

Emergency Response Plan Sample Template

Emergency Response Planning

<Activity> at <Site>

Please use this as a template to create your own emergency response plan which is to be carried by all leaders and a copy kept by a non-participating contact

In the event on an incident while running a <insert activity> program the following protocol will be used:

1. TAKE CHARGE / SECURE THE SCENE

- a. Ensure the rest of the group are taken care of (preferably by an experienced guide or leader), especially those who may be at further risk (IE are on the pitch or near the edge; near water etc)

2. PROVIDE FIRST AID AS PER YOUR LEVEL OF TRAINING

- a. Follow DRABC, shock management and perform a secondary survey to provide a good idea of the condition of the patient
 - i. Danger - terrain, weather, human factors, vehicles / craft, animals, water etc
 - ii. Response - to voice, pressure, pain
 - iii. Airways - look, listen, feel
 - iv. Breathing - frequency, depth, regularity, sounds, smell
 - v. Circulation - frequency, regularity, strength
 - vi. Cuts - identify and treat serious / deadly bleeding
 - vii. Cervical Spine - do the circumstances cause concern about the possibility of spinal injury?
 - viii. Disability - any obvious deformity (check distal pulse)
 - ix. Exposure - are there any risk from the elements? (wind, heat, water)
 - x. Treat For Shock - rest and reassure
 1. Position of comfort
 2. Shade, padding, insulation, shelter

3. ASSESSMENT: NON-SERIOUS INJURY

- a. Patient **does not need urgent medical care**
 - i. Patient is Ambulatory
 1. Preferred option is to self-rescue by walking the patient to the nearest vehicle access located at <insert details of the nearest vehicle access>
 - ii. Patient is Not Ambulatory
 1. Preferred option is to self-rescue by attempting to transport the patient to the nearest vehicle access located at <insert details of the nearest vehicle access and any site specific issues relating to getting a casualty to the nearest vehicle access>

4. ASSESSMENT: SERIOUS INJURY

- a. Patient **needs urgent medical care**
 - i. Using the <insert emergency communications equipment> the police will be contacted to organise outside assistance to evacuate the patient
 - ii. Provide the best care possible while waiting for assistance
 - iii. When you contact the police you need to make sure you provide -
 1. Exact location of you and your patient(s)
 2. Nearest road junction is <insert nearest road junction here>
 3. The condition of your patient
 4. Your telephone number <insert your phone number here>
 5. Any knowledge you have of easy access to your location <insert details here>

5. MANAGEMENT

- a. Reassure your patient
- b. Use the other staff members to reassure the rest of the group
- c. When appropriate keep the group informed of the patient's condition
- d. Debrief the incident as soon as is appropriate
- e. Complete First Aid forms, incident forms and witness reports as soon as practically possible

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6. RESPONSIBILITIES OF STAFF

- a. In the event of an emergency the division of responsibility will be partly determined by *<insert any site or activity specific issues>* In the case of a serious emergency, all activities will cease once the alarm has been raised except possibly for that activity required to clear participants from the further risk.
- b. Chain of Command
 - i. Overall in Charge: *<insert name>*
 - ii. Second in Charge: *<insert name>*
 - iii. First Aid: *<insert name>*
 - iv. Recording: *<insert name>*
 - v. Group Management: *<insert name>*
- c. Consideration will have to be given to clear participants who remain engaged with the activity and establish them as a group in a designated safe location or group assembly point – *<insert description of access to safe location>*

7. LOCATION AND LIST OF EMERGENCY EQUIPMENT

- a. All staff will be aware that specific rescue and first aid equipment is stored at *<insert location of rescue and first aid equipment >*

8. VEHICLES AND KEYS

- a. *<insert summary of vehicles likely to near the site, where the keys are and any vehicle security issues that need to be sorted out before the vehicle can be used>*

9. ACCESS / EGRESS

- a. *<insert details of access to and egress from the site, nearest car park and/or from the nearest main town, settlement, etc. Include details of any locked gates, roads that are not signposted, etc>*

10. EMERGENCY COMMUNICATIONS

- a. *<insert details of your emergency communication options>*
- b. Emergency Contact Numbers
 - i. Police
 1. Emergency 000
 2. Non Urgent 131 444
 3. *<insert details of local police stations, hospitals, first aid posts, etc>*
 - ii. Other Contacts
 1. Poisons Information 131126
 2. Fire 000
 3. *<insert land manager contacts, local rangers, local commercial operators or clubs, etc>*
 4. Nearest hospital with emergency department
 - a. *<insert details of nearest hospital with address and phone numbers>*
 - b. *<insert details of site exit>*
 - c. *<insert details of hospital emergency entrance>*

11. EMERGENCY ACCESS – MAPS

- a. *<insert maps, aerial photos, etc in here>*