



H & F Mencap

Hot Weather Policy and Procedure

Policy statement

This policy is to address hot weather and heatwave conditions. Severe heat is dangerous to all individuals. During a heatwave, temperatures remain abnormally high over an extended period, this prove fatal. Due to climate change heatwaves are likely to become more common in England. According to Public health England (2014) in August 2003, deaths among people aged over 75 rose by 60% within London alone. In 2003 the UK experienced heatwave conditions lasting 10 days and resulting in 2,000 deaths (The Met office, 2018).

Therefore as an organisation we need to consider the possible health risks to both clients and staff, we look to risk these risks by alerting people to the dangers and encouraging them to plan for instances of hot weather and/or heatwaves. According to HSE (2018) website the law does not state a minimum or maximum temperature for the workplace, it should however be reasonable. Thus as an organisation we seek to take action to ensure the comfort of the individual's accessing our services and our staff.

It is important to note that heatwaves can happen with little warning and illness and death can follow over the first few days. Considering this it is best to make the following preparations before high temperatures are forecast, in action going forward these should be complete by the beginning of June.

1. Definitions

1.1 What is a Heatwave?- A heatwave refers to a prolonged period of hot weather, which may be accompanied by high humidity(Met office, 2018).

2. Responsibilities

2.1 Trustees

- To take reasonable steps to satisfy themselves that the policy is being implemented.

2.2 Senior staff

- To act in accordance with the policy.

- To communicate the policy to other staff and volunteers and to ensure it is being implemented correctly.
- To monitor the performance of the policy and report to trustees
- To approve and review the policy on a regular basis

2.5 All Staff and volunteers

- To act in accordance with the policy

1. Who is at risk?

There are factors that increase risk during a heatwave.

These include:

- **Older age:** especially those over 75 years old, or those living on their own and who are socially isolated, or in a care home.
- **Chronic and severe illness:** including heart conditions, diabetes, respiratory or renal insufficiency, Parkinson's disease or severe mental illness.
- **Medications** that potentially affect renal function, sweating, thermoregulation or electrolyte balance can make this group more vulnerable to the effects of heat. (See point 8 for further information around medications that increase risk).
- Inability to adapt behaviour to keep cool: having Alzheimer's, a disability, being bed bound too much alcohol, babies and the very young.
- **Environmental factors and overexposure:** living in a top floor flat, being homeless, activities or jobs that are in hot places or outdoors and include high levels of physical exertion.

During hot weather, there is a risk of developing heat exhaustion and heatstroke and other heat-related illnesses including respiratory and heart problems. In a moderate heatwave, high-risk groups above are most likely to be affected. Nevertheless, during an extreme heatwave fit and healthy people can also be affected.

2. What are the risks?

The body normally cools itself using four mechanisms:

- radiation in the form of infrared rays;
- convection via water or air crossing the skin;
- conduction by a cooler object being in contact with the skin; and
- evaporation of sweat

When the temperature is higher than skin temperature, the only effective heat-loss mechanism is sweating. Meaning, any factor that reduces the efficiency of sweating such as dehydration, lack of breeze, tight-fitting clothes or certain medications can cause the body to overheat.

Young children produce more metabolic heat, have a decreased ability to sweat and have core temperatures that rise faster during dehydration.

Heat-related illnesses

The main causes of illness and death during a heatwave are **Respiratory and Cardiovascular diseases**. Additionally, there are specific heat-related illnesses including:

- **Heat cramps** – caused by dehydration and loss of electrolytes, often following exercise.
- **Heat rash** – small, red, itchy papules.
- **Heat oedema** – mainly in the ankles, due to vasodilation and retention of fluid.
- **Heat syncope** – dizziness and fainting, due to dehydration, vasodilation, cardiovascular disease and certain medications.
- **Heat exhaustion** – is more common. It occurs as a result of water or sodium depletion, with non-specific features of malaise, vomiting and circulatory collapse, and is present when the core temperature is between 37°C and 40°C. Left untreated, heat exhaustion may evolve into heatstroke.
- **Heatstroke** – can become a point of no return whereby the body's thermoregulation mechanism fails. This leads to a medical emergency, with symptoms of confusion; disorientation; convulsions; unconsciousness; hot dry skin; and core body temperature exceeding 40°C for between 45 minutes and eight hours. It can result in cell death, organ failure, brain damage or death. Heatstroke can be either classical or exertional (e.g. in athletes).

Public Health England (2014)

3. Reducing the risk before a heatwave

As heatwaves can happen suddenly, and rapid rises in temperature can affect vulnerable people rapidly. HF Mencap must make use of existing support plans to assess which individuals are at particular risk, and to identify what extra help they might need.

For projects supporting individuals:

- Manager should check that client support plans contain contact details for their GP, next of kin/family/carer.
- Staff should check that the individual's being supported is wearing weather appropriate clothing (e.g no heavy coats), ideally this would be light and loose-fitting clothing. Please discuss concerns with the individual and/or next of kin/family/carer. Report any concerns to manager.

Facilities

- Check that fridges and freezers work properly.
- Where relevant check that fans and air-conditioning work properly
- Indoor plants help to cool air
- All staff to report any concerns

4. During a heatwave

How to keep out the heat

- Where possible keep curtains or blinds on windows exposed to the sun closed while the temperature outside is higher than it is inside.
- Once the temperature outside has dropped lower than it is inside, open the windows.
- Water external and internal plants, and spray the ground outside windows with water (avoid creating slip hazards) to help cool the air. (However, check local drought water restrictions before using hosepipes).
- Individuals should stay out of direct sunlight, especially between the hours of 11.00am and 3.00pm.
- Advise individuals to stay in the shade and to wear hats, sunscreen, thin scarves and light clothing if going outside. Staff to support where appropriate.

5. How to keep body temperatures down

- Ensure that the person reduces their levels of physical exertion.
- Advise them to wear light, loose cotton clothes to absorb sweat and prevent skin irritation.
- Suggest that they sprinkle their clothes with water regularly, and splash cool water on their face and the back of their neck. A damp cloth on the back of the neck helps temperature regulation.
- Recommend cold food, particularly salads and fruit with a high water content.
- Advise them to drink regularly, preferably water or fruit juice, but avoid alcohol and caffeine (tea, coffee, colas).
- Monitor their daily fluid intake, particularly those not always able to drink unaided.

6. When supporting individual staff should be alert to systems of heat exhaustion and heatstroke they should also look out for:

Signs and symptoms that could be attributed to other causes, such as:

- difficulty sleeping, drowsiness, faintness and changes in behaviour;
- increased body temperature;
- difficulty breathing and increased heart rate;
- dehydration, nausea or vomiting; or
- worsening health problems, especially of heart or respiratory system

7. Emergency treatment

- If you suspect someone has heatstroke, call 999. While waiting for the ambulance: take the person's temperature; if possible, move them somewhere cooler; cool them down as quickly as possible by giving them a cool shower, sprinkling them with water or wrapping them in a damp sheet, and using a fan to create an air current; encourage them to drink fluids, if they are conscious; **do not give aspirin or paracetamol.**

8. Further information on medications

MEDICATIONS LIKELY TO PROVOKE OR INCREASE THE SEVERITY OF HEATSTROKE		
Those causing dehydration or electrolyte imbalance		Diuretics, especially loop diuretics Any drug that causes diarrhoea or vomiting (colchicines, antibiotics, codeine)
Those likely to reduce renal function		NSAIDS, sulphonamides, indinavir, cyclosporin
Those with levels affected by dehydration		Lithium, digoxin, antiepileptics, biguanides, statins
Those that interfere with thermoregulation:	by central action	Neuroleptics, serotonergic agonists
	by interfering with sweating	Anticholinergics – atropine, hyoscine – tricyclics – H1 (first generation) antihistamines – certain antiparkinsonian drugs – certain antispasmodics – neuroleptics – disopyramide – antimigraine agents
		Vasoconstrictors
		Those reducing – beta blockers cardiac output – diuretics
	by modifying basal metabolic rate	Thyroxine
Drugs that exacerbate the effects of heat		
by reducing arterial pressure		All antihypertensives Antianginal drugs
Drugs that alter states of alertness (including those in section 4 (Central Nervous System) of the British National Formulary)- particularly 4.1 (Hypnotics and Anxiolytics) and 4.7 (Analgesics).		

Public Health England (2014)



References:

The Met Office (2018) Heatwave. Available at: <https://www.metoffice.gov.uk/learning/temperature/heatwave>. (Accessed 03/08/2018).

Public Health England (2014) Plan for England Supporting Vulnerable People. Available at: <https://www.ashford.gov.uk/media/2626/heatwave-plan-for-england-supporting-vulnerable-people-advice-for-health-social-care-professionals.pdf> (Accessed 03/08/2018).

HSE (2018) Temperature. Available at: <http://www.hse.gov.uk/temperature/faq.htm> (Accessed 07/08/2018).