Parents Meeting Agenda

- Sign in sheet
- Player Safety Coach (PSC)
    - Adam Crace – acrace@scyfootball.com
    - 4th year in the league
- Heads Up football background
    - Established in 2007
    - Aligned with the NFL
    - Designed to remove the head from contact in the game
- Concussions
- Heat Acclimatization
- Heat Exhaustion
- Hydration
- Severe Weather
    - Lightning alarm goes off wait 30 minutes to get back on field
- Heads Up Tackling Drills
    - Help your kids stretch at home
    - Early in season should be working on portions of this everyday
    - Once a week as the season moves along
    - PSC will periodically visit practice
- Heads Up Tackling Player Demonstration
- Helmet and Shoulder Pad fitting guidelines
    - Purchase outside of league have board member check the fit
- Coaches meeting
    - League message to the coaches – **parents help us hold our coaches accountable to these safety precautions.**
- **Questions?**

HEADS UP CONCUSSION IN FOOTBALL

THE FACTS

- All concussions are ***serious***.
- Most concussions occur ***without*** loss of consciousness.
- Recognition and proper response to concussions when they ***first occur*** can help prevent further injury or even death.

There's no doubt about it: sports are a great way for kids and teens to stay healthy while learning important team-building skills. But there are risks to pushing the limits of speed, strength, and endurance. And athletes who push the limits sometimes don't recognize their own *limitations*—especially when they've had a concussion.

That's where you come in. It's up to you, as a coach, to help recognize concussion and make the call to pull an athlete off of the field if you think an athlete might have one. Playing with a concussion can lead to long-term problems. It can even be *fatal*.

What Is a Concussion?

A bump, blow, or jolt to the head can cause a concussion, a type of traumatic brain injury. Concussions can also occur from a blow to the body that causes the head and brain to move rapidly back and forth—literally causing the brain to bounce around or twist within the skull. This sudden movement of the brain causes stretching, damaging the cells and creating chemical changes in the brain. Once these changes occur, the brain is more vulnerable to further injury and sensitive to any increased stress until it fully recovers.

Unlike a broken ankle, or other injuries you can feel with your hands, or see on an x-ray, a concussion is a disruption of how the brain works. It is **not** a "bruise to the brain."

How Can I Recognize a Possible Concussion?

On the football field, concussions can result from a fall or from players colliding with each other, the ground, or an obstacle, such as a goalpost. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

Sometimes people wrongly believe that it shows strength and courage to play while injured. Discourage others from pressuring injured athletes to play. Some athletes may also try to hide their symptoms. Don't let your athlete convince you that he is "just fine" or that he can "tough it out." Emphasize to athletes and parents that playing with a concussion is dangerous.

As a coach you are on the front line in identifying an athlete with a suspected concussion. You know your athletes well and can recognize when something is off—even when the player doesn't know it or doesn't want to admit it.

Remember, you can't see a concussion, like you can see a broken ankle, and there is no one single indicator for concussion. Recognizing a concussion requires watching for different types of signs or symptoms.

So to help recognize a concussion, you should watch for and ask others to report the following two things among your athletes:

1. **A forceful bump, blow, or jolt to the head or body that results in rapid movement of the head.**

   -and-

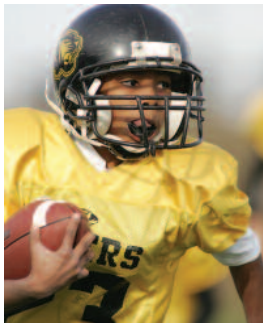
2. **Any concussion signs or symptoms, such as a change in the athlete's behavior, thinking, or physical functioning.**

What Are the Signs and Symptoms of Concussion?

Athletes who experience **one or more** of the signs and symptoms listed below, or who report that they just "don't feel right," after a bump, blow, or jolt to the head or body may have a concussion.

SIGNS OBSERVED BY COACHING STAFF	SYMPTOMS REPORTED BY ATHLETE
• Appears dazed or stunned (such as glassy eyes) • Is confused about assignment or position • Forgets an instruction or play • Is unsure of score or opponent • Moves clumsily or poor balance • Answers questions slowly • Loses consciousness (*even briefly*) • Shows mood, behavior, or personality changes • Can't recall events *prior* to hit or fall • Can't recall events *after* hit or fall	• Headache or "pressure" in head • Nausea or vomiting • Balance problems or dizziness • Double or blurry vision • Sensitivity to light or noise • Feeling sluggish, hazy, foggy, or groggy • Concentration or memory problems • Confusion • Does not "feel right" or is "feeling down"

Signs and symptoms of concussion generally show up soon after the injury. But the full effect of the injury may not be noticeable at first. For example, in the first few minutes the athlete might be slightly confused or appear a little bit dazed, but an hour later they can't recall coming to the practice or game.



So assess the player, then assess the player again, then re-assess the player even later. Make sure that the athlete is supervised for at least one or two hours after you suspect a concussion. Any worsening of concussion signs or symptoms indicates a medical emergency.

Why Should I Be Concerned about Concussions?

Most athletes with a concussion will recover quickly and fully. But for some athletes, signs and symptoms of concussion can last for days, weeks, or longer.

So why is it so important for you to remove an athlete from play?

If an athlete has a concussion, his brain needs time to heal. A repeat concussion that occurs before the brain recovers from the first—usually within a short time period (hours, days, weeks)—can slow recovery or increase the chances for long-term problems. In rare cases, repeat concussions can result in brain swelling or permanent brain damage. They can even be *fatal*.

Did You Know?

- **Athletes who have ever had a concussion are at increased risk for another concussion.**
- **Young children and teens are more likely to get a concussion and take longer to recover than adults.**

What Are Concussion Danger Signs?

In rare cases, a dangerous blood clot may form on the brain of an athlete with a concussion and crowd the brain against the skull. Call 9-1-1 or take the athlete to the emergency department right away if after a bump, blow, or jolt to the head or body he exhibits **one or more** of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (a brief loss of consciousness should be taken seriously)

What Should I Do If a Concussion Is Suspected?

You know that one of the keys to being a good coach is keeping your athletes safe and preparing them for the future—whether it is learning good teamwork or honing their athletic skills. But you also know that there are *unacceptable risks in sports*, especially when it comes to the brain.

So no matter whether the athlete is a key member of the team or the game is about to end, an athlete with a suspected concussion should be immediately removed from play. To help you know how to respond, follow the "Heads Up" four-step action plan if you suspect that an athlete has a concussion:

1. **Remove the athlete from play.** Look for signs and symptoms of a concussion if your athlete has experienced a bump or blow to the head or body. *When in doubt, sit them out.*

2. **Ensure that the athlete is evaluated by an appropriate health care professional.** Do not try to judge the severity of the injury yourself. Health care professionals have a number of methods that they can use to assess the severity of concussions. As a coach, recording the following information can help health care professionals in assessing the athlete after the injury:

    - Cause of the injury and force of the hit or blow to the head or body
    - Any loss of consciousness (*passed out/knocked out*) and if so, for how long
    - Any memory loss immediately following the injury
    - Any seizures immediately following the injury
    - Number of previous concussions (*if any*)

3. **Inform the athlete's parents or guardians about the possible concussion and give them information on concussion.** This fact sheet can help parents monitor the athlete for sign or symptoms that appear or get worse once the athlete is at home or returns to school.

4. **Keep the athlete out of play the day of the injury and until an appropriate health care professional says they are symptom-free and it's OK to return to play.** After you remove an athlete with a suspected concussion from practice or play, the decision about when to return to practice or play is a medical decision.

How Can I Help Athletes to Return to Play Gradually?

Rest is very important after a concussion because it helps the brain to heal. After a concussion the torn or stretched brain cells need the body's energy to heal. So the more energy an athlete uses doing activities, the less energy that goes to help the brain heal.

That's why ignoring concussion symptoms and trying to "tough it out" often makes symptoms worse. For example, exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games may cause concussion symptoms (such as headache or tiredness) to reappear or get worse. So only when an athlete's symptoms have reduced significantly, in consultation with their health care professional, should he slowly and gradually return to daily activities, such as school. Physical **and** cognitive activities—such as concentration and learning—should be carefully managed and monitored by a health care professional.

Progressive Return to Activity Program:

An athlete should return to sports practices under the supervision of an appropriate health care professional. When available, be sure to work closely with your team's certified athletic trainer.

Below are five gradual steps that you and the health care professional should follow to help safely return an athlete to play. Remember, this is a gradual process. These steps should not be completed in one day, but instead over days, weeks, or months.

Step 1: Begin with light aerobic exercise only to increase an athlete's heart rate. This means about 5 to 10 minutes on an exercise bike, walking, or light jogging. No weight lifting at this point.

Step 2: Continue with activities to increase an athlete's heart rate with body or head movement. This includes moderate jogging, brief running, moderate-intensity stationary biking, moderate-intensity weight lifting (reduced time and/or reduced weight from the athlete's typical routine).

Step 3: Add heavy non-contact physical activity, such as sprinting/running, high-intensity stationary biking, regular weight lifting routine, non-contact sport-specific drills (in three planes of movement).

Step 4: Athlete may return to practice and full contact in controlled practice.

Step 5: Athlete may return to football competition.

As a coach, you should pay careful attention to an athlete's symptoms, as well as the athlete's thinking and concentration skills at each stage of activity. Any symptoms should be reported to their health care provider. If an athlete's symptoms come back or he gets new symptoms as he becomes more active at any stage, this is a sign that the athlete is pushing himself too hard. An athlete should only move to the next level of activity if he does not experience any symptoms at each level. If an athlete's symptoms return, he should stop these activities and the athlete's health care provider should be contacted. After more rest and an okay from his health care provider, the athlete should return to the first level and he should then restart the program gradually.

How Can I Help Prevent and Prepare for Concussions?

Insist that safety comes first. No one technique or piece of safety equipment is 100 percent effective in preventing concussion, but there are things you can do to help minimize the risks for concussion and other injuries. For example, to help prevent injuries, ensure that athletes:

- Practice "Heads Up" football—never lower your head during a hit.
- Use proper techniques in blocking and tackling. Learn and apply the fundamentals.
- Follow the rules of play and practice good sportsmanship and self-control at all times.
- Wear properly-fitted helmets and protective equipment. Helmets and other protective equipment should be well-maintained and be worn consistently and correctly. This includes buckling the chin strap on helmets at all times.
- Understand that helmets can help protect their head and brain, but they are not 100 percent effective in preventing concussions.

Check with your league, school, or district about concussion policies. Concussion policy statements can be developed to include the school or league's commitment to safety, a brief description of concussion, and information on when athletes can safely return to play. Parents and athletes should sign the concussion policy statement at the beginning of the football season.

Involve and get support from other school or league officials—such as principals, certified athletic trainers, other coaches, school nurses, and parent-teacher associations—to help ensure that school or league rules and concussion policies are in place before the first football practice.

WHEN IN DOUBT, SIT THEM OUT

For more information and safety resources, visit: www.cdc.gov/Concussion or www.usafootball.com.

Tackle Progression

BREAKDOWN

BUZZ

HIT POSITION

SHOOT

RIP

Heat Acclimatization

Use the model below to get players acclimated to the heat.

The following are important for understanding the heat acclimatization model:

- Use good judgment. The times listed below are maximum practice times as you acclimate to the heat. Conditions may warrant shorter practice times and intensity.
- Practice is defined as time on the football field (including warm-up, stretching, break time, cool down and any conditioning time), and it should never exceed three hours.
- During the first five days, practices should be limited to two hours.
- A walkthrough is defined as time dedicated to reviewing plays and field positions and should not exceed one hour.
- Heat acclimatization days should be continuous if possible, meaning few days off. However, if your practice schedule is only a few days a week, then remember that the days between your practices (the days off) do not count toward acclimatization days. It will take longer to acclimatize in situations such as this.

Practice Days 1-2

- Practices permitted per day: 1
- Equipment: Helmets only
- Max duration of single practice session: 2 hours
- Permitted walkthrough time (not included as practice time): 1 hour (but must be separated from practice for 3 continuous hours)
- Contact: No contact

Practice Days 3-5

- Practices permitted per day: 1
- Equipment: Helmets and shoulder pads
- Max duration of single practice session: 3 hours
- Permitted walkthrough time (not included as practice time): 1 hour (but must be separated from practice for 3 continuous hours)
- Contact: Contact only with blocking sleds/dummies

Practice Days 6-14

- Practices permitted per day: 2, only every other day
- Equipment: Full equipment
- Max duration of single practice session: 3 hours (a total maximum of 5 hours on double session days)
- Permitted walkthrough time (not included as practice time): 1 hour (but must be separated from practice for 3 continuous hours)
- Contact: Full, 100% live contact

HEAT EXHAUSTION

Recognition

The inability to continue exercise in the heat from either weakness or exhaustion.

May feel hot, tired, sweating a lot, weak, dizzy and don't feel able to continue exercise.

Causes

Excessive fluid losses or electrolyte losses.

Dehydration causes less blood to be available for the working muscles and the skin to give off heat.

Treatment

1. Remove the athlete from activity and put them in a shaded/cool area.
2. Lay the athletes on the ground and raise their legs about 12 inches.
3. Replenish lost fluids.
4. Moderate cooling methods such as ice towels, misting fans, or cold water immersion.

<u>Onsite Action Plan</u>

1. Practices are setup so that a board member with access to the concession stand is onsite
2. 150 long hose to hook up to hydrant
3. 2 20 lb bags of ice

Hydration

When athletes should hydrate

Before Exercise

Hydrate with 16-24 ounces of water or a sports drink.

During Exercise

Have unlimited access to water during exercise/activity.

Be able to drink as much as they want.

Be able to drink for the entire break period if they wish.

Access to sports drinks when exercise is greater than 60 minutes or if exercise is going to be intense and in the heat. To achieve this, it's recommended that all exercise sessions should have predetermined breaks approximately every 15 minutes. The timing and length of breaks should be dependent on the environmental conditions. While athletes may be encouraged or even required to bring their own fluids, as a coach, always make sure extra fluids are available for those who have forgotten or need to refill their water bottles.

Hydration strategies for spring competition

Amy Mills Mon, 03/18/2013 - 10:38am

As warm weather approaches, football players and coaches are starting to pull out the helmets, shoulder pads, blocking shields and lesson plans for spring workouts.

One key to a good football practice is proper hydration.

Throughout training – including before, during and after – players and coaches both must focus on maintaining adequate hydration levels. Drinking plenty of fluids and staying well-hydrated benefits onfield performance while reducing the risk of heat stress or illness.

Hot and humid environments present greater chances for players to have fluid, energy and electrolyte deficits, but staying hydrated remains crucial even during mild early spring weather.

Ewing (N.J.) High School athletic trainer and USA Football Football and Wellness Committee member Dave Csillan provides some hydration tips and rules all football players and coaches should consider before lining up.

The chair of the Athletic Trainers' Society of New Jersey Secondary School Committee, Csillian received a bachelor's degree in physical education from Trenton State College and a master's degree in athletic training from Old Dominion University. He is a member of the New Jersey State Interscholastic Athletic Association Sports Medicine Advisory Committee and the National Athletic Trainers Association (NATA) Liaison to USA Football.

- **How much should you drink before and after activity?** Drink 12 fluid ounces 30 minutes before activity begins. After activity, drink every 20 minutes during the first hour to make up for fluid loss.
- **What should you drink?**Cold water is the best fluid to drink during activity and allows for fast absorption. It's a myth that cold water gives stomach cramps. Sports drinks work well after activity to help replenish lost electrolytes.
- **How much should you drink during exercise?**Children under 90 pounds should drink 5 ounces every 20 minutes, and children more than 90 pounds should drink 9 ounces every 20 minutes.
- **Easy tip:** A child's gulp equals half an ounce of fluid. Therefore, a child 90 pounds or less should drink at least 10 gulps every 20 minutes.
- **What is the thirst response?** Don't allow thirst to be your guide to drinking. By the time you feel thirsty, you are already dehydrated.
- **What color should your urine be?** Your urine should look like lemonade and not apple juice. Urine color can be a non-scientific indicator that the body is becoming, or already is, dehydrated.

Drinking liquids is a necessity. Players and coaches should keep water and sports beverages available during drills and training sequences.

Dehydration signs and symptoms include: feeling fatigued, lack of energy, muscle cramps, headaches, dizziness and thirst.

Coaches should be mindful of keeping their players' hydration in balance.

The best preparation for workouts is coming into practice well-hydrated. Football players need to monitor sweat loss and increase fluid intake as their exercise level increases. Many teams mandate players weighing themselves before and after practice to see how much water weight was lost.

"Heat illness and dehydration are not a 100 degrees Fahrenheit issue. Heat illness has been known to occur in temperatures of 82 degrees Fahrenheit," Csillan said. "When the right combination of air temperature, relative humidity and exercise intensity are present, so is the risk of dehydration and heat illness.

"Altering practices to the training environment, allowing for a gradual increase in exercise intensity and providing proper fluid intake makes dehydration and heat illness 100 percent preventable."

FOOTBALL HELMET FITTING GUIDE

USA Football | Riddell

1. CHECKING HEAD SIZE

- Wrap a cloth measuring tape around the circumference of head
- Measure with tape approximately 1" above the player's eyebrows
- Record measurement
- Use the Riddell® circumference chart below to select proper helmet size
  - If measurement falls between helmet sizes, choose the smaller size

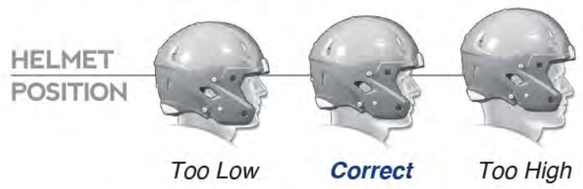
2. PUTTING ON / TAKING OFF HELMET

Putting On Helmet:
- Hold helmet with thumbs over bottom of jaw pads
- Place index fingers into ear holes
- Pull helmet down into position

Taking Off Helmet:
- Unbuckle chin strap from bottom snaps
- Place index fingers into ear holes
- Press thumbs into bottom of jaw pads
- Lift helmet up and off the head

3. ADJUSTING HELMET HEIGHT

- Adjust inflatable pads using a Riddell inflation bulb and a well-lubricated Riddell inflation needle
- Insert needle
- Pump Riddell inflation bulb to achieve proper fit
- Remove needle
- Front of helmet should be approximately 1" above the player's eyebrows



4. ADJUSTING BACK/SIDE LINER

- Inflate for snug, comfortable fit front-to-back and side-to-side

5. ADJUSTING JAW PADS

- Jaw pads should feel firm against the face
- Insert needle into valve at exterior jaw flap
- Inflate jaw pad
- If non-inflatable jaw pads feel loose, change to a thicker size
- If non-inflatable jaw pads feel tight, change to a thinner size

6. CHECKING FOR PROPER FIT

- The skin of the forehead should move with the front pad
  - There should be no room for twisting
- If helmet slides easily over the forehead, inflate helmet liners or try a smaller helmet
- Ensure a proper fit:
  - Interlock hands on top of the helmet and press down
  - Player should feel pressure on crown of head, not brow
  - Pressure on brow indicates improper fit
  - Front of helmet should be approximately 1" above the eyebrows
- To avoid injury or discomfort, never wear a helmet positioned too high or too low

7. ADJUSTING CHIN STRAP

To adjust soft or hard cup chin straps:
- Buckle top and bottom of chin strap into the snaps above and below ear holes
  - Cup should be centered and snug over the chin
  - Adjust chin strap until cup is firmly pressed against chin
- When buckled, helmet should feel comfortable and snug
- Chin straps are available in multiple sizes

VARSITY & YOUTH: Riddell 360, Riddell 360 Youth, Riddell Revolution® Speed, Riddell Revolution® Speed Classic, Riddell Revolution® IQ, Riddell Revolution®, Riddell Revolution® Speed Youth, Riddell Revolution® Speed Classic Youth

HELMET SIZES	Small	Medium	Large	X-Large
HAT SIZE	up to 6 1/2	6 1/2 - 7	7 - 7 1/2	7 1/2 and up
CIRCUMFERENCE	up to 20 3/8"	20 3/8" - 22"	22" - 23 1/2"	23 1/2" and up

YOUTH: Riddell Revolution® Edge, Riddell Revolution® Attack

HELMET SIZES	2X-Small	X-Small	Small	Medium	Large	X-Large
HAT SIZE	6 1/8 - 6 1/4	6 3/8 - 6 1/2	6 5/8 - 6 3/4	6 7/8 - 7	7 1/8 - 7 1/4	7 3/8 - 7 1/2
CIRCUMFERENCE	19 1/2" - 19 7/8"	20" - 20 3/8"	20 3/4" - 21 1/4"	21 5/8" - 22"	22 3/8" - 22 3/4"	23 1/8" - 23 1/2"

YOUTH: Revolution® Attack-i

HELMET SIZES	2X / X-Small	Small / Medium	Large / X-Large
HAT SIZE	6 1/8 - 6 1/2	6 5/8 - 7	7 1/8 - 7 1/2
CIRCUMFERENCE	19 1/2" - 20 3/8"	20 3/4" - 22"	22 3/8" - 23 1/2"

SHOULDER PAD FITTING GUIDE

USA Football | Riddell

1. MEASURE CHEST

- Wrap measuring tape around upper torso
- Record measurements

2. MEASURE SHOULDERS

- Stretch tape over contour of shoulders
- Measure from tip of left humerus to tip of right humerus
- Record measurements

3. SELECT PADS / PUT ON PADS

Select pads:
- Identify player position and select corresponding Riddell® pad style
- Use the Riddell® pad chart below to select proper pad size

Put on pads:
- Bring pads down over head
- Be careful of eyes and nose

4. SECURE STRAPS / LACES

- Connect front and back of pads
- Buckle belts and connect straps (if applicable)
- Establish tight fit in chest and back area

5. CHECK FOR PROPER FIT

- Ensure there is no pinching in collar
- Foam padding should be above tip of humerus (at least one quarter inch)

6. ENSURE COVERAGE IN FRONT

- Pads should cover sternum
- Pads should cover front-upper shoulders

7. ENSURE COVERAGE IN BACK

- Pads should cover scapula
- Pads should cover rhomboid
- Confirm complete coverage
- Confirm optimal range of motion

FLAT PADS: Professional / College / Varsity

PAD SIZES	Small	Medium	Large	X-Large	2X-Large	3X-Large	4X-Large	5X-Large	6X-Large
SHOULDER WIDTH	17" - 18"	18" - 19"	19" - 20"	20" - 21"	21" - 22"	22" - 23"	23" - 24"	24" - 25"	25" - 26"
CHEST CIRCUMFERENCE	38" - 40"	42" - 44"	46" - 48"	48" - 50"	50" - 52"	52" - 54"	54" - 56"	56" - 58"	58" - 60"

* This is only a guide. Athletes' measurements, shoulder pad sizes, and actual fit may vary.

CANTILEVERED PADS: Professional / College / Varsity

PAD SIZES	Small	Medium	Large	X-Large	2X-Large	3X-Large	4X-Large	5X-Large
SHOULDER WIDTH	16" - 17"	17" - 18"	18" - 19"	19" - 20"	20" - 21"	21" - 22"	22" - 23"	23" - 24"
CHEST CIRCUMFERENCE	36" - 38"	38" - 40"	42" - 44"	46" - 48"	48" - 50"	50" - 52"	52" - 54"	54" - 56"

* This is only a guide. Athletes' measurements, shoulder pad sizes, and actual fit may vary.