

APPENDIX C EMERGENCY RESPONSE PLAN

Section 5: Emergency Response Plan			
Emergency contacts			
Emergency services	Emergency and local phone numbers	Address/Location	Access within 1 hour by road/air.
<i>Ambulance</i>			Yes/No
<i>Hospital</i>			Yes/No
<i>Medical centre</i>			Yes/No
<i>Police</i>	urgent 000, non-urgent 131 444		Yes/No
<i>Fire</i>			Yes/No
<i>Poisons information</i>	131126		Yes/No
<i>Department of Biodiversity, Conservation and Attractions</i>			Yes/No
<i>Land owners</i>			Yes/No
<i>School</i>			
<i>Participants' emergency contact details</i>	Copy of consent forms to be retained by the Department teacher-in-charge. Include current emergency contact details for all participants' next of kin.		
Section 6: Maps			
<p>Include/attach a copy of relevant area maps, highlighting (where applicable):</p> <ul style="list-style-type: none"> • support vehicle/bus access locations and evacuation routes including identification of any unsigned access roads; • emergency access points and any potentially locked gates; • land manager/ranger residence; • participant expected locations/trails/routes/campsites/emergency assembly points; • nearest main town/settlement; • areas of mobile phone coverage/service access; • location of first aid kits; and • directions and localities of nearest emergency services (Fire, Police, medical centres and/or hospitals with 24-hour emergency access etc.). 			

Section 7: Emergency Evacuation Plan

Provide a detailed evacuation plan for all participants. This must include a secondary exit strategy.

Section 8: Equipment

Vehicles and keys	<insert location of vehicles, keys, who has access, who has relevant licences to operate >
First aid kits	<insert location of first aid and emergency rescue kits, who is trained in administering first aid >
Communications	<insert details of relevant communication plan, who has access>
Participant equipment list	<insert list of equipment participants are expected to have for desired activity/activities>
Group equipment list	< insert list of additional equipment supplied for the group>

Section 9: Emergency Response Plan

Responsibilities of supervisory team	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.		
	Role	Name and contact details	Responsibilities/role description (Supervisors to be briefed prior to commencement of activity)
	Teacher-in-charge		
	Second-in-charge		
	First aid officer		
	Group manager		
	Communications officer		
	Additional supervisors		
1. Take control/secure the scene	In the event of an emergency the Department teacher-in-charge (or if they are incapacitated the second-in-charge) must secure the scene and ensure the safety of all other participants. Give instructions in a calm and methodical manner. Following a routine set of procedures helps to maintain control in stressful situations and assists in alleviating any tensions amongst the group.		

<p>2. Primary survey</p> <p>Follow DRSABCD</p>	<p><i>Inform concerned authorities as soon as practical.</i></p> <p>Danger</p> <ul style="list-style-type: none"> to yourself, others/bystanders, casualty. Stop and survey the scene. <p>Response</p> <ul style="list-style-type: none"> <u>Conscious</u>: place casualty in recovery position if no spinal is suspected and proceed to secondary survey). Continue to monitor. <u>Unconscious</u>: continue with DRSABCD. <p>Send for help</p> <ul style="list-style-type: none"> 000. Inform authorities as soon as practical (include: location, crossroad/access, number of casualties, condition of casualties, contact number). If possible, delegate this responsibility to a trusted bystander. <p>Airway</p> <ul style="list-style-type: none"> look, listen, feel, visual check of oral cavity. Remove any visual blockage. <p>Breathing</p> <ul style="list-style-type: none"> <u>Breathing check</u>: frequency, depth, regularity, sounds, smell. If normal, place casualty in recovery position. If gurgling sound is present, clear airways and check chest for injury. <u>Not breathing</u>: continue with DRSABCD and commence cardio pulmonary resuscitation (CPR). <p>CPR</p> <ul style="list-style-type: none"> 30 chest compressions (1/3 depth of chest): 2 breaths. (Approximately 3 full cycles per minute). Continue CPR until help arrives or the patient starts breathing. If breathing place in recovery position. <p>Defibrillation</p> <ul style="list-style-type: none"> Attach as soon as one is available and follow voice prompts. <p>DO NOT move a patient with a suspected spinal injury unless they are in danger. If the patient must be moved, take extreme care to keep the spine straight and avoid twisting or bending. Support head and neck with your hands.</p>
<p>3. Secondary survey</p>	<p>For non-urgent matters, refer to emergency contact numbers for local police/hospital/school as required.</p> <p>Shock:</p> <p>Monitor for shock by checking vital signs:</p> <ul style="list-style-type: none"> Loss of consciousness (restless, disoriented) Heart rate (rapid and weak) Respiratory rate (rapid and shallow) Skin colour, temperature, moisture (pale, cold and clammy) Pupils (slow to respond) <p>Head to toe survey</p> <ul style="list-style-type: none"> Ask about any possible injuries and suspected locations, level of pain out of 10. Look for changes to facial expressions during survey, bruises, wounds, bleeding, deformities and signs of vomiting

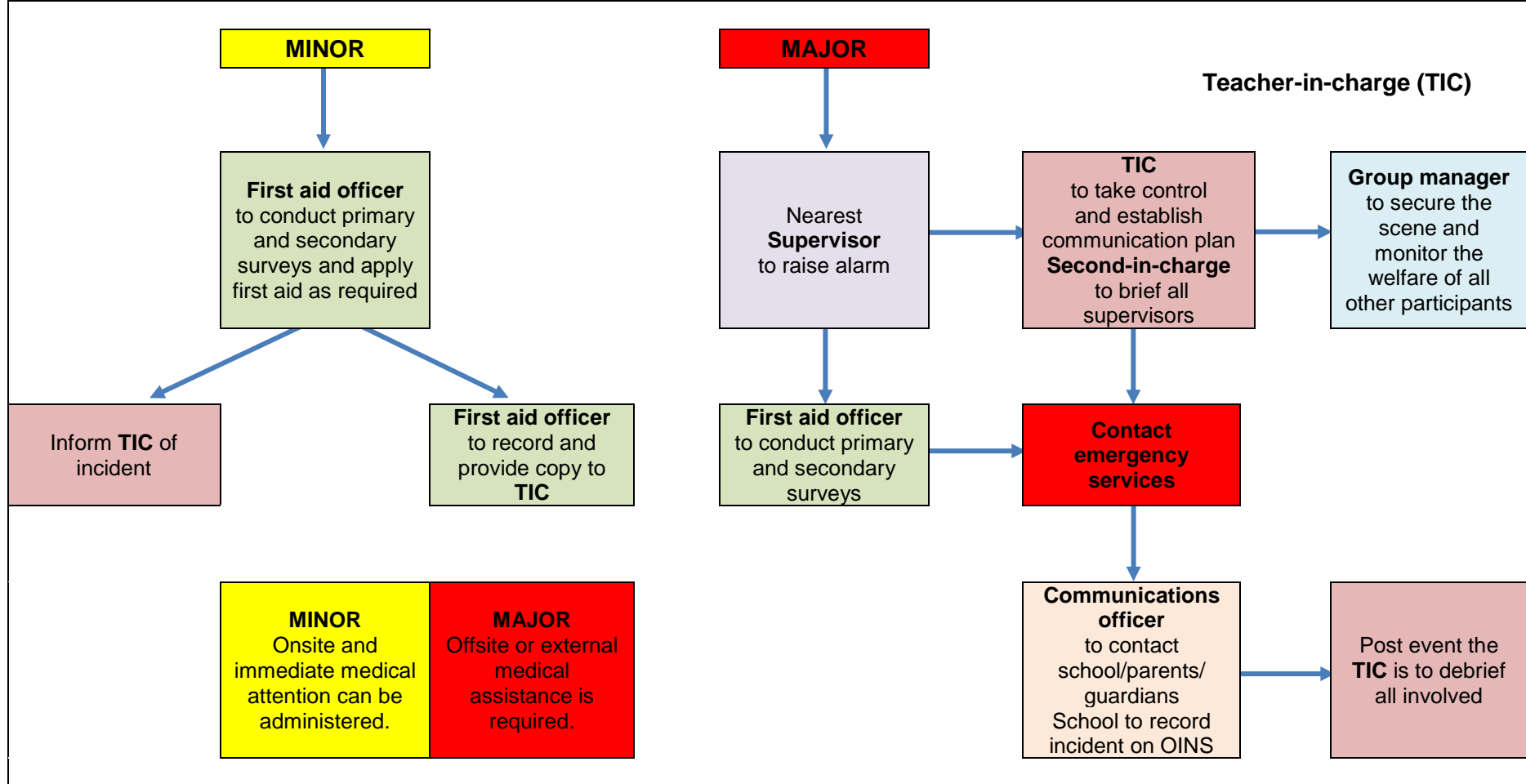
	<ul style="list-style-type: none"> • Feel for hot or cold spots, rigidity, tenderness, deformity • Listen for abnormal sounds, bones grating, airway noises, chest gurgling • Smell for unusual body odours, breath odours or external odours from environment <p>Medical history Ask about:</p> <ul style="list-style-type: none"> • prior and current symptoms; • allergies; • medications; • relevant medical history; • recent foods and fluids; and • events preceding the incident/illness. <p>Exposure: Shade, padding, insulation, shelter</p>
4. Aftercare	<p>Check for exposure. Make casualty comfortable and reassure. Use the other staff members to reassure the rest of the group. When appropriate keep the group informed of the patient's condition.</p>
5. Documents and reporting	<p>All accidents/ incidents and near misses must be recorded and kept on file with the Principal of your school. All major accidents/incidents and/or near misses must be reported through the Online Incident Notification System (OINS).</p>

Management Flow Charts: *If applicable, flow charts should include an estimated time it may take to raise an alarm and the amount of time that may elapse before appropriate support can be provided.*

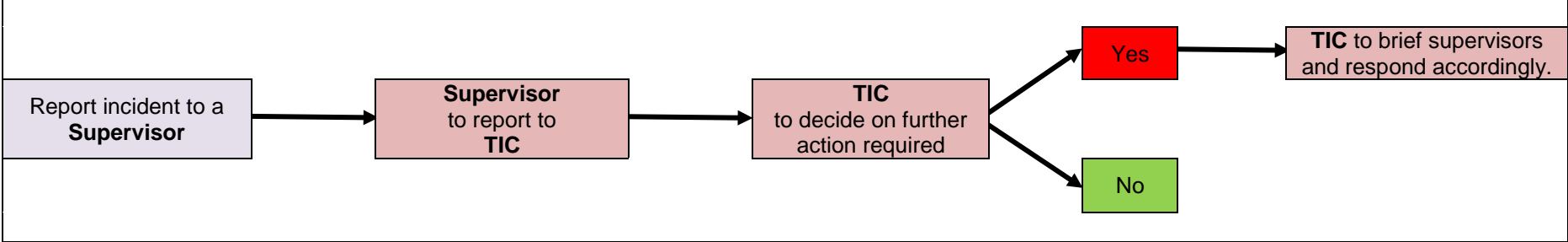
EXAMPLE EMERGENCY FLOW CHARTS

This is an example only and is not intended as a definitive set of procedures to follow in emergency situations.

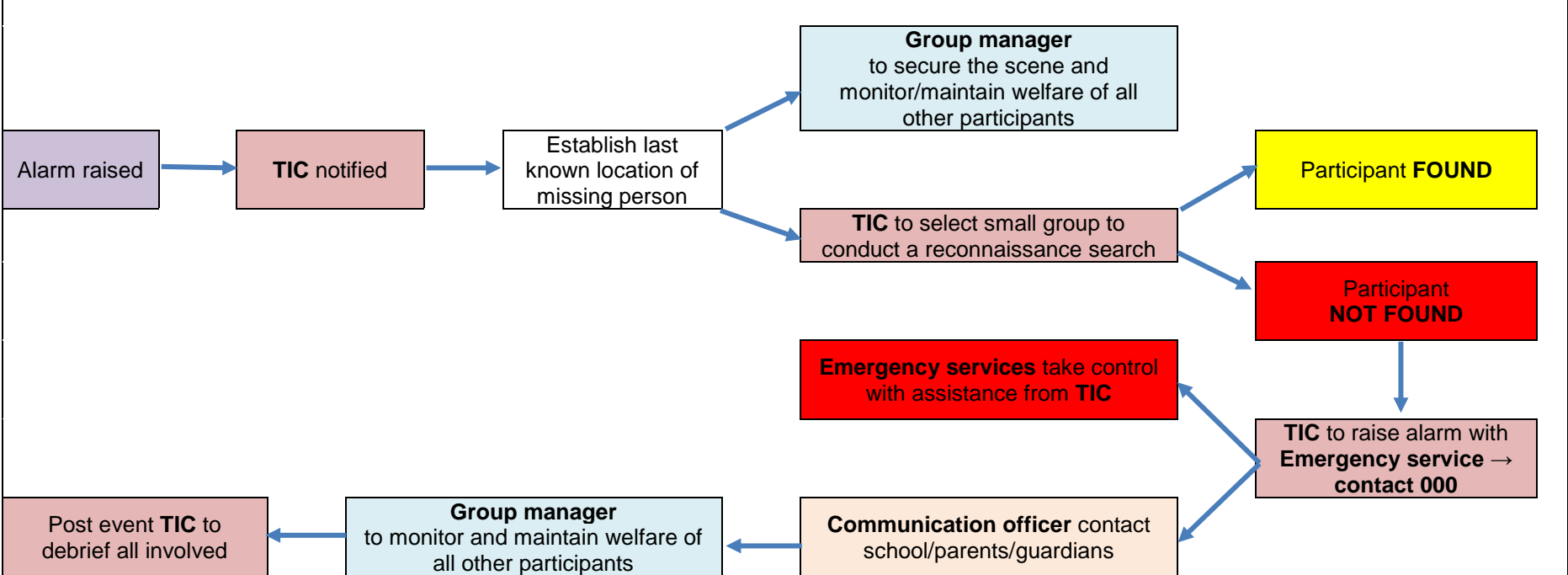
INCIDENT REQUIRING MEDICAL ATTENTION



INCIDENT NOT REQUIRING MEDICAL ATTENTION FLOW CHART (e.g. negative behaviours)



LOST PARTICIPANT FLOW CHART



EMERGENCY EVACUATION FLOW CHART

