### Bourne End Junior Sports Club – Football Section Emergency Action Plan Bourne End Recreation Ground

# For all emergency services - Dial 999 or 111

| Club Name: | Bourne End Junior Sports Club   |
|------------|---|
| Activity:  | BEJSC Football Matches/Training sessions  |
| Venue:     | Pedestrian entrance: Bourne End Recreation Road, Recreation Road, Off Furlong Road, |
|            | Bourne End, Bucks, SL8 5AH (Nearest post code)                                      |

#### **FIRST AIDER INFORMATION**

Each BEJSC team should have a qualified First Aider and a First aid kit present at all Matches and training sessions.

#### First Aid Equipment & Facilities

| Defibrillator:             | There is no defibrillator at Bourne End Recreation Ground. The nearest defibrillator at the Bourne End Community Centre, Wakeman Road, Bourne End, Bucks, SL8 5SX. The defibrillator is on the outside right-hand wall of the building facing the "The Target Room". Details of use are shown on the defibrillator. Bourne End Community Centre is approx. one mile from Bourne End Recreation Ground and there is a small car park. |  |  |
|----------------------------|--|--|--|
| Stretcher:                 | Not available. If required, would require an ambulance to attend.  |  |  |
| Ambulance:                 | Call emergency services, if required.  |  |  |
| Location of venue:         | Emergency entrance gate only: Bourne End Recreation Ground, Claytons Meadow, Bourne End, Bucks, SL8 5DQ. Also, emergency gate at Pedestrian entrance as per above.   |  |  |
| Ambulance access to venue: | Entry to Bourne End Recreation Ground is via the main entrance gate in Claytons Meadow. The key for the main entrance gate is held in the key box inside the right-hand side (facing green changing rooms) changing room. All teams have a set of keys for access to the changing rooms. The key box is positioned on the back wall.   |  |  |
|                            | Team Managers/Coaches have been advised of the code for the key box.  Please ensure that the entrance gate is locked after any incident and the entrance gate key must be put back in the key box.   |  |  |
| Pitch to Ambulance         | Across the recreation ground, but assisted by BEJSC Officials.   |  |  |
| Reporting Incident:        | If a parent or guardian of an injured player is not present, contact them immediately. After the incident, it should be noted in the Age group's First Aid Accident book (included in First Aid kit). Also, the BEJSC Accident form (see below) is to be completed.  |  |  |

#### **Nearest Hospitals**

| Nearest A&E Hospital to Bourne End        | Wexham Park Hospital, Wexham Park, Slough, Berkshire, SL2 4HL.       |
|---|--|
| Recreation Ground                         | Telephone Numbers: A & E Reception: 0300 615 4017                    |
| Neoreation ereand                         | A & E Majors: 0300 615 3909 General Switchboard: 0300 614 5000       |
|   | Journey Time: 20 - 25 minutes – 11 miles                             |
| Nearest A & E Hospital to Bourne End      | Stoke Mandeville Hospital, Mandeville Road, Aylesbury,               |
| Recreation Ground                         | Buckinghamshire, HP21 8AL. Tel No: 01296 315000.                     |
|   | Journey Time: 40 - 50minutes – 22 miles                              |
| Nearest Urgent Treatment Centre (Minor    | Wycombe Hospital, Urgent Treatment Centre (UTC), Queen Alexandra     |
| Injuries) to Bourne End Recreation Ground | Road, High Wycombe, Bucks, HP11 2TT. Tel No: 0300 030 9846 (8am      |
|   | to 8pm). Nearest entrance/car park: 2 – Orange Zone PFI wing – CP B. |
|   | Journey Time: 15 - 20 minutes – 7 miles                              |

## **BEJSC Accident Report Form**



To be completed as soon as possible after the accident.

(The accident should be noted in the Age group Accident book, as well as completing this form. Please email it to the Club - <a href="mailto:office@bejsc.co.uk">office@bejsc.co.uk</a> and copy Club Secretary - <a href="mailto:bejscfootball@gmail.com">bejscfootball@gmail.com</a>

| Name of person completing form                       | ٦ |
|--|---|
|  |   |
| Site where incident/accident took place              | 1 |
| Site where incluently accident took place            | ] |
|  | ] |
| Date and time of incident/accident                   | 1 |
|  |   |
| Name of Injured Person Age if under 18 years         | • |
|  |   |
| Address:   |   |
| Telephone No:  | ] |
| Details of Accident/Injury – What happened?          | ٦ |
|  |   |
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|  |   |
|  |   |
|  | ] |
| Action taken and treatment given                     | 1 |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
| Name of person reporting accident/incident and date  | • |
|  |   |
|  | ] |
| Signed – by a witness (could be the person involved) | 1 |
|  |   |
| Office Use Only                                      |   |
| Report Received by Date                              |   |
| Any Follow Un Action Required?                       |   |

Please email or send the completed form to BEJSC office (office@bejsc.co.uk) and to Football Section Secretary - bejscfootball@gmail.com