

UNIVERSITY RISK MANAGEMENT

Camp Risk Assessment and Emergency Planning Checklist

This checklist is a tool for University departments sponsoring, conducting or coordinating camps to identify and assess risk and prepare to respond to an emergency. Refer to the University Risk Management Camp Activities Guidelines for definitions and an expanded explanation of risk minimization principles. The type of activity, location, age and number of participants, modes of transportation, *etc.*, will determine the extent of planning needed. Please respond to the various points with appropriate information and documentation. Forward a copy to your approving authority and campus Office of University Risk Management (URM) for review.

DEPARTME	NT				
CAMPUS			O SPRINGS DENVER ANSCHUTZ MEDIC		
CAMP NAN	ЛЕ				
DAY & DAT	ES STARTING	<u></u>	Endin	IG	☐ OFF CAMPUS
	□ Part Day	LJ FULL DAY	☐ OVERNIGHT	□ On Campus	LI OFF CAMPUS
COORDINA					
	NAME	TELEPHONE	E-MAIL		
PRIMARY L	OCATIONS				
TYPE OF CA	AMP (ATHLETIC OR	ACADEMIC)			
ACTIVITIES					
TARGET AL	JDIENCE				
	PARTICIPANT AGE/C	SRAD			
ESTIMATED NUN	1BER		STAFF RATIO		
SPONSORS					
	NAME		E-MAIL		WEBSITE
OPERATOR	.S				
	NAME	TELEPHONE	E-MAIL		
VENDORS					
		TELEPHONE	E-MAIL		

A.	CAM	CAMP COORDINATOR/SPONSOR			
	Revi	Review URM Camp Guidelines and Applicable Campus Policies			
	Revi	ew American Camp Association and comparable standards information.			
	☐ Complete necessary forms and documents				
	0	Applicable facilities agreements and permits			
	0	Camp insurance for all participants (as applicable)			
	0	Camp Participant Informed Consent & Medical History . Consent for Mil			

- Camp Participant Informed Consent & Medical History, Consent for Minors or similar informed consent templates providing information on hazards, safety requirements, emergency treatment authorization, parent/guardian emergency contact, etc. (available on URM website)
- o Has ADA review been completed?
- o List of adults allowed to pick up children on file and procedure
- Rules of conduct described (outlining actions of minor that may result in dismissal of camper); parents know to instruct their campers to obey rules.
- Forms kept in secure fashion/location; emergency information available to appropriate personnel

☐ SAFETY & EMERGENCY RESPONSE PLANNING, TRAINING, DOCUMENTATION

- Perform required criminal background checks; including reference checks & screening interviews for Camp Counselors/employees/volunteers who will have access to personal information of, or be in contact with, Participants.
- Develop a Plan for protecting Minor participants (SEE URM GUIDELINES REGARDING MINORS, CHECKLIST FOR PROGRAMS INVOLVING MINORS AND CONSENT FOR MINORS FOR DETAILS) Including specific Do's and Don't's; Adults working in pairs with children, process for isolated locations such as restrooms, showers, dorms
- Develop a Participant Supervision Plan (Accounting for, and supervising of, Participants from the time they are brought to the camp through the time they depart the campus/Camp site, two-person rule)
- Staff to camper ratios—refer to American Camp Association below and State specific guidelines

Camper Age	Staff	Day Camp	Overnight Camp
4 – 5	1	6	5
6 – 8	1	8	6
9 – 14	1	10	8
15 – 18	1	12	10

	-	Volunteer Plan (SEE URM USE OF VOLUNTEER AND TRAINEE GUIDELINES, CHECKLIST FOR TEERS OR TRAINEES AND AGREEMENT AND WAIVERS FOR VOLUNTEER AND TRAINEE FOR DETAILS)		
Develop a Transportation Plan: The purpose of the Transportation Plan is to determine transportation needs and to plan for safe management of drivers and vehicles.				
0	Veh	icle safety checks performed		
0	DM	V checks & required driver training complete (for designated drivers)		
0	Con	tracts, and certificate of insurance from hired transportation companies		
0	Driv	vers follow safe loading procedures for vans		
0	Driv	vers trained or experienced in road conditions & vehicle type		
what volun	actio teers	Health Plan: The purpose of a written health plan is to inform camp staff and volunteers ns to follow to ensure each camper's health and safety while at camp. Staff and must receive training on the health plan. Training must include an opportunity to discuss nd ask questions.		
	•	n Orientation and training program for counselors/employees/volunteers and s/parents/guardians		
Cond route		Site Inspection to identify potential hazards, indoor & outdoor facilities, evacuation .		
0	Out	door Space:		
	•	Holes, depressions, protruding objects, surface conditions		
	•	Trash/Debris		
	•	Exposed sprinkler heads		
	•	Protruding fence screens		
	•	Weather condition considerations		
0	Indo	por Space		
	•	Sharp, Protruding Objects		
	•	Housekeeping, well maintained, clean and neat		
	•	Fire suppression and alarms: Sprinkler system/fire/smoke alarms/fire extinguisher in place		
	•	Check for fire hazards: Electrical, housekeeping, etc.		
	•	Exit hallways free of obstructions/stored items		

Exit doors unlocked and accessible

Exits signs working and visible

- Top bunks have rails in place
- Plumbing free of leaks and working
- Adjustments made based on age of participants
- Windows protected to avoid falling through
- o Equipment:
 - Well maintained in good condition
 - No Sharp Edges, Deterioration
 - Participants/leaders Instructed in Use
 - Use of Leased/borrowed Personal Equipment
 - Equipment secured while not in use to prevent theft/ damage--methods used.
 - Cell/satellite phones work in all camp locations.

	Establish security measures to protect participants, personal property & University-
	owned/leased property.
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☐ Create a camp-specific Emergency Response Plan (refer to Sample Template, Appendix A)

For further assistance contact your <u>Campus Office of University Risk Management</u>

EMERGENCY RESPONSE PLAN (Sample Template)*

*This is a SAMPLE EMERGENCY PLAN TEMPLATE. Each activity will require emergency components specific to the activity. Activity coordinators, departments, leaders and participants should modify this template for their off-campus activity.

ACTIVITY TITLE & DATES:			
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CONTACT INFORMATION COUNSELORS AND VOLUNTEERS CELL PHONE NAME, TITLE **EMAIL ADDRESS ADDRESS PARTICIPANTS CELL PHONE EMERGENCY CONTACT PHONE** NAME **EMERGENCY CONTACT INFORMATION** TYPE PHONE **ADDRESS COMMENTS** Use best judgment and never be 911 afraid to call 911. Be prepared to **Emergency** On campus also provide specific location and nature call _ of emergency. Nearest medical facility for activity Hospital location. **Ambulance** If not dispatched through 911. Cell *CSP for emergencies on Police/Highway Patrol Colorado highways. Nearest fire/emergency response for **Fire Department** activity location An on-campus individual familiar Campus/Department with camp/trip and capable of Contact assisting in an emergency. Campus police dispatchers can locate Direct: faculty/staff, the Emergency Response Team, Integrated **Campus Police** Communications, Legal and Student Life after hours and on weekends. Toll Free: Enter your campus-specific information. **CU Transportation** University Vehicle issues.

EMERGENCY RESPONSE PLAN PROCEDURES

CAMP SPONSOR: SELECT AND INDIVIDUALIZE ITEMS THAT APPLY TO YOUR SPECIFIC CAMP ☐ Call 911 for all emergencies ☐ Crime: Contact local police ☐ Weather-related emergencies Address likely weather issues: Lightning response (e.g. clear fields with lightning @ six miles away [bang follows flash \leq 30 seconds]) Tornado response (e.g. action on receiving tornado watch/warning) ☐ Auto accidents or breakdown Contact the law enforcement agency with jurisdiction over the accident location University vehicles: contact campus Transportation Personal vehicles: contact local or insurance-provided assistance o Rental vehicles: contact rental agency If injuries or death, follow injuries/death emergency procedures (below) ☐ Loss or damage to property: o Contact University Risk Management to file claim and get further direction Keep property (do not discard) until advised by URM adjuster If critical to trip, determine replacement criteria (sources, timeline, funding) NOTE: CU insurance does not cover personal property □ Behavioral issues o Become familiar with and follow campus procedures for behavioral issues. Call on-campus professional (24x7 availability) If participants/employees are in danger, contact local police Call parents or other emergency contacts ☐ For participant injury or illness, follow your health provider guidelines o Call 911, go to urgent care, or administer first aid, as appropriate Call parents or other emergency contacts Contact University Risk Management to get further direction ☐ Leader injury, illness, or death o Call 911, go to urgent care or administer first aid, as appropriate o Co-leader or assistant leader assumes the lead Consider participant's safety during emergency and after if leader cannot continue Contact campus/department for assistance and guidance (campus dispatch can locate campus police, legal, communications, student affairs and other stakeholders to assist in the emergency) Contact parents or other emergency contacts, should this change the elements of the trip Reassess risks to participants should the situation warrant changes, taking care not to place participants at unnecessary or heightened risk ☐ Claim Reporting o Camp insurance claims: URM website: www.cu.edu/risk on Camp Activities /Incident Procedure tab Work -injuries or illnesses; Auto; General Liability; Property damage: URM website: www.cu.edu/risk at File a Claim Link

o URM Claims: (888)812-9601 or (303)860-5682