



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

Know Your Resources

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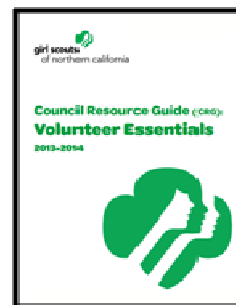
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You're a Girl Scout First Aider!

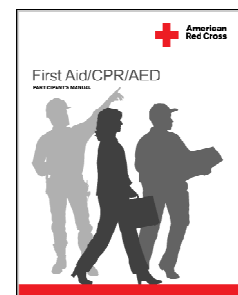
Welcome,
Thank you for taking the time to become a Girl Scout First Aider and for your commitment to the health and safety of girls. This manual is your reference guide to the Girl Scouts of Northern California's treatment protocols and the processes and procedures for giving first aid during Girl Scout activities and events. You will want to refer to this manual as well as the Girl Scouts of Northern California's Council Resource Guide (CRG) and the American Red Cross First Aid/CPR/AED Participant Manual (shown below). You can use the links provided to download your free copy. Your council staff is eager to assist you if you have questions or need any other support. Contact: volunteerlearning@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.



To download your free copy:
[www.girlscoutsnorcal.org/
documents/CRG.pdf](http://www.girlscoutsnorcal.org/documents/CRG.pdf)



To download your free copy:
[http://editiondigital.net/
publication/?i=64159](http://editiondigital.net/publication/?i=64159)

Make sure you reference the above links periodically to ensure that you are always referencing the most current material. The Council Resource Guide (CRG) is updated annually.



Girl Scout First Aiders Must Complete Online Training:

- Becoming A Volunteer
- Girl Scout First Aider



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Know Your Responsibilities

QUALIFICATIONS

- Registered Girl Scout adult with an approved volunteer screening on file.
- Current First Aid and CPR certification as specified in the *Council Resource Guide: Volunteer Essentials*.
- Ability to maintain good judgment regarding health and safety procedures and crisis situations.
- Ability to assess when additional medical attention should be obtained.
- Good oral and written communication and interpersonal skills; knowledge of typical emotional and physical needs of children.
- Knowledge of health and safety standards as outlined in Chapter 4-“Safety-Wise” of the *Council Resource Guide: Volunteer Essentials*.
- Knowledge of the “Girl Scout First Aider” course.

INDIVIDUAL RESPONSIBILITIES:

- Be present throughout the entire activity or event, and ideally should have no other responsibilities or duties. An alternate first aider should be available to substitute, as needed, if the first aider will be busy during certain times.
- Download the latest GSNorCal Health and Safety Plan for Activities and Events from the council website and follow the protocols outlined therein. This document is updated on a regular basis to reflect generally accepted first aid procedures.
- Maintain a first aid kit. Inventory and purchase needed supplies before the activity or event and replenish after.
- Obtain directions to the nearest hospital and maintain a list of emergency phone numbers, including ambulance, poison control, police, and hospital.
- For activities or events where participants do not attend with troop/group leaders, the first aider should maintain Health History Forms for girls and adults and discreetly share information *only as needed* with other adults (allergies, activity limitations, etc.)
- Determine a suitable location for the first aid station that is visible and convenient. The first aid station should have a quiet area for patients, a clean place to lie down, adequate protection from sun or weather. Assume station is staffed at all times. Announce location of first aid station to all participants present; 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.

- Keep and dispense medications according to *The GSNorCal Health & Safety Plan For Activities & Events* and the *Council Resource Guide: Volunteer Essentials*. No medication, including over-the-counter medications, such as Tylenol, cough syrup, or Neosporin, should ever be given without the prior written permission of a custodial parent, guardian, or physician.
- Administer first aid as needed to girls or adults, and inform troop leader or event manager and parents of any injuries sustained.
- Maintain Health Log. The Health Log should be bound and page numbered (do not remove pages) and can be obtained from the troop/group leader, the service unit or event manager. Do not skip lines. Records should be kept in pen. After activity or event, Health Log should be returned to troop/group leader, service unit or event manager.
Health Log documentation must include:
 - Name of patient
 - Complaint or type of injury
 - Treatment or medication given
 - Name of person administering treatment (whether troop/group leader or first aider)
 - Date and time of treatment
- Maintain a supply of Accident/Injury forms and insurance claim forms. If there are any injuries, ensure that those forms are filed with the GSNorCal Risk Management and Travel department at the Alameda office within 24 hours along with a copy of that girl’s Health History form. Return Health History forms to leaders or destroy them for any girls who were not injured after the event.

IN PARTNERSHIP WITH THE TROOP/GROUP LEADER, SERVICE UNIT OR EVENT MANAGER:

- Develop a safety plan for managing emergencies including weather, fire, lost girl and evacuation situations.
- Understand the council emergency management plan and when to use the council emergency phone number.
- Instruct all adults present at the activity/event that only an adult with current first aid/CPR training certification should assist a victim, except in the case of extreme emergency, until qualified help arrives. Troop leaders may give girls regular medications with prior written permission from the custodial parent, guardian or physician (any medication given must be entered into the Health Log).
- Ensure that health, safety and policy standards are maintained.
- Educate the girls and adults of the safety guidelines and protocols at the start of the activity or event.



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Know GSNorCal Rules and Regulations

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. Chapter 4 of *the Council Resource Guide, Safety-Wise* 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**. Distribute a copy to all responsible adults attending the activity/event (page 31).
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.
6. All responsible adults should have a copy of the GSNorCal Emergency Cards (pages 33-34) and understand and have a copy of the GSNorCal Emergency Management plan (page 28).

7. 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 20).
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 before making decisions to transport or have a girl transported to medical care. If parent/guardian is not available, the troop/group leader or event manager along with the first aider will consult with council.

OFFICE NUMBERS FOR NON-EMERGENCIES		GIRL SCOUTS OF NORTHERN CALIFORNIA EMERGENCY CARD FOR COUNCIL VOLUNTEERS	
Alameda Office 510-562-8470	Redding Office 530-221-6180	In case of an emergency:	
Chico Office 530-343-1904	San Jose Office 1-408-283-4171	1) Always call 9-1-1 first (if needed)	
Eureka Office 707-443-6641	Santa Rosa Office 707-344-5472	2) Notify the council at its 24/7 emergency answering service: 1-877-636-1912	
For General Inquiries: Email: Info@girlscoutsnorcal.org Toll-Free Number: 1-800-447-4475		3) Additional information about the Council's Emergency Plan is provided in the <i>Council Resource Guide: Volunteer Essentials</i>	



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

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 Chapter 4 of the *Council Resource Guide*.
- ❑ **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 Chapter 4 of the CRG and page 28 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.

Access to EMS	Minimum Level of First Aid Required
Less than 30 minutes	First Aid/CPR
More than 30 minutes	Wilderness First Aider (WFA) or Wilderness First Responder (WFR)*

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 or events. To take this online course go to www.girlscoutsnorcal.org/training.

A Girl Scout First Aider with a current First Aid/CPR certificate who has completed the online “Girl Scout 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 per each 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 Girl Scout first aider must be present throughout the entire event, and should have no other responsibilities or duties. In addition, 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.

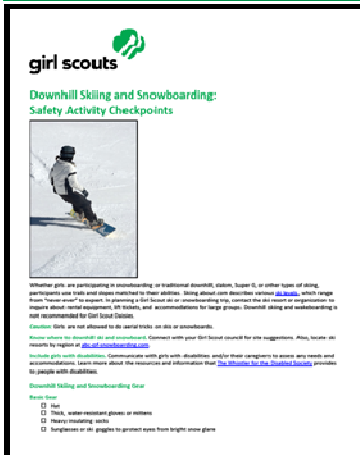


Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Check Safety Activity Checkpoints



- Download or print
- Review before each activity

Safety Activity Checkpoints exist for the following activities:

- Archery
- Arts & Crafts
- Backpacking
- Bicycling
- Canoeing
- Caving
- Challenge Courses
- Climbing or Rappelling
- Computer or Online Activities
- Cookie or Product Sales Activities
- Cross Country Skiing
- Downhill Skiing or Snowboarding
- Fencing
- Fishing
- Geocaching
- Group Camping
- Hayrides
- Hiking
- Horseback Riding
- Ice Fishing
- Ice Skating
- In-Line or Roller Skating
- Kayaking
- Orienteering
- Other Land Sports
- Outdoor Cooking
- Parades or Other Large Gatherings
- Playgrounds
- Rowboating
- Sailing
- Scuba Diving
- Segway
- Skateboarding
- Sledding or Tobogganing
- Snorkeling
- Snowshoeing
- STEM (Science, Math or Technology) Surfing
- Swimming
- Theme Parks
- Trip & Travel Camping
- Tubing
- Waterskiing or Wakeboarding
- Whitewater Rafting
- Windsurfing

GirlScoutsNorCal.org/safety

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 & Travel 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 7 of this document or the

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 Risk

Activities: Written Pre-Approval From the Council Needed

Caution: You must get written pre-approval from GSNorCal Risk Management & Travel at travel@GirlScoutsNorCal.org for the following activities:

- Any trip that is three nights or more
- Land Sports: archery, backpacking, bicycling with vendor-supplied bicycles, "bounce houses", caving, challenge/ropes courses, climbing walls, firearms, gymnastics, horseback riding, rock climbing, skateboarding at a skateboard park, skiing, snowboarding, trapeze, 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), or simulated skydiving and zero-gravity rooms.

If girls would like to trampoline at an indoor facility where the trampolines are completely enclosed and go all the way to the edge of the room with no exposed springs (i.e. there is no possibility that girls could fall off of the trampoline), this activity can be approved if the vendor is on the approved vendor list.

Marksmanship activities require council permission, and volunteers need 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, snorkeling, swimming, tubing, water skiing, 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.

Which activities are considered "high risk"?

The activities specified here as high-risk 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 Never Allowed

Warning: The following activities are never allowed for any girl:

- Flying in noncommercial aircraft, such as small private planes, helicopters, sailplanes, un-tethered hot-air balloons, or blimps requires council permission.
- Potentially uncontrolled free-falling (bungee jumping, hang gliding, parachuting, and parasailing)
- 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
- Taking watercraft trips in Class V or higher whitewater
- Riding motorized personal watercraft like jet-skis

In addition, there are some activities in which girls and volunteers may not engage when representing Girl Scouts. These include:

- Endorsement of commercial products or services
- Solicitation of financial contributions for purposes other than Girl Scouting (any other organization)
- Participation in political campaigns or legislative activities, unless the legislative activity has been council-approved.

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-Risk Activity Form must be used whenever the girls participate in any high-risk activity OR a trip of any length (Pages 37-38).



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 by:

1. **Know what to report.** Adhere to the GSNorCal Emergency Management Plan in the CRG or page 28 in this booklet.
2. **Establish and practice procedures for weather emergencies.** Certain extreme-weather conditions may occur in your area. Please refer to pages 10-12 of this booklet and the Girl Scout First Aider online training for the most relevant information for you to share.
3. **Assemble a well-stocked first aid kit that is always accessible** First aid administered in the first few minutes can mean the difference between life and death. In an emergency, secure professional medical assistance as soon as possible, normally by calling 9-1-1.
4. **Establish an Emergency Action Plan** for managing emergency situations that defines how each possible emergency would be handled and by whom; who should be notified-when and how. The Emergency Action Plan (EAP) should be a written plan that should establish processes and procedures for:
 - Weather emergencies
 - Fire
 - Natural disaster (earthquake, flood, etc.)
 - Lost persons
 - Building-security responses
 - Site hazards (lake, cliff, etc.)
 - Injuries or medical emergencies
 - Strangers or intruders
 - Evacuation plans

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.

5. **Check Safety Activity Checkpoints**
Go to www.GirlScoutsNorCal.org/safety to download the specific safety activity checkpoint for your planned activities (page6).
6. **Notify your Service Unit before your troop/group activities or events.**

For Activities, Outings, or Trips:

- Work in partnership with the troop/group leader to ensure that the **Trip and High Risk Activity Notification and Approval Form** (pages 37-38) is filed with the service unit for troop/group activities when required.
- In some circumstances the Service Unit will forward the form to GSNorCal for approval.
- Refer to Chapter 4 of the *Council Resource Guide (CRG)* for detailed information on this form and this process.

For Events:

- Work in partnership with the Event manager to ensure that the Event Notification and Approval Form is filed with the service unit for events.
- Work with the event manager to add your emergency information to the online Council Emergency Information Calendar: At least two weeks before** the activity or event. The emergency information must be entered on the emergency form online at www.GirlScoutsNorCal.org/eventemergency. Your event information will then be included in the council emergency calendar so that the council emergency team will be better able to assist you in an emergency/crisis situation.
- Making Changes to the Calendar:** If at any time you realize that any information needs to be changed, please ask your VDM/CDD or other staff liaison to make the change for you. If you enter the information a second time that will generate a second and duplicate event on the calendar that could cause a lot of confusion and provide inaccurate information in the case of an emergency.



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Prepare Your Emergency Action Plan

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. For events, 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)

❑ Site Layout

- Easy access for emergency personnel
- Clear exit and evacuation routes
- Location of first aid station is marked and easily assessable.
- Telephone and emergency numbers posted

❑ Equipment

- Rescue equipment
- First aid supplies
- Emergency equipment (flashlights, fire extinguishers, flares, AED, etc.)

❑ Internal Contacts/Support

- Within facility
- Adult volunteers, troop/group leaders, Girl Scout camp director, event manager, other first aiders, etc.
- Maintenance personnel
- Facility personnel
- Experts certified in any specific program being provided (e.g., lifeguard, archery instructors, coaches)

❑ External Contacts/Support

Know the emergency phone numbers, location and transportation routes of the following:

- Nearest hospital
- Ambulance
- Police
- Fire
- Poison control
- 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.

❑ Adult Responsibilities

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
- Emergency plans for the activity/event must include an off-site physician(s) or nearest hospital with emergency room to be identified to provide medical consultation or if additional health care should it be required.

❑ Site Security

Establish a security plan to ensure that girls are properly supervised by adults. Establish boundaries and off-limit areas.

❑ Communications

- **Establish and communicate emergency evacuation plan with all participants.** Who is in charge? Should cars back into parking spots? Where should participants go? Specific emergency plans for the activity/event should include evacuation plans especially in situations where girls have been dropped off. This is especially important if there are not enough vehicles on site during the activity/event to evacuate all participants.
- **Establish an at-home emergency contact person** as outlined in the Council Resource Guide (Ch. 4).
- **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) and 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 9 steps in the emergency management plan (page 28).



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Prepare For Natural Disasters

Avalanche Blizzard Earthquake Fire Flood Hurricane Lightning Thunderstorm Tornado Volcano

Part of the preparation for any outdoor activity or event should be a review of the proper responses to the emergency situations that can result in the area the activity or event will take place. Thunderstorms with lightning, fires and earthquakes are common in Northern California. Everyone should be prepared and procedures for seeking shelter and evacuating the site should be practiced.

Lightning



- Stay away from tall, solitary objects such as trees or electrical poles.
- Avoid standing on a hilltop, exposed ridge, or above tree line.
- If the group is in an open area, spread several yards apart.
- If swimming or in a small boat get out of the water immediately and seek shelter away from the water.
- Don't seek shelter in a shallow cave.
- Avoid touching things made of metal, such as a wire fence.
- Move away from tent poles, aluminum canoes, and other objects that conduct electricity.
- If a sheltered area is not available, crouch low to the ground and place hands on knees or sit on a daypack or foam pad. Do not lie flat on the ground.
- Give prompt first aid to anyone struck by lightning. Do not be afraid to touch or handle the victim; the victim is not electrically charged. Administer CPR if the victim has stopped breathing. Check for burns, bleeding and treat for shock. Keep the victim lying down and seek medical assistance.

Wildfire



- Wildfires occur most often in dry, western parts of the United States, but can occur in other areas when rainfall is low, lightning has struck the ground, or human carelessness has started a fire.
- When planning a hike, check on the weather and fire conditions in the area and ask authorities about any special restrictions because of the conditions.
- If smoke from an unknown source is seen from your campsite, check immediately with authorities and be ready to move out if told to do so.
- When you are hiking, keep an eye on the sky throughout the day. If you see a plume of smoke, watch to see if it gets bigger. Determine which way the wind is blowing and watch for blowing embers.
- Be ready to evacuate at a moment's notice.
- Listen to local radio and television stations for updated emergency information.
- Always back your car into parking spots or park it in an open space facing the direction of escape.
- Post emergency phone numbers by every phone and also keep in the first aid kit.

Earthquake



- Earthquakes occur most frequently along fault lines west of the Rocky Mountains, but there is the potential for them in most states.
- The greatest danger in an earthquake is the falling debris.
- Become aware of fire evacuation and earthquake plans for all of the buildings you occupy regularly.

Keep the following safety rules in mind when faced with an earthquake:

- Keep calm. Don't panic or run.
- If outdoors; get away from buildings, walls, utility poles or power lines.
- If you are in a mountainous area or near unstable slopes or cliffs, be alert for falling rocks and other debris. Landslides are often triggered by earthquakes.
- Head for clear areas.
- If indoors; stand in a doorway or lie under a heavy piece of furniture such as a desk, table or bed.
- Stay away from windows.
- After an earthquake, be careful when entering a damaged building.
- Don't touch downed power lines or any objects in contact with them.
- Listen to a portable radio to get the latest emergency information.
- Be prepared for aftershocks.
- Cooperate with public safety officials.



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Prepare For Cold Weather Emergencies



Winter storms vary in size and strength and include blizzards, heavy snowstorms, and ice storms. When traveling or camping during the winter, take ample supplies of food, water, sleeping bags and blankets to provide protection in case you are stranded away from shelter. Dress for cold weather in layered, loose-fitting, lightweight clothing. Know prevention and first aid measures for hypothermia and frostbite.

What Do I Do?



If you are caught in a winter storm at an indoor camping facility

- Listen to a local radio station to determine whether there is a storm watch or warning.
- Check battery-powered equipment, emergency cooking facilities and other emergency gear.
- Stay inside and avoid traveling during a severe storm.

If caught outside in a winter storm:

- Try to find shelter. Pitch a tent, prepare a lean-to, seek a windbreak or build a snow cave for protection from the wind.
- Try to stay dry and cover all exposed parts of the body.
- Build a fire for heat.
- Melt snow for drinking. Don't eat snow, as it will lower your body temperature.
- Conserve body heat and energy; do not overexert by walking in the snow.



Snow Shelters

Know How to Recognize and Treat Cold-Related Injuries



Hypothermia (lowered body temperature) occurs when the body loses heat faster than it can produce it. This potentially life threatening situation can develop when wind, moisture and cool temperatures draw heat away from the body at a rapid rate. Signs and symptoms include:

Mild

- Uncontrollable shivering; cold hands and feet
- Clumsiness; loss of dexterity.
- Loss of reason and recall.

Severe

- Shaking stops; muscles become stiff.
- Skin looks blue and doesn't react to pain.
- Pulse and respiration slow; pupils dilate
- Collapse.
- Hypothermia is life-threatening. **Call 9-1-1** or the local emergency number immediately.
- While you are waiting for help to arrive keep the victim from getting colder. Use a blanket or other barrier to insulate the patient's body from the cold ground.
- Gently warm victim using whatever means available. In a warm bath, warm air, warm blankets or towels, or body-to-body contact.

Frostbite is the most common injury caused by exposure to the cold. It is the freezing of parts of the body due to exposure to very low temperatures. It occurs when ice crystals form in the fluid in the cells of skin and tissues. The nose, cheeks, ears, fingers, and toes are most often affected. Signs and symptoms:

- Skin is flushed or reddened or appears gray or white.
- Pain may be felt early but usually subsides.
- The affected area feels extremely cold and numb; tingling, stinging, or aching.
- When gentle pressure is applied, skin surface feels hard or crusty and the underlying tissue feels soft.
- Often, the victim is not aware she has frostbite until someone notices these signs or she observes the pale, glossy skin.
- Frostbite is life-threatening. **Call 9-1-1** or the local emergency number immediately.
- If medical assistance 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 victim to help.
- If immediate medical assistance is not nearby, maintain respiration and protect the frozen area from further injury by warming the affected area quickly but gently by placing in warm water. After warming wrap the affected area in a loose, clean cloth. Seek medical attention.

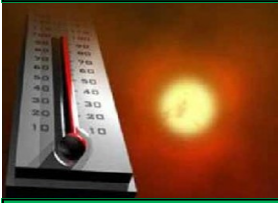


Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Prepare For Warm Weather Emergencies



Heat waves are the most lethal type of weather phenomenon, overall, outnumbering floods and hurricanes. A heat wave is a prolonged period of excessively hot weather, which may be accompanied by high humidity. When participating in outdoor activities during the heat of the day take precautions by drinking ample amounts of fluid and taking frequent breaks. Know prevention and first aid measures for dehydration, heat exhaustion, heat cramps and heat stroke.

Prevention



- Listen to a NOAA Weather Radio for critical updates from the National Weather Service.
- Stay hydrated by drinking plenty of fluids even if you do not feel thirsty. Avoid drinks with caffeine.
- Eat small meals and eat more often.
- Avoid extreme temperature changes.
- Wear loose-fitting, lightweight, light-colored clothing. Avoid dark colors because they absorb the sun's rays.
- Slow down, stay indoors and avoid strenuous exercise during the hottest part of the day.
- Postpone outdoor games and activities during the heat.
- Use the buddy system in excessive heat.
- Take frequent breaks if you must be outdoors.
- Avoid sunburn

Sunburn: Warn girls and adults to avoid prolonged skin exposure and to wear head coverings. Sunblock should be applied throughout the day, after swimming, and showering. When applying sunblock to girls, keep to the "safe zones" of the upper back and shoulders. Girls should be able to apply the lotion to any other area. Adults should put the lotion on the girls' hands and make sure they apply it to themselves properly.

Know the Signs and Symptoms of Heat-Related Illness



Outdoor activities in all kinds of weather are healthy and fun, but environmental emergencies can occur. Be prepared for all kinds of weather and situations before you head out to hike, swim, or camp. Know the signals-especially the early ones- of heat related illnesses. Dehydration, heat exhaustion and heat stroke are conditions caused by overexposure to heat, loss of fluids, and electrolytes.

Dehydration: Encourage girls to drink plenty of fluids including water, sports drinks and diluted juice all day long, especially in warm or hot weather.

- Signs of dehydration include: fatigue, thirst, irritability, dizziness, headache, lethargy, reduced urine output or dark-colored urine.
- Drink plenty of fluids before, during and after exercise.
- Take frequent rests and breaks
- Avoid strenuous activities during the heat of the day.

Heat cramps are muscular pains and spasms that usually occur in the legs or abdomen caused by exposure to high heat and humidity along with loss of fluids and electrolytes. Heat cramps are often an early sign that the body is having trouble with the heat.

Heat exhaustion typically involves the loss of body fluids through heavy sweating during strenuous exercise or physical labor in high heat and humidity.

- Signs of heat exhaustion include cool, moist, pale or flushed skin; heavy sweating; headache; nausea; dizziness; weakness; and exhaustion.
- Move the person to a cooler place. Remove or loosen tight clothing and apply cool, wet cloths or towels to the skin. Fan the person. If the person is conscious, give small amounts of cool water to drink. Make sure the person drinks slowly. Watch for changes in condition.
- If the person refuses water, vomits or begins to lose consciousness, **call 9-1-1** or the local emergency number.

Heat stroke (sunstroke) is a life-threatening condition in which a person's temperature control system stops working and the body is unable to cool itself.

- Signs of heat stroke include: hot, red skin which may be dry or moist; changes in consciousness; vomiting; and high body temperature.
- Heat stroke is life-threatening. **Call 9-1-1** or the local emergency number immediately.
- Move the person to a cooler place. Quickly cool the person's body by giving care as you would for heat exhaustion. If needed, continue rapid cooling by applying ice or cold packs wrapped in a cloth to the wrists, ankles, groin, neck and armpits.

Prepare for Outdoor Environments



Insect bites and stings:

During an outing it is possible to come in contact with a variety of insects, spiders, ticks, and scorpions. Bites and stings are rarely serious unless the person has an allergic reaction to the bite or the pest is carrying a disease that is injected into the person with the bite.

Bees, Wasps, Hornets: Stinger Removal:

- Remove stinger if still present. Do not use tweezers. Use flicking motion with your fingernail or plastic card.

Tick Removal



- Remove tick carefully with tweezers, taking care to remove entire tick. Get as close to the skin as possible, pull slowly, steadily and firmly. If tick cannot be removed easily, refer to parent or health care provider. Do not try to burn the tick off. Do not apply petroleum jelly or nail polish to the tick. Put the tick in a container with rubbing alcohol to kill it. Tape the dead tick to an index card and place in a sealed bag with date and location of bite. Send it home with the child's parent. Mark a circle around the bite site with a permanent marker.
- Treatment:** After stinger or tick removal, apply ice or cold wet compresses if the area is painful. Watch for signs of infection or an allergic reaction.



Poisonous Plants:

Poison Ivy, Poison Oak, Poison Sumac

- Prevention:** Teach girls and adults to recognize and avoid the plants.
- Treatment:** After exposure, wash all exposed areas with soap and water. Assess severity of reaction and cause. If area is extensive with weeping areas, contact parents to send girl home.

Prevention for Insect Bites/Stings and Poisonous Plants

- Avoid walking through dense woods and grasses. Stay on pathways and trails. Avoid sitting or lying on grass or on the ground in forested areas. Look out for poison oak.
- Wear proper clothing. Long, light-colored pants tucked into socks will help in spotting mosquitoes and ticks before they bite. A tucked-in shirt with a snug collar and cuffs may also help. Insect repellents containing less than 30% DEET should be applied to the clothing of adults. Children should use an insect repellent with less than 20% DEET.
- Each person must monitor herself. Inspect clothing and body after being outdoors. Help others check areas that are hard for an individual to see, such as hair, back and the area behind the knee. Shower and shampoo after being outdoors.



Improper Clothing= Blisters/Sunburn

Temperature and weather can change quickly, so always be prepared for rain, cool temperatures, wind, etc. when participating in outdoor activities. Wear closed-toed shoes and socks. Remind girls of appropriate attire and establish a dress code for activities.



Blisters: are often caused by wearing new shoes or shoes without socks.

- Treatment:** Do not remove the skin from the blister once it has popped. Instead leave it there, clean with soap and water and apply a bandaid. Diabetics should always seek medical attention for blisters.



Sunburn:

- Prevention:** Warn girls and adults to avoid long exposure of skin and to wear head coverings. Sunblock/sunscreen should be applied throughout the day or after swimming and showering. Check the labels as to how frequently to apply. When applying sunblock/sunscreen keep to the "safe zones" of the upper back and shoulders. Girls should be able to apply the lotion to any other area. Adults should put the lotion on the girls' hands and make sure they apply it to themselves properly.



Prepare for Sudden Illness



It is usually obvious when someone has an accident or injury to tell what is wrong, but when someone becomes suddenly ill, it may not be that easy to determine what is wrong. When a person becomes suddenly ill, she/he usually looks and feels sick. Know the signs and signals of common sudden illnesses so you will be able to determine if the person needs emergency help.

What Do I Look For?

- Changes in level of consciousness, such as feeling lightheaded, dizzy, drowsy or confused, or becoming unconscious.
- Breathing problems (i.e., trouble breathing or no breathing).
- Signals of possible heart attack, including persistent chest pain, discomfort or pressure lasting more than a few minutes that goes away and comes back or that spreads to the shoulder, arm, jaw, neck, stomach or back
- Signals of a stroke, including sudden weakness on one side of the face (facial droop); sudden weakness, often on one side of the body; sudden slurred speech or trouble forming words; or a sudden, severe headache.
- Loss of vision or blurred vision
- Signals of shock, including rapid breathing, changes in skin appearance and cool, pale or ashen (grayish) skin.
- Sweating
- Persistent abdominal pain or pressure
- Nausea or vomiting
- Diarrhea
- Seizures

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 1-800-222-2222 and follow the advice given.

Allergic Reactions

- Triggers:** Bee or insect venom, antibiotics, animal dander, pollen, latex, environmental triggers, certain foods (e.g., tree nuts, peanuts, shellfish, dairy products and wheat)
- Look for the following signs and symptoms: hives, itching, rash, weakness, nausea, stomach cramps, vomiting, dizziness, trouble breathing.
 - Trouble breathing can progress to a blocked airway as the lips, tongue, throat and larynx swell. Low blood pressure and shock may accompany these reactions.
 - Death from anaphylaxis may happen quickly because the person's breathing is restricted severely.
 - Call **9-1-1** or the local emergency number if the person: has trouble breathing, complains of throat tightening, is subject to severe allergic reactions, is unconscious.

Asthma

- Triggers:** Exercise, weather changes, plants and molds, perfume, allergens or other irritants which causes the airway to swell and narrow which makes breathing difficult.
- Look for hoarse whistling sound or wheezing, trouble breathing, sweating, shortness of breath, tightness in the chest and coughing after exercise.
 - Call **9-1-1** or the local emergency number if the person's breathing trouble does not improve in a few minutes after using the quick-relief medication.

Epi-Pens and Asthma Inhalers

Assist with any medication that the person brought with them if you are trained to do so or have received instruction from the girls parent/guardian.

Seizures

- Look for a blank stare, a period of distorted sensation during which the person is unable to respond, and/or uncontrolled muscular contractions, called *convulsions*, which last several minutes.
- Call **9-1-1** or the local emergency number if: The seizure lasts more than 5 minutes, the person has multiple seizures with no sign of slowing down, the person appears to be injured, fails to regain consciousness or if the cause is unknown.

Diabetic Emergencies

- Look for changes in the level of consciousness, changes in mood, rapid breathing and pulse, feeling and looking ill, dizziness and headache, confusion.
- If the person is conscious and able to swallow, and advises you that she/he needs sugar, give sugar in the form of a 12-ounce serving of fruit juice, non-diet soft drink or table sugar dissolved in a glass of water.
- CALL **9-1-1** or the local emergency number if: The person is unconscious or about to lose consciousness, the person is conscious but unable to swallow, the person does not feel better within about 5 minutes after taking some form of sugar or if you cannot find any form of sugar immediately.
- Do not put anything, liquid or solid into the persons mouth if they cannot swallow or are about to lose consciousness.

Prepare Girls/Adult to Stay Found



Everyone should safeguard against the possibility of getting lost. Each person should carry a whistle at all times. Three blasts from a whistle (horn) is a universal distress signal. Girls must understand that the whistle is only to be used in emergency situations. Teach girls about the buddy system and how to stay found if they become lost.

Buddy System



- ❑ Girls are divided into teams of two. Each person chooses or is assigned a buddy and is responsible for staying with her buddy at all times, warning her buddy of danger, giving her buddy immediate assistance if it is safe to do so, and calling for or going for help when the situation warrants it.
- ❑ The buddy system is one of the most effective methods of protecting girls while they are engaged in outdoor activities or are away from the regular troop meeting place.
- ❑ The buddy system enables a leader to determine quickly the name of a missing person.
- ❑ Review all possible hazards, “do’s and don’ts,” the emergency signaling system, where adults can be found, and where to go for help.
- ❑ During the activity/event, leaders or other adults in charge must conduct periodic buddy checks.
- ❑ When girls with disabilities are participating, make sure they are paired with other girls rather than with adults, if possible.

Staying Found:



In the event that buddies get lost or separated from the group and become disoriented, the best thing for them to do is stop and try not to panic. They should:

- ❑ Sit down and evaluate the circumstances
- ❑ Try to determine the last location where they knew they were.
- ❑ Orient themselves to the landscape by using a map (if they have one) or try to recognize familiar landmarks such as large boulders or a fallen tree.
- ❑ Teach girls that if they locate a familiar landmark they can travel in an ever widening circular pattern until another familiar landmark is found. They should always keep the last landmark in sight in case there is a need to return to it. Girls should listen carefully for noises, such as traffic or barking dogs, that could lead them to a road. Sounds of moving water can lead to a river. Walking parallel to the river can be another way to reach a road.

What To Do If Lost?



If the buddies cannot figure out where they are or where they need to go, moving about will waste energy and will confuse and frighten them more. In that case buddies should:

- ❑ Sit down and conserve energy. Relax.
- ❑ Find shelter (rock overhang, big tree) to keep as warm and dry as possible and out of the wind.

Girls should devise as many ways as possible to attract the attention of those searching for them.

- ❑ Tie a piece of brightly colored cloth to a high branch or rock.
- ❑ Flash a mirror or other reflective device 3 times at any passing aircraft
- ❑ Make a smoky fire in a safe, open place.
- ❑ Draw large signs on the ground that could be seen from the air.
- ❑ Stay in one place. Don’t wander.
- ❑ Yell or whistle if someone is heard nearby. (Three blasts on a whistle is a universal distress call).

Visit our council website to view a video of three Camporee Directors who experienced an emergency situation—they were grateful they had followed Girl Scout procedures and guidelines! They have been instrumental in helping to develop some updated procedures which will allow future Event Managers to benefit from their experience.

Prepare for Delayed-Help Situations

The Emergency Action Steps:

CHECK

- CHECK the Scene for safety and information.
- CHECK the Victim for consciousness, breathing and circulation, pulse, severe bleeding and other injuries.
- CHECK for Resources Including: water, food, supplies, transportation, shelter, and weather conditions.

CALL FOR HELP

- Make a plan for getting help
- Execute the plan

GUIDELINES FOR MAKING A CALL **If you have a means of quickly calling for help, first gather information to describe:**

- The patient's condition.
- Your location, including:
 - Global positioning system (GPS) coordinates.
 - Prominent landmarks, considering that some may not be visible at night.
 - In what way you have marked your area, if possible.
 - Mileage ONLY if you are sure of the distance and how long it took you to get to the spot. Do not give approximations.
- Any other basic information that emergency medical service (EMS) or rescue personnel may need.

If you can't call for help, improvise a distress signal. There are two types:

- Signals given in groups of three, such as three blasts from a whistle or horn
- Ground-to-air signals

GETTING HELP

In a delayed-help situation, you have four options for getting help.

1. Stay where you are and call, radio or signal for help.
2. Send someone to go get help or leave the victim alone to go get help.
3. Transport the victim.
4. Care for the victim where you are until the victim has recovered enough to travel on his or her own.

To help you decide what is the best approach to getting help and providing care for the victim, ask yourself these questions:

- Is advanced medical care needed and if so, how soon?
- Is there a way to call from the scene for help or advice?
- If phone or radio communication is not possible, is there a way to signal for help?
- Is there a way to transport the victim to help?
- Is it possible to provide care where you are until the victim can travel?
- Is it safer to wait for help where you are?

You may realize that no "best" plan exists, but you may be able to reduce the risks to both you and the victim.



Do not attempt to transport a victim with a possible head, neck or back injury unless

you have proper equipment and training.

CARE

Provide continued care while waiting for help to arrive:

- In a delayed-help situation, continue to monitor the patient until outside help can be obtained.
- Continue to monitor vital signs and conduct a physical exam every 15 minutes for a stable patient and every 5 minutes for an unstable patient.
- This monitoring allows you to recognize and care for any additional problems that may develop or recognize changes in the persons condition.

Follow these guidelines when monitoring the patient:

- Continuously monitor a patient who is unconscious.
- Continuously monitor a breathing victim who is unconscious or has changes in skin appearance and temperature and level of consciousness. Changes in these conditions may indicate developing problems, such as heat or cold emergencies or shock.
- Record the accident/incident in the health log and record each time you recheck the victim and note any changes you find and the time the changes occur. Also note any care you provide.
- Re-evaluate the decision to evacuate as the environment, condition of the patient or group changes.



Assemble First Aid Kit

Recommended 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

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 including: aspirin, cough syrup or other medications including: 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 and local hospital.
4. **First Aid Kits should contain report forms:** The following forms should also be included: Girl Scout accident/injury form, incident form, Mutual of Omaha claim form, and media information form.
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.



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

Determine the Best Layout for Site Safety



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: When setting up a first aid station, the following considerations should be addressed:

- Can people who are injured or weak from sickness get to you 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 obstacles to trip people up?
- 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 a number of different areas for diagnosis, treatment, recovery.
- Does the area feel good to a majority of the people who will be working there?
- Is there a water supply nearby running water?
- Are there restrooms nearby?
- Will you be having 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 and easy up?
- 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?



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.



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

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 or resident camp should refer to the Volunteer Run Camp Administrative Guide or contact the Outdoor Program department at volunteercamps@girlscoutsnorcal.org

When setting up a first aid station the following considerations should be addressed:

- Can people who are injured or weak from sickness get to you 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 obstacles to trip people up?

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 aid station should be staffed at all times.
- 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 20).
- 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 (Page 19).
- 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.



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

Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

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
 - Treatment or medication given
 - Name of person administering treatment
 - Date and time of 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 privy to other volunteers. Guard the confidentiality of all adult health histories with the same zealousness 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 a health care provider's care for anything?

L = Last intake and output. When 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 23-26.



Before
The Activity/Event

During
The Activity/Event

After
The Activity/Event

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 retain girls' medical history and receive permission from parent/guardian for emergency medical treatment. They should be kept in sealed envelopes, in a secure location.

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 –for all adult participants at any overnight event.

Adult Health History with Physical is required when adults will participate in any activity longer than three nights or in physically demanding activities.

Objections to Immunization- For various reasons, some parents/guardians may object to immunizations 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 girls will be participating in any overnight activity, health histories are updated (signed and dated by custodial parent/guardian) within 2 months.
- 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.



Before
The Activity/Event

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The Activity/Event

Communicate Procedures For Safety

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:**
 - 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.

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.

2. **Cleanliness:** Hand washing facilities will 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. Adult and girl leaders will be utilized 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:** Plan a nutritious menu. Cleanliness in handling food utensils is essential and must be stressed. Use ice chests for perishable foods.
4. **Food Allergens:** (common)-Include 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 choose one that uses one of the following fuels: butane, propane, or sterno. Gasoline, white gas, etc., should not be used due to its highly volatile nature. If you are cooking over an open fire, 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 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 know how to use knives, that there is a safety circle, and how to clean & store knives properly.



Before
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Treatment Protocols For Accident • Injuries • Illness

☐ Abrasions, Lacerations, Scratches, and Cuts:

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.

☐ Allergy/Anaphylaxis (See page 12).

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.

☐ Altitude Sickness

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.

☐ Asthma Attack:

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. **NOTE:** The medication may be repeated every 5 to 10 minutes thereafter as needed. These medications might take 5 to 15 minutes to reach full effectiveness.

☐ Bites

Control bleeding. If the wound is bleeding seriously, see a health care provider. Wash minor wounds with soap and water. Apply ice or cold wet compresses. Observe for signs of allergic reaction.

- **Tick**– Remove any embedded tick with fine-pointed tweezers by grasping it very close to the skin and pulling firmly. (page 13).
- **Mosquito/Tick** –If flu-like symptoms develop within 2 weeks of a mosquito/tick bite, see a health care provider for evaluation.
- **Spider**– Call 9-1-1 immediately if you suspect that someone has been bitten by a black widow or brown recluse spider. *Elevate* the bitten area.
- **Venomous Snake Bite**– Wash the wound, apply an elastic (pressure immobilization) bandage to slow the spread of venom, keep the injured area still and *lower* than the heart. See a health care provider. **DO NOT:** apply ice, cut the wound, apply suction, apply a tourniquet, or use electric shock.

☐ Bleeding:

- **Arterial, venous** - 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.
- **Nose** - 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.
- **Neck** - Carefully pinch the opening of the wound closed.
- **Head:** Cover the wound with a bulky dressing and press lightly. Monitor the patient for shock.

☐ Blisters: (See page 11)

Do not remove the skin from the blister once it has popped. Instead leave it there, clean with soap and water and apply a bandaid. Diabetics should always seek medical attention for blisters.

☐ Bruises and Bumps:

Apply cold compresses or ice bag. Consider possibility of fracture or deep injury if tenderness or pain is severe and treat as sprain, strain or fracture until additional medical attention is available.

☐ Burns:

All burns should be treated with cool water. 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.

☐ Cold Related Injury

- **Hypothermia (See page 11)**– 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. Seek medical assistance. For severe hypothermia, keep the patient from getting colder and transport to medical help.
- **Frostbite: (See page 11)**. 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.



Before
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Treatment Protocols For Accident • Injuries • Illness

☐ Depression/Emotional Distress

Train volunteers and event staff to recognize and report to the first aider any signs or symptoms of depression, suicidal tendencies, behavior, substance dependence, mental illness, and eating disorders among participants and staff. See Chapter 3 of the *Council Resource Guide* for general tips on how to handle these sensitive issues, as well as the physical and behavioral symptoms of these problems. Take time to review these tips and help the girl to find appropriate help.

☐ Dehydration (See page 12)

Encourage the person to drink plenty of fluids containing salt to replace what has been lost and to rest.

☐ Diabetic Emergency (See page 14)

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, 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 (9-1-1). If any head injury is accompanied by loss of consciousness (even brief), dizziness, vomiting or nausea, headache, blood or clear fluid from the nose or ears, 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 (See page 12)

• 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,

• Heat Exhaustion:

Stop the physical exertion and remove the person from the heat to a cooler place. Treat for shock. 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. If there is no improvement in half an hour, seek medical assistance.

• Heat Stroke

Get medical help as soon as possible. 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; then dry the victim. Treat for shock.

☐ 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.



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Treatment Protocols For Accident • Injuries • Illness

❑ Neck Injury

Anyone who sustains a fall from more 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.

❑ Pediculosis (Head Lice):

Patient must be sent home. Girl/adult may not return until evidence is provided that patient is clean of lice.

❑ 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 1-800-222-2222 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 person's 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.

❑ 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 soaks if ice is not available. Do not pack in ice. 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 signals 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 her/him, 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 poisoning 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.



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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, skin lesions. Isolate the patient. Contact parents to send patient sent 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 (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.

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

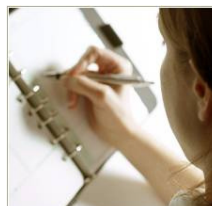
First aid administered in the first few minutes can mean the difference between life and death. Calling for help is often the most important action you can take. In an emergency, secure professional medical assistance as soon as possible, normally by calling 9-1-1.

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

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.



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



Have a List of Emergency Phone Numbers Posted
(See page 32 for a template.)

Have a list of the following phone numbers:

- EMS
- Police
- 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.

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



Always call 9-1-1 or local the 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.

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 (like GSNorCal). With cellular phones, E9-1-1 is not functional because there is no fixed location to identify on the dispatcher's screen.

In the event of a serious accident, injury, or fatality, the Council Emergency Management Plan (page 28) 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.



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Know GSNorCal Emergency Management Plan

Girl Scouts of Northern California Emergency Management Plan

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 (Pages 28, 33-34).

OFFICE NUMBERS FOR NON-EMERGENCIES		<small>GIRL SCOUTS OF NORTHERN CALIFORNIA</small> EMERGENCY CARD <small>FOR COUNCIL VOLUNTEERS</small> In case of an emergency: 1) Always call 9-1-1 first (if needed) 2) Notify the council at its 24/7 emergency answering service: 1-877-636-1912 3) Additional information about the Council's Emergency Plan is provided in the <i>Council Resource Guide: Volunteer Essentials</i>
Alameda Office 510-562-8470 Chico Office 530-343-1904 Eureka Office 707-443-6641	Redding Office 530-221-8180 San Jose Office 1-408-287-4170 Santa Rosa Office 707-544-5472	

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. During office hours, phone your nearest council office. After hours, phone **1-877-636-1912**. The council answering service will contact 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.
7. Carry the Media Information Form 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.
8. Complete Accident/Injury Report Form or Incident Report Form and send to Risk Management and Travel 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**
9. Be sensitive to the fact that those involved in traumatic situations may need further support. Contact your CDD/VDM (GSNorCal staff member) if additional assistance is needed.



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The Activity/Event

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Report Accidents/Injuries to GSNorCal

Notify Risk Management & Travel Within 24 hours of any Accident, Injury, or Incident

Accident/Injury Report (pages 41-42) This 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.

Incident Form (page 40) Use this 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. 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 forms **MUST** be submitted within 24 hours of occurrence to the Insurance Specialist at the Alameda Office Risk Management & Travel Dept.
Insurance@GirlScoutsNorCal.org

Mutual of Omaha Insurance Claim (page 43) form should be kept at the first aid station. For any accident where a claim will be made, the first aider and event manager or troop/group leader should work together to gather the information to complete the form and turn in with the Accident/Injury Report Form within 24 hours of the accident or injury. Email insurance@girlscoutsnorcal.org

***All of these forms should be kept at the first aid station and in the first aid kit.**

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
- Evaluation
- Staff debriefing

To ensure that you are using the most current forms always check the council website :

GirlScoutsNorCal.org/forms

The image shows two forms from Girl Scouts of Northern California. The left form is the 'Accident/Injury Report Form' and the right is the 'Incident Report Form'. Both forms include sections for:

- A. Injured Information:** Name, address, phone, date of birth, sex, and emergency contact.
- B. Witness Information:** Name, address, phone, and date.
- C. Describe the Accident/Injury:** A detailed description of the incident.
- D. How Did Accident/Injury Occur?:** A description of the circumstances leading to the incident.
- E. How Did Accident/Injury Occur?:** A description of the circumstances leading to the incident.
- F. How Did Accident/Injury Occur?:** A description of the circumstances leading to the incident.

 The forms also include checkboxes for 'Serious argument', 'Physical altercation', 'Non-injury incident', 'Legal proceedings', and 'Adverse report to media'.

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.

First Aider Position Description

APPOINTED BY & ACCOUNTABLE TO: troop /group Leader for troop/group activities or event manager for events

TERM: Activity or event duration, may be reappointed

PURPOSE: Ensure the safety of girls and adults present at Girl Scout activities and events and administer first aid as needed.

INDIVIDUAL RESPONSIBILITIES:

- Be present throughout the entire activity or event, and ideally should have no other responsibilities or duties. An alternate first Aider should be available to substitute, as needed, if the first aider will be busy during certain times.
- Download the latest GSNorCal Health & Safety Plan for Activities and Events from the council website and follow protocol outlined therein. This document is updated on a regular basis to reflect generally accepted first aid procedures.
- Maintain a first aid kit. Inventory and purchase needed supplies before event, and replenish after.
- Obtain directions to the nearest hospital and maintain a list of emergency phone numbers, including ambulance, poison control, police, and hospital.
- For activities or events where participants do not attend with troop/group leaders, first aider should maintain Health History Forms for girls and adults and discreetly share information *only as needed* with other adults (allergies, activity limitations, etc.)
- Determine a suitable location for the first aid station that is visible and convenient. First aid station should have a quiet area for patients, a clean place to lie down, adequate protection from sun or weather. Assures station is staffed at all times. Announce location of first aid station to all participants present; 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.
- Keep and dispense medications according to *The Girl Scout First Aider's Health Care Plan For Activities & Events* and the *Council Resource Guide: Volunteer Essentials*. No medication, including over-the-counter medications, such as Tylenol, cough syrup, or Neosporin, should ever be given without the prior written permission of a custodial parent, guardian, or physician.
- Administer first aid as needed to girls or adults, and inform event manager and parents of any injuries sustained.
- Maintain Health Log. The Health Log should be bound and page numbered (do not remove pages) and can be obtained from the troop/group leader, the service unit or event manager. Do not skip lines. Records should be kept in pen. After event, Health Log should be returned to troop/group leader, service unit or event manager.

Health Log Documentation must include:

- Name of patient
 - Complaint or type of injury
 - Treatment or medication given
 - Name of person administering treatment (whether troop/group leader or first aider)
 - Date and time of treatment
- Maintain a supply of Accident/Injury forms and insurance claim forms. If there are any injuries, ensure that those forms are filed with the Risk Management and Travel Department within 24 hours along with a copy of that girl's Health History form.
 - Return Health History forms to leaders or destroy them for any girls who were not injured after the event.

IN PARTNERSHIP WITH THE TROOP/GROUP LEADER, SERVICE UNIT OR EVENT MANAGER:

- Complete and file with the council, the Accident/Injury Forms and insurance claim forms within 24 hours.
- Instruct all adults present at the event that only an adult with current first aid/CPR training certification should assist a victim, except in the case of extreme emergency, until qualified help arrives. Troop leaders may give girls regular medications with prior written permission from the custodial parent, guardian or physician (any medication given must be entered into the Health Log).
- Ensure that health, safety and policy standards are maintained.
- Establish safety guidelines for activity/event participants to prevent injuries, such as fire or knife safety, food storage and preparation guidelines, etc.

QUALIFICATIONS:

- Registered Girl Scout adult (or girl with an adult mentor) with an approved volunteer screening on file
- Current First Aid and CPR certification as specified in the *Council Resource Guide: Volunteer Essentials*. Required when the activity or event is located less than 30 minutes away from emergency medical responders or when Safety Activity Checkpoints indicate that a first aider is needed. Large events with more than 200 participants shall have one first aider for every 200 participants.
- Ability to maintain good judgment regarding health and safety procedures and crisis situations.
- Ability to assess when additional medical attention should be obtained.
- Good oral and written communication and interpersonal skills; knowledge of typical emotional and physical needs of children.
- Knowledge of health and safety standards as outlined in the *Council Resource Guide: Volunteer Essentials*.

Your appointment to this position begins on _____ and will continue until September 30, 200____.

Printed Name

Signature

Date

Appointed by:

Printed Name

Signature

Date

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 on GirlScoutsNorCal.org/safety. Read the checkpoints, follow them, and share them with other volunteers, parents, and girls before engaging in activities with girls.

2. 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.

3. Get parent/guardian permission. When an activity takes place that is outside the normal time and place, advise each parent/guardian of the details of the activity and obtain permission for girls to participate.

4. 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 in the CRG for reporting concerns about abuse or neglect that may be occurring inside or outside of Girl Scouting.

5. Be prepared for emergencies.

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

6. Travel safely.

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

7. 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.

8. 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. Do not carry ammunition or firearms in the presence of girls unless given special permission by GSNorCal for group marksmanship activities.

9. 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, clique behavior, and discrimination.

10. 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.

11. 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. On group websites, publish girls' first names only and never divulge their contact information. Teach girls the Girl Scout Online Safety Pledge girlscouts.org/help/internet_safety_pledge.asp and have them commit to it.

2. 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.

Safety is our #1 Priority!

These guidelines, along with the guidelines in the appropriate Safety Activity Checkpoints GirlScoutsNorCal.org/safety for the specific activity must be followed at all times.

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:

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

Information for emergency call.

**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 Enhanced 9-1-1 (E9-1-1) systems 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.

GIRL SCOUTS OF NORTHERN CALIFORNIA

EMERGENCY CARD

FOR COUNCIL VOLUNTEERS

In case of an emergency:

- 1) Always call **9-1-1** first (if needed)
- 2) Notify the council at its 24/7 emergency answering service: **1-877-636-1912**
- 3) Additional information about the Council's Emergency Plan is provided in the *Council Resource Guide: Volunteer Essentials*

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<p>OFFICE NUMBERS FOR NON-EMERGENCIES</p> <p>Alameda Office Redding Office 510-562-8470 530-221-6180</p> <p>Chico Office San Jose Office 530-343-1904 1-408-287-4170</p> <p>Eureka Office Santa Rosa Office 707-443-6641 707-544-5472</p> <p>For General Inquiries: Email: info@girlscoutsnorcal.org Toll-Free Number: 1-800-447-4475</p> <p><small>Version: 08-13-13 C.Casiano</small></p>	<p>OFFICE NUMBERS FOR NON-EMERGENCIES</p> <p>Alameda Office Redding Office 510-562-8470 530-221-6180</p> <p>Chico Office San Jose Office 530-343-1904 1-408-287-4170</p> <p>Eureka Office Santa Rosa Office 707-443-6641 707-544-5472</p> <p>For General Inquiries: Email: info@girlscoutsnorcal.org Toll-Free Number: 1-800-447-4475</p> <p><small>Version: 08-13-13 C.Casiano</small></p>
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Girl Health History Record

All information to be completed and signed by parent/guardian annually

Part 1: Girl Record

Girl's Name: _____ Birth Date: _____ School Attending: _____ Troop #: _____

Address/City/Zip: _____ Family Email: _____

Mother's Name: _____ Evening Phone: _____ Cell Phone: _____

Father's Name: _____ Evening Phone: _____ Cell Phone: _____

Does your daughter/ward have a special need? No Yes If yes, does she need accommodations? No Yes Please explain: _____

Do we have your permission for your daughter/ward to receive emergency medical treatment if needed? No Yes

Health Information Privacy Statement

The Girl Health History Record is for health care concerns at the specified event only. All records will be handled by staff/volunteers whose job includes processing or using this information for the benefit of the participant. All medical records will be held in limited access by the health care supervisor of the specific event. Minimal necessary information may be shared with event staff/volunteers in order to provide adequate participant safety and health care. The health history record will be retained by the sponsoring council or GSUSA until it is destroyed. All forms/records with noted treatment will be retained for seven years past the age of maturity of the participant. Access to the information will be limited, but copies may be requested from the event sponsor, by the participant or their legal representative. *I have read the above procedures for handling the health history record information and I agree to the release of any records necessary for treatment, referral, billing or insurance purposes.*

Parent/Guardian Signature: _____ Date: _____

I give permission for my daughter to receive treatment for routine medical and/or first aid needs as outlined in the Treatment Protocols and for the administration of prescribed medications. I understand that in the event of an emergency, every effort will be made to contact a parent/guardian or emergency contact. If no contact can be made, I hereby give authorization to Girl Scouts of Northern California to give emergency medical and surgical treatment and hospitalization as necessary for my child and/or dependent minor by a licensed physician pursuant to Section-6910 of the civil Code of California. I know of no reason(s) other than the information indicated on this form, why my daughter/dependent should not participate in prescribed activities.

Parent/Guardian Signature: _____ Date: _____ Phone: _____ Cell Phone: _____

Part 2: Emergency Contact Other than Parent

Name: _____ Daytime Phone: _____ Evening/Cell Phone: _____

Part 3: Insurance Information

Name of Dentist: _____ Phone: _____

Name of Doctor: _____ Phone: _____

Insurance Carrier Name: _____ Policy/Group Number: _____

Part 4: Allergies/Illnesses/Injuries

Allergic Reactions: (Check those that apply and specify nature of the allergic reaction) Check here for no known allergies

Animals Hay Fever Medicine/drugs Pollen
 Food Insect Stings Plants Other (specify) _____

Chronic or Recurring Illnesses: (Check those that apply and give appropriate dates) Other Chronic/Recurring Illnesses (specify) _____

Asthma Diabetes Heart Defect/Disease Musculoskeletal Disorder
 Bleeding/Clotting Disorders Ear Infection Hypertension Seizures

Date of last health examination: _____ Were any medical problems noted? No Yes If Yes please explain _____

Other Health Conditions: (Check those that apply) Other (specify) _____

Attention Deficit Disorder(ADD) Down's Syndrome Hearing Impairment Nose Bleeds Wears Glasses/Contacts
 Bed Wetting Emotional Disturbances Menstrual Cramps Sickle Cell Trait/Disease Special Dietary Regimen
 Dental Braces Fainting Motion Sickness Sleep Disturbances Visual Impairment

Part 5: Medications

Is your child taking any medications? No Yes
If Yes, list medication, reason, and possible side effects:

Medication	Reason	Possible Side Effects

Activity Restriction? No Yes

If Yes, please list restrictions: _____

Please review this form annually. If there are no changes Sign and date the form

Updated by: _____ Date: _____
Updated by: _____ Date: _____
Updated by: _____ Date: _____

Part 6: Immunization History

The following is my child's immunization history:

Immunization	Year Primary Series	Year of last Booster
D.T.P (Diphtheria,Tetanus,Pertussis)	_____	_____
Td	_____	_____
Measles	_____	_____
Mumps	_____	_____
Rubella(German Measles)	_____	_____
Polio	_____	_____
Hbpv	_____	_____
Tuberculin Test	_____	Result

I/ We have chosen not to immunize my/our child
Parent/Guardian Signature: _____ Date: _____

Adult Health History

Girl Scouts of Northern California with offices in:
Alameda, Chico, Eureka, Red Bluff, Redding, San Jose,
Santa Rosa, & Ukiah
T (800) 447-4475
F (510) 633-7925
www.GirlScoutsNorCal.org

Part 1: Adult information

Adult Name: _____ Birth Date: _____ Female Male

Address/City/Zip: _____ Email: _____

Day Phone: _____ Evening Phone: _____ Cell Phone: _____

Health Information Privacy Statement

The Adult Health History Record is for health care concerns at the specified event only. All records will be handled by staff/volunteers whose job includes processing or using this information for the benefit of the participant. All medical records will be held in limited access by the health care supervisor of the specific event. Minimal necessary information may be shared with event staff/volunteers in order to provide adequate participant safety and health care. The health history record will be retained by the council or GSUSA until it is destroyed. All forms/records with noted treatment will be retained for seven years. Access to the information will be limited, but copies may be requested from the council by the participant or their legal representative.
I have read the above procedures for handling the health history record information and I agree to the release of any records necessary for treatment, referral, billing, or insurance purposes.

Adult Participant Signature: _____ Date: _____

Part 2: Insurance Information

Name of Dentist: _____ Phone #: _____

Name of Doctor: _____ Phone #: _____

Insurance Carrier Name: _____ Policy/Group Number: _____

Part 3: Allergies/Illnesses/Injuries

Allergic Reactions: (Check those that Apply and specify nature of the allergic reaction)

- | | | | |
|----------------------------------|--|--|--|
| <input type="checkbox"/> Animals | <input type="checkbox"/> Hay Fever | <input type="checkbox"/> Medicines/Drugs | <input type="checkbox"/> Pollen |
| <input type="checkbox"/> Food | <input type="checkbox"/> Insect stings | <input type="checkbox"/> Plants | <input type="checkbox"/> Other (specify) |

Check here for no known allergies

Chronic or Recurring Illnesses: (Check those that apply and give appropriate dates)

- | | | | |
|---|--|---|------------------------------------|
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Asthma | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Dizziness |
| <input type="checkbox"/> Heart Defect/Disease | <input type="checkbox"/> Bleeding/Clotting Disorders | <input type="checkbox"/> Ear Infection | <input type="checkbox"/> Fainting |
| <input type="checkbox"/> Hypertension | <input type="checkbox"/> Menstrual Problems | <input type="checkbox"/> Musculoskeletal Disorder | <input type="checkbox"/> Seizures |

Date of last health examination: _____
If yes please explain: _____

Were any complicating medical problems noted? Yes No
Other health conditions or injuries that might impact your participation? _____

Part 4: Medication

Are you taking any medications? Yes No

If YES, list medication, reason, and possible side effects

Medication	Possible Side Effects

Part 5: Consent to Treat

In the event of an emergency, every effort will be made to contact an emergency contact. I hereby give authorization to the Girl Scouts of Northern California to seek treatment for myself by a licensed physician pursuant to California Family Code Section 6910 and California Civil Code 25.8. I know of no reason(s), other than the information indicated on this form, why I should not participate in prescribed activities.

Adult Participant Signature: _____ Date: _____

Part 6: Emergency Contact(s)

Name	Relationship	Cell Phone	Day Phone	Evening Phone

Please review the information on this form annually. If there are no changes or just minor adjustments, please mark those, then sign and date this form where indicated

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____



Girl Scouts of Northern California with offices in: Alameda, Chico, Eureka, Red Bluff, Redding, San Jose, Santa Rosa, & Ukiah
 T (800) 447-4475
 F (510) 633-7925
 www.GirlScoutsNorCal.org

Girl Scouts of Northern California

Trip or High-Risk Activity Form

This form is recommended as a planning tool but is not required for:

- Service Unit Activities
 - Council sponsored activities in the Program & Event Guide
 - Activities where girls walk or ride their own bicycles as part of their regularly scheduled meetings
 - Trips that are located within one hour driving time or 60 miles from the regular meeting place, and are less than six hours in duration, AND are NOT high-risk
- For *all trips* you should always make sure your troop/group emergency contact person has updated information about the trip, girls and drivers

This form must be completed and submitted to service units for the following trips and high-risk activities:

- Trip farther than one hour driving time (or 60 miles) or longer than 6 hours in duration but NOT high-risk:**
 File with service unit at least 2 weeks prior to the activity and give a copy to troop/group emergency contact person. Service approves trip.
- Trip of three nights or longer or involving air travel:** Submit initial form with service unit at least 6 months - 1 year prior to the activity and give a copy to troop/group emergency contact person. Service Unit will forward to the Risk Management & Travel Council staff for approval at Travel@GirlScoutsNorCal.Org. Final forms (including updates and final roster) submitted with the council at least 4 weeks prior to the activity.
- High-risk activity:** Submit initial form with service unit at least 6 months – 1 year prior to the activity and give a copy to troop/group emergency contact person. Service unit will forward to the Risk Management & Travel Council staff for approval at travel@girlscoutsnorcal.org. Final forms (including updates and final roster) submitted with the council at least 4 weeks prior to the activity.
- International Trip:** Submit with service unit at least one year prior to the activity and again with updated information 2 months prior. Service Unit will forward to the Risk Management & Travel Council staff for approval at travel@girlscoutsnorcal.org

Troop Volunteer Name	Daytime/Cell Phone#	Email Address
Address	Troop #	Troop Grade Level <input type="checkbox"/> D <input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> C <input type="checkbox"/> S <input type="checkbox"/> A
City/State/Zip	Service Unit #	Service Unit Name:

About the Trip:

Departure Date & Time of trip:	Returning Date & Time of trip:	
Destination	Details (vendors, facility, and/or location)	
Mode of Transportation		
# of Registered Girls Attending:	# of Registered Adults Attending:	# of Non-Members (unregistered adults/children):

Briefly Describe Activities

Special Requirements: ** Please refer to Safety Activity Checkpoints found online to determine if you need a first aider.

**First Aider Required? Yes No

If yes, Name of Certified First Aider: _____ Date Certification Expires: _____

Other special adult training or certification required (Troop Camping Certification, lifeguards, GSNorCal Extended Travel Training, etc.)? If so please provide name, certification information and training dates (use another sheet, if needed).

Checklist: (NOTE: not all of these may be required for your trip/activity)

- | | | |
|---|--|---|
| <input type="checkbox"/> Annual Permission Forms | <input type="checkbox"/> Behavior contracts | <input type="checkbox"/> All trip adults are aware of the emergency procedures and have council |
| <input type="checkbox"/> Parent Permission Forms | <input type="checkbox"/> Rental Agreements | <input type="checkbox"/> Reference High Risk Activities section in the Council Resource Guide (CRG) to determine if activity is council approved. |
| <input type="checkbox"/> Girl Health History Forms | <input type="checkbox"/> Contract with Facility/Vendor | <input type="checkbox"/> If activity is council approved and considered High Risk, verify that it is on file on the Approved Vendor List. |
| <input type="checkbox"/> Adult Health History Forms | <input type="checkbox"/> Other: | |
| <input type="checkbox"/> Non-member insurance | | |
| <input type="checkbox"/> Extended trip Insurance | | |

A copy of the troop/group roster has been provided to the troop/group emergency contact person.

Emergency Contact Information: Full Name: _____ **Phone#:** _____ **Email Address:** _____

Trip Planning Information:

GSNorCal recommends that all troop leaders maintain current driver information and girl rosters on an ongoing basis. Girl rosters and driver information must be provided to service units as part of the notification process for trips and high-risk activities requiring service unit or council approval.

Roster:

Please attach a troop/group roster and indicate which girls and adults will attend. Please include:

- Girl names with parents' phone numbers during the activity
- Adult names and indicate role of each adult attending (leader, chaperone, first aider, driver, etc)
- Emergency contacts for all girls and adults attending
- Drivers' name, drivers' license expiration date, Drivers' insurance expiration date

Please Note: File this Trip or High-Risk Form by the due date even if attendance is not yet finalized. Notify the service unit of any changes to the roster later, if necessary.

Budget: (For information on budgeting, please refer to the budgeting section of the Council Resource Guide)

Cost of transportation, food, event fees, lodging, etc.

Complete this section **ONLY** for activities which cost over \$50 per girl or for trips longer than 2 nights.

Total Cost: \$	Money-Earning Activities (Please describe)	Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No
----------------	--	---

Cost Per Girl: \$		<input type="checkbox"/> Yes <input type="checkbox"/> No
-------------------	--	--

Amount Earned \$		<input type="checkbox"/> Yes <input type="checkbox"/> No
------------------	--	--

Balance Secured Through:

Troop Adult Volunteer Statement of Compliance:

- GSUSA Safety Activity Checkpoints, GSUSA and Council health, safety and emergency procedures have been reviewed and are being adhered to as defined in Council Resource Guide: Volunteer Essentials and Travel Appendix.
- All drivers for these activities are properly licensed and all vehicles are registered, insured, maintained and have a seat and seat belt for every passenger.
- Parents/guardians are informed of the trip activities, safety and emergency procedures, and contact information.
- Appropriate permissions have been obtained for each girl including Health History.
- Our group/troop will conduct ourselves at all times in a positive manner while representing Girl Scouts.
- I understand providing misinformation could result in the trip not being covered by Girl Scout Activity Insurance and could increase personal liability.

I _____ **Acknowledge and agree to the above statements.**

For Service Unit Use Only (To be filled out by authorized SU Rep)	For Council Use Only (To be filled out by Risk Management & Travel staff)
Received By: _____ Date: _____	Received by: _____ Date: _____
Approved By: _____ Date: _____	Approved by: _____ Date: _____
Date Sent to Council for Approval: _____	Date Confirmation Email Sent: _____

Annual Permission Form

October 1, 20 ____ to September 30, 20 ____

Complete this form at time of registration.
This form will be retained by the Troop/Group leader.

Name of Girl Scout	Member ID	Troop #	Service Unit #
Address	Home Phone #	Other Phone #	
City/State/Zip	Date of Birth	Grade Fall of 20	School
Printed Name of Parent/Guardian	Home Phone	Relationship to Child	
Email Address	Mobile Phone #		
Emergency Contact Name	Emergency Contact Phone(s)	Relationship to Child	
Emergency Contact Name	Emergency Contact Phone(s)	Relationship to Child	

Yes No

Initials:

Permission for Trips: : My daughter/ward has permission to travel to, attend and participate in troop and council-sponsored activities that are 1) located within one hour's driving time of the regular meeting place, 2) not exceeding 6 hours, and 3) not considered high risk activities as outlined in the *Council Resource Guide*.

Yes No

Initials:

Permission to Participate in Product Sales: My daughter/ward has permission to participate in the fall and cookie product sales programs. I agree to accept financial responsibility for all products and money she receives and understand that Girl Scouts reserves the right to take appropriate action to secure payment for product received by me. I further understand that she must have adult guidance at all times when participating in a Girl Scout product sale program and that my daughter/ward may not take product orders before the official start of the product sale program as determined by Girl Scouts of Northern California.

Yes No

Initials:

Permission to Use Photographs: I hereby consent that the videotapes, photographs, motion pictures, electronic images and/or audio recordings of my daughter/dependent may be used by Girl Scouts for Public Relations and Publicity purposes. I understand that her last name and residence will not be used for publicity purposes.

Yes No

Initials:

Permission for Emergency Medical Treatment: In the event of an emergency, every effort will be made to contact a parent/guardian or emergency contact. If no contact can be made, I hereby give authorization to Girl Scouts of Northern California to seek treatment for my child and/or dependent minor by a licensed physician pursuant to California Family Code Section 6910 and California Civil Code Section 25.8. I know of no reason(s) why my daughter/dependent may not participate in prescribed activities except as noted on the Health History Form. **If permission for emergency medical treatment is not given, please prepare a signed statement providing the reason, a release of liability, and alternate instructions and attach to this form.**

Yes No

Initials:

Permission to Survey: My initials certify that I understand that my daughter may occasionally be asked to participate in evaluations/surveys as part of her Girl Scout activities. I understand that her participation is voluntary, and that she will neither receive compensation of any form for participating nor will her standing in her Girl Scout sponsored programs be effected, if she chooses not to participate. I further understand that my daughter's confidentiality will be protected throughout the entire project, and that she will never be identified in any publication, written or spoken. I understand that she may discontinue taking evaluations/surveys at any time without consequence.

Special Accommodations:

My daughter/ward requires the following special accommodations (write "none" if there are none)

Parent Agreement:

I have read and understand this Annual Parent Permission Form. I may change or revoke any aspect of this agreement at any time by submitting my request, in writing, to the troop/group leader.

Signature of Parent/Guardian

Date



Girl Scouts of Northern California with offices in:
 Alameda, Chico, Eureka, Red Bluff, Redding, San Jose,
 Santa Rosa, & Ukiah
 T (800) 447-4475
 www.GirlScoutsNorCal.org

Girl Scouts of Northern California

Incident Report Form

Send this completed form to the Risk Management & Travel Team
 within 24 hours of the incident: Confidential Fax #: 510-562-3194
 Or Email insurance@girlscoutsnorcal.org

Use this 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.

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 to the media

***If the incident involves any sort of accident or injury, please use the Accident/Injury Report Form.**

Your contact information:

Name: _____ Troop #: _____ Service Unit: _____

Email: _____ Daytime Phone #: _____ Cell Phone #: _____

Address: _____

City: _____ State: CA _____ Zip: _____

Signature: _____ Date: _____

About the Incident:

In the spaces provided here or attachment pages, describe the sequence of the incident in detail including:

Date: _____ Time: _____ Location: _____

Names of people involved in the incident: _____ Contact information of people involved: (phone, email, mailing address) _____

What circumstances led to the incident? What were people doing at the time? Were there any previous situations which contributed to the incident?

Provide as complete an account as possible of what was said and what happened between the people involved.
 (use additional pages if necessary)

Describe the procedures that were followed by troop or event volunteers (Whom, position, what was done or said, etc.)

Names of people who witnessed the incident: _____ Contact information of witnesses (phone, email, mailing address) _____

Were local authorities called? yes No Describe any contact made with/by the media regarding the incident:
 If yes describe: _____

Names of council staff members notified: _____ Date: _____



Girl Scouts of Northern California with offices in: Alameda, Chico, Eureka, Red Bluff, Redding, San Jose, Santa Rosa, & Ukiah T (800) 447-4475 www.GirlScoutsNorCal.org

Accident/Injury Report Form

This form is to be used to report any incident, injury or accident. Fax this completed form along with Mutual of Omaha Claim form to Council Risk Management & Travel Assistant within 24 hours of incident. Fax to 510-562-3194, 24 hours a day, 7 days a week.

A. Injured Information:

Date of Incident/injury: Time: a.m. p.m. Location (include complete address) City: State: Zip: Name of Injured: Age: Male Female Address: City: State: Zip: Parent/Guardian Name: Phone: (Include area code) Parent/Guardian Email Address:

B. Witnesses (attach signed statements)

Name: Phone: Address: City: State: Zip: Name: Phone: Address: City: State: Zip: Name: Phone: Address: City: State: Zip:

C. Describe Accident/Injury: (Include part of the body injured)

Blank lines for describing the accident/injury.

D. How did Accident/Injury Occur? (Describe in detail.)

Blank lines for describing how the accident/injury occurred.

Police Report Filed? Yes, Police report #: Police Department: No

E. First Aid

Was first aid given? yes No If yes, by whom? Where? Time first aid was administered: Description of first aid administered:

F. Action Taken

After the incident did the injured: continued activity limited activity went home went to hospital

If taken to hospital, who took the injured?

Name of Hospital:

Address:

City:

State:

Zip:

Name of Attending Physician:

G. Parent/Guardian Notification

Were parents/guardians notified? Yes No

If yes, how? (Writing, telephone, etc.)

Who notified parent/guardian?

How soon after the incident?

H. Equipment

Was any equipment or object connected with this incident? Yes No

If yes, what?

How did it contribute?

I. Behavior

Did any behavior or activity by injured contribute to the incident/injury? Yes No

If yes, explain.

J. Other contributing Factors? (Please list)

K. Prevention

How could this incident have been prevented?

Submitted by:

Position/Title:

Date:

OFFICE USE ONLY

Date received in the council office:

Date reported to insurance company:

**GIRL SCOUTS OF THE U.S.A.
CLAIM FORM**



Mail any additional bills
(properly identified by
injured person and
Council name) to:



Special Risk Services
United of Omaha Life Insurance Company
P.O. Box 31156
Omaha, Nebraska 68131
1-800-524-2324



CLAIMANT INFORMATION – ALL QUESTIONS MUST BE ANSWERED

Claim is made under the following Plan:

- Plan 1 – Basic Coverage
- Plan 2 – Participant Accident
- Plan 3E – Extended Event
- Plan 3P – Extended Event
- Plan 3PI – International Extended Event
- International Inbound

Enrollment Request ID: _____
(Applicable to Optional Coverages only)

Name of claimant	Identification Number	Age	Date of Birth
Claimant's address	Number and Street	City	State ZIP Code
If claimant is a minor, name of parent or guardian		Phone Number () -	
Address of parent or guardian	Number and Street	City	State ZIP Code

If your organization has selected coverage containing a Nonduplication amount, the benefits will be considered as follows: The Nonduplication amount, as stated in your selected coverage, of medically necessary services and supplies can be paid regardless of other insurance coverage. For expenses over the Nonduplication amount, or if you expect the total to exceed the Nonduplication amount, you must submit to your primary insurance carrier. We require their Explanation of payment even if it is applied to your deductible. If Denied, send a copy of your denial notice. Include itemized bills.

Father, Guardian or Claimant's (if adult) Employer's Name and Address: _____
 _____ Phone No. () - _____

Mother, Guardian or Spouse's Employer's Name and Address: _____
 _____ Phone No. () - _____

Name of all companies providing your insurance coverage or prepaid health plans.	Policy or Certificate No.
Name of Company	Address

If you do not have other coverage, sign and date the following statement.

I, _____, on _____, verify there is no other insurance coverage available for these and all expenses related to this claim.

I hereby certify that all above information is true and complete.

I verify that I have read and understand the fraud statement for my state that accompanied this form.

Signature (Parent/Guardian) _____ Date _____

GIRL SCOUT LEADER STATEMENT

Troop Number _____ Level: 0 Daisy 3 Cadette 6 Nonmember Child 9 Seasonal Staff
 1 Brownie 4 Senior 7 Nonmember Adult 51 Ambassador
 2 Junior 5 Adult Member 8 Staff

Name of Council	Council No.	Phone Number () -
Council's address	Number and Street	City State ZIP Code

Date and place of accident or sickness	Date and location	Nature and details of injury or sickness
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 T (800) 447-4475
 F (510) 633-7925
 www.GirlScoutsNorCal.org

Media Information Sheet

GirlScoutsNorCal.org • 800-447-4475

Use to 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 any event.

Members of the Media:

The safety and welfare of our members is our primary concern. Each adult volunteer or staff member present today has a very clearly defined role in supervising and supporting our girls. If they are taking the time to speak with you, they are being taken away from those duties.

As well, it is important that we protect our members' privacy. Our policy is to obtain a written photo/media release form from girl or adult members who will appear in the media. Due to the fact that your visit today was not previously arranged, we do not have those signed release forms.

Therefore, we respectfully ask that you:

- Do not photograph or record, by any means, any girl or adult members.
- Do not interfere with the activities taking place, nor speak with any girls or adults other than the following designated media liaison(s):
- Do not roam freely around the site. Please remain in the following area:

Girl Scouts of Northern California Media Relations Staff:

Please refer media to contact Dana Allen, Communications Manager, dallen@girlscoutsnorcal.org, 936-662-1901 cell; 1-510-562-8470 ext. 1601 office.

Girl Scouts of Northern California Officers:

Nikki Van Ausdall	Chief Officer, Communication & Fund Development	510-562- 8470 ext. 1506
Michelle McCormick	Chief Officer, Membership & Program	1-408- 287-4170 ext. 1105
Marina Park	CEO	(510) 562-8470 ext. 1106