

Girl Scouts of Tulip Trace Council, Inc.
5596 East State Road 46
PO Box 5485
Bloomington, Indiana 47407-5485
812-336-6804 or 800-467-6804

PROCEDURES FOR LEADERS/ADULTS FOR REPORTING SERIOUS ACCIDENTS AND MAJOR EMERGENCIES

The publication from GSUSA, *Safety-Wise*, emphasizes that "sound health and safety principles must permeate every Girl Scout activity. Safety should be planned, respected and practiced by all."

The following guidelines are specific steps to be taken by the person in charge at the scene of an accident or emergency:

1. Give priority attention to providing all possible care for the injured person or persons. Secure doctor, ambulance, clergy, and police as appropriate.
2. In the event of a fatality, always notify police. Retain responsible adult at the scene of the accident or emergency. See that no disturbance of victim or surroundings is permitted until police have assumed authority.
3. Immediately contact one of the following:

Council phone numbers: 812-336-6804
800-467-6804

Emergency Cell Phone: *812-320-7622

Deborah C. O'Brien, Chief Executive Director Home: 812-337-8428

Sue Wanzer, President Home: 812-333-2284

*If your call is not returned within 15 minutes, try the home numbers of the executive director or president.

4. Emergency Numbers: Police, Fire, E.M.S. 911
(your local E.M.S. number) _____

5. Refer all media (press, radio, T.V.) inquiries to the chief executive officer. No one at the scene should make any statements to the media.
6. Person in charge, or person who is notified, should use the attached report form to make sure essential information is acquired and essential steps followed.

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CONFIDENTIAL
Form For Reporting Accidents

Name of leader or person in charge _____

Person who called (Identify position) _____ Date _____ Time of first call _____

Nature of emergency (accident, etc.) _____

What happened? (Be specific) _____

When and where did it happen? Date/time/exact place of accident. _____

Names, ages, addresses of people involved. (If troop, include troop number, program age level, name of leader; indicate if member or non-member.) _____

Names of parents, addresses, phone numbers _____

Others involved (Police, Fire, Medical Aid, etc.)

Cause of accident or occurrence (How? If automobile or bus involved, give details on owners, operators.)

Witnesses (Those who were present or observed occurrences) (Include names and addresses)

General Comments

Signatures

Dates

Signatures

Dates

#48 R7/02
R6/03