***Emergency Management Plan***

***for***

***Insert name of Church/Cathedral***

***Insert address of Church***

***Insert suburb of Church***

|  |
| --- |
| (Insert “hero” photo of Parish Church) |

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# Distribution List

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Plan Rev No. | Revision Name | Copy no. | Issued to: | Date: | Location: |
| **Rev 0** | Draft | 1 |  | --/--/2013 | Vestry/Office |
| **Rev 0** | Draft | 2 |  | --/--/2013 |  |
| **Rev 0** | Draft | 3 |  | --/--/2013 |  |
| **Rev 0** | Draft | 4 |  | --/--/2013 |  |
| **Rev 0** | Draft | 5 |  | --/--/2013 | *Insert name of Fire Station 1 or Rural Fire Service* |
| **Rev 0** | Draft | 6 |  | --/--/2013 | *Insert name of Fire Station 2* |

# Amendments

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Plan Rev No. | Revision Name | Reviewed by | Position | Date of Approval | Comment/Reason For change |
| **Rev 0** | **Draft** | Brendon Lowndes | Property & Risk Officer | 21/08/2013 | Original Document |
| **Rev 1** |  |  |  | 21/08/2015 |  |
| **Rev 2** |  |  |  | 21/08/2017 |  |
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# Glossary

|  |  |
| --- | --- |
| **Term** | **Definition** |
| Emergency Management Plan | The emergency management plan is a document outlining the steps to take in the event of an emergency. It is a legislative requirement to have an emergency management plan and to update it every 2 years or when there is a change to any of the details in the Plan. |
| Distribution List | The Distribution List is the table of where each copy of the Emergency Management Plan has been located, who it has been issued to and the date it was issued. The regulations state that the Emergency Management Plan must be issued to the two (2) nearest Fire Stations or if in a rural situation to the Nearest Fire Station or Rural Fire Service location. |
| Amendments | Is the term given to any updates to the Emergency Management Plan brought about by regular reviews. Emergency Management Plans need to be reviewed, by legislation, every 2 years or if there is a change to any of the information included in it. The details of these reviews need to be recorded in the Amendments table above. |
| Incident | Individual occurrence or event, including dangerous incident, serious injury or illness, a notifiable incident or any other incident that requires a doctor to be seen. |
| Hazard | Means a situation or thing that has the potential to harm a person. Hazards at work may include: noisy machinery, chemicals, electricity, working at heights, a repetitive job, bullying and violence at the workplace.  It is important when notifying emergency services to inform the operator of any hazards that may be harmful to their personnel on site |
| Evacuation | Evacuation is the rapid removal of people in a safe and orderly manner from immediate or threatened danger in a workplace. |
| Evacuation Plan | Is the procedure designed to effectively evacuate all people out of buildings in the case of an emergency |
| Evacuation Diagram | Is the graphical representation of the building, essential emergency information and the safest means out of the building. The requirements of the Evacuation Diagram are set out in Chapter 10 “Evacuation Diagram”  The evacuation diagram by legislation must be displayed in Churches, Halls, Op Shops and rectories if the rectory is also an office. |
| Muster Points/ Assembly areas | An area designated for all people to meet in the case of an emergency. The muster points should in themselves be away from any types of hazards in the case of an emergency. |

# Emergency Procedure

|  |  |  |
| --- | --- | --- |
| **Incident occurs** | **CALL** | **000** |

|  |  |  |
| --- | --- | --- |
|  | WHICH | * Which emergency service is required to provide assistance |
| **Advise** | LOCATION | * The exact location of the emergency/critical incident |
| TYPE | * The type or nature of the emergency/critical incident. |
| TIME | * The time you became aware of the emergency/critical incident. |
| WHO | * The name/s of persons involved in the incident. * The number of persons involved in the incident, if available |
| HAZARDS | * If there are any known hazards/hazardous materials still in place at the site of the emergency/critical incident. * Are there any hazards/hazardous materials adjacent or near the site of the emergency/critical incident. |
|  | NUMBER | * Number of the person reporting the emergency/critical incident. |
|  | NAME | * Name of the person reporting the emergency/critical incident. |
|  | FOLLOW | * Follow all directions of the emergency services personnel given over the phone. |
|  |  | |
|  | CONTACT | Use a different telephone if required and contact;   * The Parish Council Safety Delegate, * The Anglican Diocese of Newcastle’s WHS Officer, |

|  |  |
| --- | --- |
| **Report** | * Records details of the Emergency or critical incident on the * If the incident is a Bomb Threat use the Bomb Threat Checklist (Appendix C) |

# Emergency Numbers

|  |  |  |
| --- | --- | --- |
| Organisation | | Phone Number |
| Police | Critical or life-threatening emergency | **000** |
| Non-life threatening incident | **000** |
| Local Police Station | (insert local number) |
| Ambulance | **000** | |
| NSW Fire Brigade | **000** | |
| Name of Local Fire Station 1 | (insert local number) |
| Name of Local Fire Station 1 | (insert local number) |
| Rural Fire Service | **000** | |
| State Emergency Service | **132 500** | |
| Hospital(s) | (insert local number) | |
|  | (insert local number) | |
| Gas | (insert local number) | |
| Electricity | (insert local number) | |
| Water Corporation | (insert local number) | |
| Environment Protection Agency: | **9995 5000** | |
| Plumber | (Insert name) | (insert local number) |
| Plumber | (Insert name) | (insert local number) |
| Electrician | (Insert name) | (insert local number) |
| Electrician | (Insert name) | (insert local number) |
| Other: | Add relevant contacts and numbers | |
| Other: | Add relevant contacts and numbers | |
| Other: | Add relevant contacts and numbers | |

# Emergency Contact Information - Parish Personnel

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Role | Name | Phone No. (Daytime) | Phone No. (Mobile) | Phone No. ( After Hours) |
| **Dean/ Parish Priest/Incumbent** |  |  |  |  |
| **Churchwarden** |  |  |  |  |
| **Churchwarden** |  |  |  |  |
| **Churchwarden** |  |  |  |  |
| **Churchwarden** |  |  |  |  |
| **Churchwarden** |  |  |  |  |
| **Parish Council Safety Delegate** |  |  |  |  |
| **Parish Secretary** |  |  |  |  |
| **Parish Treasurer** |  |  |  |  |
| **Mission Secretary** |  |  |  |  |
| **Hall Committee Member** |  |  |  |  |
| **Hall Committee Member** |  |  |  |  |
| **Hall Committee Member** |  |  |  |  |
| **Hall Committee Member** |  |  |  |  |
| **Op Shop Volunteer** |  |  |  |  |
| **Op Shop Volunteer** |  |  |  |  |
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| **Op Shop Volunteer** |  |  |  |  |
| **Op Shop Volunteer** |  |  |  |  |
| **Other** |  |  |  |  |
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# Parish Profile

The Parish profile is a brief description of the Parish, including, how many buildings and rooms are on the property, how many staff, volunteers etc. Include any unique situations or information, such as other tenants, Op Shops, regular Hall users,

|  |  |
| --- | --- |
| **PARISH PROFILE SUMMARY** | |
| Name of Parish: | Days/Hours of Operation: |
| Address: | Numbers |
| Parish Roll: |
| Workers with disabilities: |
| Parish Phone: | Volunteers with disabilities: |
| Parish Fax: | Staff: |
|  | |
| **After Hours Emergency Contact**: | Name:  Phone: |
| Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Number of Buildings on Site: |  |
| Church | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Hall: | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Hall 2: | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Rectory: | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Op Shop: | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Tenant no.1 | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Tenant no.2 | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Tenant no.3 | Name: *fill this in only if required*  Phone: *fill this in only if required* |
| Other: | Name: *fill this in only if required*  Phone: *fill this in only if required* |

# Emergency Management Team (EMT)

**EMT Members and Tasks**

|  |  |  |  |
| --- | --- | --- | --- |
| EMT Member | Tasks | Name of staff member and contact details | Name of ‘Back up’ staff member and contact details |
| **Emergency Controller** | In charge of overall management of emergency situation | [Insert name, after hours number and mobile phone number] | [Insert name, after hours number and mobile phone number] |
| Other EMT Members | Tasks | Name of staff member and contact details | Name of ‘Back up’ staff member and contact details |
| [Other} | {Insert tasks] | [Insert name, after hours number and mobile phone number] | [Insert name, after hours number and mobile phone number] |
| [Other} | {Insert tasks] | [Insert name, after hours number and mobile phone number] | [Insert name, after hours number and mobile phone number] |
| [Other} | {Insert tasks] | [Insert name, after hours number and mobile phone number] | [Insert name, after hours number and mobile phone number] |

# Area Maps and Site Plans

A detailed Area Map including the Parishes surrounding area should be included in this document and be made available to your Diocesan office. This map will also be made available to emergency services/response agencies. These maps may be obtained from the internet. The Map should show:

|  |  |
| --- | --- |
| * *Muster Points/Assembly Areas* | * *Evacuation routes* |
| * *Surrounding Streets* |  |
| * *Exit points* * *The Building/s* |  |
| bartlettsiteplan  **A**  **A**  **1km**  **Est 15 mins**  **300 metres**  **Est 5 mins**  **EXAMPLE ONLY** | |
|  | |

# Evacuation Diagram

Evacuation diagrams are a requirement in all workplaces. The purpose of the evacuation diagram is to:

* Prepare people prior to an emergency by providing a pictorial representation of the Parish and its emergency information,
* Guide people to safety in an emergency,
* Identify location of emergency equipment (alarms, fire extinguishers, fire hose reels, first aid points, warden phones, hydrants, etc...),
* Identify location of emergency and fire exits,
* Identify location of assembly areas and communication points,
* Identify communication and emergency contact information,
* Identify emergency procedures,
* Provide an orientation of where you are.

## Evacuation Diagrams must;

1. Show a pictorial representation of the floor or area, which shall be at least **200 mm × 150 mm** in size.
2. Be a minimum size of **A4**, if you include other information other than the diagram then the minimum size is **A3 and the pictorial representation will be A4.**
3. Be titled “**EVACUATION DIAGRAM**”
4. Show the “**You are Here**” point
5. Show the **nearest** safe way out from “You are Here” with a path of travel representation
6. Show the designated **exits** OUT of the building shown in **GREEN**
7. Show the telephones, intercoms and **communications** equipment if any in **RED**
8. Show the manual fire **alarm devices** if any in **RED**
9. Show the **fire fighting equipment** in and around the building shown in **RED**
10. Show the **Fire Indicator Panel (FIP)** if any in **RED**
11. Show the **Assembly areas**/muster points
12. Show the **nearest**, **safest route** to the assembly area/muster point from designated exit
13. Show a **legend**
14. Individual evacuation diagrams shall have the **correct orientation** with regard to the direction of egress and its location to the ‘YOU ARE HERE’ point. Where an assembly area diagram is included, the assembly diagram area shall have the same orientation to the rest of the diagram.
15. Be **displayed** in locations where occupants and visitors are able to view the diagrams, if a multi-level building then on each floor of the building
16. Be **displayed** at a height between 1200mm and 1600mm above the finished floor.
17. Be in **colour**
18. Show the **date** that the diagram wascompleted
19. Be as Simple and effective as possible

Sample Evacuation Diagram below-

|  |
| --- |
|  |

**AA**

# Evacuation plan

**Evacuation** - Evacuation is the rapid removal of people in a safe and orderly manner from immediate or threatened danger in a workplace.

**\*\*\* Remember to remain calm and don't panic. \*\*\***

### Recommended Steps for Evacuation – The Evacuation Plan

1. Alert the Emergency Controller/Chief warden and all personnel on site. Emergency Controller/Chief warden takes charge and activates the Emergency Management Team;
2. Call 000;
3. Follow the Emergency Procedure – as set out in Point “4” above
4. If the decision to evacuate is made, using all available workers/volunteers calmly move/carry/walk all parishioners/personnel out of the building to the pre-determined muster point/outdoor assembly area; NOTE: take extra care to help children or mobility impaired people out of the building
5. Check all areas are free of personnel only if safe to do so
6. Save as many records as possible if it is safe to do so.
7. Once at muster point, check all parishioners, volunteers and staff are accounted for;
8. Report to the Chief Warden and notify emergency services when they arrive of any people unaccounted for,
9. Focus on safety and well-being of parishioners, volunteers and workers,
10. Wait for Emergency Services to arrive or for further information.

### Designated Assembly Areas/ Muster Points:

* Where you assemble outside the building depends on your Parish Building/s and grounds but it should be at least 150 metres from the nearest building or fire source feature, and be in itself free of hazards.
* You should have 2 Muster Points/Assembly Areas in case the emergency is located near the Primary Muster point.

# Parish Emergency Drills / Training Schedule

|  |  |  |  |
| --- | --- | --- | --- |
| Months | Training Event | Person Responsible | Date(s) completed |
| January |  |  |  |
| February |  |  |  |
| March |  |  |  |
| April | Fire Drill |  |  |
| May |  |  |  |
| June |  |  |  |
| July |  |  |  |
| Aug |  |  |  |
| September |  |  |  |
| October | Fire Drill |  |  |
| November |  |  |  |
| December |  |  |  |

# Appendices

APPENDIX A: Emergency Management Plan Exercise Record

APPENDIX B: Post-emergency Record

APPENDIX C: Bomb threat checklist

APPENDIX D: In case of Fire/Smoke

APPENDIX E: Bushfire Preparedness

### APPENDIX A: Emergency Management Plan Exercise Record

|  |  |  |
| --- | --- | --- |
| **Item** | **Yes** | **No** |
| **✓** | **✓** |
| Were Emergency Services briefed on exercise prior to exercise being started? |  |  |
| Did the person discovering the “emergency” alert the other occupants? |  |  |
| Was the alarm activated? |  |  |
| Did staff direct persons from the building/site per the evacuation procedures? |  |  |
| Were isolated areas searched? |  |  |
| Was the evacuation logical and methodical? |  |  |
| Did someone take charge? If yes, who? |  |  |
| Did occupants act as per instructions? |  |  |
| Was a roll call conducted for: | | |
| Parishioners |  |  |
| Volunteers |  |  |
| Staff/workers |  |  |
| Visitors |  |  |
| Was someone appointed to liaise with the emergency service/s? |  |  |
| Was someone appointed to liaise with the community? |  |  |
| Was the emergency service given the correct information? |  |  |
| Did anyone re-enter the premises before the “all clear” was given? |  |  |
| Did anyone refuse to leave the building/site? If yes, see attached list for name and reason. To be followed up. |  |  |
| Area of Emergency plan tested by current exercise: | | |

### APPENDIX B: Post-emergency record

|  |  |
| --- | --- |
| **Parish** |  |
| **Date** |  |
| **Time Of Notification** |  |
| **Name Of Person Taking The Call** |  |
| **Position** |  |
| **Name Of Person Reporting The Incident** |  |
| **Contact Telephone Number** |  |
| **Details** |  |
| **Immediate Action** | Emergency Controller notified:  YES / NO Time \_\_\_\_\_  Other staff notified:  YES / NO Time \_\_\_\_\_  Emergency Services notified:  YES / NO Time \_\_\_\_\_\_  Diocesan Office notified:  YES / NO Time \_\_\_\_\_\_ |
| **Major Activities** |  |
| **Issues** | Operational Debriefing Required:  YES / NO Date/Time: \_\_\_\_\_  Person Responsible to organise:    Confirmation of Operational Briefing:  Date/Time:  Issues for Follow up action: |
| ***Signature*** |  |
| ***Date*** |  |

### APPENDIX C: Bomb threat checklist

|  |  |  |  |
| --- | --- | --- | --- |
| **CALL TAKER** | | **CALL TAKEN** | |
| Name |  | Date: | Time: |
| Telephone # |  | Duration of call |  |
| Signature |  | Number of caller |  |

**Complete the following for a BOMB THREAT**

|  |  |
| --- | --- |
| **QUESTIONS** | **RESPONSES** |
| When is the bomb going to explode? |  |
| Where did you put the bomb? |  |
| What does the bomb look like? |  |
| What kind of bomb is it? |  |
| What will make the bomb explode? |  |
| Did you place the bomb? |  |
| What is your name? |  |
| Where are you going? |  |
| What is your address? |  |

**ACTIONS:**

**REPORT CALL TO: PHONE NUMBER:**

|  |  |
| --- | --- |
| **CHARACTERISTICS OF THE CALLER** | |
| Sex of caller |  |
| Estimated age |  |
| Accent if any |  |
| Speech impediments |  |
| Voice (loud, soft, etc) |  |
| Speech (fast, slow etc) |  |
| Dictation (clear, muffled, etc) |  |
| Manner (calm, emotional, etc) |  |
| Did you recognise the voice? |  |
| If so, who do you think it was? |  |
| Was the caller familiar with the area? |  |

|  |  |  |
| --- | --- | --- |
| **LANGUAGE** | | |
| [ ] Abusive | [ ] Taped | [ ] Other (Specify) |
| [ ] Well Spoken | [ ] Irrational |  |
| [ ] Incoherent | [ ] Message read by caller |  |

|  |  |  |
| --- | --- | --- |
| **BACKGROUND NOISE** | | |
| [ ] Music | [ ] Local call |  |
| [ ] Machinery | [ ] Long Distance Call |  |
| [ ] Aircraft | [ ] Other (specify) |  |

### APPENDIX D: In the event of Fire / Smoke

If you see fire or smoke, do not panic or shout.

Remain calm - remember RACE



**R**escue

* Rescue any people in immediate danger (only if it is safe to do so).

**A**larm – Raise the alarm

* ring the Fire Brigades on 000
* notify the Emergency Controller or staff member in charge

**C**ontain

* If practicable, close all doors and windows to contain the fire (only if it safe to do so).

**Fire Extinguisher Operation:** Fire Extinguisher operation is voluntary, only being used when it is safe to do so. Where practicable, there should be two people in attendance when an extinguisher is being operated. Always ensure you have a safe line of retreat. **DO NOT** let the fire get between you and the doorway.

**E**xtinguish

* Try to extinguish the fire using appropriate fire fighting equipment- only if you are trained and only if it is safe to do so.
* Select the appropriate extinguisher.

After carrying out R.A.C.E:

* Follow the instructions of your Emergency Controller or Fire Wardens
* Prepare to evacuate if necessary
* Leave the lights on
* Save records if possible

### Appendix E: Bushfire Preparedness

All facilities should regularly review their Emergency Management Plans.

|  |  |
| --- | --- |
| Checklist | ✓ |
| * Check State Emergency Services (SES) website for current bushfire information |  |
| * Determine who is responsible for monitoring fire risk information and how |  |
| * Review Emergency Management Plan prior to the official start of the bushfire season |  |
| * Allocate roles and responsibilities in executing emergency evacuation procedures |  |
| * Regularly inspect the Parish grounds for any items that may become a hazard in the event of a bushfire – long dry grass etc |  |