

Lewes Athletics Club

Incident / Injury reporting

This Guidance is for all Club Coaches

Lewes AC takes its responsibility for the health and welfare of all its athletes very seriously. The following guidance must be followed in the event of any accident or injury to an athlete.

Dealing with the incident / injury

- 1. Athlete must be attended by qualified coach or / qualified first aid person
- 2. Assessment of incident / injury to be made
- 3. Ensure the athlete is safe and out of any immediate danger
- 4. Consider the extent of the injury and immediate impact on the athlete
- 5. Obtain First Aid Kit:
 - a Located in the downstairs track room
 - b Leisure Centre will also have a first aider if required
- 6. Apply ice pack, small plaster, compression bandage and elevation if considered appropriate
- 7. If as a result of the injury it is considered that the athlete cannot be moved or there is concern for the health and welfare of the athlete contact the emergency services:
 - a Call 999
 - b Inform parent or guardian immediately
- 8. Inform the parent or guardian when athlete is collected from session of any injuries or reasons for taking athletes out of any sessions
- 9. Whatever the level of injury, do not allow athlete to continue in the session.
- 10. Report any injury occurring to an athlete during your session to other coaches were appropriate.
- 11. Record any treatment applied, actions taken, nature of the injury, date and time etc. in the INCIDENT LOG FOLDER (found in the downstairs track room)
 - Helpful reminders:
 - Ensure you know who is acting as first aider during your session
 - Ensure you know where the first aid kit and injury log are located
 - Ensure you, or group leader, have access to emergency contact details for your athletes



LEWES ATHLETIC CLUB

ATHLETE FIRST AID / INCIDENT / INJURY RECORD FORM

1. Athlete Personal Details:

Surname	Forename					
Coaching group						

2. Name of Person completing incident:

Surname	Forename					
Position in Club (Coach, First Aider etc.)						

3. Date and Time of incident

4. Brief description of Incident/Injury:

5. Brief Description of Action taken/Outcome:

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6.	Emergency Service Called:	Yes		No		Time:	
7.	First Aider in attendance:	Yes		No			
8.	Name of First Aider:			•••••	•••••	•••••	
9.	Parents/Guardians Informed:	Yes		No			
10.	Signature/Name of person cor	npletin	g the form:				
Prir	nt Name:	•••••		•••••			
Cie							
SIG	nature:	•••••					
Dat	e:						