**Initial Response Objectives**

- Ensure the safety of response personnel
- Ensure the safety of the community
- Manage a coordinated response effort
- Control the source
- Contain and recover the spilled oil
- Recover and manage oiled wildlife
- Minimise harm to the environment
- Minimise harm to the community and economy
- Keep the community informed of response operations

**Current and Planned Actions**

<table>
<thead>
<tr>
<th>Date/Time</th>
<th>Action/Event/Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current</strong></td>
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</table>

| **Planned** |

**Approved By**

Planning Officer:  
Date:  

Incident Controller:  
Date:  

ICS 201-2 - Summary of Current Actions

Prepared by Planning Section  
Page 2 of 6  
WA Department of Transport
<table>
<thead>
<tr>
<th>ID</th>
<th>Quantity</th>
<th>Description</th>
<th>Supplier &amp; Location</th>
<th>Ordered</th>
<th>ETA</th>
<th>Arrived</th>
<th>Area of Operation</th>
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</tbody>
</table>

Prepared by Resources Unit

Page 4 of 6

WA Department of Transport
ICS 201-5 - Site Safety and Control Analysis

Incident Briefing #:

Incident Briefing at:

Site Control

1. Is Site Control set up?  □ Yes □ No
   If not, when?

2. Is there a Staging Area set up?  □ Yes □ No
   If so, where?

3. Are adequate land based exclusions in place?  □ Yes □ No
   If not, when?

4. Are adequate marine based exclusions in place?  □ Yes □ No
   If not, when?

5. Are Safety Representatives on site?  □ Yes □ No
   If not, when?

6. Are there adequate Decon facilities on site?  □ Yes □ No
   If not, when?

Hazard Identification

1. Hazardous Material Data Sheet been received?  □ Yes □ No
   Remarks:

2. Has air monitoring taken place?  □ Yes □ No
   Remarks:

3. Are conditions within the permissible response band?:  □ Yes □ No
   If no, why?

4. Is adequate PPE on site?  □ Yes □ No
   If not, when?

5. Is Heat Monitoring in place?  □ Yes □ No
   If not, when?

6. Are responder welfare checks being conducted?  □ Yes □ No
   If not, when?

7. Are adequate first aid arrangements in place?  □ Yes □ No
   If not, when?

8. Are adequate communications in place?  □ Yes □ No
   If not, when?

9. Are adequate traffic management in place?  □ Yes □ No
   If not, when?

10. Is there adequate food and water available?  □ Yes □ No
    If not, when?

11. Are dangerous fauna prevalent in the area?  □ Yes □ No
    Remarks:

12. Is adequately waste being managed?  □ Yes □ No
    If not, when?

13. Is a registration/induction regime in place?  □ Yes □ No
    If not, when?

14. Has a site risk assessment been conducted?  □ Yes □ No
    If not, when?

Hazard Mitigation Strategies

1. Confirm the hazards, including those posed by any emitted material:  Update –

2. Ensure adherence to DoT MEER SMS by all response personnel:  Update –

3. Establish site control, including appropriate decontamination facilities for personnel and equipment:  Update –

4. Establish induction and safety briefing regime for response personnel:  Update –

5. Develop site safety and health plan for response personnel:  Update –

6. Establish air monitoring regime in impacted areas:  Update –

7. Deploy Safety Representatives across the response effort:  Update –

8. Other:

Approved By

Safety Officer:  
Date:

Incident Controller:  
Date:

ICS 201-5 - Site Safety and Control Analysis

Prepared By:  At:
Prepared by Safety Section  Page 5 of 6  WA Department of Transport

INCIDENT BRIEFING (ICS FORM 201)

Purpose:  The Incident Briefing form provides the Incident Controller, the Section Heads and other key personnel with basic information regarding the incident situation and the resources allocated to the incident. It also serves as a permanent record of the initial response to the incident. The 201
The document suite serves as an Incident Action Plan during the Initial Response Phase and is the key document prior to the commencement of the Proactive Phase (if required).

**Preparation:** The Initial Incident Controller prepares the briefing form for presentation to the relieving Incident Controller along with a more detailed verbal briefing (if required).

**Distribution:** After each Incident Briefing the document saved on NEMO and distributed within the IMT as required.

<table>
<thead>
<tr>
<th>Item Title</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incident Name</td>
<td>Enter the name assigned to the incident.</td>
</tr>
<tr>
<td>Incident Briefing #</td>
<td>Enter the number of the Incident Briefing (The initial Incident Briefing being #1).</td>
</tr>
<tr>
<td>Incident Briefing at:</td>
<td>Enter the Time (24 hr) and Date (DD MMM YY) of the Incident Briefing for which the ICS 201 was finalised. For example, 1200 03 Mar 19.</td>
</tr>
<tr>
<td>ICS 201-1 Map Sketch</td>
<td>Show the Areas of Operations, the incident site, overflight results, trajectories, impacted shorelines, or other graphics depicting situation and response status on a sketch or attached map.</td>
</tr>
</tbody>
</table>
| ICS 201-2 Summary of Current Actions | Enter information on:  
  - What, when, and how the incident occurred  
  - Surveillance & weather information  
  - Overall initial response objectives  
  - Timeline of major events or actions that have taken place. |
| ICS 201-3 Current Organization | Enter on the organisation chart the names of the individuals assigned to each position. Modify the chart as necessary. |
| ICS 201-4 Incident Resources | Track the following information about the resources allocated to the incident.  
  - Name of supplier and location of the organisation providing the resource  
  - Resource Type (e.g. fire truck, boom, skimmer)  
  - Description (e.g. size, name, capacity)  
  - Quantity or amount of resource(s)  
  - Area of Operation – destination of the resource (e.g. staging area, division, group, task force)  
  - Status of each resource (e.g. Standby, En-route with Estimated time of arrival, At Staging, Assigned, & Out of Service). |
| ICS 201-5 Site Safety and Control Analysis | Enter safety information related to the incident. |
| Prepared By                 | Enter name of the person preparing the form. Enter time (24 hr) and date (DD MMM YY). |

**Document Control**

<table>
<thead>
<tr>
<th>Version No.</th>
<th>Date</th>
<th>Prepared by</th>
<th>Revision or issue description</th>
<th>Issued to</th>
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<tbody>
<tr>
<td>1</td>
<td>05 Nov 19</td>
<td>E. Gifford</td>
<td>Revisions from 2019 State Ex</td>
<td>All</td>
</tr>
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