



Establishing a Wildfire Action Plan Providers

Below is guidance to help you prepare for conversations with your patients that will inform completion of the “Wildfire Action Plan” included in this toolkit. As you review the topics below, consider sharing the accompanying “Wildfire Tip Sheet” with patients.

1. Make sure they know the risks of wildfires and wildfire smoke.

Discuss with your patient how wildfires may affect their health. You can find information to discuss in the “Wildfires and Health” document.

2. Assess if and how they access weather, wildfire, and air quality index (AQI) reports.

Ask: Do you know how to learn whether there is a fire or smoke near where you live?

If not, you can suggest their phone weather app, their local news television station or [fire.airnow.gov](https://www.fire.airnow.gov). For more detailed instructions, you can provide the “Wildfire Tip Sheet” handout.

3. Assess their home environment for indoor air pollution sources.

In guidance about actions to take in the event of wildfire smoke or elevated AQI, consider whether a patient may be exposed to high levels of indoor air pollution such as through tobacco smoke, wood fires, candles, incense, or cleaning products. Cooking can also release air pollutants, especially cooking with a gas range. Exhaust hoods for stoves should be used if available.

If a patient’s home has a forced air system (i.e., air gets blown into rooms through vents), this may increase the delivery of outdoor air pollution indoors, even with air filtration. If the AQI is over 50, closing windows may help prevent outdoor air pollution getting inside, but this may also increase heat exposure, especially if no air conditioning is available.

Some patients may have indoor air filters. Portable indoor air purifiers have a wide range of capabilities in filtering out air pollutants. The filter should be the right size for the square feet of the room it operates in.

Air purifiers typically come with either a MERV (minimum efficiency reporting value) rating or are HEPA certified. Ideally, patients will have an air filter with a MERV rating of at least 13, which should remove at least 60% of particulate matter 2.5 microns in diameter or smaller. HEPA filters should remove even more.

Ask: Do you use an air filter in your home? If so, what kind is it and where does it sit?

4. Make a plan for each AQI level based on a patient’s health status and indoor air quality.

You can review the “Wildfire Action Plans” together with your patients and complete section 2 based upon the patient’s health status and life circumstances.

Options for a provider to select for a patient on the action plan include:

- safe to be outdoors (for AQI<50)
- limit time outdoors to no more than a few hours per day
- try to stay indoors until the air is safer
- keep windows and doors closed
- use an indoor air filter
- wear an N95, KN95, or P100 mask, especially outdoors
- stay in a clean air room
- evacuate to a location with better air quality

On the action plan, for each AQI range (e.g., 0-50, 51-100, etc.), you can select the actions you deem most appropriate based upon your knowledge of an individual patients' medical conditions, access to a clean air room, ability to evacuate, and other factors. More guidance on choosing appropriate actions can be found in the accompanying toolkit document titled "Wildfires and Health".

5. Determine their likelihood of following an evacuation order, and help them develop a plan to do so.

Ask: If there was an evacuation order, how likely would you be to evacuate?

For individuals who are unwilling to evacuate, especially individuals with chronic medical conditions or who rely on electric medical devices, such as ventilators, reviewing the risks from wildfire and wildfire smoke (see "Wildfire Tip Sheet") may help motivate them to evacuate when necessary.

Establishing a plan before an imminent threat from fire occurs can be lifesaving, especially if a patient requires assistance to evacuate. We encourage you complete section 5 of the "Wildfire Action Plants" with patients.

Ask: If you need to evacuate, where will you go?

Ask: If you need to evacuate, how will you do so? Will you need help to evacuate? If so, who will you call?

If a high-risk patient will not have the needed assistance to evacuate, a provider can ask permission to share the patient's contact information with local emergency managers.

Notes:

References

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