**<INSERT YOUR EVENT NAME HERE>**

**Emergency Management Plan for Temporary Events**

**(Intended for events with over 500 people)**

***How to best use this template -*** *Before completing this template, ensure you have read through the* [*Redland City Council Event Portal*](https://events.redland.qld.gov.au/) *and* [*Event Information Kit*](https://events.redland.qld.gov.au/wp-content/uploads/2021/10/01748_Event_Information_kit___October_2021_Low_Res.pdf)*. These tools will provide assistance for how to complete the sections of this Emergency Management Plan template. Each section is to be completed with information specific to your event. Additional information can be added in each section and table (by inserting extra rows).*

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***Links to other relevant documents/tools:***

[Event Planning Tools](https://events.redland.qld.gov.au/event-planning-tools/)   
[Event Information Kit](https://events.redland.qld.gov.au/wp-content/uploads/2021/10/01748_Event_Information_kit___October_2021_Low_Res.pdf)

## 1.0 Event Details

|  |  |
| --- | --- |
| Event Organiser |  |
| Event Name |  |
| Type of Event | *e.g. Cultural Festival/Music/Markets etc* |
| Date/s |  |
| Location |  |
| Number of Event Attendees for duration of event |  |
| Contact Person |  |
| Contact number & email |  |

## 2.0 Consultation

Provide a list of key stakeholders who have been communicated with (QAS, QPS, QFES, local accommodation, transport etc) and any advice that has been provided.

|  |  |  |  |
| --- | --- | --- | --- |
| Authority | Name | Contact number | Advice/Comments |
| *e.g. QPS* | *Sgt Smith* | *07 XXX XXX* | *Additional security may be required for the number of attendees.* |
|  |  |  |  |
|  |  |  |  |
|  |  |  | *Insert additional rows in table as needed* |

## 3.0 Security Plan and Crowd Control

Provide information relating to crowd control/security that will be in place for the event. Include details of the person/contractor providing services, licence details, number of security and hours they will be on site. Please note the consumption of alcohol at the event will determine the number of security at the event.

|  |  |  |  |
| --- | --- | --- | --- |
| Security Company |  | Contact name and Number |  |
| Security Plan (include roster of how many security and hours at event) |  | | |

## 4.0 Communications Plan

In case of an emergency, outline how you will communicate at the event with your team, emergency services, attendees (e.g. radio, mobile phone, PA system). Provide alternate arrangements if communication systems do not work (e.g. no mobile coverage).

|  |  |
| --- | --- |
| Communication Plan details |  |

## 5.0 Emergency Evacuation Procedure

In the event of an emergency or incident that requires an evacuation, describe the details and procedures of how an evacuation would be conducted. Ensure emergency evacuation routes mentioned in your procedure are included on your site plan.

|  |  |
| --- | --- |
| Detail the procedure of how an evacuation would be conducted at your event |  |

## 6.0 Specific Emergency Procedures

Provide a comprehensive list of all identified potential emergencies and how they will be responded to. Ensure the information/procedures are clear and concise as these may need to be referred to by personnel in the event of an emergency (e.g. fire, extreme weather event, accident etc).

|  |  |
| --- | --- |
| Emergency Type | Response details |
| *e.g. Fire and Explosion* |  |
|  |  |
|  |  |
|  | *Insert additional rows in table as needed* |

## 7.0 Training and Event Briefing

Event personnel are required to be trained in the emergency management procedures contained in this document and provided with a copy of the emergency contact numbers. Provide details on how and when this will occur.

|  |  |
| --- | --- |
| How and when will personnel be trained and provided with emergency management procedures prior to the event? |  |
| Will a copy of emergency contact numbers be given to event personnel? | Yes  No |
| How will the emergency management procedures be reviewed after the event? |  |

## 8.0 Emergency Contact List

Provide an extensive list of contact people and their phone numbers that are relevant in the event of an emergency. This list should be distributed and used by event personnel on the day of the event.

|  |  |  |
| --- | --- | --- |
| Name | Position | Contact Number |
| *e.g. Mary Martin* | *Event Site Manager* | *Coordinator during the event* |
| *e.g. Rob Smith* | *First Aid Officer* | *To prove first aid to people on site who are sick/injured* |
| *e.g. QPS* | *Queensland Police Service* | *000 / 07 XXX XXX (local station)* |
|  |  |  |
|  |  | *Insert additional rows in table as needed* |