

Lakewood Soccer Association, Inc. ATHLETE AND FACILITY SAFETY POLICY

Effective Date: August 17, 2017

Lakewood Soccer is compliant with the Code of Safety of the Saskatchewan Soccer Association, Policies and Procedures Manual, Section Thirteen, Risk Management (link follows): <u>https://site2040.goalline.ca/files/section 13 ppm risk management 0217.pdf</u> Please refer to this document for more details on any of the following policies:

1) Field and Facility Safety

Team personnel are responsible for the welfare of their players

Referees assume responsibility for safety of players in games

Prior to any activity on a playing surface, team personnel should:

- Inspect the area for safety
- Remove any hazards
- Ensure playing surface is even

2) Portable Goal Safety

Before use coaches should test the goals for safety

Goalposts of any size must always be anchored securely to the ground- if not properly assembled and secured, portable goalposts may topple over

It is essential that under no circumstances children or adults be allowed to climb, swing on or play with the structures of the goalposts

3) Emergency Action Plan (EAP)

An EAP is a plan that outlines the steps to take in the event of an emergency. Determine who needs to know the plan. Determine what constitutes an emergency. Determine the steps to take in the event of an Emergency. Review the EAP process annually.

A good EAP has appointment of 2 (or 3) individuals to specific roles:

- Charge Person
 - o The most qualified in first-aid and emergency services
 - o Knows what emergency equipment is available at the facility
 - o Secures a controlled and calm environment
 - o Assesses and tends to the injured player
 - Directs others
- Call Person
 - Makes call for emergency assistance
 - o Knows location of emergency telephones in the facility
 - Keeps a list of emergency telephone numbers
 - o Guides the ambulance if required
- Control Person (optional)
 - o Controls crowd and players and keeps them away from the Charge Person and Injured Player
 - \circ $\,$ Ensures proper room to work for the Charge Person and ambulance crew
 - o Discusses EAP with the facilities staff, officials and opponents

EAP Template and EAP Checklist is attached

4) Injury Assessment Protocol

Step 1: Control the environment so that no further harm occurs

Step 2: Do a preliminary assessment of the situation. Is there a need to activate the EAP?

Step 3: Do a second assessment of the situation.

Step 4: Assess the injury. Is there a need to activate the EAP?

Step 5: Control the return to activity

Step 6: Record the injury on an accident report form and inform the parents

Protocol details are attached

5) Concussion Management

All team personnel, athletes and parents are encouraged to take a concussion awareness training course Further details can be found on Sport Medicine and Science Council of Saskatchewan Inc. website: http://www.smscs.ca/concussion/

Or the NCCP website: http://coach.ca/making-head-way-concussion-elearning-series-p153487 Or the Rugby Canada website: http://playsmart.rugbycanada.ca/

Prevention begins through concussion education. Proper technique can help to prevent concussions Recognize Respond (Emergency vs. Non- Emergency Guidelines)

Return

Emergency Guidelines

Any of the following warrants activating the EAP and urgent transportation to the nearest hospital:

- Unconscious
- Deteriorating mental status
- Potential spinal injury
- Progressive, worsening of symptoms or new neurological signs

Non-Emergency Guidelines

- Any athlete who displays signs or symptoms consistent with a concussion must be removed from activity
- Athlete should be monitored and depart only with a responsible individual
- Mini or youth players' parents must be informed that a concussion is suspected

Concussion Management - Return

Step 1: No Activity, Complete Rest

Step 2: Light Aerobic Exercise

- Step 3: Sport Specific Activities
- Step 4: Begin Drills Without Body Contact

Step 5: Begin Drills With Body Contact

Step 6: Game Play

6) Equipment Safety

A player must not use equipment or wear anything that is dangerous to him or herself or another player Basic Compulsory Equipment = SHIN GUARDS

- Must be worn at all times
- Must be made of rubber, plastic or similar material
- Must provide reasonable protection

7) Jewelry Policy

All items of jewelry are strictly forbidden and must be removed.

Using tape to cover jewelry is not acceptable

Medical alert bracelets must be covered

Referees are allowed a watch for timing purposes.

8) Headscarf and Turban Policy

The International Football Board (IFAB) approved the wearing of headscarves

The head covering must be safe and not pose a danger to the wearer or other participants

This is the link to the Canada Soccer Association letter regarding headscarves:

https://www.soccerns.ca/wp-content/uploads/2014/04/CSA-Memo-IFAB-Headscarves.pdf

9) Cast Policy

Hard plaster casts are not permitted as they pose a danger to the wearer and other players Soft, lightweight casts may be permitted if the cast does not present any danger

10) Lightning Policy

Referee has the authority over delaying a match due to weather

30/30 Rule

- When you see lightning count the time until you hear thunder
- 30 seconds or less, seek proper shelter
- Wait 30 minutes or more after hearing the last thunder before leaving the shelter

Know where the closest safe structure or location is to the field *Safe Structures:*

- Any building frequently used by people
- A vehicle with a hard metal roof
- A thick grove of small trees to crouch in

See the Severe Weather policy on the SSA website: <u>http://site2040.goalline.ca/news.php?news_id=1528600</u> Or Lightning Safety from the CSA: <u>https://site2040.goalline.ca/files/lightning_policy_e4.pdf</u>

11) Blood (HIV) Policy

Participant who is bleeding and may expose others, must stop playing until it has stopped

Any clothing with blood on it must be replaced prior to activity being resumed

While cleaning blood the following must be done:

- Wear waterproof gloves
- Wipe up the fluids with paper towels or disposable cloths
- Disinfect the area
- Place all soiled waster in a plastic bag for disposal
- Remove gloves and wash hands with soap and water

If you have questions any of these policies contact the Lakewood President at president@lakewoodsoccer.com

Emergency Action Plan

Telephone Numbers

Emergency
Ambulance
Police
Fire Department
Hospital
Facility

Diagram of Home Facility

Use the space below to draw a detailed diagram of your home facility. Mark on it the location of the telephones, first-aid room, desired routes for attending medical personnel, and anything else that might be helpful.

Emergency Action Plan Checklist	
Access to telephones	 Cell phone, battery well charged Training venues Home venues Away venues List of emergency phone numbers (home competitions) List of emergency numbers (away competitions) Change available to make phone calls from a pay phone
Directions to access the site	 Accurate directions to the site (practice) Accurate directions to the site (home competitions) Accurate directions to the site (away competitions)
Participant information	 Personal profile forms Emergency contacts Medical profiles
Personnel information	The person in charge is identified The call person is identified Assistants (charge and call persons) are identified

• The medical profile of each participant should be up to date and located in the first aid kit.

• A first aid kit must be accessible at all times, and must be checked regularly. See the appencices for suggestions on contents for a first-aid kit.

Steps To Follow When An Injury Occurs

Note: it is suggested that emergency situations be simulated during practice in order to familiarize coaches and athletes with the steps below.

Step 1: Control the environment so that no further harm occurs

- → Stop all participants
- ⇒ If outdoors, shelter the injured participant from the elements and from any traffic

Step 2: Do a first assessment of the situation

If the participant:

- is not breathing
- · does not have a pulse
- is bleeding profusely
- has impaired consciousness
- · has injured the back, neck or head
- has a visible major trauma to a limb
- · Cannot move his/her arms or legs or has lost feeling in them
- If the participant does not show the signs above, proceed to Step 3

Step 3: Do a second assessment of the situation

- Gather the facts by asking the injured participant as well as anyone who witnessed the incident
- Stay with the injured participant and try to calm him/her; your tone of voice and body language are critical

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Step 4: Assess the injury

Have someone with first aid training complete an assessment of the injury and decide how to proceed. If the person trained in first aid is not sure of the severity of the injury or there is no one available who has first aid training, activate EAP. If the assessor is sure the injury is minor, proceed to step 5.

Step 5: Control the return to activity

Allow the participant to return to activity after a minor injury only if there is no:

- Swellling
- Deformity
- Continued bleeding
- · Reduced range of Motion
- · Pain when using the injured part

Step 6: Record the injury on an accident report form and inform the parents