OpsAuditHub opsaudithub.com	DOC ID: **SAF-0419**	REVISION: **Rev 2.4 (2026)**
	STANDARD: **OSHA General Duty Clause Section 5(a)(1) & Cal/OSHA Heat Illness Prevention Standard 8 CCR 3395**	AUDIT FREQUENCY: **Daily Pre-Shift & Peak Temperature Monitoring**

Farm Worker Heat Stress Prevention Log Inspection Checklist

Operational Scope: This operational inspection checklist establishes mandatory protocols for monitoring field environmental conditions, hydration availability, and acclimatization tracking in agricultural work environments. The objective is to proactively mitigate heat-related illnesses among farm workers and ensure full compliance with federal and state occupational safety mandates.

MANDATORY PPE:	UV-Protective Wide-Brim Hat, Lightweight, Breathable Long-Sleeve Shirt, UV Protection Safety Sunglasses (ANSI Z87.1), High-Visibility Cooling Neck Gaiter, Durable Moisture-Wicking Work Boots
PREREQUISITES:	Verify local wet-bulb globe temperature (WBGT) or heat index forecasts prior to crew deployment. | Ensure all hydration stations are fully sanitized, restocked, and positioned within immediate access of work areas.

ENVIRONMENTAL MONITORING & HYDRATION INFRASTRUCTURE

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
1	**Heat Index & WBGT Assessment**	Ambient temperature and humidity are recorded at the start of shift and hourly when temperatures exceed National Weather Service advisory thresholds.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
2	**Potable Water Supply & Accessibility**	At least one quart of cool, potable drinking water per worker per hour is available within a 5-minute walking distance of active field crews.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
3	**Water Container Sanitation & Purity**	Water containers are clean, tightly sealed, clearly labeled, and water quality is verified free of contaminants.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**
4	**Hydration Reminder Implementation**	Supervisors actively enforce water consumption breaks (at least 1 pint every 20 minutes) during high-heat operational windows.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**

SHADE ACCESS & ACCLIMATIZATION PROTOCOLS

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
5	**Shade Structure Availability**	Shade areas (natural or artificial) are erected, capable of accommodating all resting workers simultaneously, and open to air circulation.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
6	**Shade Distance & Cleanliness**	Shade is located as close as practicable to work areas, maintained free of safety hazards, and kept cool enough for effective thermal recovery.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**
7	**New Worker Acclimatization Tracking**	Employees newly assigned to high-heat conditions are observed closely for 14 days under the established company acclimatization rule.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
8	**High-Heat Procedures Implementation**	Additional mandatory rest breaks and reduced workloads are implemented when temperatures reach or exceed specific regulatory action levels.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**

EMERGENCY RESPONSE & WORKER TRAINING VERIFICATION

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
9	**Emergency Action Plan & Communication**	Reliable communication devices (cell phones, two-way radios) are operational, and clear procedures are established for summoning emergency medical services.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
10	**First Aid & Cooling Supplies**	Ice chests, cold pack supplies, and trained personnel capable of administering rapid cooling measures are verified on-site.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
11	**Heat Illness Symptoms Training**	All farm workers and field supervisors have documented training recognizing early signs of heat exhaustion, heat stroke, and proper emergency response.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**

Certified Inspector / Lead Operator Signature: _____	**Date / Time:** _____	**Badge / Cert #:** _____
Site Safety Supervisor / Operations Manager Sign-off: _____	**Review Date:** _____	**Audit Status:** [ ] Approved [ ] Rectify

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