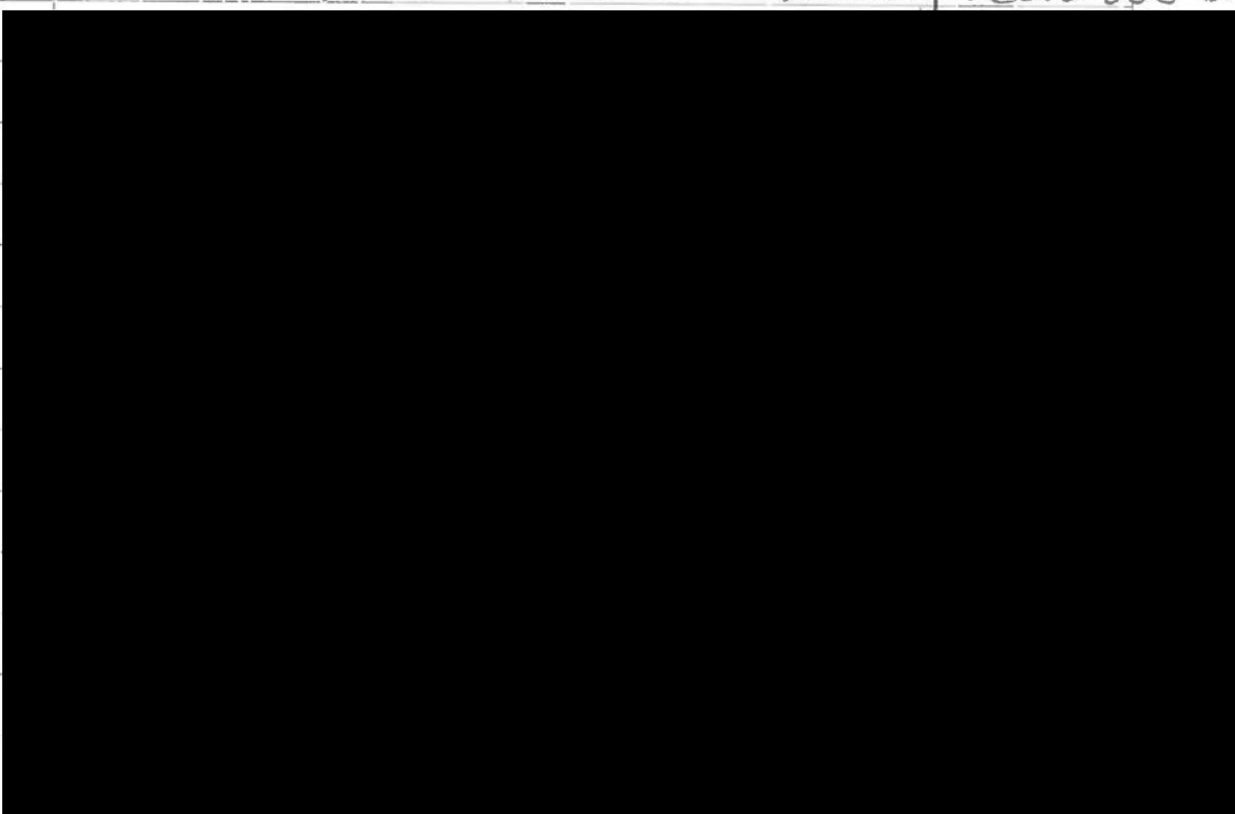




4.11. Appendix 11: ERT Debrief Form

Debrief Officer: \_\_\_\_\_ Role: \_\_\_\_\_ Date/Time of Debrief: \_\_\_\_\_

Date of Emergency: <i>6-5-20</i>		Time Emergency Started:	Time Emergency Finished:
Type of Emergency: <i>EVACUATION / FIRST AID TREATMENT.</i>			
Location of Emergency: <i>LW104.</i>			
Name: <i>John Badke</i>			
Crew/Department: <i>F - L/WALL</i>			
Work location: <i>LW 104 MG DCB AREA.</i>			
Role in ERT: <i>EVACUATE TO LAST OPEN, Provide First aid to</i>			Injured coal mine worker 2
Time Notified of Emergency:			
How Notified: <i>Experienced Severe wind blast @ MG DCB.</i>			
Time Your Response Started:			
No. of responders in ERT: <i>3.</i>			
Breakdown of Emergency			
Time	Description		
<i>?</i>	<i>I WAS LOCATED @ MG DCB PLATFORM</i>		
	<i>- LAST DAC CALL I heard was double choking @ T/G.</i>		
	<i>- Severe wind blast experienced @ MG Roadway</i>		
	<i>- LOSS of power + Methane Warning heard over DAC.</i>		





**Assessment of Response -**

Topic	Comments
Notification of Emergency	
Activation of ERT	
Resources available (equipment and personnel)	
Equipment condition	
Communication during response	
Information provided during response	
Additional support provided	
Adequate skills/training to respond	
Other	

Critical Issues	Recommended Corrective Actions	By Whom



GROSVENOR COAL MINE  
Mine Emergency Response System


Employee Assistance Scheme provided/offered to ERT Member YES NO

Details:

ERT Member Signature:

<b>Copy sent to Manager for review &amp; actioning (circle): YES/NO</b>	<b>Additional information attached (circle): YES/NO</b> <b>Details:</b>	<b>Enablon Incident No:</b>
---	--	-----------------------------

**Debriefing Officer Signature:**

