

**When an emergency arises, announce it with two long whistle blows.**

**In the case of a medical emergency:**

1. Assess the situation for danger. Do not approach if the scene is unsafe.
2. Direct a staff member to watch/care for other clients. If possible, have them return to campus.
3. Perform a primary assessment of the victim(s) – check for responsiveness, breathing, and pulse.
4. **If necessary, call 911 and report the emergency.**
  - Call 911 for a victim unable to breathe, without a pulse; pale, blue, or gray skin; altered LOC; extreme blood loss; spurting or pooling blood; severely deformed extremities; missing extremities; severe burns; drowning victims; anytime an AED is used; strokes; seizures; suspected spinal; or you have reason to believe they need immediate assistance.
  - If EMS is summoned, dispatch a staff member to meet them.
5. Provide care and treat the victim with appropriate first aid. Direct a staff member to get an AED if they haven't brought one to the scene. The first staff to the scene is in charge of directing response roles until relieved by EMS.
6. Whenever possible, depending on staff response:
  - Call the Sanibel Sea School (**239-472-8585**) to apprise them of the situation. Be clear and concise. Office staff will notify emergency contacts and direct them to the scene or hospital.
  - Keep a time log record of all events. Begin filling out an Incident Report. Collect as much pertinent medical information (vitals, medical history, etc.) as possible to provide to EMS.

If a victim is transported via EMS, get a run # and the names of EMS responders. If they allow, ride in the ambulance to the hospital. If not already done so, the staff involved should debrief the Director and fill out an incident report.

**Response Roles:** The same individual can cover multiple roles if necessary. The first responder must do roles 1 to 3. Additional help that arrives should check that roles 1 to 3 are done before moving on to 4 through 7 or assisting with CPR/providing care.

1. Calling 911 and getting the AED (in the crash bag)
2. Giving care consistent with knowledge and training until EMS takes over CPR, setting up and monitoring the AED, rescue breathing, spinal, etc.
3. Getting the rest of the group to safety and away from the incident
4. Meeting EMS to lead them to the scene
5. Calling the office & getting more help on the scene
6. Keeping a time log of all events
7. Crowd management

**When You're Alone:**

- There are times of the year when you will not have CITs or other staff immediately at the scene. Always be alert and have a plan in mind for what you will do in case of an emergency.
- If you find yourself alone, the most important thing to do is to get your group to safety, call 911 immediately, grab the AED, and start providing care.
  - There are times when you will care first and then call if you are alone:
    - An unresponsive infant or child younger than 12 whom you did not see collapse
    - A person who is choking
    - A person who is experiencing a severe allergic reaction (anaphylaxis) and has an epinephrine auto-injector
    - A person who has severe, life-threatening bleeding
- Utilize bystanders or older students to help you with roles 1, 3, 4, 5, or 7. Unless trained to do so, bystanders cannot help with providing care.

In the case of a critical incident (**not life-threatening**), contact should first be made with Sanibel Sea School. The Director should also be apprised of the situation. All staff should have these numbers saved on their phones.

1. **Flagship Campus: 239-472-8585**
2. **Shannon Rivard, Director: 203-947-6254**

Appraise contacted individuals of the situation, including the current status of the victim(s), whether EMS has been summoned, whether additional support or resources are needed, and the status of the other clients. Office staff will get ahold of the Director and the participant's emergency contacts.

Keep clients safe, calm, and well-informed. We are their leaders, and they will look to and follow our example. If necessary, perform a secondary assessment using the acronym SAMPLE (Signs and Symptoms, Allergies, Medications, Past Pertinent medical history, Last Oral intake, Events leading up to the incident). Provide care to the level of your training.

The staff involved should debrief the Director during and after the incident. If further medical attention is required due to camp activities, staff must fill out an incident report.

**Prevention:**

- If you see an unsafe condition anywhere on campus, please report it to the Director so we can tend to it as soon as possible.
- All staff should know the locations of critical safety equipment (fire extinguishers, AEDs, first aid kits, etc.) on campus. Staff are required to have first aid kits, AEDs, and backpacks with them at all times while in the field.
- If lightning strikes within 10 miles of you, exit the water and seek shelter. Do not reenter the water for 30 minutes after the last lightning strike.
- Students should be able to stand at all times while in the water. We never take students deeper than wading depth. Pay attention to tides or changes in bottom topography for depth.
- Perform field checks to avoid hazardous conditions. A field check is required before all programs. Refer to the protocol for detailed information.
- Staff are required to be in the water with their students. They must be able to reach everyone in the group within 30 seconds at all times while in the water. Staff need to scan between students while in the water constantly.
- Staff are required to count their students regularly throughout the program. This is especially important during transitions (leaving the beach, getting in/out of a van, etc.) and while in the water.
- Staff are required to physically check the entirety of a van after students exit when they use it during programs—Review the Vehicle Safety section for more information.
- No staff member should ever be alone with a student. Make sure there are always at least three in a group. There are times of the year when this may be the only option. In that case, ensure the parent or guardian knows you will be alone with their child. If a staff member does have to be alone with a child, it should only be someone background-checked and fingerprinted. Review the Child Sexual Abuse Prevention section for more information.