EMERGENCY RESPONSE PLAN

(Insert Business / Project Name)

(Insert Site Address)

(Insert Client Name if applicable)

(Insert Date Range if applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| **Plan developed & Issued by** | **Date** | **In Consultation with** | **Signature** |
| System Manager |  |  |  |
| Business / Project Manager |  |  |  |
| Site Manager |  |  |  |
| Senior Manager |  |  |  |
| **Project Manager Review (Section 3.5 of this Plan)** | | | |
| First Review of Plan on site |  |  |  |
| Second Review of Plan on site |  |  |  |
| Third Review of Plan on site |  |  |  |
| Fourth Review of Plan on site |  |  |  |
| Fifth Review of Plan on site |  |  |  |
| Sixth Review of Plan on site |  |  |  |

NOTE: The Project Manager is responsible for reviewing this Emergency Response Plan on a monthly basis for the first three months of the project and then three monthly thereafter, in conjunction with the Project Risk Assessment.

Adhoc reviews will be conducted on an as needs basis when there has been a notifiable injury reported to a state or territory WHS regulator or when there has been a significant variation to the project scope of works

Where there is a formed Health and Safety committee for the project ongoing consultation will be conducted with the elected group of worker representatives

It is also a mandatory condition that incident drill training will be conducted on a 3 monthly basis.

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