MEDICAL ASSESSMENT FORM FOR BRITISH ARTIFICIAL SEEDING COMPETITIONS

The Organising Committee for each competition must fill in the assessment form below prior to the commencement of Training at a Competition.

THE COMPLETED FORM MUST BE EMAILED TO THE HNGB or MEMBER GROUP RESPONSIBLE PRIOR TO THE START OF THE EVENT and posted on the official noticeboard or distributed at the team captains meeting.

Event Venue	Llandudno Snowsport Centre Wyddfyd Road Llandudno LL30 2QL	**CoR**	Les Jones 07775 557470 lesojones@gmail.com
Event Dates	17/18 May 2025	**Event Status**	**GBR Outdoor series Race 1&2**
Event Doctor *(if appropriate)*	N/A	NA	
First Aid provided by	Med Event	First aiders on the slope	
Local Surgery or NHS 'walk-in' centre	**Address:** N/A	**Level of Care: 1x Paramedic, 1 1x First Responder**	
Hospitals	**Address:** Llandudno General Hospital Hospital Road, LL30 1LB **Phone:** 01492 860066 **From Venue:** 10 mins - less than 5 miles by ambulance/car **Address:** Ysbyty Clwyd, LL18 5UJ **Phone:** **From Venue:** 30 mins - 17.5 miles	**Level of Care: Full A & E, x-ray facilities**	
Pharmacy	**Address:** ASDA Llandudno Conway Road, Llandudno, LL30 1PJ **Phone:** 01492 864300 **From Venue:** 1 mile	**Level of Care: Self medication** **Opening Hours:** Fri: 7am-11pm Sat: 7am-10pm Sun:10.00am- 4.00pm	
Slope patrol	**In contact by Radio**	**Slope patrol** on-site during racing Yes	
Ambulance	**In contact by phone 999**	**Location:** based Llandudno **From Venue:** 10 mins - 2 miles	
Slope accident Protocol	**First aid are located at: Middle of slope**	1.Incident occurs 2.First aid to casualty on slope	

	Doctor located at: N/A **In contact by: radio or personal contact**	3.Assess injury & first aider indicates walk off or stretcher 4. Treatment provided if appropriate by first aider 5. Pending arrival of ambulance if necessary, Consult with parent / coach and advise. 7. TD completes accident form or notes on report.
Crowd / Public Protocol *Only if different from above*	**First aid are located at:** **Doctor located at:** **In contact by:**	All as above
Back up plan	Race restarts when casualty removed from slope	All Slope staff are first aid trained if required one will take over from the previous one if he is called away – they are all contactable by radio. All coaches are also first aid trained.
Defibrillator Equipment	**Is there a Defibrillator (AED) on site?** **Where is it located?** **Is there a person on site trained to use the equipment?** **If not on site, nearest Defibrillator located at:**	Yes Boot room/ski hire reception Yes

The Medical arrangements fully meet the criteria for BARTS competitions				**Yes/ No If no identify issue below**
Description	**Yes/No**	**Complies fully with Rule 1? Y/N**	**Degree of compliance 1-5 (where 5 = fully in place)**	**If not fully complied, reason**
Medical Cover				Doctor/trauma paramedic not necessary, technical race in controlled environment. 2 Hospitals are 10 minutes away.

Signed:		**Technical Delegate/Chief of Race/Chief of Course** *Delete as appropriate*	**Date:**	

The plan should be should be discussed on setting up contract with venue and prior to publication of acceptance bulletin – the document should be agreed and signed by Chief of Race/Medical Director and Chief of Course plus TD (if applicable).

Please email completed forms to sponsoring member group.