Friends of the ACFL Volunteer Incident/Near Miss Reporting

Applicability

This policy applies to all employees, volunteers, and participants in Friends of the ACFL programs, including visitors to the Forest Discovery Center.

Purpose

This policy is intended to help the Friends of the ACFL ensure the safety of its workplace, programs, and facilities, including ensuring compliance with reporting requirements and identifying potential hazards. Prompt incident and near miss reporting will continue to support the success of Friends' programs now and in the future.

Definitions

For the purposes of this policy, an "incident" is:

- An occurrence that results in unintended injury or illness
- An exposure to a hazardous or potentially hazardous substance
- An exacerbation of a pre-existing condition
- A behavioral event that makes you feel physically/emotionally unsafe or required beyond-the-norm facilitation skills to resolve
- Other events that seem beyond the scope of usual program operations

This definition is not meant to be all-encompassing. When in doubt, it is always encouraged to fill out a report and document an event. A "near miss" is defined as an instance where the reporting party feels that an incident nearly occurred, or would have occurred without active intervention on behalf of staff/volunteer presence.

Policy

1. Immediately, resolve the situation at hand in accordance with the guidelines outlined below. Take any steps necessary for the immediate safety of those involved in the incident/near miss.
2. The Executive Director and/or staff lead should be alerted as soon as possible when an incident that may trigger this policy occurs.
    a. Volunteers should report to their staff lead immediately, who is responsible for being the primary first responder and enacting this reporting policy. For field-based volunteer programs where Friends staff is not available to be the first responder, volunteers should enact this policy by calling their staff lead as soon as it is safe/feasible to do so.
3. Volunteers are not required to hold incident reporting forms. In the event of an incident, contact your staff lead as soon as possible, who will guide you through the completion of this policy.
4. Incident reports should be filled out as soon as possible after the incident (i.e., immediately following the program, as soon as the situation resolves, etc.)
    a. Reporting forms should be filled out with as much information as possible. Additional attachments (i.e., narratives of the event) are encouraged and should be included where possible.
5. Every attempt should be made to identify potential hazards in a timely manner after an incident (and adjust policy accordingly.) However, staff will meet at minimum annually to go through the incident reports to assist in identifying patterns where policy changes are needed.

Incident Responses

Medical Incidents

*The most important thing in medical situations is to think clearly to make sure we do all we can. If something arises, take 10 seconds to breathe, look around and prepare yourself to take action. **The protocols outlined here reflect a "best case/best practice" scenario, but specific situations in the field may require reassigning roles to better reflect the qualifications/experience of the responding adults.**

- Serious Medical Emergency: head injury with lasting impacts, suspected broken bone, loss of consciousness, severe bleeding, allergic reaction, etc

Field-based Volunteers	Forest Discovery Center
1. Assess the situation: are other individuals in danger or is the danger still present? If so, move the group to a safe area. 2. Contact emergency services (911). a. Volunteer remains with the injured party and calls 911, or designates someone in the group to do so. b. If hiking out to cell service is necessary, one adult will do so with a coordinated plan to reunite with the group once EMS is contacted. 3. While EMS is contacted, volunteers support the rest of the group in reaching the nearest trailhead or a suitable rendezvous point. Follow all EMS instructions until the person is evacuated. 4. File incident report ASAP.	1. Assess the situation: are other individuals in danger or is the danger still present? If so, move to a safe area. 2. Contact emergency services (911). a. If a volunteer is the first responder, contact staff ASAP (or designate someone to contact staff ASAP) and remain with the injured party until staff arrive. b. Staff remains with the injured party and begins first aid, if applicable. 3. File incident report ASAP.

- Intermediate Medical Incident: suspected hyper/othermia, vomiting, lasting pain (sprain, aggressive stings, etc)

Field-based Volunteers	Forest Discovery Center
1. Assess the situation: are other individuals in danger or is the danger still present? If so, move the group to a safe area. 2. Begin first aid and arrange an evacuation plan. a. Staff/volunteer remains with the injured party. Staff begins first aid; volunteer may do so if they have appropriate certifications. 3. Staff/volunteer supports the group in reaching the nearest trailhead. 4. File incident report ASAP.	1. Assess the situation: are other individuals in danger or is the danger still present? If so, move to a safe area. 2. Staff/volunteer remains with the injured party. Staff begins first aid; volunteer may do so if they have appropriate certifications. 3. File incident report ASAP.

- Mild Medical Incidents: fall with bleeding, accidental contact between campers (bonking heads), twisted ankle, bee stings, nausea/dizziness/stomach pain

Field-based Volunteers	Forest Discovery Center
1. Assess the situation: are other individuals in danger or is the danger still present? If so, move the group to a safe area. 2. Staff/volunteer begins first aid as needed and if certified. Encourage injured party to self-administer first aid if possible. 3. Staff/volunteer establishes a plan of action for group and injured party: a. If necessary, support injured party and/or group in returning to the nearest trailhead. b. For mild incidents, program can continue as normal. 4. File incident report ASAP.	1. Assess the situation: are other individuals in danger or is the danger still present? If so, move to a safe area. 2. Staff/volunteer begins first aid as needed and if certified. Encourage injured party to self-administer first aid if possible. 3. Staff/volunteer establishes a plan of action for injured party, if needed. 4. File incident report ASAP.

Behavioral Incidents

Reporters are expected to use their best judgement when a social situation can be considered a behavioral incident, but a good rule of thumb is when an interaction goes “beyond the norm” of engaging with the general public, is emotionally or physically threatening, or requires additional facilitation skills to resolve.

Field-based Volunteers	Forest Discovery Center
1. Assess the urgency/need of the situation. a. For serious incidents that threaten the health/safety of staff, participants, volunteers, or the affected party, **call 911 immediately.** b. If the incident involves a member of the general public, remove the program group from the area. 2. Staff will debrief/deescalate the incident with the individuals who have been most affected. a. Volunteers are not trained in deescalation and may do so at their own judgement. b. Every attempt will be made to continue the program as normal and not stigmatize the affected party. 3. File incident report ASAP.	1. Assess the urgency/need of the situation. a. For serious incidents that threaten the health/safety of staff, participants, volunteers, or the affected party, **call 911 immediately.** b. If the incident involves a member of the general public inside the FDC, staff/volunteers will ask the affected individual to leave the premises if it is safe to do so. 2. Staff will debrief/deescalate the incident with the individuals who have been most affected. a. Volunteers are not trained in deescalation and may do so at their own judgement. b. Every attempt will be made to continue the day as normal and not stigmatize the affected party. 3. File incident report ASAP.