



Gymnastics
Australia

CRITICAL INCIDENT POLICY

Policy Name: Critical Incident Policy

Date of Approval: 29 April 2007

Policy Coverage: Sport

Date of Review:

1. INTRODUCTION

- 1.1 Gymnastics Australia (GA) requires all Board Members, staff, Technical Members and volunteers to promptly and accurately report critical incidents pursuant to this policy.
- 1.2 These guidelines are to assist all Board Members, staff, Technical Members and volunteers to respond appropriately to incidents that are likely to cause trauma to individuals.
- 1.3 The guidelines establish basic procedures and reporting systems to cover preventative measures, immediate responses, and follow up actions to deal both with the immediate consequences and the longer term implications of a critical incident.

2. PURPOSE

- 2.1 To define and explain the circumstances under which GA Board Members, staff, Technical Members and volunteers are to report critical incidents to GA.
- 2.2 To ensure the timely notification of critical incidents to GA and all appropriate authority.
- 2.3 To ensure critical incidents are documented, in order to enable GA to further deal with the incident as required.

3. DEFINITIONS

- 3.1 Critical incidents are events with serious repercussions that take place suddenly and unexpectedly or developments over a period of time and which come to a head in a sudden and traumatic manner.
- 3.2 A critical incident is defined as a traumatic event which causes or is likely to cause extreme physical and/or emotional distress and may be regarded as outside the normal range of experiences of the people affected.
- 3.3 Some examples of critical incidents are:
 - Suicide or attempted suicide
 - Accidental death or serious injury
 - Physical assault, including sexual assault
 - Serious threatening behaviour
 - Major theft or vandalism
 - Fire or explosion
 - Acute illness (mental or physical)
 - Incidents involving firearms or bombs
 - Road traffic accidents
 - Natural disasters

- 3.4 Every critical incident is unique and will need to be dealt with, according to the needs of the person or people affected.

4. GUIDELINES

4.1 Communication

When a critical incident occurs, it is essential that effective communication takes place immediately. Good communication enables GA to respond to the incident quickly, appropriately and with a minimum of disruption to other team members.

4.2 Handling a critical incident

GA has established a network of contact persons, who are to be contacted in the first instance when a critical incident occurs.

The people to be contacted in order of priority are:

- Team Manager (if applicable)
- GA CEO
- GA Gymsport Program Manager (applicable sport)
- Technical Director (applicable sport)

Refer – Appendix 2 for specific contact details relevant to the particular gymsport/tour

Such persons will determine the nature and the seriousness of the incident and will form the Critical Incident Management Team.

4.3 Critical Incident Management Team

The Critical Incident Management Team will be based in Australia and where possible should include appropriate representatives from Senior Management, staff, medical and media areas. This team should attend to the issues of:

- establishing an authorised communication channel between the touring party and Australia with reference to all relevant organisations and institutions (eg NSO, SSO, SIS/SAS);
- appropriate medical coverage;
- family and relatives' demands with respect to their injured family members;
- informing family of family members both involved and not involved in the critical incident
- contact with relevant embassy staff and DFAT;
- media enquiries;
- psychological services;
- appropriate communication with the hospital(s) providing immediate support to the injured and with medical staff who would provide services for those injured when they return home;

- the management of visitors of the injured and well-wishers who may provide unwanted stress in terms of inappropriate attention at the time of acute psychological trauma;
- liaison with medical evacuation and repatriation services as appropriate (and liaison with an appropriate airline to facilitate the best care possible for transport home);
- tracking of expenses; and
- potential legal issues (including legal action, compensation etc).

Refer – Appendix 3 for Critical Incident Plan Checklist

4.4 In the case of an emergency

In an emergency situation when immediate assistance is required, e.g. an ambulance or the presence of police, the Team Manager/Head Coach will take the decision to make the initial contact call and then inform a contact person at GA immediately afterwards. Phone numbers are listed at the end of this document.

Refer – Appendix 2 for Emergency phone number listings in all continents.

4.5 Information dissemination

It is important that, if and when required, factual and accurate information is disseminated to other team members and the wider community. This process is supervised by the GA CEO and other contact persons maybe called upon to assist. It is important that the privacy of individuals be respected in this process.

4.6 Dealing with Media

Any inquiries from the Media in relation to a critical incident should be referred directly to the Team Manager/GA CEO. Members of the relevant team are not to talk to the media without approval from the Team Manager or GA CEO.

4.7 Initial and Continuing Support

It is important that the persons involved in or affected by the critical incident receive the support they need. This will be organised by the relevant contact person who may also call in external professional assistance if required.

4.8 Follow up procedures

It is important that factors surrounding a team return to normal as soon as possible after an incident. The GA CEO will analyse the procedures undertaken regarding the critical incident to ensure all correct measures were taken.

All personnel involved in the incident will be required to provide an incident report to the GA CEO.

Refer – Appendix 1 for report format.

5. CHANGES TO THE POLICY

Changes to this policy may be submitted by GA Board of Directors, State Associations and National Gymsport Management Committees for review and approval by the GA Board. Once a change has been approved, the policy will be updated in the official GA policy register, on the Intranet and circulated to GA Board of Directors, State Associations and relevant Gymsport Committees.

In addition, Gymnastics Australia is committed to ensuring all policies are up-to-date and reflect current practices. The most recent review date is recorded at the beginning of each policy.

APPENDIX 1

CRITICAL INCIDENT REPORTS

The report is to include:

1. Name, contact details and position of person submitting report
2. Date of Incident
3. Report of incident to contact person within 24hrs of incident, if not why?
4. Names of person involved in the incident
5. Critical incident type
6. Description of the Critical Incident and post incident activity, including any reports obtained e.g. Doctor reports, police reports etc.
7. Report must be signed and dated and must be received within a week of the critical incident.

CONTACT DETAILS

(to be gymsport and tour specific)

Contacts

Gymnastics Australia +61 3 9830 4588

GA CEO - Jane Allen

Sport Program Mangers

Standard emergency numbers

112	All Europe
911	North America
999 or 112	UK
000	Australia
111	New Zealand
119	Asia

24-hour Consular Emergency Centre: +61 2 6261 3305 or 1300 555135 (within Australia only)

AIG Travel Emergency Assist +61 2 9251 4298

In an event of an emergency overseas, a free reverse charge call to American International Assistance Service any time from anywhere in the world will put you in touch with the emergency assist service. To contact AISA proceed as follows:

1. Ring the operator in your locality
2. Book a reverse charge call to 61 2 9251 4298

CRITICAL INCIDENTAL PLAN CHECK LIST

1. PRIOR TO DEPARTURE

- 1.1 Circular distributed to all participating parties including tour itinerary, flights arrangements and accommodation details.
- 1.2 Appropriate Travel Insurance arrangements made – copy of proof of insurance, travel insurance policy and emergency contact number details provided to the Team Manager or Head Coach.
- 1.3 Emergency Wallet Card with key contact personnel details, standard emergency numbers and consular emergency centre details provided to each team member

2. HANDLING A CRITICAL INCIDENT

- 2.1 An **assessment of the medical capability available at the site** of first treatment should be made before or upon arrival at the destination and if necessary, **arrangements for repatriation** to an appropriate medical environment should be facilitated as appropriate.
- 2.2 Getting the relevant **family members to the site** of the critical incident immediately is necessary and an assessment needs to be made of the costs of this specific family travel.
- 2.3 Any **decision to deploy staff** to the scene of the incident should be made within a time frame that ensures appropriate supports are on the ground 24-48 hours of the event.
- 2.4 Consideration needs to be given to provide an appropriate **number of psychologists and counsellors on the ground** at any particular critical incident, particularly when considering the need for support for all the various staff involved at the site. Best practice indicates that **debriefing and trauma counselling services be provided**. Importantly such staff should possess experience in the area of critical incident stress management and trauma.
- 2.5 If the event involves significant medical issues, the **engagement of a doctor** is imperative to ensure appropriate treatment is given in a timely manner. The presence of a doctor also allows athletes and families the opportunity to clarify information and ask questions, thereby relieving stress and anxiety regarding the treatment process.
- 2.6 An “open” approach **enabling visits by family members to the bedsides of those injured** is recommended, as is expression of support for providing

financial support where necessary and assistance with legal processes as necessary.

- 2.7 Clear **recommendations on what the GA/ASC/AIS will and can do** with respect to legal action and financial compensation in the short and long term is imperative. The scope of support will be largely determined by the nature of insurance policies.
- 2.8 Privacy and confidentiality is paramount and the **media must be handled appropriately**.
- 2.10 In regard to **support for staff members**, it needs to be recognised that providing trauma management intervention is emotionally and physically fatiguing. It is therefore crucial to ensure staff members providing this service receive appropriate support to prevent potential burnout.

3. POST INCIDENT

- 3.1 An assessment of **ongoing medical sports medical and related support services** needs to be conducted and provided to individuals as required. A co-operative approach as how best to support the individuals is imperative.
- 3.2 Consideration should be given to staff members who have been involved in an incident. In particular, **the provision of adequate leave** given the unique demands of the work, and **assistance with any increased workload** should be provided.
- 3.3 **A post-incident evaluation** of the operational procedures provided in response to the incident should be conducted.
- 3.4 Consideration should be given to any **ongoing media activities** that occur in relation to the incident, including the style and presentation to be used with staff, athletes and parents involved.
- 3.5 Particular attention should be paid to **maintaining relationships** with those who provided assistance in the handling of the incident. There should be acknowledgement for the support provided.
- 3.6 An **annual review of the Critical Incident Plan** should be conducted (including reviewing nominated contacts and their details).