# Response checklist: Heat

The purpose of this document is to support ongoing assessment and action during a heat event. This document should be used to assess readiness and risk within the facility every day if necessary (more often if desired). Please contact CoC Operations Director or LTCEOC@vch.ca if the temperature inside the facility is not falling despite implementation of the Heat Plan.

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| INFRASTRUCTURE | PROGRESS | | ACTIONS REQUIRED | |
| **Awareness of information on building and supplies, including:** | | | | |
| Staff are aware of cooling locations and hot spots throughout the building | | ☐ Yes  ☐ No  ☐ N/A | |  |
| Staff are aware of private cooling devices available should they be required | | ☐ Yes  ☐ No  ☐ N/A | |  |
| Staff are aware of other important information (please specify): | | ☐ Yes  ☐ No  ☐ N/A | |  |
| **Equipment** | | | | |
| Electrical equipment is in working order | ☐ Yes  ☐ No  ☐ N/A | |  | |
| All non-essential electrical and heating equipment (e.g. computers, lights) are turned off | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Heat generating equipment (kitchen, laundry) is being used during cooler parts of the day (night/evening) | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Emergency generator is operational | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Fuel for Emergency generator is available | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Maintenance | Progress | | Actions to be taken | |
| Contact information for on-call personnel available to respond to AC unit malfunction after hours is posted or visible (off hours staff know where to locate this) | ☐Yes  ☐ No  ☐ N/A | |  | |
| All AC units are in working order. | ☐ Yes  ☐ No  ☐ N/A | |  | |
| If AC units are not in working order, calls have been placed for maintenance. | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Kitchen AC unit and exhaust fans are in working order. | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Ice machines and water fountains are in working order | ☐ Yes  ☐ No  ☐ N/A | |  | |
| AC units have been checked – no dams have been identified | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Temperature | Progress | | **Actions to be taken** | |
| Indoor temperature is being monitored | ☐ Yes  ☐ No  ☐ N/A | |  | |
| If there is reason to believe indoor temperatures may approach or exceed 26°C (e.g. a heat alert is in effect, previous measured temperatures have been increasing, etc.), leadership and charge staff are aware of cooling measures to be implemented per heat plan. | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Efforts to reduce solar heat have been implemented throughout the facility (curtains have been pulled, blinds have been closed, room darkening shades, etc.) | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Operations | Progress | | Actions to be taken | |
| Information regarding the heat plan is shared at all staff huddles and shift changeover | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Leaders and charge staff are aware of location of contact numbers for:   * external contractors * evacuation plans * staffing plans and staff fan out lists * off hours leadership support | ☐ Yes  ☐ No  ☐ N/A | |  | |
| Security risks and safety considerations related to leaving doors and windows open for airflow daily have been evaluated | ☐ Yes  ☐ No  ☐ N/A | |  | |

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| Clinical decision support tools related to hot weather conditions have been implemented   * hydration * hypodermoclysis\*   \*Hypodermoclysis is only be used when other means of hydration (i.e. increasing oral intake) have been attempted or are not feasible. Hypodermoclysis will only be used when it aligns with the resident’s goal of care and any Advance Care Planning (ACP) or Medical Orders Scope of Treatment (MOST) documents | ☐ Yes  ☐ No  ☐ N/A |  |
| Hydration stations are in use and regularly refreshed throughout the care home   * water and/or other cool, non-alcoholic, non-caffeinated beverages are being offered to residents and staff regularly through all shifts * there is an appropriate amount of hydration station supplies and replenish as needed * proactively offer hydration during medication administration and daily care * use a documented schedule for hydration rounds * self-serve beverage stations are available in common area(s) | ☐ Yes  ☐ No  ☐ N/A |  |
| Menu changes have been implemented | ☐ Yes  ☐ No  ☐ N/A |  |
| Recreation plans have been adjusted (factor in the need for air-conditioned transportation) | ☐ Yes  ☐ No  ☐ N/A |  |
| Supplies for cooling and hypodermoclysis are available. If not available, supplies are reordered. | ☐ Yes  ☐ No  ☐ N/A |  |
| Temperature in medication room does not present any risk to the integrity or stability of the pharmaceuticals | ☐ Yes  ☐ No  ☐ N/A |  |

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| Clinical | Progress | Actions to be taken |
| **Resident Considerations** |  |  |
| Residents are assessed for symptoms of heat illness while completing regular resident assessments. Checks should include:   * changes in oral cavity – insufficient saliva or unusual dry mouth, difficulty speaking and/or swallowing, nausea and vomiting * changes in behavior – headaches, unusual fatigue, sleepiness, weakness * skin moisture – signs of heat rash, fungal rash * vital signs – temp, heart rate, blood pressure * difficulty breathing * changes in level of responsiveness * changes in food/fluid intake are recorded and reported. dietitian is consulted as required. * resident output is monitored and recorded (e.g. voiding times or number of soiled pads) * assess residents for dehydration risk – refer to FH document for UTI, Appendix H * identify and plan to care for residents with heat-related illness in long term care homes   Monitor, evaluate and reassess fluid requirements as needed based on signs and symptoms in all residents with a particular focus on those assessed as being at high risk, including residents receiving enteral nutritional therapy, Thickened fluids, fluid restrictions, and those residents who require assistance with eating and drinking | ☐ Yes  ☐ No  ☐ N/A |  |
| Plan is implemented to ensure that the highest risk residents are assessed more frequently. | ☐ Yes  ☐ No  ☐ N/A |  |
| Care team members are following updated care plans (which have been updated for heat related illness) goals of care | ☐ Yes  ☐ No  ☐ N/A |  |
| Heat-related information is shared during all shift changes. Implement additional huddles as required | ☐ Yes  ☐ No  ☐ N/A |  |
| Residents are rotated through cooling zones using a documented schedule | ☐ Yes  ☐ No  ☐ N/A |  |
| Residents are offered wet cooling cloths and misting as needed | ☐ Yes  ☐ No  ☐ N/A |  |
| Residents are being offered additional fluids through hydration stations, as well as alternatives such as fruit, popsicles, ice chips, and Jell-O. Fluids are thickened as per resident care needs | ☐ Yes  ☐ No  ☐ N/A |  |
| Families are encouraged to take residents to cooler environments off site | ☐ Yes  ☐ No  ☐ N/A |  |
| Residents who choose to go outside have access to shaded areas | ☐ Yes  ☐N o  ☐ N/A |  |
| Residents to wear hats and sunglasses when outside | ☐ Yes  ☐ No  ☐ N/A |  |
| Recreation staff are observing and monitoring residents frequently for heat exhaustion and overheating, consulting with nursing staff as needed | ☐ Yes  ☐ No  ☐ N/A |  |
| **Staff Considerations** | **Progress** | **Actions to be taken** |
| Staff are encouraged to drink fluids and extra fluids are easily accessible | ☐ Yes  ☐ No  ☐ N/A |  |
| Staff are permitted to wear cooler, lighter clothing or uniforms at work (if applicable) | ☐ Yes  ☐ No  ☐ N/A |  |
| Temperature in staff break rooms is assessed for comfort | ☐ Yes  ☐ No  ☐ N/A |  |
| Staff are offered PPE “breaks” during extreme heat events (i.e. remove medical mask when it is safe to do so) | ☐ Yes  ☐ No  ☐ N/A |  |
| Staff are aware of employee resources to cope with heat e.g. wellness website, posters, fact sheets etc. | ☐ Yes  ☐ No  ☐ N/A |  |
| Staff are monitoring resident responses to changes in care plan and daily routine   * any reactions to implementation of emergency plans * notify the nurse/team lead if any changes in condition or behavior are observed | ☐ Yes  ☐ No  ☐ N/A |  |
| Communication | Progress | Actions to be taken |
| Residents, staff, family members and volunteers are kept up-to-date daily on heat event. | ☐ Yes  ☐ No  ☐ N/A |  |
| Resources are available in common areas outlining signs and symptoms of heat related illness | ☐ Yes  ☐ No  ☐ N/A |  |
| Heat related signage is posted | ☐ Yes  ☐ No  ☐N/A |  |
| Families and volunteers contribute to heat event response by:   * visiting more regularly * taking loved ones out to cooler locations | ☐ Yes  ☐ No  ☐ N/A |  |
| Education | Progress | Actions to be taken |
| Staff knowledge is assessed and the need for additional education is evaluated | ☐ Yes  ☐ No  ☐ N/A |  |
| Education is offered every day and at every shift change regarding:   * roles and responsibilities in current heat event * prevention and management of dehydration, heat exhaustion and heat stroke. * risk factors for heat related illnesses * signs and symptoms of various heat related illnesses * hypodermoclysis * urinary tract infections | ☐ Yes  ☐ No  ☐ N/A |  |
| Posters are placed in in visible locations for staff (e.g. staff room, nursing station, washrooms) | ☐ Yes  ☐ No  ☐ N/A |  |