



# CHESTERMERE MINOR HOCKEY ASSOCIATION

## SECTION 6.25 EMERGENCY ACTON PLAN (EAP)



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## SECTION 6.25 EMERGENCY ACTION PLAN (EAP)

An emergency action plan (EAP) has been designed to assist CMHA Coaches, Trainers, Managers, and Teams at all levels in responding to emergency situations. The idea behind having such a plan prepared in advance is what will help in responding in a reasonable, responsible, and clear-headed way if an emergency occurs.

When an injury occurs, and the trainer leaves the bench to help on the ice he or she will activate an EAP immediately if the injured person:

- **Is not breathing**
- **Does not have a pulse**
- **Is bleeding profusely**
- **Has impaired consciousness**
- **Has injured the back, neck or head**
- **Has visible major trauma to a limb**

Exuding symptoms of concussion which include but are not limited to: dizziness, nausea, memory loss, confusion, disorientation, vacant stare, lack of focus, ears ringing, seeing stars or flashing lights, speech impairment, balance impairment, headache and sight disturbances and of course loss of consciousness.

At the beginning of each season as new teams assemble they will now be responsible for not only assigning duties such as trainer, manager, treasurer, and various coordinators, they will also be designating an EAP Team who will oversee emergency situation response. This team will include:

### **ERP or Emergency response person**

This person must be able to attend all practices and games, always carry a charged cell phone, have emergency telephone numbers and address at various locations the team will be playing, and have full access to parent/guardian contact numbers for each of the players. This is the person in charge.

### **Call Person**

Who will be the person who contacts medical authorities and assists the ERP. This call person must be familiar with the facility and able to give clear concise instructions to get emergency responders to the injured along with providing nature of injury, and what if any first aid has been done.

Assistants will be needed in the form of:

### **Watch Persons**

Two people who will go to the closest entrance and await the emergency responders. Clear any traffic from the entrance or access before emergency responders arrive.

One of these two will be floating between the call person and the entrance person to check on injured and advise on responders estimated time of arrival.

### **Crowd control:**

This volunteer will be responsible to make sure **no one** else including the parents of the injured are to be near the ice or the injured party. The trainer and ERP will be communicating on ice with the call person who is off the ice to all other members of the EAP team.

### **Bench Liaison:**

This person will be the go between for the home and away benches and will notify both sets of coaches when they must remove players from their respective benches into dressing rooms if they have not already done so.

### **Care:**

Simply put this is the person who will look after the parents of the injured and if necessary remove them from immediate situation. The first thing any parent wants to do is be with their child on the ice at the point of injury and this is detrimental to everyone involved. Control of the situation is primary.



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Steps to follow when an injury occurs: This will be done primarily by the trainer.

1. Control the environment so that no further harm or injury occurs.
2. Do a first assessment of the situation. If the injured is not breathing, does not have a pulse, is bleeding profusely, has impaired consciousness, has injured the back, neck or head, or has visible major trauma to a limb Activate EAP!  
If the injured is not showing signs of the above the trainer will use his or her discretion as usual when treating the injured and removing from ice so play can resume.  
If the injured is showing signs of the above and the trainer signals to the ERP to activate the plan **DO NOT** ever move the injured and proceed immediately into action.
3. Assess the injury on the bench. Shock may be setting in. If the player is now showing signs or symptoms of the above Activate EAP!
4. Control the return to activity. Allow the player to return to activity after injury only if there is no swelling, deformity, continued bleeding, reduced range of motion, or pain.

## EAP CHECKLIST

- (i) Access to telephones      Cell phone, battery well charged  
Home Venues phone access  
Away Venues addresses and phone access, this will be updated each season by the Risk management person, this will be for CAHL rinks only, any team travelling to other venues will be responsible to have the required information readily available.
- (ii) Directions for emergency responders to access the site where injured is located. The address for our rink is **201 West Chestermere Drive.**
- (iii) All trainers' boxes must include emergency contacts for all players and current medical information sheets containing medical profiles. A first aid / Trainer medical kit must be accessible at all times, (practices included!) and must be checked and restocked regularly.
- (iv) EAP team members identified.