

This is a Fillable Word form. The text boxes will expand as you type. If you would like to print the form and complete by hand, please use the PDF form, which has larger text boxes.

#### Instructions:

- Attach additional information as needed
- Have on hand at all activities
- Include with your submitted forms for activity assessment
- Ensure all supervisors are aware of the contents of this plan prior to the event

Unit: 1st Layer Cake Guide Unit - Template	Today's Date: 27 August 2022				
Unit meeting/ Activity/event/camp: Camp Skills Day		Date(s) of activity: 18 Sep 2022			
At the activity, attach to your emergency response information:					
☑ A list of participants	Schedule of activities or itinerary				

# **Emergency Planning Information**

The Emergency Response Guidelines (found in the Safe Guide Appendix H) include general procedures for managing issues related to missing persons, intruders, evacuations, medical emergencies and caregiver/guardian late for pick-ups. Use these guidelines as you create your own specific response plan details below.

# **Emergency Procedures for this activity**

Missing Person (e.g. Who will do buddy check? Special search locations; timeframe for reporting etc.) Samantha to determine who exactly is missing using buddy check in. A search will be organized by the Mary Jane with the assistance of other nearby adults. The rest of the youth will remain at the site/muster area with Patty.

Determine the time and place where the person(s) was last seen.

Check the site and surroundings, focusing on areas where the person is most likely to be.

The police and/or search and rescue will be contacted if the person is not located after reasonable amount of time (max 1/2hr urban) Notify caregivers/guardians and BC GGC Emergency number if required

Evacuation (e.g. reasons to evacuate, meeting place; who will support group? etc.) Consider reasons you may need to evacuate – fire, severe weather, severe injury, wide-spread illness. Predetermine an all-clear signal or system for communicating when it is safe to return to the site. (Whistle, cell phone)

### **Evacuations**:

- •Define a meeting place to go to outside of the danger area inform the group of this location (tent site parking or Kopje Park North of Camp Arbuckle if must evacuate off of property)
- •Determine a means of transportation if leaving the site (foot or car)
- •If possible, conduct a buddy check-in and head count before leaving the site
- •Mary Jane will take attendance with assistance of all supervisors. Samantha will bring the Health forms and first aid kit. Mary Jane will provide further instruction.
- •Reconfirm the all-clear signal or system for communicating when it is safe to return to the site
- •Reassure participants and attend to their needs
- •Monitor the situation for changing or threatening conditions.

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### Earthquake:

Use Duck, Cover, Hold within the immediate area underneath solid protection or in small groups hug a tree trunk until shaking has stopped for several minutes.

Remain on site/at location unless it is apparent that the structure/area is unsound, until safe to move. Follow evacuation procedures, if necessary.

#### Fire at Site:

(Note: Fire travels up hill) Guider who discovers the fire that cannot be put out easily or is spreading, Mary Jane will immediately call 911 and inform the building owner. Vacate the site.

NOTE: if the fire grows, a broader evacuation is needed. Exit the site to a safe location leaving the access clear for emergency vehicles. Samatha will be in charge of taking the health form and First Aid kit with them. All participants to remain at the gathering point until firefighting personnel have advised it is safe to move.

#### Massive Storm:

Mary Jane to move participants to safe location with Samatha bringing the health forms and First Aid kit. When at site we will monitor weather and evacuation plans will be put in place if necessary.

\*for all situations, update home contact or GGC emergency number when safe to do so.

**Unwanted visitor** (person, animal) (e.g. note safe place; who will lock doors: etc.) **Person**:

#### Intruder:

If Intruder is on the grounds, have all Guides go to the flagpole. From a distance Patty to ask the person if you can help them and point out that they are on private property and that you would like them to leave. If the intruder is persistent or threatening, alert others that there is an emergency. Patty will advise the Guides that there is a human intruder on the property, indicating last known location. If person in not cooperating contact Police (911). Remove Guide into a building/location when possible and go into lockdown. Conduct a headcount.

When possible, go into lockdown before the person enters the building/space.

Lockdown area/facility/room – lock and barricade doors, when possible, keep the group out of sight and from making any noise.

If possible, without alerting the intruder, communicate with others in other activity areas of the potential threat.

Note identifying features and threatening actions of an intruder Contact the police and report the situation.

Conduct a headcount.

Be prepared to remain in a lockdown situation for a substantial period of time.

After the removal of the intruder, Mary Jane will advise that the situation has been resolved and remind youth to be alert and to report any unusual visitors/activities for further action.

# Animal:

Advise everyone that there is a big animal on the in our location, indicating last known location. Alert others that there is an emergency.

Implement on-site plan for safety of the youth by moving to safer location Remain alert to any sightings.

If the animal is persistent or threatening relay this to others nearby and contact Dangerous Wildlife. If appropriate, after consultation with the staff, move youth to indoor locations.

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RG will monitor the situation so that appropriate plans can be made to continue at that location or to move onto the next activity in a different location.

**Serious injury or medical emergency** (e.g. who will call 911? who will support others? who will guide EMS to location?)

# Medical Emergency:

Samantha will take charge and ask for additional help if needed. 911 will be called by Mary Jane, they will give directions to EMS. Samantha will attend to the injured person. Patty will take charge of the rest of the Youth and moved them away from the situation.

- Mary Jane, or a pair of Guides will be sent to meet the emergency response crew responding and lead them to the patient.
- Assist the first responders as directed and keep the other participants calm.
- Contact the BC Provincial Emergency number.
- Contact the family, if necessary, after speaking with the provincial office
- Determine the best course of action for the group.

\*Minor medical needs will be addressed by Samantha. This includes treatment, completing of appropriate forms and follow up where required.

Samantha is responsible for having first aid kit, forms and health forms at camp

**Child not picked up** (e.g. use contact info on health form, what number to leave if no answer; who will look after them)

Caregiver does not pick up at the end of the event:

- \* If caregivers/guardians answer ask permission to have child go with another caregiver/guardian/guider
- •If no answer, arrange for her to travel with a screened volunteer after leaving messages for Care at all contact numbers. Avoid one-on-one situations.

If possible, continue calling during travel.

\*Guider to complete INS.01

**Suspected/confirmed communicable disease** (for example, COVID-19, flu, gastroenteritis, etc.) (e.g. where will you isolate the person? When/how will guardians/emergency contact be contacted?) All youth and Guiders must complete the Illness Self-Assessment screening before attending any GGC event. If a youth or Guider is experiencing any symptoms, they will not attend.

Youth or Guiders who develop symptoms during the activity will be isolated from the other members. The ill person and First Aider will wear a non-medical mask, hand sanitizer will be used, and the physical area sanitized after the ill person has left. Be respectful.

Caregivers will be contacted to pick up youth member immediately.

An incident report must be completed if a youth, Guider or volunteer is sent home because they are experiencing an illness.

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<sup>\*</sup>Send a guider with the injured/EMS if able to



### Other Emergency Planning Situations

For example, roadside emergencies (bus/car breakdown or accident), water related emergencies, steps for providing assistance to participants who have a disability based on their needs and discussions with the individual or her caregivers.

# Campfire/Cookstove Cooking:

While cooking over the campfire, review safety guidelines. Guides will be instructed to remove scarves and any dangling pieces of clothing and tie up hair. no reaching across fire, no flinging marshmallows, no rambunctious play near the fire. We will provide a hair tie for those who have forgotten one.

# **Anaphylactic Food Allergy:**

Molly has an anaphylactic allergy to nuts.

In the event of an anaphylactic reaction, an epi-pen will be administered by the girl, with or without assistance from one of the Guiders. She will then be driven to the hospital in Kelowna by Mary Jane for follow-up care (~20 minutes).

- Bring the H.3 & INS.01
- Directions to the hospital are in the file folder of paperwork.
- Call the caregivers to update them on the situation. Decide on a course of action in conjunction with the medical staff and caregivers.

# Hypothermia:

Note The victim is generally not able to notice their own condition.

### Mild Hypothermia

- Shivering may begin.
- Cold sensation, goose bumps, unable to perform complex tasks with hands, shivering can be mild to severe, hands numb.

### Moderate Hypothermia

- Shivering, intense, muscles incoordination becomes apparent, movements slow and laboured, stumbling pace, mild confusion, may appear alert. Use sobriety test, if unable to walk a 9 meter (30 foot) straight line, the person is hypothermic.
- Violent shivering persists, difficulty speaking, sluggish thinking, amnesia starts to appear, gross muscle movements sluggish, unable to use hands, stumbles frequently, difficulty speaking, signs of depression, withdrawn.

### First aid for hypothermia includes the following steps:

- Seek medical help immediately. Hypothermia is a medical emergency.
- Ensure that wet clothing is removed.
- Place the victim between blankets (or towels, newspaper, etc.) so the body temperature can rise gradually. Body-to-body contact can help warm the victim's temperature slowly. Be sure to cover the person's head.
- Give warm, sweet (caffeine-free, nonalcoholic) drinks unless the victim is rapidly losing consciousness, unconscious, or convulsing.
- Quickly transport the victim to an emergency medical facility.
- Do not attempt to rewarm the victim on a site (e.g., do not use hot water bottles or electric blankets).
- Perform CPR (cardiopulmonary resuscitation) if the victim stops breathing. Continue to provide CPR until medical aid is available. Hypothermia victims that have appeared dead have been successfully resuscitated.

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#### Canoe Issue on Water:

Check the weather forecast prior to going out. Put safety first and do not go out in any if conditions are unsafe. Prior to going out on water, go over basic strokes and safety instructions with the group. Throw lines will be demonstrated. Discuss paddle, whistle, and voice commands we will be using. (e.g., 3 quick, sharp whistles paddle for nearest shoreline; 2 whistles group up and listen to lead for voice directions). If strong winds kick up and the group canoeing is unable to safely continue back to camp paddle to shore and pull canoes up. Walk back to Camp Arbuckle as the canoe route will take us along the shoreline and will not be more than 1 to 2 km from camp at any time. Once the weather/winds have cleared, return for canoes or have a more experienced group of paddlers return for canoes.

Prior to getting into the canoe paddlers will be required to sanitize and paddles will be sanitized as well. All participants will be strongly encouraged to bring own life jackets. For those that do not have a life jacket one will be provided.

In the event of an overturned or swamped canoe, proceed with appropriate rescue procedures. (canoe over canoe rescue, etc.). The facilitator will take the lead on rescue and boat 'y' (as designated at each session) will direct the other canoes to maintain a safe distance from rescue operation or head to shore as indicated by conditions.

### Vehicle Travel:

We are carpooling to camp. In the event of a breakdown, we will use cell phones to contact other Guiders and Home Contact Person and will make alternative arrangements for youth to arrive at camp. Vehicle descriptions and license plates will be taken of drivers prior to leaving for camp.

### Ferry Travel:

In the event of a ferry service disruption, RG will contact the Home Contact Person to advise caregivers of the delay. Guiders will carry extras funds to cover off costs of meals, which will be reimbursed by the caregivers as part of the additional camp cost. Guider #2 will carry additional games or other small activities to keep the youth occupied. Head counts will be performed every 15 minutes and youth will need to have a buddy at all times.

### **Adaptive Spaces:**

Guiders will ensure that a person with a disability who is accompanied by a service animal or who is using an assistive device has access to the premises where the activity is taking place. If another person's health or safety would be severely impacted by the presence of a service animal, the Guider must consider all relevant factors and options and try to find a solution that meets everyone's needs.

<take into consideration accessible campfire/cooking spaces, washrooms and sleeping arrangements>

Resource	Contact Number(s)		Specific instructions for
EMS ambulance		Other: 250-727-2400	communicating: We are a group of <#>
Fire	911	Wildfire: *5555	Sparks/Embers/Guides/Pathfinders/R angers/Trex with <xx> supervisors.</xx>
Police		Other: (local police #)	We are located at:
Commissioner or ACL: AC Team 250-590-0744			Specific address, including campsite Include distance to nearest intersection
Home Contact Person: Full name and number			
Provincial emergency contact for GGC: 1-888-884-2711			

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Facility/Site Contact: <name &="" number=""> or n/a</name>
Poison Control: 1-800-567-8911
Public Health Unit: 811
Kelowna Hospital 2268 Pandosy St, Kelowna, BC V1Y 1T2 (250) 862-4000
RG Guider Cell: Mary Jane Cell 250-123-4826
First Aider Cell: Samantha Cell 250-123-9804
Guider #1 Cell: <name &="" number=""></name>
Transportation Contact: <name &="" number="">, if appropriate</name>
Dangerous Wildlife: < number>
TPSP Contact: <name &="" number="">, if appropriate</name>

<sup>\*</sup> GGC emergency contact numbers can be found in Safe Guide or on your provincial council website.





Person spoken to:

Making an Emergency Call					
<ul> <li>When making an emergency call</li> <li>Stay calm</li> <li>Review what you want to say making the call</li> <li>Take a deep breath</li> </ul>		• before •	Speak slowly and clearly Follow the script as much as possible Don't hang up until told to		
Before making the call for help, make sure you have the following information:					
Location	Our 911 civic addres	s/emergency locator	#: (or nearest civic address) is:		
	The location of the group is (nearest landmark):				
	Lat/Long or UTM coordinates: (as applicable for wilderness situation)				
Resources Requested	We need assistance List specific needs:	from	(EMS/fire/police/rescue/other).		
Situation	Description of Problem:  Number of people injured, missing or needing help: Condition of victim(s):				
Our plan	We have taken the following actions: We are planning to do the following:				
My contact info is	My name is (phone/cell):	I am with	a Girl Guide group. My phone number is		
Call made to: ☐ 911 ☐ Other:					
Time of call:		Call made by:			

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# **Serious Incident Management**

A **serious incident** is defined as an incident that may require urgent response or outside support and may or may not impact the ability of GGC to operate. There are two types of serious incidents 1) an **emergency** and 2) a **crisis**.

An **emergency** is a serious incident that falls within the scope of the organization's resources to respond to. It does not threaten GGC's ability to operate. **Emergencies** can involve any of the following:

- A situation which requires assistance from authorities (fire, police, ambulance, etc.)
- Participants who are emotionally and/or psychologically distressed
- Behaviour that severely impacts other people
- Serious illness or injury (threat to life of limb)

A **crisis** is an event that is, or has the potential to be, a turning point in the organization. A crisis may overwhelm the organization's available staff and resources and impact its ability to operate.

Examples of crisis may include:

- A fatality during a GGC activity or at a GGC-owned or operated site
- A multiple injury or illness incident during GGC activity or at GGC-owned or operated site
- Any incident which would have future negligence and/or criminal repercussions
- Any significant vehicle incident-
- A missing girl or adult (who is not located after preliminary search as outlined in Safe Guide)
- An active shooter
- A natural disaster such as a flood, forest fire, earthquake, ice storm, etc.

### **Communications Plan Guidelines**

A Communications Plan is the written set of instructions to follow for contacting emergency agencies, GGC authorities and caregivers in the event of a serious incident and is incorporated into your Emergency and Crisis Response Plan (SG.4). The plan covers a number of functions that need to occur to smoothly manage serious incident communications.

### **Communication during an Emergency**

For most emergency situations, the communications pattern in and emergency would look something like this:

- 1. The Responsible Guider or Substitute Group Leader contacts:
  - EMS and/or other local authorities, when necessary
  - Group members (to provide reassurance)
  - Home Contact Person (if applicable to your activity)
- 1. Home Contact Person (where applicable) or Responsible Guider makes initial contact with Caregiver(s)/guardian(s) to provide current status report and next steps.
- 2. After dealing with immediate needs, Responsible Guider or another group leader may contact Caregiver(s)/guardian(s) personally to discuss further details, answer questions and problem solve where applicable.
- 3. Once the situation is over the Responsible Guider notifies GGC Authorities as per the Incident Reporting guidelines in Safe Guide (Form: INS.01).

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# **Communication during a Crisis**

The National Office will manage the communication of a crisis with members, their families and media. Only those individuals authorized to do so will speak publicly or with the media on behalf of the organization.

#### What to do in a crisis situation:

- 1. The Responsible Guider or Substitute Group Leader contacts:
  - EMS and/or other local authorities, when necessary
  - Ask for assistance from EMS in contacting Caregivers/guardians of injured member
  - Group members (to provide reassurance)
  - Home Contact Person (if applicable to your activity)
- 2. Notify the Provincial Commissioner. Check your provincial office or website for the emergency contact number. Or ask your District Commissioner/ACL to help you reach her.
- 3. Provide the Provincial Commissioner with details of the incident. Use the script with the Emergency and Crisis Response Plan (SG.4) as a guide. She will inform and follow up with the appropriate national contacts.
- 4. Do not talk to the media.
- 5. Notify all participants that they must not use cell phones or send electronic messages to friends and family.
- 6. The appropriate person to contact the Caregiver(s)/guardian(s) and others as necessary will depend on specific circumstances and will be determined at the national level.
- 7. Any media inquiries received by GGC members must be referred immediately to the national office. An appropriate response to the media would be:

"I'm sorry, our policy is for all media inquiries to go through the national office. Please contact them and the appropriate person will respond to you as soon as they are available. The phone number is (416) 487-5281."