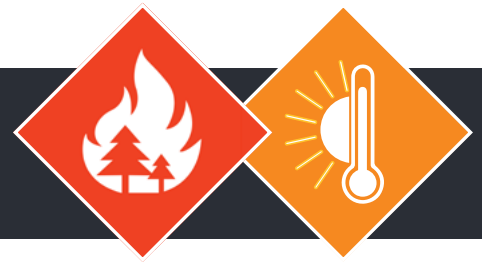


Planning and Paperwork

Administrative Preparedness



Focus: *Internal systems, formal documentation and the yearly planning cycle.*

Understanding when extreme heat will impact health is more nuanced than just looking at a weather app. Factors like humidity can drastically magnify the danger: 96°F with 70% humidity is more dangerous than 100°F with low humidity. Despite increasing variability, extreme heat and wildfire smoke risk rise in summer months. Preparedness succeeds when it becomes part of the annual administrative rhythm. This section discusses how to proactively organize your team, your physical space and your administrative calendar to stay ahead of the curve.



At a glance:

- **Set a yearly timeline for collecting extreme-weather resources:** For example, set a yearly cycle to secure funding by January and have supplies ready for distribution by April.
- **Add extreme weather to existing SOPs:** Fold extreme weather protocols directly into existing emergency plans to avoid duplicative processes or juggling isolated tasks.
- **Audit your current extreme weather activities:** Use our assessment tools as a benchmark to audit current activities and ensure no low-cost safety steps are overlooked.

1 Set a yearly timeline for collecting extreme-weather funding and supplies.

Preparing for extreme weather events shouldn't be a reactive scramble in July; instead, clinics or health centers have found that treating preparedness as a year-round administrative cycle significantly reduces staff stress. By mapping out a cyclical calendar to seek funding in the fall and secure it by January, leadership allows the team ample lead time to order supplies and assemble heat kits well before the first heatwave, ensuring staff are fully trained and ready to deploy by April-May.

Key takeaway:

- **Develop a preparedness calendar:** Aim to have funding secured by January and supplies purchased/kits assembled by April.

2 Fold extreme weather and wildfire smoke interventions into existing emergency plans.

Rather than juggling a brand-new set of isolated tasks, many facilities found success by folding extreme heat and wildfire smoke protocols directly into their existing emergency plans. Directors found that formalizing a plan (even before any procedures changed) acted as a powerful motivator for staff, shifting focus toward prevention and providing a clear framework for patient needs. This process documented the unwritten expertise of the team so that knowledge wasn't lost during staff turnover.

Putting plans to paper.

For one clinic, the process was about focus: "We made sure what we are doing is going to make some difference. We didn't want to be a mile wide and an inch deep." For teams that had never had a formal heat protocol, the assessment gave them the push to finally "put their own plan in writing" and officially fold it into their standard operating procedures. As another facility noted, "We are more worried about wildfires than heat...[We] have a disaster plan...but heat was not included in our plan, so having that [Heat-Health Action Plan] and thinking about heat as an emergency too was really helpful."





Key takeaways:

- **Merge suggested interventions with existing emergency plans:** You can use the AmeriCares suggested interventions as the basis for your emergency plan or combine them with your current emergency/safety protocols.
- **Use your emergency plan to start a staff/volunteer conversation:** Document clear actions (even those already in practice) to motivate staff to focus on prevention and provide a formal framework for addressing patient needs.

3 Audit your current extreme weather activities.

A hazard-specific response plan is a living document that requires regular updates to stay aligned with changing weather risks. Even for facilities with comprehensive protocols and emergency operation plans, an audit provides a structured way to verify that existing workflows cover the specific nuances of extreme heat and wildfire smoke. Using AmeriCares [Climate Health Action Plans](#) as a benchmark allows directors to cross-reference their current procedures against a vetted list of clinical and operational interventions to see if they are missing any critical administrative triggers, low-cost safety steps or logistical gaps in their response.

Using AmeriCares [Heat-Health Action Plan](#) as a benchmark.

One health center used the AmeriCares assessment to review their readiness before the summer season. They already had an extreme heat plan in place, but they used the tool as a professional benchmark to see how their strategy compared to AmeriCares recommendations.

By conducting a side-by-side audit, the leadership team reviewed their protocols with a fresh perspective. The process allowed them to validate what they were doing well and find room for improvement. As the facility noted, they used the tool “as a comparison against the work we are already doing... to make sure we weren’t missing anything.” This audit gave the team the confirmation they needed that their plan was comprehensive enough and ready for the upcoming season.





Key takeaway:

- **Audit your current activities:** Using the assessment tool as a benchmark allowed facilities to audit their current activities and ensure no critical, low-cost interventions were being overlooked.

Summary checklist for clinics or health centers

- Scheduling:** Have you picked a specific month (e.g., January) to secure money and order supplies before the risk of extreme heat or wildfires increases (e.g., April-May)?
- Operational integration:** Can you point to weather-specific protocols for extreme heat and wildfire smoke inside your current Emergency Operations Plan or hazard response SOPs?