

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name: 2018 Moose River GRP Exercise	2. Operational Period:	Date From: 8/15/2018 Time From: 0900	Date To: 8/15/2018 Time To: 1300
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:			
KNOWN SAFETY HAZARDS: <ul style="list-style-type: none"> • Lines under tension (boom towing and shoreside anchoring) • Pinch points (connecting boom, boom towing, vessel operations) • Heavy lifting (boom and anchors) - Observe safe lifting practices. • Entanglement – Personnel, lines/rigging, and boom. Personnel, lines, propellers. Maintain situational awareness when working around lines, anchors and boom during shoreside and on-water deployment operations to ensure that entanglement does not occur. Do not stand in the bight of lines or where boom is faked out for deployment. • Loose clothing and jewelry – Refrain from wearing loose clothing that may snag or become entangled on equipment. Jewelry including necklaces and rings should be removed while engaged in equipment deployment operations. • Slips, trips, and falls - Exercise caution in wet, muddy, and rocky areas and when working on piers or bulkheads near water to avoid falling. During boom deployment and retrieval when working in, on, or near the equipment trailers and ramps, special precaution must be taken to avoid injury when working on trailer ramp and around trailer ramp cables. Caution tape provided in trailer should be attached to trailer ramp cables to mark their location. • Crushing injuries – Use caution when working with anchors, driving shoreside stakes with sledgehammer, and when working alongside other vessels to avoid crushing injuries. • Vessel Operations – Working in close proximity to other vessels; Boom deployment and towing, and rigging near outboard motors and vessel screws/propellers. • Flotsam and debris – Conduct shoreside walkdown (Exercise Safety Officer) to identify and remove dangerous objects including glass, sharp objects, or debris washed up on shore that may endanger participants and/or impede exercise activities. Medical waste should only be retrieved by on-scene medical personnel. Flotsam should only be removed if it can be done safely and only if it impedes exercise activities. • Hypothermia – Dependent on water temperature. If participant is immersed in water, extricate safely and quickly and treat as appropriate. • Heat Stress/Stroke – Dependent upon air temperature and humidity. Exposure to extreme heat may put participants at risk for heat stress. Heat stress can result in heat stroke, heat exhaustion, heat cramps, or heat rashes. Participants exhibiting heat stress related symptoms must be treated immediately IAW participating agency protocols. 			
SPECIFIC PRECAUTIONS: <ul style="list-style-type: none"> • An Exercise Safety Officer will be identified and be responsible for participant safety. • FIRST AID equipment will be available. • Personal Flotation Devices (PFDs) are required for all vessel personnel and all shoreside personnel working along shoreline, bulkheads or piers. • Steel-toe boots and safety glasses should be worn. • Hearing protection should be worn when working around generator and air compressor. • All vessel operators will conduct a safety brief with passengers to review vessel-specific safety precautions. • During vessel operations, a spotter should be assigned to provide guidance to vessel operator. Utilize fenders when mooring alongside pier/dock and when rafting with other vessels. • Man overboard – Assigned vessel spotter must maintain constant visual contact with man overboard and provide position and direction to vessel operator. “Emergency” phrase must be communicated to all exercise participants. Incident Commander or Exercise Coordinator will halt all exercise activity. • Vessel load balancing - Each vessel operator must ensure that personnel and equipment are stationed and distributed appropriately on deck. • Hydration – Participants must ensure they remain properly hydrated based on their level of exertion and on-scene weather conditions (heat, humidity). Water is provided. • Sunscreen – Participants should ensure proper sunscreen application based on weather conditions. Sunscreen is provided. 			
4. Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/> Approved Site Safety Plan(s) Located At:			
5. Prepared by: Name: P. DeCola Position/Title: Exercise Coord. Signature: _____			
ICS 208	IAP Page	Date/Time: 7/31/2018 12:00 AM	

ICS 208 Safety Message/Plan

Purpose. The Safety Message/Plan (ICS 208) expands on the Safety Message and Site Safety Plan.

Preparation. The ICS 208 is an optional form that may be included and completed by the Safety Officer for the Incident Action Plan (IAP).

Distribution. The ICS 208, if developed, will be reproduced with the IAP and given to all recipients as part of the IAP. All completed original forms must be given to the Documentation Unit.

Notes:

- The ICS 208 may serve (optionally) as part of the IAP.
- Use additional copies for continuation sheets as needed, and indicate pagination as used.

Block Number	Block Title	Instructions
1	Incident Name	Enter the name assigned to the incident.
2	Operational Period <ul style="list-style-type: none"> • Date and Time From • Date and Time To 	Enter the start date (month/day/year) and time (using the 24-hour clock) and end date and time for the operational period to which the form applies.
3	Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan	Enter clear, concise statements for safety message(s), priorities, and key command emphasis/decisions/directions. Enter information such as known safety hazards and specific precautions to be observed during this operational period. If needed, additional safety message(s) should be referenced and attached.
4	Site Safety Plan Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	Check whether or not a site safety plan is required for this incident.
	Approved Site Safety Plan(s) Located At	Enter where the approved Site Safety Plan(s) is located.
5	Prepared by <ul style="list-style-type: none"> • Name • Position/Title • Signature • Date/Time 	Enter the name, ICS position, and signature of the person preparing the form. Enter date (month/day/year) and time prepared (24-hour clock).