****

**Emergency Action Plan Worksheet**

Emergency Action Plan (EAP) provides the most basic information you should consider and have with you when participating in a Girl Scout “high risk” activity. Troop leaders and facilitators should develop this plan with girl participants and add any additional information or sections as they see fit.

**Girl Scout/Safety Activity Checkpoint (SAC) Information**

* Girl-to-Adult Ratio required for the activity \_\_\_ : \_\_\_
* Is the activity classified in SAC as a “High Risk Activity”?
* If yes, have I completed the GSEIWI Trip and Activity Information Form
* Have I received approval from the Girl Experience Team?

**Potential hazards at location/during activity**

|  |  |  |  |
| --- | --- | --- | --- |
| Location | Hazard/Emergency | Prevention | Treatment/Action Plan |
|  |  |  |  |
|  |  |  |  |

**Weather Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| Day | Location | Closest Shelter | Extreme Weather Plan |
|  |  |  |  |
|  |  |  |  |

**Safety Gear and First Aid**

List who will be carrying emergency equipment (i.e. first aid kit) and/or medications

List all gear related to safety necessary on this activity (add lines as needed):

List all first aid supplies necessary specific to this activity:

List all required gear for the activity (optional):

List all additional gear one might need for the activity (optional):

**Evacuation/Emergency Services**- Answer for every location

Location 1:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Where are the emergency exit points?
* Where is/are your Evacuation Meeting Place(s) (where people should go if the group becomes separated or someone becomes lost)?
* What emergency signal(s) will you use to communicate that there is an emergency?
* Where would you meet EMS should they be called?
* When would you call EMS vs. transport to hospital by personal vehicle?
* What is the furthest you would need to travel to get to a road/accessible area?
* What is the furthest you would be from a vehicle?
* What mode of transportation will you use to get to an evacuation point (boat, hike, etc.)?
* What role would each adult take on in the event of an emergency?

|  |  |
| --- | --- |
| Person | Role |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Nearest Hospital**- Answer for every location

|  |  |  |
| --- | --- | --- |
| Location | Closest Hospital | Directions |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**List Relevant Phone Numbers**

List the contact information of all relevant parties (e.g. troop leaders, Camp Caretaker, Park Service office, etc.)

|  |  |
| --- | --- |
| Contact  | Phone Number |
| Council 24 Hour Emergency Line | 309-764-8833 |
|  |  |
|  |  |

Add any additional information or sections that may apply to your trip or activity.