



## **Guidelines for dealing with an Incident/Accident**

Emergency contact numbers are available on the register taken each training session/match.

- Stay calm but act swiftly and observe the situation. Is there danger of further injuries?
- Listen to what the injured person is saying.
- Alert the first aider who should take appropriate action for minor injuries.
- In the event of an injury requiring specialist treatment, call the emergency services.
- In the case of junior teams deal with the rest of the group and ensure that they are adequately supervised
- Do not move someone with major injuries. Wait for the emergency medics.
- For Under 18s contact the injured person's parent/carer. For senior members use the emergency contact details.
- Complete an accident/incident report form.

## Incident/Accident Report Form

Venue	Location of accident/incident									
Date of accident/incident	Name of individual(s) who dealt with the accident/incident									
Nature of accident/incident										
Details leading up to the accident/incident										
Details of all club members involved										
Details of action/events after the accident/incident										
Give full details of action taken during any first aid treatment and the name(s) of first-aider(s).										
Were any of the following contacted? <table border="0" style="width: 100%;"> <tr> <td>Parents/carers</td> <td>Yes <input type="checkbox"/></td> <td>No <input type="checkbox"/></td> </tr> <tr> <td>Police</td> <td>Yes <input type="checkbox"/></td> <td>No <input type="checkbox"/></td> </tr> <tr> <td>Ambulance</td> <td>Yes <input type="checkbox"/></td> <td>No <input type="checkbox"/></td> </tr> </table>		Parents/carers	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Police	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Ambulance	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Police	Yes <input type="checkbox"/>	No <input type="checkbox"/>								
Ambulance	Yes <input type="checkbox"/>	No <input type="checkbox"/>								
What happened to the injured person following the incident/accident? e.g. carried on with session, went home, went to hospital etc.										
<p align="center"><b>All of the above facts are a true record of the accident/incident</b></p> <p>Signed .....Date.....</p> <p>Print name .....</p>										