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| ***Identify the possible emergencies that your farm/ company may potentially experience. If there is a need to EVACUATE then a Risk Assessment and Emergency Response Procedure must be developed, posted and workers trained.*** | | | | | |
| **Emergency type** | **🗸 Yes**  **X No** | **Risk Assessment completed?** | **Written procedures developed?** | **Workers Trained?** | **COMMENTS** |
| ***POTENTIAL HAZARDS:*** | | | | | |
| Hazardous materials spills – i.e., pesticides / chemicals / fuel |  | YES / NO | YES / NO | YES / NO |  |
| Fire / Explosion |  | YES / NO | YES / NO | YES / NO |  |
| Building / Structure Collapse |  | YES / NO | YES / NO | YES / NO |  |
| Major structural failure |  | YES / NO | YES / NO | YES / NO |  |
| Unintentional release of products. |  | YES / NO | YES / NO | YES / NO |  |
| Gas Leak |  | YES / NO | YES / NO | YES / NO |  |
| Loss of electrical power. |  | YES / NO | YES / NO | YES / NO |  |
| Loss of water supply. |  | YES / NO | YES / NO | YES / NO |  |
| Loss of communications. |  | YES / NO | YES / NO | YES / NO |  |
| Working alone |  | YES / NO | YES / NO | YES / NO |  |
| Violence in the Workplace |  | YES / NO | YES / NO | YES / NO |  |
| Robbery |  | YES / NO | YES / NO | YES / NO |  |
| Domestic Violence |  | YES / NO | YES / NO | YES / NO |  |
| Deliberate release of products (e.g., hazardous biological agents, or toxic chemicals). |  | YES / NO | YES / NO | YES / NO |  |
| Other terrorist activities. |  | YES / NO | YES / NO | YES / NO |  |
| Exposure to ionizing radiation. |  | YES / NO | YES / NO | YES / NO |  |
| ***NATURAL HAZARDS:*** | | | | | |
| Medical emergency |  | YES / NO | YES / NO | YES / NO |  |
| Fire – forest fire / wildfire |  | YES / NO | YES / NO | YES / NO |  |
| Floods |  | YES / NO | YES / NO | YES / NO |  |
| Earthquake |  | YES / NO | YES / NO | YES / NO |  |
| Tornados |  | YES / NO | YES / NO | YES / NO |  |
| Landslide / Avalanche |  | YES / NO | YES / NO | YES / NO |  |
| Severe Windstorms |  | YES / NO | YES / NO | YES / NO |  |
| Snow or Ice storms |  | YES / NO | YES / NO | YES / NO |  |
| Severe extremes in temperature (cold or hot). |  | YES / NO | YES / NO | YES / NO |  |
| Pandemic diseases like influenza |  | YES / NO | YES / NO | YES / NO |  |
| Wild or Dangerous animal |  | YES / NO | YES / NO | YES / NO |  |
| Animal / Livestock Escape |  | YES / NO | YES / NO | YES / NO |  |

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| **Emergency type** | **🗸 Yes**  **X No** | **Risk Assessment completed?** | **Written procedures developed?** | **Workers Trained?** | **COMMENTS** |
| ***SPECIALIZED RESCUE & EVACUATION PROCEDURES -*** WorkSafeBC Guideline - G4.13 (1)  <https://www.worksafebc.com/en/law-policy/occupational-health-safety/searchable-ohs-regulation/ohs-guidelines/guidelines-part-04#C660655802174EBD9AB3995FAD1DFD67> | | | | | |
| Work at High Angles |  | YES / NO | YES / NO | YES / NO |  |
| Work in Confined Spaces |  | YES / NO | YES / NO | YES / NO |  |
| Entrapment or Entanglement |  | YES / NO | YES / NO | YES / NO |  |
| Work with Hazardous Substances |  | YES / NO | YES / NO | YES / NO |  |
| Underground Work |  | YES / NO | YES / NO | YES / NO |  |
| Work on or Over Water |  | YES / NO | YES / NO | YES / NO |  |
| Persons requiring special assistance in emergency |  | YES / NO | YES / NO | YES / NO |  |
| ***EMERGENCY RESPONSE PLAN:*** | | | | **COMMENTS** | |
| Has an Emergency Response Plan been developed? | YES / NO | | |  | |
| Are workers trained in the Emergency Response Plan? | YES / NO | | |  | |
| Have specific people been given specific roles & responsibilities? | YES / NO | | |  | |
| Emergency Contact List posted? | YES / NO | | |  | |
| Are there primary and secondary emergency means of escape in all work areas? | YES / NO | | |  | |
| Are Exit Routes clearly marked and accessible? | YES / NO | | |  | |
| Are Emergency Drills conducted annually and a record kept? | YES / NO | | |  | |
| Is there a system for accounting for evacuated workers? | YES / NO | | |  | |
| Are workers trained in fire prevention? | YES / NO | | |  | |
| Are workers given Fire Fighting duties? | YES / NO | | |  | |
| Are there workplace hazardous products on site that could endanger fire fighters? | YES / NO | | |  | |
| Do neighboring properties pose a potential hazard? | YES / NO | | |  | |
| Has contact been made with neighbors to discuss coordinated efforts | YES / NO | | |  | |

