



Risk Management Handbook

Version 3.7 April 2016

Continuum Educational Travel www.continuumtours.com



Table of Contents

Introduction	4
Who is responsible for risk management?	4
AUIP's responsibilities	4
Accrediting U.S. Institution's responsibilities	5
Legal Obligations and Industry Standards	5
AUIP Risk Management Systems	7
Annual safety report	7
Auditing suppliers	7
Safety Advisory Committee	7
Orientations and emergency cards	7
General Hazard Identification and Risk Management Strategies	9
General Program Time	10
Classroom-based lectures and activities	15
Transportation	16
Accommodation providers and homestays	18
Food and Water	19
Activities	20
Emergency Action Plan	25
Introduction	25
Emergency Action Plan for Faculty and Students	25
Emergency Response Protocol for AUIP Staff	26
Handling media enquiries	27
Follow up on emergencies and near-misses	28
Emergency Response Protocol for AUIP Directors	28
Media Plan for Emergencies	28
Immediate actions	29
Holding a press conference	30
Other communication tips	30
Recommended EAP for Theft of Participant's Belongings	30
Recommended EAP for Rape or Sexual Assault of Participant	31
Recommended EAP for Participant Injury, Accident or Illness	33
Recommended EAP for Injury, Accident or Illness in a Remote Location	34



Recommended EAP for Injury, Accident or Illness During Homestay	35
Recommended EAP for Staff or Faculty Injury, Accident or Illness	36
Recommended EAP for Student Behavioural or Psychological Illness	37
Recommended EAP for Missing Student	37
Recommended EAP for Death or Serious Illness in a Student's Family	38
Recommended EAP for Death of a Participant	39
Recommended EAP for Fire in a Building, Accommodation or Transportation Carrier	40
Recommended EAP for Earthquake, Flood, Tsunami or other Natural Disaster	40
Recommended EAP for Terrorist Attack, Political or Civil Unrest, War	41
Recommended Risk Management Plans for Outdoor Program Activities	43
Appendix A: Sources for Further Information	48
Appendix B: Related Organizations for Further Information	50
Appendix C: Incident Report Form	52
Appendix D: AUIP Background and Risk Management Overview	54
Appendix E: What to do during and after an earthquake	55
Appendix F: Posting Emergency Information on the AUIP Website	56
Appendix G: Emergency Contact Details	58
Appendix H: AUIP guidelines on leaving students on their own	63



Introduction

The purpose of this Risk Management Handbook is to support accrediting U.S. institutions and their faculty to ensure the health, safety and security of all program participants. This handbook aims:

- to identify inherent risks associated with scheduled activities,
- to take specific steps to minimize, isolate or eliminate the likelihood of their occurrence, and
- to outline recommended Emergency Action Plans that can be implemented in the event of an crisis.

Supervising faculty from the accrediting U.S. institution are in charge of the health, safety and security of student groups while they are in-country, and they usually have their own risk management and emergency protocols that they must follow. This document does not supersede these policies and any specific measures outlined in such documents will be followed as a first priority. This safety plan simply provides more specific information on the steps that AUIP will take to further protect its clients (and their faculty and students) and all of their representatives and employees.

In general, AUIP's main responsibility is to fully support faculty and staff in their efforts to ensure their students' health, safety and security. This includes ensuring that sub-contractors are reputable businesses with high safety standards, ensuring that faculty and staff have access to safety equipment including first aid kits, cell phones and 24-hour emergency contact numbers, and ensuring that all participants are informed of the potential risks prior to engaging in any activity. AUIP employees or contractors that travel with a group may assist with risk management during our activities, but ultimately it is the responsibility of the U.S. group leader or faculty supervisor to make decisions regarding student safety.

Disclosure of potential risks is one of our priorities. We believe that all faculty, staff and students should be aware of any potential risks and be able to make conscious decisions about their participation based upon a thorough explanation of that risk. No program participant should be forced or coerced (either through intimidation, requirement, or peer pressure) into taking part in any activity or event in which they do not wish to participate.

Disclosure is also a two-way process and an exchange of information with all involved parties (students, faculty, staff, activity suppliers, etc.) is a necessity. Accrediting institutions must ensure that participants disclose any medical and physical requirements, disabilities, conditions, etc. to AUIP prior to the start of the program, and AUIP will disclose its expectations regarding conditions of participation, behavioural issues, policies, possible hazards and strategies designed to minimize risk to the participants.

Who is responsible for risk management?

Everyone within AUIP and at the accrediting institution can contribute to our framework for recognising and controlling risk on study abroad programs. Everyone should remain on the lookout for potential hazards and be willing to pitch in and help in case of emergency. Supervising faculty will usually be the "first on the ground" when an emergency occurs, but AUIP will provide whatever support possible to first prevent emergencies from occurring and second to ensure faculty are able to quickly and effectively respond to emergencies.

The accrediting university (including its study abroad office, faculty and students) and AUIP are responsible for different aspects of risk management. In general, the main responsibilities of AUIP and the accrediting institution are listed below.

AUIP'S RESPONSIBILITIES

- Vetting and auditing accommodation providers
- Vetting and auditing transportation services
- Establishing and enforcing policies for coach drivers and field guides
- Providing communications in the form of local cell phones for all groups and a 24/7 emergency phone number



- Providing local medical resource and emergency numbers
- Providing Risk Management Handbook to faculty from the accrediting U.S. institution leading programs
- Providing an in-country hazards/cultural orientation to U.S. institution staff and students
- Registering students with the U.S. State Department Smart Traveller Enrolment Program (STEP)
- Providing materials for student and faculty pre-departure orientations (packing lists, vaccinations, chemoprophylaxis, etc.)
- Managing aspects of medical strategy by providing description and contact information for medical resources based on itinerary
- Providing first aid kits as required
- Providing a supplementary optional student behaviour management strategy (guidelines and policies)
- Providing guidelines for how specific activities should be conducted in the form of Recommended Risk Management Plans (RMPs)
- Support for health, safety and security incidents including emergencies and crises

ACCREDITING U.S. INSTITUTION'S RESPONSIBILITIES

- Selecting student participants and acquiring information on pre-existing physical and mental health conditions
- Communicating any special medical or other support needed to address these physical and mental health conditions
- Conducting pre-program orientation (using AUIP orientation template)
- Conducting first aid/risk management training for institution's faculty and teaching assistants
- Providing student behaviour guidelines and disciplinary policies
- Acting as primary responder to health, safety and security incidents including emergencies and crises when they occur

Legal Obligations and Industry Standards

Under the New Zealand Health and Safety in Employment Act 1992, the Health and Safety in Employment Regulations 1995, and the Health and Safety Amendment Act 2002, AUIP has obligations in regard to the health, safety and security of employees and participants on our programs. AUIP recognises that they have a duty to take all reasonable practicable steps to:

- Ensure the safety of all employees and sub-contractors;
- Identify hazards and take steps to eliminate, isolate or minimise them;
- Develop emergency procedures;
- Provide training to employees;
- Keep an accident register; and
- Ensure no action or inaction of any employee harms any other person while they are at work.

Our employees and sub-contractors have a duty to take all reasonable practicable steps to:

- Ensure their own safety while at work;
- Ensure that while they are at work, no action or inaction on their behalf causes harm to any other person; and
- Disclose any trauma that may affect their own or others' safety in the workplace.

We also recognise that AUIP has an obligation under the New Zealand Crimes Act 1961 and under



general law to use all reasonable care to avoid danger to human life and to safeguard participants from harm in foreseeable situations.

In order to meet these obligations, we have developed the following recommended risk management strategies and emergency protocols that are detailed in this plan.



AUIP Risk Management Systems

Annual safety report

After the programs have finished for the year (i.e. end of July), AUIP will undertake a review of program health, safety and security during that year. The Academic Affairs and Student Safety Manager will summarize all incident reports and other 'near misses' into a Safety Report, with recommendations for changes that should be made the following year. A summary of this report will be available to accrediting institutions and presented at the annual Faculty Advisory Council meeting.

Auditing suppliers

Safety audit forms are filled out by an AUIP approved person when they visit suppliers and/or take part in the service they provide. There are three different types of safety audit forms for accommodation, activities and transportation (these forms are available upon request). All suppliers must be audited for their safety on a regular basis. All companies, including those used for transportation, outdoor activities (e.g., kayaking, snorkelling, hiking), accommodation, and other activities (e.g., cultural tours, museums) are audited every 2-3 years.

In addition, AUIP keeps on file current public liability insurance certificates for all suppliers, as well as signed Terms and Conditions (available upon request). The Terms and Conditions outline AUIP policies for sub- contractors, such as not drinking with students and not becoming romantically involved with students. Because coach drivers and field guides often spend significant amounts of time with students, including staying in the same accommodations while in the field, we require that they sign a form that specifically lists our expectations for drivers and field guides. For companies who employ multiple drivers or guides, the manager can sign a single form on behalf of their employees to indicate that they have ensured all employees are fully aware of these policies.

Safety Advisory Committee

The Board of Directors from time to time may require unofficial advice on risk management issues. The Safety Advisory Committee's role is to provide such advice and assistance in times of crisis.

The Safety Advisory Committee should include at least one person in each of the following categories:

- Physician
- Insurance/evacuation provider
- Mental health counsellor
- Rape crisis counsellor
- Travel agent (outside office hours)
- Local contacts in Australia
- Local contacts in Fiji
- Experts in risk management in study abroad

Orientations and emergency cards

AUIP will give institutions templates for both pre-departure and in-country orientations that include the following:

1. A health, safety and security briefing;
2. Risk identification and disclosure;
3. Recommended risk reduction strategies;
4. Recommended emergency protocols and procedures;
5. Cultural orientation (e.g. local taboos and customs, do's and don'ts).



AUIP will also create emergency contact cards (wallet cards) for participants to carry with them at all times in the event of an emergency. These cards will explain who to contact in case of an emergency and provide numbers for local emergency services. Supervising faculty should also distribute insurance cards to students if appropriate.



General Hazard Identification and Risk Management Strategies

Overall, AUIP aims to support faculty by reducing risks to program participants through a five-part strategy:

- 1. Identify risks:** AUIP has spent a considerable amount of time and effort to identify potential sources of risk or exposure to hazards on all of its scheduled events and activities. This has been done over time and through repeating activities and events to be able to identify foreseeable hazards as accurately as possible. AUIP has also taken steps to identify any potential negative consequences that may arise from any exposure to risks or hazards associated with our programs.
- 2. Minimize or eliminate risk:** Once a hazard or risk has been identified, AUIP has, in consultation with local experts, designed recommended risk reduction strategies for its events and activities to either reduce risks to acceptable levels or minimize them entirely. It also involves minimizing any potential negative consequences that may arise as a result of exposure to risk. In the event that it is impossible to reduce any foreseeable hazard or risk to an acceptable level, then AUIP has eliminated that event or activity from its programs.
- 3. Disclose and Educate:** AUIP operates under a policy of full disclosure. This entails making certain that all institutions are given information on the hazards or risks that may be associated with any given activity or event, so that they can pass this information on to program participants to help them make informed decisions about their participation. In addition, AUIP continuously educates and trains its staff on how to handle risks and emergency situations.
- 4. Plan:** AUIP has a recommended Emergency Action Plan and recommended Emergency Action Protocols that can be implemented in the event of an accident, injury, sudden illness or emergency that involves immediate action, in cases where the institution does not have its own emergency plans and protocols.
- 5. Review:** AUIP annually reviews its risk management strategies and procedures, and an important aspect of this review is the incident report forms that we receive from faculty for any injuries, accidents, emergencies or 'near misses'. These incident report forms are kept on file in the AUIP accident register and are used to evaluate and improve the existing risk management plan.

The following pages contain charts that outline AUIP's General Risk Hazard Identification and recommended Risk Reduction Strategies for all identifiable risks throughout our programs. Faculty should consult these charts regularly throughout the program for hazard identification and procedures designed to minimize or eliminate risks for all general program events and activities.

General Program Time

HAZARD/RISK IDENTIFICATION:	RISK RATING: SEVERITY (S) AND PROBABILITY (P); 1 = LOWEST 5 = HIGHEST	RISK REDUCTION STRATEGIES RESPONSIBILITY OF AUIP	RISK REDUCTION STRATEGIES: RESPONSIBILITY OF U.S. INSTITUTION
Crime (mugging, hold-up, attack)	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP registers students with US State Department STEP program. • AUIP provides contact information for police on emergency cards. • AUIP provides safety and security tips in orientation templates given to institutions. 	<ul style="list-style-type: none"> • Participants carry emergency contact cards at all times. • Participants keep valuables in a safe place at all times (e.g. lock in room when going out). • Participants do not overtly display valuables or attract potential threats in any way. • Participants follow guidelines outlined in health & safety orientation (e.g. street smarts, not going out alone at night, avoiding particular locations and certain times, letting a buddy know where you are going and when expected back). • Participants have photocopies of important documents. • Institutions ensure participants have adequate insurance to cover any loss or injury resulting from crime.
Rape or sexual harassment or assault	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP staff can identify appropriate support people (e.g. psychologist, counsellor) and know how to contact them if an incident occurs and faculty request assistance. • AUIP includes anti-harassment information and safety tips for female students in the orientation templates given to institutions. • AUIP uses vetted homestay families. • AUIP ensures all drivers and guides sign the Terms and Conditions. • AUIP books rooms exclusive for program participants (no shared rooms with other travellers). • AUIP keeps male and female students in separate rooms. 	<ul style="list-style-type: none"> • Participants carry emergency contact cards at all times. • Participants know what to do in case of assault (e.g. hotlines, emergency contact info). • Institutions ensure that participants have adequate medical cover while travelling.
Missing or lost student	S = 5, P = 2	<ul style="list-style-type: none"> • AUIP includes information on staying with group and buddy system in orientation templates sent to institutions 	<ul style="list-style-type: none"> • Faculty take roll call every morning and after lunch when program activities planned (e.g. on bus). • On free days, faculty ensure students check in with their buddies at end of day and/or leave appropriate details of where they are going. • Faculty use the buddy system on the coach and during activities.

Terrorism, war, other political and national security risks	S = 5, P = 1	<ul style="list-style-type: none"> • AUIP registers students with U.S. State Department STEP program. • AUIP reviews travel warnings for countries groups will be visiting. 	<ul style="list-style-type: none"> • Institutions ensure participants have adequate travel insurance. • Institution maintains lists of all program participants that include names, contact information, next of kin, and passport numbers.
Participant disclosed pre-existing medical issue (e.g. specific allergy, asthma, bad back, weak ankles, migraines)	S = 2, P = 5	<ul style="list-style-type: none"> • AUIP reviews medical conditions given by institutions prior to groups' arrival and makes necessary accommodations. • AUIP ensures medical facility contact details are on emergency contact cards. 	<ul style="list-style-type: none"> • Institutions ensure that students have full medical examination prior to acceptance. • Participants carry their necessary medication at all times (e.g. inhalers, aspirin, allergy meds). • Participants carry emergency contact cards at all times. • Participants have adequate medical insurance for illnesses and prescriptions while away.
Participant undisclosed pre-existing medical issue (e.g. bad back, pregnant, HIV, TB)	S = 5, P = 4	<ul style="list-style-type: none"> • AUIP ensures medical facility contact details are on emergency contact cards. • AUIP has evacuation plans in place for all remote locations. 	<ul style="list-style-type: none"> • Institutions ensure that students have full medical examination prior to acceptance. • Institutions ensure that participants are aware of policies for non-disclosure. • Participants carry their necessary medication at all times (e.g. inhalers, aspirin, allergy meds). • Participants carry emergency contact cards at all times. • Participants have adequate medical insurance for illnesses and prescriptions while away.
Participant behavioural or psychological problem (e.g. mental illness, homesickness, loneliness, depression) that interferes with ability to participate in program	S = 4, P = 4	<ul style="list-style-type: none"> • AUIP staff have appropriate support people (e.g. psychologist, counsellor) identified and know how to contact them if an incident occurs. • AUIP provides contact details for mental health providers on emergency cards. 	<ul style="list-style-type: none"> • Institutions ensure proper screening processes & appropriate dismissal policies. • Institutions ensure students have full medical examination prior to acceptance. • Participants carry necessary medication at all times. • Participants carry emergency cards at all times. • Faculty/staff have phone numbers for emergency mental health contacts. • Faculty/staff closely monitor students and approach any student that displays unusual or reclusive behaviour. • Faculty/staff know the emergency action plan for behavioural and psychological problems if they suspect a student is unwell.
Participant injury/accident during free time (e.g. sprained ankle, cut, broken bone)	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP keeps an incident database of all accidents and near-misses and reviews them annually. • AUIP includes the recommended Emergency Action Plan in orientations and handbooks. 	<ul style="list-style-type: none"> • Participants are aware of the institution's Emergency Action Plan, or if not available, the AUIP Plan. • Participants have emergency contact cards at all times. • Students understand they are responsible for their own health and safety during free time. • Institutions ensure participants have adequate medical insurance.

<p>Participant illness (major) contracted while on program (e.g. malaria, giardia, amoebic dysentery, avian flu, hepatitis, TB, hypothermia)</p>	<p>S = 5, P = 2</p>	<ul style="list-style-type: none"> • AUIP has emergency evacuation plans in place for all remote locations. • AUIP includes health tips and warnings in orientation templates. 	<ul style="list-style-type: none"> • Institutions ensure students have full medical examination prior to acceptance. • Institutions ensure participants have adequate medical insurance for illnesses and any prescribed meds. • Institutions ensure participants are aware of health warnings (e.g. water, food). • Institutions ensure participants are told to get all required vaccinations before departure. • Participants have adequate supplies of necessary medicines. • Participants have emergency contact cards at all times. • Faculty have emergency medical numbers (e.g. doctors, ambulance). • Participants are adequately prepared with appropriate gear (e.g. mosquito nets, insect repellent) and clothing (e.g. long- sleeved shirts).
<p>Participant illness (minor) contracted while on program (e.g. stomach upsets, diarrhoea, asthma attack, seasickness, sunstroke, heat exhaustion, dehydration, sunburn, altitude sickness, vertigo, dizziness, headaches, migraines, hunger)</p>	<p>S = 3, P = 5</p>	<ul style="list-style-type: none"> • AUIP includes health tips and warnings in orientation templates. • AUIP provides Risk Management Protocols to institution to assist in preparing groups for activities. • AUIP passes on any information of relevant allergies or disabilities to suppliers, as necessary. 	<ul style="list-style-type: none"> • Institutions ensure that students have full medical examination prior to acceptance. • Institutions ensure participants have adequate medical insurance. • Institutions ensure participants are told to get all required vaccinations before departure. • Participants carry with them adequate supplies of any medicines they regularly use. • Participants have emergency contact cards with them at all times. • Participants are adequately prepared with appropriate gear (e.g. sunscreen, insect repellent, hat, sufficient water and food) and clothing (e.g. proper footwear, long-sleeved shirts). • Faculty present information in the RMPs to students.

Participant Illness, accident or emergency (major) occurring while in remote location	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP passes on any information of relevant allergies or disabilities to suppliers, as necessary. • AUIP provides groups with first aid kits if they don't have their own. • AUIP reminds faculty when they will be going into a remote area without immediate access to medical care. 	<ul style="list-style-type: none"> • Institutions ensure that students have full medical examination prior to acceptance. • Institutions ensure all participants have adequate medical insurance that covers emergency evacuation from remote locations prior to departure. • Participants have adequate supplies of all necessary medications. • Participants are adequately prepared with appropriate gear (e.g. sunscreen, insect repellent, hat, sufficient water and food) and clothing (e.g. proper footwear, long-sleeved shirts). • Institutions inform AUIP of any special needs before departure (e.g. disability, dietary requirements, known medical conditions, allergies). • Participants are aware of when the group will be in a remote area and won't have easy access to medical care. • Participants have emergency information cards with them at all times. • Institutions have student information including name, passport, emergency contact and medical conditions. • Faculty ensure that a first aid kit is carried on all program activities to all locations. • Faculty and staff know how to implement the Emergency Action Plan for remote locations (e.g. know how to contact emergency services, obtain helicopter evacuations). • Faculty present information in the RMPs to students.
Participant death due to injury or accident or crime (e.g. car accident, drowning, drug or alcohol overdose, homicide)	S = 5, P = 2	<ul style="list-style-type: none"> • AUIP staff know how to implement the recommended AUIP Emergency Action Plan if required. 	<ul style="list-style-type: none"> • Faculty knows how to implement their institution's Emergency Action Plan, or if not available, the AUIP recommended Emergency Action Plan.
New staff unfamiliar with program	S = 3, P = 3	<ul style="list-style-type: none"> • AUIP familiarises new employees and guides with the Risk Management Handbook, Faculty Handbook and Program Handbook. • AUIP ensures that new faculty are provided with all health and safety protocols as detailed in AUIP's Faculty Handbook and Risk Management Handbook. 	<ul style="list-style-type: none"> • New faculty members accompany an experienced faculty or AUIP rep for their first trip when possible. • New faculty review all health and safety protocols as detailed in AUIP's Faculty Handbook and Risk Management Handbook.

Guides, assistants and staff poorly briefed on roles and responsibilities and needs of AUIP	S = 4, P = 4	<ul style="list-style-type: none"> • AUIP staff ensure that all guides have read and signed the guide policies, including the Emergency Action Plan. • AUIP staff ensure that guides are aware of any special needs or particular disabilities of participants prior to the start of a planned activity (e.g. student with bad back, weak knees, hearing impaired). 	<ul style="list-style-type: none"> • Institutions ensure AUIP knows of any medical conditions or other accommodations required by students.
Participant loses personal items (e.g. passport, wallet, credit cards, luggage)	S = 3, P = 4	<ul style="list-style-type: none"> • AUIP includes security protocols in the orientation templates given to institutions. • AUIP ensures all accommodations know to provide each student with their own key to shared rooms. 	<ul style="list-style-type: none"> • Participants carry copies of passport and credit cards with them in a separate location. • Participants keep a record (e.g. make, model, serial number) of any items of particular value. • Participants remain vigilant at all times of their belongings. • Students bring and use luggage locks. • Faculty check that all students have their own key and if they don't, contact AUIP.
New, unidentified hazards for new location or activity or program	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP performs a site visit for all new programs prior to program start date. • AUIP conducts audits of all suppliers every 1-2 years. 	
Natural disaster or catastrophic event (e.g. fire, earthquake, flood, tsunami)	S = 5, P = 2	<ul style="list-style-type: none"> • AUIP registers all students with the U.S. State Department STEP program. • AUIP ensures, through supplier audits, that all buildings and facilities used (e.g. accommodation, classrooms) are up to code and compliant with national authorities. • AUIP ensures that accommodation providers have adequate emergency evacuation plans and fire escape routes in place during audits. • All accommodation and transport providers show fire exits, muster stations and emergency evacuation routes. • Where possible or practical, in the event of a catastrophic natural event, AUIP staff are aware of safe places of retreat at all times and have an emergency escape plan in place. • AUIP provides institutions with local cell phones. 	<ul style="list-style-type: none"> • Supervising faculty carry cell phones with them at all times. • Institutions maintain lists of all program participants that include names, contact information, next of kin, and passport numbers.

Classroom-based lectures and activities

HAZARD/RISK IDENTIFICATION:	RISK RATING: SEVERITY (S) AND PROBABILITY (P); 1 = LOWEST 5 = HIGHEST	RISK REDUCTION STRATEGIES RESPONSIBILITY OF AUIP	RISK REDUCTION STRATEGIES: RESPONSIBILITY OF U.S. INSTITUTION
Theft of participant's belongings from classrooms (e.g. room break-in, credit cards stolen, passport stolen, traveller's checks stolen)	S = 2, P = 4	<ul style="list-style-type: none"> • AUIP registers students with U.S. Department of State STEP program. • AUIP provides safety and security tips in the orientation templates given to institutions. 	<ul style="list-style-type: none"> • Participants carry emergency cards at all times. • Participants keep valuables in a safe place at all times. • Faculty lock classrooms when not in use or occupied. • Participants have photocopies of important documents. • Participants have adequate insurance to cover loss while travelling.
Student injured en route to classroom	S = 4, P = 2	<ul style="list-style-type: none"> • AUIP ensures classrooms are well-located and easy to reach on public transportation or by walking from accommodation (if transport is not provided). • AUIP ensures classrooms are located in safe neighbourhoods. • AUIP ensures classes are not scheduled for early morning or after dark, unless the group will be provided transport. 	<ul style="list-style-type: none"> • Faculty ensure students know to travel in pairs or groups, and that they have directions and know safe routes for travelling.
Fire or other event in classroom or building that requires evacuation	S = 5, P = 2	<ul style="list-style-type: none"> • AUIP audits classrooms to ensure adequate evacuation and emergency equipment. 	

Transportation

HAZARD/RISK IDENTIFICATION:	RISK RATING: SEVERITY (S) AND PROBABILITY (P); 1 = LOWEST 5 = HIGHEST	RISK REDUCTION STRATEGIES RESPONSIBILITY OF AUIP	RISK REDUCTION STRATEGIES: RESPONSIBILITY OF U.S. INSTITUTION
Poor road conditions for vehicle operation (e.g. wet or slippery, poor visibility)	S = 5, P = 4	<ul style="list-style-type: none"> • Driver is aware of road conditions at all times. • Driver operates vehicle at safe speeds for current road conditions at all times. • Driver ensures that vehicle (e.g. coach, car) has a current WOF certificate and complies with all safety regulations. • Driver ensures that vehicle (e.g. coach, car) has operational windscreen wipers, defogger, headlights, and break lights; adequate tread on tyres; and a spare tyre available at all times. • Driver ensures that s/he is adhering to legal driving hour limits and follows all rules and regulations of the Land Transport Authority or driving regulating body. • Driver should have a cell phone available for use. 	
Vehicle (e.g. coach, car, boat) break down	S = 2, P = 4	<ul style="list-style-type: none"> • Driver or coach company ensures that vehicle is properly registered and compliant. • Driver or coach company ensures that vehicle has a valid warrant of fitness. • Driver ensures that vehicle has all necessary breakdown equipment (e.g. spare tires, jack, spare fan belts, repair tools, jumper cables, spare windscreen wiper blades, extra water) and adequate supplies. • Driver ensures he/she has a working cell phone. • AUIP conducts annual audit of all suppliers. • AUIP ensures that the transport company has an emergency plan in case of breakdown (see audit form). 	

Vehicle accident during program activities (e.g. boat or plane crash, coach accident)	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP conducts audits of all suppliers every 2-3 years. 2. Coach company ensures they are properly licensed, qualified and experienced. • Coach company ensures they have necessary warrants of fitness and valid registration. • Coach company certifies that they hold appropriate insurance. • AUIP ensures that Emergency Accident Plan is given to all drivers. 	
Theft of participant's belongings from classrooms (e.g. room break-in, credit cards stolen, passport stolen, traveller's checks stolen)	S = 2, P = 3	<ul style="list-style-type: none"> • The coach driver locks the coach when not in use or occupied. 	<ul style="list-style-type: none"> • Participants carry emergency cards at all times. • Participants keep valuables in a safe place at all times. • Participants have photocopies of important documents. • Participants have adequate insurance to cover loss while travelling.
Participant injury/ accident on coach (fall while standing and coach is moving, motion sickness)	S = 3, P = 2	<ul style="list-style-type: none"> • AUIP ensures coaches all properly insured, certified and licensed (get copies). • AUIP ensures coaches have emergency procedures and that drivers go through emergency procedures at start of excursion. • Coach driver ensures first aid kit is on coach at all times. • Coach driver ensures that there are adequate vomit bags (or plastic bags) available on coach at all times. • Driver requests participants to stay seated while vehicle is in motion. • Driver reminds participants to wear seatbelts if available. 	<ul style="list-style-type: none"> • Participants take motion sickness medication if required. • Participants have adequate medical insurance for illnesses and any prescribed meds.
Fire or other event in classroom or building that requires evacuation	S = 5, P = 2	<ul style="list-style-type: none"> • AUIP audits classrooms to ensure adequate evacuation and emergency equipment. 	<ul style="list-style-type: none"> • Supervising faculty check local weather forecasts and conditions before planned activities or events. • Supervising faculty ensure that students are aware of both the appropriate gear and clothing necessary for the activity or event and for the environmental conditions (by referring to the RMP). • Supervising faculty carry cell phone with them wherever possible. • Supervising faculty alter, postpone or cancel any event or activity if conditions warrant.

Accommodation providers and homestays

HAZARD/RISK IDENTIFICATION:	RISK RATING: SEVERITY (S) AND PROBABILITY (P); 1 = LOWEST 5 = HIGHEST	RISK REDUCTION STRATEGIES RESPONSIBILITY OF AUIP	RISK REDUCTION STRATEGIES: RESPONSIBILITY OF U.S. INSTITUTION
Theft of participant's belongings from classrooms (e.g. room break-in, credit cards stolen, passport stolen, traveller's checks stolen)	S = 2, P = 4	<ul style="list-style-type: none"> • AUIP ensures accommodations give each student a key to shared rooms. • AUIP books rooms exclusive for program participants (no shared rooms with other travellers). 	<ul style="list-style-type: none"> • Participants carry emergency cards at all times. • Participants keep valuables in a safe place at all times. • Participants have photocopies of important documents. • Participants have adequate insurance to cover loss while travelling. • Students can and do lock rooms.
Participant injury/accident while at accommodation (e.g. fall, sprained ankle, cut)	S = 3, P = 4	<ul style="list-style-type: none"> • AUIP ensures accommodation providers have emergency contact info for AUIP and university faculty/staff. • AUIP provides institutions with local cell phones. 	<ul style="list-style-type: none"> • Participants have emergency information cards on them at all times. • Faculty ensures the first aid kit is handy and available at all times (e.g. with the TA). • Participants have adequate medical insurance for illnesses and any prescribed meds.
Cancellation of accommodation or transport (e.g. ferry) resulting in nowhere for students to stay	S = 2, P = 4	<ul style="list-style-type: none"> • AUIP has a contingency plan in place for each location or transport with potential for cancellation (e.g. Stewart Island ferry or LEI) and identifies alternative locations (e.g. different place of accommodation) or other modes of transport (e.g. alternative coach operator). 	
Sexual assault of student in a homestay family	S = 5, P = 2	<ul style="list-style-type: none"> • AUIP carefully vets and police checks homestay families, or uses a professional agency for selection and monitoring where possible. • AUIP evaluates homestays and encourages students to report any inappropriate behaviour. • Faculty and AUIP staff have cellphone contact 24/7 while students are in homestays and know the emergency protocol in case of sexual assault. 	<ul style="list-style-type: none"> • Students know who to contact in case of emergency and carry emergency contact cards. • Faculty and AUIP staff have cellphone contact 24/7 while students are in homestays and know the emergency protocol in case of sexual assault.

Food and Water

HAZARD/RISK IDENTIFICATION:	RISK RATING: SEVERITY (S) AND PROBABILITY (P); 1 = LOWEST 5 = HIGHEST	RISK REDUCTION STRATEGIES RESPONSIBILITY OF AUIP	RISK REDUCTION STRATEGIES: RESPONSIBILITY OF U.S. INSTITUTION
Participant illness due to water-borne diseases (e.g. Giardia, amoebic dysentery, stomach upset)	S = 3, P = 4	<ul style="list-style-type: none"> • AUIP informs students through the orientation that all potential drinking water should be boiled or treated if the source is suspect. In Fiji, students should only drink bottled water. • AUIP provides water filters to the village homestays in Fiji. • AUIP has a representative in Fiji while groups are there to help respond to emergencies 	<ul style="list-style-type: none"> • Institutions ensure participants have adequate medical insurance for illnesses and any prescribed meds. • Institutions ensure participants have all required vaccinations before departure. • Participants wash hands in soap and water after going to toilet. • Participants avoid ice when water source is suspect. • Participants use boiled or treated water for tooth brushing.
Participant illness due to food contamination (e.g. food poisoning, improperly prepared food, contaminated food)	S = 4, P = 3	<ul style="list-style-type: none"> • AUIP includes warning for students to wash and then peel all fresh fruit and vegetables in Fiji in orientation. • All food providers have the required certificates and inspections for a publicly operating food outlet (checked by the supplier audit system). • AUIP inspects (or has an agency inspect) homestays to ensure they are clean and hygienic. 	<ul style="list-style-type: none"> • Participants have adequate medical insurance for illnesses and any prescribed meds. • Participants have all required vaccinations before departure. • Participants wash hands in soap and water prior to food handling or eating or after going to toilet.
Participant has reaction due to disclosed pre-existing food allergy	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP informs all suppliers of any participant allergies. 	<ul style="list-style-type: none"> • Institutions ensure that students have full medical examination prior to acceptance. • Participants have proper medication at all times (e.g. inhalers, aspirin, allergy meds). • Participants carry emergency contact cards at all times. • Institutions ensure participants have adequate medical insurance for illnesses and prescriptions while away. • Institutions ensure AUIP is aware of any allergies prior to the program start. • All faculty and staff are aware of any student allergies and whether the student is carrying a remedy (e.g. epi-pen or medication).
Participant has reaction due to undisclosed pre-existing food allergy	S = 5, P = 3		<ul style="list-style-type: none"> • As above. • Institutions informs participants of policies for non-disclosure. • Supervising faculty ensure that the group always has easy access to the first aid kit.

Food and water supply inadequate for planned activity	S = 3, P = 2	<ul style="list-style-type: none"> • AUIP provides details of food and water provided in the staff notes and RMPs. 	<ul style="list-style-type: none"> • Faculty inform participants of their food and water needs for all planned events and activities (using staff notes and RMPs). • Faculty ensure that participants are aware that they are responsible to see to their own food and water needs, except where the program provides meals.
---	--------------	---	--

Activities

HAZARD/RISK IDENTIFICATION:	RISK RATING: SEVERITY (S) AND PROBABILITY (P); 1 = LOWEST 5 = HIGHEST	RISK REDUCTION STRATEGIES RESPONSIBILITY OF AUIP	RISK REDUCTION STRATEGIES: RESPONSIBILITY OF U.S. INSTITUTION
Participant injury/accident during activities on land (e.g. fall, sprained ankle, cut, broken bone, hit by car) or on water (e.g. near drowning, caught in riptide, surfing accident, capsized boat, hyperventilation)	S = 5, P = 3	<ul style="list-style-type: none"> • AUIP maintains regular audits of all suppliers to ensure they are adequately certified and experienced. • AUIP and suppliers ensure appropriate staff to student ratios. • Field guides or supplier guides brief participants on risks and hazards before activities and how to avoid them (e.g. participants told to stay on trails at all times, wear proper footwear and clothing, stay together). • AUIP provides RMPs for all outdoor activities, outlining skills and equipment required. • AUIP keeps an incident record of all accidents and near-misses and reviews annually. • AUIP asks all staff for evaluation at end of each program, including near-misses and potential improvements. • Guides explain risks associated with riptides, undertows, while surfing, canoeing, kayaking, white-water rafting, snorkelling. • Guides make sure participants have any necessary certification (e.g. scuba diving) before activity. • Guides and faculty ensure all participants wear life jackets for all water activities. 	<ul style="list-style-type: none"> • All students have emergency contact cards. • Faculty make certain students have proper skills necessary for activity (e.g. swimming ability). • Supervising faculty ensure that a safety briefing is conducted prior to any activity, and that students listen and pay attention to the briefing. • First aid kits are carried at all times by staff and guides. • Staff have communications ability at all times (e.g. staff to carry cell phones or walkie-talkies). • Faculty count participant numbers prior to and after activity (and during if needed). • At least one staff/faculty/guide travels at front and one brings up the rear; don't let students stray behind last staff member bringing up the rear, or charge too far forward of group. • Faculty institute the buddy system. • If the group separates, staff decide (and announce to group) on a meeting time and place for all to check in. • Faculty ensure that all equipment, if any, has been checked and is in good working order. • Faculty ensure there is enough of the necessary equipment for everyone's use (e.g. sufficient life vests, crampons etc). • Participants have adequate medical insurance for illnesses and any prescribed meds. • Faculty and guides ensure there is enough of the necessary equipment for everyone's use (e.g. paddles). • Faculty ensure all water vessels (e.g. boats, kayaks, canoes, ferries) have adequate numbers of life jackets and life jackets on board.

Participant becomes lost or separated from the group while on an activity	S = 5, P = 3	<ul style="list-style-type: none"> • Faculty and guides remain vigilant at all times and keep the group together. • Faculty and guides institute head-counts before, during and after activity, as needed. • Faculty or guides inform participants of the planned route. 	<ul style="list-style-type: none"> • Faculty inform participants to follow instructions of staff and guides and to stay together at all times, or where necessary. • Faculty implement use of a buddy system. • Faculty and guides remain vigilant at all times and keep the group together. • Faculty and guides institute head-counts before, during and after activity, as needed. • Faculty or guides inform participants of the planned route. • Faculty inform the participants of meeting times and locations during and after activity, where applicable.
Participant stranded at location or left behind after activity ended	S = 4, P = 3	<ul style="list-style-type: none"> • Supplier guides ensure that all participants are accounted for at the end of a scheduled activity or event. • Faculty and guides inform participants of planned route. • Faculty and guides inform participants of meeting times and locations during and after activity, where applicable. 	<ul style="list-style-type: none"> • Faculty and staff remain attentive and vigilant of student whereabouts at all times. • All participants told to stay together at all times, or where necessary. • Faculty implement use of a buddy system. • Faculty institute head-counts before, during and after activity, as needed. • Supervising faculty to count heads on bus before departure. • Faculty and guides inform participants of planned route. • Faculty and guides inform participants of meeting times and locations during and after activity, where applicable.
Participant lacking skills needed to participate in scheduled activity (e.g. unable to swim or snorkel, lacking sufficient survival skills)	S = 5, P = 4	<ul style="list-style-type: none"> • AUIP issues RMPs for activities that require specialised skills or fitness levels and explains what skill levels are required. • AUIP informs suppliers of any special accommodations needed by the group. 	<ul style="list-style-type: none"> • Supervising faculty ensure that students are adequately informed of the skills needed prior to the start of the activity using the RMP. • Participants allowed to excuse themselves from any scheduled activity if they do not feel that they have the necessary skills to complete the activity (i.e. all activities are optional). • Participants inform supervising faculty or staff if they have any concerns or disabilities that may prevent them from either partial or full participating in any activity. • Supervising faculty inform guides if any students require additional assistance. • Faculty ensure guides are aware of participants with special needs; extra guides may be required for assistance. • Institutions inform AUIP of any student disabilities or medical conditions that may influence their participation in the program.

Group separates or splits during an activity (e.g. while on hike)	S = 4, P = 3	<ul style="list-style-type: none"> • A faculty or guide travels at the front of the group and a faculty or guide brings up the rear at all times while on hikes and activities. • If faculty/guide numbers allow, one member locates themselves in the middle. • Guides give students safety briefing prior to an activity or event. • Guides and faculty endeavour to keep group members together, wherever possible. • Group leader stops and waits for the rest of the group to catch up, where applicable. 	<ul style="list-style-type: none"> • A faculty or staff member travels at the front of the group and a faculty or staff member brings up the rear at all times while on hikes and activities. • If faculty/staff numbers allow, one member locates themselves in the middle. • All students pay attention to the instructions given prior to an activity or event. • Faculty endeavour to keep group members together, wherever possible. • Faculty institute use of the buddy system, where applicable. 6. Group leader stops and waits for the rest of the group to catch up, where applicable.
Faculty, staff or guide sickness or injury that prevents participation in a scheduled activity or event	S = 3, P = 3	<ul style="list-style-type: none"> • If a faculty member or guide becomes unavailable, AUIP ensures that there is a replacement as soon as possible so that appropriate staff to student ratios can be maintained at all times. • If a field guide becomes unwell, AUIP replaces that guide with another guide as quickly as possible. • AUIP or a faculty member cancels an activity or event if appropriate staff to student ratios cannot be maintained. 	<ul style="list-style-type: none"> • If a faculty becomes unwell, the institution will provide a replacement as soon as possible. (AUIP can fill in until the replacement is in country.) • AUIP or a faculty member cancels an activity or event if appropriate staff to student ratios cannot be maintained. • Faculty nominate a backup person on their emergency response protocol.
Equipment inadequate (e.g. not enough life vests or wet suits, not enough of the correct sizes, not enough cooking gear), not in optimum condition or faulty or not supplied	S = 5, P = 4	<ul style="list-style-type: none"> • Sub-contractors supply all of the special necessary equipment and gear (e.g. life jackets, kayaks, paddles, crampons) for planned activities and events. • Sub-contractors make certain that there is sufficient equipment for all participants. • Sub-contractors make certain that all of their equipment is operational and in optimum working order. • AUIP provides RMP for activities so faculty and students know what they need to bring and what should be supplied. • Failure to supply the necessary equipment or gear for a planned activity or event should be enough for AUIP to cancel future contracts with the sub-contractor. 	<ul style="list-style-type: none"> • Program participants ensure that they bring enough to supply their own personal gear (e.g. sufficient batteries for flashlights). • Supervising faculty check there is adequate equipment prior to departure of the activity. • If there are insufficient quantities of equipment for all participants and the supplier cannot or will not procure additional equipment or gear, faculty should cancel or postpone the activity. • Faculty check and report to AUIP the suboptimum condition of any equipment.

<p>Clothing or personal gear needed for activity either inadequate or not supplied (e.g. no wet weather gear, improper footwear for activity)</p>	<p>S = 4, P = 4</p>	<ul style="list-style-type: none"> • AUIP provides RMP for activities so faculty and students know what they need to bring and what should be supplied. 	<ul style="list-style-type: none"> • Faculty and guides inform participants of all necessary clothing, footwear and equipment prior to the activity using the RMP. • Participants provide their own gear (e.g. sleeping bags, rain coats, jackets, flashlights, hats), and wear the appropriate clothing and footwear, as instructed. • Supervising faculty may decide to suspend any student's participation in any scheduled event or activity if that participant has insufficient personal gear, or is wearing inappropriate clothing or footwear, as necessary. • Supervising faculty may decide to alter, postpone or cancel any scheduled event or activity if participants have insufficient personal gear, clothing or footwear, as necessary.
<p>Extreme weather conditions (e.g. freezing conditions, snow, blizzard, hypothermia, extreme heat, strong sun, extreme UV radiation, extreme wet weather, severe thunderstorm, hurricane, cyclone or tornado, quickly changing conditions, rough seas)</p>	<p>S = 5, P = 3</p>	<ul style="list-style-type: none"> • AUIP provides RMP for activities so faculty and students know what skill levels are required, what gear they need to bring and what conditions could be dangerous. • AUIP monitors extreme weather events in areas that groups are visiting. 	<ul style="list-style-type: none"> • Supervising faculty check local weather forecasts and conditions before planned activities or events, particularly hikes or other activities that are not run by an outside provider. • Students responsible for wearing appropriate clothing and footwear for the expected conditions (e.g. down jackets, wool hats and gloves, raincoats and rain pants, swimming togs). • Supervising faculty alter, postpone or cancel any event or activity if conditions warrant.
<p>Coastal and ocean risks (e.g. riptides, undertows, storm surge, crashing waves, sea swells)</p>	<p>S = 5, P = 3</p>	<ul style="list-style-type: none"> • AUIP gives faculty RMP for all water activities that states skill levels necessary. • AUIP makes students aware of coastal and ocean risks in orientation templates given to institutions, and in RMPs. 	<ul style="list-style-type: none"> • Faculty use RMP to inform students of skill levels and equipment required for the activity.

<p>Poor hiking tracks (e.g. slippery, muddy, poorly signposted, dense bush, water obstacles, steep banks)</p>	<p>S = 3, P = 3</p>	<ul style="list-style-type: none"> • AUIP enquires about track conditions from the appropriate authority (e.g. DOC) prior to start of activity or hike. • AUIP create RMP for hiking activities that includes personal gear or equipment needed (e.g. appropriate footwear, flashlight/torch) and skills necessary for activity. • Sub-contracting guides are responsible for having any necessary equipment (e.g. ropes, axes, saw) and in sufficient numbers for participants and in good working order. 	<ul style="list-style-type: none"> • Faculty ensure students know information contained in the RMP. • Faculty ensure availability and accessibility of first aid kit at all times. • Faculty have cell phone or walkie-talkies available at all times, where practical.
<p>Stinging or biting insects (e.g. wasps, bees, mosquitoes, spiders)</p>	<p>S = 4, P = 4</p>	<ul style="list-style-type: none"> • AUIP includes information on any areas with particularly high insect numbers (e.g. wasps) in RMPs. 	<ul style="list-style-type: none"> • Participants bring any necessary medications for known allergies (e.g. epi-pen). • Participants disclose any allergies prior to departure on the program. • Faculty and guides brief participants on potential exposure prior to activity or event from RMP. • Faculty and guides tell participants to wear appropriate clothing and footwear for conditions, if required.
<p>Biting animals (e.g. snake bites, dog bites)</p>	<p>S = 5, P = 2</p>	<ul style="list-style-type: none"> • AUIP provides groups with first aid kits, including compression bandage for snake bites. • AUIP provides info on snakes, jellyfish etc in the orientation templates. 	<ul style="list-style-type: none"> • Participants get all the required and recommended vaccinations prior to departure. • Faculty ensure availability and accessibility of first aid kit at all times. • Participants follow all health and safety guidelines as outlined during the in-country orientation. • Dog and other animal bites should be seen by a trained medical professional. • Faculty are aware of all local medical facilities in case of a bite.



Emergency Action Plan

Introduction

This Emergency Action Plan (EAP) is offered as a supplement to accrediting institutions' own emergency action protocols. Supervising faculty should share this EAP with their institution, and determine how or whether it should be used to complement their own protocols. It can be consulted in the event of any serious accident, injury or crime that needs immediate attention or the intervention of emergency medical professionals, the police or other authorities. It is important that both supervising faculty and AUIP staff are aware of how to contact local emergency services, medical services and the police. AUIP and all its employees will follow this EAP in the event that no notice of an alternative policy is provided from the accrediting institution.

It should also be noted that this list is in no way complete, as some events, incidents and occurrences will always remain unforeseen and unexpected. It should however, be sufficient to cover broad categories of incidents and be applicable in most situations, no matter how severe. Faculty and staff should also note any additions, modifications or changes directly on to this Plan and share their notes with AUIP. AUIP continuously reviews and updates this plan whenever changes are necessary.

Emergency Action Plan for Faculty and Students

The following Emergency Action Plan (EAP) can be found in both the Program Handbook and the Faculty Handbook.

1. Assess the situation. Your first priority is to safeguard the safety and well-being of program participants; do whatever is necessary and reasonable to ensure their safety.
2. Call in-country emergency services and obtain medical care for affected participants as soon as possible (refer to your emergency card or confirmation folder for local health care contact information). Remain as calm as possible. Do your best to diffuse any growing anxieties that may be occurring among participants.
3. Contact a member of (a) AUIP and (b) the accrediting institution and inform them in a detailed way of the situation. Make every effort to call first then email, as there are many issues to discuss and AUIP may have local resources that could be useful to you.
 - The AUIP staff person, in order to help support you, will ask you for:
 - Your name, location, call-back details (telephone number, time to call-back)
 - Description of incident (when, where, who involved, etc)
 - The AUIP staff person can help you find local resources, ring for additional help/support or contact the institution if needed.
 - When telephone communications are down, use text messaging via cell phone, email, and/or internet.
 - Record as much information as possible in written form and start a running log/diary of the emergency situation.
 - At an appropriate time/location update the entire group of the situation.
4. If the situation warrants notify the local U.S. Embassy or Consulate about the emergency (refer to contact details on your emergency card). If there is a continued risk to the welfare of program participants (for example, during a terrorist threat), ask the appropriate Embassy or Consulate Officer to advise you on a regular basis about the evolution of the situation and about recommended behaviours for participants.
5. If the situation warrants and/or the Embassy or Consulate believe it is necessary, notify local police. Then follow through with the procedures that the police require of you and/or the participant(s).
6. If the emergency involves a faculty member, in order to maintain adequate faculty to student ratios, please notify AUIP and the accrediting institution immediately so that back-up faculty/staff can join



the program.

7. Gather and share information, including:
 - Listen to the affected participant(s) and, if appropriate, take into account their desires when making decisions.
 - Seek counselling for the affected participant(s) if desired.
 - Seek information from other participants, host families, and local friends of participants.
 - Keep program participants updated on the situation (when appropriate).
8. Keep AUIP and your institution informed on a regular basis, through telephone and/or email. AUIP can help support you by making phone calls or finding local resources to help.
9. During a political crisis, social unrest, or some other emergency in which foreigners in general or U.S. citizens in general may be at risk, instruct participants to avoid demonstrations, confrontations, or situations where they could be in danger; behaviour that could call attention to themselves or identify them as Americans (such as speaking loudly in English) and locales where foreigners, Americans, or American military are known to congregate. Instruct them to take down or remove signs, avoid using luggage tags, and wearing clothing that might label them as Americans.
10. In the event that you are unable to reach AUIP and/or the respective institution in the early phases of an emergency, proceed as best you can to secure the safety and well-being of participants following the advice of in-country officials and U.S. Embassy or Consular Officers. Please be sure to contact AUIP and your institution as soon as it is possible to do so. For example, during a natural disaster, such as an earthquake, all communication devices may be rendered inoperable.
11. Upon completion of the incident, submit an incident report form to AUIP and your institution as soon as possible and preferably within 48 hours of the incident.

Emergency Response Protocol for AUIP Staff

1. Assess the extent of the problem. If anyone requires immediate medical care, ensure that emergency services have been contacted (111 in NZ, 000 in Australia, 911 in Fiji).
2. Develop a call-back plan (who will contact who, when calling back, what number(s)).
3. Keep a very thorough written record of the conversation(s):
 - Date and exact time of phone call
 - Name of student(s) or staff involved
 - Description of incident (in as much detail as possible)
 - When/where did the event occur?
 - What are the symptoms?
 - Is there a pre-existing condition?
 - What treatment has been given so far?
 - Is there anyone else involved (e.g. other students, driver, supplier, etc)?
 - Health and well-being of the rest of the group
 - Whether the faculty member has or will be contacting their institution
 - Try to understand the situation in as much detail as possible
4. Remind faculty of the following:
 - Faculty should be following their own institution's emergency protocol, or if they don't have one, the AUIP Emergency Action Plan, located in both the Program Handbook and the Faculty Handbook.
 - All staff, students and faculty should refer all media calls to the AUIP office and refrain from



answering reporters' questions.

- A student should never be left from the group (under any circumstances) without a staff member present. (This does not apply for students dismissed or dropped from the program. In Fiji dismissed students should be dropped off at Nadi airport.) Each institution has approved an alternate representative (back-up) for such situations (see emergency response kit).
 - The faculty member may need to institute changes to the itinerary to keep all students together as a group. We will facilitate these necessary changes as far as possible.
 - Faculty should start a running log/diary of events (date, exact times, place, who).
 - Faculty should begin an Incident Report Form as soon as possible, while events are fresh in their mind.
5. Make arrangements for immediate medical care if required.
 - Faculty can ring emergency services if they feel able and are in cell coverage.
 - If the faculty member is dealing with crisis, you may assist by ringing nearest medical provider and/or giving faculty directions (using lists of medical services listed on the emergency information card and google maps).
 6. For emergency evacuations (in cases which threaten life and/or limb), call the student's insurance provider as early as possible to begin the approval process.
 - Anyone who has had an allergic reaction and has administered an epi-pen should be evacuated.
 7. Contact an AUIP Director (phone numbers in the emergency information kit) to determine whether the institution should be called.
 - All allegations of sexual harassment – no matter how minor – should be reported to an AUIP Director within 24 hours.
 - If you cannot contact a Director, make a judgment call (discuss with faculty member if possible) whether to contact the institution and inform them of the situation (emergency contact numbers in the emergency information kit).
 - Only contact an institution directly if you cannot reach one of the AUIP Directors.
 - Never contact the student's family directly unless authorised by the institution.
 8. Note that if the group is having communication difficulties (e.g. in a remote area or communications are down), texting via cellphones can be a good form of communication. Texting can work in situations where cell cover is not good enough for a conversation, and a text will go through if the group temporarily gains coverage.

HANDLING MEDIA ENQUIRIES

1. AUIP has a system in place for dealing with media enquiries, and all media enquiries in an emergency should be referred to the company spokesperson. The spokesperson for AUIP is Kevin Arscott (deputy Mary Ogburn).
2. Record the name, organisation and phone number of the reporter.
3. Ask the reporter for their deadline.
4. Take control. Say that you will get the spokesperson to phone them back.
5. DO NOT be lulled into giving out information about the incident/event. Reporters may slip in comments/questions to try to get a response (e.g. "So I hear it was really bad out there...").
6. DO NOT engage in a conversation about what you know, or have heard.
7. Simply say that you will refer their enquiry to the spokesperson who will contact them shortly. Be friendly but firm.



FOLLOW UP ON EMERGENCIES AND NEAR-MISSES

In any emergency situation, be sure to follow up with the faculty member at frequent intervals afterwards to ensure the situation is resolved. This should be hourly in the case of a serious emergency (a Director may take over this role in this situation), or daily for a less serious incident.

Contact the faculty member within 24 hours of the incident to remind them to complete an Incident Report Form (copy in their Faculty Handbook). This should be completed while the events are fresh in their mind, and a copy submitted via email or post to the AUIP office.

All completed incident forms should be filed in chronological order (most recent event on top) in the Incident File in the AUIP office.

Emergency Response Protocol for AUIP Directors

In emergency situations, the Program Coordinator or a faculty member will typically be in touch with one of the Directors shortly after the incident has been reported. In addition to helping calm staff, the Directors should be sure to assist with the following things:

1. Determine whether the faculty member has already contacted his/her institution (the Program Coordinator should have determined this from their initial conversation with the faculty). If the faculty has not contacted them, do so immediately (contact numbers are on Google Drive). Issues to discuss with the institution include:
 - Ensuring both AUIP and the institution have a clear and full understanding of the events
 - Contacting the family
 - Media response (see below)
 - Lines of communication (who will communicate directly with group and how both institution and AUIP will receive information)
 - Contacting student's insurance company (especially if evacuation needed)
2. For emergency evacuations (in cases which threaten life and/or limb), call the student's insurance provider as early as possible to begin the approval process.
 - Anyone who has had an allergic reaction and has administered an epi-pen should be evacuated.
3. Call AUIP's insurance broker (Robert Spooner, Anthony Runacres and Assoc) and inform him of the situation within 24 hours (when potential lawsuit, e.g. sexual harassment, student dismissal, medical evacuation, emergency medical, etc).
4. Work with Program Coordinator and faculty to ensure that no student is left on his/her own. A Director (or substitute) may be required to join the group if necessary to ensure adequate faculty to student ratios. All Directors should maintain up to date passports and travel documents in case they are required in an emergency.
5. Start developing a plan for who will be responsible for the following tasks:
 - Communications with media
 - Communications with institution
 - Communications with family
 - Business continuity
6. After an emergency, review the faculty's Incident Report Form and add any material that could be important in understanding the incident and preventing a future incident.

Media Plan for Emergencies

In the event of any major incident eliciting media enquiries, KEVIN ARSCOTT will be the spokesperson for AUIP, and MARY OGBURN will be his deputy. If both of these are unavailable for either company CARALYN PURVIS will be the spokesperson.



As spokesperson, you will be required to “front” any media approaches and if the situation requires, organise and appear at a media conference. ALL media enquiries should be directed through the spokesperson. Having a single spokesperson ensures a consistent message is conveyed and the reputation of the organisation is protected as much as possible.

As spokesperson you will be available to media, responding to them in an appropriate and polite manner at all times. Your attitude and tone during the first few approaches will, in part, determine the “ride” they will give you over the next few hours/days/weeks.

Immediate actions

You should attend to the following tasks immediately:

1. In an event where there is likely to be serious media “fallout”, contact Durning PR for assistance. They are available via cellphone 24/7 in case of serious emergencies. Contact is Jocelyn Johnstone (353 6162 or 027 353 6164) or John Durning (0274 373 286).
2. You must have ALL the facts of the matter at your fingertips. It is imperative that when an incident occurs, you are fully briefed about all aspects. Get hold of the information as quickly as you can. Speak with as many people involved as possible before speaking with the media (e.g. faculty, field guide, institution, coach driver or activity supplier, etc). You need to ask all the difficult questions so that there will be no surprises down the track. For example, find out if the student had been previously warned or had offended in the past, if there were safety problems with a supplier or employee of AUIP, if anything could have been done to prevent the incident, etc. Reporters have a knack of discovering information off their own bat, and you don’t want to be caught out.
3. Once you have gathered all the relevant information about the incident, determine your response. You are looking for 3-4 key messages. These will be wholly determined by the kind of event you are facing.
 - a. The first might be: “AUIP regrets this incident and expresses its concern to: the student, the family, etc. We are working hard to establish the facts and keep in touch with the families.” (Remember: Do not admit “guilt” unless absolutely necessary.)
 - b. The second might be: “AUIP has been successfully operating programmes in New Zealand for the past seven years without incident, and regards student safety as paramount.”
 - c. The third might be: “AUIP will be conducting its own investigation into this incident (or calling for an independent one) to ensure there is no recurrence.”
 - d. The fourth might be: “AUIP is a leader in offering services for quality, academic study abroad programs and we will be continuing to offer these programmes to international students.”
4. Write these key points down, and use them as your response when (a) media calls begin or (b) as the basis of a press release to media.
5. Ensure anyone who answers the phone in the AUIP office is aware there has been an event and that media are likely to be calling. Make sure they know the response procedure (see operations manual under handling emergencies). They should be friendly, but make NO comment.
6. When accepting a call from a reporter, be sure you know their name, medium (ie paper or television), deadline and contact details.
7. If you are not ready to speak to the media TAKE CONTROL. Say, “I won’t give you an interview now. I’ll need to ... get the facts etc. Can I phone you back shortly?” Check their deadlines, and respect them.
8. If you are feeling really proficient, try to get the reporter’s perspective. Say:
 - “I can do a better job for you if I ask you a few questions first.
 - “What type of interview are you wanting?”
 - “What’s your general question line?”
 - “Who else have you spoken to/will you speak to? What’s their feeling about it? What did they say?”



- “Any other issues?”
 - Then check: “So, if I’ve understood you”
9. In speaking with reporters, keep repeating your main points (#3 above). Try to work them into your answers. Do not be drawn too far off course. If a question “throws” you, say you can’t answer that just now, that you need to get the facts
 10. Refer to the pre-prepared safety fact sheet about AUIP (Appendix D). 10. In all communications be:
 - Factual
 - Disciplined
 - Compassionate
 - Professional

Holding a press conference

If the incident/event is of sufficient importance, and has attracted huge media attention, it may be best to hold a press conference open to all media, rather than try to update individuals on a regular basis.

1. Invite media to attend by telephone and/or email. Think about inviting media from New Zealand, from the area where the students are from and from the country where the event occurred.
2. Ideally give media a minimum of 2-4 hours warning of the time and place.
3. The AUIP office could be used for a press conference. Ensure the office is clean and that furniture is moved so that there is sufficient space for cameras and seating.
4. Set up the room so that the spokesperson and any other directors are seated behind a desk.
5. Be thoroughly conversant with your key messages. Open the press conference by stating your position, and covering off the key messages.
6. Then accept questions. When they dwindle, wrap the conference up quickly.
7. A one-page statement outlining the situation and the AUIP response can be handed to media as they leave, along with the AUIP pamphlet providing information on the programmes.
8. Reporters will have read the AUIP website and may have data from it. Be sure you are conversant with everything on the website and that it is up to date.

Other communication tips

1. Monitor media coverage of the event through Google Alerts or Durning PR. If there is inaccurate information, be sure to respond by ringing the media outlet and through social media.
2. Managing social media during a crisis will be critical. Ensure one person is monitoring all social media and managing appropriately.

Recommended EAP for Theft of Participant’s Belongings

This plan covers the theft of a participant’s personal belongings from their accommodation, the tour coach, or while on any specific activity or program event during the duration of the program. Personal belongings include, but are not limited to, a participant’s personal luggage (e.g. backpacks, suitcases), equipment (e.g. laptops, personal electronic gear), money (e.g. cash, credit cards, traveller’s checks), documents (e.g. passports, medical or insurance certificates), or other items of value or importance to the program participant.

Procedures:

In all instances, AUIP staff or supervising faculty should first ascertain if this is an actual theft or if the student has merely lost or misplaced the item.



If an actual theft has occurred:

1. Follow all emergency protocols issued by the accrediting institution.
2. First determine if anyone is injured. If injury occurred, then see to immediate medical care first.
3. If no injury has occurred, then determine what item(s) are missing and the circumstances surrounding the theft or disappearance.
4. Evaluate the severity of the theft (e.g. is the stolen item valuable and irreplaceable? Does it warrant contacting the police?).
5. If necessary, contact the local Police (or other authority) to report the stolen property (see Appendix C). This step is important, especially if the participant wishes to file an insurance claim later. Obtain a copy of the police report.
6. Contact the AUIP office immediately to report the incident.
7. If a student's passport is stolen/lost, staff should contact the US consulate or embassy (see your emergency card) to report passport as stolen and enquire as to reissuing process. If a participant's passport is lost or stolen it will be necessary to procure a replacement before the program ends. In this case, the participant may have to travel to another city (e.g. Auckland or Sydney) to get a new passport issued and will need supporting documentation (e.g. their original birth certificate, driver's license, photocopies of the original passport) to obtain a new passport. The participant should be advised that this could be a lengthy process. Prior registration of a participant's passport with the American embassy or consulate can significantly speed up the process and should be encouraged. Furthermore, any on-going visas or permits may need to be procured from the issuing authorities (e.g. new visa for visiting Fiji). Participants should see <http://usembassy.org.nz/usservices/passports> for additional information.
8. Supervising faculty should fill out and submit an incident report to the AUIP office.

Recommended EAP for Rape or Sexual Assault of Participant

This plan covers the sexual harassment, sexual assault or rape of a program participant.

Sexual harassment can be defined as any unwanted, unwelcome and offensive sexual advance or offensive remark or act, a request for sexual favours, or other verbal or physical conduct or written communication of an intimidating, hostile or offensive sexual nature, especially by one in a superior or supervisory position or when acquiescence to such behaviour is a condition of continued employment, promotion, or satisfactory evaluation. Sexual harassment is considered a form of illegal discrimination and is a form of sexual and psychological abuse, ranging from mild transgressions to serious abuse. Psychologists and social workers report that severe and/or chronic sexual harassment can have the same psychological effects on victims as rape or sexual assault.

Sexual assault can be defined as conduct of a sexual or indecent nature toward another person that is accompanied, without consent, by actual or threatened physical contact or force of a sexual nature. While associated with rape, sexual assault is much broader and the specifics may vary according to the social, political or legal milieu of the host country. Aggressors may include, but are not limited to, strangers, acquaintances, superiors, legal entities (as in the case of torture), or even family members. Often, the act is accomplished by force, coercion or violence sufficient to cause physical injury. At other times, even though no lasting physical injury is sustained, the psychological damage done by this intimate violation may be substantial. According to the US Department of Health and Human Services, sexual assault includes, but is not limited to, "inappropriate touching, vaginal, anal or oral penetration, sexual intercourse that one says 'no' to, rape, attempted rape and child molestation. It may induce fear, shame, or mental anguish. Sexual assault may be subject to criminal prosecution by law enforcement authorities.

Rape can be defined as any crime where the victim is forced into sexual activity, in particular sexual penetration, against his or her will.

(Sources for definitions: Oxford English Dictionary, Equal Employment Opportunity Commission, US Department of Health and Human Services, The New Merriam Webster Dictionary, Wikipedia)



Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Make sure all students are safe and accounted for (e.g., no one has gone seeking retribution).
3. Render lifesaving or basic care as appropriate to physical injuries and your abilities.
4. Remove the victim from the situation as soon as possible and create a secure and reassuring environment.
5. Take the student to the nearest hospital or doctor for immediate medical attention if they have sustained injuries from the attack and they agree to go (see Appendix G for contacts). Consider whether it is best to call for help or assist the victim in self-transport to the nearest hospital emergency room. Respect the victim's wishes as to whether they wish to visit a doctor now or later (or not at all). In Australia, New Zealand and Fiji it is not mandatory for the victim to report the crime if they are over 18 years old. Due to the sensitive nature of this criminal offense, first-responders should be scrupulous about respecting the victim's wishes.
6. If the incident has just occurred the student may wish to report it immediately to the authorities by phoning emergency services (111 in New Zealand, 000 in Australia, and 911 in Fiji) for the police or an ambulance. Make sure that the participant understands that the police have a greater chance of catching the suspect if it is reported quickly (best within 72 hours), although such examination can be done up to a week afterwards. Remember it is the student's choice if she wants to report the incident or not. Respect the student's decision. Make sure the victim understands that involving the police does not obligate the victim to press charges. Phrase it in terms of "keeping options open". In most cases, the victim can request that a woman officer take her statement, but this is not guaranteed.
7. If the student wishes to involve the police, they will ask the victim if she wishes to have a rape kit taken, which can be used as evidence if she decides to press charges later. The kit may include blood, hair and urine samples; clothing samples; and photo documentation. The student can also have a rape kit taken and a medical exam done even if she does not wish to report the incident to the police at the time.
8. If there is a possibility that the victim may be pregnant, she could get a "morning after" pill from a doctor (recommended within 48 hours of the incident). Be gentle and understanding in suggesting this possibility.
9. If there is a possibility of sexually transmitted disease (e.g. AIDS), the victim may want to consider prescription retro antiviral medications, which are thought to afford significant resistance to infection after the exposure. The sooner these are started, the better.
10. Contact the AUIP office and accrediting institution immediately.
11. Offer reassurance, support and counselling. Know your own abilities and limitations. If the Police have been called, they may contact a sexual assault centre for support. Otherwise, AUIP should arrange for counselling with a professional rape/sexual assault counsellor (see your emergency card for list of local sexual assault centres). If the offer for counselling is not taken up now, continue to make the offer at later stages.
12. Ask if there is anyone (a friend in the group) that the victim would like to stay with them.
13. Do not contact their parents or guardian directly without the expressed consent of the victim, unless the victim is in immediate danger. Support the victim in their decision to notify their family, or not. Assist in helping the student ring family if they choose to (i.e. pay for the call, create privacy, open channels for communication).
14. See to group issues that will arise as a result of the incident in a scheduled group session. Honour confidentiality and offer support, reassurance and additional counselling for other group members if required.
15. Faculty should fill out and submit an Incident Report form to the AUIP office.
16. See the Rape Survivor's Legal Guide (2011) for more information (on Google Drive or at www.auip.org).



communitylaw.org.nz/fileadmin/documents/assets/Rape_Survivors_Legal_Guide_2011.pdf.

Things Not to Do:

If a rape or serious sexual assault has occurred and the victim has given consent to report the crime to the authorities, then AUIP staff and faculty will need to inform the victim that:

1. The victim should not shower, bathe or “clean up” as this may destroy important evidence. The police or doctor will administer a “rape kit” that will assist if any legal action is later taken.
2. No one should disturb the location where the event occurred, as the crime scene may contain important evidence.
3. All clothing should be preserved and not washed.
4. The victim should not eat, drink or smoke, where practical.
5. The victim should not brush their teeth.

Things to Remember:

1. Sexual harassment is culturally defined and can be strongly influenced by cultural differences and student perceptions of the host culture.
2. It may not always be appropriate to contact law enforcement officials. If in doubt, seek the advice of host country experts and the U.S. Embassy or Consulate, but in all instances, honour the victim’s confidentiality first.
3. A victim’s emotional state following sexual harassment or assault may include any or all of the following: fear, confusion, self-blame, vulnerability, insecurity, anger, crisis, powerlessness, inability to act or make decisions, fear of how others may perceive them, depression, loneliness, isolation, or homesickness.
4. Faculty and staff should take all steps necessary to ensure that the victim has adequate support and access to counselling in the immediate aftermath of any violation, no matter how severe.
5. After the victim has had a chance to recuperate somewhat from the incident, faculty and staff should be attentive to the wishes of the student if s/he wishes to return home. AUIP staff and accompanying faculty should take all practical steps to ensure the student’s safe return. This may entail a family member coming to New Zealand to offer support and to accompany the victim home, or a faculty member may need to return home with the student.
6. After the incident, the group will need attention and may need counselling as well.
7. Faculty and staff should also be aware of the extent to which they may have been affected by the incident and should take any steps necessary to obtain the necessary support or counselling.

Recommended EAP for Participant Injury, Accident or Illness

This plan covers emergency procedures for an unexpected injury, accident, illness, or emergency of a program participant at any time during the course of the program where medical facilities are nearby or easily available. AUIP staff and supervising faculty should have access to a cell phone at all times to facilitate communications, and to call emergency services, if needed.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Stop the group activity.
3. Determine the severity of the incident.
4. Apply any immediate required first aid (e.g. stop bleeding, apply cold water or compress, immobilise the fracture). Be aware of your own ability and limitations.



5. If the situation warrants, call emergency services (Dial 111 in New Zealand, 000 in Australia, and 911 in Fiji).
6. If the injury is serious (student cannot move or immediate medical attention is required), and the group is in the midst of an activity or hike, then at least one staff member should stay with the group while the other staff member accompanies the injured student (either by ambulance or takes the student directly) to the nearest hospital or medical facility (see Appendix G). Always err on the side of caution; if in doubt, call emergency services for help.
7. If a student has a severe allergic reaction, check for any medic alert tags and/or medications (e.g. bee sting kit, epi-pen, asthma inhaler) in the student's belongings. Ask other students if the student has any known allergies. Administer emergency first aid as required and within your abilities.
8. Contact the AUIP office immediately.
9. If the injury is less serious (e.g. student is able to walk), and medical attention is less urgent but still required, then an AUIP staff member or supervising faculty should take the student to the nearest medical facility at the earliest possible convenience. The other staff member can decide if the activity should continue with the remaining group members, maintaining an adequate staff to student ratio.
10. In the event of any accident or injury that requires a student to seek the help of a trained medical professional it is AUIP policy that an AUIP staff member or supervising faculty member must accompany the student to the hospital or doctor's office. A student may elect to have another student accompany them for moral support.
11. In the event of a minor illness (e.g. upset stomach, routine medical consultation) a student may elect to consult a doctor, nurse or counsellor of their own accord and without AUIP or faculty supervision. Students are responsible to provide for their own transportation costs.
12. Never discourage a student from obtaining medical help or advice if they wish to do so. Student health comes first, even if it means delaying a planned activity or revising the schedule.
13. In cases of serious illness or injury, a staff member should always remain with the student. If there are not enough staff members for the rest of the group, field activities should be suspended until a replacement staff member can be called in to assist.
14. If a student must be evacuated back to the home country, it is first the accrediting institution's responsibility to contact emergency medical evacuation services. AUIP and its staff will assist in all ways possible but will play a supportive role.
15. If a student needs to be left behind at hospital as the group moves to another location, either an AUIP staff member or a faculty member must stay with the student at all times.
16. Do not contact students' relatives directly, unless requested to by the accrediting institution.
17. Supervising faculty must file an Incident Report Form to the AUIP office for all accidents and injuries and report any 'close calls' or 'near misses' for recording in the AUIP accident register.

Recommended EAP for Injury, Accident or Illness in a Remote Location

This plan covers emergency procedures for an unexpected injury, accident or illness of a program participant at any time during the course of the program where medical facilities are either non-existent, distant or not easily available. By definition, remote locations have limited first aid facilities. Supervising faculty should have access to a cell phone at all times (where practical or in range) to facilitate communications and to call emergency services. If there is no cell phone coverage in the remote location, then supervising faculty or sub-contracted guides should know how to contact emergency services in the event of serious injury, accident or sudden illness of a program participant. This might entail having radio communications available (e.g. walkie-talkie), access to a radio transmitter (e.g. CB or marine radio, DOC transmitter), or knowledge of the quickest way (e.g. nearest phone, fastest route out) to contact emergency services.

Procedures to be followed under this plan are the same as those followed above (for Participant Injury, Accident or Illness where medical facilities are nearby) with these following additional procedures added.



Additional Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. If the injury is serious and the student cannot move and immediate medical attention is required, and the group is in the midst of an activity or hike where medical facilities are not close by, then one staff member (and potentially an extra student or two for assistance) must remain with the injured student at all times. The remaining staff member(s) should immediately return with the group to the nearest location from which emergency services can be contacted for medical assistance (closest cell phone range, nearest land-based phone line, nearest DOC office or place from which an alarm can be raised). The staff member staying behind with the injured student must stay until help arrives.
3. An emergency medical evacuation can be arranged by ringing emergency services (111 in New Zealand, 000 in Australia, or 911 in Fiji). The staff member raising the alarm must specify the nature and severity of the injury as well as the exact location so that emergency rescue services can locate the injured participant as quickly as possible. Emergency services will arrange for evacuation of an individual (e.g. by ambulance or helicopter) to the nearest hospital or medical centre.
4. If the injury is serious but the student can move and immediate medical attention is required, and the group is in the midst of an activity or hike where medical facilities are not close by, then one staff member should immediately return with the injured student to the nearest location from which emergency services can be contacted for medical assistance (closest cell phone range, nearest land-based phone line, nearest DOC office or place from which an alarm can be raised). The remaining staff member(s) should either decide to continue with the activity, or cancel the activity and return to base, depending upon the particular circumstances of the incident or event.
5. If there is only one staff member with a sub-group then that staff member should communicate by walkie-talkie to the other sub-group, instructing them to immediately return to contact emergency services and seek medical assistance for the student.
6. If an activity is guided by a supplier, guides should also know how to contact emergency services, have first aid kits and be qualified in their use.
7. At least one staff member should remain with the injured student at all times.

Remember that suppliers and guides may have their own specific emergency evacuation plans and that these plans may be activated if a supplier has been hired. In these instances, faculty should work with the supplier to contact emergency services. In all instances, flexibility should also be maintained on the part of staff or supervising faculty to alter or modify the plan as necessary or expedient, depending upon the particular circumstances of the incident or event.

Recommended EAP for Injury, Accident or Illness During Homestay

By nature, injuries, accidents and illnesses that occur while a student is in homestay will first have to be attended by the homestay family or the student themselves as there will be no supervising AUIP staff or faculty member present. Risks should be minimized by conducting a thorough health and safety orientation prior to the homestay and students should be made aware of any potential risks associated with their hosting family, the accommodation itself, or the location. AUIP should ensure that all families have been properly vetted, either by conducting their own review, or through a review by the sub-contracting agency or host family coordinator. The homestay family should also be aware of general first aid practices and know how to contact emergency services in the event of a student injury, accident or illness. This Emergency Action Plan should be shared with the Homestay Coordinator and copies given to all hosting families.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Determine the severity of the incident.



3. Apply any immediate required first aid (e.g. stop bleeding, apply cold water or compress, immobilise the fracture). Be aware of your own ability and limitations.
4. If a student has a severe allergic reaction or asthma attack, check for any medic alert tags and/or medications (e.g. bee sting kit, epi-pen, asthma inhaler) in the student's belongings. Administer as necessary.
5. If the situation warrants, call emergency services (111 in New Zealand, 000 in Australia, or 911 in Fiji) for AMBULANCE, FIRE or POLICE and wait for help to arrive.
6. Contact the AUIP office immediately and inform them of the circumstances.
7. If the injury or illness is less serious but requires immediate medical attention, take the ill or injured student to the nearest hospital or medical facility as soon as possible. Always err on the side of caution; if in doubt, call emergency services for help.
8. If the injury or illness is less serious and does not require immediate medical attention, the student should be advised to see a medical professional as soon as possible. An AUIP staff member or supervising faculty can provide the student with a list of recommended medical facilities and may accompany the student to see a doctor or nurse, depending upon the severity of the injury or illness. A student may elect to have another student accompany them for moral support.
9. In the event of a minor illness (e.g. upset stomach, routine medical consultation) a student may elect to consult a doctor, nurse or counsellor on their own and without AUIP or faculty supervision. In these instances students are responsible to provide for their own transportation costs.
10. Never discourage a student from obtaining medical help or advice if they wish to do so. Student health comes first, even if it means altering or revising your day's schedule.
11. In cases of any serious injury, accident or illness, the host family member should always remain with the student until an AUIP staff or faculty member can arrive.
12. Do not contact the student's family directly.
13. Supervising faculty must file an Incident Report Form to the AUIP office for all accidents and injuries and report any 'close calls' or 'near misses' for recording in the AUIP accident register.

Recommended EAP for Staff or Faculty Injury, Accident or Illness

This plan covers emergency procedures for an unexpected injury, accident, illness, or emergency of an AUIP staff member or supervising faculty at any time during the course of the program. To reduce any potential risks, staff and faculty numbers should be sufficient at all times to ensure that there will always be adequate supervision of students so that a scheduled program event or activity can proceed in the absence of a staff member.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Follow all the same procedures for injury, accident or illness for students, as above, and if in remote areas away from medical facilities.
3. If an unexpected accident, injury or illness occurs to a staff or faculty member prior to a group event or activity (e.g. staff member wakes up sick) then they should contact the AUIP office or other staff or faculty and inform them of the circumstances.
4. If an unexpected accident, injury or illness occurs to a staff or faculty member during a scheduled program event or activity (e.g. a staff member becomes suddenly ill, or has a serious accident or injury), then one accompanying staff member may need to assist the other ill or injured staff member and either bring them to a medical facility or call the appropriate emergency services (e.g. ambulance, police). The remaining staff member(s) will need to tend to the needs of the group and must decide whether to carry on with the scheduled program event or activity, modify it in any necessary way(s), or cancel it altogether.



5. If an adequate staff to student ratio cannot be maintained then the scheduled program event or activity should be cancelled.
6. The AUIP office, or the accrediting institution, depending on the duration of the absence or the severity of the injury or illness or both, may need to provide a replacement staff member for the duration of the original staff or faculty member's absence.
7. All incidents should be reported to the AUIP office and the accrediting institution immediately.
8. In the event of any injury, accident or illness, an accompanying staff or faculty member must file an Incident Report form with the AUIP office.

Recommended EAP for Student Behavioural or Psychological Illness

This plan covers emergency procedures for a situation where a student either has or develops a behavioural or psychological abnormality that negatively affects other program participants (staff or students) in such a way that the continuing operation of a scheduled program event or activity is no longer possible. In this instance, the student's own life may be in jeopardy due to his/her actions, or the student may be putting other program participants at risk or in danger of injury, accident or illness.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Remove the student from the rest of the group so that other potential disturbances are minimized.
3. Both the student's individual safety and the group's safety should remain paramount.
4. Do what is necessary to calm and reassure the student and to control the situation. Be aware of your own limitations and abilities.
5. Call emergency services (111 in New Zealand, 000 in Australia, 911 in Fiji) if necessary.
6. Contact the AUIP office and the accrediting institution immediately and inform them of the circumstances.
7. If alcohol or drugs are involved, the affected student should be immediately informed of the seriousness of the incident. Officials from the accrediting institution will need to be informed and possible dismissal proceedings begun.
8. If you believe the student is having suicidal thoughts or tendencies, ask the student directly whether they are thinking of killing themselves. If they say they are, ask them whether they have a plan and if they have thought about how they would kill themselves. The more details the student has thought out, the more seriously they may have considered suicide. Also ask whether they are on psychotropic medications and if so, which one and if they are still taking them.
9. It is critical that a suicidal student is not left alone for any length of time. Ask if they would like to speak with someone confidentially (helplines are listed in Appendix G).
10. If a student has a serious mental health problem or condition that requires immediate medical assistance, visit the closest mental health centre (see Appendix G).
11. Make arrangements for a staff member to stay with the student. If an adequate staff to student ratio cannot be maintained, arrangements for another staff member to join the group must be made and the schedule rearranged accordingly.
12. The student may require close supervision and on-going counselling and/or medical attention. The institution should be consulted on the best course of action (e.g. whether to send a student home).

Recommended EAP for Missing Student

This plan is to be implemented in the event that a student has not returned from a scheduled program event or activity after a reasonable amount of time has elapsed and is presumed lost or missing.



Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. If a group activity (e.g. hike) is in progress, stop the group immediately and suspend the activity.
3. Establish when and where the student was last seen and what they were doing at the time.
4. Ensure that the group stays together and remains calm.
5. Carry out a search of the immediate area where the missing student was last seen. Faculty and staff should take charge and form small search parties, as necessary. Each search party should contain a staff member and a small number of students.
6. One faculty member should remain with the rest of the group and stay put (establish a “base”), in case the student turns up.
7. Each search party should report back to the “base” at regular intervals and then set out again to search a different nearby area until the missing student either shows up, or returns.
8. If an event or activity is sub-contracted and guides are present, then the guides should take charge and issue instructions. Staff and faculty should assist in any way(s) possible.
9. If a participant is determined to be missing during a water-based activity (e.g. kayak trip, dolphin swim, ocean swim) then guides or lifeguards should be contacted immediately, emergency procedures implemented and a search begun without delay. Make certain that the rest of the group is safe and secure (e.g. return to the boat, move the group to shore or higher ground) and all participants are accounted for.
10. The group leaders (staff, faculty or guides) should determine how long the search should continue before emergency services are contacted. This will depend on the immediate circumstances (e.g. how long has the search carried on, time of day, conditions of other participants, search location or terrain) or current conditions (e.g. weather, rough seas).
11. If the student is located (e.g. returns to “base,” is found in another location) then determine if any medical assistance is necessary. If so, then implement the appropriate Emergency Action Plan. If no immediate medical assistance is required, the group should end the activity and return to the car park, pier, shore or accommodation as soon as possible.
12. If a student does not return to the designated meeting place, or fails to return for any reason and all reasonable steps have been taken to locate the student, report the incident immediately to the local authorities (e.g. the police, Department of Conservation) by phoning emergency services (111 in New Zealand, 000 in Australia, or 911 in Fiji) and reporting a missing person and giving the circumstances for the disappearance.
13. Contact the AUIP office and institution immediately and inform them of the circumstances.
14. If the student is missing for longer than 24 hours the Embassy should be contacted for assistance.
15. If the student is located and uninjured, supervising faculty should determine the circumstances and decide if any disciplinary measures are required.
16. Supervising faculty should file an Incident Report Form with the AUIP office as soon as possible.

Recommended EAP for Death or Serious Illness in a Student’s Family

This plan should be implemented in the event of a death or serious accident or illness of a participant’s immediate family or a close personal friend that would require the student to return home as soon as possible.

Procedures:

1. Care should be taken when informing the student of the illness, accident or death. The family may contact the accrediting institution first, or phone the student directly. Facilitate, where possible,



the conveying of the news from the overseas family to the student. Ideally, AUIP staff or supervising faculty should be present when the news comes through, but this is not always possible or practical. If the family wishes otherwise then it will be the responsibility of an accompanying faculty member or AUIP staff to break the news.

2. Ensure that the student has someone to console them (e.g. a close friend or fellow student) when the news is first delivered, if possible, or soon after. Ask them who they would like to be with (e.g. fellow student) and then make arrangements for that student to come as soon as possible if they are not already present.
3. Provide a secure and comforting environment for the grieving student, and try to minimize unnecessary outside disturbance. Remember first and foremost that the student may be distraught and confused, perhaps hysterical, and every care should be taken to see that the student remains in a safe and caring environment for the remainder of his/her stay on the program.
4. Discuss with the institution and with the family (if you have direct contact with them) how they want you to proceed (e.g. do they want the student to return as soon as possible? Will someone from their side come and get the student?).
5. Discuss these plans with the student at the earliest possible moment and determine their wishes (i.e. do they wish to return or stay?)
6. Once a decision has been made, AUIP staff and supervising faculty should do whatever is necessary to implement the decision. This will usually involve assisting or procuring emergency air tickets for the student's return home; transport to help the student do all that is necessary in order to get from place to place; help to pack up their belongings; assistance with program "closure"; etc.
7. Get other students to help out in any ways that they can (e.g. support and friendship, last-minute shopping for gifts, personal packing).
8. Make sure that the grieving student is well cared for and eats and drinks water regularly.
9. Don't forget to tend to the needs of the other program participants.
10. Stay in regular touch with the family and inform them of your progress at least once a day.
11. Make sure to take care of yourself as well. Share responsibility with other available staff or faculty, and ensure you get plenty of rest as the process may take several days.
12. Take the student to the airport, and bring along a close student friend for support. Don't let the student go alone or take a cab on their own. Make sure that you see them off safely and through security.

Recommended EAP for Death of a Participant

This plan should be implemented in the event of the death of a program participant.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. If you are present at the incident, first ensure the safety of other program participants. Follow other Emergency Action Plan guidelines if other participants are seriously injured or wounded. Remember that there is likely to be significant trauma.
3. Call emergency services (dial 111 in NZ, 000 in Australia, or 911 in Fiji) and wait until the authorities arrive. Remain calm.
4. Protect the body and preserve the integrity of the site (in case evidence is required if the location becomes a crime scene).
5. If you are not present, but informed of the incident in person (either by another program participant or another individual who has run to get help) or by phone then:
 - get the details of the incident (e.g. circumstances, location, who was involved, time of death)



from the informant;

- take care to get the name and identity of the person calling and make certain that you accurately record all of the facts surrounding the incident;
 - call emergency services if no call has yet been placed, provide them with any known details;
 - if possible or practical, get to the location (e.g. site of the incident, hospital, morgue) as soon as possible; faculty may be required to identify the body;
 - make certain that other program participants are safe or move them to a more secure location; keep in mind that other program participants may be distraught and confused, perhaps hysterical, and every care should be taken to see that the group remains in a safe and secure environment until the crisis is resolved.
6. Contact the AUIP office and the accrediting institution immediately and inform them of the circumstances.
 7. Do not contact the next of kin yourself. In most instances, it will be the responsibility of the accrediting institution together with a local trained official (e.g. County Sheriff) to deliver the news to the next of kin. It is very important that the family is contacted as soon as possible by someone high up in the institution.
 8. Adhere to the media plan in the Risk Management Handbook and as discussed with the accrediting institution. It may be desirable to post information and updates on the AUIP website (see Appendix F).
 9. Supervising faculty should immediately contact the U.S. Embassy or Consulate and report the incident. Any required procedures should be followed exactly.
 10. After the next of kin has been notified, be prepared to talk to the participant's family member(s) who may be calling once they have been notified of the death.
 11. Preparations for the repatriation of remains should be undertaken in cooperation with the proper local authorities and US Embassy staff.
 12. In the immediate aftermath of the incident a careful record should be made of all events and circumstances leading up to the death, and the events that occurred afterwards. A full report must be filed with AUIP the accrediting institution.
 13. Additional counselling may be necessary for all group members.
 14. It may be desirable to facilitate a family visit if appropriate.
 15. Ensure the family members are removed from all mailing lists immediately.

Recommended EAP for Fire in a Building, Accommodation or Transportation Carrier

This plan should be implemented in the case of a fire in a classroom, building, accommodation or any common carrier (e.g. coach, airplane, train), regardless of cause.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Move the group to a safe and secure location.
3. Make certain that all program participants are accounted for (e.g. do a head count if the group is together; if separated, try and locate the other members).
4. Call emergency services (111 in New Zealand, 000 in Australia, or 911 in Fiji) to report a fire. Give them the exact location and circumstances, if known. Advise them if there are any injured persons.
5. Administer any first aid treatments required until trained medical professionals arrive.



6. Ensure the safety of all program participants until the danger has passed.
7. Contact the AUIP office and the accrediting institution immediately and inform them of the situation.

Recommended EAP for Earthquake, Flood, Tsunami or other Natural Disaster

This plan should be implemented in the case of any natural disaster or catastrophic event that is the result of natural causes. A natural disaster can be defined as, but not limited to, an earthquake, volcanic eruption, lahar, avalanche, flood, tsunami, hurricane, tornado, cyclone, typhoon, severe heat wave, drought, famine, forest fire, landslide, mudslide, impact event or epidemic.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Ensure you and students know what to do in case of an earthquake (see Appendix E for “What to Do During and After an Earthquake”).
3. Call emergency services (dial 111 in New Zealand, 000 in Australia, or 911 in Fiji), if possible, and administer any first aid treatments required until trained medical professionals can attend.
4. Make certain that all program participants are accounted for (e.g. do a head count if the group is together; if separated, try and locate other members if possible). Faculty should keep a list of program participants with them at all times.
5. Move the group away from the event as soon as and wherever possible (e.g. hike to higher ground, move away from damaged buildings). Create a safe, secure and reassuring environment wherever you can.
6. Contact the AUIP office and accrediting institution immediately. If phone lines are congested, use text messaging to communicate.
7. Contact the nearest US Embassy or Consulate General (see your emergency card for contact details). Follow their instructions.
8. Ensure that adequate supplies of food, water and medicine, are available, wherever possible.
9. Establish a communication plan that can be implemented given the circumstances and severity of the situation (i.e. how/when will you make contact with the AUIP office? How will they contact you?).
10. Ensure the safety of all program participants until the danger has passed.

Recommended EAP for Terrorist Attack, Political or Civil Unrest, War

This plan should be implemented in the case of terrorist attack, outbreak of war, or any political or civil disturbance that make the continuance of the program either difficult or impossible. These might be defined as, but not limited to, a terrorist attack, revolution, coup, assassination, serious riot, other political or civil unrest, or war.

Procedures:

1. Follow all emergency protocols issued by the accrediting institution.
2. Make certain that all program participants are accounted for (e.g. do a head count if the group is together; if separated, try and locate other members if possible).
3. Call emergency services (dial 111 in New Zealand, 000 in Australia, or 911 in Fiji) to report an event
4. Administer any first aid treatments, if needed, until trained medical professionals can attend.
5. Move the group away from the event as soon as and wherever possible; implement evacuation



6. procedures, and devise an evacuation route that will assure the safety of all program participants (e.g. decide whether to travel in small groups or as a large group on a bus heading out of the city or to the airport);
7. Contact the AUIP office and accrediting institution immediately.
8. Contact the nearest US Embassy or Consulate General (see your emergency card for contact details). Follow their instructions.
9. Ensure that adequate supplies of food, water and medicine, are available.
10. Establish a communication plan that can be easily implemented (i.e. how/when will you make contact with the AUIP office? How will they contact you?)
11. If necessary, choose departure points or evacuation grounds that have a high level of security.
12. Maintain the anonymity of all program participants at all times until the danger has passed.
13. Ensure the safety of all program participants until the danger has passed.



Recommended Risk Management Plans for Outdoor Program Activities

The following charts are individual risk management plans that AUIP recommends supervising faculty follow for each outdoor activity in a program that requires additional risk management strategies above and beyond those listed in the general risk management strategies and protocols above. We recommend supervising faculty consult both the general risk management plans and the specific risk management plans for individual activities before undertaking an activity or event with students.



SHORE-BASED REEF WALK MANIFEST

Date: _____ Reef Walk location: _____

Staff: _____

Departure Time: _____ Return Time to LEI : _____

Shore Contact: _____

Guides : 1. _____ 2. _____

Student Details

Student Details

Student Name	Buddy #	Snorkeller Name	Buddy #
1		19	
2		20	
3		21	
4		22	
5		23	
6		24	
7		25	
8		26	
9		27	
10		28	
11		29	
12		30	
13		31	
14		32	
15		33	
16		34	
17		35	
18		36	

Starting Head Count OF: _____ Final Head Count OF: _____

Incidents or Accident Details: _____

Supervisor Signature: _____



This induction must be given by the field guide before any snorkel trips, both boat and shore-based.

1. MEDICAL CONDITION WARNING

If you have any of the following Medical Conditions, snorkelling may increase the health and safety risks to you.

A. Any medical condition that may be made worse by physical exertion.

For Example: Heart Disease , Asthma , Lung Complaints

B. Any medical condition that may can result in unconsciousness

For Example: Some forms of epilepsy or diabetic conditions

C. Asthma attacks can be brought on by cold water or salt water mist

Any person with any of the above Medical Conditions should:

1. Use a flotation device (snorkel vest)
2. Snorkel in an area with close supervision
3. Not go snorkelling if the sea conditions are rough or there are strong currents.

Snorkel Vests should be worn if you have any of the above medical conditions or if are not a strong swimmer. They are available & free of charge.

2. SNORKELING TECHNIQUES

a) Finning - straight leg, point toes, not a bicycling motion, look forward to drop legs

Minimal splashing so animals are not scared away

b) Mask - De-fogging, LEAK prevention, check for correct fit, strap position, how to adjust for comfort and fit

c) Head position / angles while snorkelling

d) Snorkel clearing - Blast, drain or displacement

e) Equalization methods

3. HAZARD IDENTIFICATION & RISK ASSESSMENT

Always perform a risk assessment. Ask university staff to assist you. Check tide & wind direction and strength.

Environmental Hazards

Marine life, Currents, Surge, Sea State, Surge, Visibility, Overhead Environments, Coral cuts, Sunburn

Boat Hazards

Boat traffic, Boat propeller cuts, Bow pitching (head injuries)

Do not swim under the boat

Activity Related Hazards

Ear equalisation, Health & Fitness level, Task related problems, Skill level

Shallow water blackout

No Hyperventilating

4. SNORKEL PLAN

Direction to head (into the current), areas to avoid, areas of interest

Drift or Stationary

Maximum distance from the boat is 30 metres or for shore-based snorkelling is 5m from your Snorkel Guide.

5. BUDDY PAIRS

Everybody has a buddy?

Let your group leader know if your buddy is returning to the boat or shore early.

6. GROUP PROXIMITY

Stay close together

7. HAND SIGNALS

Ok, Pick up & Distress

8. RECALL SYSTEM

Air horn or whistle (1 blast = look for directions, 3 long blasts = recall)

9. NO STANDING ON CORAL

If tired or cold return to the boat or if shore-based snorkelling, stand only on sand or coral rubble.

10. DON'T HARASS THE WILDLIFE

11. HEAD COUNT ARRANGEMENTS

Inform a shore-based colleague of your plans and also please use Snorkelling Manifest forms provided.

12. ENTRY / EXIT LOCATION

13. RESEARCH OR EDUCATIONAL TASKS OUTLINED

Medical Declaration for Snorkellers



I, _____ as the **Snorkel Supervisor** for the _____ group, **declare that the all snorkelers in my group have been advised of the:**

- Safety aspects associated with the medical conditions that can be affected by snorkelling;
- Mandatory snorkel induction prior to each snorkelling activity; and
- The risks associated with snorkelling around the Great Barrier Reef.

I have evaluated the competency of the snorkelers and will advise university staff and LEI Dive Staff of any snorkelers who may not be capable of safely snorkelling in the prevailing environmental conditions. I also understand and agree to follow the WPH&S snorkelling procedures.

Snorkel Supervisor's Signature: _____

DATE: _____

I, the undersigned, declare that I have been informed about the dangers of Shallow Water Blackout, and how to perform equalisation techniques. I have also been advised that snorkelling can be a strenuous physical activity and may increase the health and safety risks to me if I am suffering from:

- A. Any medical condition that may be made worse by physical exertion.
*For Example: Heart Disease, Asthma, Lung Complaints***
- B. Any medical condition that may result in unconsciousness
*For Example: Some forms of epilepsy & diabetic conditions***
- C. Asthma attacks can be brought on by cold water or salt water mist.**

Any person with any of the above medical conditions should:

- 1. Use a flotation device (Snorkelling Vest). 2. Snorkel in an area with close supervision.**
- 3. Not go snorkelling if the sea conditions are rough or there are strong currents.**

I have also been advised to inform the Snorkel Supervisor, Lookout &/or Guide and the person in charge of the trip to Great Barrier Reef if I have any of the above medical conditions.

NO:	NAME	SIGNATURE	NO:	NAME	SIGNATURE
1			21		
2			22		
3			23		
4			24		
5			25		
6			26		
7			27		
8			28		
9			29		
10			30		
11			31		
12			32		
13			33		
14			34		
15			35		
16			36		
17			37		
18			38		
19			39		
20			40		



SNORKEL DIVER REGISTRATION FORM

Before any person can snorkel, they must complete a copy of this form.

Surname: _____ First Name(s): _____

Address (in Queensland): _____

Date of Birth: _____ University: _____

Ph (cell): _____ E-mail: _____

Date started snorkelling: _____ Are you certified in SCUBA: YES / NO

Date of last diving medical (if applicable): _____
(attach copy of medical if done within last 2 years)

Details of snorkelling experience: _____

Approximate hours snorkelling: _____

Date of most recent snorkel experience: _____

Principal Snorkelling Locations: _____

Over the last 12 months have you had the following:

- | | |
|---|-------|
| 1 Any cardiovascular disease? | Y / N |
| 2 Any lung disease? (asthma, TB wheezing, pneumothorax, others) | Y / N |
| 3 Any epilepsy, convulsions fits or blackouts? | Y / N |
| 4 Any serious disease (such as diabetes)? | Y / N |
| 5 Serious ear, sinus or eye disease? | Y / N |
| 6 Any neurological or psychiatric disease? | Y / N |
| 7 Operations, illnesses or treatment? | Y / N |
| 8 Drugs or medication? | Y / N |
| 9 If female, are you pregnant? | Y / N |

Can you:

- | | |
|---|-------|
| 10 Swim 500m without fins | Y / N |
| 11 Swim 200m in 5 minutes or less without fins? | Y / N |
| 12 Equalise your ears when diving or flying? | Y / N |

Signed: _____

Date: _____



Appendix A: Sources for Further Information

- Anderson, M., and Price, D. 1991. Hypothermia Manual, Manual 24. Wellington: New Zealand Mountain Safety Council.
- Bell, S. 1999. Safety in the Outdoors: Learning Through Experience. Wellington: Auckland Regional Council and New Zealand Mountain Safety Council.
- Brockington, J; Hoffa, W and Martin, P. 2005. NAFSA's Guide to Education Abroad For Advisors and Administrators, Third Edition. Washington: NAFSA: Association of International Educators.
- Caffyn, P. 1998. The Kiwi Association of Sea Kayakers Handbook, Second Edition. Christchurch: Kiwi Association of Sea Kayaker, New Zealand Inc.
- Clapcott, R., Wrighton, N and Brunt, A. 2001. Riversafe: A Resource About River Safety for Year 9 and 10 Students. Wellington: Water Safety New Zealand
- Cline, P. Date unknown. Creating a Risk Management Plan. Boulder: The Outdoor Network.
- Curtis, R. 2002. The Risk Assessment and Safety Management System. Paper presented at the Risk 2002
- Conference at the Sir Edmond Hillary Outdoor Centre in New Zealand. Princeton: Outdoor Ed, LLC. Education Outdoors New Zealand. 1995. Quality Management and Safety Systems for Education Outside the Classroom (EOTC): Outdoor Education and Outdoor Recreation. Wellington: Education Outdoors New Zealand.
- Goldring, R., and Mullins, W. 1995. Bushcraft: Outdoor Skills for the New Zealand Bush, Third Edition, Manual 31. Wellington: New Zealand Mountain Safety Council.
- Griffin, C. 2002. New Zealand Outdoor First Aid, Second Edition, Manual 33. Wellington: New Zealand Mountain Safety Council.
- Haddock, C. 1993. Managing Risks in Outdoor Activities, Manual 27. Wellington: New Zealand Mountain Safety Council.
- Haddock, C. 1993. Outdoor Safety: Risk Management for Outdoor Leaders. Wellington: New Zealand Mountain Safety Council.
- Haddock, C and Sword, M. 2004. From Liability to Student Safety in Education Outside the Classroom. Paper presented at the Australia and New Zealand Education Law Association Conference, 22-24 September, Wellington.
- Hunt, J. 1984. The Danger of Substituting Rules for Instructor Judgment in Experiential Education. Journal of Experiential Education. Boulder, CO.
- Kaplan, W, and Lindernan, B. and Lee, A. 1997. A Legal Guide for Student Affairs Professionals. San Francisco, CA: Jossey-Bass.
- Lindeman, B, Mello, N, Brockington, J, Johnson, M and McCabe, L. 2005. Maximizing Safety and Security and Minimizing Risk in Education Abroad Programs. In NAFSA's Guide to Education Abroad For Advisors and Administrators, Third Edition. Washington: NAFSA: Association of International Educators.
- Ministry of Education. Date unknown. Safety and EOTC: Education Outside the Classroom. Wellington: Ministry of Education.
- Moran, K. 1996. Surf Survival. Auckland: Tradewinds Publishing Ltd. Occupational Safety and Health Service. 2004. How To Manage Hazards, For Small Business. Wellington: Department of Labour.
- Outdoor Safety Institute. 2004. A Synopsis of Relevant Legislation and Industry Practice that Impacts on the Provision of Risk and Recreation and Adventurous Activities. Wellington: Outdoor Safety Institute.
- Priest, S. 2000. Effective Outdoor Leadership. In Lessons Learned: A Guide to Accident Prevention and Crisis Response. Edited by Deb Ajango. Boulder, CO: Association for Experiential Education.



- Priest, S, and Gass, M. 1997. Effective Leadership in Adventure Programming. University of New Hampshire: Human Kinetics.
- Ritchie, M. 2003. Risk Management in Study Abroad: Lessons from the Wilderness. Frontiers Journal, Vol. IX. Carlisle, PA: Dickinson College.
- Scanlan, P. 1998. The Safe and Healthy Camp Book, Book No. 166. Christchurch: User Friendly Resource Enterprises Ltd.
- van der Smissen, B. 1990. Legal Liability and Risk Management for Public and Private Entities. Cincinnati: Anderson Publishing Co.
- van der Smissen, B. 1997. Creating a Proper Risk Management Plan. Boulder, CO: The Outdoor Network. Wade, I. 1999. Emergency Action Plans: How To Respond To a Critical Incident in Your Outdoor Adventure Program. Boulder, CO: The Outdoor Network Newsletter.
- Watts, J. 1996. Outdoor Pursuits: Guidelines for Educators. Wellington: Education Outdoors New Zealand.



Appendix B: Related Organizations for Further Information

Center for Global Education
LMU Extension, University Hall
1 LMU Drive, Suite 1840
Loyola Marymount University
Los Angeles, CA 90045-2659
Phone: 310-338-7451; fax: 310-338-2706
web: <www.globaled.us/index.html>

Department of Conservation
PO Box 10420
Wellington, New Zealand
phone: +64-(0)4-471-0726;
fax: +64-(0)4-471-1082
web: <www.doc.govt.nz>

Education Outdoors New Zealand Inc. (EONZ)
phone: +64-(0)7-826-7633
email: eonz.eo@xtra.co.nz
web: <www.eonz.org>

Federated Mountain Clubs of New Zealand web: <www.fmc.org.nz>
Ministry of Education
Wellington, New Zealand
phone: +64-(0)4-463-8970;
fax +64-(0)4-463-8252
web: <www.tki.org.nz>

NAFSA: Association of International Educators
1307 New York Ave, NW, 8th Floor Washington, DC 20005-4701
phone: 202-737-3699; fax: 202-737-3657
web: <www.nafsa.org>

New Zealand Land Search and Rescue
web: <www.nzlsar.org.nz>

New Zealand Met Service (weather forecasts)
Wellington, New Zealand
web: <www.metservice.co.nz>

New Zealand Mountain Safety Council (NZMSC)
Wellington
phone: +64-(0)4-385-7162;
fax: +64-(0)4-385-7366
email: info@mountainsafety.org.nz
web: <www.mountainsafety.org.nz>

New Zealand Outdoor Instructors Association
phone: +64-(0)4-3856048;
fax: +64-(0)4-385-9680
email: ao@nzoi.org.nz
web: <www.nzoi.org.nz>

New Zealand Search and Rescue Council
web: <www.beacons.org.nz>

Occupational Safety and Health Service (OSH)
Department of Labour, Wellington, New Zealand
web: <www.osh.govt.nz>



Outdoor Ed LLC
27F Chicopee Drive Princeton, NJ 08540
phone: 609-683-9067
web: <www.outdoored.com>

Outdoors New Zealand
email: info@outdoorsnz.org.nz
web: <www.outdoorsnz.org.nz> and <www.safeoutside.org>

Outdoor Safety Institute
Wellington
phone: +64-(0)4-385-1146;
fax: +64-(0)4-385-9680
email: osi@risk.net.nz
web: <www.risk.net.nz>

Safe As Outside
New Zealand
web: <www.safeoutside.org/>

Water Safety New Zealand (WSNZ)
phone: +64-(0)4-801-9600;
fax: +64-(0)4-801-9599
email: wsnz@watersafety.org.nz
web: <www.watersafety.org.nz>, <www.riversafe.org.nz>, <www.poolsafe.org.nz>



Appendix C: Incident Report Form

This form is to be used to document all incidents (including near misses, non-evacuated and evacuated injuries), illnesses/ailments, and disciplinary actions that occur during a study abroad program. For minor events complete section I only. For major events/emergencies, complete sections I and II. Please photocopy and complete this form as close to the time of the incident as possible and submit to AUIP and the respective institution (note that student names will be kept confidential). For any of the questions, use additional pages/space where necessary.

Section I (Complete this section for all events)

1. Program and date

2. Participant's name

3. Participant's institution

4. Date, time, and location of incident

5. Detailed description of the incident (use additional paper if necessary)

6. Pertinent medical history, including allergies and medications (if any)

7. The nature of action taken. For medical treatment and/or counseling (e.g., first aid, nurse, doctor, hospital, etc) including name, address, and phone of attending physician(s) and medical facilities (if applicable). For disciplinary actions, describe entire event (use additional paper).

8. What can be done to ensure this does not happen again (if anything)

9. Name of person completing report



Section II (Complete this section for all events)

(Complete in the event of an emergency or major event; use additional paper where necessary)

1. Participant's insurance provider name, phone, and policy ID (if different from institution's insurance)

2. Risk to other participants (if any)

3. Name and contact information of any other parties/persons involved (if any)

4. Information on situation from any other participants in your group (if any)

5. Recommendations of the U.S. Embassy or Consulate (if any)

6. Recommendations of local law enforcement and other agencies (if any)

7. Participant interest in returning to the U.S.A

8. Academic and financial consequences of participant returning home

9. Police case numbers, officers involved, charges made against a participant, contact information for police (if any)

10. Describe any significant lessons learned from this incident



Appendix D: AUIP Background and Risk Management Overview

Background

American Universities International Programs Limited (AUIP) was incorporated in New Zealand in 2006 to provide services for U.S. faculty-led, short-term study abroad programs in the South Pacific and Polar regions. Since then, we have worked with over 5,000 students from more than 30 universities throughout the United States.

Each year, we run 25 – 35 study abroad programs for a total of about 1,000 students in New Zealand, Australia, Fiji, and Antarctica/Argentina. AUIP currently has four full-time employees in New Zealand, as well as contractors in the various regions in which we run programs.

Risk Management Procedures AUIP

AUIP is always looking for opportunities to provide better health, safety, and security support for the institutions that run these programs. Some examples of the procedures and systems that AUIP has developed include:

- Maintaining an incident database with records of all serious incidents that occurred on programs and were reported to us. We use this information to improve the health, safety and security support we offer institutions
- Conducting written and oral evaluations of programs with both faculty and students to identify opportunities for improving our support systems
- Providing faculty from the accrediting U.S. institution leading programs with a Risk Management Handbook, which includes risk minimisation strategies and recommended Emergency Action Plans
- Vetting and auditing accommodation and transportation providers
- Establishing policies and standards of acceptable behaviour for coach drivers and guides
- Providing communications in the form of local cell phones for all groups and a 24/7 emergency phone number
- Providing all participants with a wallet-sized emergency card that has local medical resources, emergency numbers, 24/7 emergency contacts and accommodation contacts
- Providing an in-country hazards/cultural orientation to U.S. faculty and students
- Registering students with the U.S. State Department Smart Traveller Enrollment Program (STEP)
- Providing materials for student and faculty pre-departure orientations (packing lists, vaccinations, chemoprophylaxis, etc.)
- Providing description and contact information for medical resources based on the program itinerary
- Providing first aid kits as required
- Providing a supplementary optional student behaviour management strategy (guidelines and policies)
- Providing guidelines for how specific activities should be conducted in the form of Recommended Risk Management Plans (RMPs)
- Support for health, safety and security incidents including emergencies and crises through our 24/7 phone number and on-the-ground assistance as required is always looking for opportunities to provide better health, safety and security support for the institutions that run these programs offer institutions

In addition, AUIP has had two external audits of their risk management materials and procedures in 2007 and again in 2012. These audits were performed by Bill Frederick, Founder of Lodestone Safety International, who is one of the leading experts in health, safety and security on study abroad programs.



Appendix E: What to do during and after an earthquake

When the shaking begins

- Drop, take cover, and hold on.
- Move no more than a few steps to a safe place.
- Stay indoors until the shaking stops and you're sure it's safe to go outside.
- Stay away from windows, chimneys, and shelves containing heavy objects.
- In bed - hold on and stay there, and protect your head and body with a pillow and blankets.
- Outdoors - find a clear spot away from buildings trees and power lines. Drop to the ground.
- In a car - slow down and drive to a clear place (as above). Stay in the car until the shaking stops.
- In a lift - stop it at the nearest floor and get out.
- If driving, pull over to the side of the road. Stay in the vehicle until the shaking stops.
- If near the coast, drop, cover and hold during an earthquake, and then move immediately to higher ground when the shaking stops.

When the shaking stops

- Check those around you and offer help if necessary.
- Put out small fires and eliminate fire hazards. Evacuate the building if you are unable to control the fire. Turn off the gas if you think it's leaking.
- Listen to the radio for instructions from Civil Defence. Some people may need to be evacuated.
- After a big earthquake, expect aftershocks - they can go on for weeks or even months. Each time you feel one, drop, take cover, and hold on.
- Check your home or workplace for damage. Get everyone out if the building is unsafe.
- Don't go sightseeing - you'll add to the congestion and hamper relief efforts.
- Don't touch downed power lines - treat all power lines as alive.

If a tsunami threatens

- Be prepared to evacuate. Listen to your radio for instructions.
- Leave the area immediately if a strong earthquake strikes and you are close to a beach or near a river.
- Go at least 1 kilometer inland or 35 meters above sea level.
- Take your disaster survival kit and any important documents with you.
- Tsunamis sometimes 'draw up' water before they come inland. If you see the water suddenly retreat (after an earthquake), it is probably a tsunami. Leave the area immediately.
- DO NOT go to a beach or river to watch the waves come in. By the time you see the tsunami, it will probably be too late to get to safety.



Appendix F: Posting Emergency Information on the AUIP Website

In the event of a major incident affecting one of our groups, we will need to make up-to-date news available to parents, administrators, and anyone else who is connected to our programs. Examples are things like an earthquake in NZ or flooding in Fiji. Given that many people will go to our website seeking updates and status reports, we have a section for just this purpose. In its natural state, this section of the homepage will just show white background. But when we need to get news out, it will be transformed as described below.

There's no need to do this for small-scale situations that have only a local effect, e.g. a landslide that has washed away a bridge, requiring a lengthy detour by a group.

The information will show up as the first slide in the banner across the top of the homepage.

The information we may insert on the homepage is intended for parents, friends, and university staff since it is resumed we'll be in direct contact with the people on the affected programs. Note that it is important that we only post accurate, factual information here. **There is no room for hyperbole nor speculation.**

How to do it:

1. log in to our Wordpress site at: http://auiip.com/wp-login.php?redirect_to=http%3A%2F%2F192.185.143.172%2F~auiip%2Fwpadmin%2F&reauth=1
 - username = admin
 - password = auiP414141
2. from the menu along the lefthand side of the page, mouse over "Pages" and then select "Emergency Text"
3. right click and copy all of the text within the content window of the Emergency Text page.
4. mouse over "AUIP study abroad programs" (top left corner, on the black frame) and then click "visit site"
5. click "edit page" (it's along the black frame at the top of the page)
6. click "add slide" (down below the bottom of existing slides)
7. in the blank box of the new slide, right click to paste in the content you copied from the Emergency Text page
8. You now need to write what you want to appear on the web page. There are 2 sections to this: the heading (which will be in large font) and the body of your message (smaller font). To insert your heading (e.g. Fiji Floods, or Plague of Koalas), find the XXXX* in the top line of text. Delete the XXXX and insert your words in its place, making sure you stay between the ">" and the "<". The body of your message goes in place of the second XXXX* that you'll see in the emergency text.
 - * the XXXX might have already been replaced by a previous emergency notice, so the text you are looking to replace is anything that is between the ">" and the "<" symbols.

It is presumed that this slide will have the most important or most recent information and that older info or more detailed info will be placed on a page that is linked to this slide. (see item 14, below). Therefore, do not alter or delete any of the other text or symbols that you copied from the Emergency Text page

Now you need to add a white background to this new slide. To do so

9. click "add image" , then "media library"
10. choose the all-white image (it has a red exclamation point in it but that may not show as a thumbnail) and hit "select"
11. Now you need to move your new slide so that is on top of the list (and therefore the first one visible when someone opens our home page). To do this, mouse over the number of the slide on the left hand side until the "four arrows" symbol appears. Then click and drag this slide up to the top of the



list, above the Australian sunset slide. It should now be number 1 on the lefthand side.

12. click “update”
13. to see if you’ve done it correctly, click “view page” (on the black frame at the top)
14. Almost done - If there is a lot of information, or older information that you want to keep accessible to the curious visitor, it gets posted on a separate page that is linked to your emergency slide. (If you don’t have any additional information to post, you’ll want to delete the link to this page when you are changing text (item 8 above). We don’t want to leave the link in if there’s nothing on that page.)
15. to add text to the “For more information page”, mouse over “AUIP study abroad programs” at the top left, then click “dashboard”.
16. mouse over “pages” on the lefthand list of options, then scroll way down to find “Emergency info” (it’s a Draft). Click on this page.
17. add the content you want into the body of the page and then click “update”.
18. you can check that it’s okay by clicking on “view page” (from the black frame at the top)
19. when you are satisfied, logout by mousing over the “Howdy, admin” button at the top right corner, and clicking “logout”.



Appendix G: Emergency Contact Details

New Zealand

POLICE

- Dial 111 for emergencies.
- To find contact details for the closest New Zealand police station, visit www.police.govt.nz/district

MEDICAL

- Dial 111 for emergencies.
- Call Healthline on 0800 611 116 (available 24/7) for advice on closest doctor or pharmacy or for urgent advice on unwell student

SEXUAL ASSULT

- Dial 111 for emergencies.
- To find contact details for the closest sexual assault support centre, visit www.rpe.co.nz/find-a-sexual-assault-support-centre-near-you/

SUICIDE AND MENTAL HEALTH

- Dial 111 for emergencies.
- If a suicidal student wants to speak with someone, ring Lifeline (0800 543 354) or Suicide Prevention Helpline (0508 828 865).
- To find contact details for your local DHB Mental Health Crisis Team, ring Healthline on 0800 611 116 or visit <http://www.mentalhealth.org.nz/home/in-crisis-2/>

Fiji

POLICE

- Dial 917 for police emergencies.
- You can also contact a local police station for further help:
 - Nadi: Namaka Station, 670 0222
 - Pacific Harbour: Queens Rd, 345 0156
 - Korolevu: Queens Rd, Warwick, 653 0122 Lautoka: Yawini St, 666 0222
 - Suva: Vinod Patel Building Centrepont, 334 3777
- To find contact details for other police stations, visit: http://www.police.gov.fj/images/Loation/location_map.jpg

MEDICAL

- Dial 911 for fire and ambulance emergencies.
- There is only one recompression chamber at the Suva Colonial War Memorial Hospital. Note that it is not always operating. Ring +679 903 4093 or +679 992 4056.
- The two main public hospitals in Fiji are the Colonial War Memorial Hospital in Suva (ph 313 3444) and the Lautoka Hospital (ph 666 0399). The Nadi Hospital (ph 670 1128) is smaller and more serious cases may be referred to Lautoka. Note that all hospitals in Fiji offer much more basic services than would be expected in Western hospitals.
- 4) For less serious injuries and illnesses, please visit a medical centre such as: Zens Medical Centre: 40 Lodia St, Nadi, 670 3533 (24hr) Bayly Clinic: 5 Nede Street, Lautoka, 666 4599 or 996 3425 Nasese Medical Centre: 62 Ratu Sukuna Road, Nasese, Suva, 331 4450 or after hours 331 2682



SEXUAL ASSULT

- Dial 911 for ambulance emergencies. Dial 917 for police emergencies.
- In Fiji, gender-sensitised health services for rape victims are available only at the Colonial War Memorial Hospital in Suva (phone 679-331-3444). As Fiji's largest and best equipped hospital, its gynaecological ward makes provision for victims of sexual assault to be treated in privacy by physicians who are sensitive to their trauma.
- Another avenue of psychological counselling and emotional support is provided by Fiji Women's Crisis Centre (FWCC). The FWCC provides a 24-hr counselling service over the phone. At any time a trained counsellor will be available to talk with you, and emergency assistance can also be provided (phone: 3313 300).

SUICIDE AND MENTAL HEALTH

- Dial 911 for ambulance emergencies.
- LifeLine provides phone and face-to-face counselling particularly for people with suicidal thoughts from their bases in Ba and Suva. Phone 679 670 565 / 679 674 364 (Ba) or 679 302 998 (Suva).
- Counselling and psychiatric services are very limited in Fiji, so in serious situations it may be best to send students back to the U.S. where they can receive appropriate care. St. Giles Hospital in Suva is the only psychiatric hospital in Fiji that provides medical and or rehabilitation services for patients suffering from mental illness. It is being renovated and improved in 2013 with new wards and services.

Australia: Queensland

POLICE

- If it is an emergency and the crime is happening now, dial 000
- If it is now an emergency and the crime has already happened, ring Policelink on 131 444 to report the crime or for any queries in the state of Queensland.
- To find contact details for the closest QLD police station, visit www.police.qld.gov.au/station-locator/station_locator.asp
- The Brisbane City Police station is located at 67 Adelaide St (ph 07 3224 4444). Open 24/7.
- The Cairns Police Station is located at 5 Sheridan St (ph 07 4030 7000).
- The Townsville Police Station is located at 134 Stanley St (ph 07 4759 9777). Open 24/7.

MEDICAL

- Dial 000 for emergencies.
- Call 13 Health (13 43 25 84) for advice on who to talk to and how urgent a medical condition could be (available 24/7). This is especially useful for after-hours care when you aren't sure where to go or what to do.

SEXUAL ASSULT

- Dial 000 for emergencies.
- Ring the National Sexual Assault, Domestic and Family Violence Counselling services on 1 800 RESPECT (737 732).
- The Queensland State Wide Sexual Assault Helpline (1 800 010 120) is a free confidential service open 7.30am to midnight, 7 days a week.
- For assistance in South Queensland, the Royal Brisbane & Women's Hospital, Butterfield Street, Herston. Brisbane Northside offers acute response and short to mid-term counselling and referral. No fees are charged. Access by direct presentation to Emergency Services for recent



assaults within 72 hour period. Phone: Crisis service (07) 3636 5206 (24 hours 7 days).

- For local counselling services in North Queensland, contact Cairns Sexual Assault Support Service (ph 07 4031 3590, 24/7) or Townsville Thuringowa Sexual Assault Support Service (ph 07 4775 7555, 24/7).

SUICIDE AND MENTAL HEALTH

- Dial 000 for emergencies.
- Lifeline (ph 13 11 14) offers crisis counselling, referral and support.
- The Suicide Callback Service (ph 1300 659 467) offers ongoing (6 sessions) crisis telephone counselling for people who are thinking of or are affected by suicide.
- Contact details for local mental health services can be found here: <http://www.qld.gov.au/health/mental-health/help-lines/services/index.html>

Australia: Sydney

POLICE

- Dial 000 for emergencies.
- To find contact details for the closest Sydney police station, visit www.police.nsw.gov.au/about_us/structure/operations_command/local_area_commands
- City Central stations are located at 192 Day St (ph 02 9265 6499) and 570 George St (ph 02 9265 6595). Both are open 24/7.

MEDICAL

- Dial 000 for emergencies.
- Call Health Direct on 1 800 022 222 (available 24/7) to speak with a registered nurse for non-emergency medical advice. At night and on weekends the nurse will help you to work out if you should speak to a general practitioner (GP). If so, the nurse will put you through to the after hours GP helpline

SEXUAL ASSULT

- Dial 000 for emergencies.
- Ring the National Sexual Assault, Domestic and Family Violence Counselling services on 1 800 RESPECT (737 732).
- Ring the NSW Rape Crisis Centre on 1 800 424 017 for local crisis services. Online support is also available at www.nswrapecrisis.com.au

SUICIDE AND MENTAL HEALTH

- Dial 000 for emergencies.
- Lifeline (ph 13 11 14) offers crisis counselling, referral and support.
- The Suicide Callback Service (ph 1300 659 467) offers ongoing (6 sessions) crisis telephone counselling for people who are thinking of or are affected by suicide. This line also offers support for those worried about someone who may be suicidal, including other crisis numbers and advice on handling emergency situations.
- The Mental Health Line for NSW is 1 800 011 511.

Australia: Melbourne

POLICE

- Dial 000 for emergencies.



- To find contact details for the closest Melbourne police station, visit www.police.vic.gov.au/content.asp?Document_ID=7
- The main Victoria Police Centre is located in the World Trade Centre, Docklands, 637 Flinders St (ph (03 9247 6666). Open 7:00am – 7:00pm.

MEDICAL

- Dial 000 for emergencies.
- Call Nurse-on-Call on 1300 60 60 24 (available 24/7) to speak with a registered nurse for non-emergency medical advice. At night and on weekends the nurse will help you to work out if you should speak to a general practitioner (GP). If so, the nurse will put you through to the after hours GP helpline

SEXUAL ASSULT

- Dial 000 for emergencies.
- Ring the National Sexual Assault, Domestic and Family Violence Counselling services on 1 800 RESPECT (737 732).
- Ring CASA House (1 800 806 292) for local 24/7 crisis services for recent victims of sexual assault. Further information is available at www.thewomens.org.au/CASAHouse.

SUICIDE AND MENTAL HEALTH

- Dial 000 for emergencies.
- Lifeline (ph 13 11 14) offers crisis counselling, referral and support.
- The Suicide Callback Service (ph 1300 659 467) offers ongoing (6 sessions) crisis telephone counselling for people who are thinking of or are affected by suicide.
- Visit www.health.vic.gov.au/mentalhealth/services/approved.htm for Approved Mental Health Services in Victoria.

Australia: Adelaide

POLICE

- If it is an emergency and the crime is happening now, dial 000.
- If it is now an emergency and the crime has already happened, ring Policelink on 131 444 to report the crime or for any queries in the state of South Australia.
- To find contact details for the closest South Australia police station, visit <https://www.police.sa.gov.au/contact-us/find-your-local-police-station>
- The main Adelaide police station is located at 60 Wakefield St (ph 08 8172 5000). Open 24/7.

MEDICAL

- Dial 000 for emergencies.
- Call Health Direct on 1 800 022 222 (available 24/7) to speak with a registered nurse for non-emergency medical advice. At night and on weekends the nurse will help you to work out if you should speak to a general practitioner (GP). If so, the nurse will put you through to the after hours GP helpline.

SEXUAL ASSULT

- Dial 000 for emergencies.
- Ring the National Sexual Assault, Domestic and Family Violence Counselling services on 1 800 RESPECT (737 732).
- Ring local agency Yarrow Place (1800-817-421 or after hours 08 8226 8787) for local counseling



services.

- More information is available at www.yarrowplace.sa.gov.au/rape.htm

SUICIDE AND MENTAL HEALTH

- Dial 000 for emergencies.
- Lifeline (ph 13 11 14) offers crisis counselling, referral and support.
- The Suicide Callback Service (ph 1300 659 467) offers ongoing (6 sessions) crisis telephone counselling for people who are thinking of or are affected by suicide.
- For assistance in a mental health emergency, contact the South Australia mental health triage service - telephone 13 14 65 available 24/7. For more information visit:
- <http://www.sahealth.sa.gov.au/wps/wcm/connect/Public+Content/SA+Health+Internet/Health+services/Mental+health+services/>

Argentina: Ushuaia

POLICE

- Dial 101 for emergencies. Otherwise, dial 103 for Civil Defence (this agency communicates with Police and Medical Services immediately)
- Ushuaia's central Police station/Comisaria contact details are:
Policia de Tierra del Fuego – Jefatura
Corner of Gobernador Deloqui and Lasserre St, Ushuaia
Ph: (+ 54-2901) 421 416 or (+ 54-2901) 421 773
- For other Police Stations in Ushuaia, visit <http://www.justierradelfuego.gov.ar/informciudadano/Comisarias.html>

MEDICAL

- Dial 101 for Police or 107 for medical emergencies (this is the hotline for Ushuaia's Hospital)
- Otherwise, call (+ 54-2901) 421 721, (+ 54-2901) 421 930 or (+ 54-2901) 421 900 for S.U.M.U. (Servicio de Urgencias Medicas Ushuaia/ Ushuaia's medical emergencies service)
- Hospital of Ushuaia contact details: corner of 12 de Octubre and Fitz Roy St, Ushuaia, Phone: (+ 54 2901)441 000 or (+ 54 2901) 423 200
- For a list of pharmacies and opening hours, visit <http://defensacivilushuaia.org.ar/farmacia.html>

SEXUAL ASSULT

- Dial 101 for emergencies.
- The sexual assault support centre is:
Direccion Provincial de Derechos y Asistencia a la victima (Secretaria de Derechos Humanos)
address: Suburb Barrio 60 Viviendas, Aisle 6, House #39
Ph: (+54 2901) 432 400

SUICIDE AND MENTAL HEALTH

- Dial 101 for emergencies.
- The local DHB Mental Health Crisis Team is: Mental Health Unit at Ushuaia's Hospital, Ph: (+54 2901) 441098 or (+54 2901) 441 045.



Appendix H: AUIP guidelines on leaving students on their own

Post-incident supervision

AUIP strongly recommends that students remain with the group for the duration of the program. However, should medical or other important needs require a student to be separated from the group, it is recommended that a university staff member remain with that student. Further, we suggest that students not be given the choice to remain alone, even if they think they'll be okay. Faculty should be aware that students are unlikely to have a full and accurate understanding of the infrastructure and support amenities that are locally available, and may underestimate their situation, seeing it through an "American lens".

Faculty leader decision matrix

When things go wrong on a study abroad program, faculty leaders need to make "on the fly" decisions that best look after the welfare of the students involved, and the rest of their group. Because each incident is different, how you deal with it has many variables. You may find the following questions helpful in guiding your decision making to get the best result for your students.

1. Is the participant in a safe place with someone she/he trusts (and of the same gender)?
2. What else do we need in order to develop a thorough incident management plan?
3. Is the participant able to make an informed choice about the options available?
4. Is there any perceived serious or imminent threat to the participant's well-being?
5. What is the participant's emotional state (e.g., distressed, scared, traumatized, unconcerned, or uncertain)?
6. Does the participant appear appropriately circumspect and culturally adaptive?
7. Will the participant have any travel, medical care, or meeting with law enforcement (in these cases accompaniment is always necessary)?
8. Can a competent local authority (e.g., doctor, police, village elder, local guide) make a recommendation?
9. Given that program goals are secondary to participant well-being, is your plan sensible?
10. Does it pass the "New York Times test" (i.e., will our actions in hindsight and through another lens appear reasonable if something goes wrong)?
11. Are there competing viewpoints among in-country staff?
12. Does the country's infrastructure allow you to maintain 24-hour communication and support (e.g., medical resources, cell phone coverage, etc.)?
13. Does your plan leave the participant closer to resources or further isolated?
14. What will be said to other participants, family, university study abroad office, etc.?
15. Is it possible to consult with the participant's family or your institution's study abroad office?
16. Can a decision be postponed until the situation comes into better focus?