

Liability and the Volunteer Coach ¹

As a volunteer coach you will have the care, custody and control of someone else's children for 30 - 50 hours this season. In this capacity you have the potential both to create and to prevent accidents and injuries.

You should be aware of your legal responsibilities as a coach. Attention to these duties will help minimize your personal risk, prevent sports-related injuries, and avoid claims of coaching negligence. Your legal duties include:

1. Providing adequate supervision (general and specific to the game) - The health and safety of your team members are entrusted to your care. You must provide adequate supervision to avoid foreseeable accidents and injuries. NEVER leave after a game or practice until all are safely picked up by parents or guardians!
2. Sound planning - Carefully plan your practices and activities so players progress and learn new skills at a safe pace. Don't move too rapidly by forcing improvement. Make written practice plans and keep them on record for the duration of the season.
3. Warning players of inherent risks - Players and parents must know, understand, and appreciate the risks they are likely to encounter in soccer. **YOU MUST TELL THEM!** (the Mother of all Meetings is the time to do this) Warn your players about potentially dangerous techniques.
4. Provide a safe playing environment - Be certain that practice and playing fields are free of hazards (i.e. holes, rocks, broken glass or other debris) and that equipment (i.e. goal posts) is in proper condition. Warn your players NOT to hang from the goal cross bar or netting.
5. Evaluate players and determine any limitation regarding participation - Be sure players are physically capable of performing the required skills. This includes mental, physical, and even child abuse situations. Evaluate old injuries as carefully as you can before letting players return to action.
6. Matching or equating opponents - Fairly match players for practices and games, giving consideration to body weight, skill level, and maturity.
7. Providing proper first aid - Have a first aid kit available along with a plan, which outlines emergency procedures. Know where to find emergency help and a telephone (put a couple of quarters in your first aid kit, in case a cell phone is not readily available). Don't attempt to provide aid beyond your qualifications. ALWAYS have your players' medical release forms with you - they should provide emergency phone numbers as well as permission for you to obtain emergency medical aid in the event a parent/guardian cannot be reached.

Be aware of problems concerning transportation. Carry adequate personal liability insurance. Accepting money for transportation may void your personal auto liability insurance - check with your insurance agent or carrier.

Respect the **civil rights** of your players on and off the field. Consider the factors of the game as it relates to officials and spectators. Keep good records of an event especially in the case of an injury.

Finally, it is to your advantage to have a second adult in attendance at your practices. This reduces the risk that you could unjustly be accused of inappropriate behavior.

Coaches who successfully perform the above duties not only reduce their personal risk, but also demonstrate to parents and other coaches a desire and willingness to act responsibly for the benefit of the kids.

¹ Adapted from OYSA coaches manual and Glenn M. Wong, Sports Management Program. University of Massachusetts

Negligence and a Coach's Legal Duties

The risks of the game (called inherent risks) are acceptable as long as a coach acts prudently and as long as these inherent risks are known, appreciated, understood and consciously accepted by the participants.

Negligence: The failing to act in a manner that a reasonable and prudent coach would normally act in a similar situation.

Four Factors in Determining Negligence

All four must be present to prove negligence:

1. The presence of a duty: Do you have a duty/duties to your players?
2. Breaching the duty: Failing to act necessarily, acting wrongly or acting properly but in a wrong fashion.
3. Cause of the injury: Your breach of duty?
4. Extent of injuries.

Legal Defense

When charged with negligence there are defenses:

1. Assumption of Risk: Players must know, understand and appreciate those risks. You must tell them.
2. Contributory negligence: The player acted negligently and contributed to the injury.
3. Comparative negligence: Negligence of both parties compared on a percentage basis. Player cannot recover if his/her percentage is above 49%.
4. Other defenses: Act of God or technical defenses.

Coach's Safety Checklist

Prior to each practice, game or organized activity all coaches, assistant coaches and others in charge of an activity should develop a habit of a safety check.

Coaches do not go to games and practices thinking about safety. Generally, they are not trained to do this and as a result do not know the problems to search for. As a result, safety is out of mind.

There are two seasons per year with practices, games, and tournaments. Coaches may average three to five hours per week with the team or as much as 80 hours per year. The coach has care, custody and control of someone else's child and has the moral and legal obligation to see that the safety of each player is part of the every day routine.

A safety check-list would include but not limited to the following:

Field Conditions

- | | |
|--|-----------------------------------|
| • Goal post anchored | • Sprinkler heads seated properly |
| • Edges rounded on goal posts | • Corner markers covered |
| • Posts welded properly | • Cracks in field filled |
| • Glass/Foreign objects removed from field | • Playing area free of ruts/hills |

Weather

- | | |
|------------------------------------|-------------------------------|
| • High winds | • Heat: light clothing, water |
| • Approaching rain or thunderstorm | • Cold: proper dress |
| • Lightning | |

Equipment

- Covered shinguards on each player
- Jewelry removed
- Shoes adequate for conditions
- Ball in good shape

Medical Information

- Know special needs of all players
- Obtain authorization to have player treated (i.e. medical release forms)
- Have parents' group health information

Emergency Conditions

- Locate nearest telephone
- Find ambulance facilities
- Know location of health care facility

Schedule

- Practice begins
- Practice ends
- Arrange for supervision of players without rides
- Arrange supervision prior to practice
- Arrive early enough to police fields

Team Conditions

- Train and warm up properly
- Prohibit non-acceptable activities or behaviors
- Place players of similar ability together

Tournaments

- Are drivers aware of liabilities and responsibilities
- Have small player to adult ratio
- Plan out all activities
- Pack medical I.D. cards for emergency
- Take medical claim forms
- Understand medical & liability policies
- Know your legal & moral responsibilities

Coach's Kit

- First Aid
- Player I.D. cards
- Parents phone numbers

Coach

- Understand the Laws of the Game
- Understand the role of the referee & linesman
- Communicate the Laws clearly to players
- Attend coaching clinics
- Have balanced attitude

Parent

- Communicate with parent, especially after injuries
- Let parent know schedule
- Recruit their help in supervision
- Discuss your philosophies

First Aid for Soccer Injuries

When you accept the role of coach, you accept a major responsibility for the care and safety of your players. Although the athletes share in the responsibility for their protection and safety, their ability to understand what they can do, how they can do it, and whether they are doing it correctly, may be limited. It is your job to help them practice and play as safely as possible.

The information below was adapted from the *ASA/VIP Softball Safety Manual* and the American Red Cross *First Aid Reference Guide* (1990). It is designed to help you better care for your players, it is **not** meant as a substitute for a first aid course. If you don't already have first aid certification, we encourage you to enroll in both CPR and first aid classes to help prepare yourself to handle accidents that may happen while you are coaching.

Your job as a volunteer coach is to recognize an injury when it happens, to stabilize the injury as best you can, and to summon medical assistance if necessary. You need to understand the limitations of your training and knowledge. If you are not a trained medical professional, then it is your responsibility to call one immediately whenever you have any doubt as to what to do next.

For those emergencies that require immediate attention by a trained professional, call 9-1-1.

Have an Emergency Plan

It is important to have a well thought out plan for dealing with injuries. It is best to have a written response plan for emergencies. Keep this in your coaching bag where you can pull it out and refer to it if necessary. Some points to consider in your plan:

- Is a first aid kit available? (suggested contents are listed under Coach Equipment)
- Do I have all of my players' medical consent forms and emergency contacts with me at all times?
- Where is the nearest phone?
- How do I get first aid and paramedics/ambulance?
- Do any of my assistant coaches or parent volunteers know first aid?
- Who will go for help if I need to attend to an injured player?
- Who will supervise other players if I need to summon help?
- Do my assistant coaches and players know the emergency plan?

Injury Prevention

An ounce of prevention is worth a pound of cure. Prevent injuries in every way possible. Some important steps that can help you in your injury prevention plan include the following:

- Emphasize proper skill development
- Inspect practice and game fields (i.e. holes, sprinkler heads, other hazardous objects)
- Teach your players sound conditioning habits (including proper warm-up, stretching, cool down, and access to plenty of fresh water)

Common Soccer Injuries and their Care

Whenever a player is injured, be certain to inform the parents or guardians of the injury, even if it seems minor and the athlete is able to continue with the practice or game.

Preventing Disease Transmission

Place an effective barrier between you and the victim's blood when you give first aid. Examples of such barriers are the victim's hand, a piece of plastic wrap, clean folded cloth, rubber or latex gloves.

Wash your hands thoroughly with soap and water immediately after providing care.

Heat Emergencies

Heat Cramps

- Have athlete rest in a cool place
- Give cool water
- Stretch muscle and massage area

Heat Exhaustion - player's skin will appear pale and clammy, perspiration is profuse, may experience nausea, weakness, dizziness, headache, cramps.

- Have athlete lie down in a cool place with feet elevated 8 to 12 inches
- Give cool water
- Loosen tight clothing
- Remove clothing soaked with perspiration
- Apply cool wet cloths (such as towels) or ice packs (wrapped) to the skin
- Call 911 if player refuses water, vomits or if level of consciousness changes

Heat Stroke - player will appear hot, red, will not be sweating (although skin may be wet from previous sweating), pulse will be rapid and strong, body temperature will be high (105 degrees or more). This is an immediate and life-threatening emergency.

- Send someone to get emergency medical help (call 911)
- Get the athlete out of the heat and into a cooler place
- Cool the player fast - immerse in a cool bath, or wrap with wet towels and fan him/her
- Give nothing by mouth

Preventing Heat Emergencies

- Avoid being outdoors during the hottest part of the day, if possible
- Change the activity level according to the temperature
- Drink large amounts of fluid
- Wear light-colored clothing, if possible

Ankle Injuries

An injury to an ankle can take the form of a sprain or a break and may have different degrees of severity. Sprains are stretched or torn tendons, ligaments, and blood vessels around joints.

First Aid: Assume the injury could be severe.

Immobilize the player (avoid any movement that causes pain)

Begin the ICE routine (Ice, Compression, Elevation - elevation helps slow the flow of blood, thus reducing swelling)

Have the player see a physician before returning to practice

Don't: Remove athlete's shoe and sock until ice is available
Have the player try to "walk it off"

Knee Injuries

The knee is the most complicated joint in the body, as well as the joint most frequently injured. It requires a specialist to treat knee injuries properly. Your job is to limit further injury and to get the player to the hospital.

First Aid: Help the player off the field
Apply ice to the injured area
Elevate the leg without moving the knee, if possible
Take the player to the hospital immediately

Don't: Move the knee to examine the injury
Allow the player to get up and "walk it off"
Allow the knee to move freely
Allow the athlete to continue participating until he/she has seen a physician

Dislocations

Dislocations and broken bones (fractures) are treated similarly. A dislocation is a displacement of a bone end from the joint. Dislocated joints will have pain, swelling, irregularity, or deformity over the injured area.

First Aid: Leave dislocated joint in the position found
Immobilize joint in the exact position it was in at the time of injury
Apply ice and elevate to minimize swelling
Have the player see a doctor immediately

Don't: Attempt to relocate a dislocation or correct any deformity near a joint (movement may cause further injury)
Assume the injury is minor
Assume there is no broken bone

Blisters

Blisters typically appear as a raised bubble of skin with fluid beneath, the fluid may be clear or bloody. The blister may be torn with new skin exposed. Generally painful.

First Aid: Rub ice over the area
Place small moleskin doughnut over the outside edges of the blister and tape to prevent further friction
If the blister is torn, wash area with soap and water, put ointment over the blister and cover with a protective dressing

Don't: Treat a blister lightly, infection can result, causing serious problems
Puncture blister - let a physician do so

Preventative Steps: Properly fitting shoes and socks are essential
Proper conditioning is necessary to allow the skin to become accustomed to the activity load
Wear two pair of socks if friction is extremely bad

Bleeding

In most cases, bleeding can be controlled by placing direct pressure over the wound. To reduce risk of infection, whenever possible wear latex gloves and wash hands before and after treating an open wound.

- First Aid:** Apply DIRECT PRESSURE to the wound with a clean compress (use clothing if a clean compress is not available)
Elevate the wound above the level of the heart
Keep the player lying down
If bleeding is sufficient to soak through the compress, apply additional pressure as necessary directly over the others
Call for emergency help if bleeding is severe or persistent

- Don't:** Remove old compresses, this may cause more bleeding
Treat any bleeding lightly
Let dirt get into the wound
Panic! Call for help if you are unsure

Nose Bleeds

A bloody nose is a common occurrence following a blow to the face, or in association with high blood pressure, infection, strenuous activity or dry nasal passages. Although usually more annoying than serious, any bloody nose resulting from an injury to the face should be considered as a potential fracture. If you suspect a head, neck, or back injury, do not try to control a nosebleed, instead, keep the player from moving and stabilize the head and neck.

- First Aid:** Place the player in a sitting position leaning slightly forward
Apply a cold compress to the athlete's nose and face
Apply direct pressure by having the player pinch the nostrils with the fingers
Take the athlete to the doctor if bleeding persists

- Don't:** Allow the player to blow his/her nose for several hours
Stick anything up the nose to stop the bleeding without the assistance of a medical professional or emergency personnel
Lean head backwards (player may choke on blood running down the throat)

Head and Neck Injuries

These injuries can be the most devastating of all injuries. Permanent paralysis may result from any neck injury, so these injuries **must** be handled with extreme care.

- Signs & Symptoms:** Headache, dizziness
Unconsciousness (immediate or delayed)
Unequal pupils
Tingling sensation or numbness in arms and/or legs
Inability to move fingers, toes, or extremities
Difficulty breathing
Athlete not alert

Head and Neck Injuries (CONTINUED)

First Aid: Call for paramedic or other help immediately
Make sure the athlete is able to breathe
Keep the player still (stabilize head and neck as you found them)
Maintain body temperature
Call parents or guardian immediately
Pass all important information on to doctors

Don't: Move the athlete
Leave the player unattended
Overstep the limits of your knowledge GET HELP IMMEDIATELY

Broken Bones

Fractures come in a variety of forms and may occur any place in the body where there is a bone. Remember, you are not a trained medical professional qualified to handle these many different situations. Your job is to recognize the injury (or possible injury) and to limit further injury.

Signs & Symptoms: May have heard a pop or snap, or received a direct blow to the area
A closed fracture will have pain, swelling, irregularity, or deformity over the injured area. An open fracture will have bone protruding

First Aid: Leave fractured bone in the position found
Immobilize the joints above and below the suspected injury
Cover an open fracture wound with a large clean dressing; control bleeding
Apply ice to a closed fracture (not to an open fracture)
Transport the player to the hospital or call for an ambulance if you are unsure about moving the player

Don't: Attempt to straighten injured limb or push back protruding bones
Allow player to move the injured area
Allow dirt into any injured area with protruding bones