Introduction
This document outlines steps to take throughout the year in preparation for extreme heat. This guidance outlines important administrative tasks to be accomplished leading up to potential extreme heat. These tasks can be delegated as appropriate to staff members by the Heat Alert Officer.

The steps below may not be feasible for all clinic sites. Prioritize what can be accomplished based on your clinic’s needs, capacity, and resources.

Steps:

- Identify high risk patients and flag their charts.
  - Some important factors make patients more susceptible to the negative health effects of heat, including:
    - Age - particularly children under 5 and people over 65
    - Pregnancy
    - Chronic medical problems (eg: diabetes, heart disease, chronic kidney disease, chronic obstructive pulmonary disease (COPD), etc.)
    - Employment - working outdoors and / or working in manual labor jobs
    - Socioeconomic status - low-income status, living in a low-income neighborhood, or being unhoused
    - Social isolation
    - Transportation barriers
  - Check with your local health department to see if your city or town has heat vulnerability maps. These can help you understand your patients’ level of vulnerability based on where they live. You can also use it to identify whether your clinic is in a geographically vulnerable area.
  - Refer to Provider Guidelines for patients with specific medical conditions and taking medications that make them more vulnerable to extreme heat.
  - Lack of air conditioning in the home presents a significant risk for some patients
    - If there is no air conditioning in the home or the patient cannot afford to use the air conditioner, the patient may qualify for cooling assistance.

- Plan to educate patients and their caregivers about heat illness prevention and signs of heat illness.
  - Incorporate heat into the clinic’s existing patient education process.
  - Advise patients with electrically powered medical equipment to register with the local utility company’s power restoration program, if available.
    - Draw on your clinic’s existing resources for advising patients on power outages in emergencies. See this resource for additional details.
  - Identify family or caregivers that can remotely check on high risk patients during a
Heatwave and keep these details updated in the chart. Social isolation is a risk factor for heat-related illness. Clinics should collaborate with family or caregivers for regular patient check-ins beyond the regular checks conducted by the clinic.

- See patient education materials for disease-specific concerns.
- See Extreme Heat for Patients.

Ensure organizational preparedness.

- Put heat wave preparedness on the meeting agenda for late winter / early spring.
  - Consider scenario-based discussions or tabletop exercises involving staff at all levels.
  - Ensure staff know how to protect themselves and their families from heat-related illness and conduct training as appropriate.
  - Communicate any possible changes in roles and responsibilities that might occur as a result of the extreme heat event. These may already be outlined in the clinic’s existing emergency plan.

- Integrate heat emergencies into your existing emergency patient communications plan. If you do not have an existing emergency communications plan, see communications resource.

- Prepare for power outages:
  - See this toolkit’s Power Outage Guidance for additional information about power outages at your facility.

- Consider occupational safety issues. Ensure staff have access to sufficient water for hydration and a cool place to work and take breaks. Where the work environment is hotter, longer breaks and increased water intake may be necessary before it is safe for the employee to return to work.

- Connect with existing community organizations, government, or NGO partners that would be able to support the clinic or the patients during extreme heat.

- Connect with the local health department to make sure the clinic is on all important messaging lists for heat-related communications.

This guidance has been adapted from the NYC Health “Heatwave Guidance for Service Providers” document.