|  |
| --- |
| ***Service logo*** |
| **MEDICAL SERVICES****OPERATIONAL PLAN** |
| **EVENT NAME** |
| **DATE OF EVENT****VENUE****VENUE ADDRESS****TOWN** |

**TABLE OF CONTENTS**

1. Executive summary
2. Distribution of the document
3. Background
4. Core functions of the medical services
5. Purpose
6. Legal background
7. Event description and brief
8. Risk assessment
9. Command and control
10. Divisional Roles and Responsibilities
	1. Emergency Medical Services
	2. Environmental Health Services
	3. Hospital Services
11. Approval of the plan
12. **EXECUTIVE SUMMARY**

|  |  |
| --- | --- |
| **EVENT TITLE:** |   |
| **EVENT ORGANISER:** |   |
| **VENUE FOR THE EVENT:** |   |
| **AUTHORISATION OF THE EVENT:** |  |

**EVENT RISK GRADING**

|  |  |
| --- | --- |
| **ANTICIPATED ATTENDEES** |   |
| **NUMBER EXPECTED** |   |
| **LEVEL OF RISK** |   |
| **MAJOR RISK FACTORS** |   |
| **TYPE OF EVENT** |   |
| **DURATION** |   |

1. **DISTRIBUTION OF THE DOCUMENT**

The document will be distributed to the following stakeholders for custody and implementation:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No | Role player | Representative | Position | Contact No. |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

1. **BACK GROUND**

The (*name of Medical Service Provider)* has been contracted / tasked with the responsibility to assist in the provision of health and medical services to provide an incident free event.

The *(name of Medical Service Provider)* will participate in the event by assisting with planning for all possible risk scenarios and putting in place appropriate measures of prevention and mitigation regarding the imminent risk(s) attributable to the event.

1. **CORE FUNCTIONS OF THE DEPARTMENT**

The *(name of Medical Service Provider)* is responsible for rendering health and medical services to mitigate against risks, loss of live resulting from any natural or man-made emergencies, to place appropriate hospitals on standby and to provide medical support to delegates and support personnel during the event.

1. **PURPOSE**

The purpose of the Medical Service Provider is to ensure that:

* The venue used comply to the Environmental code of conduct through inspections;
* Provision of medical services during the event to competitors, officials and spectators;
* Place hospital(s) on standby for the event;
1. **LEGAL BACKGROUND**

The following legislation has been taken into consideration during the planning for the provision of the health and medical services during the event:

* 1. Constitution of the Republic of South Africa (Act 108 of 1996)
	2. National Health Act (Act
	3. National Emergency Medical Services Regulations
	4. Gauteng Ambulance Services Act (Act 6 of 2002)
	5. Safety at Sport and Recreational Events Act (Act 2 of 2010)
	6. Gatherings Act (Act 205 of 1993)
	7. Environmental Health Act (Act
	8. Disaster Management Act (Act 57 of 2002)
1. **EVENT DESCRIPTION IN BRIEF**

*The event will be hosted at (venue name) by (name of the organiser) on the (date).*

The event will be attended on the *(date)* by the *(estimated amount of persons)*.

The event will be hosted from *(time)* to *(time).*

1. **RISK ASSESSMENT**

|  |  |  |
| --- | --- | --- |
| **Hazard / Threats** | **Possible cause** | **Possible remedies** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **COMMAND AND CONTROL**

As this event is managed under the Safety at Sports and Recreational Events Act, Act 2 of 2010 the responsible Security entity will take command in the event of a Mass Casualty Incident.

Each function which form part of the Safety and Security group will be in command of his/her own functions and will form part of the Venue Operations Centre (VOC) as established by the SAPS.

In the event of an incident during the event, the Command and Control group will made decision with regard to the safety of all competitors, officials and spectators at the venue.

* 1. **Emergency Medical Services**

|  |  |  |
| --- | --- | --- |
| **Responsible Person** | **Position** | **Contact Number** |
|  |  |  |
|  |  |  |

* 1. **Environmental Health Services**

|  |  |  |
| --- | --- | --- |
| **Responsible Person** | **Position** | **Contact Number** |
|  |  |  |
|  |  |  |

1. **DIVISIONAL ROLES AND RESPONSIBILITIES**
	1. **Emergency Medical Services**

Emergency Medical Services provided by *(name of Medical Service Provider)* will be responsible for the following functions:

* Triage, Treatment and Transport of patients;
* Co-ordinate emergency medical evacuation if required;
* Notification of receiving hospitals of patients;
* Establishment of a medical centre during the event as treatment area;
	1. **Environmental Health Services**
* Pre inspection of facilities for the event;
* Daily food security inspections during the event;
* Reports to the VOC on inspections;
	1. **Hospitals on standby**

|  |  |  |
| --- | --- | --- |
| **No** | **Hospital** | **Contact Number** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

1. Plan compiled by

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(NAME) (CMC NR….)