GSNorCal
Health & Safety Plan
For Activities & Events

Emergencies happen... be prepared!

The Girl Scout First Aider’s Guide to: Illness, Accident and Injury Prevention & Treatment
You’re a Girl Scout First Aider!

Welcome,
Thank you for taking the time to become a Girl Scout First Aider and for your commitment to the health and safety of girls. This manual is your reference guide to the Girl Scouts of Northern California’s rules, responsibilities, processes, procedures, and treatment protocols for giving first aid during Girl Scout activities and events. You will want to refer to this manual as well as the Girl Scouts of Northern California’s Volunteer Essentials and health manual from your First Aid/CPR certification course. Your council staff is eager to assist you if you have questions or need any other support. Contact: info@girlscoutsnorcal.org.

Congratulations on becoming a Girl Scout First Aider!

About this booklet:
This booklet is intended as a guide for first aiders for troop/group activities and also for service unit activities and events. Note: First Aiders for day and resident camps require additional health care considerations regarding the first aider qualifications, on-site health care, treatment protocols, illness/injury documentation and form retention. If you will be serving as a Girl Scout First Aider for a volunteer run day camp or resident camp, you must refer to the Volunteer Run Camp Administrative Guide for specific information and guidelines for day and resident camps or contact the Outdoor Program department at volunteercamps@girlscoutsnorcal.org.

Make sure you reference these links periodically to ensure that you are always referencing the most current material:

Volunteer Essentials

To access, download, or print your free copy:
http://ve.girlscoutsnorcal.org/ve/
THE ROLE OF ADULTS IN HEALTH CARE

The health and safety of each girl is every adult’s responsibility. All adults involved share the responsibility for prevention of injuries and illnesses.

1. In Girl Scouting, the emotional and physical well being of girls is always a top priority. *The Volunteer Essentials, Safety-Wise* section has what you need to know to keep the girls safe. All volunteers that attend and supervise girls during Girl Scout activities and events must agree to adhere to the Girl Scouts Safety Guidelines (pg. 24). Distribute a copy to all responsible adults attending the activity/event.

2. First aid administered in the first few minutes can mean the difference between life and death. Calling for help is often the most important action you can take. In an emergency, secure professional medical assistance as soon as possible, normally by calling 9-1-1.

3. Any situation requiring more than basic first aid must be referred to the designated first aider.

4. Universal precautions MUST be followed by all, including the proper use and disposal of soiled gloves and bandages.

5. Group leaders and event staff members must oversee basic sanitary/hygiene conditions. This includes but is not limited to washing before snacks and meals, after using the restroom, brushing teeth, keeping area clean, etc.

All responsible adults should have a copy of the GSNorCal Emergency Cards and understand and have a copy of the GSNorCal Emergency Management plan (page 18). Download the Council Emergency Card at [http://www.gsnorcal.org/content/dam/girlscouts-gsnorcal/documents/safety_risk_management/safety-risk-management-council-emergency-card.pdf](http://www.gsnorcal.org/content/dam/girlscouts-gsnorcal/documents/safety_risk_management/safety-risk-management-council-emergency-card.pdf)

6. Troop/group leaders, other adults, and event staff who are not serving as the designated first aider are limited in the type of first aid they can administer. A basic first aid kit provides the individual with the resources to treat minor cuts, bug bites, etc. The adult cannot go beyond her/his first aid or medical training and the scope of the first aid kit. At no time shall an adult who is not the designated first aider administer any medications, including over the counter medications or remedies. The designated first aider holds this responsibility, and may only do so with the prior written permission of the girl’s parent, guardian or physician.

Any situation requiring more than basic first aid must be referred to the designated first aider.

1. Only an adult with current First Aid/CPR training certification should provide any medical care for a victim except in the case of extreme emergency until qualified help arrives.

2. The designated first aider holds the responsibility in administering any medications, including over the counter remedies and may do so only with the prior written permission of the girl’s parent, guardian or physician.

3. If a troop/group leader has written authorization to administer medication at the event, this treatment must be entered into the event health log held by the activity/event first aider and initialed by the troop/group leader (page 11).

4. The troop/group leader or event manager must be notified as soon as possible after any girl or adult has been treated by the first aider. Decisions about when and how to contact parents should be made jointly by the first aider and the troop/group leader or event manager.

5. Most health care will result in communication with the parent. In a non-emergency situation, please call the parent/caregiver before making decisions to transport or have a girl transported to medical care. If parent/caregiver is not available, the troop/group leader or event manager along with the first aider will consult with council.
Ensure Everyone is Properly Trained

- Make sure all adults that will supervise girls are properly screened, registered and trained.
- Adhere to the Adult-to-Girl Ratios for activities or events listed in Volunteer Essentials.
- Make sure all drivers and adults in attendance understand the GSNorCal Emergency Management Plan and specific procedures for the activity. The Emergency Management Plan can be found in Volunteer Essentials and page 20 in this booklet. All drivers should have a first aid kit in every vehicle.
- Verify expert qualifications: The Safety Activity Checkpoints for most activities require having an expert on hand to help girls learn an activity. Require written evidence of competence or documented training and experience when determining whether someone is an expert in the field for activities (e.g. lifeguard, archery instructor).
- Ensure that all girls understand expectations and rules:
  - Should they stay with a certain adult?
  - Where is it OK to go? With whom?
  - What should they do if they become separated from the group?
  - What are the bathroom procedures?
- Know the level of First Aider required for the activity/event. The levels of first aid required for any activity take into account both how much danger is involved and how remote the area is from emergency medical services.

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<th>Access to EMS</th>
<th>Minimum Level of First Aid</th>
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<td>Less than 30 minutes</td>
<td>First Aid/CPR</td>
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<tr>
<td>More than 30 minutes</td>
<td>Wilderness First Aider (WFA) or Wilderness First Responder (WFR)*</td>
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All Girl Scout First Aiders are required to take the online “Girl Scout First Aider” course before serving as the Girl Scout First Aider for activities and “Girl Scout Event First Aider” for events. To take this online course go to http://training.girlscoutsnorcal.org.

A Girl Scout First Aider with a current First Aid/CPR certificate who has completed the online Girl Scout First Aider & Girl Scout Event First Aider course is required for:
- Activities/events **less than 30** minutes from EMS
- Many troop/group activities as required by Safety Activity Checkpoints
- Events
- Day/Resident Camp*

*Note: Day and resident camps require additional health care considerations regarding the first aider qualifications and on-site health care/treatment protocols and documentation. If you will be serving as a Girl Scout First Aider for a day or resident camp, please refer to the Volunteer Run Camp Administrative Guide or contact the Outdoor Program department at volunteercamps@girlscoutsnorcal.org.

A Girl Scout First Aider with Wilderness First Aid (WFA) or Wilderness First Responder (WFR) certificate who has completed the online Girl Scout First Aider course is required for:
- Activities/events **more than 30** minutes from EMS
- When required by Safety Activity Checkpoints

For Large Events:
One Girl Scout First Aider is required for every 200 participants.
Check Safety Activity Checkpoints

- Accesssm Download, or Print
- Review before each activity


When preparing for any activity with girls, start by reading the Girl Scout Safety Activity Checkpoints for that particular activity. Pay close attention to the “Prepare for Emergencies Section” of each checkpoint.

Each Safety Activity Checkpoint offers you information on:
- Where to do this activity
- How to include girls with disabilities
- Where to find both basic and specialized gear required for the activity
- How to prepare yourselves in advance of the activity
- How to prepare for emergencies and what precautions to take.
- What specific steps to follow on the day of the activity, and so on.

If Safety Activity Checkpoints do not exist for an activity you and the girls are interested in, check with GSNorCal Risk Management Team before making any definite plans with the girls. A few activities are allowed only with written council pre-approval and only for girls 12 and over, while some are off-limits completely. (See page 6 of this document or Volunteer Essentials for more information).

Safety Activity Checkpoints and Girl Scout Safety Guidelines are designed to keep the girls and adults safe and to protect the adults and the council from legal liability.
### Before
**The Activity/Event**

### During
**The Activity/Event**

### After
**The Activity/Event**

# Know Which Activities Are High Adventure

## Activities: Written Pre-Approval From the Council Needed

**Caution:** You must get written pre-approval from GSNorCal Risk Management Team at least one month prior to the event for the following activities:

- Contact [travel@GirlScoutsNorCal.org](mailto:travel@GirlScoutsNorCal.org)

- **Any overnight trip** (including camping outings), trips involving air travel, day trips or international trips.

- **Land Sports:** archery, backpacking, bicycling with vendor-supplied bicycles, “bounce houses”, camping, caving, challenge/ropes courses, climbing walls, fencing, gymnastics, horseback riding, ice skating, indoor skydiving (not allowed for Daisies and Brownies), indoor trampolining, in-line or roller skating, marksmanship* (girls ages 12 and older), rock climbing, Segway, skateboarding at a skateboard park, skiing (cross-country or downhill), sledding, snowboarding, snowshoeing, snow tubing, tobogganing, vaulting (on horseback) or when girls ages 12 and older (not allowed for younger girls) will operate motorized vehicles, (driving or riding all-terrain vehicles, motor bikes, and go-karts is never allowed).

*Marksmanship activities require volunteers to transport weapons separately from girls. The minimum age for girls using firearms in highly supervised activities is 12 years old.

- **Water Activities:** boating, canoeing, kayaking, rafting, sailing, scuba (girls ages 12 and older), snorkeling, surfing, swimming, tubing, water skiing or wakeboarding, windsurfing, any type of trips on waterways that are highly changeable or uncontrollable (Class V and higher watercraft trips are never allowed), or when girls ages 12 and older (not allowed for younger girls) will operate motorized watercraft.

## Activities That Are Never Allowed

**Warning:** The following activities are never allowed for any member, and are not covered by Girl Scout Insurance:

- Flying in noncommercial aircraft, such as small private planes, helicopters, sailplanes, hot-air balloons, or blimps.

- Potentially uncontrolled free-falling (bungee jumping, hang gliding, parachuting, and parasailing, skydiving, and outdoor trampolines).

- Creating extreme variations of approved activities (such as high-altitude climbing and aerial tricks on bicycles, skis, snowboards, skateboards, water skis, and wakeboards, or stunt skiing)

- Jeep tours where participants will not be wearing seatbelts

- Hunting

- Shooting a projectile at another person, such as paintball

- Riding all-terrain vehicles, motor bikes, or go-karts

- Riding motorized personal watercraft like jet-skis

- Tomahawk/Knife Throwing

- Outdoor Trampolines

- Simulated skydiving and zero-gravity rooms

- Trapeze, including aerial ballet

- Taking watercraft trips in Class V or higher whitewater

- Zorbing

## Which activities are considered “high adventure”??

The activities specified as high-adventure activities, which is not intended as an exhaustive list, are included because they fit into one or both of the following categories:

1. The activity involves a reasonable expectation of physical risk to the girls

2. The activity involves legal risk to the adult volunteers and/or the council. These include situations where rider or other additional insurance may be required, vendor or facility contracts may need to be signed, adults must be certified in a specific skill, or other specific critical guidelines must be followed to ensure the safety of the girls.

## Activities that are not allowed are not covered by Girl Scout insurance. Restrictions on activities are set to ensure the girls’ safety, protect the council’s and adult volunteers’ legal interests, or both.

## The Trip or High-Adventure Activity Form must be used whenever the girls participate in any high-adventure activity OR a trip of any length
### Assemble a First Aid Kit

#### Recommended First Aid Supplies List
- Council Emergency Card
- 25 adhesive bandages (assorted sizes)
- 1 adhesive cloth tape (10 yards x 1 inch)
- 5 antiseptic wipe packets
- 1 blanket (space blanket)
- 1 breathing barrier (with one-way valve)
- 1 instant cold compress
- 2 pair of non-latex gloves (size: large)
- Scissors
- 1 roller bandage (3 inches wide)
- 1 roller bandage (4 inches wide)
- 5 sterile gauze pads (3 x 3 inches)
- 5 sterile gauze pads (4 x 4 inches)
- Oral thermometer (non-mercury/non-glass)
- 2 triangular bandages
- Tweezers
- First aid instruction booklet
- Sealed bags to dispose of medical waste
- First Aid Log Book and pen

You May Also want to consider:
- Flashlight
- Flares
- Whistle
- Radio
- GPS

Always have a well-stocked first aid kit at every Girl Scout meeting, activity, event or trip. Drivers of each car should also have a first aid kit.

1. **Inventory all first aid supplies and equipment.** An inventory of first aid station supplies and equipment is taken at the opening and closing of the activity/event. Supplies are stocked and resupplied as needed.

2. **The first aid kit may be customized to cover specific needs,** however, the Girl Scout first aider is limited in the scope of treatment and should provide first aid care, not comfort care. That includes, no over the counter medication like: aspirin, cough syrup or other medications. No antibiotic ointment, hydrocortisone cream or other topical ointments may be applied to girls without written permission from the custodial parent/guardian.

3. **First aid kits should contain emergency numbers.** In addition to standard materials, all first aid kits should contain the GSNorCal Emergency card with office telephone numbers and emergency phone number **1-877-636-1912**, as well as contact information for parents/guardians, and emergency services such as the police, fire department, poison control, and local hospital.

4. **First Aid Kits should contain report forms:** The following forms should be included: Accident/Injury Report, Incident Report, Mutual of Omaha claim form, and Media Information Sheet. Download PDF forms in order to have copies with you.

5. **First aider will organize a system of managing daily or as needed medications,** in consultation with the troop/group leader or event manager. Medications must be in their original container with instructions from the parent/guardian (for over the counter) or physician (if prescription).

6. **All medicines, including those used by adults, are kept in locked boxes at the first aid station.** Medications are dispensed to girls/adults by the first aider per written physician's instructions or the girl's custodial parent or guardian. Some girls may need to carry and administer their own medications, such as bronchial inhalers, EpiPen, or diabetes medication. You may need to assist with this type of medication, make sure you know how.
## Secure Health History/Permission Forms

**Health History Forms** should be at the activity/event for all girls (and adults for overnight activities/events). If emergency medical care is needed, the patient’s health history form should accompany the patient. For extended activities/events or where location is remote, consider asking girls to provide their troop leaders with a copy of their medical insurance card.

The first aider must review the Health History forms for completeness and check for appropriate signatures and other important information such as:

- Current medications and/or treatment procedures
- Dietary restrictions for notification
- Allergic reactions and physical limitations
- Any activity limitations or restrictions

**Girl Health History** forms contain girls’ medical history and receive permission from parent/guardian for emergency medical treatment. They should be kept in sealed envelopes, in a secure location. If girls will be participating in any overnight activity, health histories must be updated (signed and dated by custodial parent/guardian) within 2 months.

**Girl Health History Form with Physical** is required for resident camp or trips longer than three nights, or when girls will be participating in physically demanding or strenuous activities. A health examination within the previous 24 months is required. Event staff who are minors also require parent permission for emergency care.

**Adult Health History** is required for all adult participants at any overnight event.

**Adult Health History with Physical** is required when adults will participate in any trip longer than three nights or in physically demanding or strenuous activities. A health examination within the previous 24 months is required.

**Objections to immunization.** For various reasons, some parents/guardians may object to immunization or medical examinations. Check with council staff with concerns.

**Health History Forms are Confidential.** Sharing of this information with other adults must be done only on an as-needed basis, such as information about allergies or activity limitations.

**Parent permission** shall be obtained from each girl’s custodial parent or guardian for emergency and basic health care on the health history form.

### IMPORTANT NOTES:

- Medication, including over the counter products, must never be dispensed without prior written permission from a girl’s custodial parent or guardian. Some girls may need to carry and administer their own medications, such as asthma inhalers, an EpiPen or diabetes medication.

- If girls will participate in the event as individuals, the designated first aider maintains responsibility for health history forms.

- If girls will participate with their troop/group, the troop/group leader (may) maintain responsibility for the health history forms for the girls in the troop/group.

- If emergency medical care is needed the patient’s health history form should accompany the patient.

- **Retention of Health History forms** a copy of the Health History forms for any participant who required treatment from the first aider must be turned in to the service unit or council with the health log after the event. For all participants who were not treated, the forms should be returned to the troop/group leader or destroyed.
Prepare For Emergencies

As you know, emergencies can happen. Volunteers and girls need to receive proper instruction in how to care for themselves and others in an emergency. They also need to learn the importance of reporting any accidents, illnesses, or unusual behaviors during Girl Scout activities. To this end, you can help:

1. **Be Prepared.** Always have a well stocked first aid kit, Girl and Adult Health History Forms and contact information for girls families.

2. **Check Safety Activity Checkpoints.** Check activity specific Safety Activity Checkpoint to determine the type of first aid needed and to learn safety requirements and guidelines for the activity.

3. **Ensure Adult Supervision.** Establish a security plan to ensure that girls are properly supervised by adults at all times. Ensure enough adults are present according to the adult/girl ratios. Make sure that if someone is injured and needs help, that one volunteer cares for the injured person while another volunteer seeks help.

4. **Identify Site Hazards.** When arriving at a new location, look for potential hazards; cliff, lake, drop-off, uneven or slippery terrain, poison oak, sharp or potentially harmful objects. Establish boundaries and off-limit areas.

5. **Get a Weather Report.** If severe weather conditions prevent the activity, be prepared with a back up plan or alternative activity and/or postpone the activity.

6. **Use the Buddy System.** Girls are divided in teams of two. Each girl is responsible for staying with her buddy at all times, warning her buddy of danger, giving her buddy immediate assistance if safe to do so, and seeking help when the situation warrants it. During the activity or event, adults in charge must conduct periodic buddy checks.

7. **Establish an Emergency Signal.** Site security also includes reviewing all possible hazards, “do’s and don’ts” and having an established signaling system to signal that there is an emergency; an air horn, bull horn, whistle, or other signaling devise.

8. **Respond to an Emergency Signal.** It is important to teach the girls to recognize the agreed upon emergency signal and how to respond when they hear it. Where should they go? What adults should they report to?

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**Emergency Evacuation Plan**

An emergency evacuation can occur for a number of reasons; fire, weather, or a natural disaster. You should establish and communicate the emergency evacuation plans with all participants. Specific emergency plans for the activity/event should include evacuation plans especially in situations where girls have been dropped off. This is very important if there are not enough vehicles on site during the activity/event to evacuate all the participants.

- **Who is in charge?** In an evacuation situation it is important for all adults and girls to know who is in charge.
- **Parking.** It is a safe practice to instruct all drivers to back the cars into parking spots when attending Girl Scout activities and events, unless instructed otherwise, so that quick evacuation is possible.
- **Location.** Instruct participants where they should go and where the meeting location will be in the event of an evacuation or emergency.

**Notify the GSNorCal's Risk Management department before your troop/group activities or events.**

**For Troop Activities, Outings, or Trips:**
- Fill out the online *Trip or High Adventure Approval Form* and submit to council staff.
- Council staff will notify your service unit when your trip or event has been approved.
- Refer to Safety Wise chapter of the Volunteer Essentials for detailed information on this form and process.

**For Service Unit Events:**
- Work in partnership with the event manager to fill out the online *Event Notification form*
### Prepare Your Emergency Action Plan

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For troop/group activities girls can and should help develop the emergency plans. Younger girls could brainstorm safety rules, and older girls could develop the entire emergency plan with adult guidance from the troop/group leader and first aider. Although it is not required it is highly recommended, to work with the troop leader and girls to develop an emergency plan for your troop meetings and more specific plans for activities.

For events, it is required to have a written emergency action plan, the event manager along with the first aider will work together to develop the emergency plan and make sure that all girls and adults are prepared to respond in an emergency.

**Consider these items when developing your Emergency Action Plan (EAP)**

1. **Prepare.** With the girls and adults in the troop, discuss how to prepare and respond to the types of emergencies that are most likely to happen at your troop or group activity.

2. **Establish and practice** procedures for emergencies related to:
   - Weather emergencies
   - Fire
   - Natural disaster (earthquake, flood, etc.)
   - Lost Person(s)
   - Building security responses
   - Site hazards (lake, cliff, etc.)
   - Injuries or medical emergencies
   - Strangers or intruders
   - Evacuation plans

3. **Choose emergency contact in the group.** Have an at-home emergency contact who has all the participants’ contact information and the activity itinerary.

4. **Identify responsibilities** for each member of the troop and how you will work together as a team. The plan should include adult volunteer responsibilities in the case of an emergency, including:
   - Person(s) to give care
   - Person(s) to control bystanders
   - Person(s) to supervise other girls
   - Person(s) to meet EMS
   - Person(s) to transport injured Girl Scout when appropriate

5. **Post emergency numbers**, location and transportation routes of the following:
   - Police
   - Fire
   - Poison control
   - Nearest hospital
   - For large events, contact fire and police prior to events if it will be in a remote area or there are special parking, traffic or safety concerns.

6. **Site Layout** for easy access for emergency personnel, identify hazards, first aid station is marked and easy assessable, choose multiple meeting places-different disasters may require you to go to different places.

7. **Determine the best escape routes.** Find two ways to get out/evacuate.

8. **Practice your disaster plans** by running drills with your troop.

**Communications**

- Determine how parents will be communicated with in the event of an emergency. Decisions about when and how to contact parents should be made jointly by the first aider with the troop/group leader (if present) or the event manager for events.
- Know how to get council support in a crisis or emergency. Contact the council emergency team by calling the emergency number 1-877-636-1912 and follow the 8 steps in the emergency management plan in [Volunteer Essentials](#) or page 18 in this booklet.

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The written Emergency Action Plan procedures should be posted and practiced ahead of time so that every girl and adult knows how to act in these situations.
### Document Injury/Illness in Health Log

1. **The Health Log** will be maintained at the first aid station/health services area for keeping accurate records. The health log must:
   - Be a bound book
   - Have lined and numbered pages with no lines skipped
   - Have all records kept in ink.

2. All medical procedures, and/or any visit to the first aid station or contact with the designated first aider shall be recorded in the health log. If no treatment was given this shall also be recorded.

3. **Documentation must include:**
   - Name of patient
   - Complaint or type of injury
     - Detail of accident or emergency
   - Treatment or medication given
   - Date and time of treatment
   - Name of person administering treatment

4. The Health Log shall include a record of all medications taken by any girl/adult during the activity/event. Disbursement of medications shall be recorded in ink. If routine medication was not taken, an explanation of the reason shall be listed.

5. After the event, the Health Log should be returned to the troop/group leader or to service unit or council (wherever it was obtained).

6. Any group leaving the program/activity site must include at least one adult currently certified in first aid and CPR, who is able to administer medication, keep a health log and perform other mobile medical tasks.

7. Be sure all volunteer health history forms are treated confidentially. Although volunteers should keep girls’ health histories handy at all times, the health documentation of co-volunteers should never be have access to other volunteers. Guard the confidentiality of all adult health histories with the same zealouusness you would any other sensitive information.

Use the **acronym SAMPLE** to gain essential information about the patient’s medical history. Ask the patient questions, such as those listed below.

- **S = Signs and symptoms.** What are your signs and symptoms (i.e., what hurts)? How do you feel? Are you experiencing any pain, nausea, light headedness or other things that are not visible?
- **A = Allergies.** Do you have any known allergies or allergic reactions? What happens? Has there been any recent exposure? Check health history form for information.
- **M = Medications.** What medications are you taking? Are they over-the-counter or prescription? What is the medication for? When was it last taken? Can you tell me where the medication is so we can keep it with you? Check health history form.
- **P = Pertinent past medical history.** Has anything like this happened before? Are you currently under the care of a physician for anything?
- **L = Last intake and output.** When and what did you last eat or drink? How much? Are you cold, hungry or exhausted? When did you last urinate and defecate? Were they normal?
- **E = Events leading up to the injury or illness.** What led up to the incident? When did it happen? How did it happen, in order of occurrence?

Use these **SAMPLE questions** to guide you to record this information in the health log. The first aider should provide care according to the treatment protocols listed on pages 15—18.
## Communicate Procedures For Safety

### Before The Activity/Event

1. **Group Education:** Girls and adults will receive group education concerning emergencies from the first aider or event manager (or designee) at the beginning of the event.

   **Group Education Guidelines must include:**
   - **Check In/Out Procedures, Early Dismissals**
     Establish procedures for girls to check in and out of the activity/event, and procedures for girls who leave early. No participant should leave early without written permission from their custodial parent or guardian. Such requests must be submitted immediately upon arrival. Before leaving early, the participant must report to the appropriate responsible adult.
   - **Location of the first aid station.** Instruct participants to report all illnesses and injuries to their troop, unit, or group leader who will send them to the first aider if necessary.
   - **Instructions on site hazards; boundaries and off limit areas.** Everyone should understand that there are times and places for various activities.
   - **Established and practiced procedures for emergencies including:**
     - environmental emergencies
     - evacuation procedures
     - reporting health or safety issues
   - **Who is in charge in emergency situations and who they should report to in case of emergency.**

### During The Activity/Event

2. **Cleanliness:** Hand washing facilities must be located next to or in all restrooms. Girls should be reminded to wash their hands after using the rest room/latrines and before cooking or eating. Each troop/group is responsible for the cleanliness of the grounds around it. All areas at the event location shall be kept in a clean and orderly manner. Use adult and girl kapers to help ensure cleanliness. Those cleaning restrooms should be supplied with gloves and instructed in safe practices to avoid coming into contact with pathogens.

3. **Cooking Safety:** A nutritious menu should be planned to accommodate food restrictions and allergies. Cleanliness in handling food utensils is essential and must be stressed. Use ice chests for perishable foods. Make sure to store meat separately. (If using an industrial kitchen at least one adult in the kitchen must have a current ServSafe certificate).

4. **Food Allergens:** Be aware of food allergies, dairy products, eggs, soy, wheat, peanuts, tree nuts, and seafood. This means that, before serving any food (such as peanut butter and jelly sandwiches, cookies, or chips), ask whether anyone is allergic to peanuts, dairy products, or wheat! Even Girl Scout Daisies and Brownies should be aware of their allergies, but double-checking the health history forms or with their parents/guardians is always a good idea.

5. **Heat Sources:** Be sure loose clothing or long hair is tied back before working with fire. When using a cook stove be sure it uses butane, propane, or Sterno fuel only. Gasoline, white gas, etc., should not be used due to their highly volatile nature. If you are cooking over an open fire (wood or charcoal), clear brush, vines, and debris from fire area. Keep fires small. Take special care in windy or dry weather and always watch for sparks. Never leave fires unattended. Have water and a shovel nearby before the match is lit.

6. **Knife Safety:** Girls should be taught that knives are not toys and should be used only for specific activities under supervision. Girls should be instructed in how to handle and use knives in a safety circle, as well as to clean & store knives properly.

### After The Activity/Event

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**For Activities/Events lasting more than one day:**
- Include a fire drill within the first 24 hours.

**For Activities/Events lasting 3 days or more:**
- Include a health screening upon arrival.
  Look for signs of illness, cough, fever, flushed skin and screen for head lice.
## Treatment Protocols For
### Accident • Injuries • Illness

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<td><strong>Abrasions, Lacerations, Scratches, and Cuts:</strong> Inspect and cleanse with soap and water. Apply a sterile dressing, if necessary. If bleeding is severe or laceration extensive, apply a sterile pressure dressing and seek additional medical attention at once.</td>
<td><strong>Bleeding:</strong></td>
<td><strong>Blisters:</strong> Do not remove the skin from the blister once it has popped. Instead leave it there, clean with soap and water and apply a Band-Aid. Diabetics should always seek medical attention for blisters.</td>
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<td><strong>Allergy/Anaphylaxis:</strong> Assist the person to self administer their prescribed epinephrine auto-injector or Epi-pen, if available and if you are trained or have received instruction to do so. While waiting for help, make sure the person is sitting in a comfortable position or lie down if he/she is showing signs of shock.</td>
<td><strong>Arterial, venous</strong> – First use pressure with sterile dressing over wound (not tourniquet) to stop bleeding. If bleeding is on an extremity, elevate that extremity. If bleeding is severe, call 9-1-1 or seek additional medical attention at once.</td>
<td><strong>Burns:</strong> All burns should be treated with cool water for at least 10 minutes. Consider extensive second degree and third degree burns as serious injuries and the burned areas as open wounds. If possible remove clothing that might come in contact with the wound. Seek additional medical attention at once. If help cannot be contacted, cover with sterile compress and bandage loosely. Give the patient an abundance of fluids.</td>
</tr>
<tr>
<td><strong>Altitude Sickness:</strong> The person should rest and drink an abundance of fluids which may help the individual to acclimatize. If the symptoms persist or the person worsens, descend 2,000–3,000 feet or to the elevation where the person first began to feel badly. If she does not feel better, seek medical attention.</td>
<td><strong>Nose</strong> – Sit patient erect with head forward, gently and firmly compress nostrils with thumb and forefinger against nasal septum for 5-10 minutes. May use cold compress to forehead or to back of neck.</td>
<td><strong>Cold Related Injury:</strong></td>
</tr>
<tr>
<td><strong>Asthma Attack:</strong> Assist the person to self administer her prescribed quick relief medication if you are trained to do so or have received instruction from the girl’s parent/guardian. Loosen any tight clothing around the neck or abdomen. Seek medical attention if the person’s breathing trouble does not improve in a few minutes after using the quick-relief medication. <strong>NOTE:</strong> The person’s breathing should improve with 5 to 15 minutes. More than one dose of medication may be needed to stop the asthma attack. The label will tell you how long to wait between doses.</td>
<td><strong>Head</strong> – Cover the wound with a bulky dressing and press lightly. Monitor the patient for shock.</td>
<td><strong>Hypothermia</strong> – For mild hypothermia, gently warm in a warm bath (don’t immerse the person’s arms or legs) or use hot towels or blankets, warm air, or body-to-body contact. If able give small sips of a warm non-caffeinated liquid such as broth or warm water. For severe hypothermia, keep the patient from getting colder and transport to medical help.</td>
</tr>
<tr>
<td><strong>Bites:</strong> Control bleeding. If the wound is bleeding seriously, call 9-1-1. Wash minor wounds with soap and water. Apply ice or cold wet compresses. Observe for signs of allergic reaction.</td>
<td><strong>Bites:</strong> Control bleeding. If the wound is bleeding seriously, call 9-1-1. Wash minor wounds with soap and water. Apply ice or cold wet compresses. Observe for signs of allergic reaction.</td>
<td><strong>Frostbite</strong> – If medical attention can be obtained quickly, do not re-warm the affected part. Cover the frozen part with extra clothing or a clean cloth and transport the person to medical help.</td>
</tr>
<tr>
<td>• Tick – Remove any embedded tick with fine-pointed tweezers by grasping it very close to the skin and pulling upward firmly. Seal the tick in a container for healthcare provider.</td>
<td>• <strong>Mosquito/Tick</strong>—If flu-like symptoms develop within 2 weeks of a mosquito/tick bite, see a health care provider for evaluation.</td>
<td>• <strong>Spider</strong> – Call 9-1-1 immediately if you suspect that someone has been bitten by a black widow or brown recluse spider. Apply cold pack and elevate the bitten area.</td>
</tr>
</tbody>
</table>
## Treatment Protocols For Accident • Injuries • Illness

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<th>Before The Activity/Event</th>
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- **Dehydration:**  
  Encourage the person to drink plenty of fluids containing salt to replace what has been lost and to rest.

- **Diabetic Emergency:**  
  If the patient is alert and can safely swallow food or fluids and is known to have diabetes, give sugar (e.g., fruit juices, non-diet soft drinks, candy that can be chewed, sugar dissolved in water). Monitor the patient for changes in consciousness. Have the patient check his or her own sugar level, if he or she knows how. Seek medical assistance if the patient’s condition worsens.

- **Diarrhea:**  
  Give the patient water or diluted, clear, non-citrus fruit juices or sports drinks. Responsible adults should be notified to watch for other cases. If problem persists, patient should be sent home.

- **Ear Ache:**  
  Do not allow swimming. Monitor condition and check for fever. If problem persists contact parents to seek additional medical attention or send patient home.

- **Eyes (Foreign Objects):**  
  First allow natural tearing to wash out the object. Next, use saline (preferred) or water wash. If the object is still in the eye, small items in the white of the eye can be gently flicked out with the edge of a sterile gauze pad or cloth. If irritation persists or foreign object is not easily removed, apply dry protective covering to both eyes and seek additional medical attention. Never try to remove something from the colored part of the eye or anything stuck into the eye.

- **Fainting:**  
  Lower the person to the ground or other flat surface. Loosen any tight clothing. Check that the person is breathing. If the person vomits, roll her or him to one side. Call 9-1-1 or the local emergency number when in doubt about the condition of a person who has fainted.

- **Fatigue:**  
  Feeling tired or fatigued is common among many children. Make sure the child’s level of fitness matches the level of the activity. If you suspect a girl is fatigued allow her to rest between activities and encourage adequate fluid intake.

- **Head Injuries:**  
  Severe head and neck injuries should be treated by the Emergency Response Team (Call 9-1-1). If any head injury is accompanied by loss of consciousness (even brief), dizziness, vomiting or nausea, headache, nose or ears discharge, changes in vision or neck pain, call 9-1-1 to arrange to have patient transported to nearest medical facility. Do not try to transport a person with possible head, neck or back injuries.

- **Heat Related Illness:**
  - **Heat Cramps:**  
    Move the person to a cool place to rest. Encourage the person to drink fluids (sports drink, fruit juice, milk or water). Lightly stretch the muscle and gently massage the area. When cramps stop, the activity may be resumed. Encourage to keep drinking plenty of fluids, and watch carefully for additional signs of heat-related illness.
  - **Heat Exhaustion:**  
    Stop the physical exertion and remove the person from the heat to a cooler place. Remove or loosen the person’s clothing; apply cold packs or wet towels and sheets to the person’s forehead and body. Fan the person or move to an air conditioned room. Replace fluids by giving water to drink if she is conscious. She needs to drink as much as she can tolerate, but do not drink too quickly. If there is no improvement, seek medical assistance. A person should wait several hours after he/she is no longer having symptoms to resume activity.
  - **Heat Stroke:**  
    Get medical help as soon as possible. Heat stroke is a life threatening emergency. Move the person out of the heat to a cool place, remove clothing and cool her quickly; immerse her in a cool bath or wrap her in wet towels or sheets and fan her body or cool with air conditioning. Continue treatment until body temperature is lowered.

- **Impaled Object:**  
  DO NOT remove an object unless it interferes with urgent first aid (e.g., cardiopulmonary resuscitation (CPR). Control severe bleeding by packing a bulky dressing around the object. Apply gentle pressure and immobilize the object by bandaging around it. Reduce the size and weight of the object if possible.
Treatment Protocols For Accident • Injuries • Illness

- **Neck Injury**: Anyone who sustains a fall from higher than their own height, or has a blow to the head or neck and complains of neck pain should not be moved, and the first aider should supervise head immobilization and call 9-1-1 to arrange to have the patient transported to the nearest medical facility.

- **Poisoning**: For life threatening conditions (unconscious, not breathing or if there is a change in the level of consciousness), call 9-1-1 or the local emergency number. If the person is conscious and alert, call the National Poison Control Center (PCC) hotline at 1-800-222-1222 and follow the advice given.

- **Poisonous Plants**: Prevention Teach adults and girls to know and avoid the plants. After exposure, wear gloves, remove exposed clothing and wash all exposed areas with soap. Assess severity of reaction and cause. If area is extensive with weeping areas, contact parents to send patient home.

- **Seizures**: Do not try to stop the seizure. Do not hold or restrain the person. Do not place anything between the patient's teeth. Prevent further injury by removing nearby objects. Protect the persons airway and make sure that the airway is open after the seizure. Place the patient on her or his side to drain any fluids from the mouth. If the seizure was caused by a sudden rise in body temperature, loosen clothing and fan the patient. The person may be drowsy and disoriented for as long as 20 minutes after the seizure is over.

- **Shock**: In cases where the person is going into shock, call 9-1-1 or the local emergency number immediately. Shock cannot be managed effectively by first aid alone. While waiting for help to arrive: have the person lie down, control any external bleeding, help the person maintain normal body temperature. Do not give the person any food or drink even though she or he is likely to be thirsty. The person's condition may be severe enough to require surgery, in which case it is better if the stomach is empty. Continue to monitor breathing and changes in condition.

- **Splinters**: Remove small splinters with tweezers. Clean with soap and water.

- **Sprains, Strains, and Fractures**:
  - Sprains and strains: Use crushed ice in ice bag or plastic bag on injured area for 20 minutes every 1-2 hours. Use cold water if ice is not available. If necessary, apply firm bandage (ace bandage or triangular muslin bandage). If pain or swelling is severe, keep foot elevated and do not allow patient to walk on it and seek additional medical assistance.  
  - Fractures and Dislocations: Splint to immobilize any suspected fracture in an approved manner with the least possible disturbance. Seek additional medical assistance at once. **MAKE NO ATTEMPT TO RESET FRACTURES AND DISLOCATIONS.**

- **Stings**:
  - Insect Stings: Remove any visible sign of a stinger. Scrape it away from the skin with a clean fingernail or a plastic card, such as a credit card. Wash the site with soap and water. Cover the site and keep it clean. Apply a cold pack to the area to reduce pain and swelling. Call 9-1-1 if the person has trouble breathing or for any other signs of anaphylaxis.  
  - Scorpions: Call 9-1-1 immediately if you suspect that someone has been bitten by a scorpion. Wash the wound thoroughly, bandage and apply ice. Elevate the bitten area.  
  - Marine Life Stings: Call 9-1-1 if the person does not know what stung him/her, has a history of allergic reactions to marine life stings, is stung on the face or neck, or starts to have trouble breathing.

- **Stomachache**: Keep the patient well hydrated. Give the patient a bland diet, if he or she is not vomiting.

- **Sunburn**: Give an abundance of fluids containing salt. If severe extensive sunburn is received seek additional medical assistance.

- **Wound Infection**: Re-clean with soap and water and re-dress the wound. Monitor for signs of serious infection. For any large bruised areas, bites or poisonous incidences, outline the affected area in pen and indicate the time that the wound occurred to help you determine if the infection is spreading over time.
## Treatment Protocols For Communicable Diseases

### Communicable Diseases
The following symptoms should be suggestive of communicable disease: fever of 101.5 F degrees or more, severe sore throat, vomiting, rash, inflamed eyelids, fluid running from ears, or skin lesions. Isolate the patient. Contact parents to send patient home.

- **Congestion and/or Cough:** Check temperature. Call parent. If symptoms are severe or persistent, send home.
- **Diarrhea:** Check temperature. Call parent. Responsible adults should be notified to watch for other cases. Patient should be allowed bed rest and isolation in health center. If problem persists, patient should be sent home.
- **Ear Ache:** Do not allow swimming. Monitor condition and check for fever. If problem persists contact parents to seek additional medical attention or send patient home.
- **Fever, Elevated Temperatures:** Call parent. Allow patient to rest and monitor in first aid station; if possible isolate patient from others. If temperature persists for more than a few hours, patient should be sent home.
- **Local Infections:** Apply hot wet packs. Observe for signs of increasing inflammation. Take temperature and vital signs. If temperature is elevated, contact parents to seek additional medical attention. Handle infections in such a way so as to eliminate the spread of illness to others.
- **Pediculosis humanus capitis (Head Lice):** Patient must be sent home. Girl/adult may not return until evidence is provided that patient is clean of lice.
- **Sore Throat and Flu:** Assess and treat symptomatically with rest, fluids. If symptoms persist, contact parents to send patient home.

### For activities of 3 nights or more:
- Complete a health screening for all participants and staff within 24 hours of arrival for activities
- Screenings verify health information; check for observable evidence of illness, injury, or communicable disease; and review and collect any medications to be dispensed during the activity/event.

### Girl or adult participants exhibiting any of the following symptoms will be sent home.
- Diarrhea
- Vomiting
- Oral temperature over 101.5 F
- Sore throat accompanied by fever
- Unusually dark, tea-colored urine
- Unusual rash or spots
- Yellowish skin or eyes
- Infected skin patches
- Grayish or white stools
- Inflamed, bloodshot eyes with discharge
- Severe itching of body or scalp
- Severe headache accompanied by stiff neck
- Head lice

First aid administered in the first few minutes can mean the difference between life and death. Calling for help is often the most important action you can take. In an emergency, secure professional medical assistance as soon as possible, normally by calling 9-1-1.

### PROCEDURES FOR EPIDEMICS:

1. If more than five people at the event exhibit the same symptoms, the first aider and event manager are instructed to consider the situation as an epidemic and to contact and to activate the Girl Scouts of Northern California Emergency Management Plan by call by calling 1-877-636-1912.
2. In the event of an epidemic situation, parents will be contacted and instructed to take their children home.
3. The council is required to report any actual or suspected food-borne, water-borne or unusual illness outbreaks to the Health Department Communicable Disease Unit immediately upon detection.

Don't forget to document in the health log any injury, illness or incident. Make sure to include information about girls who are sent home or sent for medical treatment.
## Know When to Get Emergency Help

### Before The Activity/Event

- Have a List of Emergency Phone Numbers Posted (See page 25 for a template.)
- EMS
- Police/Sheriff
- Fire
- Hazardous materials (Hazmat) team
- Poison Control Center
- Hospitals – local
- Power and Gas companies
- Health Department – local

A list of all emergency phone numbers should be posted at the first aid station/health services area, by the telephone (s) and in other appropriate areas as well as with event staff.

### During The Activity/Event

- Always call 9-1-1 or the local emergency number if the person:
  - Is or becomes unconscious
  - Is confused
  - Has breathing difficulty
  - Is not breathing or shows no signs of life
  - Has persistent pain or pressure
  - Is bleeding severely
  - Has pressure or pain in the abdomen that does not go away
  - Is vomiting blood or passing blood in the urine or feces
  - Has a seizure, sudden headache, or sudden slurred speech
  - Has a seizure and is pregnant or diabetic
  - Appears to have been poisoned
  - Has injuries to the head, neck or back
  - Has possible broken bones
  - Has severe (critical) burns

Seek additional medical assistance for conditions beyond those listed within this document.

### After The Activity/Event

- Also call 9-1-1 for any of these situations:
  - Fire or explosion
  - Downed electrical wires
  - Swiftly moving or rapidly rising water
  - Presence of poisonous gas
  - Serious motor-vehicle collisions
  - Injured or ill person who can not be moved easily

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**Arrangements for emergency medical attention.** The 9-1-1 system is used for emergencies. Be prepared to give this information to the EMS dispatcher:
- Location, including the street address and city
- Directions (cross streets, roads, landmarks, etc.)
- Exits and evacuation routes
- Telephone number from which the call is being made
- Caller’s name
- What happened
- How many people are injured
- Condition of injured person (s)
- Help (care) being provided

**Do not hang up first, let the EMS dispatcher hang up first.** It is important to know your location to give to the 9-1-1 dispatcher, even in cities with Enhanced 9-1-1(E9-1-1) systems. In many buildings the phone system may connect through a switchboard that will show only the corporate address. With cellular phones, E9-1-1 is not functional because there is no fixed location to identify on the dispatcher’s screen.

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In the event of a serious accident, injury, or fatality, the Council Emergency Management Plan (page 18) and the Emergency Action Plan for the activity/event shall be followed. Communication procedures with parents/guardians will be decided by the council emergency team.
Girl Scouts of Northern California Emergency Management Plan

Council Emergency Number: 1-877-636-1912

In line with recommendations from Girl Scouts of the USA, our council has developed a plan and a team to help respond to any emergency needing the attention of more than local troop or service unit personnel. Such emergencies are incidents of a serious nature that occur during Girl Scout activities.

An emergency is defined as any of the following:

- A fatality or serious injury requiring urgent or emergency medical treatment
- A traffic accident involving Girl Scouts during Girl Scout activities
- An illness serious enough to require hospitalization
- Any situation which involves law enforcement officers
- Allegation of child molestation or rape
- Lost participant
- Kidnapping
- Allegation of tampering with products sold
- Threat of legal action
- Other occurrences that may have adverse media or legal implications

Ensure that all adults including troop/group leaders, chaperones, first aiders, event managers etc. Know and understand the Council Emergency Management Plan and have a copy of the council Emergency card.


GSNorCal Emergency Management Plan

1. Remain as calm as possible. Find out as much information as quickly as possible about the situation.
2. Instruct someone to call 9-1-1 if needed. Obtain name and phone number of a contact person (if not yourself).
3. Give priority attention to providing all possible care for the injured. Secure emergency medical professionals, ambulance, and police as appropriate.
4. In the event of a fatality or other serious accident, notify the police. Retain a responsible person at the scene. See that no disturbance of the victim or surroundings is permitted until police have arrived.
5. Ascertain whether a parent has been notified — but if a serious injury or fatality, get direction from council emergency contact before notifying parents.
6. Notify the council of the emergency by calling the council emergency number 1-877-636-1912. The council answering service will connect the appropriate council staff, who will evaluate the level of additional council support required. Always be sure to leave a phone number where you can be reached. Carry the Media Information Sheet with you, and fill out as directed by the Emergency Team member to give to the media. Refer all media inquiries (press, radio, TV) to the council. Use the emergency number noted above and either the council’s Communications Manager or an alternate council spokesperson will respond to all media inquiries.
7. Complete Accident/Injury Report or Incident Report Form and send it to the Risk Management Team at the Alameda office along with copies of the Health History Form, membership registration form (if registered with offline paper registration), and Permission Form within 24 hours of occurrence. Insurance@GirlScoutsNorCal.org
8. Be sensitive to the fact that those involved in traumatic situations may need further support. Contact your VDM (GSNorCal staff member) if additional assistance is needed.
Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Reporting to GSNorCal

Notify Risk Management Team Within 24 hours of any Accident, Injury, or Incident
800-447-4475 or email insurance@girlscoutsnorcal.org.

Accident/Injury Online Report
This online form is to be used to report any accident/injury occurring at a Girl Scouts of Northern California event, activity, meeting, campout, field trip, etc. Download printed PDF form and have a few copies available during activity/event. Incidents might include:
- A serious argument (may or may not escalate into verbal or physical threats)
- A physical altercation
- A non-injury incident of any sort where police are summoned
- Possible or threatened legal proceedings
- Possible or threatened adverse report(s) to the media

Incident Online Form
Use this online form to report any non-injury incident that occurs which may result in future problems or other future repercussions for the people involved or for Girl Scouts of Northern California. Download printed PDF form and have a few copies available during activity/event. Incidents might include:
- A serious argument (may or may not escalate into verbal or physical threats)
- A physical altercation
- A non-injury incident of any sort where police are summoned
- Possible or threatened legal proceedings
- Possible or threatened adverse report(s) to the media

Accident/Injury Report and/or Incident Report must be completed for any accident, injury, or incident that occurs during the activity/event. These online forms MUST be submitted within 24 hours of occurrence even if in a non-emergency situation.

Mutual of Omaha Insurance Claims:
For information on how to file an insurance claim, please contact insurance@girlscoutsnorcal.org.

Media Information Sheet:
Give to members of the media who arrive other than on a previously arranged or scheduled basis. Several copies should be available to use during an event.

Follow-up after the event:
- In the case of an accident, injury or incident complete all appropriate documentation and forms
- Check on condition of injured Girl Scout
- Replace equipment and supplies
- Evaluate and discuss process and outcome
- Staff debriefing
- Retain Health History Form for injured or ill girls/adults
- Turn in Health History Form and Health Log to your service unit or council after activity or event

The Accident/Injury and Incident forms are submitted online. To ensure that you are using the most current forms always check the council website:

Retention of Health History forms for Events
A copy of the Health History forms for any participant who required treatment from the first aider must be turned in to the service unit or council with the health log after the event. For all participants who were not treated, the forms should be returned to the troop/group leader or destroyed.
You’re a Girl Scout Event First Aider!

Thank you for taking the time to become a Girl Scout Event First Aider and for your commitment to the health and safety of girls. This manual is your reference guide to the Girl Scouts of Northern California’s roles, responsibilities, processes, procedures, and treatment protocols for giving first aid during Girl Scout events. You will want to refer to this manual as well as the Girl Scouts of Northern California’s Volunteer Essentials and health manual from your First Aid/CPR certification course. You can use the link provided to download your free copy. Your council staff is eager to assist you if you have questions or need any other support. Contact: info@girlscoutsnorcal.org. Congratulations on becoming a Girl Scout Event First Aider!

This portion of the booklet is intended as a guide for first aiders for service unit activities and events.

**Note:** First Aiders for day and resident camps require additional health care considerations regarding the first aider qualifications, on-site health care, treatment protocols, illness/injury documentation and form retention. If you will be serving as a Girl Scout First Aider for a volunteer run day camp or resident camp, you must refer to the [Volunteer Run Camp Administrative Guide](#) for specific information and guidelines for day and resident camps or contact the Outdoor Program department at volunteercamps@girlscoutsnorcal.org.

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**THE ROLE OF ADULTS IN HEALTH CARE**

The health and safety of each girl is every adult’s responsibility. All adults involved share the responsibility for prevention of injuries and illnesses.

1. In Girl Scouting, the emotional and physical well-being of girls is always a top priority. The [Volunteer Essentials, Safety-Wise](#) section has what you need to know to keep the girls safe. All volunteers that attend and supervise girls during Girl Scout events must agree to adhere to the [Girl Scouts Safety Guidelines](#) (pg. 24). Distribute a copy to all responsible adults attending the activity/event.

2. First aid administered in the first few minutes can mean the difference between life and death. Calling for help is often the most important action you can take. In an emergency, secure professional medical assistance as soon as possible, normally by calling 9-1-1.

3. Universal precautions MUST be followed by all, including the proper use and disposal of soiled gloves and bandages.

4. Group leaders and event staff members must oversee basic sanitary/hygiene conditions. This includes but is not limited to washing before snacks and meals, after using the restroom, brushing teeth, keeping area clean, etc.

5. Group leaders, other adults and event staff who are not serving as the designated first aider are limited in the type of first aid they can administer. A basic first aid kit provides the individual with the resources to treat minor cuts, bug bites, etc. The adult cannot go beyond her/his first aid or medical training and the scope of the first aid kit. At no time shall an adult who is not the designated first aider administer any medications, including over the counter medications or remedies. The designated first aider holds this responsibility, and may only do so with the prior written permission of the girl’s parent, guardian, or physician.

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**Girl Scout Event First Aiders Must Complete Online Training:**
- Girl Scout First Aider
- Girl Scout Event First Aider

Make sure you reference these links periodically to ensure that you are always referencing the most current material. [Volunteer Essentials](#). To access, download, or print your free copy: [http://www.girlscoutsnorcal.org/vol](http://www.girlscoutsnorcal.org/vol)
Event First Aider

Ensure You Properly Trained

All Girl Scout Event First Aiders are required to take the online Girl Scout First Aider and Girl Scout Event First Aider course before serving as the Girl Scout First Aider for events. To take this course go to http://training.girlscoutsnorcal.org

Know the level of First Aider required for the activity/event. The levels of first aid required for any activity take into account both how much danger is involved and how remote the area is from emergency medical services.

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<th>Access to EMS</th>
<th>Minimum Level of First Aid Required</th>
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<td>First Aid/CPR</td>
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<tr>
<td>More than 30 minutes</td>
<td>Wilderness First Aider (WFA) or Wilderness First Responder (WFR)*</td>
</tr>
</tbody>
</table>

A Girl Scout First Aider with a current First Aid/CPR certificate who has completed the online Girl Scout First Aider courses is required for:

- Activities/events less than 30 minutes from EMS
- Activities as required by Safety Activity Checkpoints
- Events
- Day/Resident Camp*

*Note: Day and resident camps require additional health care considerations regarding the first aider qualifications and on-site health care/treatment protocols and documentation. If you will be serving as a Girl Scout First Aider for a day or resident camp, please refer to the Volunteer Run Camp Administrative Guide or contact the Outdoor Program department at volunteercamps@girlscoutsnorcal.org.

For Large Events:

One Girl Scout First Aider is required for every 200 participants.

Girl Scout First Aiders for events must have the skill and understanding for handling possible injury and illness for the activities related to the event. The first aider must be present throughout the entire event, and should have no other responsibilities or duties. For traveling, or station events where there is a considerable distance between stations, event organizers should consider having a first aider with each group or station.
Determine the Best Layout for Site Safety

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### Layout of Site for Activity/Event

Use this checklist when determining the best layout for site safety:

- **Look for Site Hazards:** Are there site hazards such as lakes, cliffs and drop offs? Look for hazards in and around your location or site. Determine with the girls when and where it is safe to run, how to dress to avoid sunburn or unnecessary cuts and scratches. Look for areas accessible by the public, traffic areas, areas where girls would be out of sight.

- **In case of natural disasters such as earthquake, storms, flood, fire, etc. where are the exits and evacuation routes?**

- **How will EMS personnel access the routes?**

- **Is the first aid station easily accessible?**

- **Are there any individuals who will require assistance during an evacuation? Whose responsibility will it be to ensure their safe evacuation?**

- **Where is the location of emergency, rescue and first aid equipment?**

- **Where is the location of telephones, are the emergency numbers posted?**

- **Where is the location of keys to reach the telephone or equipment?**

- **Are there restrooms and running water close by that is easily accessible?**

### First Aid Station

- **First Aid Station:** When setting up a first aid station, the following considerations should be addressed:

  - Can people who are injured or weak from sickness get to it easily?
  - Can supplies easily be brought to the site by car, wagon or by carrying them in?
  - Will it be centrally located, and if so, will it be very noisy?
  - Is the ground level without a lot of tripping hazards?
  - Are you near any ground transportation, such as an ambulance? Could you get a vehicle in and out for an emergency evacuation?
  - Is there shade and protection from the sun and elements?
  - Is the area large enough to meet your needs, and to have different areas for diagnosis, treatment, recovery?
  - Does the area feel good to a majority of the people who will be working there?
  - Is there running water nearby?
  - Are there restrooms nearby?
  - Will you have satellite clinics?
  - How will you communicate?
  - Are the trees spaced so that you can put up an overhanging tarp or an area big enough for portal shelter?
  - How are the insects there? Are you near a swamp or standing water? Are there any wasp or hornet nests nearby?
  - What wildlife frequent the area?
  - Are there a lot of allergy-causing plants around?
  - Are there clear well-marked paths (and signs) guiding people to the location?

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The First Aid Station must be easily accessible. Determine a suitable location that is visible and convenient and where medications can be stored and dispensed according to council guidelines.
**Set Up First Aid Station**

First Aid Station— is required for activities and events. All day camp and overnight sites must have a designated first aid station that is staffed at all times.

*Note: first aiders for day camp or resident camp should refer to the Volunteer Run Camp Administrative Guide or contact the Outdoor Program department at volunteercamps@girlscoutsnorcal.org*

### The first aid station should have:
- A quiet area for patients
- A clean place to lie down
- Adequate protection from sun or weather
- An isolation area if needed
- Available drinking water and a toilet nearby

In addition to the above, at sites used for stays of three nights or more, the first aid station also needs to provide:
- A heating or cooling system, where applicable
- A shower with hot and cold running water
- One bed for every 50 participants and staff
- Accessibility by ambulance or emergency vehicle and a trained staff person to standby
- A refrigerator
- Telephone and all emergency contact phone numbers posted
- A light or luminescent sign that is visible from the outside in the dark

### During The Activity or Event:
- The location of the first aid station should be announced to all adults and girls present; instruct participants to report all illnesses and injuries to their troop or group leader who will send them to the first aider if necessary.
- The first aider should have no other duties or responsibilities.
- A well-stocked first aid kit that is always accessible should be kept and managed by the first aider during activities and at the first aid station for events.
- The first aider keeps and maintains the Health Log for activities. For events it is kept and maintained by the first aider at the first aid station. Page 11
- An inventory of first aid station supplies and equipment is taken at the opening and closing of the activity or event. Supplies are stocked and resupplied as needed.
- Keep a vehicle designated for emergencies available and ready at all times, capable of transport. Keep available first-aid supplies and equipment that is appropriate to the types of accidents and injuries that may occur at the program-delivery site or administrative facility.
- Ensure that emergency services can be contacted from the activity or event.

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All day camp and overnight sites must have a designated Health Service Area that is staffed at all times.
Girl Scout Safety Guidelines

Every adult in Girl Scouting is responsible for the physical and emotional safety of girls, and we all demonstrate that by agreeing to follow these guidelines at all times.

1. Follow the Safety Activity Checkpoints. Instructions for staying safe while participating in activities are detailed in the Safety Activity Checkpoints, available at www.GSNorCal.org/forms. Read the checkpoints, follow them, and share them with other volunteers, parents, and girls before engaging in activities with girls.

2. Points common to all Safety Activity Checkpoints include: Girls plan the activity. Keeping their grade-level abilities in mind, encourage girls to take proactive leadership roles in organizing details of the activity.

3. Arrange for proper adult supervision of girls. Your group must have at least two unrelated, approved adult volunteers present at all times, plus additional adult volunteers as necessary, depending on the size of the group and the ages and abilities of girls. Adult volunteers must be at least 18 years old and must have completed the adult screening process and have taken the appropriate adult learning courses before volunteering. One lead volunteer in every group must be female. In addition, GSNorCal expects volunteers to be fully capable of performing their duties.

Volunteers are not permitted to use or be under the influence of any substance which may impair their physical and/or mental skills at any time they are supervising girls as part of the adult-to-girl minimums, even if girls are not in the same room or are sleeping. This includes alcohol or prescription medications, medical marijuana, or illegal drugs.

4. Get parent/guardian permission. When an activity takes place that is outside the normal time and/or place, advise each parent/guardian of the details of the activity and obtain permission for girls to participate. Communicate with council and parents. Follow council procedures for activity approval, certificates of insurance, and council guidelines about girls’ general health examinations. Make arrangements in advance for all transportation and confirm plans before departure.

5. Report abuse. Sexual advances, improper touching, and sexual activity of any kind with girl members are forbidden. Physical, verbal, and emotional abuse of girls is also forbidden. Follow GSNorCal’s guidelines for reporting concerns about abuse or neglect that may be occurring inside or outside of Girl Scouting.

6. Be prepared for emergencies. Work with girls and other adults to establish and practice procedures for emergencies related to weather, fire, lost girls/adolescents, and site security. Always keep handy a well-stocked first-aid kit, girl health history forms, and contact information for girls’ families.

7. Use the Buddy System. Using the buddy system, girls are divided into teams of two. Each girl is responsible for staying with her buddy at all times, warning her buddy of danger, giving her buddy immediate assistance if safe to do so, and seeking help when the situation warrants it. Girls are encouraged to stay near the group or buddy with another team of two, so in the event someone is injured, one person cares for the patient while two others seek help.

8. Travel safely. When transporting girls to planned Girl Scout field trips and other activities that are outside the normal meeting time and/or place, every driver must be an approved adult volunteer at least 21 years of age, and have a good driving record, a valid license, and a registered/insured vehicle. Insist that everyone in a legal seat wears their seat belt at all times, and adhere to state laws regarding booster seats and requirements for children in rear seats.

9. Ensure safe overnight outings. Prepare girls to be away from home by involving them in planning, so they know what to expect. Avoid having men sleep in the same space as girls and women. During family or parent-daughter overnights, one family unit may sleep in the same sleeping quarters in program areas. When parents are staffing events, daughters should remain in quarters with other girls rather than in staff areas.

10. Role-model the right behavior. Never use illegal drugs. Don’t consume alcohol, smoke, or use foul language in the presence of girls. Alcohol is not permitted at an event where the main objective is girl program. If girls are present where alcohol is served at an adult-only event (sponsored and run by adults), they must be supervised by an adult who is not consuming alcohol who is responsible for the girls’ safety and well-being. (If alcohol is being served at a Girl Scout event, the participants will not be covered by Girl Scout insurance unless prior approval has been obtained form the insurance carrier). Do not carry ammunition or firearms in the presence of girls unless given special permission by GSNorCal for group marksmanship activities.

11. Create an emotionally safe space. Adults are responsible for making Girl Scouting a place where girls are as safe emotionally as they are physically. Protect the emotional safety of girls by creating a team agreement and coaching girls to honor it. Agreements typically encourage behaviors like respecting a diversity of feelings and opinions; resolving conflicts constructively; and avoiding physical and verbal bullying, cliques, behavior, and discrimination.

12. Ensure that no girl is treated differently. Girl Scouts welcomes all members, regardless of race, ethnicity, background, disability, family structure, religious beliefs, and socioeconomic status or sexual orientation. When scheduling, helping plan, and carrying out activities, carefully consider the needs of all girls involved, including school schedules, family needs, financial constraints, religious holidays, and the accessibility of appropriate transportation and meeting places.

13. Promote online safety. Instruct girls never to put their full names or contact information online, engage in virtual conversation with strangers, or arrange in-person meetings with online contacts, other than to deliver cookies and only with the approval and accompaniment of a parent or designated adult. On group websites or Facebook groups, publish girls’ first names only and never divulge their contact information. Teach girls the Girl Scout Online Safety Pledge that can be found at www.GSNorCal.org/forms and have them commit to it.

14. Keep girls safe during money-earning activities. Girl Scout cookies and other council-sponsored product sales are an integral part of the program. During Girl Scout product sales, you are responsible for the safety of girls, money, and products. In addition, a wide variety of organizations, causes, and fundraisers may appeal to Girl Scouts to be their labor force. When representing Girl Scouts, girls cannot participate in money-earning activities that represent partisan politics or that are not Girl Scout-approved product sales and efforts.
Emergency Phone Numbers

Emergency telephone numbers

(Dial ____________ for an outside line)

EMS: ____________________________

Fire: ____________________________

Local Hospital: ____________________

Police/Sheriff: ____________________

Poison Control Center: 800-222-1222

Number of this telephone: __________

Other Important Telephone Numbers

Facility manager: __________________

Facility maintenance: ______________

Power company: ____________________

Gas company: ______________________

Weather bureau: ____________________

Other: ___________________________

Name and address of medical facility with 24 hour emergency cardiac care:

________________________________

________________________________

Be prepared to give this information to the EMS dispatcher:

Location: __________________________

Street address: ______________________

City or Town: _________________________

Directions (cross streets, roads, landmarks, etc):

________________________________

Exits and evacuation routes: __________

Telephone number from which the call is being made: ________________

Caller’s name: ______________________

What happened? _________________

How many people are injured? _______

Condition of injured person(s): _______

Help (care) being provided: _______________

______________________________

Note: In cities with an Enhanced 9-1-1 (E9-1-1) system it is still important to know the information above for communication to the dispatcher. In many buildings the phone system may connect through a switchboard that will show only the corporate address (like GSNorCal). With cellular phones, E9-1-1 is not functional because there is no fixed location to identify on the dispatcher’s screen.

Do not hang up first!
Let the EMS dispatcher hang up first.