

Climate and Health Emergency Continuity Plan

Plan / template | FAC-PLN-002

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Title	Climate and Health Emergency Continuity Plan
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Replaces	None (new document)
Standards and criteria supported	Standard 2C, criterion 2C.7
Evidence basis	E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Set an early-warning trigger and an owner for each hazard.
2. Name the actions to keep services running: power, water, cooling, staffing, transfers.
3. Test the plan at least once a year and record the test (FAC-FRM-003).
4. Review the plan after each test, emergency, or change in risk.

Stop and get help straight away if: the plan has not been tested in the last 12 months.

1. Purpose

To keep essential services running and patients safe during a climate or health emergency [EC].

2. Scope

Applies to	Chief executive, facilities, clinical, infection prevention, and IT leads
Locations	The whole facility
When	In force at all times; tested yearly; reviewed after events
Does not apply to	Routine downtime, covered by FAC-PLN-001

3. Definitions and abbreviations

Term	Meaning in this SOP
Trigger	The signal, such as a weather warning or a power cut, that starts an action
Essential service	A service that must continue to keep patients safe

4. Background and rationale

The plan turns the assessment into actions. Criterion 2C.7 asks for a plan that is tested and reviewed, not written once and left.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Chief executive	Activates the plan and makes decisions	Executive
Facilities manager	Leads the operational response	Facilities
Clinical leads	Protect patients and move them if needed	Clinical
Communications lead	Informs staff, patients and authorities	Communication

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Contact list (staff, suppliers, authorities)	Current, checked quarterly	Available to leadership
Stored water, fuel, cooling and emergency supplies	Stock list (EC)	Checked monthly
Continuity test record (FAC-FRM-003)	Current	On file

7. Safety and infection prevention

- Relocating patients is done only by trained staff and by the clinical lead. Never move patients without a plan.

8. Before you start

- Check triggers, contacts and stock.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Set triggers and owners.	For each hazard, set the early-warning trigger and the owner.	A trigger converts a warning into action.
2	Act on triggers.	- On trigger: alert the chief executive, activate the service response, protect vulnerable patients, and confirm power, water and cooling. - Record each action and its time.	Time-stamped actions are the record.
3	Keep services running.	- Use back-up power, stored water, and cooling for medicines and sensitive equipment, as set in FAC-PLN-001. - If services cannot continue, decide transfers with clinical leads.	Plan the transfer before it is needed.
4	Test yearly.	- Run a desktop or live test at least yearly. - Record the test, the gaps found and the actions on FAC-FRM-003.	An untested plan is not a plan.
5	Review.	- Review the plan after each test, each emergency, and any change in risk. - Update and retell staff.	Lessons learned must be written into the plan.

Decision points

- If a test reveals a gap that stops an essential service, the chief executive decides on interim measures at once.

10. Special situations

Situation	What to do
Heatwave	Cool wards and storage for medicines, check patients at risk, and increase hydration support (EC).
Flood or storm	Protect equipment, power and records; plan access for staff.
Outbreak	Follow the infection prevention plan and national guidance.

11. Problems and escalation

- Activation and any patient transfer are reported to the chief executive and to the national authority as required.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Plan tested in last 12 months	Yes	Yearly	Facilities manager	Escalate to chief executive
Test gaps closed within set time	100%	After each test	Facilities manager	Escalate
Contact list checked	Quarterly	Quarterly	Communications lead	Correct

13. Records

Record	Where it is kept	Kept for
FAC-FRM-003 Continuity Test Record	Facilities file	{{facility.records_retention_years}} years
Activation log	Incident file	{{facility.records_retention_years}} years

14. Training and competence

- Staff are briefed on the plan at induction and at each test (EC).

15. Related documents

ID	Title	Relationship
FAC-SOP-003	Climate and Health Emergency Risk Assessment	Basis
FAC-FRM-003	Continuity Test Record	Used in step 4
EMG-SOP-001	Fire Safety and Evacuation	Related emergency
SOP-N17	Emergency Preparedness and Response Plan (generic)	Generic basis

16. Evidence

ID	Source and status
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus. Actions and thresholds are local decisions.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Approved by the ASF Expert Committee
1.1	{{document.effective_date}}	Internal quality review: corrected cross-references, status wording and document control	Approved by the ASF Expert Committee