

READY, SET, GO. CHECKLIST - EXTREME HEAT

Hot temperatures, particularly during an extended heat wave, can make it difficult to ensure the safety and comfort of residents and staff. Heat waves can also lead to power outages and disruptions to essential services. Facilities should proactively develop and implement a heat management strategy before a crisis occurs. This approach helps minimize risks, prevent disruptions, and ensure safety and efficiency in demanding situations. Here are some steps you can take now to prepare, manage, or respond to a heat wave.

GET READY	 Define specific triggers for activating your heat-related mitigation plan. Establish a process for monitoring for heat risk (e.g., use <u>HeatRisk Tracking</u> or local emergency alert systems). Follow or adjust your preventive maintenance schedule of emergency equipment. Review supply par levels and capacity of vendors (i.e., carbon monoxide detectors, cool menu options and fans). Consider how other factors, such as infection outbreaks, might affect your use of equipment and resident placement. Monitor federal, state, and regulatory requirements and pending legislation on heat-related hazards, including: OHSA National Emphasis Program – Outdoor and Indoor Heat-Related Hazards State Operations Manual Appendix PP – Guidance to Surveyors for Long-Term Care Facilities Assess staff competency to recognize and respond to heat-related illnesses and emergencies. Plan for adjustments to meal service to include hydration, cool food options, and staff safety. Consider the risks and benefits of evacuating vs. shelter-in-place decisions.
GET SET	 Conduct staff training and competency assessments. Modify schedules for assessing wandering risk. Verify supplies at par level for emergencies. Conduct and document drills and adjust plans based on lessons learned. Review communication plans and contact lists for current contact information.
GO!	 Activate policies and plans that deal with extreme temperatures. Assess comfort, hydration, signs, symptoms, and consequences of heat cramps, exhaustion, and stroke. Monitor room temperatures. Provide patient education on the safe use of fans and wearing light clothes. Check on staff and patients regularly to ensure they are cool and hydrated. Report any change of condition to the charge nurse or physician. Decrease physical or outside activities. Adjust menus as needed, incorporating items such as cold plates, salads, and hydration. Increase monitoring of residents at risk for elopement.
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