



SAMPLE **EMERGENCY** **ACTION PLAN**

Given that there is an element of risk in all physical activity, an encounter with an injury or medical condition is highly possible. Recognizing this fact, it is necessary to establish a plan of action. The key to the Emergency Action Plan is getting professional care to the injured/ill participant as quickly as possible. For that to happen efficiently and effectively, you must be prepared with an Emergency Action Plan. The following is a sample Emergency Action Plan.

It is important to take into consideration the content of the facility's (e.g. school, community centre, etc.) Emergency Action plan.

▶ **A. PREPARATION**

You should know the following information:

- ▶ Location and access to the first aid kit.
- ▶ Location and access to a telephone.
- ▶ Emergency telephone number of ambulance and hospital (911).
- ▶ Directions and best access routes to the nearest hospital.
- ▶ Access to suitable and available transportation.
- ▶ Identity of participants with medical conditions (e.g. asthma, life-threatening allergies, diabetes, epilepsy) and physical limitations (e.g. cerebral palsy).
- ▶ Location of medication (e.g. epinephrine auto injector, asthma reliever, fast acting sugar)
- ▶ Emergency communication procedures (e.g. cellular phone) for off-site activities.

▶ **B. WHEN AN INJURY/MEDICAL CONDITION OCCURS**

- ▶ When coming in initial contact with the injured/ill participant, take control and assess the situation. Exercise universal precautions related to blood/bodily fluids (refer to the Resource Material: Universal Precautions – Blood and Bodily Fluids).
- ▶ Keep in mind the cardinal rules of injury care:
 - Do not move the injured participant.
 - If a participant cannot start a movement by herself, do not move the body part for him/her.
- ▶ Stay calm. Keep an even tone in your voice.
- ▶ Instruct any bystanders to leave the injured/ill participant alone.
- ▶ Do not remove the participant's equipment if there is a risk of further injury.



- ▶ Evaluate the injury/condition. Once you have assessed the severity, decide whether or not further assistance is required or medication is needed.
- ▶ Administer medication as per Program Provider policy.
- ▶ If an ambulance is not needed, decide what action is to be taken to remove the injured/ill participant from the playing surface.
- ▶ The following symptoms may be a warning sign for Sudden Arrhythmia Death Syndrome (SADS). If a participant experiences one of the following, call 911:
 - Fainting or seizure during physical activity.
 - Fainting or seizure resulting from emotional excitement, emotional distress or from being startled (e.g. a sudden loud noise such as a school fire alarm system).

The participant must seek medical attention before they can return to the activity for the following situations.

- ▶ Emergency situations that are an automatic 911 call:
 - Loss of consciousness (altered level of consciousness or lack of awareness of surroundings)
 - Fainting
 - Uncontrolled bleeding
 - An injury or illness that threatens life or limb
 - Anaphylactic reaction, asthma or any other phenomenon that compromises the airway and/or ability to breathe
 - If the injured participant cannot be transported legally in a passenger vehicle
- ▶ If an ambulance is required:
 - Request assistance from another person (e.g. Program Leader or Program Supervisor).
 - Have this person call an ambulance with the following information:
 - The nature of the emergency;
 - The location and closest cross-streets; and
 - The telephone number from where you are placing the call.
 - Have this person report back to the person in-charge of the injured/ill participant to confirm that the call was made and give the estimated time of ambulance arrival.
 - Have this person go to the access entrance and wait for the ambulance.
- ▶ Once the call has been placed, observe the participant carefully for any change in condition and try to reassure him/her until professional help arrives.
- ▶ Do not force the participant to move unnecessarily.
- ▶ In the case of dehydration, move the participant to a cooler environment and provide small amounts of water (100ml) every 5 minutes until symptoms resolve. However, do not provide an injured participant with food or drink if:
 - The participant is showing signs of decreased level of consciousness;
 - The participant has sustained a significant head injury;
 - You anticipate an operation will be necessary (e.g. broken leg).
- ▶ When the ambulance attendants arrive, inform them of what happened, how it happened and what you have done. If possible, you can inform them of the participant's medical-related problems or past injuries.
- ▶ The person in-charge must designate a responsible adult (e.g. Program Leader or Program Supervisor) to accompany the injured participant to the hospital to help reassure the participant and give the relevant medical history and injury circumstances to the physician.
- ▶ The parents/guardians of the injured/ill participant must be contacted as soon as possible.
- ▶ Complete an accident report and file it with the appropriate Supervisor.