

ICS-215a

INCIDENT ACTION PLAN SAFETY ANALYSIS			1. Incident Name						2. Date/Time Prepared		3. Operational Period	
4. Division or Group		5. Potential Hazards							6. Mitigations (e.g., PPE, buddy system, escape routes)			
		Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:	Type of Hazard:			
7. PREPARED BY (NAME AND POSITION)												

ABOUT IMS 215-A: Incident Safety Analysis	
Purpose:	This worksheet assists the Safety Officer in completing an operational risk assessment to prioritize hazards and develop appropriate controls by operational period. This form communicates to the Operations and Planning Section Chiefs safety and health issues identified by the Safety Officer.
Preparation:	This form is principally crafted by the Safety Officer, prior to the Planning Meeting, for each Operational Period. Additional sheets may be used as required.
Distribution:	This form is attached to the Incident Site Safety Plan and is distributed according to the instructions for Site Safety Plans. It may also be attached to the IAP, or influence General Safety Messages recorded in IMS 202 and IMS 1001. This form may be used as a display, or distributed during the planning meeting.

INSTRUCTIONS IMS 215-A: Incident Safety Analysis		
Item Number	Item Title	Instructions
1.	Incident Name	Print the name assigned to the incident
2.	Date/Time Prepared	Enter the date prepared (YYYY/MM/DD), and time (24hr clock)
3.	Operational Period	Enter the time interval for which the form applies. Record the start time and the end time with dates.
4.	Division or Group	Enter Division/Group identifiers.
5.	Blank Potential Hazards Header	Enter appropriate title for hazard, if not already in list. Below each Hazard, type an X to indicate a risk type for individual Divisions/Groups.
6.	Mitigations Header	Enter appropriate title for hazard mitigation.
7.	Prepared By	Enter the name and position of the person completing the form (usually the Safety Officer)