

The purpose of this training is to provide guidance to enhance the health and safety of workers who work outdoors during hot weather conditions. This applies to workers performing work outdoors for more than 15 minutes in any 60-minute period when temperatures are at, or above outdoor temperature action levels

- Non-breathing clothes including vapor barrier clothing or Personal Protective Equipment (PPE), such as chemical resistant suits 52°
- All other clothing 80°

It's your responsibility to:

- Monitor personal factors for heat-related illnesses.
- Drink water frequently.
- Take rest breaks using shade, or other sufficient means for cooling down in accordance with action levels to prevent heat related illness.
- Immediately report signs or symptoms of heat related illnesses in yourself or co-workers.

Rest

- Workers will be encouraged to take voluntary, preventative cool-down rest periods at or above outdoor temperature action levels.
- Mandatory cool down rest periods are required for the following identified action levels.
 - At or above 90°F, 10-minute cool-down rest period every two hours.
 - At or above 100°F, the cool-down rest periods must be 15 minutes every hour.

Factors that contribute to the risk of heat related illness:

- **Environmental factors:** Direct sun, heat, humidity, limited air movement, hot equipment, reflective surfaces.
- **Physical exertion:** Type of work, how hard are you working, how long you are working.
- **Clothing and equipment:** Heavy clothing, multiple layers, color of clothing, PPE.
- **Personal factors:** Age, weight, physical fitness, degree of acclimatization, use of caffeine, physical fitness, previous heat-related illness, pregnancy, medication, and medical condition.

Helpful tips and actions to prevent heat related illness:

It is recommended that Supervisors schedule strenuous work during the coolest part of the day, increase breaks, and ensure that workers take breaks in cooler shaded areas and remove PPE and heat retaining excess clothing during breaks. Workers should alternate heavy work with light work, have a “**Buddy System**”, and work in the shade when possible.

- **Keep hydrated:** Start your workday well hydrated. Drink small quantities of suitably cool water throughout the day. One quart of water or more over the course of one hour is recommended.
- **Avoid:** Sugary or caffeinated drinks

- **Acclimatization:** In severe heat gradually build up exposure time especially if work is strenuous. Up to 14 days when newly assigned to work or when returning to work from an extended leave where acclimatization may have been lost.

Signs, Symptoms

- **Heat rash:** Skin rash. Rest in a cool place part of each day. Regularly bath and dry the skin.
- **Heat cramps:** Symptoms include severe cramps in legs and abdomen, fainting or dizziness, weakness, profuse sweating, and headaches. Respond by increasing fluid intake, resting, moving to a cool place, and getting medical attention if cramps persist.
- **Heat exhaustion:** Symptoms include headache, nausea, fatigue, dizziness, skin is cool and pale, and pupils become dilated. The individual is usually conscious but may faint. Respond by taking more aggressive steps to cool the body (e.g., apply cool water to the skin, fan the individual).
- **Heat stroke:** A **medical emergency** and is life threatening. Symptoms include headache, nausea, dizziness, skin is red, dry, and very hot, and sweating has stopped. Symptoms also include a strong, rapid pulse, small pupils, and a high fever. Individual may be disoriented, lose consciousness, and experience possible convulsions.

Emergency Response:

- Notify Supervisor and get the individual to a shady area, loosen clothing, apply cool or tepid water to the skin (e.g., spray with cool water from a garden hose), fan the individual, place ice pack under armpits and groin. Do not give medication to lower fever.
- **Prisons:** Activate emergency response by calling Main Control by radio or phone.
- **Community:** Call 911. Prison personnel working in the community must also contact the Shift Commander.

I have been briefed on, read, and understand this information.

 Name Signature DOC number Date

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