

Bakersfield Race Club Staff Action Plan

1. Purpose

The purpose of this Staff Action Plan (SAP) is to establish clear procedures for responding to emergencies during Bakersfield Race Club practices, meets, dryland activities, team events, and other club-supervised activities.

The goals of this plan are to:

- Protect the health and safety of swimmers, coaches, families, volunteers, and spectators.
- Ensure a fast, calm, and organized emergency response.
- Clearly define the roles of coaches, lifeguards, facility staff, volunteers, parents, and swimmers.
- Ensure emergency medical services can access the facility quickly.
- Meet USA Swimming, facility, insurance, and applicable legal expectations.
- Document and report incidents properly.

This plan does not replace the facility's own emergency procedures. Bakersfield Race Club staff must follow both this club EAP and the emergency rules of the facility being used.

2. Facility Information

Primary Facility Name: Hillman Aquatics Center

Facility Address: 9001 Stockdale Hwy, Bakersfield, CA 93311

Main Entrance for EMS: Front Gate facing Parking Lot I off of Roadrunner Dr.

Nearest Cross Streets: Camino Media and Roadrunner Dr.

AED Location: Head Coach Office

First Aid Kit Location: Diving Coach Office (facing the 50 meter pool)

Backboard Location: Near Dry Dive Equipment

Rescue Equipment Location: Located Near the Diving Office Facing Pool Facility

Emergency Evacuation Area: Parking Lot I

Shelter-in-Place Area:

Chemical Storage Area: Gated Area in Dry Workout Room/Back Right Corner of Facility

Facility Contact/Head Coach: Shane Pelton, (484) 716-5570

BRC Emergency Contact: Stanzi McGowan, (661) 565-3057

Club Owner/Abys Coach: Stanzi McGowan, (661) 565-3057

A copy of this SAP should be kept in the coach's binder, on deck during practice, and available digitally to all coaches and key staff.

3. Emergency Contact Numbers

Emergency Contact	Phone
Emergency Medical Services, Fire, Police	911
Facility Front Desk - Eddie Brewer	(661) 654-3072
Facility Aquatics Director - Shane Pelton	(484) 716-5570
Head Abyss Coach - Stanzi McGowan	(661) 565-3057
Club Owner - Stanzi McGowan	(661) 565-3057
Nearest Hospital - Mercy South West	(661) 663-6000
Poison Control	(800) 222-1222

4. Chain of Command

During any emergency, the highest-ranking qualified person on site will lead the response until relieved by EMS, facility management, or another appropriate authority.

Standard Chain of Command

1. Lifeguard on duty, if present and responsible for water rescue
2. Abyss Coach or lead coach on deck
3. Assistant coach
4. Facility supervisor
5. Designated parent volunteer or meet official, if assigned

If lifeguards are present, they are the primary responders for in-water rescue unless otherwise directed by the facility's emergency procedures. Coaches are responsible for clearing the pool, supervising remaining athletes, calling 911 if directed or if necessary, retrieving emergency equipment, communicating with parents, and assisting EMS access.

If no lifeguard is present, the lead coach must respond within the limits of their training and certification.

5. Universal Emergency Response Procedure

For any serious emergency, the following sequence should be followed:

- 1. Recognize the emergency.**
- 2. Stop activity immediately.**
- 3. Clear the pool or area if needed.**
- 4. Activate the EAP.**
- 5. Call 911 when emergency medical assistance is needed.**
- 6. Retrieve AED and first aid equipment.**
- 7. Assign one person to meet EMS at the facility entrance.**
- 8. Keep swimmers and spectators away from the emergency area.**
- 9. Contact the parent or guardian as soon as practical.**
- 10. Document the incident.**
- 11. Submit a USA Swimming Report of Occurrence when required.**
- 12. Debrief with staff and update the plan if needed.**

USA Swimming states that injuries or health incidents at USA Swimming-related activities should be reported through the Report of Occurrence process after first aid or emergency care is provided, and that incidents should be reported regardless of severity.

6. Emergency Communication

Emergency Signal

The club will use the following emergency signal:

Three loud whistle blasts or a clear verbal command: “Clear the pool now.”

All swimmers must immediately stop activity, exit the pool safely, and move to the designated team area unless instructed otherwise.

911 Call Script

When calling 911, say:

“We have an emergency at Hillman Aquatic Center, located at 9001 Stockdale Hwy, Bakersfield, CA 93311. We have a swimmer/person with **[describe emergency: possible drowning, cardiac arrest, head injury, seizure, severe bleeding, etc.]**. EMS should enter through the front gate to the facility in parking lot I off of Roadrunner Drive. A coach or staff member will meet emergency responders on the pool deck. CPR/AED/first aid is **[in progress/not in progress]**.”

Do not hang up until the dispatcher tells you to do so.

EMS Guide

The lead coach will assign one person to:

- Go to the designated EMS entrance.
- Open or unlock gates if needed.
- Flag down emergency responders.
- Guide EMS directly to the victim.
- Keep pathways clear.

7. Role Assignments During an Emergency

Lead Responder

Usually the lifeguard or lead coach.

Responsibilities:

- Assess the situation.
- Begin rescue or first aid within training.
- Direct others clearly.
- Stay with the injured or ill person until relieved.
- Transfer care to EMS.

Assistant Coach / Second Adult

Responsibilities:

- Clear the pool.
- Supervise remaining swimmers.
- Move swimmers to the designated team area.

- Keep athletes calm and away from the emergency.

911 Caller

Responsibilities:

- Call 911.
- Use the emergency script.
- Stay on the phone until released by dispatcher.
- Report back to lead responder.

AED / First Aid Runner

Responsibilities:

- Retrieve AED.
- Retrieve first aid kit.
- Bring rescue equipment as directed.
- Return quickly and wait for instructions.

EMS Gate Guide

Responsibilities:

- Meet EMS at the designated entrance.
- Unlock gates if needed.
- Guide EMS to the victim.
- Keep access routes clear.

Parent / Crowd Control Designee

Responsibilities:

- Keep parents, spectators, and swimmers away from the emergency area.
- Prevent filming or crowding.
- Direct families to remain calm and wait for instructions.

Club Communication Designee

Usually the club owner, head coach, or assigned administrator.

Responsibilities:

- Contact parent or guardian.
- Communicate only confirmed information.
- Avoid speculation.
- Handle follow-up communication after the incident.
- Ensure incident documentation is completed.

8. Water Emergency / Possible Drowning

If a swimmer is struggling, submerged, motionless, or unable to make forward progress:

1. Activate the EAP immediately.
2. Lifeguard or trained responder enters the water if rescue is required.
3. Clear the pool.
4. Call 911.
5. Retrieve AED and first aid kit.
6. Remove the swimmer from the water as safely and quickly as possible.
7. Begin rescue breathing, CPR, and AED use as appropriate and within training.
8. Continue care until EMS arrives.
9. Contact parent or guardian.
10. Complete incident documentation and USA Swimming reporting.

The American Red Cross advises that if a child is missing, the water should be checked first because seconds matter, and it identifies emergency steps including recognizing distress, removing the person without putting the rescuer in danger, calling EMS, beginning rescue breathing/CPR, using an AED if available, and transferring care to advanced life support.

9. Missing Swimmer or Missing Child

If a swimmer or child is missing:

1. Stop practice or activity immediately.
2. Check the water first.
3. Clear the pool if needed.
4. Assign adults to check:
 - Pool
 - Locker rooms
 - Bathrooms

- Deck areas
 - Bleachers
 - Parking lot
 - Facility exits
5. Notify facility staff.
 6. Call 911 if the child is not located immediately or if there is any concern of danger.
 7. Contact parent or guardian.
 8. Document the incident.

No swimmer may leave practice without coach awareness and parent pickup procedures being followed.

10. Suspected Spinal, Head, or Neck Injury

Examples include diving injury, collision, fall, impact with wall, or any injury involving possible head, neck, or back trauma.

1. Stop activity immediately.
2. Do not move the swimmer unless there is an immediate life-threatening danger.
3. Activate lifeguard/facility spinal injury protocol.
4. Call 911.
5. Clear the pool or surrounding area.
6. Stabilize the swimmer within the responder's training.
7. Retrieve first aid kit, AED, and backboard if directed.
8. Contact parent or guardian.
9. Do not allow the athlete to return to practice that day.
10. Complete incident documentation and reporting.

11. Suspected Concussion or Head Injury

If a swimmer shows signs of concussion or head injury, including headache, dizziness, confusion, nausea, balance problems, blurred vision, unusual behavior, or memory issues:

1. Remove the athlete from activity immediately.
2. Do not allow same-day return to practice, dryland, or competition.
3. Notify parent or guardian.

4. Recommend medical evaluation by a licensed healthcare provider trained in concussion management.
5. Require written medical clearance before return.
6. Follow a gradual return-to-play process when applicable.
7. Document the incident.

California's youth sports concussion law applies to youth sports organizations including swimming and requires immediate removal for suspected concussion or head injury, parent/guardian notice for athletes 17 or younger, written medical clearance before return, and a graduated return-to-play protocol of no less than seven days when a concussion is diagnosed.

12. Sudden Cardiac Arrest / Collapse

Signs may include sudden collapse, unresponsiveness, abnormal breathing, no breathing, gasping, seizure-like activity, chest pain, or fainting.

1. Activate the EAP.
2. Call 911 immediately.
3. Send someone for the AED.
4. Begin CPR if the person is unresponsive and not breathing normally.
5. Apply AED as soon as available and follow prompts.
6. Continue CPR/AED care until EMS arrives or the person recovers.
7. Clear and control the area.
8. Contact parent or guardian.
9. Document and report the incident.

Planning note: California's AB 310 amended the Nevaeh Youth Sports Safety Act to require youth sports organizations to have coaches certified in CPR/AED use and to maintain a written cardiac emergency response plan beginning January 1, 2027, and to ensure AED access during official practices or matches beginning January 1, 2028.

13. Seizure

If an athlete has a seizure:

1. Clear the area around the athlete.
2. Do not restrain the athlete.

3. Do not place anything in the athlete's mouth.
4. Time the seizure.
5. Call 911 if the seizure lasts more than five minutes, repeats, occurs in water, causes injury, or if the athlete does not recover normally.
6. If seizure occurs in the water, remove the athlete as safely as possible and begin emergency care.
7. Contact parent or guardian.
8. Do not allow return to practice until cleared by parent/guardian and, when appropriate, a medical professional.
9. Document the incident.

14. Severe Bleeding or Injury

1. Stop activity.
2. Put on gloves if available.
3. Apply direct pressure with gauze or clean material.
4. Call 911 for severe bleeding, deep wounds, suspected fracture, or uncontrolled bleeding.
5. Keep the athlete still and calm.
6. Contact parent or guardian.
7. Clean and secure the area after the athlete is removed.
8. Dispose of contaminated materials properly.
9. Document the incident.

15. Breathing Emergency, Asthma, or Allergic Reaction

If an athlete has difficulty breathing:

1. Stop activity immediately.
2. Move athlete to a safe area.
3. Call 911 if breathing difficulty is severe, worsening, or not improving.
4. Assist the athlete with their prescribed inhaler or medication if allowed and available.
5. Retrieve AED and first aid kit.
6. Contact parent or guardian.
7. Do not allow return to practice unless the athlete is stable and cleared by parent/guardian or medical provider.
8. Document the incident.

For suspected severe allergic reaction:

1. Call 911.
2. Assist with epinephrine auto-injector if prescribed and available.
3. Monitor breathing.
4. Be prepared to begin CPR/AED use.
5. Contact parent or guardian.
6. Document the incident.

16. Heat Illness

Signs may include dizziness, headache, nausea, weakness, heavy sweating, confusion, fainting, or hot/dry skin.

1. Stop activity.
2. Move athlete to shade or cooler area.
3. Begin cooling.
4. Provide water if athlete is conscious and able to drink.
5. Call 911 for confusion, fainting, vomiting, altered mental status, or suspected heat stroke.
6. Contact parent or guardian.
7. Do not allow return to practice that day for serious symptoms.
8. Document the incident.

17. Lightning or Severe Weather

For outdoor practices or meets:

1. Clear the pool immediately at the first sign of lightning, thunder, or unsafe weather.
2. Move swimmers and families to the designated shelter area.
3. Do not shelter under trees, light poles, or exposed metal structures.
4. Resume activity only when permitted by facility policy.
5. Follow the facility's weather delay and restart procedure.
6. Document any weather-related suspension if needed.

The facility's weather policy controls when activity may resume.

18. Fire, Earthquake, or Facility Evacuation

Fire

1. Stop activity immediately.
2. Clear the pool.
3. Evacuate to the designated evacuation area.
4. Call 911 if not already activated by facility.
5. Take attendance.
6. Keep swimmers together.
7. Do not re-enter until cleared by facility staff or emergency personnel.

Earthquake

1. If indoors, drop, cover, and hold on where appropriate.
2. If on deck, move away from glass, structures, equipment, and overhead hazards if safe to do so.
3. After shaking stops, clear the pool.
4. Account for all swimmers.
5. Treat injuries.
6. Evacuate if instructed.
7. Contact parents if dismissal or pickup is needed.

19. Chemical Exposure or Air Quality Emergency

If there is a chemical smell, chlorine gas concern, chemical spill, or breathing irritation:

1. Stop activity immediately.
2. Clear the pool and deck.
3. Move swimmers upwind and away from the chemical area.
4. Notify facility staff.
5. Call 911 if anyone has breathing difficulty, eye irritation, vomiting, dizziness, or severe coughing.
6. Do not re-enter until cleared by facility staff or emergency personnel.
7. Contact parents if needed.
8. Document the incident.

For outdoor facilities, USA Swimming's operational risk manual specifically notes that evacuation planning may need to consider wind direction during a chlorine gas incident.

20. Blood, Vomit, Fecal Incident, or Bodily Fluid Exposure

1. Stop activity in the affected area.
2. Notify facility staff immediately.
3. Keep swimmers away from the affected area.
4. Use gloves and proper cleanup procedures only if trained and authorized.
5. Follow facility rules for pool closure, cleanup, and reopening.
6. Document the incident if exposure, illness, or injury occurred.

21. Behavioral Emergency, Threat, or Unsafe Conduct

If a swimmer, parent, spectator, or other person creates an immediate safety concern:

1. Stop the unsafe behavior if it can be done safely.
2. Remove swimmers from the area if needed.
3. Notify facility staff.
4. Contact law enforcement if there is a threat, violence, weapon, or refusal to leave.
5. Contact parent or guardian if a swimmer is involved.
6. Document the incident.
7. Refer Safe Sport concerns through the appropriate USA Swimming process when applicable.

No coach, volunteer, or parent should physically intervene unless necessary to prevent imminent harm.

22. Practice Safety Rules

The following safety rules apply to all BRC practices:

- A coach must be on deck before swimmers enter the water.
- Swimmers may not enter the water without coach permission.
- Horseplay, pushing, running, dunking, breath-holding contests, and unsafe diving are prohibited.
- Swimmers must follow coach instructions immediately.

- Swimmers may not use starting blocks unless permitted by the coach and properly trained.
- Coaches must maintain active supervision and line of sight.
- Emergency equipment must remain accessible.
- Attendance should be taken or reasonably tracked at each practice.
- Parents and spectators must remain in approved viewing areas.
- Deck access is limited to authorized swimmers, coaches, officials, facility staff, and approved volunteers.

USA Swimming's insurance FAQ states that direct supervision is required for in-water and out-of-water activities and defines direct supervision as line of sight between the supervising coach and the athletes.

23. Meet Emergency Procedures

When Bakersfield Race Club hosts or attends a meet, the club will follow the meet host's EAP, facility procedures, USA Swimming rules, and any direction from the meet referee, meet director, lifeguards, facility staff, or emergency personnel.

For hosted meets, BRC will identify:

- Meet Director
- Meet Referee
- Safety Marshal Coordinator
- Lifeguard coverage
- AED location
- First aid location
- EMS entrance
- Emergency communication process
- Evacuation area
- Missing child procedure
- Weather delay procedure
- Incident reporting process

Meet marshals, officials, coaches, and volunteers must help keep the deck clear, enforce warm-up safety rules, and report injuries or unsafe conditions immediately.

24. Parent and Guardian Notification

Parents or guardians will be contacted as soon as practical after any significant injury, medical event, removal from practice, behavioral emergency, or situation requiring emergency care.

Communication should include only known facts:

- What happened
- When it happened
- What care was provided
- Whether EMS was called
- Where the athlete is located
- What next steps are needed

Staff should not speculate about diagnosis, fault, blame, or long-term outcome.

25. Media, Social Media, and Confidentiality

Only the club owner, head coach, or designated spokesperson may communicate externally about a serious incident.

Coaches, parents, volunteers, and swimmers should not post photos, video, names, medical details, or speculation about an emergency on social media.

Medical information and incident details must be handled confidentially.

26. Incident Documentation

After an emergency, the lead coach or assigned administrator will complete an incident report that includes:

- Date and time
- Location
- Name of injured or ill person
- Parent or guardian contact
- Description of incident
- Witnesses
- Care provided

- EMS involvement
- Parent notification
- Staff involved
- Follow-up actions
- Whether USA Swimming Report of Occurrence was submitted

Reports should be completed as soon as possible after the incident while details are fresh.

27. Training and Drills

Bakersfield Race Club will review this SAP with all coaches and key staff before the start of each season and whenever procedures change.

At minimum, staff should review:

- Emergency signals
- AED location
- First aid location
- EMS access route
- Pool clearing procedure
- Missing swimmer procedure
- Cardiac emergency response
- Parent communication process
- Incident reporting process

USA Swimming's operational risk guidance states that appropriate staff and swimmers included in the plan should rehearse emergency procedures at least once a month.

28. Annual Review

This EAP will be reviewed at least annually by club leadership, coaching staff, and facility representatives.

The plan should also be reviewed after:

- A serious incident
- A facility change
- A change in AED or first aid location

- A change in coaching staff
- A change in facility access
- A change in USA Swimming, LSC, state, or local requirements

29. Coach Acknowledgment

All Bakersfield Race Club coaches must acknowledge that they have reviewed this EAP and understand their role in an emergency.

Coach Name: _____

Signature: _____

Date: _____

Appendix A: Bakersfield Race Club Incident Report Form

Purpose: This form documents injuries, medical incidents, behavior concerns, facility issues, parent/spectator concerns, Safe Sport concerns, and other events that require follow-up by Bakersfield Race Club.

Important: For emergencies, call **911** first. This form does not replace required reports to USA Swimming, the U.S. Center for SafeSport, law enforcement, child protective services, the facility, or any other required authority.

1. Report Type

2. Basic Incident Information

Date of incident: _____

Time of incident: _____

Location: _____

Program / group involved:

-

Practice, meet, or activity name: _____

Facility name: _____

Weather / environmental conditions, if relevant:

3. Person Completing This Report

Name: _____

Role:

-

Phone: _____

Email: _____

Date report completed: _____

Time report completed: _____

4. Individual(s) Involved

Individual 1

Name: _____

Role:

-

Age, if minor athlete: _____

Training group / team: _____

Parent / guardian name, if applicable: _____

Parent / guardian phone: _____

Parent / guardian email: _____

Individual 2

Name: _____

Role: _____

Age, if minor athlete: _____

Training group / team: _____

Parent / guardian contact, if applicable: _____

Additional individuals involved

5. Witnesses

List anyone who saw, heard, responded to, or was told about the incident.

Witness Name Role Phone / Email Brief Description of What They Observed

6. Incident Description

Describe what happened in objective, factual language. Include what occurred before, during, and after the incident. Avoid opinions, labels, or conclusions unless clearly marked as observations.

What happened?

Where exactly did it happen?

What was the individual doing immediately before the incident?

Who was supervising at the time?

Was practice, competition, or activity stopped?

-

If yes, explain:

7. Injury / Medical Information

Complete this section for any injury, illness, medical concern, suspected concussion, or physical safety issue.

Was anyone injured or medically affected?

-

Type of injury or medical concern:

-

Describe signs, symptoms, or injury observed:

First aid provided:

-

Who provided care?

Was the athlete removed from activity?

-

Was parent / guardian contacted?

-

Time parent / guardian contacted: _____

Who contacted parent / guardian? _____

Was EMS / 911 called?

-

If yes, time called: _____

Was the individual transported for medical care?

-

Medical facility, if known: _____

Return-to-practice restriction noted?

-

Notes:

8. Safe Sport / Athlete Protection Screening

Complete this section if the incident involves suspected misconduct, boundaries, communication, supervision, bullying, harassment, abuse, retaliation, inappropriate physical contact, locker room concerns, electronic communication concerns, one-on-one interaction concerns, or any violation of athlete protection policies.

Does this incident involve any of the following?

-

Immediate safety steps taken:

Was the alleged conduct reported outside BRC?

-

Reported to:

-

Date / time reported: _____

Reported by: _____

Confirmation or case number, if available: _____

Important handling instruction: Do not conduct an internal investigation into allegations that must be handled by the U.S. Center for SafeSport, USA Swimming, law enforcement, or child protective services. Document what was reported, preserve information, protect athlete safety, and follow reporting obligations.

9. Parent / Guardian / Family Communication

Was a parent / guardian notified?

-

Name of person contacted: _____

Relationship to athlete: _____

Contact method:

-

Date / time contacted: _____

Summary of communication:

Follow-up requested by parent / guardian:

10. Facility / Equipment / Environmental Factors

Complete if the incident involved facility condition, equipment, lane setup, deck condition, weather, air quality, water quality, timing equipment, blocks, lane lines, lighting, access control, or emergency equipment.

Was facility or equipment involved?

-

Issue type:

-

Description of condition:

Was the issue reported to facility staff?

-

Facility staff notified: _____

Date / time notified: _____

Corrective action taken by facility or BRC:

11. Immediate Action Taken by BRC

Check all that apply:

-

Detailed notes on immediate action:

12. Attachments / Evidence

Check all attached or preserved items:

-

Where are attachments stored?

Who has access?

13. Follow-Up Plan

Follow-up required?

-

Person responsible for follow-up: _____

Target follow-up date: _____

Follow-up actions needed:

-

Follow-up notes:

14. Administrative Review

Reviewed by: _____

Role: _____

Date reviewed: _____

Administrative classification:

-

Final resolution / outcome:

Date closed: _____

Closed by: _____

15. Signatures

Person completing report:

Signature: _____ Date: _____

BRC administrator / reviewer:

Signature: _____ Date: _____

Parent / guardian acknowledgement, if appropriate:

Signature: _____ Date: _____

Notes on parent / guardian acknowledgement: Signing acknowledges receipt or discussion of the report. It does not necessarily indicate agreement with all details.

Internal Use Only

Report ID: _____

Confidential storage location: _____

Retention category:

-

Retention notes:

Appendix B: SAP Rehearsal Tracking

Date	Time to Completion	Signature