# Heat Stress Prevention Checklist

Safety & Compliance

| DATE | SUPERVISOR | SITE / AREA | FORECAST HIGH TEMPERATURE |
|---|---|---|---|
| ____ / ____ / _____ | | | |

## HYDRATION

Cool drinking water accessible within 5 minutes of all work areas ☐ Yes ☐ No

Water coolers / stations stocked and refilled ☐ Yes ☐ Need Refill

Individual water bottles provided ☐ Yes ☐ N/A

Workers reminded to drink every 15–20 minutes ☐ Yes ☐ Remind

## SHADE & COOLING

Shaded rest areas available ☐ Yes ☐ Set Up Needed

Shade structures intact and adequate ☐ Yes ☐ Need More

Indoor cooling area accessible for breaks ☐ Yes ☐ N/A

Cooling aids available (fans, mist, ice towels) ☐ Yes ☐ Provide

## WORK SCHEDULE ADJUSTMENTS

Heavy work scheduled for cooler hours ☐ Yes ☐ Not Possible ☐ N/A

Work-rest cycles implemented ☐ Yes ☐ Implement

Buddy system in place (workers monitor each other) ☐ Yes ☐ Set Up

Additional workers assigned to reduce individual workload ☐ Yes ☐ Not Needed ☐ N/A

## ACCLIMATISATION

| | YES | N/A |
|---|---|---|
| New or returning workers on reduced schedule<br>*Gradually increase exposure over 7–14 days* | ○ | ○ |
| Workers returning from illness or leave acclimatised | ○ | ○ |

Supervisors aware of who is not yet acclimatised ☐ Yes ☐ Brief

## AWARENESS & RECOGNITION

Heat illness symptoms posted or briefed ☐ Yes ☐ Post

Workers know to report symptoms immediately ☐ Yes ☐ Brief

Supervisors trained to recognise heat illness ☐ Yes ☐ Train

Appropriate clothing encouraged (light, breathable) ☐ Yes ☐ Remind

## EMERGENCY RESPONSE

First aid trained person on site ☐ Yes ☐ No

Emergency cooling supplies available (ice, cold water) ☐ Yes ☐ Stock

Emergency services contact readily available ☐ Yes ☐ Post

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Vehicle available for emergency transport ☐ Yes ☐ Arrange

## SIGN-OFF

Actions taken today _____

Supervisor signature _____

**Notes**

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