enhance surveillance.	
Check and record indoor temperatures regularly and follow internal procedures if a cause for concern is identified. Ensure any designated cool areas are below 26 degrees Celsius.	
Review storage of medicines. Most medicines should be kept below 25 degrees Celsius, so they should be stored somewhere cool, dry, out of direct sunlight and away from windowsills. Medicines should only be stored in the in fridge if specified. The NHS Specialist Pharmacy Service has further guidance.	
Assess refrigeration capacity to ensure sufficient cold water and ice are available to minimise risks from dehydration. Keep stocked with food and medication.	
Review and identify what non-essential activities could cease.	
Revise the gym schedule to limit outdoor activities.	
Where possible, reduce holding room capacity and ensure water and fans are in place.	
Repeat messages on protective measures.	
Ensure that prisoners that are most vulnerable to heat are moved to single cells or cells that are on lower floors and not south facing.	
Ensure all ventilation is turned on and in working order.	
Reduce internal temperatures by turning off unnecessary lights and electrical equipment where safe to do so.	
Use sunscreen of SPF 30 or greater to prevent sunburn, as advised by healthcare.	
Review rota priorities to cover the anticipated heatwave period and make provision for surge capacity.	
Consider a welfare check for prisoners that did not collect their medication.	
Review the Health and Safety advice and ensure control measures are appropriate.	
Suggested actions to consider for a Red Alert	
Review and implement the suggested actions from the Amber Alert above.	
In consultation with catering managers, offer alternative cold/ lighter meals menus.	
Ensure vehicle safety by: <ul style="list-style-type: none"> • Parking in the shade and utilising sunscreens. • Opening doors and windows for a few minutes before driving off to allow built up heat to escape. 	
Review uniform policy and relax where appropriate.	
Record and maintain room temperatures.	
Follow all local emergency response plans and feed into local coordination and response (where appropriate). <ul style="list-style-type: none"> • Ensure that the health care team are regularly monitoring body temperature, heart and respiration rates, blood pressure and hydration levels in vulnerable patients. 	
If you suspect someone has heatstroke call 999. While waiting for an ambulance:	
<ul style="list-style-type: none"> • Take temperature. • Move the patient to somewhere cooler, if possible. • Cool them down by giving them a cool shower, sprinkling them with water, wrapping them in a damp sheet and using a fan to create an air current • Encourage them to drink cool fluids if they are conscious. 	

4.5 Recommended Practical Measures for Prisons

Following the heat health action cards see below a summary of practical measures for implementation.

-  **Vulnerable Prisoners:** Know who the high risk prisoners are and conduct regular welfare checks
-  **Cells:** Where cells have curtains, advise prisoners to keep them closed during the day. Consider moving high risk prisoners to single cells or cells on lower levels
-  **Regime:** Consider rearranging the regime to avoid activities during very hot conditions
-  **Fans:** Consider placing fans/air con in areas with high traffic. Allocate portable handheld fans to high risk prisoners and those in double cells
-  **Holding Cells & Waiting Rooms:** Review the allocated numbers in these locations and limit spaces to reduce overcrowding.
-  **Water:** Consider installing water machines or access to bottled water in areas with limited access
-  **Gym/PE:** Review and revise the gym schedule to limit the outdoor activities and exposure
-  **Sun Protection:** Consider supplying sun cream and if possible providing shaded areas on the exercise yard. Sunbathing should be avoided.
-  **Windows:** Open windows when the outside temperature is lower than inside. In hot conditions the inside temperature is often cooler than outside.
-  **Health Promotion:** Run local campaigns to provide details and alerts of forecasted warm and hot weather. Use prisoner TV, Radio and peer support to reduce health risks
-  **Electrics:** Turn off unnecessary appliances to reduce heat production. Always ensure it is safe to turn off the equipment.
-  **Clothing:** Advise prisoners to wear loose light weight, light coloured clothing and to remain clothed outdoors. Review and possibly relax prison officer uniform.

5 Business Continuity

A severe heatwave may result in higher than usual levels of staff absenteeism. An increased likelihood of children or elderly relatives requiring additional care during prolonged periods of excessive heat combined with summer holidays, may create difficulties in maintaining essential services.

Under this circumstance it may be necessary to activate local business continuity plans. Whilst local business continuity plans may not include heatwave/extreme heat as a standalone risk, all local BC plans must include the following:

- Loss of access / egress to premises – this will include the impact of needing to close certain parts of the establishment due to extreme heat. For example, closure of education centres and/or limiting access to gym facilities.
- Shortage of Staff – this will include the impact of the increased likelihood staff may need to care for children or elderly relatives during period of extreme heat. For example, altering the regime to maintain only essential services due to a shortage of staff.

Local BC plans should include the recommended practical measures for prisons (page 5) as they will be critical to the continuity of the establishment during prolonged periods of excessive heat.

For further guidance and support on BC planning please contact BC&R@justice.gov.uk

6 Prisoner Escort and Custody Services (PECS)

Prisons have a responsibility to serve the courts. PECS have a responsibility to ensure that they safely transport and manage prisoners in both secure vehicles and HMCTS Custody suites. PECS have a positive working relationship with the HMCTS Business continuity team and work to ensure a safe environment through the below actions:

- A new fleet of vehicles have been in place since 2020/21 all of which have air conditioning.
- Calibrated regular temperature monitoring is in place in the court custody suites.
- An agreed process map (PECS and HMCTS) is in place for the management of extreme temperatures, this can and does result in PECS closing custody suites on occasions where there are no alternative options, or cases may be heard in alternative courts (see document below).



Cell temperature
flowcart - high tempe

7 Links to Heatwave Information, Advice and Resources

England

- [Adverse weather health plan](#)

England and Wales

- [Beat the heat: keep cool at home \(checklist\)](#)
- [Beat the heat- staying safe in hot weather](#)
- [Looking after children and those in early years settings during heatwaves - guidance for teachers and professionals](#)
- [Supporting vulnerable people before and during hot weather for Healthcare Professionals](#)
- [Supporting-vulnerable-people-before-and-during-hot-weather-social-care-managers-staff-and-carers](#)

Wales

- [Extreme Hot Weather: Public Health Wales](#)
- [Wales advice for the public during a heatwave](#)

7.1 Health Promotion Materials England and Wales

- [Throughout a heatwave keep yourself cool and hydrated](#)
- [Throughout a heatwave try to keep out of the heat](#)
- [During a heatwave help those who suffer from the heat](#)
- [Climate change hurts health](#)
- [Advice for older adults staying safe in the hot weather](#)
- [Heatwave health promotion posters](#)
- [Healthy pee is 1 to 3, 4 to 8 must hydrate poster](#)

7.2 Further Information

Please ensure your establishment is receiving up to date information. To sign up to receive alerts from the Met Office go to: [Weather-Health Alerting system registration form](#)

Regular updates on levels of particulate matter (PM₁₀ and PM_{2.5}), sulphur dioxide, nitrogen dioxide and ozone are available on <http://uk-air.defra.gov.uk/> which offers health advice to those who may be particularly sensitive to air pollution.

Any enquiries about this guidance can be directed to:

health@justice.gov.uk

HMPPS Public Health & Clinical Liaison
Health & Care Partnerships Team
Working in partnership