



Appendix B

Emergency Action Plan – Medical Emergencies

1. Emergency Action Plan for Injuries

- On overnight or out-of-country excursions the Excursion Leader must have in place a detailed and updated Emergency Action Plan (EAP) for Injuries. Include steps for managing injuries, contact numbers, and location-specific emergency details.
- A copy of the EAP and the complete itinerary must be left at the school.

2. Neck Injury

- Avoid moving a patient with suspected back or neck injuries unless trained to do so. Call trained personnel and an ambulance immediately.
- Clear the area of any hazards to ensure the safety for everyone involved.
- Designate a supervisor trained in first aid to oversee the situation until professional help arrives.

3. Obtaining Medical Assistance

- The Principal or Excursion Leader must contact a doctor or arrange for the patient to be transported to the nearest hospital, preferably via ambulance.
- If an ambulance cannot reach the student, subject to the approval of the vehicle owner, a private vehicle equipped with first aid supplies may be used.
- If parents/guardians are unavailable, designate a supervisor (not the Excursion Leader, if possible) to accompany the student to the hospital, with the student's medical information and remain with the student until relieved by another supervisor or the parent/guardian.

4. Students Not Be Sent Home Alone

- Ill or injured students must not be sent home unaccompanied or left unattended at any time.
- If parents/guardians are unavailable, assign a responsible supervisor to accompany the student home, ensuring they are left in the care of a responsible adult.

5. Contact Principal

- At the first opportunity, the Excursion Leader must contact the Principal to report the accident or medical emergency, ensure all relevant details are communicated clearly.

6. Advise Parents/Guardians

- The Principal must promptly notify parents/guardians, provide updates, and verify that they have received the communication and understand any required follow-up actions.

7. Parent/Guardian Responsibility

- If parents/guardians can reach the accident location or hospital, the accompanying supervisor must transfer responsibility to them while ensuring they are fully informed.

8. Reporting Accidents and/or Serious Injuries

- Any teacher or volunteer who is injured must report the injury, regardless of severity, to the Principal and seek medical attention promptly, even for minor injuries.
- School Principal or designate must complete:
 - [OSBIE Incident Report Form](#) for student or volunteer injuries (link on staffroom website).
 - [On-Line Incident Form](#) for Board staff injuries (ebase).
- For serious injuries (e.g., hospitalization, fatality) Principal or designate must immediately contact the Supervisory Officer.
- Supervisors must document all actions taken during incident and ensure timely, accurate reporting.



9. Supervisor Preparedness

- Each supervisor on the excursion must know:
 - The location and access to the first-aid kit.
 - The location and access to a telephone.
 - The telephone number for an ambulance (if 911 is not available).
 - The telephone number of the nearest hospital.
 - Directions and best access routes to the hospital.
 - All students who require medication (e.g., inhalers or EpiPens) and their usage instructions.
- Pre-trip orientation should be conducted to familiarize all supervisors with emergency procedures and resources.

10. Additional Information for Overnight and Out-of-Country Excursions

- The EAP must include:
 - A copy of each student’s “Student Alert Report” with the Excursion Leader.
 - A list of nearby hospitals, clinics, and emergency contact numbers for the destination.
 - A briefing for all participants (students and supervisors) on emergency protocols and first-aid supply locations at the start of the trip.
- Assign a specific supervisor to handle incident reporting if necessary.

EMERGENCY ACTION PLAN

School: _____ Date: _____

Principal: _____ Contact #: _____

Excursion Leader: _____ Contact #: _____

Alternate Supervisor: _____ Contact #: _____

Destination: _____ Excursion Date: _____

First Aid Kit Location: _____

Name of nearest hospital: _____ Phone #: _____

911 Service Available: Yes No (if no) Ambulance #: _____

Describe Location: _____

How will parents/guardians be notified in the event of an emergency:

