Incidents, Issues, and Answers

CA 4-H YDP Camping Conference
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Why Risk Management

Why worry?

1. Prevent injuries
2. Prevent costly claims/lawsuits
3. Regulation and policy

Risk Management is a process to:

- Anticipate potential hazards.
- Control the probability of adverse events.
- Reduce the impact of injury or illness.

Why Risk Management

In this presentation we will:

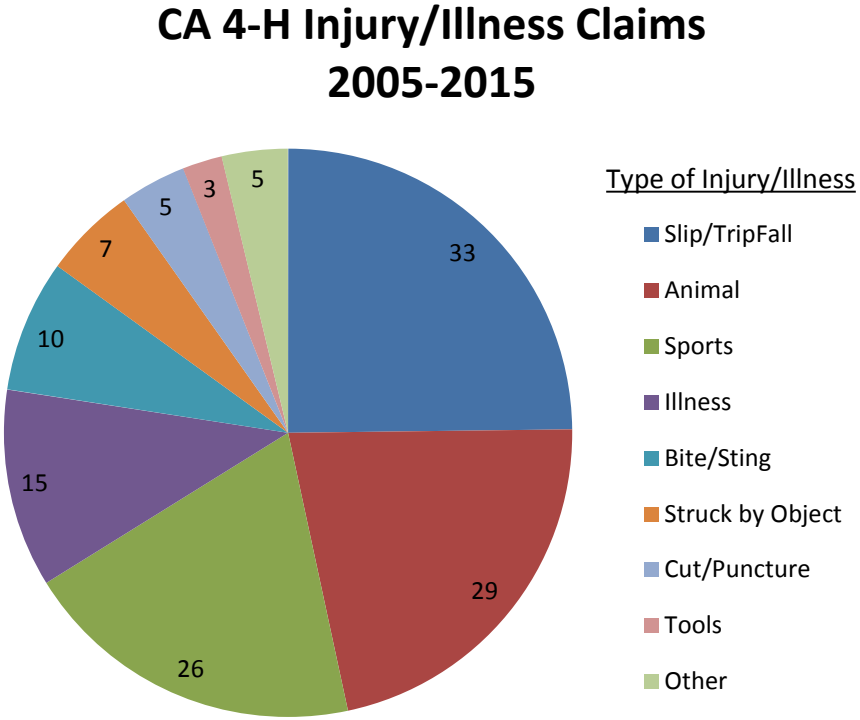
- Summarize 4-H accident claims
- Discuss incident reporting
- Review calls to ACA Hotline
- Discuss use of the Camp Safety Guidebook
- Exercise: Safety/Risk Management Plan

Summary of 4-H Injuries

Types of injuries in 4-H (based on insurance claims submitted)

Type of Injury/Illness	Number of Claims
Slip/TripFall	33
Animal	29
Sports	26
Illness	15
Bite/Sting	10
Struck by Object	7
Cut/Puncture	5
Tools	3
Other	5
Total Injury/Illness Claims	133

Avg. cost per claim = $2,700

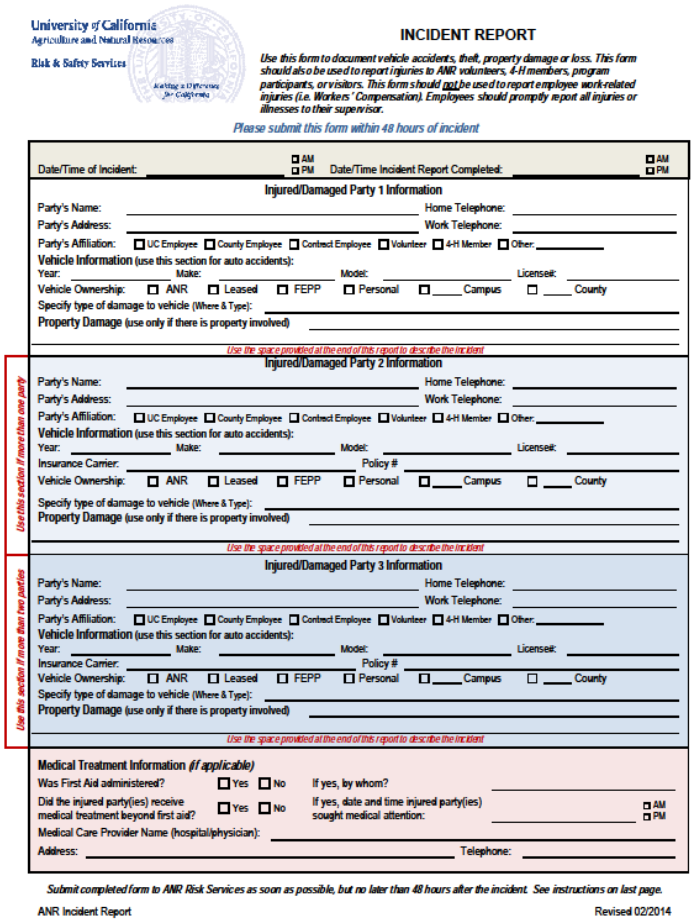


Incident Reports

Purpose: to document incidents for potential claims and to provide data for planning and prevention of future incidents.

- Please complete UC ANR Incident Report form (http://ucanr.org/incidentreport) as soon as possible.
- Provide as much information as you can.
- Submit report to your UCCE office.
- ANR Staff should forward the report to ANR Risk Services.

Incident Reports



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INCIDENT REPORT

Use this form to document vehicle accidents, theft, property damage or loss. This form should also be used to report injuries to ANR volunteers, 4-H members, program participants, or visitors. This form should not be used to report employee work-related injuries (i.e. Workers' Compensation). Employees should promptly report all injuries or illnesses to their supervisor.

Please submit this form within 48 hours of incident

Date/Time of Incident: ☐ AM ☐ PM Date/Time Incident Report Completed: ☐ AM ☐ PM

Injured/Damaged Party 1 Information

Party's Name: Home Telephone:
Party's Address: Work Telephone:
Party's Affiliation: ☐ UC Employee ☐ County Employee ☐ Contract Employee ☐ Volunteer ☐ 4-H Member ☐ Other:
Vehicle Information (use this section for auto accidents):
Year: Make: Model: License#:
Vehicle Ownership: ☐ ANR ☐ Leased ☐ FEPP ☐ Personal ☐ ____ Campus ☐ ____ County
Specify type of damage to vehicle (Where & Type):
Property Damage (use only if there is property involved)

Use the space provided at the end of this report to describe the incident

Use this section if more than one party

Injured/Damaged Party 2 Information

Party's Name: Home Telephone:
Party's Address: Work Telephone:
Party's Affiliation: ☐ UC Employee ☐ County Employee ☐ Contract Employee ☐ Volunteer ☐ 4-H Member ☐ Other:
Vehicle Information (use this section for auto accidents):
Year: Make: Model: License#:
Insurance Carrier: Policy #
Vehicle Ownership: ☐ ANR ☐ Leased ☐ FEPP ☐ Personal ☐ ____ Campus ☐ ____ County
Specify type of damage to vehicle (Where & Type):
Property Damage (use only if there is property involved)

Use the space provided at the end of this report to describe the incident

Use this section if more than two parties

Injured/Damaged Party 3 Information

Party's Name: Home Telephone:
Party's Address: Work Telephone:
Party's Affiliation: ☐ UC Employee ☐ County Employee ☐ Contract Employee ☐ Volunteer ☐ 4-H Member ☐ Other:
Vehicle Information (use this section for auto accidents):
Year: Make: Model: License#:
Insurance Carrier: Policy #
Vehicle Ownership: ☐ ANR ☐ Leased ☐ FEPP ☐ Personal ☐ ____ Campus ☐ ____ County
Specify type of damage to vehicle (Where & Type):
Property Damage (use only if there is property involved)

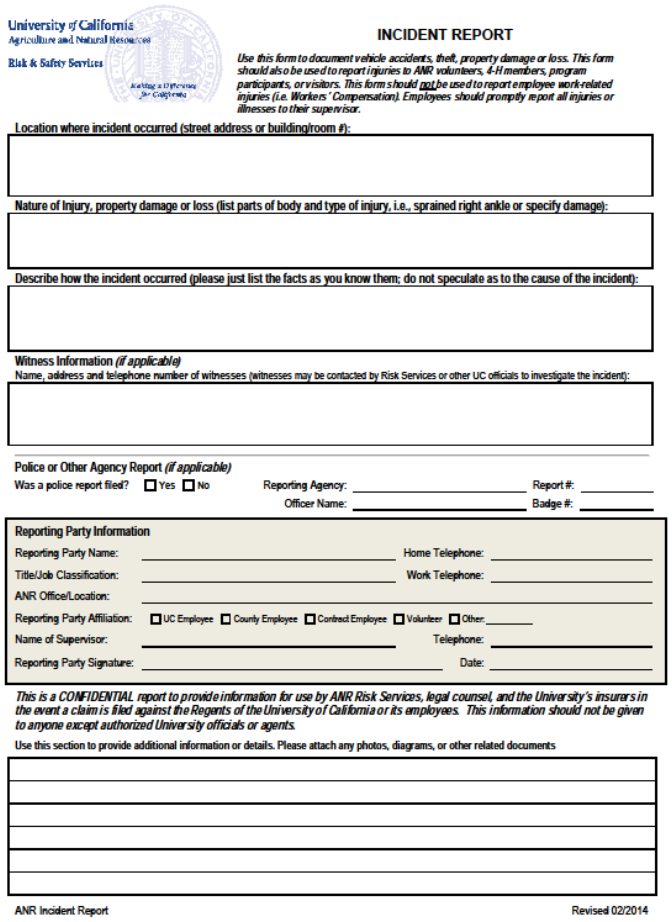
Use the space provided at the end of this report to describe the incident

Medical Treatment Information ***(if applicable)***

Was First Aid administered? ☐ Yes ☐ No If yes, by whom?
Did the injured party(ies) receive medical treatment beyond first aid? ☐ Yes ☐ No If yes, date and time injured party(ies) sought medical attention: ☐ AM ☐ PM
Medical Care Provider Name (hospital/physician):
Address: Telephone:

Submit completed form to ANR Risk Services as soon as possible, but no later than 48 hours after the incident. See instructions on last page.

ANR Incident Report Revised 02/2014



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INCIDENT REPORT

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Location where incident occurred (street address or building/room #):

Nature of Injury, property damage or loss (list parts of body and type of injury, i.e., sprained right ankle or specify damage):

Describe how the incident occurred (please just list the facts as you know them; do not speculate as to the cause of the incident):

Witness Information ***(if applicable)***
Name, address and telephone number of witnesses (witnesses may be contacted by Risk Services or other UC officials to investigate the incident):

Police or Other Agency Report ***(if applicable)***
Was a police report filed? ☐ Yes ☐ No Reporting Agency: Report #:
Officer Name: Badge #:

Reporting Party Information

Reporting Party Name: Home Telephone:
Title/Job Classification: Work Telephone:
ANR Office/Location:
Reporting Party Affiliation: ☐ UC Employee ☐ County Employee ☐ Contract Employee ☐ Volunteer ☐ Other:
Name of Supervisor: Telephone:
Reporting Party Signature: Date:

This is a CONFIDENTIAL report to provide information for use by ANR Risk Services, legal counsel, and the University's insurers in the event a claim is filed against the Regents of the University of California or its employees. This information should not be given to anyone except authorized University officials or agents.

Use this section to provide additional information or details. Please attach any photos, diagrams, or other related documents

ANR Incident Report Revised 02/2014

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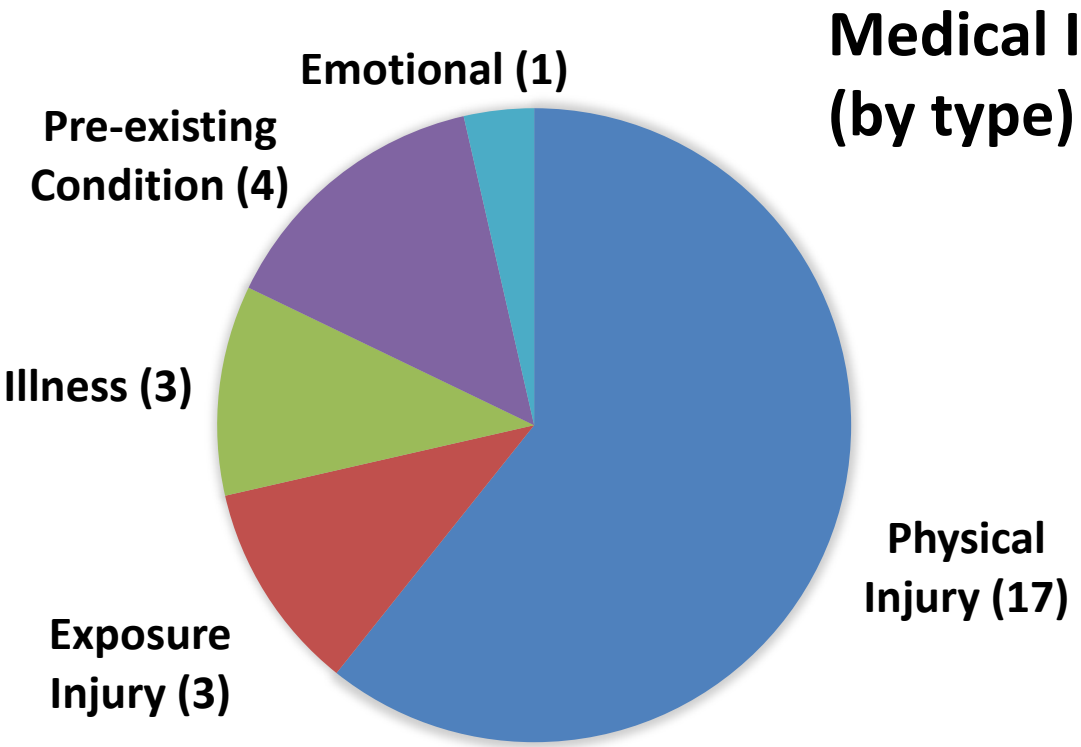
Camp Incidents in 2014-15

Summary of Incident Reports submitted to Risk Services

Type of Incident	2014	2015
Medical	11	17
Conduct	4	3
Supervision	1	0

- Reports range from minor first aid (heat illness, cuts, bee sting) to emergency medical (sprains/strains)

Camp Incidents in 2014-15



Case Studies – Site Hazards

Volunteer stepped on rotted section of a wooden bridge and fell through bridge up to knee. First aid provided for scrape and bruise on knee.

Camper tripped over ledge when retrieving a ping pong ball. Landed on ankle awkwardly and had pain. Camper taken to hospital and returned to camp with doctor's clearance.

Eight campers in area of beehive were stung on their hands and legs. First aid provided at camp.

Case Studies – What you can't see…

Two campers collided while playing glo-stick tag in the dark. One camper lost primary tooth and loosened others. Followed up with dentist after camp.

Camper bumped her head into building in the dark. Later reported experiencing dizziness and headaches.

Camper went for swim during all day hike and got fish hook stuck in foot. First aid provided by camp nurse.

Case Studies – Exposure Hazards

Camper received a blistering sunburn on shoulders.

Camper experienced symptoms of heat illness on a hike. Volunteer lifeguard provided aid and helped camper rest and cool down. After period of rest and cool-down, camper felt better and continued on hike.

Camper was swimming in a cold lake and had shock-like symptoms. Lifeguard helped camper from the lake and brought him to shore to recover.

Case Studies – Camper Conduct

One camper reported injury from being tackled and restrained by the other two campers, as part of horseplay during the evening campfire. Perception of the incident varied among witness and participants. Injured member was removed from camp by parent.

Camper (teen counselor) reported “stolen” undergarment. Other teen counselors took it upon themselves to search campers belongings to look for the stolen item. Search efforts were halted immediately upon discovery by adult staff.

After camp, parent reported that camper was bullied/ harassed by other campers during camp, including derogatory comments about camper's body and use of swear words. Post –camp review indicated that adults missed signs that camper was having bad experience at camp.

Case Studies – Volunteer Conduct

Campers engaged in horseplay did not stop when told to by adult volunteer. Volunteer intervened and picked up one youth by the head. Camp Director removed adult volunteer from that cabin for the duration of camp.

Camp Director reported that adult volunteer was taking inappropriate photos of youth at the camp.

Case Studies – Pre-existing Conditions

Camper arrived at program with severe blister and sent photo of blister to mother during camp event. Parent contacted 4-H staff and requested that child be seen by a physician. Camper received first aid and medical treatment at urgent care.

Camper had asthma attack while on hike and did not have inhaler. Volunteer allowed camper to use other camper's inhaler (same medicine).

Camper reported pain in shoulder and indicated that pre-existing injury became aggravated during swimming. Nurse examined shoulder and provided Motrin. Parent was contacted and picked up child the following morning.

Case Studies – Emotional Concerns

4-H member (teen junior counselor) expressed suicidal thoughts to other youth, who reported this to 4-H Staff and adult volunteer. 4-H staff discussed with camp nurse and brought member to nurse's station to discuss. All agreed to call parents and that member should go home.

Case Studies – Potentially Serious Injuries

Camper was attempting a jump while riding a horse. Horse stopped abruptly and rider fell off horse. Rider injured tailbone and hip in fall from horse. Injury was iced. After approximately 5 minutes injured rider reported that she was "okay" and continued on with the next horse riding class.

Eight 4-H member campers in area of beehive were stung on their hands and legs. First aid provided at camp.

Teen counselor discovered gas leak in cabin and evacuated 7 youth campers. All were treated by camp lifeguard (trained paramedic). Gas was shut off and cabin was not used for remainder of camp.

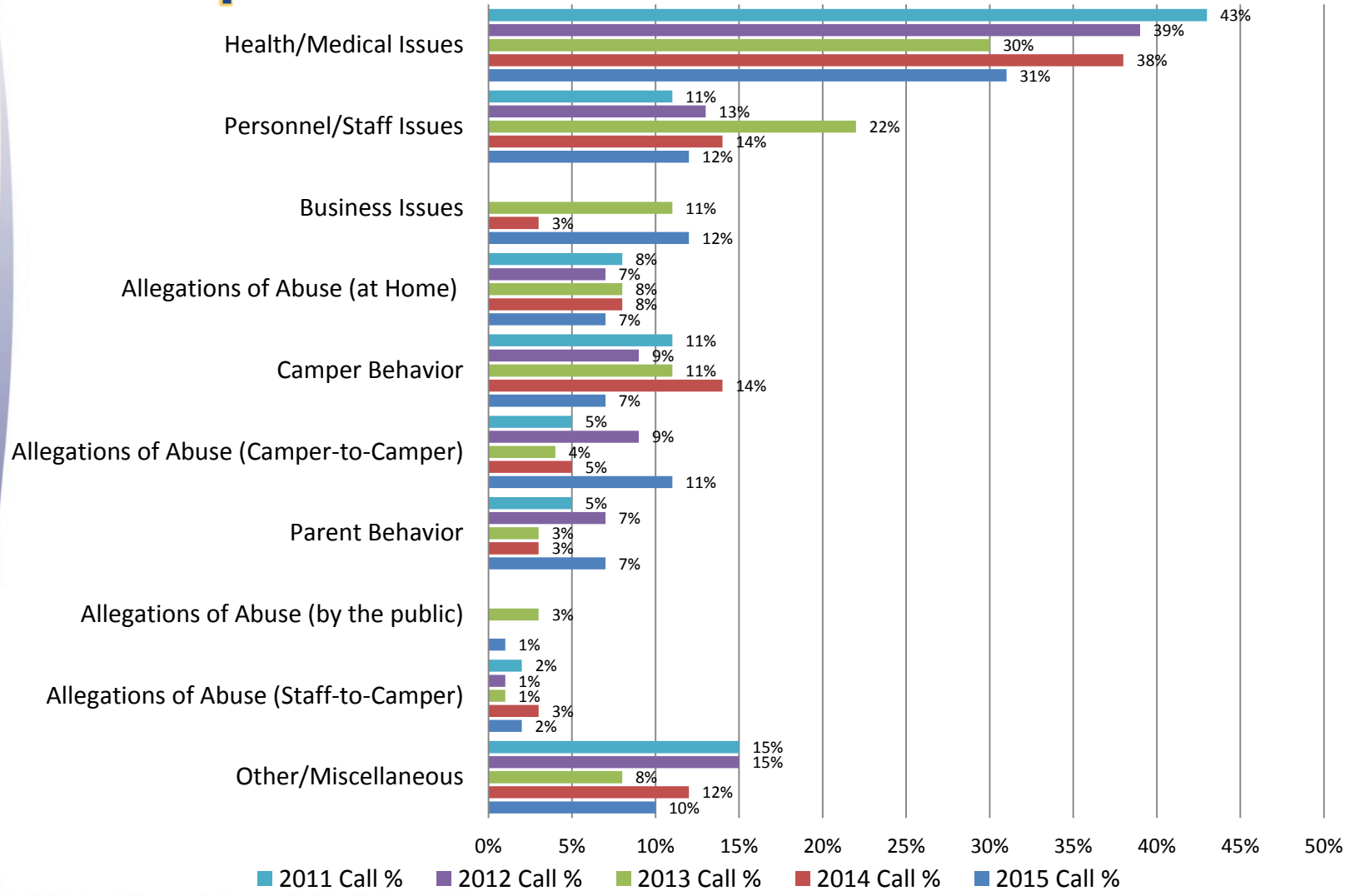
Case Studies – Illnesses at Camp

4H member had fever and stomach ache. First aid was administered. Camp staff informed parent via phone and camper was taken home by 4-H program rep.

Volunteer went on 30 minute hike up steep grade and reported chest discomfort and irregular heartbeat afterwards. Camp nurse provided first aid (checked blood pressure/heart rate). Nurse advised volunteer to seek medical care. Volunteer left camp early.

Volunteer had migraine and was driven to hospital. Pain meds were administered and headache passed. Volunteer continued to feel unwell and stayed at hotel until family came to pick the volunteer up.

5-Year Summary of ACA Hotline Call Topics



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ACA Camp Crisis Hotline Annual Review 2015

Health and Medical 31% of the calls

Business Operations 12% of the calls

Personnel and Employment 12% of the calls

Camper Behavior 7% of the calls

Parent Behavior 7% of the calls

Allegations Of Abuse

11% of the calls – Allegations of camper-to-camper abuse
7% of the calls – Allegations of abuse at home
2% of the calls – Allegations of staff-camper abuse
1% of the calls – Allegations of camper abuse by member of public

Miscellaneous 10% of the calls

The remainder of the calls concerned varied issues. These ranged from responding to natural disasters, rental contracts, and requests for leadership resources.

ACA Lessons Learned

Health & Medical

1. Trained healthcare staff is critical to the health and well-being of your campers and staff.
2. In the event of a serious accident, injury, or infestation, an excellent communications plan is critical.
3. Lice outbreaks happen. It is what you do next that matters. ACA's single most popular call to the Hotline this year was regarding lice outbreaks and whether to treat and keep those impacted at camp, or send them home.
4. All staff need to understand the issues regarding distribution of medication.
5. Mental health concerns continue to grow. Have a support system in place.

ACA Lessons Learned

Business Operations

1. Operating a business is becoming more complex — seek and retain expert counsel. Calls regarding business operations issue jumped from near the bottom to the second most popular call to the Hotline this year.
2. Understand the laws applicable to your camp — state, federal, and local.

ACA Lessons Learned

Personnel & Employment

1. Set and enforce clear policies about acceptable relationships between staff while at camp.
2. Prepare to address the accommodation and inclusion of staff who identify as gender non-conforming. ACA has seen a rapid increase in calls of this nature.
3. Have a back-up plan for staff coverage in an emergency or unexpected loss of staff. Supervision ratios are critical to ensuring the safety of your campers.
4. Enforce your personnel policies. It's not enough to simply have personnel policies — you must enforce them as well. Establish a clear understanding of what the consequences are (reprimand, suspension, dismissal, and so on) for the violation of the policies.

ACA Lessons Learned

Camper Behavior

1. Take all comments about suicide very seriously. ACA saw an alarming increase in calls from camps regarding campers making suicidal comments. Unless you are a trained mental health professional, assume the threat is serious. Educate staff on the indicators and symptoms of mental health problems.
2. Attentive and engaged staff supervision is the key to reducing negative camper behavior. Almost all reported incidents of alleged bullying and inappropriate behavior occurred when staff was not alert or even in the area.
3. Camper's (and staff) belongings can be searched if you suspect illegal or unsafe activity.

ACA Lessons Learned

Parent Behavior

1. Communication is the key to positive parent behavior. An informed parent is more likely to exhibit positive behaviors. Be upfront about your policies: your camper behavior management policies, your employment policies, and anything else parents need to know.
2. You need not — and should not — be the private investigator, judge, or jury. If you suspect a parent is neglecting or abusing their child, if you suspect parents to be driving drunk or high, if divorced parents are battling out custody issues, etc. — then contact the authorities and/or legal advisors. You don't have the legal authority to investigate or judge, so let those that do handle these situations.

ACA Lessons Learned

Allegations of Abuse

1. Don’t hesitate to contact the authorities if a child alleges and/or you have reason to believe that they are a victim of abuse or neglect.
2. Mandated reporting is the law, and you can be arrested for failure to contact the authorities.
3. Don’t try to investigate. It is critical that you contact the authorities promptly so experts who are trained on these issues can begin their processes immediately.
4. Don’t be surprised when a child reveals an allegation of abuse at home.
5. Attentive, active, and involved staff supervision is the key to keeping campers from harming each other.
6. One person’s description of bullying is another person’s description of abuse.

ACA Lessons Learned

Allegations of Abuse

7. One staff person should never be alone (out of the sight of others) with a camper.
8. Staff training and supervision policies must support the above
9. Is your staff to camper ratio high enough to ensure that one staff person cannot be alone with a camper, especially in unique times such as the middle of the night when a camper needs to use the restroom?
10. Teach your staff to be ever vigilant and question what they see. It takes just one person to step up and question when they see something not right about the way an adult is interacting with a child.
11. Establish clear policies about appropriate physical interaction between staff and campers. Be very clear where you draw the line.

ACA Lessons Learned

Allegations of Abuse

12. One in four girls, and one in six boys are the victim of abuse before they reach age 18 — thus, many children may be arriving at your camp already the victim of abuse.
13. Keep the phone number of your local child abuse reporting authority in a place you'll find easily accessible.
14. Documentation is important. As with any important issue at camp, documenting everything is key to ensuring that the authorities have what they need to proceed with their investigation. Remember, your job is not to investigate, but to record the details of what was said by the child, who they said it to, etc.

Camp Safety Guidebook

2011 Survey of Camp Safety Guidebook Users

- 35% of respondents attended training.
- 90% felt that Guidebook provided information relevant to meeting camp goals.
- 70% used one or more plan templates.
- 55% reported their camp was inspected.
- 90% believe their camp is compliant with regulations.

Camp Safety Guidebook

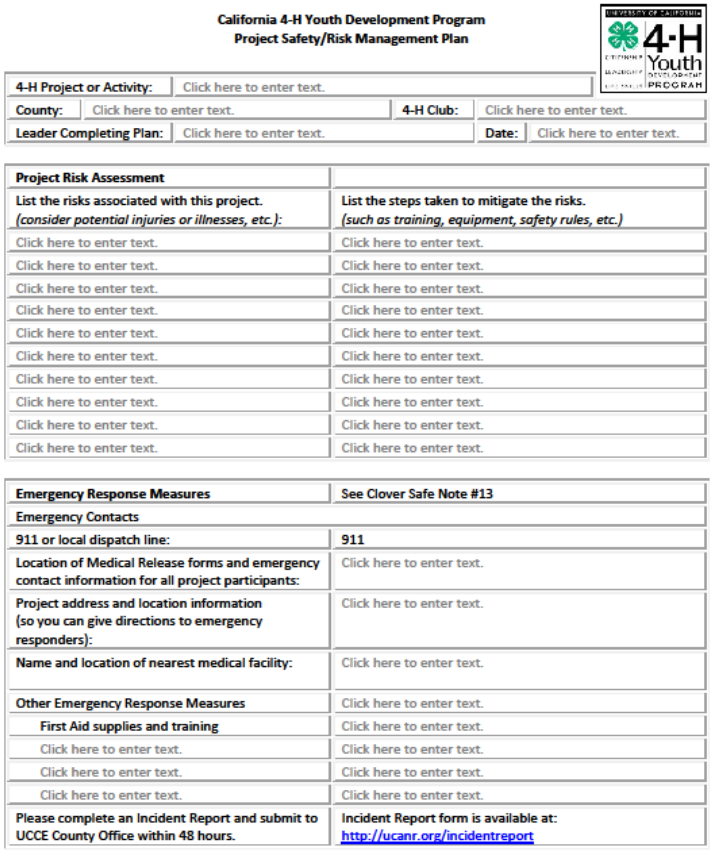
Discussion

- Did you use Camp Safety Guidebook?
- How did it work?
- What are challenges to operating a safe camp and/or meeting the regulations and policies?
- What high risks have you identified at camp?
- What incidents or near-misses have you experienced?
- What measures have you provided to reduce camp risks or near-misses?

Safety / Risk Management Plan

Use this form to help you identify potential risks to camp activities and document the steps that will be taken to minimize these risks.

Also include emergency response measures.



California 4-H Youth Development Program
Project Safety/Risk Management Plan

4-H Project or Activity:	Click here to enter text.		
County:	Click here to enter text.	**4-H Club:**	Click here to enter text.
Leader Completing Plan:	Click here to enter text.	**Date:**	Click here to enter text.

Project Risk Assessment	
List the risks associated with this project. *(consider potential injuries or illnesses, etc.):*	**List the steps taken to mitigate the risks.** *(such as training, equipment, safety rules, etc.)*
Click here to enter text.	Click here to enter text.
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Click here to enter text.	Click here to enter text.
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Click here to enter text.	Click here to enter text.

Emergency Response Measures	**See Clover Safe Note #13**
Emergency Contacts	
911 or local dispatch line:	**911**
Location of Medical Release forms and emergency contact information for all project participants:	Click here to enter text.
Project address and location information (so you can give directions to emergency responders):	Click here to enter text.
Name and location of nearest medical facility:	Click here to enter text.
Other Emergency Response Measures	Click here to enter text.
First Aid supplies and training	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Please complete an Incident Report and submit to UCCE County Office within 48 hours.	**Incident Report form is available at:** http://ucanr.org/incidentreport

For more information on assessing potential risks and identifying mitigation measures, see the 4-H Safety Manual at: http://ucanr.org/4hsafetymanual and Clover Safe notes at: http://ucanr.org/cloversafe

Safety / Risk Management Plan

Definitions:

A hazard is something with a potential to cause harm.

A risk is the likelihood of harm occurring.

Safety is managing risk to reduce the likelihood and/or severity of the harm.

When developing a plan, Volunteer Leaders should consider:

What are the inherent hazards of the activity?

- Environmental conditions (weather, location, facility, etc.).
- Tools, equipment, animals.
- Materials or chemicals used.
- Educational, maturity, and skill levels of participants.

Safety / Risk Management Plan

What types of incidents (adverse consequences) may occur? Use your experience.

- Physical injury
- Illness
- Emotional distress
- Property damage
- Lost child

What is the likelihood of the hazard causing harm?

- Anything can happen, but let's focus on significant hazards that are most likely to occur and cause harm.

Safety / Risk Management Plan

Use this form to list the ways you may reduce these risks. You might consider:

How can you prevent incidents?

Administrative Controls

Conduct safety training to address identified hazards.

Implement safety protocols and controls on activity (who may participate, what they are allowed to do, etc.).

Establish buddy system and rules for field trips.

Engineering Controls

Assure safety guards and shields are in place and functional for equipment or activity.

Protective Equipment

Require the use of appropriate protective gear (helmet, gloves, eyewear, etc.).

Safety / Risk Management Plan

What do you do if injury or incident occurs?

- Initiate emergency procedures, including evacuation or cessation of project/activity.
- Apply primary first aid, if necessary.
- Call 911.
- Provide notifications (parent, 4-H staff, etc.) Note policy for having medical forms and contact information on hand.
- Compile incident report.

Safety / Risk Management Plan

Exercise

- Split into 4 groups.
- Develop 5 minute safety briefing on 4-H camp activity.
- Prepare Safety/Risk Management sheet.
- Use Clover Safe notes and your knowledge/experience to describe:
  - Potential hazards or risks.
  - Mitigation measures.
  - Emergency response procedures.
- Report back to group.

Thank You!

For questions or suggestions, contact us at:

Brian Oatman baoatman@ucanr.edu
Website: http://safety.ucanr.edu