

## 1. Policy Statement

---

This protocol provides clear, evidence-based guidance for teaching staff and school leadership on managing student participation in outdoor sport and physical activity during hot weather conditions. It applies to all planned outdoor exertional activities involving students aged 11+, including:

- \* Team sports (football, rugby, hockey, netball, basketball, etc.)
- \* Athletics and cross-country running
- \* Physical education lessons involving sustained outdoor activity
- \* Duke of Edinburgh expeditions and other outdoor residential activities
- \* Any other structured physical activity taking place outdoors

This protocol should be read alongside the school's general health and safety policy and emergency management plan. It does not override individual healthcare plans for students with identified medical conditions.

**Key principle:** *Student safety always takes precedence over completing a session, winning a fixture, or meeting a curriculum target. When in doubt, apply the next risk level up.*

**Disclaimer:** *This protocol provides general guidance based on current evidence and is intended to support, not replace, professional judgement. Individual circumstances - including a student's medical history, fitness level, or pre-existing conditions - may require a different approach. If you are in any doubt about a student's condition, seek medical assistance immediately. Meliora Medical accepts no liability for decisions made on the basis of this guidance.*

## 2. Aims

---

This protocol aims to:

- \* Protect the health and wellbeing of all students during hot weather
- \* Enable teaching staff to make consistent, evidence-based decisions about activity levels
- \* Ensure all staff can recognise and respond appropriately to heat-related illness
- \* Set clear expectations for roles and responsibilities before, during and after outdoor activity in warm conditions
- \* Meet the school's duty of care obligations during hot weather events

## 3. Roles and Responsibilities

---

### 3.1 Senior Leadership / Head of Sport

- \* Monitor weather forecasts during warm periods; issue advance alerts to staff when HIGH or EXTREME conditions are forecast
- \* Approve cancellation of scheduled outdoor sporting events when conditions exceed HIGH risk
- \* Ensure first aid resources (ice packs, cold water, cooling equipment) are stocked and accessible for all outdoor activities
- \* Communicate with parents and carers when HIGH or EXTREME conditions are anticipated
- \* Review and update this protocol annually before the start of each summer term

### 3.2 PE and Activity Teachers / Coaches

- \* Check temperature and relative humidity forecast before every outdoor session using a reliable service (e.g. Met Office app, BBC Weather)
- \* Apply the traffic light decision framework (Appendix A) to determine the appropriate activity level for that session
- \* Brief students on hydration requirements and heat illness warning signs before any activity in warm or hot conditions
- \* Monitor students continuously throughout the activity for signs of heat illness
- \* Ensure cold water is freely available at all times during outdoor sessions
- \* Record any session modifications or cancellations due to heat

### 3.3 School First Aider

- \* Maintain adequate supplies for heat illness management: ice packs, cold water, towels, spray bottles
- \* Be aware of any students with pre-existing conditions that increase heat risk (see Section 5.4)
- \* Respond promptly to any report of a student with heat-related symptoms
- \* Liaise with emergency services immediately if heat stroke is suspected

### 3.4 All Staff

- \* Know the key warning signs of heat exhaustion and heat stroke (Section 6)
- \* Report any student showing signs of heat illness to the activity teacher and first aider without delay
- \* Never leave an unwell student unattended

## 4. Risk Assessment and Planning

---

### 4.1 Before Every Outdoor Session

Before any outdoor session during warm weather, the activity lead should:

1. Check the temperature and relative humidity forecast for the time of the session using the Met Office app or BBC Weather.
2. Apply the traffic light framework (Appendix A) to determine the appropriate activity level.
3. Confirm that first aid resources are available and accessible at the activity location.
4. Check whether any students in the group have conditions that increase their heat risk (see Section 5.4).
5. Identify the nearest cool indoor space and ensure it can be accessed quickly if conditions worsen.

### 4.2 Environmental Risk Factors

Temperature alone does not determine heat risk. The following factors can significantly increase risk even when the air temperature appears manageable:

- \* **Humidity:** High humidity prevents sweat from evaporating, sharply reducing the body's ability to cool itself. When relative humidity exceeds 50%, apply the next risk level up from the temperature alone.
- \* **Direct sun:** Outdoor activity in full sunlight substantially increases heat load compared with the same temperature in shade or on an overcast day.
- \* **Wind:** A breeze aids evaporative cooling. Still, hot air is more hazardous than the same temperature with airflow.
- \* **Time of day:** Peak radiant heat is typically between 11am and 3pm. Schedule intensive activity before 10am or after 4pm wherever possible.
- \* **Sudden heat onset:** The first hot days of a warm spell carry the highest risk – students will not yet be physiologically acclimatised to the heat. Apply greater caution at the start of a hot period.

### 4.3 Student Risk Factors

The following students are at increased risk of heat illness and require closer monitoring during warm weather activity:

- \* Students who have been recently unwell, particularly with fever or gastroenteritis
- \* Students taking medications that affect hydration or sweating (e.g. some antihistamines, diuretics, certain antipsychotics or antidepressants – check with school nurse if uncertain)
- \* Students with a documented history of previous heat illness

- \* Students with obesity, cardiovascular conditions, asthma, or kidney disease
- \* Students who have recently arrived from a cooler climate or returned from a prolonged break from training

**Note:** Research suggests that healthy teenagers are not at greater physiological risk of heat illness than adults. However, adolescents may be less likely to recognise early symptoms or voluntarily slow down. Closer monitoring and active prompting to drink and rest remains important.

## 5. Prevention Measures

---

### 5.1 Hydration

Dehydration significantly increases the risk of heat illness. Teachers should:

- \* Encourage students to drink approximately 500 ml of water in the 1-2 hours before any outdoor activity in warm conditions
- \* Ensure cold water is freely available at all times during outdoor sessions – students should not need to ask for it
- \* Enforce regular drinking breaks every 15-30 minutes depending on conditions (see traffic light table, Appendix A)
- \* After activity, encourage rehydration before students leave the session
- \* Water is the preferred drink. Caffeinated drinks (energy drinks, coffee, cola) should be avoided before and during activity as they can accelerate fluid loss

### 5.2 Clothing

- \* Require lightweight, loose-fitting and light-coloured clothing for outdoor activity in warm weather
- \* Hats are mandatory for all outdoor sessions when conditions are MODERATE or above
- \* Sun cream (minimum SPF 30) should be applied before outdoor sessions; remind students to bring their own
- \* Remove unnecessary equipment (helmets, shoulder pads, heavy bibs) during all rest breaks

### 5.3 Scheduling and Acclimatisation

- \* Avoid scheduling intensive outdoor activity during 11am-3pm in hot weather wherever possible
- \* At the start of a warm spell, reduce session intensity for the first 3-5 days to allow students to begin physiological acclimatisation
- \* Students returning from holidays or extended breaks should be given a graduated return in warm conditions

- \* Back-to-back hot days should prompt a progressive reduction in session intensity and duration
- \* Consider moving sessions to a shaded pitch, an indoor hall, or an early morning / evening slot during sustained hot weather

## 5.4 Students with Additional Health Needs

Students with identified health conditions should have an individual healthcare plan. In warm weather:

- \* Confirm with the SENCO or school nurse whether any students in the group have heat-relevant conditions before the session
- \* Ensure these students are identified to the activity teacher before outdoor sessions in warm weather
- \* Apply closer monitoring throughout the activity, regardless of the overall risk category
- \* Consider whether activity modification beyond the standard protocol is appropriate for individuals

# 6. Recognising and Managing Heat-Related Illness

---

Heat-related illness exists on a spectrum from mild symptoms to a life-threatening medical emergency. The two presentations most likely to occur during school activity are heat exhaustion and heat stroke.

## 6.1 Heat Exhaustion

Heat exhaustion occurs when the body is struggling to maintain normal temperature but has not yet lost its ability to do so. It requires prompt action but is not immediately life-threatening if recognised and treated quickly.

### Signs and symptoms

- \* Headache and dizziness
- \* Nausea or vomiting
- \* Pale, clammy or sweaty skin
- \* General weakness and fatigue
- \* Rapid or weak pulse
- \* Muscle cramps
- \* Fainting or feeling faint
- \* Core temperature usually below 40 degrees C
- \* No signs of confusion, agitation or loss of coordination

## Management

1. Stop the activity immediately. Move the student to a cool, shaded area.
2. Lay them flat with their legs elevated.
3. Remove excess clothing and any equipment (helmets, pads, heavy kit).
4. Apply cool water to the skin: use wet cloths, a spray bottle, or ice wrapped in a towel.
5. Give sips of cool water if the student is conscious and able to swallow safely.
6. Monitor closely. Most students improve within 20-30 minutes with this treatment.
7. If symptoms do not improve within 30 minutes, or if any signs of heat stroke develop (see below), call 999 immediately.
8. Contact parents/carers and complete an incident report.

## 6.2 Heat Stroke – Medical Emergency

Heat stroke occurs when the body's temperature regulation fails completely. It carries a risk of death or permanent harm if not treated with extreme urgency. Any collapse or confusion in a hot environment should be treated as suspected heat stroke until proven otherwise.

**CRITICAL RULE:** *If you are unsure whether a student has heat exhaustion or heat stroke – treat it as heat stroke and call 999 immediately.*

### Signs and symptoms

- \* Confusion, agitation, or irrational/aggressive behaviour
- \* Unsteadiness or staggering
- \* Collapse or loss of consciousness
- \* Seizure
- \* The student may stop sweating despite the heat
- \* Core temperature is usually above 40 degrees C
- \* Signs of brain involvement (confusion, altered behaviour) distinguish this from heat exhaustion

### Management

1. Call 999 immediately. State suspected heat stroke. Do not wait to see whether symptoms improve.
2. Move the student to the coolest available area – a room with air conditioning if possible.
3. Remove as much clothing as possible.
4. Apply ice or ice-cold water aggressively to the skin, particularly the neck, armpits and groin where large blood vessels run close to the surface.
5. Fan the student continuously to accelerate evaporative cooling.

6. If unconscious, place in the recovery position and monitor airway, breathing and circulation.
7. Do not leave the student unattended at any point.
8. Continue aggressive cooling until the ambulance arrives. "Cool First, Transfer Second" – do not stop cooling in order to transport sooner.
9. Contact parents/carers as soon as the emergency response allows.

## 7. Record Keeping and Protocol Review

---

### 7.1 Incident Recording

Any episode of heat-related illness must be recorded in the school's incident log. Records should include:

- \* Date, time and location of the incident
- \* Type and duration of activity being undertaken
- \* Environmental conditions (temperature, humidity if known, sunny/overcast, wind)
- \* Student's symptoms and approximate time of onset
- \* Actions taken and the student's response
- \* Whether emergency services were called, and the outcome
- \* Whether parents/carers were contacted and when

### 7.2 Activity Modifications

Where outdoor activities are cancelled, shortened or moved indoors due to hot weather, this should be noted briefly in the session record along with the conditions that prompted the decision.

### 7.3 Annual Review

This protocol should be reviewed annually before the start of each summer term and updated to reflect:

- \* Any heat-related incidents during the preceding year
- \* Updated guidance from Sports Medicine Australia, UK Sport, or Public Health authorities
- \* Changes in school staffing, facilities or organisation

*Next scheduled review: June 2027.*

## 8. References

---

This protocol draws on the following evidence-based sources:

- \* [Sports Medicine Australia. Extreme Heat Risk and Response Guidelines \(2025\)](#)
- \* [SMA Sports Heat Tool – real-time location-based heat stress risk calculator](#)
- \* [Queensland Department of Education. Managing Excessive Heat in Schools \(updated January 2026\)](#)
- \* [Victorian Department of Education. Managing Extreme Heat: Policy \(updated October 2025\)](#)
- \* [Tartarini F et al. \(2025\). The SMA extreme heat risk and response guidelines and web tool. J Sci Med Sport 28\(9\):690-699](#)

---

### **Appendix A: Hot Weather Quick Reference Card**

*The one-page quick reference card on the following page is designed for display in changing rooms, sports halls and staffrooms, and for distribution to activity teachers. It summarises the traffic light decision framework and the key first aid steps for heat illness.*

RISK LEVEL	WHEN TO APPLY	ACTIVITY GUIDANCE	COOLING & PREVENTION
<b>LOW</b>	<b>Below 25°C</b> Mild, low humidity, breeze or cloud	Normal activity permitted.	Water freely available at all times. Hats and sun cream required outdoors in direct sun. Lightweight, breathable clothing.
<b>MODERATE</b>	<b>25–30°C</b> Warm, some humidity or direct sun	Reduce intensity for sustained running or contact sport. Minimum 15 min rest per 45 min of activity (eg 15 min in every hour) Extend scheduled breaks by 10 min; seek shade during all breaks. Avoid vigorous activity during 11am–3pm where possible.	Cold water - enforce drinking every 15–20 min. Spray bottles or wet cloths during breaks. Hat, sun cream and light clothing mandatory. Consider moving to shaded or indoor space.
<b>HIGH</b>	<b>31–35°C</b> <b>Or</b> <b>&gt;28°C with humidity &gt;50%</b>	Significantly shorten sessions - maximum 45 min. Low intensity only: walking, light drills, brief skills work. 10 min rest per 20 min of activity (eg 10min in every half hour) Move sessions indoors or to full shade wherever possible. Postpone or cancel competitions and endurance events.	Active cooling: ice packs to neck/wrists during every break. Enforce cold water drinking - do not rely on thirst. Wet sponges or misting during all rest periods. Watch all students closely for warning signs (see below).
<b>EXTREME</b>	<b>Above 35°C</b> OR heatwave warning issued OR >36°C + humidity >30%	<b>SUSPEND</b> all vigorous outdoor activity immediately. Move students indoors or to maximum available shade. Only essential, minimal-movement activity permitted indoors. Resume outdoor activity only once conditions improve.	Maximum cooling: air conditioning, fans, cold water. Continuous hydration - water every 10–15 min. Apply ice packs / cool wet cloths to all students at breaks. Monitor all students continuously - be ready to respond.

**Note: Humidity and direct sun significantly increase risk - when in doubt, apply the next risk level up**

## HEAT EXHAUSTION - STOP ACTIVITY

### Signs to look for:

Headache · Dizziness · Nausea / vomiting · Pale, clammy skin  
· Weakness  
Rapid pulse · Muscle cramps · Fainting · Core temp usually below 40°C

### What to do:

1. Move to shade or cool area. Lay flat with legs elevated.
2. Remove excess clothing and equipment (helmets, pads).
3. Apply cool water to skin. Use wet cloths or spray bottle.
4. Give sips of cool water if the student is conscious.
- 5. Monitor closely. If symptoms worsen - CALL 999.**

## HEAT STROKE - CALL 999 IMMEDIATELY

### Signs to look for:

Confusion/agitation · Staggering · Collapse · Seizure  
· Reduced consciousness · Core temp usually above 40°C  
Note: With heat stroke people may STOP sweating despite heat

### What to do:

- 1. CALL 999 NOW. Do not wait. This is a medical emergency.**
2. Move to coolest available area (air conditioning if possible).
3. Remove clothing. Ideally immerse in ice-cold water or apply ice to the neck, armpits, groin.
4. Fan the person continuously.
- 5. Do NOT leave unattended. Keep cooling until ambulance arrives. "Cool First, Transfer Second."**