

Preamble

The following is a small representation of the training in safety preparedness taken from NCCP Fundamental theory manual that the CYA coaches receive in their coaching certification process. We ask that you as the MOSS host read this carefully and create an Emergency Action Plan if you do not have one already.

The last two pages of this document is a typical Mobile Optimist Sailing School EAP. Please edit this by filling in the blank or highlighted areas. Print two copies for the coaches and keep one for yourself.

Coaches will already have first aid kits; however, if more exist at the sailing site, please list them in the EAP as well. Coaches will also already have copies of the Accident Report Forms.

Several days before your week of MOSS starts, you will be e-mailed a class list from BC Sailing if you are using our GiftTool registration program. This list will have all the registration information including relevant medical conditions and emergency contact numbers. Please print at least three copies of the class list: give two to the coaches along with the EAP's when they arrive, and keep one for yourself. If you are doing your own registration, you will have to provide the coaches and BC Sailing with a class list when they arrive.

Please do not hesitate to ask the BC Sailing contact person for clarification. We require an EAP before commencing training at your location.

Emergency Action Plans

An Emergency Action Plan (EAP) is a plan designed by organizers and coaches to assist them in responding to emergency situations. The idea behind having such a plan prepared in advance is that it will help you respond in a responsible and clear-headed way if an emergency occurs.

An EAP should be prepared for the facility or site where you normally hold practices and for any facility or site where you regularly host competitions. For away competitions, ask the host team or host facility for a copy of their EAP.

An EAP can be simple or elaborate and should cover the following items:

1. Designate in advance who is in charge in the event of an emergency (this may very well be you).
2. Have a cell phone with you and make sure the battery is fully charged. If this is not possible, find out exactly where a telephone that you can use is located. Have spare change in the event you need to use a pay phone.
3. Have emergency telephone numbers with you (facility manager, fire, police, ambulance) as well as contact numbers (parents/guardians, next of kin, family doctor) for the participants.
4. Have on hand a medical profile for each participant, so that this information can be provided to emergency medical personnel. Include in this profile a signed consent from the parent/guardian to authorize medical treatment in an emergency.
5. Prepare directions to provide to Emergency Medical Services (EMS) so that they may reach the site as rapidly as possible. You may want to include information such as the closest major intersection, one way streets, or major landmarks. Include the 911 locator number if applicable.
6. Have a first aid kit accessible and properly stocked at all times and keep your first aid training current. A list of suggested contents for a first aid kit is included in the reference material at the end of this section.
7. Designate in advance a “call person” (the person who makes contact with medical authorities and otherwise assists the person in charge). Be sure that your call person can give emergency vehicles precise instructions to reach your facility or site.

Steps To Follow When An Injury Occurs

Note: It is suggested that emergency situations be simulated during practice in order to familiarize coaches and athletes with the steps below.

Step 1: Control the environment so that no further harm occurs

- Stop all participants; get them off the water as soon as possible if necessary.
- Protect yourself if you suspect bleeding (put on gloves)
- If outdoors, shelter the injured participant from the elements and from any traffic

Step 2: Do a first assessment of the situation

If the participant:

- is not breathing
- does not have a pulse
- is bleeding profusely
- has impaired consciousness
- has injured the back, neck or head
- has a visible major trauma to a limb
- Cannot move his/her arms or legs or has lost feeling in them

If the participant does not show any of these signs, proceed to Step 3



**Activate
EAP!**

Step 3: Do a second assessment of the situation

- Gather the facts by asking the injured participant as well as anyone who witnessed the incident
- Stay with the injured participant and try to calm him/her; your tone of voice and body language are critical
- If possible, have the participant move himself/herself out of the sailboat or out of the area. Do not attempt to move an injured participant.

Step 4: Assess the injury

Have someone with first aid training complete an assessment of the injury and decide how to proceed.



**Activate
EAP?**

Step 5: Control the return to activity

Allow a participant to return to activity after a minor injury only if there is no:

- Swelling
- Deformity
- Continued bleeding
- Reduced range of motion
- Pain when using the injured part

Step 6: Record the injury on an accident report form and inform the parents

Emergency Action Plan Checklist



Access to telephones

- Cell phone, battery well charged
- Training venues
- List of emergency phone numbers
- Change available to make phone calls from a pay phone

Directions to access the site

- Accurate directions to the site

Participant information

- Personal profile forms
- Emergency contacts
- Medical profiles

Personnel information

- The person in charge is identified
- The call person is identified
- Assistants (charge and call persons) are identified

- *The medical profile of each participant should be up to date and located in the first aid kit.*
- *A first aid kit must be accessible at all times, and must be checked regularly. See the reference material for suggestions on contents for a first-aid kit.*

First-aid Kit

A complete first-aid kit is essential. This kit must be carefully prepared in order to treat the most common injuries. Furthermore, it must be accessible to those responsible for the team. Here is a list of what a first-aid kit should contain.

Content	Use
Medical record	<ul style="list-style-type: none"> ◦ important information in case of an emergency
Disinfectants	
<ul style="list-style-type: none"> • soft antiseptic soap • antiseptic cream • antiseptic solution • peroxide 	<ul style="list-style-type: none"> ◦ all skin lesions ◦ laceration requiring cleaning before a dressing can be applied
Dressings	
<ul style="list-style-type: none"> • ocular • aseptic (sterile gauze, 50, 75, 100mm rolls) • adhesive bandages (“Band-Aid” type and butterfly closures) • elastic bandages (100 and 150mm) • triangular bandages and safety pins 	<ul style="list-style-type: none"> ◦ cover and close the eye ◦ dry compression ◦ protection of minor lesions ◦ compression ◦ multiple uses but primarily to act as an arm support in case of a fracture
Drug products and ointments	
<ul style="list-style-type: none"> • zinc ointment • xylocaine spray 	<ul style="list-style-type: none"> ◦ scratches or blisters ◦ sore burns
Other useful items	
<ul style="list-style-type: none"> • cleaning solution for foreign bodies • scissors • tongue depressor • body temperature thermometer • chemical cold bags (if you don’t have access to real ice) • plastic bags • phone number list (cell phone, pen, quarters, paper, participants’ emergency records) • tools • adhesive tape (37.5mm) 	<ul style="list-style-type: none"> ◦ dislodge foreign bodies ◦ common use ◦ multiple uses ◦ check body temperature in case of trauma ◦ for ice cubes ◦ ensure quick response ◦ minor repair of equipment ◦ support wounded joints