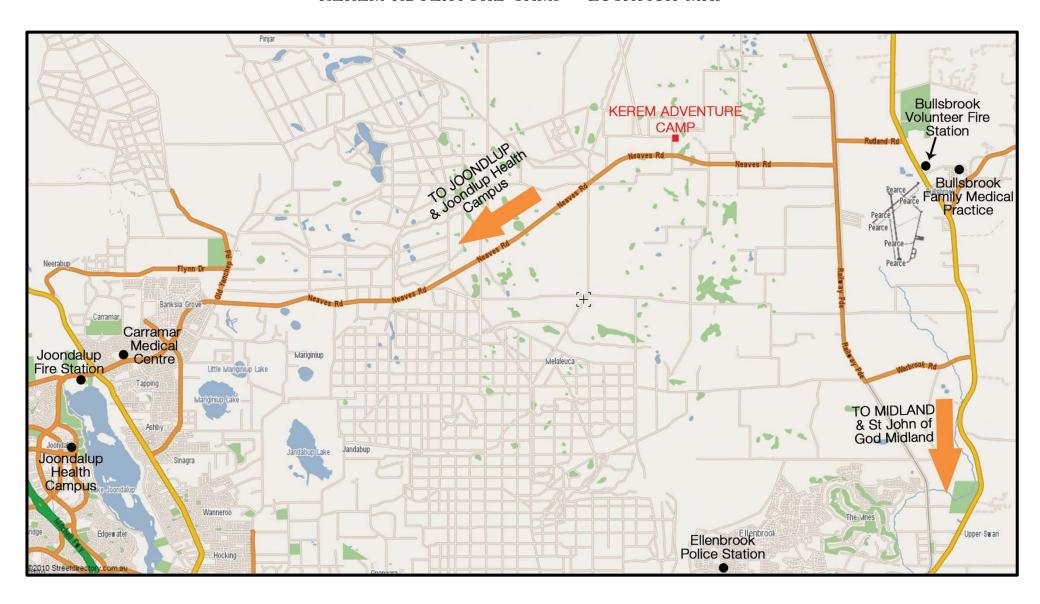


KEREM ADVENTURE CAMP |
emergency management plan

CONTENTS

CONTENTS	1
KEREM ADVENTURE CAMP – LOCATION MAP	2
EMERGENCY CONTACT NUMBERS	3
MAP – EMERGENCY EQUIPMENT AND LAYOUT	4
TYPES OF EMERGENCIES	5
EMERGENCY CONTROL ORGANISATION	5
COMMUNICATIONS	6
STANDARD EMERGENCY RESPONSE	6
LOST OR MISSING GUEST	7
LEGAL ADULT	7
LOST CHILD	7
FIRE RESPONSE	8
SMALL/SPOT FIRES	8
EVACUATION PROCEDURE	9
MEDICAL EMERGENCY RESPONSE	13
MAP – JOONDALUP HEALTH CAMPUS	14
MAP – ST JOHN OF GOD MIDLAND	15
MAP – BULLSBROOK FAMILY MEDICAL PRACTICE	16
MAP – CARRAMAR MEDICAL CENTRE	17
ON SITE EMERGENCY RESOURCES	18
BITES & STINGS INFORMATION	19
INSECTS	19
SNAKE BITES	21
ΔΝΔΡΗΥΙ ΔΧΙς	22

KEREM ADVENTURE CAMP - LOCATION MAP



EMERGENCY CONTACT NUMBERS

Venue Details: Kerem Adventure Camp, 100 Kirby Road, Bullsbrook 6084

Nearest intersection: Neaves Road

	Emergency Service	
KEREM ADVENTURE	Office	0403 424 894
CAMP	On-call Camp Supervisor	0403 424 894
OAMI	Camp Management	0412 835 919
EMERGENCIES	Emergency Services	000
LIMENOLITOILS	For mobile phones	112
	Horizons West Bus and Coach Service	
EVACUATION	Business Hours Phone	08 9351 8980
	After Hours Emergency Phone	0478 674 315
POLICE	Police Assistance (non-emergencies)	131 444
FOLICE	Ellenbrook Police Station	08 9297 9800
FIRE	Joondalup Fire Station	08 9300 9222
TINE	Bullsbrook Volunteer Fire Service	08 9571 2099 or 0427 471 577
	Joondalup Health Campus	08 9400 9400
HOSPITALS	St John of God Midland	08 9462 4000
	Princess Margaret Hospital for Children	08 9340 8222
MEDICAL CENTERS	Bullsbrook Family Medical Practice	08 9571 1478
MEDIOAL GENTERO	Carramar Medical Center	08 9206 7100
SES	General Assistance	132 500
JEG	Swan State Emergency Service	08 9250 6717
WESTERN POWER	Report and enquire faults and emergencies	13 13 51
POISONS INFORMATION CENTER	Poisons Information	13 11 26

MAP - EMERGENCY EQUIPMENT AND LAYOUT



ACCESS ROADS, SEALED & UNSEALED

MOBILE FIRE UNIT

TYPES OF EMERGENCIES

An emergency may arise as a result of any of the following:

Medical Emergency

Fire

Hazardous Materials

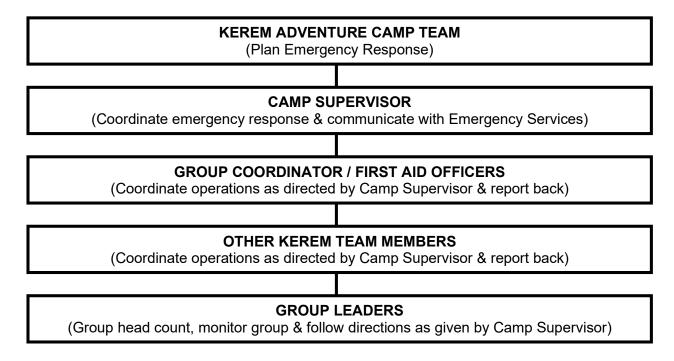
Armed Intrusion / Hold Up

Bomb Threat

Other Unforeseen Emergency

EMERGENCY CONTROL ORGANISATION

The following chart identifies both the process for reporting and the responsibility structure of all staff located within the facility and its environments.



COMMUNICATIONS

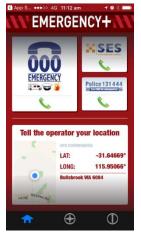
The Camp Supervisor can be contacted on the camp mobile phone - 0403 424 894

If an emergency assembly is required, the alarm will be raised by Kerem team member or Group Coordinator with the aid of a whistle (a sequence of 3 short, sharp whistles). The Kerem team member or Group Coordinator will move through the premises sounding the alarm whilst clearly stating "This is an emergency evacuation, please move quickly to the assembly point at (marked location agreed upon with Camp Supervisor)."

EMERGENCY+ APP

Group Leaders may also want to consider downloading the free mobile app on Apple and Android devices – '*Emergency* +'. It helps to locate your position in an emergency and provides a range of non-critical phone numbers in Australia that may assist in an emergency or incident.







STANDARD EMERGENCY RESPONSE

In the event of an incident or accident, it is expected that all Kerem team members and Group Leaders will:

- 1. Ensure their own safety.
- 2. Provide direction to ensure bystander safety.
- 3. Care for casualties according to training DRSABCD should be followed.
- 4. Notify Emergency Services, Group Coordinator and Camp Supervisor as soon as practical to ensure that any required emergency response can commence.
- 5. If an emergency siren is sounded or a call given to evacuate, head to the assembly point as a group, follow instructions given by the Camp Supervisor or their delegates (Group Coordinator, Kerem team member)

LOST OR MISSING GUEST

LEGAL ADULT

Where the guest identified as missing from the camp is a legal adult, but the organisation in residence has a responsibility of care, all efforts should be made by the Group Coordinator to contact the guest. If unsuccessful, the guest's next of kin and any known friends or relatives are to be contacted to assist in establishing the where-abouts and safety of the guest. If the guest has not been located after 24 hours, it is recommended that the Group Coordinator contact the police.

Where the guest has limited mobility or cognitive function, the following procedure for a lost child should be followed.

LOST CHILD

Where a child is identified as missing from the camp the Camp Supervisor will:

- 1. Initiate Emergency Evacuation Procedure to bring all guests to the Emergency Assembly Area and take role call to account for all guests.
- 2. Inform the CEO of Cahoots that a search is under way as soon as practically possible.
- 3. Determine the last known siting and location of the guest, and any other information relevant to the Guest's disappearance.
- 4. An appropriate number of group leaders are to be delegated to maintain order in the camp group and retain guests in the Emergency Assembly Area or other suitable location.
- 5. Distribute two-way radios (and torches if at night) to all available team members and Group Leaders. Radio silence is to be adhered to except for the Camp Supervisor and/or Group Coordinator requesting updates on progress, and any siting of the child.
- 6. Commence a systematic search of the property and surrounding area in the following order:
 - a. Buildings and sheds including all locked areas (close doors after searching where possible). Leave one adult stationed at the Guest's accommodation area in case they return.
 - b. Lawn areas and structures commencing from The Climb Zone lawn, four to five adults walk north checking all outdoor locations, including under huts and enclosed activity areas.
 - c. Using vehicles, slowly explore all tracks and firebreaks throughout camp, Kirby Road and up to 1 km east and west along Neaves road.
 - d. Bush areas commencing on the southern border of the property, as many adults as possible are to work their way systematically down the length of the property calling the guest's name until the northern most fence is reached.
 - e. If the child is not located, the Group Coordinator should contact the relevant personnel and authorities to report the guest missing.
- 7. Provide regular updates to the CEO of Cahoots and continue to assist Group Coordinator as required.

FIRE RESPONSE

Group Coordinator and/or a Group Leader complete the below checklist to help respond to the incident.

SMALL/SPOT FIRES

If the fire is a small/localized fire that can be extinguished with a fire extinguisher, follow the procedure below:

- ☐ Advise the Camp Supervisor who will then take control of the incident upon arrival.
- Warn guests in the immediate vicinity.
- Attempt to extinguish the fire unless advised otherwise by Camp Supervisor.

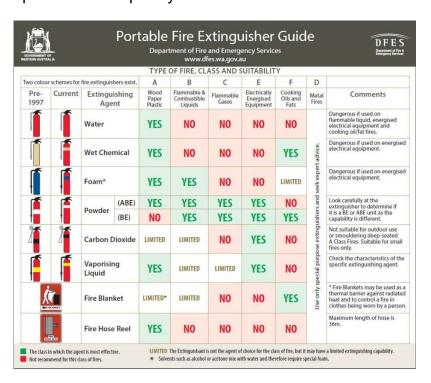
USING A FIRE EXTINGUISHER:

- 1. If possible and safe to do, so have another person back you up with another extinguisher.
- 2. Remove the pin from the Fire Extinguisher trigger.
- 3. Hold extinguisher upright and point it at the base of the fire.
- 4. Squeeze the trigger to activate the extinguisher and move in a sweeping motion.
- 5. Where possible, keep the doorway at your back or behind you and keep low to avoid smoke.
- 6. Do not get too close to the fire.

USING FIRE BLANKETS:

Smothering extinguisher use for fat, oil, chemical or human torches:

- 1. To release the blanket, pull the two red tabs, which will unfold the blanket.
- 2. Place or throw the blanket over all areas of the fire to extinguish.
- 3. Leave blanket in place until completely cool.



EVACUATION PROCEDURE

In the event of a large fire occurring on the property, or the threat of a nearby bushfire (as advised by DFES), the venue must be evacuated to ensure the safety of all team members and guests. The Group Coordinator should:

Call '000', if no response call 112 from a mobile, provide information on numbers at site.
Contact the Camp Supervisor on 0403 424 894 and alert them of the situation.
Raise the alarm and move group members to the Primary Assembly Point or, if unsafe to do so, evacuate to the Secondary Assembly Point.
Account for all group members and ensure their immediate safety.
Notify Camp Supervisor and/or Emergency Services as soon as possible if any group members are unaccounted for.
Stay or evacuate? Early Evacuation is always the safest option. The decision to stay or evacuate will be based on the following indicators:
 Location of fire according to Bushfire Zones and Evacuation Routes Map (p 10). Direction of fire and winds. Advice from DFES. Advice from Camp Supervisor. Where a bushfire exists within the Shelter in Place Zone (p 10) the decision to evacuate should be made only if it is clearly safe to do so. For evacuation bus service, phone Horizons West Bush and Coach lines on 08 9351 8980 (business hours) or 0478 674 315 (after hours emergency) as soon as possible. Expect a delay of up to one hour. Emergency services (000) should be notified of the decision to evacuate
Follow instructions from Camp Supervisor and DFES or other Emergency Service employees
If Camp Supervisor or DFES advises evacuation to safe location: o Camp Group Leader to ensure all persons accounted for when leaving site.
If unable to evacuate site, shelter group in the U-Hut (dining/meeting halls). If unsafe to do

so, move group to a location opposite the direction of fire and smoke travel.

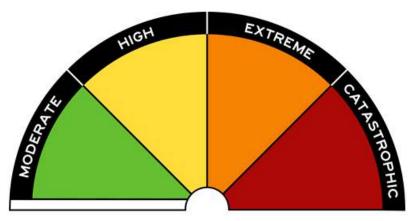
BUSHFIRE PREPARATION

- During bushfire season it is recommended that the Group Coordinator takes notice of fire danger rating daily.
- ☐ In the scenario that:
 - the forecast fire danger rating is catastrophic or extreme
 - a total vehicle movement ban is declared
 - a bush fire is identified within the Bushfire Awareness Zone (see Bushfire Zones and Evacuations Routes Map on following page)

the Group Coordinator is required to track guest movement on and off the property using the Guest Movement Record register located in the Meeting Hall in the U-Hut.

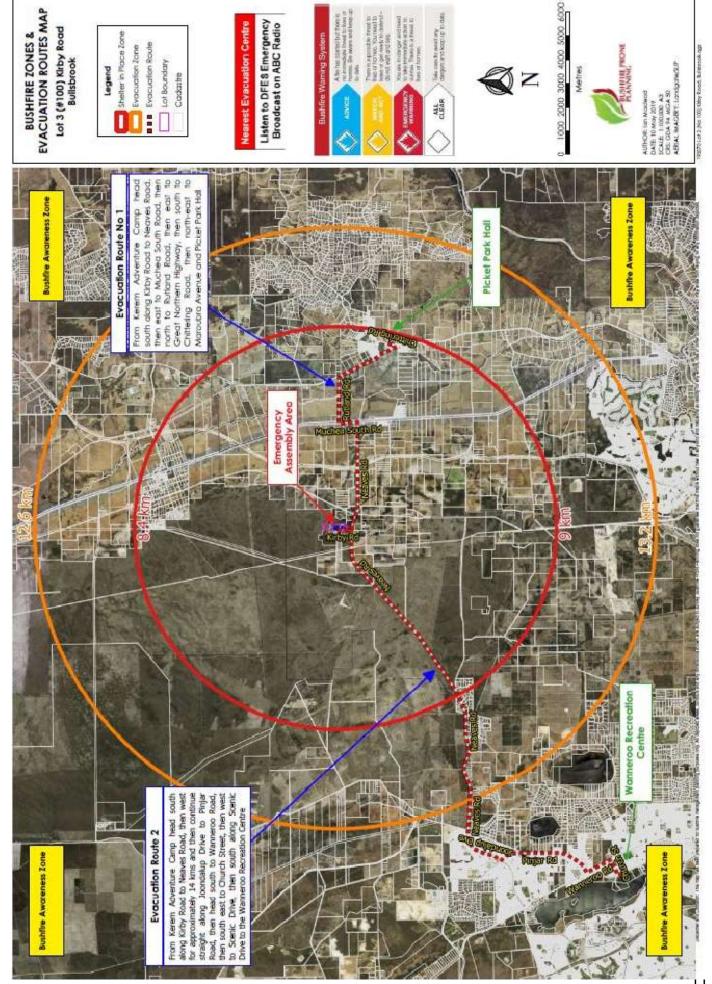
Please Note: Where the above conditions exist, it is recommended that occupants without available transport leave the site the day prior. Horizons West Bus and Coach Lines ((08) 9351 8980) are available in the event of evacuation. Expect a delay of up to one hour.

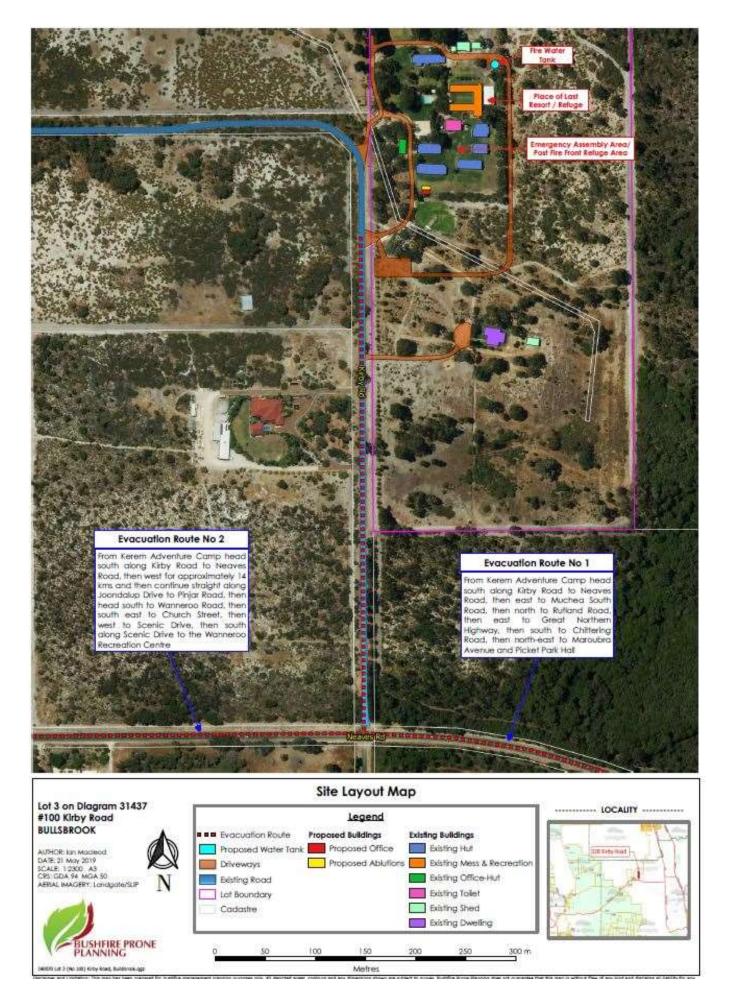
- □ Where a bush fire is identified within the 12.6 km Evacuation Zone, the fire and weather conditions are to be closely monitored. HorizonsWest Bus and Coach Lines placed on standby, and the group prepared for evacuation. All movement of guests and team members is to be monitored.
- Where a bush fire is 8 km or closer the site, the weather conditions are to be closely monitored and Guests prepared to evacuate, pending decision made by Camp Supervisor in conjunction with the Group Coordinator and CEO of Cahoots. Guests will evacuate to the nearest shelter or return home via the safest route.
- ☐ If the site falls within an evacuation zone, as defined by DFES, the site must be evacuated immediately.



There are four levels of fire danger in the new system:

- 1. Moderate: Plan and prepare.
- 2. High: Be ready to act.
- 3. Extreme: Take action now to protect your life and property.
- 4. Catastrophic: For your survival, leave bushfire risk areas.





MEDICAL EMERGENCY RESPONSE

Group	Group Coordinator and/or Group Leaders use this list to help respond to the incident:		
	Call for First Aid Officer and commence DRSABCD. First Aid Officer to take control on arrival		
	If required Call '000', if no response call 112 from a mobile, provide information on numbers at site.		
	Alert Camp Supervisor as soon as possible		
	Place someone at the main gate entry to direct ambulance to medical emergency location		
	On site resources in the First Aid Room include: Defibrillator First Aid Kit Wheelchair Crutches Treatment bed EpiPen (camp office)		
	First Aid Officer to remain with injured person until help arrives		
	If an ambulance is not required, arrange to transport guest for further medical assistance (refer map and contact information in this document).		
	Complete reports as advised by the Camp Supervisor		

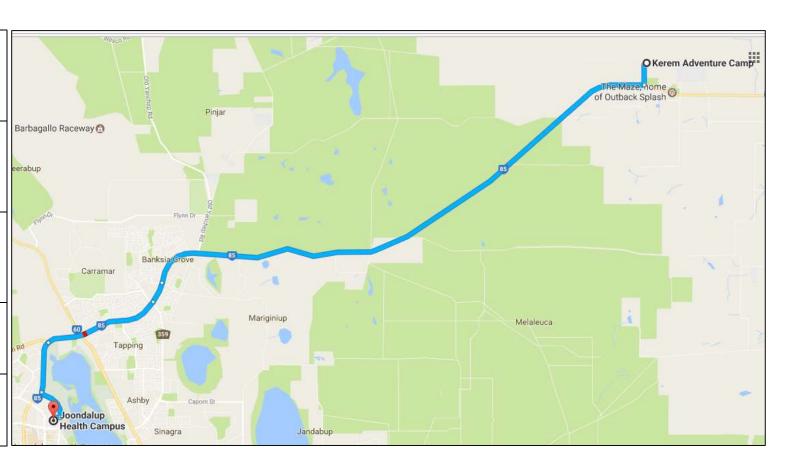
MAP - JOONDALUP HEALTH CAMPUS

Joondalup Health Campus - 08 9400 9400

Shenton Avenue, JOONDLAUP

Approx. 22-minute drive

Head south on Kirby Road towards Neaves Road, turn right onto Neaves Road	600 m
Travel along Neaves Road and then Joondalup Drive to Lakeside Drive, turn left*	21 km
Travel along Lakeside Drive to Shenton Ave, turn right onto Shenton Ave	1.3 km
Travel on Shenton Ave to the first roundabout take the 3 rd exit	170 m
Follow hospital signs to the desired department	



^{*}Neaves Road changes into Joondalup Drive once it reaches the suburb of Banksia Grove

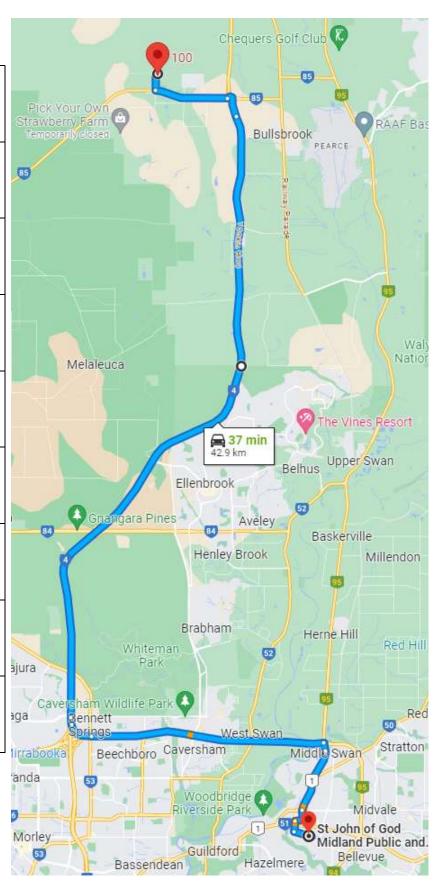
MAP - ST JOHN OF GOD MIDLAND

St John of God Midland Public & Private Hospital - 08 9462 4000

1 Clayton Street, Midland

Approx. 37-minute drive

600 m
4.2 km
25.8 km
8.7 km
62 m
2.3 km
640 m
400 m
450 m

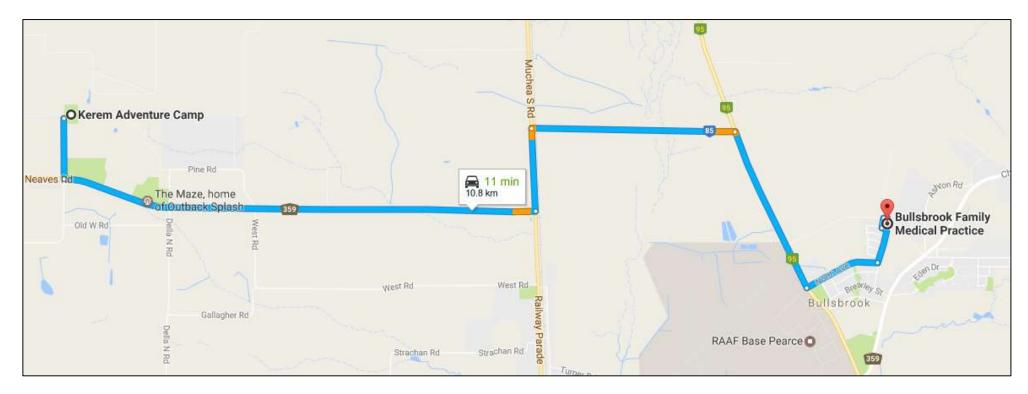


MAP - BULLSBROOK FAMILY MEDICAL PRACTICE

Bullsbrook Family Medical Practice – 9400 9400

49 Kimberley St, Bullsbrook

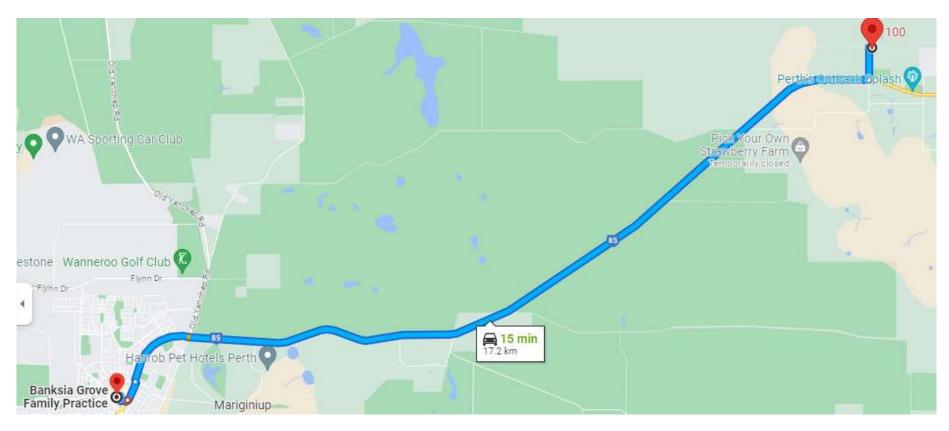
Approx. 11 min drive



600 m
4.6 km
800 m
2 km
1.7 km
750 m
400 m

MAP - BANKSIA GROVE FAMILY PRACTISE

Banksia Grove Family Practice - Ph. 08 9206 7100 - Banksia Grove Shopping Centre, Joondalup Drive

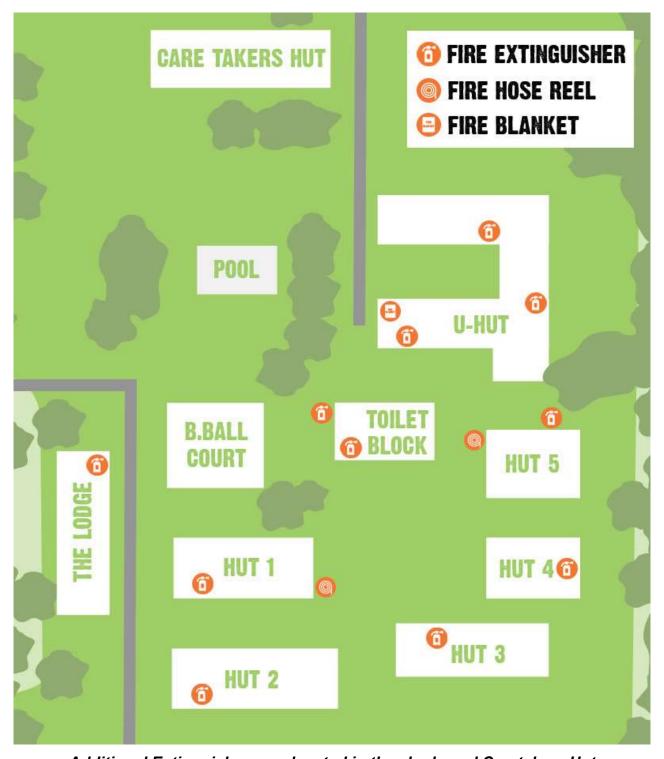


Head south on Kirby Road towards Neaves Road, turn right onto Neaves Road	600 m
Travel along Neaves Road and at the first roundabout take the second exit onto Joondalup Drive	15.8 km
Travel along Joondalup drive, through two round abouts, turn right onto Cheriton Drive	400 m
Turn right into Banksia Grove Shopping Centre (Coles Service Station on the corner)	110 m
Banksia Grove Family Practice is in the shopping centre, next to the pharmacy	

ON SITE EMERGENCY RESOURCES

EpiPen – Camp Office First Aid Kit – First Aid Room Spinal Board – Pool Pump House Wheelchair – First Aid Room

Fire Extinguishers Locations:



Additional Extinguishers are located in the sheds and Caretakers Hut

BITES & STINGS INFORMATION

INSECTS

Serious allergic reactions occur in approximately 2% of stings from ants, bees and wasps. Symptoms such as swelling of the face, lips and tongue, breathing difficulties or a generalized rash are potentially life-threatening and require urgent medical attention.

BEE STINGS:

- Remove the sting by scraping, never squeeze the site
- Wash the area and apply antiseptic cream
- Keep the sting site rested, elevated and cool
- Local swelling and irritation may last for several days

WASP & HORNET STINGS:

- These do not leave a sting behind
- Treat as for bee stings

TICKS

- Do not treat tick with creams, substances or attempt to burn
- Using flat tweezers or fingers, twist and pull anti-clockwise rapidly
- If head remains under skin seek medical attention

SCORPIONS:

- Stings can be painful and the pain may persist for several hours
- Local redness and numbness often occurs
- Wash the sting site; apply antiseptic and cool pack
- Give oral analgesia such as paracetamol
- Australian scorpions do not cause severe symptoms

CENTIPEDES:

- Apply antiseptic to the bite site
- Local redness, itching and pain are common
- Severe pain sometimes occurs

SPIDERS:

Red-back Spiders:

- Wash bite site; apply antiseptic and cool pack
- In the majority of cases only minor pain and redness occurs
- In 25% of cases, severe pain and other symptoms such as sweating, headache, vomiting and muscle pain develop over the first few hours
- · Hospital assessment required for severe symptoms

•

White-tailed Spider (Lampona):

There is no clear scientific evidence that bites from these spiders' cause skin ulcerations.
 Treat as for bites from spiders-other

Spiders-other:

• Wash the bite site, apply antiseptic and see your GP if signs of local infection develop

This information only applies to the regions of South Australia, Western Australia and the Northern Territory.

SNAKE BITES

- Signs are not always visible but may be a puncture marks, bleeding or scratches.
- Symptoms developing within an hour may include headache, impaired vision, nausea, vomiting, diarrhoea, breathing difficulties, drowsiness, faintness, problems speaking or swallowing



WARNING

- DO NOT wash venom off the skin.
- DO NOT cut the bitten area.
- DO NOT try to suck venom out of wound
- DO NOT use a tourniquet.
- DO NOT try to catch the snake



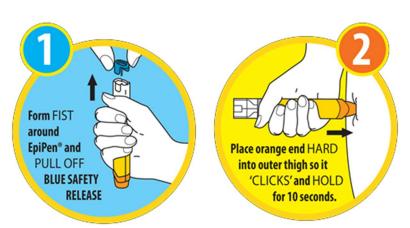
TREATMENT

- 1. Follow DRSABCD.
- 2. Reassure the patient and ask them not to move.
- 3. Apply a broad crepe bandage over the bite site as soon as possible.
- 4. Apply a pressure bandage (heavy crepe or elasticised roller bandage) starting just above the fingers or toes of the bitten limb, and move upwards on the limb as far as can be reached (include the snake bite). Apply firmly without stopping blood supply to the limb.
- 5. Immobilise the bandaged limb with splints.
- 6. Ensure the patient does not move.
- 7. Write down the time of the bite and when the bandage was applied. Stay with the patient.
- 8. Regularly check circulation in fingers or toes.
- 9. Manage for shock.
- 10. Ensure an ambulance has been called.



ANAPHYLAXIS

In the event of a severe allergic reaction resulting in anaphylaxis an EpiPen may be required. EpiPen should only be administered by an individual who has been trained in its correct use.



EpiPen - Simple two step use.