

## ACCIDENT, INCIDENT, AND CRISIS REPORT

Complete this form within 48 hours for any of the following situations. Follow the instructions in the GSVSC Emergency Procedures (#1088). Use additional paper wherever needed. Failure to complete and submit this report may lead to disciplinary action, up to and including release from volunteer service.

### Accident/Injury

Any situation in which someone is injured or becomes suddenly ill for which first aid or treatment is provided by a first-aider or medical professional (doctor, nurse, rescue squad, or medical facility).

### Incident

Any situation including **but not limited to** any of the following:

- Individual(s) who do not observe rules or policies of GSVSC or GSUSA
- An allegation of inappropriate use of Girl Scout funds
- Any situation involving violence or the threat of violence (verbal or physical)
- An alleged theft
- An allegation of physical, mental, emotional, or sexual abuse, harassment, or neglect
- Intruders, vandalism, or property damage
- Product tampering
- Girl Scout image or media issues
- Name calling; cultural, religious, or racial slurs
- Appearance of illegal drugs or unrecorded prescription drugs
- Blood/bodily fluids exposure (An exposure is direct contact via eye, nose, mouth, or skin with someone else's blood or bodily fluids (or via a needle stick or cut). Properly handling blood/bodily fluids while wearing/using gloves or other protective equipment is not an exposure. In the event of an exposure, seek the advice of a physician and report the exposure on the first working day. Follow up with this completed form.)

### Crisis

Any situation including **but not limited to** any of the following:

- An injury or illness that is likely to result in death or disability
- A serious behavior problem
- A site emergency or evacuation such as a fire, flood, or other natural disaster
- A missing person

Fax the completed form to the attention of the resources specialist at 540-777-5157 **or** mail it to: Girl Scouts of Virginia Skyline Council, Attn: Resources Specialist, 3663 Peters Creek Road, NW, Roanoke, VA 24019-2809.

**GSVSC emergency number: 1-866-654-8029 (toll-free)**

Person reporting:		Date:	
Day phone number:	- -	Evening phone number:	- -
Describe what happened.			
List any equipment involved.			

**Continued →**

Where did this occur (include the name of the camp, event, etc.)?

Describe the exact location. Use a diagram if appropriate.

What time?      a.m.   p.m.

If an individual was injured, describe the injury and identify the injured person or persons.

Describe any medical or first aid treatment given and who gave it.

List in order the actions taken to deal with the accident/incident/crisis (i.e., 1, 2, 3).

**List those involved:**

Name	Age	Sex	Address	Troop Number

**If any involved are minors, complete the following:**

Child's Name	Parent/Guardian's Name	Address	Phone Number
			- -
			- -
			- -

Record parent reactions when notified.

**List others involved and their jurisdiction, name, and contact phone number:**

Law enforcement:
Fire department:
Medical aid (event first-aider, rescue squad, etc.):
Hospital:
Other:

List the name of the GSVSC representative contacted and the time contacted.

Describe any contact made with the media regarding this situation. If known, list their name and media affiliation.

Was a GSUSA United of Omaha claim form given to anyone? List name and address.

Signature:	Date:
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Check here if additional pages are attached.  How many are attached?