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| **5. Contingencies A picture containing text  Description automatically generated** | | | | | |
| **MINISTRY** | Camel Riding Camp | **LOCATION** | Oasis Beach Campsite | **DATE** | 29/9/23-2/10/23 |

This section is about identifying those situations that would trigger a change or cancellation to your program.

1. **PEOPLE**

*What changes to the team would cause you to change or cancel your program.*

Minimum participants to proceed 15 Must be reached by 15 / 9 / 2023

Minimum Leaders to proceed 6 Must be reached by GO date 15 / 9 / 2023

As leaders must have their WWCC and Child Protection Training verified and Reference Checks completed for approval, **ALL** leaders must have applied and be approved before **GO** is submitted *(2 weeks prior to camp).*

Contingency plan if minimum numbers are not reached

*Camp will be cancelled. Leaders, Parents & SU Staff will be advised. All payments will be refunded.*

Contingency plan if leader is sick or injured and has to leave camp

*If a leader has to leave camp due to illness other campers and leaders will be monitored for symptoms. If a leader is sick or injured and has to leave camp and this reduces ratios below minimum, camp will be cancelled and parents will be contacted to pick up their children.*

**SAMPLE**

*Contingency plan if camper is sick or injured and has to leave camp*

*If a camper has to leave camp due to illness other campers and leaders will be monitored for symptoms. If a camper is sick or injured and has to leave camp a parent will be contacted to pick up their child.*

1. **Weather/Natural Disaster**

What extreme weather events/natural disasters could cause you to change or cancel your program.

* Icon

  Description automatically generatedI have downloaded the ‘Hazards Near Me’ app and set a watch area for my event.
* I have downloaded the Bureau of Meteorology (BOM) app and set an alert for my event location.
* We will follow all advice and direction from NSW Emergency Services.

The following are the types of weather, natural events or warnings that could occur in our program location and could cause us to postpone, cancel or evacuate as well as the triggers that would cause us to make those decisions.

e.g. trigger could be an alert/warning from authorities, road closures or winds of X kph or greater.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Bushfire       ☑︎ | Trigger | *Notification or alert from NSW RFS app* | | |
| Flooding      ☑︎ | Trigger | *Notification or alert from BOM app or road closures.* | | |
| High Winds ☐ | Trigger |  | | |
| Other            ☐ |  | | Trigger |  |

1. **Evacuation Plan**

The following evacuation plan will be followed in the event that

volunteers and participants need to be evacuated during the program.

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| *Team members will take any personal items and evacuate to the nearest designated evacuation* |
| *centre.. Campers will be held at the evacuation point until parent can pick them up or leaders can* |
| *transport them to the nearest designated evacuation centre.* |
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| **SAMPLE** |
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**Scripture Union Emergency Contact Number: (02) 9638 9099**

*(This will divert to a mobile phone number, so you can call at any time)*

**In case of emergency:-**

1. Ensure the immediate safety of all present.

2. Call 000 if needed.

3. Call SU NSW Emergency Contact Number for support and assistance.

## **Declaration**

As the Team Director(s) we believe that it is safe for the program to go ahead on the dates submitted, if we follow our Risk Assessment and Safety Plan. We will continue to monitor local conditions. We will inform SU NSW staff and/or ERT as soon as possible if conditions change. While engaged in any SU NSW activity we will abide by any decisions or directions made by SU NSW.

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| Name(s): |
| Date: |

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| **5. Contingencies A picture containing text  Description automatically generated** | | | | | |
| **MINISTRY** |  | **LOCATION** |  | **DATE** |  |

This section is about identifying those situations that would trigger a change or cancellation to your program.

*What changes to the team would cause you to change or cancel your program.*

1. **PEOPLE**

Minimum participants to proceed \_\_ Must be reached by \_\_ / \_\_ / \_\_\_\_

Minimum Leaders to proceed \_\_ Must be reached by GO date \_\_ / \_\_ / \_\_\_\_

As leaders must have their WWCC and Child Protection Training verified and Reference Checks completed for approval, **ALL** leaders must have applied and be approved before **GO** is submitted *(2 weeks prior to camp).*

Contingency plan if minimum numbers are not reached.

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Contingency plan if leader is sick or injured and has to leave camp

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Contingency plan if camper is sick or injured and has to leave camp

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1. **Weather/Natural Disaster**

What extreme weather events/natural disasters could cause you to change or cancel your program.

* I have downloaded the ‘Hazards Near Me’ app and set a watch area for my event.
* I have downloaded the Bureau of Meteorology (BOM) app and set an alert for my event location.
* We will follow all advice and direction from NSW Emergency Services.

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e.g. trigger could be an alert/warning from authorities, road closures or winds of X kph or greater.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Bushfire       ☐ | Trigger |  | | |
| Flooding      ☐ | Trigger |  | | |
| High Winds ☐ | Trigger |  | | |
| Other            ☐ |  | | Trigger |  |



1. **Evacuation Plan**

The following evacuation plan will be followed in the event that

volunteers and participants need to be evacuated during the program.

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**For any help or advice in regard to contingencies and changes, please contact SU NSW staff or email readysetgo@sunsw.org.au.**

**In case of emergency call 000 and notify the Emergency Response Team by text on 0483 900 140 or by phone on 02 9638 9099.**

## **Declaration**

As the Team Director(s) we believe that it is safe for the program to go ahead on the dates submitted, if we follow our Risk Assessment and Safety Plan. We will continue to monitor local conditions. We will inform SU NSW staff and/or ERT as soon as possible if conditions change. While engaged in any SU NSW activity we will abide by any decisions or directions made by SU NSW.

|  |
| --- |
| Name(s): |
| Date: |