



**PARKS AND
RECREATION**

Landa Recreation
Emergency
Procedures Manual

WARNING – When an emergency comes, there will likely not be any time to refer to this manual. Knowing this manual by memory and practice is essential.

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PLAN DEVELOPMENT AND MAINTENANCE

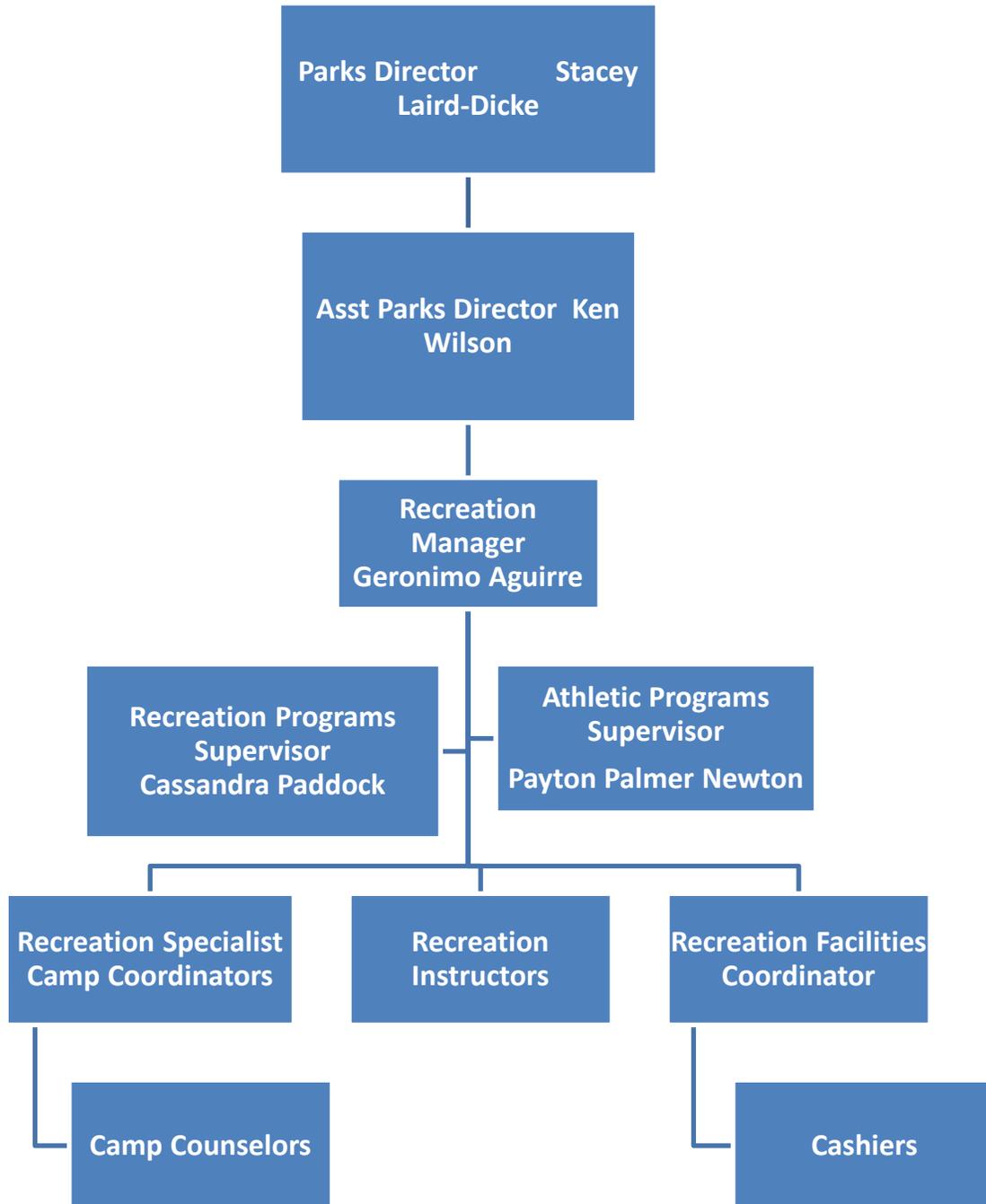
This plan was developed by the Recreation Division.

The Recreation Division is responsible for maintaining the plan. Recommended changes to this plan should be forwarded as needs become apparent.

This plan will be reviewed and updated annually.

This plan will be updated based upon deficiencies identified during actual emergency situations, during exercises, and when changes in threats, hazards, resources or capabilities occur.

Chain of Command



CONTACT LIST

Police	Emergency	911
	Non-Emergency	608-2179
Fire Department		221-4200
Animal Control		608-2183
Poison Control		800-222-1222
Park Rangers		830-221-4357 Office
Parks & Recreation Department		Area Code 830
Boathouse		608-2163
Miniature Golf		608-2169
Recreation Center		221-4370
Parks Office		221-4350
Maintenance		221-4349
Aquatics Complex		221-4360
Tube Chute		608-2165
Mini Train		625-8285
Parks & Recreation Staff Numbers		
<i>Recreation Programs Supervisor</i>		830-221-4372 Office
Cassandra Paddock		563-340-8404 Personal Cell Phone
<i>Athletic Programs Supervisor</i>		830-221-4370 Office
Payton Palmer Newton		830-310-4723 City Cell Phone
<i>Aquatic Programs Supervisor</i>		830-221-4365 Office
Cailin Cronin		830-643-9402 City Cell Phone
<i>Nature Center Supervisor</i>		830-221-4377 Office
Sonja Mleanar		512-557-7212 Personal Cell Phone
<i>Recreation Manager</i>		830-221-4363 Office
Geronimo Aguirre		210-857-7276 Personal Cell Phone
<i>Asst Parks & Rec Director</i>		830-221-4346 Office
Ken Wilson		830-637-0757 City Cell Phone
<i>Parks & Rec Director</i>		830-221-4350 Office
Stacey Laird Dicke		830-660-3087 City Cell Phone

First Aid

Minor Injuries (bumps, scrapes, etc.)

1. Administer first aid as necessary.
2. Complete Incident/Accident Report or FYI with information on victim and injury.
3. Send them on their way with a smile ☺

Life Threatening Injuries

1. Activate EAP and call 911.
 - a. Have a secondary staff member or adult go to parking lot to meet the ambulance and guide paramedics to victim's location.
 - b. If needed, stop operations and activities to handle the emergency as needed.
2. Give care as needed until EMS take over.
3. Either during or after care, you or a secondary staff member will complete an incident report. After report is completed, submit to a Supervisor the same day.
4. Inform a Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leave messages and do your best until you receive a response.
5. Take any corrective action if necessary to prevent injury from occurring again.
6. Check with staff involved with incident to ensure they can continue to work after encountering the incident and do not need time off/counseling before returning to duty (such as in cases of gruesome injuries).

CONTACT WITH BODILY FLUID

If the injury involves body fluids of any kind, please adhere to the following safety requirements:

- Survey scene and put on gloves before beginning aid
- Put all bandages in separate container and dispose in the proper area
- Clean all bloodstains with liquid bleach for 10-15 minutes
- Wash hands thoroughly with soap for several minutes and remove any clothing that was soiled with bodily fluids

Employee Injury

1. When an employee is injured, respond as you would for any other injury. Care for the employee and ensure they receive whatever first aid is needed.
 - a. If required, contact 911 to transport the employee to the hospital. If not required, they will be taken to a clinic for evaluation via transportation arranged by Management.
 - b. Call a Supervisor if one is not available: Call Human Resources at (830) 221-4390 or (830)221-4392. If it is afterhours call Ken Wilson at (830) 637-0757.
2. Inform a Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leave messages and do your best until you receive a response.
 - a. When talking to the chain of command contact, arrange for the transportation of the worker to the clinic.
3. As soon as possible (either during or after care), have a Supervisor complete a Supervisor Report of Incident/Accident and submit to HR.
4. Along with the incident report, complete a worker's compensation form.
5. The employee may not go home or leave if they want to receive insurance and workers compensation from the City. They must go from work to clinic in a city vehicle and escorted by a department supervisor, unless otherwise directed.
6. From this point, department administration will take care of all necessary steps to resolve issue.
7. If needed, take corrective action to prevent injury from occurring again (such as cleaning up a spill that led to the accident, etc.).

Missing Person

In the event of a lost person, get a description of the person and where he/she was last seen.

Inform supervisors immediately. If person is not found quickly, call the Park Rangers at (830)660-0535 and 911 if necessary. Have description of the person, Age, Height, Sex, Hair Color and Clothing, ready to help others look with you.

A building: Have all participants' line up and take attendance, take them to a room and have them sit down. Lock the doors and inform other staff of the situation. Search every room and closet of the facility. Leave someone with the participants and search the outside of the building. Do not leave other participants unattended.

An open area: Have all participants' line up and take attendance, take them to a single area and have them sit down. Search immediate area, play features trees and bathrooms. Do not leave other participants unattended.

Aquatic Complex: Inform the Coordinator on duty immediately. They have a protocol for lost persons. Line up the participants on the fence and watch them until the situation has resolved. Do not leave other participants unattended.

Fire

Fire Extinguisher Locations

1. Foyer
2. Game Room
3. Upstairs Classroom
4. Ballroom
5. Tree house

Controllable Fire (can be put out with extinguisher)

6. Clear all persons away from fire and put out flames with nearest extinguisher. If your attempt at extinguishing the fire fails, follow procedures for an un-controllable fire (below).
7. Call 911 and inform of fire, even if it is small and the source is known. City fire code requires that all unwanted fires be reported to the fire department for investigation.
8. Follow instructions as given by fire department.
9. Inform a Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leave messages and do your best until you receive a response.
10. After fire department gives okay, return to site of fire and complete incident report/property damage report. Submit to a Supervisor the same day of report and fire.

Un-controllable Fire

1. Call 911 and inform them of fire.
2. Evacuate facility per the evacuation plan.
3. Inform a Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leave messages and do your best until you receive a response.
4. After fire department gives okay, return to site of fire and complete incident report/property damage report. Submit to Aquatics Supervisor the same day of report and fire.

Gas Leak

Immediately upon discovery of a gas leak, call 911. DO NOT use light switches or other apparatus likely to produce a spark. Clear the building or area. Contact a Programs Supervisor.

Severe Weather

Call a Supervisor immediately.

Thunder/Lightning/ Heavy Rain

1. In the event that thunder is heard, lightning is seen or there is heavy rain, outdoor activities should be stopped and participants should be sheltered indoors if possible.
2. If you are at Paddle Boats or Mini close down the facility and ensure no participants are still on the grounds.
3. Staff should bring in all equipment and put it away properly.
4. Inform Aquatics Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leaves messages and do your best until you receive a response.
5. Facility will re-open at the discretion of a Supervisor.

Tornado/Hurricane

1. In the event a tornado is spotted or a tornado watch/warning is issued by a weather authority, facility operations are to be halted and all participants informed to seek shelter inside the restrooms or ball rooms. If you are out of doors, seek shelter in the nearest solid structures.
2. Staff should inform participants of weather.

If a warning is issued:

- Notify the staff and age appropriate participants. Evacuate the facilities; if necessary.
- If you are out of doors, seek shelter in the nearest solid structures.
- Personnel will be allowed to leave when the facility is completely evacuated, otherwise, senior staff and management will stay until it is cleared.
- Seek shelter at the center interior point of the building away from windows and doors.
- All persons are to remain in the designated shelter area until the weather passes or directed by City staff that imminent danger has ceased.

Hail Storms

Hail is a form of precipitation which consists of balls or lumps of ice. Hail can but not always accompany a severe thunderstorm. In the event of a hail storm, follow normal thunderstorm procedures and make sure everyone is inside or not in danger of being hit by hail.

Flood

- A flood is an overflow of water that submerges land, typically caused by a long period of heavy rain and expansion of bodies of water such as rivers and lakes. For having two rivers in New Braunfels, floods have happened in the past are very real possibilities that we will have to handle. If a flood is emanate call participants guardians to come and pick them up. Personnel will be allowed to leave when the facility is completely evacuated, otherwise, senior staff and management will stay until it is cleared.

Water Rescue

All water rescues should be performed by trained lifeguards; if one is available.

If a lifeguard is not available:

1. See who is available to help. Have someone call 911.
2. Have participants move to a safe distance from the scene, if there is another capable adult have them watch the participants. If there is not one available; give them instructions to sit down, stay together, and stay back.
3. Size up the Scene. If you can reach or throw something to the victim do so. Only enter the water as a last resort and if it is safe for you to do so. It should not be deeper than your chest. If it is deeper than your chest keep your eye on the victim, if they should submerge you can tell the rescuers where they were last seen.
4. Talk to the victim and let them know that you are coming to help them.
5. Never let them over power you or attempt to take you under the water.
6. Once you have a hold of the victim bring them to the side.
7. Once you have exited the water, give care as needed until EMS take over.
8. Either during or after care, you or a secondary staff member will complete an incident report. After report is completed, submit to a Supervisor the same day.
9. Inform a Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leave messages and do your best until you receive a response.
10. Take any corrective action if necessary to prevent the incident from occurring again.
11. Check with staff involved with incident to ensure they can continue to work after encountering the incident and do not need time off/counseling before returning to duty.

Shelter Lock Down

In the case of environmental contamination, building intrusion, or other incidents deemed necessary by City Management, staff will proceed with this procedure.

- Close and lock doors and windows if applicable
- Move to a pre-determined safe area inside the room
- Stay away from doors and windows
- Check roll and be prepared to account for any missing persons
- Contain and maintain all persons
- Stay put until the “All Clear” has been given by the Emergency Response team or City staff

Chemicals Spills

NEVER HANDLE CHEMICALS WITH A PARTICIPANT IMMEDIATELY PRESENT!

If a chemical leak occurs you must determine if there is a need to evacuate the facility. 911 must be called to report the chemical leak and get the fire department to report as soon as possible, and then call the a Programs Supervisor to inform them of the situation. If the situation is serious and we are unable to allow people back into the building, we will need to call guardians to have them pick up children. The following tips shall be followed to help make chemical adjustments safely

- a. Chemicals should be stored properly. This includes keeping all chemicals locked in the chemical room. All chemicals must be kept away from heat sources and the containers must remain sealed at all times.
- b. Gloves, goggles, and masks should always be worn when handling chemicals.
- c. All chemical instructions must be read, understood, and followed.
- d. A water source should be nearby to assist in the cleanup of chemical spills.
- e. Chemicals must be kept away from participants.
- f. When mixing chemicals: add chemicals to water, never add water to chemicals!

Bomb Threats

Any person receiving a phone call involving a bomb threat or a threat against an individual should attempt to obtain as much information as possible from the caller. This information is invaluable in determining the validity, urgency, and nature of the threat, and consequently in determining what action is appropriate in response to that threat.

Of utmost importance are the EXACT WORDS of the caller and information concerning the location and expected detonation time of the explosives. Write down the EXACT WORDS as soon as possible so they will not be forgotten or distorted.

The person making the threatening call could reveal enough information about themselves so that the recipient of the call could later identify the caller. Persons receiving such calls should be aware of the following guidelines and suggestions:

- Be calm, courteous, and listen. Do not interrupt the caller and write down notes
- Quietly signal for someone to call 911. The best way is to write a note saying, "Call 911-I am receiving a bomb threat! This is not a joke"
- Try to keep the caller on the line as long as possible in order to obtain as much information or characteristic comments or accents as possible. This can be done by pretending to have a bad connection
- Ask the caller to repeat the message. Attempt to ascertain the type of device, what it looks like, where it's located, what time it will go off, etc.
- Pay particular attention for any background noises such as a music and type of music, train whistle, sirens, jet airplane engines, and any other noises that might provide clues as to the place from which the call was being made
- Listen closely to the voice (male/female, young/mature), voice quality, accents, speech impediments, or words/phrases used repeatedly
- If time permits and the caller is talkative, ask questions such as, "Who is this calling, please?" or "What is your name?". In some instances, the caller may unthinkingly reply with their name.

If a Bomb Threat occurs you must determine if there is a need to evacuate the facility. 911 must be called to report the threat as soon as possible, and then call a Programs Supervisor to inform them of the situation. Evacuate immediately if the threat is to our locations.

Robbery & Burglary

If this ever occurs- **GIVE THEM THE MONEY!!!!** Your safety is of the utmost importance. Try as much as possible to get a detailed description of the assailant. At the first chance immediately call the police, and then call a Programs Supervisor. If a Programs Supervisor is unavailable, using the Chain of Command, inform the Recreation Manager. Document everything you can remember on the appropriate form and be as concise as possible. The following are tips to go by.

Keep it short

- The longer a robbery takes, the more nervous the robber becomes
- Calmly handle the potential robber as if you were making a sale to a customer
- The average robbery takes less than two minutes

Obey the robber's orders

- Don't argue with the robber
- Robbers seldom hurt people who cooperate with them
- Let the robber know that you intend to obey
- Give the robber all the cash and merchandise they want
- If you recognize the robber, do not in any way indicate to the person that you do!
- If you are unclear of what the robber is instructing you, ask
- Keep calm
- Observe the robbers height, weight, race, sex, facial appearance, clothing, tattoos, and anything unordinary about the person

Tell the robber about any possible surprises

- If you must reach for something or move in any way, tell the robber what to expect
- If someone is in another room who might enter the room, be sure to make the robber aware of the person

*Don't fight the robber**

- The money isn't worth risking harm to you
- Trying to attack an armed robber is foolish, not heroic
- *If the robber is going to use you as a hostage, or you feel that the robber is going to harm you, it may be in your best interest to fight for your life

Don't use weapons

- Weapons breed violence
- The robber's weapon is already one too many
- Only use a weapon if you feel you need to defend your life

Don't chase or follow the robber

- To chase a robber is to invite violence. The police could mistake you for one of the robbers

Call the police

- Keep necessary phone numbers near the phone
- Don't hang up the phone until 911 tells you to do so. Make sure they get all pertinent information
- Protect the crime scene; don't touch any evidence
- Assess any damages, and/or how much cash or product was taken

Burglary/Vandalism

If you notice the facility has been broken into, please call a Programs Supervisor. Call the police to fill out a police report. Document the damages and what is missing.

Workplace Violence

Angry customer or Co-worker

For an angry customer or Co-worker, stay calm, listen attentively, maintain eye contact, be courteous and patient, keep the situation in your control and notify a supervisor. Do not argue with the person, as this will further enrage them. If the situation escalates, have someone get a supervisor or call the police.

Threats with a gun, knife, or weapon

- Stay calm
- Signal to someone that you need help and to call 911
- Maintain eye contact
- Stall for time
- Keep talking-but follow instructions from the person who has the weapon
- Don't risk harm to yourself or others
- Never try to grab a weapon
- Watch for a safe chance to escape to a safe area
- After you are safe, call 911 and notify a supervisor

Suspicious Person(s)

If you suspect that a person(s) is under the influence of drugs or alcohol, do not approach the person(s) and draw attention to your suspicion. Call the Park Police (or Police Department if Park Police is unavailable) and let them know that you **do not** have an emergency but that you'd like an officer to come to your location to speak to the person(s). Explain your suspicion, make a note of what the person(s) looks like and wait for the officer. Keep watch of all of your participants. When the officer arrives, provide the information requested. The officer will make the determination if the person(s) need to be asked to leave or if further action is required.

Animals & Algae

Stray Animals

If a stray animal wanders into the facility or area, be very careful around the animal. It may carry disease or harm you or others. For everyone's safety, do not allow anyone to get near or touch the animal and call Animal Control to have the animal removed from the facility.

Animals in a building/area, or where they cannot leave on their own

If there is a live animal (with the exception those that are naturally in the area), follow these procedures

- Immediately clear the area
- Call Animal Control (DO NOT attempt to remove the animal)
- Document the situation and have animal control send a status report on the animal

Dead Animals in the building/area

If there is a dead animal, follow these procedures:

- Immediately clear the area
- Follow appropriate personal protection procedures and scoop up the animal out and put it in a bag. Sanitize any equipment used with bleach
- Notify a Supervisor, they may contact the Health Department
- Animal may be sent for testing
- Complete incident report and get names and contact information of anyone in contact with the animal

Algae

There are a few spots throughout the facilities that retain water. Consequently, after a while of sitting water, algae will begin to grow making the area very slippery and dangerous. Using a squeegee on these areas will help cut down on the algae problem. To get rid of the algae, scrub chlorine on the algae and let it sit for at least fifteen (15) minutes. Make sure the chlorine is completely washed away and cleaned up before allowing access to the area. Remember, the safety of the facility is your responsibility!

Facility Evacuations

Inside of a facility

1. Upon discovery of a reason to evacuate facility, immediately call 911 and inform of reason.
2. Using staff on-hand, use the nearest safest door and calmly have participants line up, take attendance to ensure everyone is with you and walk out of the facility. They do not need to take any belongings.
3. Staff should be posted at each exit point to help patrons exit and ensure no one goes back into facility.
4. Take participants to the front of the building and take attendance again.
5. If possible, staff should quickly sweep the facility to ensure all patrons are out before exiting themselves.
6. When Fire/Police/EMS arrive, allow them to take over the evacuation effort.
7. Inform a Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leave messages and do your best until you receive a response.
8. Upon resolution of issue that caused evacuation, complete an incident report and submit to a Supervisor the same day.
9. Facility will re-open at the discretion of a Supervisor.

At an outdoor facility

1. Upon discovery of a reason to evacuation area, immediately call 911 and inform of reason.
2. Using staff on-hand, use the nearest safest exit and calmly have participants line up, take attendance to ensure everyone is with you. They do not need to take any belongings
3. Staff should be posted at each exit point to help patrons exit and ensure no one goes back into facility.
4. Take participants to the front of the property, out of harm's way and take attendance again. If possible, staff should quickly sweep the area to ensure all patrons are out before exiting themselves.
5. When Fire/Police/EMS arrive, allow them to take over the evacuation effort.
6. Inform a Supervisor, or if they cannot be reached, continue up the chain of command to the Parks Director until someone is informed via direct conversation (not email/text message/voicemail). If no one can be reached, leave messages and do your best until you receive a response.
7. Upon resolution of issue that caused evacuation, complete an incident report and submit to a Supervisor the same day.
8. Facility will re-open at the discretion of a Supervisor.



PARKS AND RECREATION DEPARTMENT

Date of Occurrence ____/____/____ Time of Occurrence ____AM ____PM

Location: _____

Name park and associated specific facility or amenity

Injured / Victim Information:

Name (1): _____ DOB: ____/____/____ Age: ____ Sex: M F

Address: _____ City, State, Zip: _____

Phone #s _____ DL#/ _____ State: _____

Type of Injury:

(Circle one) Abrasion Avulsion Bruise Fracture Hemorrhage
Laceration Puncture Swelling Sprain / Strain Insect Sting

Where/Other: _____

Description of injury and how it occurred: _____

Treatment Given: _____

By whom: _____

Refusal of **Treatment**: *I hereby being of sound mind and over the age of 18 refuse treatment of any kind and fully understand the consequences of my action.*

Signature: _____

Refusal of **Transport**: *I hereby being of sound mind and over the age of 18 refuse to allow 911 to be called so that emergency responders may be activated and fully understand the consequences of my action.*

Signature: _____

Notification Made To: Police _____ Fire _____ EMS _____ Case#: _____

Reporting Person(s) Information: (other than staff)

Name (1): _____ DOB: ____/____/____ Age: ____ Sex: M F

Address: _____ City, State, Zip: _____

Phone #s _____ DL#/ _____ State: _____

Name (2): _____ DOB: ____/____/____ Age: ____ Sex: M F

Address: _____ City, State, Zip: _____

Phone #s _____ DL#/ _____ State: _____

Witness Information:

Witness (1): _____ DOB: ____/____/____ Age: _____ Sex: M F
Address: _____ City, State, Zip: _____
Phone #s: _____ DL#/ _____ State: _____
Relationship to Persons Involved: _____

Witness (2): _____ DOB: ____/____/____ Age: _____ Sex: M F
Address: _____ City, State, Zip: _____
Phone: W (____) _____ O (____) _____ DL#/ _____ State: _____
Relationship to Persons Involved: _____

Description of Incident / Accident: (use separate sheet if needed & include photographs & statements)

Condition of Area or Equipment That May Have Contributed to Occurrence: _____

Park & Recreation Staff Notified:

Immediate Supervisor (Coordinator): _____ Date & Time _____

Manager/Supervisor: _____ Date & Time: _____

Action Taken by Park & Recreation Staff: _____

Follow-up Required: Yes ____ No ____ If so, what and by when? Date: ____/____/____

Report completed by _____
STAFF Name / Position

ADMINISTRATION ONLY

Reviewed by: _____ Date: ____/____/____

Manager/supervisor: : _____ date: ____/____/____

Child Injury / Incident Report Form

Program Location: _____



PARKS AND RECREATION DEPARTMENT

Fill in all blanks and boxes that apply.

Child's Name: _____ Gender: M F Birthdate: _____ Incident Date: _____

Time of Incident: _____ a.m./p.m. Witnesses: _____

Parent/Legal Guardian Notified: _____ Time Notified: _____ a.m./p.m.

Notified by (name of staff person): _____

EMS (911) or other medical professional notified? No Yes - Time Notified: _____ a.m./p.m.

What EMS service(s) responded or other medical professional provided advice?

Location where incident occurred: Game Room Classroom Doorway Gym Hall
 Kitchen Motor Vehicle Office Playground Restroom Stairway
 Unknown Other (specify) _____

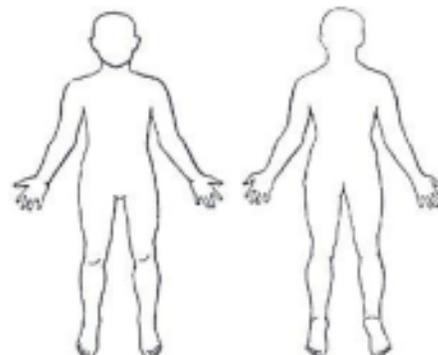
Equipment/Product involved: (check all that apply) Child-proof container Climber
 Playground Surface Medication Error Motor Vehicle Sandbox Slide Swing
 Tricycle/Bike Toy (specify): _____
 Other Equipment (specify): _____ No equipment/product involved

Cause of Injury / Incident: (check all that apply)
 Animal related Bite, animal Bite, human Child behavior related Choking
 Cold/heat over exposure Fall, running, or tripping Fall to surface Injured by object
 Hit or pushed by another child Medication error Motor vehicle
 Sting, insect, bee, spider or tick bite Other (specify): _____

Describe Injury / Incident: Include the part(s) of body injured and the type of injury markings. For medication errors describe medication and exact circumstances of the error.

Circle area of injury:

Front Back



First aid / treatment given on-site: (examples: cold pack, comfort, wound cleaning, bandage applied, behavior intervention):

First aid / treatment given by (name of person): _____

Medical / Dental Care Needed Day of Injury / Incident:

- No doctor's or dentist's treatment required Doctor/dentist visit same day required
 Treated as an outpatient in emergency room Hospitalized

Signature of Staff Member: _____ **Date:** _____

Signature of Supervisor: _____ **Date:** _____

Complete this section with details obtained in days following event.
Follow-up treatment needed:

Date of Late Entry: ____

Reduced or Limited activity required for ____ days.

Corrective action needed to prevent reoccurrence:

Administration Only

Reviewed By:

Manager/Supervisor: _____ Date: _____

Assistant Dir/Director: _____ Date: _____

Supervisor Report of Accident/Incident

Type of Incident: Injury/Illness Vehicle Accident Property/Equipment Damage Incident

EMPLOYEE INFORMATION (TO BE COMPLETED BY SUPERVISOR WITH EMPLOYEE)

1. Name (First & Last):		2. Department/Division:		3. Job Title:	
4. Date of Birth (mm/dd/yy):		5. Social Security Number: XXX-XX-		6. Sex: M <input type="radio"/> F <input type="radio"/>	7. Marital Status: <input type="radio"/> Married <input type="radio"/> Widowed <input type="radio"/> Separated <input type="radio"/> Single <input type="radio"/> Divorced
8. # of Dependent Children:	9. Spouse's Name:		10. Home Address:		
11. City:	12. State:	13. Zip Code:	14. County:	15. Home Phone:	16. Cell Phone:
17. Supervisor Name:			18. Supervisor Phone Number:		

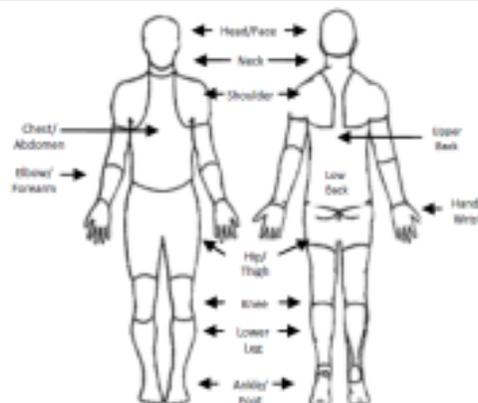
ACCIDENT/INCIDENT INFORMATION (TO BE COMPLETED BY SUPERVISOR WITH EMPLOYEE)

19. Date of Accident/Incident:		20. Time of Accident/Incident: : am <input type="radio"/> pm <input type="radio"/>	
Location of Accident/Incident:			

21. Incident Description (Describe, in detail the events before, during and after the incident):

COMPLETE THE FOLLOWING INFORMATION IF ACCIDENT/INCIDENT INVOLVED INJURIES

22. Was the employee treated at a medical facility? <input type="radio"/> Yes <input type="radio"/> No If yes, where?	
23. Was first aid provided? <input type="radio"/> Yes <input type="radio"/> No If yes, who provided first aid?	
24. Specify what body part was injured (Print and have employee shade in affected area):	



25. Specific location of where the injury/illness occurred (stairs, conference room, parking, storage closet, etc.):			
26. Address of Where Injury or Exposure Occurred, or Name of Business: Street Address:			
27. City:	28. State:	29. Zip:	30. County:
31. List Witnesses Name and Phone #:			

COMPLETE THE FOLLOWING SECTION IF ACCIDENT/INCIDENT INVOLVED A CITY VEHICLE, EQUIPMENT, OR PROPERTY DAMAGE				
32. Year:	33. Make:	34. Model:	35. Vehicle License Number:	36. Vehicle/Equip. #
37. Reported to Police: <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A		38. Police Report #:		
39. Weather Conditions (select all that apply): <input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Raining <input type="checkbox"/> Windy <input type="checkbox"/> Foggy <input type="checkbox"/> Snow/Sleet				
40. Purpose of which vehicle/equipment was being used:				
41. Were photos taken of the vehicle/property damage: <input type="radio"/> Yes <input type="radio"/> No If yes, please email photos to HR Department.				
42. Was a post-accident drug screen given? <input type="radio"/> Yes <input type="radio"/> No If, no please state why?				
43. Describe the damages:				
SUPERVISOR'S INVESTIGATION & CORRECTIVE ACTIONS:				
44. What factors contributed to the accident/incident? (list any unsafe acts or conditions that may have caused the event i.e. lack of training, broken equipment, no written job procedures, employee not wearing correct PPE, etc.)				
45. What action will you take or recommend for preventing similar accidents/incidents?				
MEDICAL STATEMENT:				
I am declining medical attention at this time. I understand that if medical attention becomes necessary, I will immediately contact HR at 830-221-4390. Employee Initials: _____				
REQUIRED SIGNATURES:				
I hereby certify that the information above is true and correct to the best of my knowledge. I further understand that any falsification of information regarding an accident/incident may result in disciplinary action up to and including termination of employment.				
Employee's Signature:			Date:	
Supervisor's Signature:			Date:	

Directions on submitting this form:

Supervisors, this form is required to be submitted within 24 hours after receiving the initial notification from employee.

1. Verify all information has been completed to the best of your knowledge.
2. Click submit below to generate an electronic copy to email HR. Here you will attach any photos, witness statements, and all supporting documents. *Note: this is a preliminary report, a final signed copy is still required to be sent to HR.*
3. Print this form and obtain all required signatures and/or initials.
4. Forward final copies to HR via interoffice mail, scan to email, or fax (do not fax photos as they will be black & white).

SUBMIT

HR FAX 830-608-2123