

"Heads Up" - Concussion in Soccer (U.S. Soccer & C.D.C.)







Signs & Symptoms

Athletes who experience any of the signs and symptoms listed below after a bump, blow, or jolt to the head or body may have a concussion.

Signs observed by Coach	Symptoms reported by Athlete
Appears dazed or stunned	Headache or "pressure" in head
Is confused about assignment or position	Nausea or vomiting
Forgets an instruction	Balance problems or dizziness
Is unsure of score or opponent	Double or blurry vision
Moves clumsily	Sensitivity to light
Answers questions slowly	Sensitivity to noise
Loses consciousness (even briefly)	Feeling sluggish, hazy, foggy, or groggy
Shows mood, behavior, or personality changes	Concentration or memory problems
Can't recall events prior to hit or fall	Confusion
Cant recall events after hit or fall	Does not "feel right" or is "feeling down"

Action Plan

If you suspect that an athlete has a concussion, you should take the following four steps:

- 1. Remove the athlete from play.
- 2. Ensure that the athlete is evaluated by a health care professional experienced in evaluating for concussion. Do not try to judge the seriousness of the injury yourself.
- 3. Inform the athlete's parents or guardians about the possible concussion and refer them to the CDC's fact sheet on concussion.
- 4. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says that they are symptom-free and it's OK to return to play.

It's Better to Miss One Game than the Whole Season!





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Version:

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Risk Management

under

CYSA/Cal-North: Risk Management Program

The purpose of this section is to provide information to assist California Youth Soccer Association affiliates and all participants to address issues relating to risk management. It does not provide professional legal advice and may not be relied upon for that purpose. Consult an attorney for legal advice or information.



PHYSICAL CONTACT

- Physical contact should be limited to that necessary and appropriate to teach a skill, treat an injury, console or congratulate a player. In the instance of teaching a skill, minimal contact should be involved and none which places the adult in a position of power or intimidation.
- A participant (other than a parent or legal guardian) being alone in a one-on-one situation with a player is inappropriate. If an adult is alone with a player then the adult should do so in a visibly public

"Don't leave any player alone, but don't be alone with any player."

- There are those participants who are expressive by using their hands to give a pat on the back, a rub of the head, or other acts of touching to show appreciation or indicate a job well done. In a public setting those acts, when not done in an overly familiar manner, are understood.
- There should never be such touching in a one on one situation. Even the hint of inappropriate contact with a player may be enough to create the impression of inappropriate contact with children. Participants should act in a defensive mode so that there is no air of impropriety.

SAFE PLAY CONCERNS

The perception of injury in youth soccer is limited to the kids playing on the field. But injuries can come from many sources.

* ALL SOCCER GOALS MUST BE ANCHORED *

It is particularly important that goals are not used as climbing structures. Most deaths related to goals are either from climbing or other inappropriate use of the structures. It is suggested that players be advised at an initial team meeting that climbing, chin ups, or other such uses of the goal are not allowed.



Risk Management



Risk Management

HEALTH AND WELL BEING

- The risk of injury in any sport is always present. Parents know this when they sign up their kids to play. However, sometimes parents will blame others for uncontrollable events or for actions perceived to be harmful to their kids.
- A participant who responds to an incident or injury should do so in a knowledgeable manner, or defer any action to a party who has expertise in such matters. The following first aid guidelines should help you with the more common first aid techniques used with soccer related injuries.
- Whether to call for an ambulance is a judgment call that carries with it anxiety if the degree of injury is unclear. If possible defer the question to the child's parent, or a nurse or doctor on the field. Cell phones can be used to contact parents, advice nurses, or ambulances. Follow first aid procedures and make the judgment based on sound criteria. But when in doubt pass the decision to someone with more expertise, such as an ambulance crew.
- Each child is required to provide you with a medical consent form. The consent form is required at every **CYSA** sponsored event.

Common judgment issues and guidelines for these issues are:

- Head injuries resulting in disorientation, vomiting, or the repeating
 of words, must result in a player remaining out of the game and
 medical attention must be sought.
- Injuries that result in a rapid swelling usually indicate some type of injury beyond the sprain/strain stage. Appropriate action should be based on advice from someone with medical credentials.
- Coaches and referees shall treat all blood and bodily fluids as
 potentially infectious. Players who have an open and bloody
 wound cannot play until bleeding has stopped (in the case of a
 nose bleed) or the bleeding has stopped and is fully covered to
 protect against possible contact with another player.
- Coaches should have first aid kits available with them at all times.

FIELD INCIDENTS AND UPKEEP

• Field conditions are another exposure that is controllable. While some leagues play on pristine fields, others are not as fortunate. The legal criteria for liability in field conditions is "known or should have known." Therefore, it is in the interest of both the field owner and the League to inspect the field. Look for depressions, holes, sprinkler heads, and foreign objects on the field. If there are areas that are muddy or have potholes, repairs to make the field appropriate should be performed before any play.



Risk Management

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"Old World Football, New World Soccer"

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DRIVING

- Drivers must have adequate insurance. Only those who meet this requirement are allowed to drive with kids.
- **CYSA** does not provide automobile insurance for personally owned or rented vehicles. No coverage is provided to parents or coaches while going to and from including when transporting youth players to games or practices or other events.

LANGUAGE

- Offensive and vulgar language is always unacceptable. Administrators should model good communications skills.
- Language that is denigrating in nature, content or tone or refers to one's gender, race, national origin, disability, sexual orientation or religion is unacceptable.
- Inappropriate language, including language targeting officials, opponents, players, or spectators may be grounds for player penalties or removal of adults from the game and/or premises.

VIOLATIONS

• Violations of these guidelines by program administrators or players will subject them to disciplinary actions including but not limited to warnings, sanctions, suspensions, or release.

SASC Accident Procedure

Dial: **911**

Sunnyvale local emergency number: #408 736 6244

(A 911 call from a cell phone is not automatically routed to the nearest center but may go through CHP first.)

In event of an emergency:

- Send an adult to the part of the field closest to the road.
- If the parent or guardian is not present, have a calm adult contact the parents.
- Find the medical treatment authorization (player registration) to give to the ambulance personnel.
- After the event, call or email the president or vice president of our club with details and also fill out a CYSA Injury Report - form available on club website
- Bob Carpenter president@sunnyvalesoccerclub.org>
- Sandra Todd <<u>vicepresident@sunnyvalesoccerclub.org</u>>