

Off-Campus Trip Reporting and Emergency Reporting Protocols

Introduction

Because Northland College promotes experiential education, field-based studies, and connecting people with and within natural environments, many aspects of the Northland experience take place off campus, in outlying communities, in remote environments, and internationally. These experiences may take place as close as a short walk from campus or as far as many days walking distance from human contact.

In order to provide a safety net for students and employees participating in these experiences Northland College is developing Trip Reporting and Emergency Reporting protocols for College sanctioned off-campus travel involving students. These protocols are intended to assist trip leaders and the College manage off-campus emergencies involving students. Please carry a copy of this document with you when leading off-campus experiences.

Table of Contents

Off-Campus Trip Reporting and Emergency Reporting Protocols.....	1
Introduction.....	1
Trip Reporting Protocol (“Do I need to report a trip?”)	1
Contacting Northland College in an Emergency	2
TRIP INFORMATION FORM.....	3
Emergency Contact Information for Your Wallet	5
Front Country Emergency Action Checklist.....	7
Back Country Checklist	9
Highway/Roadway Accident or Injury Checklist	11
Northland College Medical History Information Form for Multiday and Backcountry trips	13
MEDICAL EMERGENCY REPORT FORM.....	15
BACK-COUNTRY EVACUATION PLAN FORM.....	17
MISSING PERSON FIELD REPORT FORM.....	19

Trip Reporting Protocol (“Do I need to report a trip?”)

Trip leaders must submit a Trip Information Form (pages 11 and 12) to d/TripReports@northland.edu when trips will meet any of the conditions listed below:

- Destination is greater than 40 miles from campus.
- Destination is not staffed.
- Destination does not have reliable phone service.
- Travel will occur on roadways where cell phone coverage is uncertain or unreliable.
- Activities will take place anywhere that cannot be accessed by typical two-wheel drive emergency vehicles.

Contacting Northland College in an Emergency

Note to the leader/instructor: Emergency Reporting protocols apply to all off-campus trips with students. This document is provided to assist you in managing emergencies when you are off campus. Carry and this document when engaging in Northland College sanctioned off-campus experiences.

Emergency Reporting Protocols

Trip leaders must contact Northland College when any of the following conditions occur:

- Missing person or group
- Injury resulting in hospitalization
- Illness resulting in hospitalization
- Property damage resulting in financial obligation by Northland College
- Incidents attracting media attention
- Anytime you need emergency support

General Emergency Procedures for Activity Leaders

- Secure participants from greater harm
- Identify your exact location
- Call **911** or Local Emergency Services for assistance
- Provide emergency care
- Notify Northland College **Toll Free Emergency Number: 1-855-736-5445**
- Create a plan of action
- Keep good notes
- Refer all media/public questions to Northland Marketing and Communications at (715) 682-1347

24 hour Northland College Emergency Contact

Toll Free Emergency Number: 1-855-736-5445 Northland College Duty Officer

Alternate Emergency Number: 715-682-1399 Campus Safety

Phone in Script:

Hello, this is your name of trip name.

We are located at provide address of your location or latitude and longitude, or UTM coord., etc.

Our emergency is state the emergency and the severity.

We have contacted state the name of the agency for immediate assistance.

Future contact: Provide a number where you can be reached or a time you will call again.

We need state assistance you need.

Names of injured, ill, or lost: Provide names of lost, injured, or ill person(s)

The Duty Officer may ask for additional information if phone connectivity is strong.

TRIP INFORMATION FORM

FILE A TRIP INFORMATION FORM IF YOUR TRIP MEETS TRIP REPORTING PROTOCOLS

BEFORE LEAVING CAMPUS: Send an electronic copy of this form to dITripReports@northland.edu. Take a copy with you.

UPON RETURN TO CAMPUS: Call **Campus Safety** at **715-682-1399**. Provide the Trip Leader's name and Class or Trip Title.

EMERGENCY RESPONSE ACTIVATION: If you have not contacted **Campus Safety** within **3 hours** after your intended return time we will initiate procedures to locate your group. If your return is delayed, call Campus Safety at 715-682-1399 to update your intended return time.

Leader name:		
Cell phone #	Home phone #	Office phone #
Assistant name:		
Cell phone #	Home phone #	

Class name and number or Trip Title:	
Departure Date:	Intended Departure Time:
Return Date:	Intended Return Time:

First and Last Names of all Students (Please Print)			
1		2	
3		4	
5		6	
7		8	
9		10	
11		12	
13		14	
15		16	
17		18	
19		20	
21		22	

Page 1 of 2 Trip Information Form

Provide a Brief Description of your Trip:

Provide a Daily Itinerary with Travel Route and Contact information at nightly destinations:

Emergency Contacts and Phone Numbers at intended destination: (e.g. host organization, land management agency, county sheriff, search and rescue, satellite phone numbers, local emergency medical services) add more as needed.

Contact name:		Organization Name:	
Work	Cell	Home	

Contact name:		Organization Name:	
Work	Cell	Home	

Contact name:		Organization Name:	
Work	Cell	Home	

Northland College Contact Information: Provide the name and contact information of a member of the faculty or staff in your program who is knowledgeable of your trip plans.

Northland College Program Contact name:		
Office ext.	Cell	Home

Other pertinent information: Provide any information that would be helpful in event of an emergency (e.g. names of others traveling with you, license numbers for personal vehicles, map names for backcountry travel courses, types of communication or locator devices carried for use in remote areas, level of readiness for extended stay in remote areas, etc.)

Emergency Contact Information for Your Wallet

This information card can be copied, folded, and stored in your wallet. It provides you with the most critical information you may need in the event of an emergency. 1) Copy this table 2) fold back to back along the red line 3) fold back to back along midline.

<p>Be prepared to provide the following:</p> <ul style="list-style-type: none"> • Your name and course/trip title • Names of lost, injured, or ill person(s) • Location: address or longitude/latitude • State the emergency and severity • Name of emergency agency you contacted • Your phone number or a time you will call again • Immediate assistance needed 	<p>24 Hour Emergency Contact: Northland College Duty Officer Call toll free 1-855-736-5445</p> <p>Alternate Emergency Number: 715-682-1399 Campus Safety</p> <p>Refer Media to Northland Marketing and Communications 715-682-1347</p> <p>Share student information <u>only</u> with those legally authorized to receive it</p>
<p>When to contact Northland College</p> <ul style="list-style-type: none"> • Missing person or group • Injury resulting in hospitalization • Illness resulting in hospitalization • Property damage resulting in financial obligation by Northland College • Incidents attracting media attention • Anytime you need emergency support 	<p>Emergency Procedures-</p> <ul style="list-style-type: none"> • Call 911 or emergency personnel for assistance • Secure participants from greater harm • Provide emergency care • Identify your exact location • Notify Northland College 1-855-736-5445 • Create a plan of action • Keep good notes

To prevent orphaned pages of important forms during double-sided copying, this page has been left blank intentionally.

Front Country Emergency Action Checklist

Follow this Checklist in the event of an Emergency in “Front Country” environments. Front Country is defined as any urban or rural environment within a 15 minute walk of road access adequate for typical emergency vehicles.

Manage the Emergency (order of events may change at the discretion of the leader)

- Secure the environment or move the group to a safe location to prevent further risk of injury to all parties
- Contact emergency personnel (911 throughout most of the US; Local emergency number for areas without 911 support or international trips)
- Provide necessary first aid to stabilize injured persons according to your level of training
- If anyone is taken for medical assessment:
 - Record first and last name of student or employee taken for assessment
 - Record name, address, and phone number of emergency treatment center where individual is being taken
 - Record method of transport and name of transport service (if any)
- If anyone is missing:
 - Record first and last name
 - Record last known location
 - Record last seen time
 - Record clothing worn
 - Alone or with others
 - Intended destination
 - Intended return time
 - Known medical or emotional concerns
 - Quickly search likely locations
- Record name, address, and phone numbers for each group member location (hospitals, hotels, homes, etc.)

Notify Northland College Duty Officer

- Notify Northland College call **1-855-736-5445** 24 hour emergency number and make specific plans for follow-up contacts
 - Hello, this is your name of trip name.
 - We are located at provide address of your location.
 - Our emergency is state the emergency and the severity.
 - We have contacted state the name of the agency for immediate assistance.
 - Future contact: Provide a number where you can be reached or a time you will call again.
 - We need state assistance you need.
 - *Provide first and last names of lost, injured, or ill person(s)*

STAY ON THE PHONE. The Duty Officer will verify the information and will ask for more details if phone connectivity is strong.

- Provide detailed information about each member of the group.
 - Provide the name, location/address, contact phone number (if available) and status for every group member including leaders
 - Explain the extent of all injuries or illnesses and emergency treatment received
 - Explain last known time, location, and conditions of missing persons
- Describe the actions you have taken up to this point of contact
- Explain emergency needs (evacuation, advanced medical assistance, search and rescue, medication, etc.)
- State additional support needs (additional food or equipment, support staff, communication devices, transportation, etc.)
- Provide your plan of action to manage the emergency and group needs
 - Provide any other plans you are making; continue trip, abort trip, modify trip
- Identify agencies currently involved along with names and titles of personnel
- Identify other parties involved (provide names, titles, and phone numbers)
- Coordinate next contact method and number
- Keep detailed and factual records
 - Factual data about incident and updates
 - Witnesses
- Complete report forms as requested by your Program Coordinator
- Submit copies of all information to the Vice President of Finance and Administration

Back Country Checklist

Follow this Checklist in the event of an Emergency in “Back Country” environments. “Back Country” is defined as any environment greater than a 15 minute walk of road access useable by typical emergency vehicles

Manage the Emergency (order of events may change at the discretion of the leader)

- Secure the environment or move the group to prevent further risk of injury to all parties
- Provide emergency care to your level of training, anticipate and prevent additional problems
- Identify emergency care and evacuation needs
- Identify and manage group needs
- Formulate a plan of action
- Coordinate and implement notification of emergency personnel
 - If a small group (4 people is the preferred group size) is sent out to make emergency contacts ensure:
 - proper preparation for travel (clothing, shelter, navigation, communication, nutrition, hydration)
 - proper written information about the emergency (see below under notification)
 - first and last names of all members and each person’s condition and location
 - location of the group on a marked map and plan for the group
 - location of the injured party on a marked map
 - the actions you have taken up to this point of contact
 - emergency needs for injured and other members
 - evacuation plan for injured or other members
 - contingency plans for alternate evacuation plan
 - notification procedures
 - group responsibilities and plan after delivering message
- If anyone is taken for medical assessment:
 - Record first and last name of student or employee taken for assessment
 - record name, address, and phone number of emergency treatment center where individual is being taken
 - record method of transport and name of transport agency (if any)
- If anyone is missing:
 - Record first and last name
 - Record last known location
 - Record last seen time
 - Record clothing worn
 - Alone or with others
 - Intended destination
 - Intended return time
 - Known medical or emotional concerns
 - Quickly search likely locations

Page 1 of 2 Back Country Checklist

Notify Northland College Duty Officer

- Notify Northland College call **1-855-736-5445** 24 hour emergency number and provide names, condition, and location of each group member. Front Country and Back Country locations.
 - Hello, this is your name of trip name.
 - We are located at provide longitude and latitude, UTM coordinates, or TR Section description.
 - Our emergency is state the emergency and the severity.
 - We have contacted state the name of the agency for immediate assistance.
 - Future contact: Provide a number where you can be reached or a time you will call again.
 - We need state assistance you need.
 - *Provide first and last names of lost, injured, or ill person(s)*

STAY ON THE PHONE. The Duty Officer will verify the information and will ask for more details if phone connectivity is strong.

- Provide detailed information about each member of the group.
 - Provide the name, map location or coordinates/address, contact phone number (if available) and status for every group member including leaders
 - Explain the extent of all injuries or illnesses and emergency treatment received
 - Explain last known time, location, and conditions of missing persons
- Describe the actions taken up to this point of contact
- State additional support needs (additional food or equipment, support staff, communication devices, transportation, etc.)
- State your current and intended plans of action
 - Provide your preferred evacuation plan and alternate plan
 - Provide Search and Rescue plans (if appropriate)
 - Provide “runner” group plan
 - Provide any other plans you are making; continue trip, abort trip, modify trip
- Identify agencies currently involved
- Identify other parties involved
- State the current and anticipated environmental conditions (if appropriate)
- Coordinate next contact method and number
- Keep detailed and factual records
 - Factual data about incident and updates
 - Witness Reports
 - Photos
- Complete appropriate field report forms and forms requested by your Program Coordinator
- Submit copies of all information to the Vice President of Finance and Administration

Page 2 of 2 Back Country Checklist

Highway/Roadway Accident or Injury Checklist

Follow this checklist in the event of an Emergency on a Highway or Roadway.

Manage the Emergency (order of events may change at the discretion of the leader)

- Secure the environment to prevent further risk of injury to all parties
- Contact emergency personnel (911 throughout most of the US; Local emergency contacts for areas without 911 or international travel trips)
- Provide necessary first aid to stabilize injured persons according to your level of training
- Move passengers to the safest nearby location and provide necessary supports
- Mark the vehicle with emergency triangles, flares, or turn on hazard lights
- If anyone is taken for medical assessment:
 - Record first and last name of student or employee taken for assessment
 - record name, address, and phone number of emergency treatment center where individual is being taken
 - record method of transport
- Record name, address, and phone numbers for any location where group members are located (hospitals, hotels, etc.)
- Collect accident information as requested on the back of the vehicle check-out form

Notify Northland College Duty Officer

- Notify Northland College call **1-855-736-5445** *the 24 hour emergency number* and make specific plans for follow-up contact. Any vehicular accident must also be reported according to the directions provided on the back of the vehicle check out form.
 - Hello, this is *your name of trip name.*
 - We are located at *provide Highway/Roadway mile marker, location, or address*
 - Our emergency is *state the emergency and the severity.*
 - We have contacted *state the name of the agency* for immediate assistance.
 - Future contact: *Provide a number where you can be reached or a time you will call again.*
 - We need *state assistance you need.*
 - *Provide first and last names of lost, injured, or ill person(s)*

STAY ON THE PHONE. The Duty Officer will verify the information and will ask for more details if phone connectivity is strong.

- Provide detailed information about each member of the group.
 - Provide the name, location/address, contact phone number (if available) and status for every group member including leaders (hospitals, hotels, etc.)
 - Explain the extent of all injuries or illnesses and emergency treatment received
- State additional support needs (support staff, transportation, hotel reservations, etc.)
- Provide your plan of action to manage the emergency and group needs
 - Provide any other plans you are making; continue trip, abort trip, modify trip
- Identify agencies currently involved
- Identify other parties involved

Page 1 of 2 Highway Checklist

- Coordinate next contact method and number
- Keep detailed and factual records

- Factual data about incident
- Witnesses
- Accident information
- Complete forms as requested by your Program Coordinator
- Submit copies of all information to the Vice President of Finance and Administration

Northland College Medical History Information Form for Multiday and Backcountry trips

Collect and carry this information for each person on multi-day or backcountry trips unless you have collected medical history in some other format (e.g. Athletics)

Course Number: _____ Course/Trip Name: _____

Participant Name: (Printed) _____ Date of Birth: _____

Male Female Other _____

In an emergency, we will contact a "Next of Kin."

Name: _____ Relationship: _____

Home/Cell Phone #: _____ Work Phone #: _____

Who can we call if "Next of Kin" cannot be reached?

Name: _____ Relationship: _____

Home/Cell Phone #: _____ Work Phone #: _____

Please fill out the following form by circling **yes** or **no** and elaborating when necessary.

YES **NO** Do you have diabetes? If yes, please explain _____

YES **NO** Do you have asthma? If yes, how often, how severe? _____

YES **NO** Do you have a history of heart disease? Does anyone in your family has a history of heart disease? If yes, please explain for either question: _____

YES **NO** Do you have high blood pressure?

YES **NO** Do you have epilepsy?

YES **NO** Are you subject to seizures or convulsions? If yes, how often? _____

YES **NO** Do you have any allergies? If yes, please explain: _____

YES **NO** Do you experience frequent nausea or vomiting, have any food intolerances or special dietary needs? If yes, please explain: _____

YES **NO** Have you had an acute illness, injury, or surgery within the last three months? If yes, please explain: _____

YES **NO** Is your activity restricted in any way? If yes, please explain: _____

YES **NO** Do you experience any emotional disorders such as depression, schizophrenia, or phobias such as strong fear of confined places, open areas, or heights? If yes, please explain: _____

YES **NO** Have you ever suffered from environmental injuries such as hyperthermia, hypothermia, frostbite or immersion foot? If yes, please explain: _____

YES **NO** Have you ever been stung by a bee, wasp, bumblebee, fire ants or other similar insects?
YES **NO** Have you ever had a reaction to bee stings or insect bites?
If yes, do you carry medication to counteract it? (i.e., anaphylaxis kit). _____

YES **NO** Do you have any other medical conditions of which we should be aware? Please explain: _____

YES **NO** Will you be carrying any medication? If yes, what is it, what is the dosage, and how often do you take it? _____

When did you have your last tetanus shot? _____

Please put your initials in the appropriate space

YES ___ **NO** ___ *Do you give your course instructor permission to administer first aid to you in the event of an emergency?*

YES ___ **NO** ___ *Do you give the staff of an accredited hospital, medical center, clinic, or similar institution permission to administer emergency treatment to you in the event of an emergency?*

YES ___ **NO** ___ *Do you give the staff of an accredited hospital, medical center, clinic, or similar institution permission to release information about your medical condition to the Northland College trip/course leader in charge of this trip?*

Who is your family physician?
Name: _____
Address: _____
Phone: _____

Who is your medical insurance carrier?
Company Name: _____
Policy Number: _____
Phone: _____

By signing this form you are stating that the above information is true and complete to the best of your knowledge.

Signature: _____ **Date:** _____

MEDICAL EMERGENCY REPORT FORM

GROUP IDENTIFICATION:

Course: _____ Leader: _____

Assistant Leader: _____

INJURED PERSON:

Name: _____ Age: _____ Sex: _____

TIME OF ACCIDENT:

Date: _____ Time: _____ a.m. p.m.

SUBJECTIVE INFORMATION:

Mechanism of Injury (MOI):

Chief Complaint (OPQRST): **O**nset, **P**rovokes, **Q**uality, **R**adiation, **S**everity, **T**ime

OBJECTIVE INFORMATION:

Time	AVPU	Pulse	Resp.	B/P	Temp.	CMS	Skin	Pupil
------	------	-------	-------	-----	-------	-----	------	-------

Symptoms & Signs: _____

Allergies: _____

Medications: _____

Past Relevant History: _____

Last Oral Intake: _____

Events Leading up to Incident: _____

BACK-COUNTRY EVACUATION PLAN FORM

GROUP IDENTIFICATION:

Course: _____ Leader: _____

Assistant Leader: _____

INJURED PERSON:

Name: _____ Age: _____

Male Female Other _____

TIME OF ACCIDENT:

Date: _____ Time: _____ a.m. p.m.

LOCATION OF INJURED PERSON: (Give exact location and include a marked map)

WEATHER: (Check prevailing weather conditions)

Warm Moderate Freezing Snow Wind Sun Clouds Fog Rain

Other:

Weather outlook for near future: _____

COMPLETE DESCRIPTION OF ACCIDENT:

Name of Witnesses: _____

EVACUATION PLAN: (Give a detailed description of your evacuation plan and backup plan or needs, indicate on the accompanying map the evacuation pick up point or location of landing pad)

Evacuation will need: Helicopter Horse ATV Motor boat Snow Mobile

Medical equipment needed: Back board Basket KED SKED Oxygen

Other: _____

**EMERGENCY PHONE NUMBERS: Call the local County Sheriff Office and/or 911 if available.
Northland College 24 hour Emergency Reporting: 1-855-736-5445**

To prevent orphaned pages of important forms during double-sided copying, this page has been left blank intentionally. Use this page for additional notes.

MISSING PERSON FIELD REPORT FORM

GROUP IDENTIFICATION:

Course: _____ Leader: _____
Assistant Leader: _____

MISSING PERSON:

Name: _____ Nickname: _____

Physical Characteristics: Age: _____
Gender: _____
Height: _____
Weight: _____
Race: _____
Hair Color & Cut: _____
Eye Color: _____

Description of Clothing:
(Describe style & color) Shirt: _____
Pants/skirt/dress: _____
Coat: _____
Footwear: _____
Hat: _____
Glasses: _____

Description of Equipment:
(Describe style & color) Pack/bag: _____
Sleeping: _____
Shelter: _____
Fire: _____
Whistle: _____

CIRCUMSTANCES:

Time & Date Last Seen: _____

Location of Last Sighting: (Include a marked map) _____

Last Seen By: _____

Circumstances Surrounding Disappearance: _____

Personality Profile of Missing Person: _____

Physical Fitness and Ability of Missing Person: _____

Medical Concerns: _____

Experience Level of Missing Person: _____

SEARCH PLAN: (Give a description of your search plan and needs)

**EMERGENCY PHONE NUMBERS: Call the local County Sheriff Office and/or 911 if available.
Northland College 24 hour Emergency Reporting: 1-855-736-5445**

To prevent orphaned pages of important forms during double-sided copying, this page has been left blank intentionally. Use this page for additional notes.