



INDIANA SOCCER

RISK MANAGEMENT POLICY

SEPTEMBER 4, 2020

TABLE OF CONTENTS

RISK MANAGEMENT OVERVIEW	2
INDIANA SOCCER RISK MANAGEMENT PLAN FOR MEMBER ORGANIZATION .	3
PROCEDURES FOR BACKGROUND CHECKS	5
HEARINGS, GRIEVANCES, DISPUTES, AND APPEALS	6
ZERO TOLERANCE AND REPORTING ABUSE.....	9
FINANCIAL POLICIES.....	12
PREVENTION – CHILD ABUSE.....	12
SAFETY – FACILITIES.....	15
SAFETY – HAZARDOUS WEATHER.....	19
SAFETY – FIRST AID GUIDELINES.....	22
TOURNAMENT AND TRAVEL.....	28
INSURANCE.....	28
APPENDICES.....	29

1.0 RISK MANAGEMENT OVERVIEW

1.1 What is Risk Management?

Risk Management is a method for identifying risks in all areas and developing and implementing a plan to protect an organization and prevent loss. An effective Risk Management program consists of these four basic steps:

- 1.1.1 Assess, identify, analyze, and prioritize potential risks.
- 1.1.2 Select methods to prevent loss.
- 1.1.3 Implement the best methods.
- 1.1.4 Monitor the results and revise as necessary.

1.2 Authority:

Section 102 of US Youth Soccer Risk Management Policy requires US Youth Soccer, Indiana Soccer, and all its other state associations to establish and monitor a Risk Management Program within its jurisdiction. That program must include, at a minimum:

- 1.2.1 The use of employment/disclosure statements for all volunteers and employees defined as any person (to include, but not limited to, coach, team manager, board member, program administrator, referee, athletic trainer, organization employee, tournament organizer) age 18 and older acting within an official capacity and who may have the opportunity to have direct and unmonitored access to children who are involved with any approved or sponsored program of US Youth Soccer or the Organization Member or member of the Organization Member.
- 1.2.2 All Organization Members are to offer and provide sexual abuse awareness and prevention training and are to require every adult to report abuse and or suspected abuse within a 24-hour period.
 - 1) The required training is to be completed the earlier of
 - a) before regular contact with a youth participant who is a minor begins; or
 - b) within the first 45 days of the participating adult taking on the role giving them access to youth participants.
 - 2) A refresher course is required on an annual basis effective the calendar year following the completion of the initial training.
- 1.2.3 Subject to parent consent, youth participants are to be provided training annually regarding the prevention of child abuse. The following items must be tracked:
 - 1) a description of the training
 - 2) the date the training(s) was offered and given
 - 3) a description of how the training(s) was offered and given
- 1.2.4 Identification of a Risk Management Coordinator and an alternate for the organization.

1.3 Indiana Soccer Risk Management Policy Statement:

Indiana Soccer is committed to protecting its human, financial, and goodwill assets and resources through the practice of effective Risk Management. The Indiana Soccer Board of Directors and staff are dedicated to safeguarding the safety and dignity of its paid and volunteer staff, its clients, and anyone who has contact with the organization.

To this end, the board will ensure that Indiana Soccer has a Risk Management Plan for the organization that is reviewed and updated as needed. This policy is effective immediately

1.4 Purpose of Indiana Soccer Risk Management Plan:

The purpose of the Indiana Soccer Risk Management Plan is to communicate methods of minimizing risk to players, volunteers, paid personnel, spectators, clubs and leagues. This Plan does not provide professional legal or tax advice and may not be relied upon for that purpose. Consult an attorney for legal advice or a tax professional for said information.

While this program may require time and effort, there is no higher priority than the protection of all participants (including, but not limited to players, team staff, club staff, spectators, volunteers, referees and Indiana Soccer staff) within our organization.

2.0 INDIANA SOCCER RISK MANAGEMENT PLAN FOR MEMBER ORGANIZATIONS

2.1 Background Check Policy:

This policy on background checks is for the protection of the member organizations as well as the players, coaches, parents, trainers, and all other persons participating in Indiana Soccer sanctioned activities. This policy is subordinate to and in accordance to Indiana State law.

2.1.1 Each Affiliate member of Indiana Soccer, as a requirement of membership, shall appoint a Risk Management Director and adopt a comprehensive Risk Management Plan for the Affiliated Club or League.

2.1.2 All adults (anyone over the age of 18) who participate in any capacity in Indiana Soccer activities shall be required to have a background check managed by the Risk Management Director of Indiana Soccer on behalf of the member organizations. Background checks shall be completed on all adults who either currently participate or have applied to participate in any capacity in Indiana Soccer sanctioned activities.

2.1.3 Background checks shall be performed and approved prior to participation in any Indiana Soccer sanctioned activity, and every two years thereafter. The same background check procedure is required throughout the year as new staff or volunteers are identified.

2.1.4 No member organization may be able to register players or participate in Indiana Soccer sanctioned activities until said organization has complied with this background check policy.

NOTE - Participation by any individual in Indiana Soccer sanctioned activities involving children is prohibited until a background check has been performed and approved.

2.2 State Level

2.2.1 Indiana Soccer's Executive Director will assign a Risk Management Administrator (RMA). The RMA shall serve as the designated representative of Indiana Soccer for the purposes of confidentially managing background checks, receipt, protection, storage, and disposal of all background check information collected pursuant to this policy.

2.2.2 Responsibilities of Indiana Soccer's RMA:

- a. Oversee the administration of the background checks
- b. Develop and maintain policy and procedures on Risk Management for Indiana Soccer.
- c. Ensure all Affiliate member organizations appoint a Risk Management Director (RMD).
- d. Ensure the RMD for all Affiliate member organizations completes background checks for all individuals in his/her club or league required by these rules.
- e. Ensure the RMD for all Affiliate member organizations notifies Indiana Soccer's RMA of all names submitted for background checks.
- f. Research materials relevant to Risk Management for Affiliate member organizations.
- g. Distribute at minimum, on an annual basis, appropriate educational material regarding the Indiana Soccer Risk Management Policy.
- h. Provide appropriate Risk Management Workshop(s) at the Indiana Soccer Annual General Meeting upon request.

2.2.3 Responsibilities of each Indiana Soccer Department Head:

- a. Ensure Disclosure Forms are completed by all Indiana Soccer full-time and parttime Staff for electronic submission to the designated background check system.
- b. Distribute on a periodic basis appropriate educational material regarding the INDIANA SOCCER Risk Management Policy.

2.2.4 Responsibilities of INDIANA SOCCER Executive Director or Designee:

- a. Cause a background check to be performed on all persons applying to serve as Risk Management Director every two (2) years.
- b. Cause a background check to be performed on all Indiana Soccer office staff, Indiana Soccer Board of Directors, and Indiana Soccer Committee Chairpersons every two (2) years.
- c. Ensure all background check reports are received from all Affiliate member organizations.

2.3 Member Organization Level:

2.3.1 Risk Management Director Approval Procedure:

- a. Each member Organization shall designate a Risk Management Director (RMD)
- b. Indiana Soccer will a perform background check on said RMD through an approved electronic system.
- c. If the background check does not disclose any disqualifying information, the RMD is considered approved.

- d. If the background check discloses disqualifying information, the Indiana Soccer Executive Director or RMA shall notify the President of the member organization in writing immediately.
- e. Upon receipt of said notice of acceptance, the RMD shall be the designated person in charge of Risk Management issues for the Organization.

2.3.2 Responsibilities of Member Organization Risk Management Director:

- a. The RMD shall insure that his/her organization adopt and sign the Indiana Soccer Zero Tolerance Policy Against Abuse. This document should be publicized to all organization members.
- b. The RMD shall insure that each person in his/her organization required by these rules, complete a Disclosure Form in the approved electronic system
- c. The same procedure will be used throughout the year as new staff or volunteers are identified. Participation in Indiana Soccer sanctioned activities involving children is prohibited until a background check has been performed and approved.
- d. Refer for investigation all complaints or suspicions of abuse according to the Safe Sports Act Law. Also report to the Organization President and to the Indiana Soccer RMA
- e. Develop and maintain policy relevant to Risk Management for his/her organization.
- f. Monitor Risk Management for his/her organization in areas other than background checks, including, but not limited to:
 - 1. Prevention – Child Abuse
 - 2. Prevention – Financial Guidelines.
 - 3. Safety – Facilities (including goals, parking lots, etc.)
 - 4. Safety – Severe Weather
 - 5. Safety – First Aid Guidelines
 - 6. Guidelines – Tournament and Travel
- g. Aggressively defend and protect any whistleblower that provides any questionable and potentially disqualifying information about an individual serving in any capacity of a member organization.

3.0 PROCEDURES FOR BACKGROUND CHECKS

3.1 Member Organization Procedure:

3.1.1 The RMD shall insure that each person in his/her organization required by these rules, complete a Disclosure Form in the approved electronic system. This includes, but is not limited to:

- a. Director of Coaching and any paid staff.
- b. All coaches, assistant coaches and trainers.
- c. All team managers.
- d. Members of Board of Directors.
- e. Any other individual having on-going contact with children or club finances/property.

3.1.2 Ensure that all appropriate individuals complete a background check form with the following **mandatory** fields:

- a. Legal First Name
- b. Legal Last Name
- c. Date of Birth

- d. Current Street Address
- e. City
- f. State
- g. Zip

The above information may require that it be verified by examining a governmental issued picture identification (or any other document necessary) with such information on it.

4.0 HEARINGS, GRIEVANCES, DISPUTES, AND APPEALS

It is imperative for the proper administration of the Constitution, Bylaws and Rules of Indiana Soccer that certain procedural safeguards be used by Indiana Soccer and its members. The following Rules shall be used by Indiana Soccer, Affiliate Members for any hearings, grievances, disputes and appeals.

4.1 Hearing Procedures:

In all hearings, grievances, disputes, the parties shall be accorded the following:

- 4.1.1 Written notice of the specific charges or alleged violations with the possible consequences if the charges are found to be true:
 - a. Reasonable time between receipt of the notice of charges and the scheduled hearing within which to
 - b. prepare a defense. The minimum time allowed shall be not less than fourteen (14) days after receipt. The hearing may not be held more than thirty (30) business days after notice unless additional time is requested by the person charged.
 - c. A hearing before a disinterested and impartial individual or body of fact finder(s).
 - d. The Rules of Evidence shall not apply.
 - e. The burden of proof is by a preponderance of evidence.
- 4.1.2 The right to have the hearing conducted at a time and place to make it practical for the person charged to attend.
- 4.1.3 The right to be assisted in the presentation of one's case at the hearing. This does not grant the right to an attorney.
- 4.1.4 The right to call witnesses and present oral and written evidence and argument.
- 4.1.5 The right to confront witnesses, including the right to be provided the identity of witnesses in advance of the hearing unless the witness is protected under the Federal Whistleblower Protection Act of 1989.
- 4.1.6 The right to have a record made of the hearing if desired.
- 4.1.7 A written decision, with reasons for the decision, based solely on the evidence, issued in a timely fashion.

- 4.1.8 Notice of any substantive and material action of the hearing panel in the course of the proceedings.
- 4.1.9 No ex parte communication is permitted between a party and any person involved in making its decision or procedural determination except to provide explanations involving procedures to be followed.
- 4.1.10 Notice of the appeal rights granting a reasonable time to appeal the decision. The time for perfecting an appeal shall be not less than fourteen (14) days from the date of mailing the notice. Notice of appeal must be in writing and shall set forth the basis of the appeal. A reasonable bond may be required to perfect the appeal. The bond shall not be more than five hundred dollars (\$500).
- 4.1.11 Any party may appeal the decision of the fact finder. The appeal may be of the determination or of the penalty.
- 4.1.12 Appeals shall not be de novo but shall be determined by the abuse of discretion standard.
- 4.1.13 Appeals from the Affiliate Member shall be directed to the Indiana Soccer Executive Director or his/her designee.
- 4.1.14 Appeals of the Indiana Soccer Executive Director or his designee shall be directed to the Indiana Soccer Board of Director's Executive Committee.
- 4.1.15 Unless otherwise provided, Hearings and Disciplinary Matters involving the violation of Indiana Soccer's or US Youth Soccer's Rules shall be before the Indiana Soccer's Executive Director or his/her designee

4.2 Mediation or Waiver of Hearing or Appeals:

Any hearing, grievance, dispute or appeal may be handled by mediation. The Mediation shall follow the Alternative Dispute Resolution Rules approved by the Indiana Supreme Court. A party may also waive any hearing or appeal affirmatively or by not requesting a hearing or appeal if a deadline is set forth in the notice to request a hearing or appeal.

4.3 Denial, Suspension, and Revocation of Privileges:

4.3.1 Subject to an appeal to Indiana Soccer's Executive Director or Executive Committee of the Board, the RMA has the authority to summarily deny or summarily suspend any applicant's privileges if it determines that the person is disqualified as a result of information gathered from a background check. The affected person has the right to appeal said action pursuant to the appeal and disciplinary procedures of Indiana Soccer. Said action shall remain in effect until otherwise rescinded through the appeal procedures.

4.3.2 A member organization may summarily suspend or deny a person if it determines that said person is disqualified pursuant to these rules by:

- a. Said suspension or denial shall be delivered to said person in writing within five (5) business days of said decision.
- b. Said notice shall be delivered in a manner that requires a signature by only the person to whom it is sent or sent via personal email.
- c. Said method shall have plainly visible on the outside of said envelope a designation that says "Personal and Confidential" or words of similar import. If email is used, it is to be designated "Personal and Confidential."
- d. The notice shall also be sent to the pertinent Organization at the same time in an envelope or method designated by the RMA which may be changed from time to time. If email is used, it is to be designated "Confidential."

4.3.3 If the background check determines that the person who completed the Disclosure Form is not the person convicted, then the RMA or the Executive Director on his/her behalf shall notify the RMD and the person reviewed. If the background check indicates further information is necessary, then the person shall be required to provide their finger prints and/or a current photograph for further examination if requested. Any person who refuses to provide their finger prints and/or a photograph when requested under these rules shall be suspended from all Indiana Soccer activities.

4.3.4 Upon the receipt of the disclosure forms, the RMA shall cause to be performed a criminal history as such is allowed by law. The RMA, or in his/her absence the Indiana Soccer Executive Director or Designee shall immediately notify the Club RMD of any background check(s) that disclose any disqualifying information and shall suspend the disqualified person immediately.

4.4 Disqualifying Offenses

4.4.1 Any person who has been convicted of an offense or had a true finding of an offense, such that the person would be required to register in Indiana pursuant to I.C. 11.8.8 (Sex Offender Registration) is disqualified from participating in any Indiana Soccer activities. This disqualification applies even if the person would no longer be required to register due to the passage of time from the offense.

4.4.2 Any person who has been convicted or is charged with any of the following:

- a. dealing in or possession of a drug or substance which would be a crime under I.C. 35-48 et seq except for I.C. 35-48-4-11 (1) as a misdemeanor;
- b. stalking
- c. invasion of privacy
- d. public indecency
- e. indecent exposure
- f. forgery
- g. fraud
- h. theft as a felony
- i. battery
- j. a crime against a person; or
- k. any offense of substantially the same elements, within the last ten (10) years.

If the conviction is more than ten (10) years before the application, the person may be suspended depending upon the circumstances. If the person was suspended due to pending charges, the status of such person shall be reviewed by the RMA the completion of the litigation if so requested by said person.

- 4.4.3 Any person who has been charged with an offense, or convicted of an offense, or had a true finding of an offense such that the person would be required to register in Indiana pursuant to I.C. 11.8.8 (Sex Offender Registration) is disqualified from participating or attending any Indiana Soccer sanctioned activities. If the charges or allegations are terminated without a conviction, the person may petition the RMA for reinstatement.
- 4.4.4 Any person who has intentionally falsified material information on the Disclosure Form is disqualified from participating in any Indiana Soccer sanctioned activities.
- 4.4.5 Any person who has refused to fully complete the Disclosure Form or to submit fingerprints and/or submitting a photo when required is disqualified from participating in any Indiana Soccer sanctioned activities until said person has fully complied and passed the background check.
- 4.4.6 Any person who becomes or has been involved as a defendant in litigation regarding the welfare of any minor, may be suspended from participating in any Indiana Soccer sanctioned activities. Upon written request of the person suspended due to an existing litigation, the status of such person shall be reviewed by the RMA at the completion of the litigation if so requested by said person.
- 4.4.7 Indiana Soccer considers spectators as participants in any sanctioned event. Any spectator who has been charged with an offense, or convicted of an offense, or had a true finding of an offense such that the person would be required to register in Indiana pursuant to I.C. 11.8.8 (Sex Offender Registration) is disqualified from participating in or attending any Indiana Soccer sanctioned activities. If the charges or allegations are terminated without a conviction, the spectator may apply to the RMA for reinstatement within the organization.

5.0 ZERO TOLERANCE AND REPORTING ABUSE

5.1 Zero Tolerance Policy Against Abuse:

Each Club RMD shall insure that his/her organization adopt, and sign the INDIANA SOCCER

Zero Tolerance Policy Against Abuse. The president of the organization's signature on the Zero Tolerance Policy Against Abuse is required. copy of this signed document must be sent to INDIANA SOCCER annually. This document should be publicized to all organization members. Form found in Appendices.

5.2 Procedures for Reporting Abuse or Suspected Abuse

One of the most important aspects of creating an awareness program with regard to abuse is to establish set procedures and specific contact person(s) for reporting incidents of abuse or alleged abuse.

Communicate these procedures to all participants in your organization so that they know who to turn to and how to report cases of abuse or alleged abuse. In particular, learning about these procedures should be part of each staff or volunteer's initial training or continuing education-type training.

Safe Sport provides for a clear method of reporting abuse. These guidelines should be followed by all organizational members and their constituents. Most of these guidelines reference children as victims. However, persons of any age can be victims of abuse. These guidelines are equally applicable to adults as well as children. The following is provided to supplement – not replace, the reporting requirements provided by federal Safe Sports Act of 2017.

5.2.1 Taking the Initial Report:

- a. **Assure privacy but not confidentiality.** A child may say to you that they have something to tell you but only if you promise not to tell anyone else. If you are a legally mandated reporter, you cannot make such a promise. You may tell the child, "Everything we talk about will be private. But if I think you are going to hurt yourself or someone else, or if someone is hurting you, then I may have to share our conversation with someone else who can help you."
- b. **Be calm.** If your response to hearing about an abusive situation reflects shock, it will adversely affect the abused child. It is appropriate to share your feelings of concern with the individual. But getting upset about the situation may result in the child's feeling worse about it or worse about his/her role in it.
- c. **Believe the child.** Do not ask "why" questions, as they may be accusatory. Many children think that adults will not believe them, especially if their abuser has reinforced such thinking by saying, "No one will believe you because you're just a kid." Therefore, it is important not to discount anything a child tells you that involves an abusive situation.
- d. **Get the facts, but don't interrogate.** In making a report, it is necessary to have certain factual information. However, as mentioned, you do not have to interview the child to determine whether the abuse occurred or didn't occur. Leave that to the experts. Your responsibility is to present the child's story to the authorities.
- e. **Reassure the child.** It may have taken quite a bit of courage for the child to finally tell his or her story. Assure the child that what happened was not his or her fault. Use such statements as "I believe you," or "This happens to other kids, too," or "It's not your fault this happened." Tell the child that he or she was very brave and mature to tell you about the situation.

5.2.2 Reporting the Information to Authorities:

February 14, 2018, the Protecting Young Victims from Sexual Abuse and SafeSport Authorization Act of 2017 was signed into federal law. Among other things, this

comprehensive law amends the Victims of Child Abuse Act of 1990 and clarifies who is a mandatory reporter for cases of suspected child abuse. Specifically, the definition of mandatory reporter now include any “adult who is authorized, by national governing body, a member of a national governing body, or an amateur sports organization that participates in interstate or international amateur athletic competition, to interact with a minor or amateur athlete at an amateur sports organization facility or at any event sanctioned by a national governing body, a member of a national governing body, or such an amateur sports organization.” Under the SafeSports Act, the reporting obligation is triggered when a mandatory reporter becomes aware of “facts that give reason to suspect” a child has suffered an incident of child abuse. The SafeSport Act also includes qualified immunity for good faith reports. Failure to promptly report suspected child abuse to law enforcement authorities may constitute a violation of federal law. By federal law, reporters are to use the following steps to report suspected child abuse:

- a. Report to your local authorities (police)
- b. Report to your Club RMD.
- c. If the suspected child abuse is sexual misconduct, you must report to the US Center for SafeSports at <https://uscenterforsafesport.org/report-a-concern/>

5.2.3 General Reporting Procedures within Your Organization

- a. State that staff members, volunteers, parents and program participants have a duty to report any incidents of abuse or suspected abuse.
- b. Communicate the names of appointed persons within the organization to whom any incidents of abuse or suspected abuse should be reported. However, let every participant, particularly the youth participants, know that any abusive or suspected abusive situation may be reported to any person with whom they feel comfortable. That person will then have the duty to notify the appropriate person within the organization and report the situation to the proper authorities.
- c. Express the organization’s commitment to zero tolerance of child abuse.
- d. Strongly communicate to all members of your organization the consequences of abuse. Every person should know that in the event of a complaint of abuse against them, they may be temporarily suspended from their duties while an investigation takes place. Once they are cleared of any charges, they may apply for reinstatement within the organization. However, there is no guarantee that they will be reinstated to their former position. Apply these procedures uniformly for all abusers and alleged abusers, regardless of position within the organization.
- e. Give clear authority to a specific individual (or committee) for monitoring the conduct of all adults in your organization , to ensure that your organization’s goals are being met.
- f. Make a clear commitment to educating staff, volunteers, parents and children about abuse.

6.0 FINANCIAL POLICIES (removed and published in a separate document which can be found on the Indiana Soccer website www.soccerindiana.org)

7.0 PREVENTION - CHILD ABUSE

7.1 Types of Child Abuse:

The four types are physical abuse, emotional abuse, sexual abuse, and neglect.

7.1.1 Physical abuse is any non-accidental injury to a child. It is often caused by an action or omission of a caregiver. Injuries include bruises, welts, cuts, fractures, burns or internal injuries. Physical abuse can be one or two isolated incidents or it can occur over a prolonged period of time.

7.1.2 Emotional abuse includes all acts that result in the child's sense of "self" being seriously impaired. This type of behavior can include demeaning remarks, rejecting the child, ignoring or isolating the child, name calling, or telling the child that he is not a good person or athlete.

7.1.3 Sexual abuse is any sexual activity between a child and an adult, or between children when an unequal distribution of power exists (such as when one is significantly older or physically larger than the other). Sexual abuse does not need to involve "touch"

7.1.4 Neglect occurs when a caregiver fails to provide basic needs such as adequate food, sleep, safety, supervision, clothing, or medical treatment.

7.2 Definitions:

7.2.1 ADULT - Adult defines all per persons over 18 who work with or around children as coaches, team managers, board members, game officials, or adult volunteers.

7.2.2 PLAYER - Player defines all persons who are members of or play on a soccer team. This definition does include those players who participate at the U-19 level, even though they may be of legal age.

7.3 Guidelines:

Typically, there is a relationship where the adult has authority over the player. These guidelines recognize that the lines of authority and separation between adults and players must be acknowledged and respected. Generally, players are children and as such, deserve special protection. These guidelines provide that protection while setting levels of acceptable conduct for adults.

7.3.1 Physical Contact:

- a. Adults and others in positions of authority must be aware that physical contact can be misinterpreted. Physical contact should be limited to that necessary and appropriate to teach a skill, treat an injury, or

console or congratulate a player. Physical intimidation, physical punishment, or threatening a player with physical harm is not appropriate behavior. However, reasonably requiring players to do push-ups or running for misbehavior would not necessarily be considered inappropriate.

- b. Sexual contact of any kind between adults and players is prohibited whether or not the contact is consensual. (The exemption to this guideline would be in the event of player/coach spouses or legally declared domestic partners.)
- c. Hazing or any type of initiation to a club or a team is prohibited.
- d. Corporal punishment is prohibited.

7.3.2 Social Contact:

- a. An adult in a one-on-one situation with a child is generally considered inappropriate and should be avoided.
- b. Adults should not spend time or socialize alone with players except at games, practices, or team functions. Pulling a player to the side for additional instruction in plain view of the remainder of the team would be an exception to this rule.
- c. Adults should avoid instances such as driving alone with a non-family player. However, in the event that a player remains on a field waiting for transportation, the adult should wait with the player on the field or in the parking lot (weather permitting) to guarantee the player's safety and well-being.
- d. Adults should respect the privacy of players. If showering or changing room facilities are available, adults should use separately. Adults should not allow others to enter without the expressed wish of the players still present.

7.3.3 Verbal Contact:

- a. Offensive or insulting language by adults or players is unacceptable. Adults should model good communication skills.
- b. 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.
- c. Inappropriate language targeting officials, opponents, or spectators may be grounds for removal from a game or the premises or both.

7.3.4 Violations:

- a. Violations of these guidelines by adults or players will subject them to disciplinary actions, including but not limited to, warnings, sanctions, suspensions or release by their club and/or Indiana Soccer.
- b. Any person witnessing a violation of these guidelines should report the incident to their club's Risk Management Director.
- c. The appropriate legal authorities will be notified based upon the nature of the violation.

7.4 Reducing the Risk:

7.4.1 How Parents Can Reduce Risk:

- a. No rule, law or policy can replace a proactive parent. Parents must be willing to speak up when they have concerns. Sideline suspicions and gossip are destructive and do not address the issue.
- b. Bring the problem to someone who can act ... the coach, the club's Risk Management Director or local officials.
- c. Formal risk management, such as background checks, offers a SECOND line of protection. This does not replace an observant parent.
- d. Parents and/or guardians should be responsible for the safe and timely transportation of their player to and from the field.
- e. Parents should supply coach/team manager with current phone numbers, including emergency contacts, and a medical release form for their player.

7.4.2 How Clubs Can Reduce Risk:

- a. Appoint and support a club Risk Management Director.
- b. Never fill your coaching slots with a "warm body." Check background, experience and history of a coach.
- c. Do not allow an adult to come, unsolicited, into your club solely to coach children of a particular gender or age.
- d. Create a structure where multiple adults share responsibility for the wellbeing of each team. Adults should avoid being isolated with a child, or leaving a child unsupervised.
- e. Follow up on players who leave a team without explanation. Minimally, a phone call asking about the reasons is essential.
- f. Educate parents about the expectation that they will raise issues to the coach or the club to assure that issues are properly addressed...
- g. Prohibit gift-giving by coaches that is excessively lavish or is not equal amongst the entire team (with the exception of "awards" of nominal value.)
- h. If there is concern about the motives of a new or unfamiliar coach, consider asking a more experienced coach to co-coach for a few sessions with the coach, and to mentor the new coach.
- i. Require all team travel to be preceded by a plan for lodging, supervision and other details, and to be signed by all parents and players. No club volunteer should be alone in the front seat of a vehicle with a child who is not part of their family or household.
- j. Avoid identifying players by name, either first or last, on team uniforms.
- k. Website precautions include:
 - 1) Password protect any information that facilitates contact directly with children.
 - 2) Do not post pictures of individual players without express written permission of a parent or guardian.
 - 3) Do not post practice time and places on public board.
 - 4) Avoid "profiles" of children, especially with a great deal of identifying information including game and practice schedule,

time and place without express written permission of a parent or guardian.

- 5) Do not attach first names to images without express written permission of a parent or guardian.

7.4.3 How to Protect against Accusations of Inappropriate Conduct:

- a. Avoid being alone with players in non-public settings.
- b. Document unusual situations and forward the documentation to your club Risk Management Director.
- c. Do not buy gifts or give money to team members.
- d. Let your language set the tone. Avoid profanity, even in conversations that you think are private but may be overheard by players.
- e. Never verbally demean, negatively label or ridicule a child based on appearance, gender, weight, sexual orientation, race or any other identifying characteristic.

8.0 SAFETY - FACILITIES

Physical facilities are a significant risk exposure for youth soccer clubs. Injuries to players, referees, coaches and spectators can be caused by physical hazards anywhere at the complex. Common risk exposures include slips, trips and falls; insect bites and stings; goals tipping over; motor vehicle accidents in the parking lot and food poisoning if a concession stand is provided. These exposures can cause broken bones, sprains, contusions, cuts, pain, allergic reactions and even death.

8.1 Field and Ground Maintenance:

A field and ground maintenance program should include routine activities such as cutting the grass and striping fields. Safety issues include securing the goals (covered in the next section) and a regular inspection of all areas where occupants may walk or run to locate and remove trip and fall hazards. Particular attention should be focused on the fields, walkways from the parking area to the fields, player bench area, spectator areas including the concession stand and restrooms. Recommended safeguards for fields and grounds include:

- 8.1.1 Holes discovered during the inspection must be filled or covered; or a warning sign and barrier must be installed over the hole until permanent repairs can be made.
- 8.1.2 Sprinkler heads should be recessed and secured to eliminate trip/fall hazards.
- 8.1.3 Mowing and fertilization limited to times when the complex is not in use.
- 8.1.4 If stairs are present, secure handrails should be provided.
- 8.1.5 Bleachers should be secured and free from sharp edges.
- 8.1.6 Tables, chairs and benches in the concession stand and at the player bench area must be sturdy and free from sharp edges including splinters.

8.2 Soccer Goal Safety:

Injuries and fatalities occur each year involving soccer goals. The crossbars can injure or kill a youth player if the goal tips over or the cross bar comes loose. Goals are constructed from a variety of heavy materials including metal, aluminum, plastic and other materials. The injuries typically occur because goals are not secured to the ground, children hang on the crossbar, or strong winds cause the goal to tip over. In many cases these events occur outside of normal play either during practice or warm-up sessions; or when the complex is “closed.” Many complexes remain open to the public when games and practice are not in session. Goals are considered an attractive nuisance and youngsters tend to use them like “Jungle-Gyms.”

Recommended safeguards for soccer goals include:

- 8.2.1 Securely anchor or counterweight movable soccer goals at ALL times.
- 8.2.2 Secure goal to the ground (preferably at the rear of the goal), making sure the anchors are flush with the ground and clearly visible.
- 8.2.3 Moveable soccer goals should only be used on level (flat) fields.
- 8.2.4 Eliminate homemade goals. Do not manufacture or design your own goalposts.
- 8.2.5 Periodically inspect for structural integrity and proper connecting hardware before every use. Replace damaged or missing parts or fasteners immediately.
- 8.2.6 Always stand to the rear or side of the goal when moving it, NEVER to the front and allow adequate manpower to move goals of varied sizes and weights.
- 8.2.7 Advise maintenance and coaches to secure goals after moving them.
- 8.2.8 Remove and secure from unauthorized access, goals that are no longer in use.
- 8.2.9 Remove nets when goals are not in use.
- 8.2.10 Anchor or chain one goal to another, to itself in a folded down position, to nearby fence posts or any other similar, sturdy fixture when not in use, or at the very least secure them to the ground and place a “Do Not Use Without Approval” sign.
- 8.2.11 Coaches should always conduct a visual inspection of goals prior to all scheduled activities.
- 8.2.12 Referees MUST conduct a visual inspection of goals prior to every game.
- 8.2.13 Educate players and adults about the dangers associated with soccer goals.
- 8.2.14 Adults should supervise and not allow hanging or climbing on a soccer goal or soccer net.

8.2.15 Ensure safety/warning labels are clearly visible (placed under the crossbar and on the sides of the down-posts at eye level).

8.3 Goal Posts on Public Property:

8.3.1 Do not own goals on public property.

8.3.2 Donate funds to the property owner for purchase of goals.

8.3.3 Have written documentation of this transaction.

8.3.4 Perform periodic surveys of all locations to determine who owns the goals where your teams practice and play.

8.4 Parking Lot Safety:

Parking lots are a significant source of risk for any youth soccer club. Accidents that occur include trips and falls, motor vehicle/motor vehicle accidents and motor vehicle/pedestrian accidents. Recommended safeguards for parking lots include:

8.4.1 Maintain a smooth surface free from holes and other trip/fall hazards.

8.4.2 Maintain proper drainage to minimize puddles of standing water.

8.4.3 Provide a clearly marked path of travel for pedestrians with pedestrian warning signs as needed.

8.4.4 Post speed limit signs as needed.

8.4.5 Provide adequate lighting if complex is used after daylight hours.

8.5 Mobile Equipment - Golf Carts and Mowers:

Mobile equipment is another risk exposure for youth soccer clubs. Specifically, golf carts, lawn mowers and tractors are found at many soccer complexes. If used properly this equipment is safe; however, if operated by inappropriate people or at inappropriate times, mobile equipment can cause injuries to the driver, passenger and pedestrians at the complex. Recommended safeguards for mobile equipment include:

8.5.1 Qualify drivers/users of this equipment; qualification should include valid driver's license, formal training on each device used, and a history of safe use with the device.

8.5.2 Maintenance schedule for all mobile equipment to assure all safety devices, brakes, shut-off switches, etc. are fully functional.

8.6 Facility Signage:

Signs posting facility regulations and information can minimize risk in two ways: By posting the appropriate warning, individuals using the complex will be forewarned of facility rules and regulations and may avoid risk by adhering to said warnings.

From an insurance perspective, warning signs may do little to stop someone from participating in a specific activity, but they can go a long way in defending the club should an injured party alleging negligence file a claim or lawsuit. Facility rules and regulations signage may include:

- 8.6.1 No trespassing.
- 8.6.2 No alcohol.
- 8.6.3 No smoking.
- 8.6.4 No pets.
- 8.6.5 Hours of operation.
- 8.6.6 Code of conduct including language that anyone who violates the rules can be invited to leave the complex.
- 8.6.7 Parking lot speed limit and pedestrian crossing signs.
- 8.6.8 Employees and volunteers working the concession stand must wash their hands before coming on duty and after any breaks.
- 8.6.9 Emergency contact list with phone numbers for police, fire and medical assistance.

8.7 Emergency Information:

Prior to start of each playing season, the club Risk Management Director should notify local authorities (fire, police, medical) of season dates and general hours. This information should include any special events held at the field that would increase traffic in the area, number of games, number of spectators, etc.

It is important that a club have a designated Safety Officer at the field during hours of operation. The following emergency numbers should be posted in a highly-visible location:

- 8.7.1 Fire Department.
- 8.7.2 Police Department.
- 8.7.3 Medical Facility/Ambulance Service.
- 8.7.4 Club Risk Management Director, Safety Officer or other appropriate Administrator/Board Member.

8.8 Concession Stand Safety and Sanitation:

Concession stands have built in risk exposure to those serving the food and those purchasing the food. Risks include volunteer injuries including burns, cuts, contusions, falls, etc. for those serving the food; and food poisoning and communicable diseases

like Hepatitis for those purchasing the food. Recommended safeguards for proper purchase, storage, cooking and serving food are:

- 8.8.1 Purchase food from a reliable vendor.
- 8.8.2 Store food at appropriate temperatures.
- 8.8.3 Document food storage temperatures as well as food serving temperatures, with cold storage at 40 degrees F or below and hot foods at 180 degrees.
- 8.8.4 Provide plastic gloves, hairnets as appropriate for food servers.
- 8.8.5 Prohibit food handlers from taking money/payment as money is unsanitary.
- 8.8.6 Document clean-up and sanitation of food preparation equipment.

If possible, clubs might consider hiring an outside service to run the concession stand and secure a certificate of insurance showing outside group is covered for general/products liability and workers compensation for their employees.

9.0 SAFETY - HAZARDOUS WEATHER

The protection of INDIANA SOCCER members and participants is of paramount importance. Indiana Soccer publishes weather safety guidelines that are accessible by visiting Indiana Soccer's website - www.soccerindiana.org. Every member should recognize the danger presented by lightning, tornados and other hazardous weather. The following points represent generally accepted principles regarding the dangers involved with lightning and tornados.

No severe weather safety guidelines will give 100% guaranteed total safety, but these steps will help you avoid the vast majority of casualties.

9.1 Lightning:

No lightning safety guidelines will give 100% guaranteed total safety. The suggested guidelines below will help you avoid the vast majority of lightning casualties.

9.1.1 Lightning Facts

- a. All thunderstorms produce lightning and are dangerous.
- b. Lightning often strikes as far as 10 miles away from any rainfall. You are in danger from lightning if you can hear thunder. You are definitely in danger if you can see lightning. Look for dark clouds and increasing winds.
- c. Lightning injuries can lead to permanent disabilities or death.
- d. Lightning can travel sideways for up to 10 miles and strike when skies are blue.
- e. Soccer pitches and practice fields are dangerous places to be during a lightning storm.

9.1.2 Lightning Safety:

- a. When lightning is seen or thunder is heard immediately suspend the game and/or practice and move to a safe location.
- b. Apply the 30-30 rule
 - When you see lightning, count the time until you hear thunder.
 - If this time is 30 seconds or less, seek proper shelter.
 - If you can't see the lightning, just hearing the thunder is a good back-up rule.
 - Wait 30 minutes or more after hearing the last thunder before leaving shelter.
- c. Referees must protect the safety of all participants by stopping game activities quickly, so that participants and spectators may retire to a safer place before the lightning threat becomes significant. Remember, if you can hear the thunder, you are within reach of lightning.
- d. Know and heed warning systems and community rules
 - Many communities or park systems have lightning detection and warning systems. Use this information and obey the rules established by the community or park system.
- e. Seek proper shelter
 - The safest place to be during a thunderstorm with or without visible lightning is in a car (not a convertible) or in a fully-enclosed building.
- f. Avoid the most dangerous locations:
 - Open areas, soccer goals and water.
 - Higher elevations
 - Tall isolated objects, such as trees, poles, or light posts.
 - Wide open areas, including fields
 - Unprotected open buildings
 - Rain shelters
 - Metal fences and metal bleachers
 - If you cannot avoid these locations, crouch down on the balls of your feet, with your head tucked into your chest and your hands over your ears.

9.1.3 What to do if someone is struck by lightning:

- a. Call for help - 911 or your local ambulance service.
- b. Get medical attention as quickly as possible
- c. Give First Aid.
- d. If the victim has stopped breathing, begin rescue breathing.
- e. If the heart has stopped beating, a trained person should give CPR.
- f. If the person has a pulse and is breathing, address any other injuries.
- g. Check for burns. The injured person has received an electric shock and may be burning. Being struck by lightning can cause nervous system damage, broken bones, and loss of hearing or eyesight. People struck by lightning carry NO electrical charge that can shock other people. You can examine them without risk.
- h. All deaths from lightning result from cardiac arrest.

9.2 Severe Weather

9.2.1 Hail

- a. Suspend game or practice.
- b. Clear field.
- c. Seek proper shelter.
- d. Follow guidelines for lightning.

9.2.3 Tornados

- a. Watch for rapidly darkening skies.
- b. The sound of an approaching tornado is often described as that of an approaching train.
- c. The funnel of a tornado does not have to touch down to cause extensive damage and injuries.
- d. Tornados can produce winds of 300 miles per hour or more.
- e. Most people who are hurt during a tornado are hurt when they are struck by flying debris.
- f. Obey local rules and heed warnings (meaning that a tornado has been sighted).
- g. Clear the field and seek proper shelter immediately - see above.
- h. Remember, according to standard weather terminology a "warning" represents a more immediate occurrence than a "watch."
- i. Seek safety in a solid structure, preferably in a basement or in an interior room. If no building is available, lay down in a ditch.

9.2.2 Heat/Cold:

For the most current information on monitoring heat/cold precautions and procedures, please visit the Indiana Soccer website www.soccerindiana.org

- a. The environment should be monitored for both temperature (heat or cold) and humidity prior to activity, with game and/or practice schedules adjusted accordingly.
- b. If a high risk is present, altering the game and/or practice conditions should be considered. Additional water breaks and rest breaks should be utilized. A shorter game/practice may be in order. Coach should adjust his substitution patterns to allow for the weather conditions.
- c. If a very high risk is present, consider postponing or canceling the game and/or practice.

9.3 Disaster Plan:

Unfortunately in this day and age any number of unforeseen incidents could occur during practices games, meetings and social gatherings involving the soccer leagues in this state. The Risk Management Committee recommends that each club/league consult with local law enforcement concerning suggestions for creating a disaster plan. Some suggestions:

- 9.4.1 Primary concern should be the protection of the players, spectators and club/league personnel.
- 9.4.2 Determine method of communicating with local law enforcement at every game, practice or any other club/league function.
- 9.4.3 Law enforcement should be requested to patrol the sites used for practice and games so everyone will be aware of their presence.
- 9.4.4 Contact with city counsels, town boards, park boards, etc., should be made to ascertain if access to any building or structure could be arranged for shelter in the case of a disaster.

10.0 SAFETY - FIRST AID GUIDELINES

These guidelines are not intended to supersede actual medical advice.

10.1 First Aid Kits:

- 10.1.1 Match the contents to the sport, age, and gender of your team.
- 10.1.2 Stock a realistic quantity: Be prepared to treat more than one child at an event.
- 10.1.3 Kit should be placed where it is readily accessible, and marked clearly to allow rapid identification.
- 10.1.4 Use Ziploc-type bags within the kit for extra materials and to sort your supplies. For instance, it is helpful to partition supplies into modules "for wound care," "for an allergic reaction," and so forth.
- 10.1.5 Carry supplies in a watertight container designed to withstand rough handling and extremes in temperature, such as a plastic or metal container equipped with waterproof seal.
- 10.1.6 General supplies might include:
 - a. Ace wraps or compression wraps, suggested sizes 3", 4", and 6"
 - b. Antibiotic ointment such as Neosporin or Bacitracin
 - c. Antiseptic towelettes
 - d. Band-Aids – variety of sizes and shapes
 - e. Blister care (moleskin, mole foam or first aid tape)
 - f. Cloth tape, 1"
 - g. CPR mouth barrier or pocket mask
 - h. Emergency phone numbers
 - i. Hand sanitizer
 - j. Instant chemical cold pack(s) or Ziploc bags (if ice is available)
 - k. Local anesthetic (Bactine, etc.)
 - l. Medical release forms
 - m. Nasal plug for bloody nose

- n. First Aid Manual
- o. Safety pins
- p. Saline solution or hydrogen peroxide to clean wounds
- q. SAM splint (moldable)
- r. Scissors
- s. Small red biohazard bag and gloves
- t. Sterile gauze pads, 2" x 3", to clean open wounds
- u. Sunscreen
- v. Tweezers

10.2 Treatment of Injuries:

10.2.1 Abrasions:

- a. Gently rinse the area with water.
- b. Remove any loose dirt or grass from abrasion while rinsing the area.
- c. Apply a clean dressing and secure with a bandage of tape.

10.2.2 Bee and Wasp Stings:

- a. Less severe reactions include: itch, irritation, redness and swelling of the sting site.
- b. Apply ice to area.
- c. Apply local anesthetic (Bactine, etc.)
- d. Individuals who know they are allergic to bee or wasp stings should carry an epinephrine kit and use it, followed by an ice pack and hospital.

10.2.3 Blisters:

- a. Cool and rinse the area with water.
- b. Apply dry dressing.
- c. Do not open blisters.

10.2.4 Dislocations:

- a. No one except a physician or trained emergency personnel should attempt to reduce a dislocation of a joint.
- b. Support the dislocated member as comfortably as possible.
- c. Cold compresses should be applied to the injured joint.
- d. Seek medical attention immediately.

10.2.5 Eye Injuries:

- a. When a small foreign body, such as dust, is in the eye or eyelid, moderate efforts may be made to remove by flushing the eye with clean water.
- b. Objects embedded in the eye must not be removed, except by a physician.
- c. Cover both eyes loosely to reduce strain on the uninjured eye.
- d. Seek medical attention immediately. Call: 911.

10.2.6 Closed Fractures:

- a. Keep broken bones from moving.
- b. Immobilize the closest joint.
- c. Treat for shock.
- d. Do not attempt to move the player.
- e. Seek medical attention immediately. Call: 911.

10.2.7 Head Injuries:

- a. If loss of consciousness, even momentarily, consider the individual to have sustained a possible head injury (concussion). NOTE: A person can experience a concussion even if they never lose consciousness.
- b. Seek medical attention immediately. Call: 911
- c. Keep person lying down with head slightly elevated.
- d. Maintain open airway.
- e. Observe any bleeding from ears, nose, or mouth.
- f. Observe for nausea, vomiting or weakness of extremity.
- g. Control bleeding by direct pressure to wounds. Use caution when applying pressure over a possible skull fracture site.
- h. Apply ice pack to site.
- g. Do not give anything by mouth.

10.2.8 Sun Safety:

- a. Apply sunscreen of SPF of 15 or greater at least ½ hour before going outdoors.
- b. Reapply sunscreen every two hours.

10.2.9 Heat Cramps:

Symptoms include: Muscles in arms, legs, and/or abdomen may spasm uncontrollably accompanied by heavy sweating.

- a. Drink fluids.
- b. Gently stretch and massage cramped muscles.
- c. Rest in cool environment.
- d. Apply ice to cramped area.
- e. Watch for breathing or heart problems.

10.2.10 Heat Exhaustion:

Symptoms include: pale clammy skin, rapid weak pulse, headache, nausea, dizziness, severe cramps in the abdomen and legs. Temperature may be slightly elevated or subnormal.

- a. Remove player to a cool place, loosen clothing and place in head-low position.
- b. Keep person quiet and warm to prevent shock.
- c. Sponge with cool water.

- d. Give fluids slowly, if able to swallow. Keep patient away from exposure to high heat and humidity conditions for 24-48 hours.
- e. Prepare for nausea and vomiting, and keep airway open.
- f. Seek medical attention if symptoms persist.

Note: Athletes in high heat and humidity conditions may have flushed faces and upper chest areas. This does not exclude heat exhaustion if other signs and symptoms are present.

10.2.11 Heat Stroke:

Symptoms: Sweating ceases, skin is dry and hot, bizarre behavior, combative, increased body temperature to dangerous levels, hallucinations, loss of consciousness.

- a. This is a medical emergency – call 911.
- b. Remove the patient immediately to a cool area.
- c. Cool body temperature with ice-packs or immersion in cool water.

10.2.12 Dehydration:

- a. To avoid Dehydration (a shortage of water in the body) maintain adequate fluid intake by replacing sweat losses before, during and after exercise.
- b. Drink water or electrolyte drink (PowerAde, etc.)
- c. Increase fitness.
- d. Wear light colored and/or lightweight (i.e. mesh) clothing.
- e. Do not use soft drinks, alcohol, coffee, or caffeinated drinks, for fluid replacement.

10.2.13 Nose Bleeds:

- a. Apply cold packs to the back of the neck and front of the face and pinch the sides of the nose against the septum, to apply pressure to the vessel.
- b. Place moist gauze under the upper lip.
- c. Nasal plugs may be used.
- d. Keep the person sitting erect with the head up and loosen the collar if it tends to constrict the neck.
- e. Advise the person not to breathe or blow through the nose for an hour or two after the bleeding has stopped.
- f. If bleeding does not stop within 10-15 minutes, arrange for medical care.

10.2.14 Seizures:

- a. If a seizure is in progress (Epilepsy or Convulsive Disorder) do the following:
- b. Loosen the clothing around the neck.
- c. Pull the person away from any objects against which they might injure themselves or remove objects which might injure the patient.
- d. Remove bystanders.

- e. Do not try to control the seizure.
- f. Clear the airway and keep the person warm and comfortable.

10.2.15 Shock:

Every injured person is potentially a shock victim and should be treated as such, whether the symptoms of shock are present or not. Symptoms of shock include: chalk-like appearance, dull or anxious expression, shallow breathing, weak rapid pulse, and cold, moist skin.

- a. Keep patient warm and comfortable, but not hot.
- b. Keep patient's body horizontal, or if possible, position them so the feet are at least six inches higher than their head. In any case, always keep the victim's head low.
- c. Clear the patient's mouth of all foreign objects and make sure they are breathing properly.
- d. Give the patient nothing to eat or drink.
- e. Loosen tight clothing at the neck, chest and waist.

10.2.16 Sprains and Strains:

Treatment: RICE

- a. R Rest the injured part.
- b. I Ice should be applied for the first few hours.
- c. C Compression may help alleviate swelling.
- d. E Elevate the injured part.
- e. Failure of strains and sprains to respond to this means medical attention is needed.

10.2.17 Lacerations and Incisions:

- a. Protective gloves should be used.
- b. Minor lacerations and incisions should be cleansed with clean water.
- c. Apply a clean dressing to the wound.
- d. Secure with a clean bandage.

10.2.18 Control of Bleeding:

- a. Protective gloves should be used.
- b. Apply direct pressure on the wound. Use of sterile dressing is preferred. In an emergency, use any dressing.
- c. In addition to direct pressure, indirect pressure may be applied (application of pressure on the arterial pressure points in the arm or leg).
- d. Elevation – loss of blood can be slowed by raising the wound above the level of the heart.

10.3 Handling Bloodborne Pathogens (U.S. Youth Soccer)

The soccer community is like all other segments of society. Some participants may have infectious diseases including HIV/AIDS and Hepatitis B (bloodborne pathogens). What do you do when an individual who has AIDS wants to participate in your program?

This following sets forth guidelines pertaining to bloodborne diseases - viruses that live in the blood stream and can be contagious. The first section deals with the rights of infected individuals and the obligations of coaches, referees, and administrators to protect those rights. The second section describes precautionary steps to minimize the risks of infection to participants in soccer activities. The third section outlines specific US Youth Soccer recommendations for dealing with injuries involving loss of blood.

RIGHTS OF PARTICIPATION

Individuals with infectious diseases have the right to participate in youth soccer programs. Efforts to exclude individuals from participation in your youth soccer program because of infectious diseases are governed by the Americans with Disabilities Act ("ADA") and the Rehabilitation Act. The other legal area of concern for youth soccer is confidentiality of information. Individuals with infectious diseases have the right to confidentiality. Revealing such confidential information in a nonprofessional setting may qualify as a breach of privacy. Sharing information about an individual with an infectious disease should be governed by that individual and/or the family involved. Let them be your guide in how much they want to be known.

COMMUNICABLE DISEASE PRECAUTIONS

- 1) Treat every person on the field, as in any area of society, with the assumption they are HIV positive. Precautions for reducing the potential for transmission of infectious diseases should include, but are not limited to, the following:
- 2) Routine use of latex gloves or other precautions to prevent skin and mucous-membrane exposure when contact with blood or other body fluids is anticipated.
- 3) If bleeding is profuse and requires the assistance of a supervising adult, latex gloves should be donned and pressure applied to the wound, keeping the injury above the level of the heart if possible. Medical care should be sought.
- 4) Immediately wash hands and other skin surfaces if contaminated (in contact) with blood or other body fluids.
- 5) Wash hands immediately after removing gloves.
- 6) The bloodied portion of the athlete's uniform must be properly disinfected, or the uniform changed before the athlete may participate.
- 7) Clean all blood-contaminated surfaces and equipment with a solution made from 1-100 dilution of household bleach or other disinfectant before competition resumes. Use a new mixture for each event and discard the mixture after each event.
- 8) Practice proper disposal procedures to prevent injuries caused by needles and other sharp instruments or devices found in the area of the field.
- 9) Although saliva has not been implicated in HIV transmission, mouthpieces, resuscitation bags, or other ventilation devices should be available for use to minimize the need for emergency direct mouth-to-mouth resuscitation. Athletic trainers/coaches with bleeding or oozing skin conditions should refrain from all direct care until the condition resolves.
- 10) Contaminated towels, dressings, and other articles containing body fluids should be properly disposed of or disinfected. US Youth Soccer recommends full support of FIFA Circular no. 438 dated 6 July, 1990 which states in part, "The referee should prevent a player who is bleeding profusely from taking any further part in a match until he has been adequately treated and the bleeding has stopped."

RECOMMENDED SAFETY PROCEDURES FOR DEALING WITH INJURIES INVOLVING BLOOD

- 1) There are many factors to consider whenever there is an injury on the soccer field in addition to the above listed precautions.
- 2) First concern is always to make sure the player is not seriously injured. Never move a player that has possible internal injuries.
- 3) If possible to remove the player from the field, move the player to the sidelines away from the spectators.
- 4) Carry and use latex gloves at all times.
- 5) Carry empty plastic bags, large enough to carry a uniform and shoes if they have blood on them.
- 6) Carry rags and a cleaning substance to clean the injured player. All used items should be placed in a plastic bag for disposal or cleaning.
- 7) Referees should never allow the play back onto the field without a clean jersey, shorts, shoes, etc. whatever had the blood on it. Therefore, it is recommended that each player have extra gear in case they need to change.
- 8) The field of play should be inspected and cleaned prior to resuming play. This may mean cutting out grass or when not possible, applying an appropriate cleaning agent that is safe for the surface.

11.0 TOURNAMENT AND TRAVEL

11.1 Tournament Guidelines

11.2 General Travel Guidelines

12.0 INSURANCE

Current insurance policy information is maintained on the Indiana Soccer website and can be found at www.soccerindiana.org

Appendix A: Zero Tolerance Policy Against Abuse

As a member of Indiana Soccer, the _____
Name of Club

Is committed to providing a safe environment for its members and participants, and to preventing abusive conduct in any form. Every member of this organization is responsible for protecting our participants and insuring their safety and well being while involved in sponsored activities.

To this end, we have established the following guidelines of behavior and procedures for our staff, volunteers and participants. All members of this organization, we well as parents, spectators and other invitees are expected to observe and adhere to these guidelines.

1. Abuse of any kind is not permitted within our organization. This means we do not tolerate physical, sexual, emotional or verbal abuse or misconduct from our players, coaches, officials, volunteers, parents or spectators.
2. Physical and sexual abuse, including, but not limited to, striking, hitting, kicking, biting, indecent or wanton gesturing, lewd remarks, indecent exposure, unwanted physical contact, any form of sexual contact or inappropriate touching, are strictly prohibited within our organization.
3. Emotional abuse or verbal abuse is also prohibited. These include, but are not limited to such forms of abuse as:
yelling, insulting, threatening, mocking, demeaning behavior, or making abusive statements in regard to a person's race, gender, religion, nationality/ethnicity, sex or age.
4. We are committed to providing a safe environment for our players, participants and staff. We do so by appointing all coaches, officials and volunteers – and anyone else affiliated with our organization – as protection advocates. Every member of this organization is responsible for reporting to the Club Risk Management Director, any cases of questionable conduct or alleged mistreatment toward our members by any coach, official, volunteer, player, parent, sibling or spectator.
5. Buddy System: We recommend that every activity sponsored by our program put a Buddy System in place. Each youth participant should be assigned a buddy during sponsored activities. No child should go anywhere – to the bathrooms, locker rooms or other location – without his or her buddy.
6. To further protect our youth participants, as well as our coaches and volunteers, we strongly advise that no adult person allow him/herself to be alone with a child (other than their own) or with any group of children during sponsored activities. In particular, we recommend that coaches or other adult members of this organization:
 - a. Do not drive alone with a child participant in the car.
 - b. Do not take a child alone to the locker room, bathrooms or any other private room.
 - c. Provide one-on-one training or individual coaching with the assistance of another adult or the child's Buddy.
 - d. If you must have a private conversation with a youth participant, do it within view of others, in the gym or on the field, instead of in a private office.

- e. Coaches and other adult members of this organization should not socialize individually with the participants outside of sponsored activities.
7. Supervision/Chaperone ratio: We recommend that for any sponsored activity, the ratio of adults to youth participants be 1:8 – one (or more) adults for every eight children, with a minimum of two adults for every activity.
 8. When traveling overnight with youth participants, children should be paired up with other children of same gender and similar age group, with chaperones in separate, but nearby rooms.
 9. We want to empower our children to trust their feelings and let them know that their concerns, fears and hopes are important by listening to them. Open communication between children and parents, or between children and other adults in the organization may help early warning signs of abuse to surface.
 10. We encourage parents to become as active as possible in sponsored activities, games, practices and other events. The more the parents are involved, the less likely it is for abusive situations to develop.
 11. We will respond quickly to any and all allegations of abuse within this organization. This information will be communicated to the authorities for investigation and will be reviewed by the organization’s Risk Management Director and/or President. The alleged offender will be notified of such allegations promptly. Indiana Soccer will be copied on all correspondence.
 12. Any person accused of sexual or physical abuse may be asked to resign voluntarily or may be suspended by the board until the matter is resolved. Regardless of criminal or civil guilt in the alleged abuse, the continued presence of the person could be detrimental to the reputation of the organization and could be harmful to the participants. A person who is accused but later cleared of charges, may apply to be reinstated within the organization. Reinstatement is not a right, and no guarantee is made that he or she will be reinstated to his/her former position.
 13. We promote good sportsmanship throughout the organization and encourage qualities of mutual respect, courtesy and tolerance in all participants, coaches, officials, volunteers and spectators. We advocate building strong self-images among the youth participants. Children with a strong self-image may be less likely targets for abuse; similarly, they may be less likely to abuse or bully others around them.

Signed by: _____

Title: _____

Club #: _____

Club Name: _____

Date: _____

Appendix B: INDIANA SOCCER Club Risk Management Director Code of Conduct

The purpose of this signed statement is to inform all Club Risk Management Directors (RMD) of the security and confidentiality requirements of the information that they will be gathering. It is not meant to reflect negatively on the RMD's performance, nor does it imply that the RMD is suspected of any wrong doing.

As a RMD you have an obligation to safeguard the records entrusted to you. This document is to remind you of the security, confidentiality and ethical requirements for RMD's.

As a Risk Management Director, I will:

- Represent the interests of all people served by this organization, and not favor special interests inside or outside of this organization.
- Not use my position as RMD for personal advantage or for the advantage of my friends or associates.
- Keep confidential information confidential.
- Do nothing to violate the trust of those who elected or appointed me to the position of RMD or of those we serve.
- Never exercise authority as an RMD except when acting as I am delegated by the organization that elected or appointed me.
- Ensure that any disclosure made is, in fact, made only to those individuals having a legitimate need to know in the course of their official duties.
- Consult with a higher authority, i.e. Association President, State President, State RM Committee Member, etc., prior to taking any action when in doubt whether such action is in conformance with privacy and confidentiality standards.
- Disclose personal information about an individual only with the written consent or at the written request of the individual to whom it pertains.

The Indiana Soccer Risk Management Committee will maintain a copy of this document. The signature below acknowledges that you were counseled about the security and confidentiality pertaining to your responsibilities as a Risk Management Director and that you were afforded the opportunity to obtain clarification regarding any of the requirements of the position which you did not fully understand.

/

Print legal name of RMD

Signature of RMD

Date

Club Name

Email Address of RMB