

Coach Safely Act Training



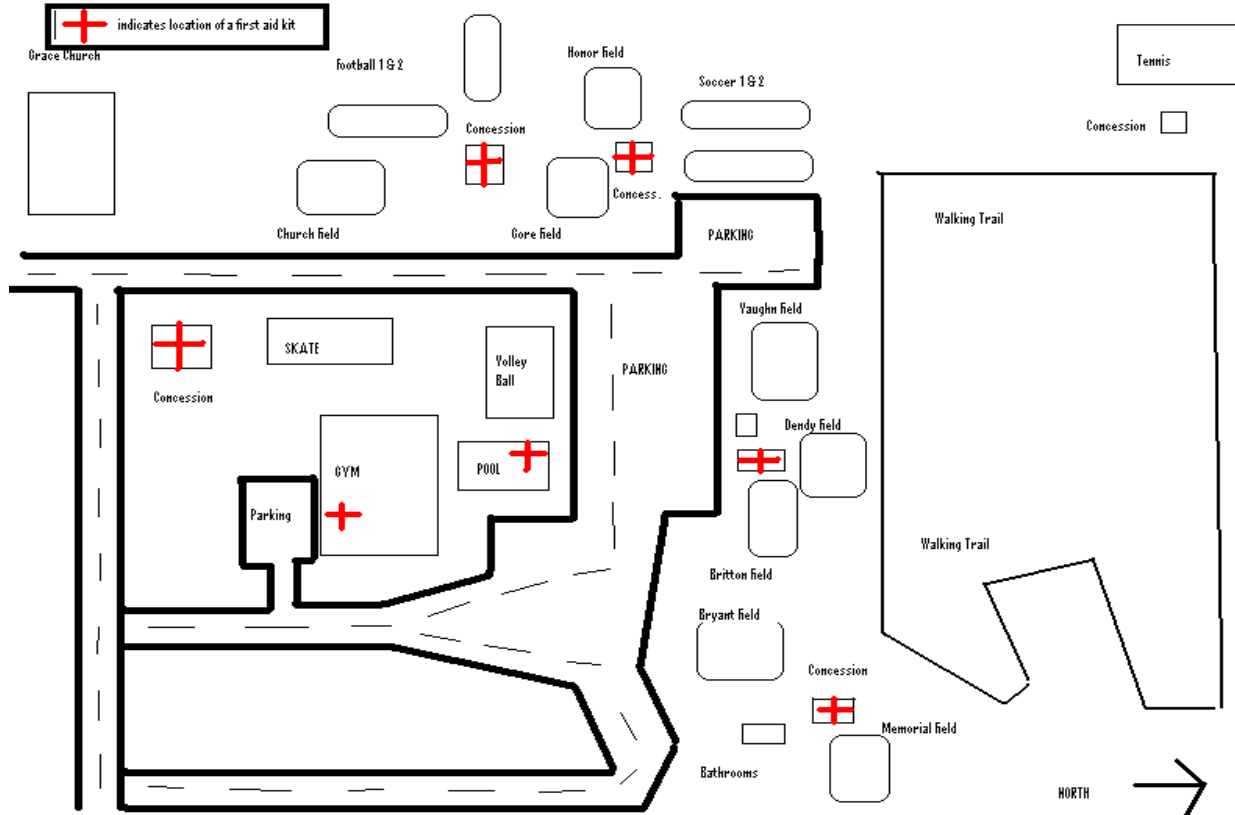
I. Emergency Action Plan

Albertville Parks & Recreation Department

Emergency Plan

Map of Recreation Complex

- Street Address: 915 West McKinney Ave., Albertville, AL 35950
- Phone Number: 256-891-8240
- Fax Number: 256-891-8244
- Web Site: [www.cityofalbertville.com](http://www.cityofalbertville.com)
- Director of Parks & Recreation: Philip Formby – 256-302-3577 (cell#)



Albertville Parks & Recreation Department

Emergency Plan Continued

- I. Players Medical Information
  - a. Rec. Staff has access to all Players Medical info. Listed on Reg. Forms
  - b. Rec. Staff has access to all Players Medical Release Forms Signed by Parents.



- II. In Case of Injury to a Player
  - a. Head Coach Controls First Aid
    - i. Head Coach Stays w/ Player at all times
    - ii. Check Airway, Breathing & Circulation
    - iii. Send Someone to Contact Parents
    - iv. Send Someone to Contact EMS ( If Necessary)
    - v. Send Someone to Call Rec. Staff (256-891-8240) & Advise them to call for a Rec. Supervisor
  - b. Opposing Team Coaches Assist with:
    - i. Contacting Parents
    - ii. Contacting EMS ( If Necessary)
    - iii. Contacting Rec. Staff (256-891-8240)
    - iv. Contacting a Trainer / Physician (If on Hand)
    - v. Find a Cell Phone Nearby
    - vi. Control Crowd Around Injured Player
  - c. Rec. Supervisor Should:
    - i. Assist with First Aid
    - ii. Contact Parents
    - iii. Contact EMS ( If Necessary)
    - iv. Open Gates for EMS
    - v. Meet with EMS & Direct them to Injured Player
    - vi. Find Medical Release Form in Absence of Parents



- III. Weather Emergency
  - a. Rec. Staff will be Weather Watcher
    - i. T.V. Weather Radar
    - ii. Internet Weather Radar
    - iii. NOAA Weather Radio
  - b. Rec. Staff will Notify Spectators / Players / Coaches of any Weather Emergency
  - c. Safe Place for Weather Emergency is in the Gym
    - i. Max. Capacity is 620
  - d. Rec. Staff will Give the "All Clear" when Severe Weather has Passed
  - e. Rec. Staff will Evaluate Playing Conditions after the "All Clear"
  - f. Rec. Staff will Give the O.K. to Return to Play or Make Cancellations As Necessary



- II. **Concussion:** An injury to the brain that interferes with normal function of the brain.
  - a. **Causes**
    - i. A bump, blow or jolt to the head or body.
    - ii. Any force transmitted to the head causes the brain to bounce around or twist inside the skull.

- iii. A player **does not** have to lose consciousness or be knocked out to have a concussion.
- iv. Less than 10% of concussions involve a loss of consciousness!

b. **Concerns**

- i. A child's brain is vulnerable to sustaining a concussion and takes longer to heal.
- ii. Most recreation departments do not have access to an onsite team doctor or trainer, so the coach must be responsible for the health and safety of his or her team.
- iii. In the past, people used the analogy that a concussion is a "bruise to the brain".  
**NOT TRUE!**
- iv. A concussion is a disruption of how the brain works... It's a problem with function, not structure. That is why most concussions do not show up on a CAT scan or MRI.
- v. When a concussion occurs, the brain sustains stretching and tearing of the brain cells, damaging the cells and creating chemical changes in the brain. After this, the brain is vulnerable to further injury and stress until it fully recovers. (about 2 weeks or more)
- vi. A player who returns to activity before they fully heal from a concussion is at risk for a repeat concussion.
- vii. A repeat concussion can slow recovery, increase chances for long term problems, bleeding in the brain and even death!



c. **Recognizing Signs & Symptoms**

- i. Signs are what can be seen by coaches, parents and teammates.
- ii. Symptoms are what the injured player feels and should report.

d. **Signs**

- i. Player appears dazed or stunned.
- ii. Confused about assignments or forgets play.
- iii. Is unsure of game, score or opponent.
- iv. Moves clumsily.
- v. Answers questions slowly.
- vi. Loses consciousness. (This is rare)
- vii. Behavior or personality changes.

- viii. Memory problems.
- e. **Symptoms**
  - i. Headache
  - ii. Nausea
  - iii. Balance problems or dizziness.
  - iv. Double or fuzzy vision.
  - v. Sensitivity to light or noise.
  - vi. Feeling sluggish, foggy or groggy.
  - vii. Concentration or memory problems.
  - viii. Confusion
- f. **Actions to take if the player has any of the previous signs or symptoms**
  - i. Remove them from the game or practice immediately!
  - ii. When In Doubt...Sit Them Out!
  - iii. Notify their parents.
  - iv. Advise them to seek medical care that day.
- g. **Call 911 (EMS) if player exhibits these symptoms**
  - i. Loss of consciousness.
  - ii. Decreased level of consciousness.
  - iii. Unusual drowsiness or inability to be awakened.
  - iv. Difficulty getting attention.
  - v. Breathing irregularity.
  - vi. Severe or worsening headache.
  - vii. Persistent vomiting.
  - viii. Seizures
- h. **Steps to follow for suspected concussions**
  - i. Remove from play.
  - ii. Ensure they receive medical care.
  - iii. Inform the parents.
  - iv. Keep the player out of play until they are symptom free and have a written statement of approved play from a doctor.
- i. **General information about concussions**
  - i. Most players recover in about 1 or 2 weeks.
  - ii. Prolonged symptoms include: Headaches, difficulty concentrating, poor memory and sleep problems.
  - iii. Up to 40% of players who died or have serious long term problems were still having symptoms from a concussion at the time of their repeat injury.
  - iv. Many of these deaths or injuries may have been prevented if the athlete would have been given sufficient time to recover, followed return to play protocols or was educated on the dangers of playing with concussion symptoms.
- j. **Recovery**
  - i. Rest from physical activities.
  - ii. Rest from mental activities that require concentration.
  - iii. A player may return to activity when they: **(All 3 elements are required)**
    - 1. Return to school full time.
    - 2. No longer have symptoms.
    - 3. Receive written clearance from a doctor.
- k. **Gradual return to activity**

- i. 5 – 10 minutes of light exercise.
- ii. Running with no equipment.
- iii. No contact drills. (Full motion)
- iv. Full participation.
- v. This takes about 1 week.
- vi. Progress 1 step each day.
- vii. Discontinue steps and re-evaluate with a doctor if symptoms return.

**I. Prevention**

- i. There is no proven protection from concussions!
- ii. We can reduce the risk!
- iii. Everyone can educate others!
- iv. **WHEN IN DOUBT...SIT THEM OUT!**

**m. Albertville Parks & Rec. Department Concussion Policy**

- i. Any athlete who exhibits signs, symptoms or behaviors consistent with a concussion shall be removed from the contest and shall not return to play until a medical release is issued by a medical doctor.



**III. Heat Illness (Heat Exhaustion / Heat Stroke)**

**a. Signs & Symptoms**

- i. Confusion
- ii. Hot, flushed, dry skin.
- iii. Deep rapid breathing.
- iv. Seizures



b. **Treatment**

- i. Call 911 (EMS)
- ii. Make sure victim is breathing.
- iii. Move victim to cooler area immediately.
- iv. The cooler the better. Shade or indoors to AC.
- v. Remove clothing to encourage heat loss.
- vi. Put ice on victim's armpits, groin, neck & wrists.
- vii. Cover victim with a towel soaked with water.

IV. **Physical Conditioning**



a. **Warm Up**

- i. Avoid static stretching. (Stretching that is held for 10 or more seconds)
- ii. Instead, incorporate dynamic stretching & plyometric activity.
- iii. Dynamic stretches facilitate movements similar to those during play & target muscle groups as they relate to specific sports movements.
- iv. Plyometrics is a system of exercise in which muscle groups are rapidly & repeatedly stretched & contracted for optimal function.
- v. Examples of dynamic & plyometric exercises:
  1. Warm up:  $\frac{1}{2}$  speed jog,  $\frac{3}{4}$  speed jog, backwards jog & karaoke.

2. Mild jog with high knees, skipping, butt kicks & reaching to toes.
3. Lunges with twist & walking quad stretch.
4. Crawling calf stretch.
5. Simulating  $\frac{3}{4}$  speed sport – specific activities (plyometrics), such as bounding, hopping & diagonal cutting.
6. Constantly adapt & research dynamic warm – up routines that will be most effective for their sport.



b. **Cool Down**

- i. Take an extra 15 minutes after play for static stretching.
- ii. This helps the recovery process, lengthens muscles & improves muscular range of motion.
- iii. Dynamic stretching helps prior to play & static stretching is best for cool down.

c. **Benefits of Physical Conditioning**

- i. Encourage athletes to hydrate (with water & sports drinks) before, during & after play. This helps the body recover & recharge as well as avoiding potential heat illness.
- ii. Effectively warming up & cooling down helps prevent injury & improves performance during play.



V. **Sudden Cardiac Arrest: (The # 1 Cause of Death in Student Athletes)**

a. **2 Causes**

- i. Electrical Problem
- ii. Structural Problem



b. **Warning Signs**

- i. Fainting / Seizures during exercise.
- ii. Shortness of breath.
- iii. Racing heart.
- iv. Dizziness
- v. Chest pains.
- vi. Extreme fatigue.



c. **What happens if a player collapses?**

- i. Call 911 (EMS)
- ii. Send for an AED
- iii. Start chest compressions (CPR)



VI. **Interaction with Officials**

a. **Coaches Responsibilities**

- i. Teach skills & fundamentals to players.
- ii. Teach players the rules of the game.
- iii. Learn the rules of the game for themselves.
- iv. Teach players about sportsmanship.
- v. Organize practices & games.

- vi. Communicate with players & parents.
  - vii. Discipline players.
  - viii. Keep players safe.
  - ix. Ensure players have fun.
  - x. Lead by example.
  - xi. Be a positive role model.
- b. **Officials Responsibilities**
- i. Study & know the rules of the game.
  - ii. Study & know the mechanics of the game.
  - iii. Be fair & unbiased.
  - iv. Work with fellow officials in a spirit of harmony.
  - v. Uphold the honor & dignity of the avocation.
  - vi. Be prepared both physically & mentally.



- c. **General Information**
- i. Berating of officials is **NEVER** acceptable!
  - ii. Officials should never be blamed for a teams loss!
  - iii. Officials assigned to youth sports will usually be young & or inexperienced...  
**(THEY WILL MAKE MISTAKES!)**
  - iv. Mistakes by officials should never be misinterpreted as bias.
  - v. The head coach may ask permission to talk with an official. This should be done calmly & during a dead ball situation or time out.
  - vi. The official may decline your request for discussion.



VII. **Positive Coaching Traits:** We believe all youth sport coaches should have 2 primary goals, winning & to help the players develop positive character traits to be successful in life. Winning is important, but the second goal; helping players learn “life lessons”, is more important. A positive coach puts players first.

a. **Redefine Winning**

- i. Focus on mastering individual skills instead of the score.
- ii. Focus on players effort instead of the outcome.
- iii. Focus on individual learning & not comparison to others.
- iv. Don't fear mistakes...Mistakes = Learning!



b. **Fill Players Emotional Tanks**

- i. Don't motivate by fear, intimidation or shame.
- ii. Instead, motivate with compliments, praise & positive recognition.
- iii. Correct mistakes calmly with direct eye contact.
- iv. Praise success excitedly for all to hear.

c. **Respect The Game**

- i. Respect the rules of the game.
- ii. Respect your opponents.
- iii. Respect the officials.
- iv. Respect your teammates.
- v. Respect yourself.
- vi. A positive coach should follow the above rules & in turn, will lead their players by example.