BARTS Medical Support Requirements for Alpine Disciplines

Medical Services required from Event Organisers

The health and safety of all those involved in an alpine ski competition is a primary concern of all Event Organisers. This includes the competitors, officials, volunteers, course workers and spectators.

The specific composition of the medical support system is dependent on several variables:

- The size and level of the event being held
- The venue
- The estimated number of competitors, support staff and spectators
- The scope of responsibility for the Event Medical Organisation (competitors, support staff, spectators) should also be determined.

PLEASE NOTE: For the completion of all tables in this document, an example form is available to consult. This form is available to download from www.gbski.com , as are blank versions of this form.

Personnel/Staff

Specific job descriptions with requirements should be created according to the specific requirements of the event.

The Organising Committee must ensure that emergency medical services are available for each official day of training and competition.	Establishes an evacuation plan for injured athletes, officials and spectators –from the site of injury to initial triage to hospital or trauma centre if indicated
A medical plan conforming to SSGB requirements should be prepared. The detailed form below should be completed to identify the plan.	Secures availability of all necessary facilities, resources and personnel to support the evacuation plan.
A First Aid area close to competition area should be established for initial triage and minor issues for competitors, officials and spectators, with staff trained in emergency techniques.	Creates a back up plan/system that could be operational if one or more major evacuation is utilised
A back up plan must be available to allow for the recommencement of the official training or competition.	Defines specifically the personnel roles and responsibilities and communicates these clearly to all parties involved.
Technical Delegate (TD) **C**onfirms with the Event Organising Committee (OC) that the required rescue facilities are in place before starting official training or competition	Publishes the emergency plan (see below) before the first official training.
First Aid Team *This role could be taken on by external first aiders eg St John or suitable qualified venue staff. The numbers/staffing will be determined by the nature and course of the event, including replacement in the case of an incident so as to not delay the competition.*	Supports the T D with the recording of all incidents that occur during official training and competition with the completion of the FIS Injury Report for each athlete injury
Act as first responders to an injured athlete, officials or spectators	**Information to be published**
Place themselves so that they always have the race course in view and/or be in contact by radio with the on course medical or race director (CoR)	Responsible First Aid group eg St John or Slope staff or .....
Event Medical Director *This role could be taken on by Chief of Champs or Race, local doctor, or person normally in charge of these arrangements (Venue Chief First Aider etc). Much of this section is part of normal planning for events.*	**Evacuation protocols** for each level of injury from course with criteria for external specialist transport/ambulance.
Directs and coordinates all medical services provided at the event. This person may be a member of the Organising Committee and will report to the committee regarding medical issues with the event. This individual should be competent in managing health and safety.	Contact for Event Medical Director
Outlines facilities and resources required for the event	**Details** of local available medical services to include the phone contact and address for location. This information should include:- local medical clinics, physicians, dental offices, pharmacies and hospital.

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	Midlothian Snowsports Centre (Hillend)	**CoR**	Christy Mackinnon
Event Dates	23/24 May	**Event Status**	Confirmed
Event Doctor *(if appropriate)*	Not Applicable	Phone: +44.....	
First Aid provided by name:Andy Mcleod	Hillend	**First aider: Andy Mcleod**	
Local Surgery or NHS 'walk-in' centre ***(if appropriate)***	**Address:** Royal Infirmary of Edinburgh **Phone:** 0131 536 1000 **From Venue:** 15 min / 6.3miles **Directions** : Google Maps - Hillend → Royal Infirmary Edinburgh	**Level of Care: A&E**	
Hospital	**Address:** Royal Infirmary of Edinburgh **Phone:** 0131 536 1000 **From Venue:** 15 min / 6.3miles **Directions** : Google Maps - Hillend → Royal Infirmary Edinburgh	**Level of Care: A&E**	
Pharmacy	**Address:** Boots - 16 Straiton Mains, Straiton, Loanhead EH20 9PW **Phone: 0131 440 1669** **From Venue:** 5min drive / 38min walk / 1.9 miles **Directions:** Google Maps - Hillend → Straiton Retail Park	**Level of Care: Bandages, plasters, painkillers etc.**	

Slope patrol	**In contact by**	**Slope patrol** on-site during racing Yes - onsite, as per first aiders
Ambulance	**In contact by phone 999**	**Location** : Royal Infirmary **From Venue:** 15 mins / 6.3 miles
Slope accident Protocol	**First aid are located at:** Ground floor of cafe building. **Doctor located at:**	**1.** **2.** **3.** **4.** **5** *(Advice based on acuity of injury and consultation with parent/coach.)*

	In contact by:	**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		

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**	
Signed:		**Technical Delegate/Chief of Race/Chief of Course** *Delete as appropriate*		**Date:**06/05/2026	

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.