Indoor Heat Illness Prevention Plan

Department/Unit/Person(s) covered: _____

Location(s) covered: _____

Responsible Person/Supervisor: _____

Completed by: _____ **Title:** _____ **Date:** _____

Supervisors must develop and implement an Indoor Heat Illness Prevention Plan for workers who may be exposed to indoor temperatures equal to or greater than 82F for more than 15 minutes during any 60 minute period or above 95F for any period of time. "Indoor" refers to a space that is under a ceiling or overhead covering that restricts airflow and is enclosed along its entire perimeter by walls, doors, windows, dividers, or other physical barriers that restrict airflow, whether open or closed. All work areas that are not indoor are considered outdoor and covered by the UCSB Outdoor Heat Illness Prevention Program. Some workers may be covered by both.

Workers covered by this plan must complete general Heat Illness Prevention Training (https://www.learningcenter.ucsb.edu/login) and be trained on its specific procedures below prior to commencing work in accordance with the Cal/OSHA Indoor Heat Illness Regulation (8CCR3396). This plan must be readily available and in writing in both English and the language understood by the majority of the workers. These requirements do not apply to places of employment where employees are teleworking from a location of the employee's choice, which is not under the control of the employer or to emergency operations directly involved in the protection of life or property.

SECTION 1

How will workers be provided access to sufficient drinking water? (Workers must have access to fresh, pure, suitably cool potable drinking water free of charge. The water must be located as close as practicable to the areas where workers are working and in required indoor cool-down areas. Where drinking water is not plumbed or otherwise continuously supplied, it must be provided in sufficient quantity at the beginning of the work shift to provide one quart per worker per hour for drinking for the entire shift. Employers may begin the shift with smaller quantities of water if they have effective procedures for replenishment during the shift as needed to allow workers to drink one quart or more per hour. The frequent consumption of water must be encouraged.)

☐ **Plumbed water** ☐ **Water cooler** ☐ **Bottled water** ☐ **Other (please describe):**

How will workers be provided access to Cool-Down Areas? (Workers must have access to one or more cool-down areas at all times when temperatures exceed 82F. The cool-down area must be at least large enough to accommodate the number of workers on recovery or rest periods so that they can sit in a normal posture fully in the cool-down area without having to be in physical contact with each other. The cool-down area must be located as close as practicable to the areas where workers are working. The size of the cool-down area during meal periods must be at least large enough to accommodate the number of workers on the meal period who remain onsite. The temperature in indoor cool-down areas must be maintained at less than 82 degrees Fahrenheit, unless the employer demonstrates it is infeasible. Employers must allow and encourage workers to take a preventative cool-down rest in a cool-down area when workers feel the need to do so to protect themselves from overheating. Such access to cool-down areas must be permitted at all times.)

☐ **Cool-Down Area Location/s (within 10 minutes of work area):**

☐ **Vehicle with functioning A/C:**

☐ **Other (please describe):**

☐ **Not Feasible (please explain why and list feasible controls that will be implemented):**

How will a worker who takes a preventative cool-down rest be monitored? (Workers who take a preventative cool-down rest must; (1) be monitored and asked if they are experiencing symptoms of heat illness; (2) be encouraged to remain in the cool-down area; and (3) must not be ordered back to work until any signs or symptoms of heat illness have abated, and in no event less than five minutes in addition to the time needed to access the cool-down area.

- ☐ Observed by supervisor who has completed Heat Illness Prevention Training
- ☐ Observed by co-worker who has completed Heat Illness Prevention Training (buddy system)
- ☐ Regular check-ins using phone or other effective communication device (please describe):

How will heat waves be identified? (A heat wave is any day in which the predicted high outdoor temperature for the day will be at least 80 degrees Fahrenheit and at least ten degrees Fahrenheit greater than the average high daily outdoor temperature for the preceding five days)

- ☐ National Weather Service (https://www.weather.gov)
- ☐ National Integrated Heat Health Information System (heat.gov)
- ☐ ReadySBC Alerts (https://www.readysbc.org/)
- ☐ Other (please describe)

How will workers be effectively monitored during a heat wave where no effective engineering controls are in use to control the effect of outdoor heat on indoor temperatures? (All workers must be closely observed by a supervisor or designee during a heat wave.)

- ☐ Observed by supervisor who has completed Heat Illness Prevention Training
- ☐ Observed by co-worker who has completed Heat Illness Prevention Training (buddy system)
- ☐ Regular check-ins using phone or other effective communication device (please describe):

First Aid and Emergency Response Procedures for an employee experiencing Heat Illness Symptoms (If a supervisor observes, or any worker reports, any signs or symptoms of heat illness in any worker, the supervisor shall take immediate action commensurate with the severity of the illness. If the signs or symptoms are indicators of severe heat illness (such as, but not limited to, decreased level of consciousness, staggering, vomiting, disorientation, irrational behavior or convulsions), the employer must implement emergency response procedures. A worker exhibiting signs or symptoms of heat illness shall be monitored and shall not be left alone or sent home without being offered onsite first aid and/or being provided with emergency medical services in accordance with the employer's emergency response procedures including contacting emergency medical services.)

Condition	Symptoms	Response
Heat stroke is a severe medical emergency. Call 911, emergency medical services or get to a hospital immediately.	• High body temperature (above 103° F) • Red, hot skin • Rapid, strong pulse • Possible unconsciousness	• Call 911. • Get the victim to a cool place to lie down. • Cool victim quickly with cool water from a shower, hose or wet clothes whatever is available. • However, do not put an unconscious person in a bath or shower. • Do not give fluids. • Get medical treatment immediately.
Heat exhaustion	• Heavy sweating • Weakness • Cold, pale and clammy skin • Fast, weak pulse • Nausea or vomiting • Fainting	• Move to a cooler location. • Lie down and loosen your clothing. • Apply cool, wet clothes to as much of your body as possible. • Sip water. • If you have vomited and it continues, seek immediate medical attention.
Heat Syncope	• Fainting • Dizziness or light-headedness • Pale, cool, moist skin	• Have the individual sit or lie down in a cool, shaded or air-conditioned area and allow then to rest. • Encourage individual to drink water or other cool, nonalcoholic and non-caffeinated beverages.
Heat cramps	• Pains or spasms — often in the abdomen, arms or legs.	• Stop all activity and sit quietly in a cool place. • Drink clear juice or a sports drink. • Avoid strenuous activity for a few hours after the cramps stop. • Seek medical care for heat cramps that last longer than an hour. • Stretch the affected muscle to relieve the spasm
Heat Rash	• Clusters of red bumps on skin • Often appears on the neck, upper chest, and skin folds. • Skin can be itchy, have mild swelling, or feel like it is prickling or burning.	• Cool the skin and avoid exposure to the heat that caused this condition. • Apply a cold ice pack wrapped in a towel for up to 10 minutes. • Work in a cooler, less humid environment when possible. • Keep the affected area dry. • Dusting powder may be used to increase comfort. • Wear loose clothing, less layers of clothing, or clothing made of cotton.
Rhabdomyolysis (Muscle Breakdown)	• Muscle cramps, aches, swelling, or pains that are more severe than expected • Dark Urine (Brown, red, tea or cola-colored) • Reduced urine output • Feeling weak or tired.	• Stop activity and resting • Drink more liquids (water or electrolytes and other clear liquids preferred). • Seek immediate care at the nearest medical facility.

How will effective communication by voice, observation, or electronic means be maintained so that workers at the work site can contact a supervisor or emergency medical services when necessary? (An electronic device, such as a cell phone or text messaging device, may be used for this purpose only if reception in the area is reliable. If an electronic device will not furnish reliable communication in the work area, the employer will ensure a means of summoning emergency medical services.)

☐ Supervisor readily available onsite

☐ Other effective means of electronic communication (e.g.: phone, cell phone, VFH radio, satellite phone or messaging device):

Supervisor Contact Information:

Alternative Contact(s):

First Aid Equipment and Procedures: Follow the procedures outlined above and below based on the type and severity of heat-related illness.

Available First Aid Equipment:

First Aid Equipment Location:

Non-emergency Medical Care Procedures: Individuals should seek care and move to a cool place right away if experiencing any of the following symptoms: Headaches • Faintness • Nausea • Vomiting

Non-emergency medical services contact numbers and locations:

Emergency Response Procedures: If the signs or symptoms are indicators of severe heat illness (such as, but not limited to, decreased level of consciousness, staggering, vomiting, disorientation, irrational behavior or convulsions) the procedures below must be implemented. If you are in a remote or difficult to access location, write down a protocol for how individuals will be transported to a place where they can be reached by emergency responders including maps if needed.

1. **Contact Emergency Services:**
    a. **911**
    b. **Alternative Emergency Service Contact Number or Protocol:** _____
2. **Provide emergency services with the following information:**
    a. **Your name**
    b. **Your location, address, and precise directions to the location if needed:** _____
    c. **Victim's name and symptoms**
    d. **First aid treatment given**

Contact supervisor or designated person: _

SECTION 2

High Heat Areas and Other Special Conditions: The following sections apply to workers who may be exposed to indoor temperatures at or above 82F for greater than 15 minutes during any 60 minute period unless a documented Heat Illness Risk Assessment indicates all of the following: (1) The temperature will not exceed 86 degrees Fahrenheit when employees are present; (2) The heat index will not exceed 86 degrees Fahrenheit when employees are present; (3) The workers do not wear clothing that restricts heat removal when the temperature equals or exceeds 82 degrees Fahrenheit; and (4) The workers do not work in a high radiant heat area.

How will new, returning, or otherwise unacclimated workers be observed? (Newly assigned, returning, or otherwise unacclimated workers must be closely observed by a supervisor or designee for the first 14 days of employment when they work in 1) An area where the temperature or heat index, whichever is greater, equals or exceeds 87 degrees Fahrenheit 2) An area where the temperature equals or exceeds 82 degrees Fahrenheit for employees who wear clothing that restricts heat removal 3) In a high radiant area where the temperature equals or exceeds 82 degrees Fahrenheit.)

☐ Observed by supervisor who has completed Heat Illness Prevention Training
☐ Observed by co-worker who has completed Heat Illness Prevention Training (buddy system)
☐ Regular check-ins using phone or effective other communication device (please describe):

Feasibility assessment of Engineering Controls: Engineering controls must be used to reduce and maintain both the temperature and heat index to below 87 degrees Fahrenheit when workers are present, or to reduce the temperature to below 82 degrees Fahrenheit where workers wear clothing that restricts heat removal or work in high radiant heat areas, except to the extent that the employer demonstrates such controls are infeasible. When such controls are infeasible to meet the temperature and heat index thresholds, the employer must: (1) Use engineering controls to reduce the temperature, heat index, or both, whichever applies, to the lowest feasible level, except to the extent that the employer demonstrates such controls are infeasible; and (2) Use engineering controls to otherwise minimize the risk of heat illness, except to the extent that the employer demonstrates such controls are infeasible. "Engineering control" means a method of control or a device that removes or reduces hazardous conditions or creates a barrier between the employee and the hazard. Examples of engineering controls that may be effective at minimizing the risk of heat illness in a particular work area are included below.

Type of Engineering Control	**Feasibility** (high/medium/low/NA)	**Implementation Plan**
Heat Source Removal or Reduction	MAKE A CHOICE	
Heat Capture and Removal	MAKE A CHOICE	
Heat Source Isolation/Shielding	MAKE A CHOICE	
Heat Source Insulation	MAKE A CHOICE	
Increase Ventilation	MAKE A CHOICE	
Cooling Fans	MAKE A CHOICE	
Effective Air Conditioning	MAKE A CHOICE	
Other:	MAKE A CHOICE	
Other:	MAKE A CHOICE	

Feasibility assessment of Administrative Controls: Where feasible engineering controls are not sufficient to reduce and maintain the temperature and heat index to below 87 degrees Fahrenheit when workers are present or the temperature to below 82 degrees Fahrenheit where workers wear clothing that restricts heat removal or work in high radiant heat areas, administrative controls shall be used to minimize the risk of heat illness, except to the extent that the employer demonstrates such controls are infeasible. "Administrative control" means a method to limit exposure to a hazard by adjustment of work procedures, practices, or schedules. Examples of administrative controls that may be effective at minimizing the risk of heat illness in a particular work area are included below.

Type of Administrative Control	**Feasibility** (high/medium/low/NA)	**Implementation Plan**
Reschedule Work for Cooler Period	MAKE A CHOICE	
Modify Required Clothing	MAKE A CHOICE	
Reduce Work Intensity/Speed	MAKE A CHOICE	
Implement Work/Rest Schedule	MAKE A CHOICE	
Acclimatize Workers	MAKE A CHOICE	
Rotate Workers	MAKE A CHOICE	
Use Relief Workers	MAKE A CHOICE	
Other:	MAKE A CHOICE	
Other:	MAKE A CHOICE	

Feasibility of Personal Heat-Protective Equipment (PHPE): Where feasible engineering controls are not sufficient to reduce and maintain the temperature and heat index to below 87 degrees Fahrenheit when workers are present or the temperature to below 82 degrees Fahrenheit where workers wear clothing that restricts heat removal or work in high radiant heat areas and feasible administrative controls do not minimize the risk of heat illness, personal heat-protective equipment shall be used to minimize the risk of heat illness, except to the extent that the employer demonstrates that use of such equipment is infeasible. "Personal heat-protective equipment" means equipment worn to protect the user against heat illness. Examples of personal heat-protective equipment that may be effective at minimizing the risk of heat illness are included below.

Type of PHPE	**Feasibility** (high/medium/low/NA)	**Implementation Plan**
Water-cooled Garments	MAKE A CHOICE	
Air-cooled Garments	MAKE A CHOICE	
Cooling Vests	MAKE A CHOICE	
Wetted over-Garments	MAKE A CHOICE	
Heat Reflective Clothing	MAKE A CHOICE	
Personal Cooling Systems	MAKE A CHOICE	
Other:	MAKE A CHOICE	
Other:	MAKE A CHOICE	

Worksite Specific Indoor Heat Illness Prevention Plan Review and Training Documentation (to be completed by workers covered by the plan)

I certify that I have reviewed the above Heat Illness Prevention Plan for my worksite and have received training on its implementation.

Worker Name	Worker Signature	Date