

HEAT MANAGEMENT PLANNING CHECKLIST

Heat-related illnesses such as heat stress, heat exhaustion, and heat stroke are a very real threat for workers during the summer months. It's important to plan and prepare for these situations. Use this OSHA Heat-Related Illness Prevention Training Checklist to ensure you, your crews, and your worksite are prepared for the hot weather.



* Your Name	* Date / Time

GENERAL DETAILS

Location	Service Line
Task Description / Work Activity ----- ----- ----- -----	Customer

HEAT INDEX ADVISORY GUIDE

* High temperature forecast	* High humidity level forecast
Highest Heat Index Today = $-42.379 + 2.04901523 * T + 10.14333127 * RH - .22475541 * T * RH - .00683783 * T * T - .05481717 * RH * RH + .00122874 * T * T * RH + .00085282 * T * RH * RH - .00000199 * T * T * RH * RH$	

This question only applies if Highest Heat Index Today from 0 to 90

Heat Advisory

Caution (default)

This question only applies if Highest Heat Index Today from 91 to 103

Heat Advisory

Extreme Caution (default)

This question only applies if Highest Heat Index Today from 104 to 124

Heat Advisory

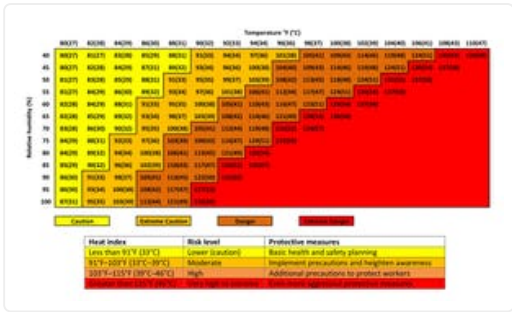
Danger (default)

This question only applies if Highest Heat Index Today from 125 to 50000

Heat Advisory

Extreme Danger (default)

This question only applies if Highest Heat Index Today from 0 to 500



WATER

<p>* Is there plenty of fresh, cool drinking water located as close as possible to the workers?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	<p>* Are water coolers refilled throughout the day?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>
<p>* Has someone been designated to check and make sure water is not running low?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	

SHADE

<p>* Is shade or air conditioning available for breaks and if workers need to recover?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>
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WORKER TRAINING / HEAT AWARENESS

<p>* Common signs and symptoms of heat-related illness?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	<p>* Proper precautions to prevent heat-related illness?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>
<p>* Importance of acclimatization?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	<p>* Importance of drinking water frequently (even when they are not thirsty)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>
<p>* Steps to take if someone is having symptoms?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	

EMERGENCIES

<p>* Does everyone know who to notify if there is an emergency?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	<p>* Can workers explain their location if they need to call an ambulance?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>
<p>* Does everyone know who will provide first aid?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	

KNOWLEDGEABLE PERSON

* Is there a knowledgeable person at the worksite who is well-informed about heat-related illness and able to determine appropriate work/rest schedules and can conduct physiological monitoring as necessary?

Yes No NA

* Are workers in the high or very high/extreme heat index risk levels being physiologically monitored as necessary?

Yes No NA

WORKER REMINDERS

* Drink water often

Yes No NA

* Rest in shade

Yes No NA

* Report heat-related symptoms early

Yes No NA

* Help monitor one another

Yes No NA

SUMMARY

This question only applies if Is there plenty of fresh, cool drinking water located as close as possible to the workers? is No or Are water coolers refilled throughout the day? is No or Has someone been designated to check and make sure water is not running low? is No or Is shade or air conditioning available for breaks and if workers need to recover? is No or Common signs and symptoms of heat-related illness? is No or Proper precautions to prevent heat-related illness? is No or Importance of acclimatization? is No or Importance of drinking water frequently (even when they are not thirsty)? is No or Steps to take if someone is having symptoms? is No or Does everyone know who to notify if there is an emergency? is No or Can workers explain their location if they need to call an ambulance? is No or Does everyone know who will provide first aid? is No or Is there a knowledgeable person at the worksite who is well-informed about heat-related illness and able to determine appropriate work/rest schedules and can conduct physiological monitoring as necessary? is No or Are workers in the high or very high/extreme heat index risk levels being physiologically monitored as necessary? is No or Drink water often is No or Rest in shade is No or Report heat-related symptoms early is No or Help monitor one another is No

Item Marked "No"

Comments / Notes

Signature
