



All girls and adults going on a trip or camping should understand the following procedures and should have reviewed *Safety Activity Checkpoints & Volunteer Essentials* guidelines.

Each driver has:

- a. Permission Slips, form #208F, for passengers in that vehicle.
- b. Girl Member Information Sheet, form #260F, for passengers in that vehicle.
- c. Trip Itinerary and Roster sheet, form #574T or #578T.
- d. These Emergency Procedures, form #579T.
- e. First aid kit, including insurance forms.

Each person has information concerning the procedure to follow if s/he becomes separated from the group:

- a. Cars go to an agreed upon checkpoint or destination.
- b. Girls go to an agreed upon checkpoint.
- c. Girls are told what to do if they are left behind.

For all first aid or emergency situations a written report will be made within 24 hours to the council emergency contact using the form on the reverse side. With the report, also submit as appropriate:

- a. Mutual of Omaha Insurance claim form.
- b. Written statements to authorities; read, approved and signed (keep a copy).
- c. Sketch of the scene.

Do not release permission slips or medical records to authorities. Keep the originals.

First aid treatment:

- a. Qualified first aider will give treatment according to proper first aid procedures.
- b. A report of treatment will be written and retained.
- c. Parents will be notified of first aid treatment.

Natural disaster (e.g., fire, flood, storm):

- a. Move girls to a safe location.
- b. Place someone in charge of the group.
- c. Report to the proper authorities, such as a forest ranger, sheriff, police, or fire department.
- d. Notify the at-home contact who will notify families and the council emergency contact.
- e. Send the written report within 24 hours.

Injury or illness that requires hospitalization or emergency room care:

- a. Follow proper first aid procedures in treating the injured person(s); secure proper medical care.
- b. Notify and request assistance from sheriff, police, highway patrol, ambulance, doctor, or clergy as appropriate.
- c. Notify the at-home contact who will notify families and the council emergency contact.
- d. Send the written report within 24 hours.

Girl Scouts of Eastern Oklahoma Emergency Procedures

IN CASE OF EMERGENCY (NIGHTS/WEEKENDS):

GENERAL EMERGENCIES	918-277-6038
FACILITY/PROPERTY EMERGENCIES	918-779-5977

AT-HOME CONTACT: _____

PHONE: _____

DURING REGULAR BUSINESS HOURS:

HARDESTY LEADERSHIP CENTER,

TULSA 918-749-2551 OR 800-707-9914

POISON CENTER HOTLINE 1-800-222-1222

Accidental or natural death:

- a. Notify and request assistance from sheriff, police, highway patrol, ambulance, doctor, or clergy as appropriate.
- b. A responsible adult must remain at the scene. See that victim and surroundings are not disturbed until the proper authorities have assumed control.
- c. Place someone in charge of the group and separate them from the scene.
- d. Notify the chief executive officer. The council will contact the family in case of fatality or imminent death.
- e. Send the written report to the chief executive officer within 24 hours.

Unusual or suspicious activity or intrusion:

- a. Contact proper authorities – camp ranger, sheriff, police or highway patrol as appropriate.
- b. Remove group from the scene if the safety of any member is ever in question.
- c. Notify the council emergency contact.
- d. Notify the at-home contact of any change in site.

Suspected child abuse:

- a. Call the Child Abuse Hotline: 1-800-522-3511.
- b. Notify customer care at GSEOK, who will in turn notify the chief executive officer.
- c. Remember the confidentiality of the child or children must be maintained.

**IN CASE OF SERIOUS ACCIDENT OR CRISIS,
MAKE NO PUBLIC STATEMENTS,
REFER INQUIRIES TO THE COUNCIL
EMERGENCY CONTACT.**



**GIRL SCOUTS OF EASTERN OKLAHOMA
ACCIDENT/INCIDENT REPORT FORM**

Troop # _____ Leader Name _____ Date of Accident/Incident _____ Time _____ a.m. p.m.

Name of Injured _____ *Last* _____ *First* _____ *Middle* _____ Age _____ Phone _____ *Area/Number* _____

Address _____ *Number & Street* _____ *City* _____ *State* _____ *Zip* _____

Where did accident/incident occur? (Be specific. Include location of injured and witnesses. Use additional paper for diagrams)

Names/Addresses of Witnesses (**Attach signed statements detailing accident/incident**)

1. _____
2. _____
3. _____

Describe accident/incident in detail, including what the injured person was doing at the time.

Emergency procedures followed at time of accident/incident _____

By whom? _____

Were parents notified? No Yes By whom? _____ Date and Time _____

Parent Response/Directions _____

Was any contact made with the media? Describe

Persons notified (Name, Position and Date Notified)

This form, along with the completed Insurance Claim Form for Mutual of Omaha, must be submitted to the council emergency contact at the Girl Scout Hardesty Leadership Center in Tulsa within 24 hours of the accident/incident. In the case of multiple injuries, a separate report and Insurance Claim Form must be completed for each person. THESE FORMS ARE REQUIRED EVEN IF PROFESSIONAL MEDICAL TREATMENT OR HOSPITALIZATION WAS NOT PROVIDED AT THE TIME OF THE ACCIDENT/INCIDENT.

Address: 4810 South 129th East Avenue, Tulsa, 74134, Fax #749-2556 OR toll free Fax #866-749-2556.

Submitted by _____ Position _____ Date _____

#579T 11/25