Tabletop Exercise Evaluation Form

The BC Energy Regulator (BCER) evaluates emergency exercises as part of our safety management program, supporting our commitment to public trust and access to energy information. Through exercises, the BCER can confirm each company has the trained and certified staff and resources identified in their emergency response plan, that staff participating in the exercise are knowledgeable in their roles and responsibilities during incidents and emergencies, and that they can act effectively to provide for public safety and environmental protection.

Assessment of emergency management exercises supports the effective stewardship of our natural resources and contributes to the BCER’s overall understanding of the safety culture within each company. Our intent is to provide each permit holder with a fair and accurate account of how their staff met regulatory expectations and to identify any areas of concern or necessary remedial actions which the exercise may have highlighted.

The tool has been designed for use across the full range of exercise types, and there may be occasions when some fields within the form are not applicable due to the type or design of a specific exercise. In such cases, the overall assessment may be adjusted to reflect the elements that were present and evaluated.

The BC Energy Regulator works with many Indigenous communities across the province, and it is our intention that each have the opportunity to understand how the BCER regulates and ensures the protection of persons, the environment and culturally sensitive areas. This activity is also supported through the [Natural Resource Aboriginal Liaison Program](https://www.bc-er.ca/how-we-regulate/engage-with-indigenous-communities/natural-resource-aboriginal-liaison-program/) and is being extended to include invitations to representatives of Indigenous groups to attend and observe exercises with BCER staff.

The purpose of an emergency management exercise is to provide all participants with an opportunity to take part in a validation of the response plans, structures, and interdependencies in a realistic and meaningful way. We encourage job-shadowing and mentorship during exercises by a permit holder’s response team as effective ways to build depth and resilience within the organization, as these are important attributes of an effective emergency management program.

It is important that a common vision exists between evaluators and exercise participants of these key objectives:

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| * Promote overall emergency preparedness
* Test a new plan or amendments to a plan
* Reveal planning weaknesses
* Identify potential resource gaps
* Test equipment and standard operating procedures
 | * Improve coordination
* Clarify role and responsibilities
* Improve individual performance
* Demonstrate operational capability
* Fulfill regulatory requirements
 |
| Additional benefits that may achieved through emergency management exercises include:* Gain public recognition of the emergency management program.
* Develop confidence in the knowledge and skills necessary to act effectively during emergencies.
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The evaluation tool on the following pages has been developed in consultation with experienced emergency management professionals, and reflects priorities and requirements embedded in CSA Z246.2, “*Emergency Preparedness and Response for Petroleum and Natural Gas Industry Systems”* which is included as part of the BC Energy Regulator’s *Emergency Management Regulation.*

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| **Permit Holder Name** |  |
| **Date & Time** | Date: Click or tap to enter a date.Start Time: End Time: |
| **Location** |  |
| **BCER Auditor(s) in Attendance** |  |
| **Other Agencies in Attendance** |  |
| **Indigenous Observer Participation** | [ ]  Yes [ ]  No [ ]  N/A |
| **Person & Company Conducting Exercise** |  |
| **Exercise Scenario Submission** | [ ]  Yes [ ]  No [ ]  N/A |
| **Name of ERP Exercised** |  |
| **Type of Tabletop** |  |
| **Fields/Facilities Exercised** |  |
| **EOC Exercised** | [ ]  Yes [ ]  No [ ]  N/A |
| **Previous Exercise** | [ ]  First exercise for field/facility[ ]  Field/facility previously exercised: Date: Click or tap to enter a date. Type: Choose an item. Next Full-Scale Due: |
| **Personnel** |

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| --- | --- | --- | --- |
|  | **Field** | **ICP** | **EOC** |
| **Employees working in field/facility (#)** |  |  |  |
| **Employees in attendance (#)** |  |  |  |
| **Participation (%)** |  |  |  |

Permitholder plan for exercising field personnel not in attendance:First exercise participants [ ]  Yes How many? **\_\_\_\_\_\_\_\_\_\_\_\_\_** [ ]  No  |

| **Item** | **Observed Condition** | **Score****0 to 4** | **Needs Improvement** | **Observations & Times** |
| --- | --- | --- | --- | --- |
| **Section 1: PREPARATION** |
| **Pre-Exercise** |
| 1.1 | **Was there a sign in sheet for participants?** | Choose an item. |  |[ ]   |
| 1.2 | **Did the exercise have objectives?** | Choose an item. |  |[ ]   |
| 1.3 | **Were rules set out for the exercise?** | Choose an item. |  |[ ]   |
| 1.4 | **Does the company use the ICS system effectively?** |  | Choose an item. |[ ]   |
| 1.5 | **Were inputs used in the exercise?** |  | Choose an item. |[ ]   |
| **Emergency Response Plans** |
| 1.6 | **Do all supplemental ERPs have the same date or version?** | Choose an item. |  |[ ]   |
| 1.7 | **Has the supplemental ERP been updated in the last year?** | Choose an item. |  |[ ]  Revision date: |
| 1.8 | **Has the core ERP been updated in the last year?** | Choose an item. |  |[ ]  Revision date: |
| 1.9 | **Did all participants have an ERP manual or some form of it?***Truck book, electronic access, hard copy, etc.* | Choose an item. |  |[ ]   |
| **Section 2: EXERCISE ACTIONS** |
| **Internal Communication & Information Sharing Processes** |
| 2.1 | **Was a primary mode of communication discussed and designated for the emergency?** | Choose an item. |  |[ ]   |
| 2.2 | **Was a backup communication system selected or discussed?**  | Choose an item. |  |[ ]   |
| 2.3 | **Were set times given and adhered to for incident briefing meetings?** |  | Choose an item. |[ ]   |
| 2.4 | **Did briefings effectively convey essential information in a concise, timely and accurate manner?**  |  | Choose an item. |[ ]   |
| **External Communication** |
| 2.5 | **Was all essential contact information listed in the ERP correctly?** | Choose an item. |  |[ ]   |
| 2.6 | **Were all appropriate agencies and authorities contacted?**[ ] EMBC (Includes BCMOE, BCER) [ ]  Federal Agencies (ENV, CCG, ETC)[ ]  MOTI/Public Works [ ]  FLNRORD[ ]  WorkSafe [ ]  RCMP[ ]  Local Gov. Auth. [ ]  Local Indig. Auth.[ ]  Local School District [ ]  Local Health Auth. |  | Choose an item. |[ ]   |
| 2.7 | **Was the media discussed?**  | Choose an item. |  |[ ]   |
| **Emergency Level** |
| 2.8 | **Was the level of emergency selected promptly?** | Choose an item. |  |[ ]   |
| 2.9 | **Was the risk matrix applied appropriately?** | Choose an item. |  |[ ]   |
| **Action Plan and Response Priorities** |
| 2.10 | **Was an Incident Action Plan (IAP) created with appropriate information?** | Choose an item. |  |[ ]   |
| 2.11 | **Were correct response priorities used?***1. Responder Safety2. Public Safety3. Control of the Incident* | Choose an item. |  |[ ]   |
| 2.12 | **Was the IAP updated throughout the incident?** | Choose an item. |  |[ ]   |
| **Hazard Assessment** |
| 2.8 | **Were the hazard procedures or material safety sheets referenced in the ERP?** | Choose an item. |  |[ ]   |
| 2.9 | **Was a situational assessment or site safety plan completed prior to entering the site of the incident?** | Choose an item. |  |[ ]   |
| **Mapping & Hazard Response Zone Determination (HRZ)** |
| 2.15 | **Was the map pulled out and referenced when the incident started?** | Choose an item. |  |[ ]   |
| 2.16 | **Was an HRZ for the hazard determined and communicated effectively?** |  | Choose an item. |[ ]   |
| 2.17 | **Was an inventory of the HRZ performed effectively?** | Choose an item. |  |[ ]   |
| 2.18 | **Was the HRZ reviewed and updated if the nature of the incident evolved?** |  | Choose an item. |[ ]   |
| 2.19 | **Was the map correct and did it contain all essential information?** | Choose an item. |  |[ ]   |
| 2.20 | **Were personnel able to interpret the map well?** | Choose an item. |  |[ ]   |
| **Roles & Assignments** |
| 2.21 | **Were roles assigned appropriate for the needs of the response?** | Choose an item. |  |[ ]   |
| 2.22 | **Did the Incident Commander have a working knowledge of section responsibilities and assume roles that were not assigned?** | Choose an item. |  |[ ]   |
| 2.23 | **Did the responders adhere to their assigned roles?** | Choose an item. |  |[ ]   |
| 2.24 | **Did everyone have and use roles & responsibility checklists or quick start guides?**  |  | Choose an item. |[ ]   |
| 2.25 | **Were appropriate forms easily available for, and used by, each assigned role?**  |  | Choose an item. |[ ]   |
| **Residents, Transients & Area Access** |
| 2.26 | **Was the resident section of the ERP referenced?** | Choose an item. |  |[ ]   |
| 2.27 | **Was there discussion on how potentially affected public would be contacted?***Residents/renters, industry users, tenure holders, cultural & recreational users, local Indigenous Nations, etc.* | Choose an item. |  |[ ]   |
| 2.28 | **Were impacted parties sheltered/evacuated in a timely manner with appropriate prioritization?** | Choose an item. |  |[ ]   |
| 2.29 | **Were the appropriate number and type of rovers discussed?** | Choose an item. |  |[ ]   |
| 2.30 | **Were roadblocks determined in appropriate locations and set up in a timely manner?** | Choose an item. |  |[ ]   |
| 2.31 | **Was there discussion of a closure order from an applicable agency in a timely manner?** | Choose an item. |  |[ ]   |
| 2.32 | **Were actions taken to prevent access into the HRZ by other means?***Railways, water courses, etc.* | Choose an item. |  |[ ]   |
| 2.33 | **Was a NOTAM / NOTMAR order considered?** | Choose an item. |  |[ ]   |
| 2.34 | **Was consideration given to notification of schools and school buses?** | Choose an item. |  |[ ]   |
| 2.35 | **Was consideration given to potential impact on animals and livestock?** | Choose an item. |  |[ ]   |
| **Command Posts** |
| 2.36 | **Were command posts (ICP/EOC) established and communicated?** | Choose an item. |  |[ ]   |
| 2.37 | **Was a staging area established, communicated, and effectively managed for external resources to report to?** | Choose an item. |  |[ ]   |
| 2.38 | **Were EOC staff involved in the exercise?** | Choose an item. |  |[ ]   |
| 2.39 | **Did the personnel at the EOC understand their role?** | Choose an item. |  |[ ]   |
| 2.40 | **Did command posts have and use good visual references?***ICS Org Chart, Incident Action Plan, Hazard Assessment, etc.* |  | Choose an item. |[ ]   |
| **Mitigation Actions** |
| 2.41 | **Was some form of air monitoring considered/discussed?** | Choose an item. |  |[ ]   |
| 2.42 | **Was the air monitoring procedure used consistent with that listed in the ERP?** | Choose an item. |  |[ ]   |
| 2.43 | **Was consideration given for ignition by referencing the ignition criteria?** | Choose an item. |  |[ ]   |
| 2.44 | **Were liquid spills contained promptly?**  | Choose an item. |  |[ ]   |
| 2.45 | **Were sensitive environmental or cultural receptors considered?**  | Choose an item. |  |[ ]   |
| 2.46 | **Were necessary external equipment and resources discussed?** | Choose an item. |  |[ ]   |
| **Stand-Down Processes** |
| 2.47 | **Was the decision to downgrade/stand-down the incident done in consultation with the BCER?** | Choose an item. |  |[ ]   |
| 2.48 | **Were Indigenous Nations, local authorities and external agencies notified when the response phase was completed?** | Choose an item. |  |[ ]   |
| 2.49 | **Was consideration given to securing the site and evidence for investigation?** | Choose an item. |  |[ ]   |
| **Section 3: POST EXERCISE** |
| 3.1 | **Were participants easily able to find key information in the ERP?** |  | Choose an item. |[ ]   |
| 3.2 | **Were forms collected after the exercise?** | Choose an item. |  |[ ]   |
| 3.3 | **Was an exercise debrief held and were comments and action items captured?** | Choose an item. |  |[ ]   |
| 3.4 | **Were exercise goals and objectives met?** | Choose an item. |  |[ ]   |
| 3.5 | **Were the action items from the last exercise completed?** | Choose an item. |  |[ ]   |

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| **ADDITIONAL OBSERVATIONS** |
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| **EXERCISE OUTCOME:** Choose an item. |

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| **OBSERVATIONS** |
| **Successes** |
|  |
| **Opportunities For Improvement** |
|  |
| **CONDITIONS AND REQUIREMENTS** |
|  |
| **BCER SIGN OFF** |
| **BCER Staff Member:** Choose an item. **Date:** Click or tap to enter a date.**BCER Staff Member: Date:** Click or tap to enter a date. |
| **COMPANY REPRESENTATIVE RECEIVING FORM** |
| **Comments**Note: Plans to address deficiencies should be included in permit holder’s own post-exercise report |
| **Acknowledgement of receipt and contents of the evaluation:**Senior Company Representative Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Senior Company Representative Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |