**Preparation checklist**

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| **Site assessment and actions** | | | |
| **Infrastructure** | **Action items** | **Action required?** | **Person responsible** |
| Ensure building readiness | Identify hotspots on floor plans | Yes     No |  |
| Identify cooling locations on floor plans | Yes     No |  |
| Identify private cooling devices | Yes     No |  |
| Purchase digital thermometers (we recommend not relying on thermostats for accuracy) | Yes     No |  |
| Identify windows that can be opened to  allow for airflow and cooling | Yes     No |  |
| Identify building exits that need to be secured during a heat event | Yes     No |  |
|  | Purchase window screens, particularly for first floor windows, to keep flies out and prevent unintentional maggots in wounds | Yes     No |  |
| Ensure infrastructure readiness | Complete required air cooling system maintenance | Yes     No |  |
| Purchase additional generator(s) | Yes     No |  |
| Check current generator fuel levels | Yes     No |  |
| Check generator fuel reserves in storage | Yes     No |  |
| Test generator operation | Yes     No |  |
| Test A/C units and replace or repair as needed | Yes     No |  |
| Purchase additional A/C units as needed | Yes     No |  |
| Purchase additional fans as needed | Yes     No |  |
| Check kitchen A/C and fans | Yes     No |  |
| Check ice machines and water fountains | Yes     No |  |
| **Temperature** | **Action items** | **Action required?** | **Person responsible** |
| Ensure cooling zone readiness | * Mark storage location for cooling zone equipment on floor plans | Yes     No |  |
| * Purchase cooling zone equipment noted during the site assessment | Yes     No |  |
| * Prepare signage to mark cooling areas and hot areas | Yes     No |  |
| * Prepare checklist to record that rooms are set to “cool” if available | Yes     No |  |
| **Operations** | **Action items** | **Action required?** | **Person responsible** |
| Finalize and share heat plan | * Finalize heat plan * Store heat plan in accessible location * Review heat plan with site leaders and in-charge staff | Yes     No |  |
| Ensure dietary readiness | * Finalize menu changes for implementation * Source any food supplies that may be hard to procure in advance (if applicable) | Yes     No |  |
| Ensure readiness for hydration and emergency cooling strategies during a heat event | * Finalize written hydration plan for residents | Yes     No |  |
| * Finalize written hydration plan for staff | Yes     No |  |
| * Purchase hydration station supplies   + Water jugs   + Non-expired bottled water   + Ice   + Cups   + Water coolers   + Chilled items (i.e. ice cream, sherbet or other frozen novelties)   + Food higher in water content   + Other (please specify): \_\_\_\_\_\_\_\_\_\_\_ | Yes     No |  |
| * Purchase emergency cooling strategies\*   + Misters for dampening clothing   + Basins for putting residents’ legs in tepid bathwater   + Ice packs/cool gel packs   \* Note these strategies should not be relied upon as primary cooling modes during a heat event – only for emergency cooling prior to resident relocation to a cooler location. | Yes     No |  |
| * Place hydration supplies in a common, accessible location | Yes     No |  |
| Finalize recreational modifications to be implemented during a heat event | * Purchase supplies to allow continuation of resident outings where possible   + Umbrellas, hats, sunscreen | Yes     No |  |
| * Identify and communicate appropriate locations for recreational activities and visitation during a heat event | Yes     No |  |
| Secure seasonal linens | * Purchase cooling blankets | Yes     No |  |

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| **Clinical** | **Notes/action items** | **Progress** | **Person responsible** |
| **Residents** | | | |
| Ensure resident risk assessments are updated | * Highest risk residents are identified * Flag charts for highest risk residents * Identify rooms of highest risk residents (e.g., place sunshine on the door) | Yes     No |  |
| * Update care plans for residents identified as at risk | Yes     No |  |
| * Update flow sheets for resident monitoring | Yes     No |  |
| Prepare for clinical interventions | * Purchase hypodermoclysis supplies | Yes     No |  |
| **Staff** | | | |
| Prepare to support staff communication and wellness | * Ensure that cool break room areas are available and identified | Yes     No |  |
| * Identify resources to share with staff to cope with heat and identify signs and symptoms of heat stroke | Yes     No |  |
|  | * Prepare plan to increase monitoring during a heat event | Yes     No |  |
|  | * Plan to schedule daily huddles during a heat event | Yes     No |  |
| **Communication** | **Notes/action items** | **Progress** | **Person responsible** |
| Finalize communication plan | * Create heat event communication email template | Yes     No |  |
| * Update email address list and phone list | Yes     No |  |
| * Develop signage to be used during heat event | Yes     No |  |

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| **Education** | **Notes/action items** | **Progress** | **Person responsible** |
| Finalize educational plan | * Develop education plan with dates/schedule | Yes     No |  |
| * Identify tools that are required to be developed and assign responsibility | Yes     No |  |
| **Evaluation** | **Notes/action items** | **Progress** | **Person responsible** |
| Plan to evaluate | * Plan to evaluate performance during a heat event to learn for the next time | Yes     No |  |
| * Schedule team meeting for October to review summer heat | Yes     No |  |