

Incident/Accident/Crisis Report

GSVSC Emergency Number: 540-598-0974

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. Complete and submit this form **within 48 hours to the CEO (info@gsvsc.org)** for any of the following situations:

Incident/Behavioral

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

- Individual(s) who do not observe procedures or policies of Girl Scouts of Virginia Skyline Council or Girl Scouts of the USA
- Individual(s) who demonstrate behaviors NOT in accordance with the Girl Scout Promise & Law
- 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, neglect or sexual abuse, sexual assault or harassment including bullying, stalking, inappropriate texting or social-media messaging
- Intruders, vandalism, or property damage
- Product-tampering
- Girl Scout image or media issues
- Name-calling; cultural, religious, or racial slurs or cursing
- Appearance of illegal drugs, unrecorded prescription drugs, or drunkenness

Accident/Injury/Illness

- 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, fire department, or medical facility).
- Exposure to blood/bodily fluids (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 that resulted in a police report
- A site emergency or evacuation such as a fire, flood, or other natural disaster
- A missing person

If more than one person is injured or responsible for incident/accident/crisis, complete a separate form and describe the incident/accident/crisis only once.

Email this report within 48 hours to info@gsvsc.org (use email subject "INCIDENT REPORT").

INFORMATION OF PERSON REPORTING	
Name of Person Reporting:	
Date of Report:	
Title/Position of Person Reporting (i.e. parent, guardian, troop leader, camp director)	
Cell phone #:	

Home phone #:	
Email:	
Troop #:	
Girl Scout Service Unit (city/county of residence)	
Troop Grade Level (Daisy, Brownie, Junior, etc.)	

INCIDENT/ACCIDENT/CRISIS INFORMATION

Type: Incident/Behavioral Accident/Injury/Illness Crisis

Date of Incident/Accident/Crisis	
Time:	
Event Name Where Occurred:	
Type of Event:	
Location/Physical Address Where Occurred:	
Called GSVSC emergency phone: yes no	
Date/Time of Call:	
GSVSC Staff Member Notified:	
Described what happened:	

LIST THOSE INVOLVED

Name	List: girl, boy, adult female or adult male	List: Girl Scout member, non-member or staff	Role in accident/incident/crisis (parent, leader, girl member, sibling, etc.)	Troop # & GS grade-level

IF ANY INVOLVED ARE MINORS, COMPLETE THE FOLLOWING

Child's Name	Parent's/Guardian's Name	Email	Phone Number

If the injured or responsible person is a minor, were parents/guardian contacted? Yes No

Yes No

Parents/guardians response to incident/accident/crisis (if applicable):

EMERGENCY/MEDICAL SERVICES INFORMATION

List in order the emergency, medical or first-aid procedures or actions taken to deal with the incident/accident/crisis. Please include person(s) providing services or taking action (if applicable.):

Were the police contacted? Yes No

Was a police report filed? Yes No

If a police report was filed, provide the name and phone number of the officer who took the report (if applicable):

Was the fire department contacted? Yes No

Was the rescue squad contacted? Yes No

Was anyone taken to the hospital? Yes No

Anything else you wish to include:

Were any additional witnesses present at the time of the incident/accident/crisis? If so, please list who and contact info if applicable:

Was the incident/accident/crisis resolved? Yes No

If no, please list what further action steps may be warranted?

MEDIA INFORMATION

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

GSUSA UNITED OF OMAHA CLAIM FORM INFORMATION

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

Signature:

Date:	
Were additional pages emailed to info@gsvsc.org : Yes No	