

# Field Art Football Club

(Operated by Field Art Soccer Association)

## Risk Management Policy

November 12, 2021



It is the responsibility of the directors of the Field Art Soccer Association and the Association's coaches, other staff, and volunteers (each of whom is hereafter referred to as an "Adult Official") to take all reasonable actions in their respective roles with the Association to ensure the wellbeing and safety of the children and youth participating in Field Art programs. This includes doing the things set out in this policy and adhering to the other Field Art policies and codes of conduct, which may apply to each role.

**Children and youth registered with the Association as players must adhere to those parts of this policy and other policies of the Association that apply to their behaviour when interacting with:**

1. each other;
2. Adult Officials;
3. match officials (for example, referees, assistant referees, field marshals, and tournament officials);
4. the players on teams from other organizations with whom they interact on and off the field of play.

**Parents of children and youth registered with the Association as players must adhere to those parts of this policy and other policies of the Association that apply to their behaviour when interacting with:**

1. each other;
2. Adult Officials;
3. match officials (for example, referees, assistant referees, field marshals, and tournament officials);

4. all children registered with the Association and with other organizations with whom they interact on and off the field of play.

This Policy includes the following parts:

- Criminal Record Checks
- Code of Conduct to Protect Children
- Emergency Action Plan
- Concussion Protocol
- Field Inspection Protocol

## **Criminal Record Checks**

No person shall be eligible to be an Adult Official unless they have first provided the Risk Management Officer with a criminal record check of that person whose check is not more than 12 months old. Criminal record checks must be of a sort accepted by the British Columbia Soccer Association (“**BC Soccer**”), as set out in BC Soccer’s current Criminal Record Check Policy.

All Adult Officials will submit to a criminal record check and direct that a copy be sent to the Risk Management Officer once each year, or anytime at the request of the Risk Management Officer.

## **Code of Conduct to Protect Children**

This code of conduct is based on the template developed by Commit to Kids , as <sup>1</sup> recommended by Canada Soccer .<sup>2</sup>

### **Introduction**

Field Art Soccer Association, operating as Field Art Football Club (“Field Art” or the “Association”), has developed the following Child Protection Code of Conduct to guide our directors, employees, and volunteers (“Adult Officials”) in their interactions with children. The safety, rights and well being of children we serve are at the core of our daily programs. We nurture supportive relationships with children while balancing and encouraging appropriate boundaries.

### **Why a Child Protection Code of Conduct is important?**

Our organization is committed to ensuring all children are protected and safe. A Code of Conduct is an important part of creating safe environments for children. The safety, rights and well-being of children participating in our programs is a priority in our daily operations. The intent of the Code of Conduct is to guide our Adult Officials in developing healthy relationships with the children involved in sport programs delivered by our organization and to model appropriate boundaries for children.

[commit2kids.ca](http://commit2kids.ca)<sup>1</sup> [canadasoccer.com](http://canadasoccer.com)<sup>2</sup>



# Treating Children With dignity and Maintaining Boundaries

## All Adult Officials must:

- Treat all children with respect and dignity
- Establish, respect, and maintain appropriate boundaries with all children and families involved in activities or programs delivered by the organization.

It is important to monitor your own behaviour towards children, and pay close attention to the behaviour of your peers to ensure that behaviour is appropriate and respectful, and will be perceived as such by others.

## All of your interactions and activities with children:

- should be known to, and approved by the Field Art board, where applicable, and the parents of the child
- tied to your duties, and
- designed to develop the child's skills in the sport program Always consider the child's reaction to any activities, conversations, behaviour or other interactions. **If at any time you are in doubt about the appropriateness of your own behaviour or the behaviour of others, you should discuss it with the Association's Risk Management Officer .** <sup>3</sup>

Examples of unacceptable behaviour toward a child:

- embarrassing
- shaming
- blaming
- humiliating
- putting them down

## General rules of Behaviour

### Adult Officials must not:

- Engage in any sort of physical contact with a child that may make the child or a reasonable observer feel uncomfortable, or that may be seen by a reasonable observer to be violating reasonable boundaries.
- Engage in any communication with a child within or outside of duties with the child, that may make the child uncomfortable or that may be seen by a reasonable observer to be violating reasonable boundaries.
- Engage in any behaviour that goes against (or appears to go against) the organization's mandate, policies, or Code of Conduct to Protect Children, regardless of whether or not they are serving the organization at that moment.



- Conduct their own investigation into allegations or suspicions of potentially illegal or inappropriate behaviour – it is an Adult Official’s duty to report the matter to the Risk Management Officer, Child Welfare Agency, or law enforcement, not to investigate.

Field Art’s website, [fieldartfc.com](http://fieldartfc.com), lists the members of the board and staff, including the<sup>3</sup> Risk Management Officer.

## **What Constitutes inappropriate Behaviour**

Inappropriate behaviour includes:

### **1. Inappropriate Communication.**

Communication with a child or his/her family outside of the context of duties for the organization, regardless of who initiated the exchange. For example:

- Personal phone calls not tied to duties with the child
- Electronic communications (email, text message, instant message, online chats, social networking including “friending”, etc.) not tied to duties with the child
- Personal letters not tied to duties with the child
- Excessive communications (online or offline)

### **2. Inappropriate Contact.**

Spending unauthorized time with a child outside of designated duties with the organization.

### **3. Favouritism.**

Singling out a child or certain children and providing special privileges and attention. (for example, paying a lot of attention to, giving or sending personalized gifts, or allowing privileges that are excessive, unwarranted or inappropriate.)

### **4. Taking Personal Photos/Videos.**

Using a personal cell phone, camera or video to take pictures of a child, or allowing any other person to do so, as well as uploading or copying any pictures you may have taken of a child to the Internet or any personal storage device. Pictures taken as part of your job duties are acceptable, however, the pictures are to remain with the organization and not be used by you in a personal capacity.

Inappropriate behaviour also includes:



**5. Telling sexual jokes to a child, or making comments to a child that are or is in any way suggestive, explicit or personal.**

**6. Showing a child material that is sexual in nature, including, signs, cartoons, graphic novels, calendars, literature, photographs, screensavers, or displaying such material in plain view of a child, or making such material available to a child.**

**7. Intimidating or threatening a child.**

**8. Making fun of a child.**

### **Inappropriate behaviour will not be tolerated.**

Whether or not a particular behaviour or action constitutes inappropriate behaviour will be a matter determined by the Association having regard to all of the circumstances, including past behaviour, and allegations or suspicions related to such behaviour.

### **Reporting requirements**

All Adult Officials must report suspected child sexual abuse, inappropriate behaviour or incidents that they become aware of, whether the behaviour or incidents were personally witnessed or not.

#### Where to report:

1. All allegations or suspicions of potentially illegal behaviour (for example, child sexual abuse) that an Adult Official witnesses first-hand, must be promptly reported to police and/or child welfare.
2. To ensure the protection of all children in our care, all allegations or suspicions of **potentially illegal behaviour** that an Adult Official learns of must also be promptly reported to police and/or child welfare. Police and/or child welfare will make the determination as to whether the allegation or suspicion requires further investigation.
3. All allegations or suspicions of **inappropriate behaviour** (see above examples), that an Adult Official learns of or witnesses first-hand, must be reported to the Risk Management Officer.

Keep in mind that you may learn of potentially illegal or inappropriate behaviour through the child or some other third party, or you may witness it first-hand. Examples of the type behaviour you may learn of or witness and that you must report as set out above includes:

- a. Potentially Illegal behaviour by an Adult Official
- b. Potential Illegal behaviour by a third party, such as a Parent, Teacher, Babysitter,



Coach

**If you are not sure whether the issue you have witnessed or heard about involves potentially illegal behaviour or inappropriate behaviour, discuss the issue with the Risk Management Officer who will support you through the process. Remember: You have an independent duty to report all suspicions of potentially illegal behaviour directly to police and/or child welfare.**

## **Follow up on reporting**

When an allegation or suspicion of potentially illegal behaviour is reported, police and/or a child welfare agency will be notified. Field Art will follow up internally as appropriate.

When an allegation or suspicion of inappropriate behaviour is made, Field Art will follow up on the matter to gather information about what happened and determine what, if any, formal or other disciplinary action is required, pursuant to the Association's Discipline and Ethics Policy.

In the case of inappropriate behaviour, if:

- multiple behaviours were reported
- inappropriate behaviour is recurring, or
- the reported behaviour is of serious concern

Field Art may refer the matter to a child welfare agency or police.

## **Emergency Action Plan**

This plan is to be used in the event of a medical emergency or a threat to the safety of persons present at an event conducted by Field Art Football Club, operating as Field Art Soccer Association ("Field Art " or the "Association").

The person responsible for activating this plan is the first aid attendant, or, if the first aid attendant is unavailable the Risk Management Officer. If neither the first aid attendant nor the Risk Management Officer is available, another member of the Association's board, staff, or volunteers (each of whom is an "Adult Official") is responsible for activating the plan.

A copy of this plan should be kept with each first aid kit and each coach's equipment.

## **Medical Emergencies**

If a person at a Field Art event suffers a medical emergency, which, in the opinion of the first aid attendant or other responsible person:

- constitutes a threat to the person's life;



- is beyond the first aid attendant's knowledge or skill to treat;
- otherwise requires medical help.

The first aid attendant or other responsible person will instruct an Adult Official to telephone 911 and stay on the phone with the 911 operator to answer the operator's questions, to liaise between the operator and the first aid attendant, and to provide medical assistance as directed by the operator. The operator will need to know the location of the injured person.

Field Art currently operates at the following locations:

- **Harwood Park:** 5251 Hardwick Street, Burnaby.
- **Futbol 5:** 109 Braid Street, New Westminster - Building C (take a left turn immediately past the gates and follow the road up the hill and to the end).
- **Kisbey Park:** 6348 Dufferin Avenue, Burnaby.

The Adult Official on the phone with the operator will:

- instruct another Adult Official or responsible adult to go to the nearest street to await ambulance paramedics and direct them to the injured person; and
- instruct a third Adult Official or responsible adult to ask all persons not otherwise mentioned in this plan to stay well clear of the emergency and the path between the nearest street access and the emergency.

Each Adult Official present at the scene of the emergency will follow the instructions of the first aid attendant, paramedics, police, the Risk Management Officer, and any other Adult Official assisting with the Emergency Action Plan.

## Threats to Safety

If an Adult Official perceives an imminent threat to the safety of a person present at a Field Art event, that Adult Official must alert the Risk Management Officer and the nearest coach.

The Risk Management Officer or coach will:

- instruct persons present to move to a safe location (for example, away from a fire);
- phone 911 and stay on the phone with the 911 operator to answer the operator's questions.

The operator will need to know the location of the threat. Field Art currently operates at the following locations:

- **Harwood Park:** 5251 Hardwick Street, Burnaby.
- **Futbol 5:** 109 Braid Street, New Westminster - Building C (take a left turn immediately past the gates and follow the road up the hill and to the end).



- **Kisbey Park:** 6348 Dufferin Avenue, Burnaby.

### After Emergency Report

Whenever the Emergency Action Plan is activated, the Risk Management Officer must record the nature, time, and location of the emergency and the steps taken and include that information in a report to the Association's board as soon as possible.

## Concussion Protocol

At the beginning of each season (April and August), players, with their parents or guardians, must indicate that they have read and understand this protocol.

The following is taken from Vancouver Coastal Health's *My Guide: Concussion*  
<https://concussion.vch.ca/>

### What is a Concussion?

A concussion, or mild traumatic brain injury (mTBI), may be caused by a blow to the head or a jolt to the body, resulting in rapid movement of the brain inside the skull. Not every hard impact causes a concussion, but a concussion is suspected when the injury disrupts brain functioning, at least temporarily.

This disruption may or may not include a brief loss of consciousness. Other signs may include confusion or disorientation (e.g., not sure where you are) after the impact or an inability to remember what happened right after the injury (amnesia). Temporary problems with how the brain cells are communicating with each other are thought to cause these behaviour changes.

### What is NOT a Concussion?

A loss of consciousness lasting longer than 30 minutes, or confusion or amnesia lasting longer than 24 hours, may indicate a more severe traumatic brain injury, not concussion/mTBI. The information on this site is specific to concussion/mTBI and does not cover the management for a moderate or severe traumatic brain injury.

### Recovery is Likely

Most people experience a full recovery and return to their pre-injury activities within a





month or less. However, the speed of recovery can vary and may sometimes be slower. Your health care provider may ask you for more information to determine if you have risk factors that can increase the chance of a slower recovery, but no one will be able to tell you for certain exactly how long it will take.

## **Key Recovery Recommendations**

Immediately after your injury, it is helpful to let your brain rest for a day or two. After this initial period of rest, research suggests that gradually returning to activities “as tolerated” is the best approach for optimal recovery.

*MyGuide: Concussion* covers the following key recommendations for concussion recovery in more detail:

1. Managing stress.
2. Promoting healthy sleep patterns.
3. Avoiding alcohol and recreational drugs.
4. Taking steps to actively manage your symptoms.
5. Gradually returning to activities *as tolerated*.
6. Looking after your general wellness.
7. Reducing risk of a second injury.

## **Common Symptoms After Concussion**

Common symptoms after concussion fall under three different types - physical, cognitive and emotional:



<b><u>Emotional</u></b>	<b><u>Physical</u></b>	<b><u>Cognitive</u></b>
<ul style="list-style-type: none"> <li>• Sadness</li> <li>• Frustration</li> <li>• Nervousness or anxiety</li> <li>• Anger</li> <li>• Irritability</li> <li>• Restlessness</li> </ul>	<ul style="list-style-type: none"> <li>• Headaches</li> <li>• Nausea</li> <li>• Sensitivity to light or noise</li> <li>• Dizziness</li> <li>• Fatigue</li> <li>• Blurred vision</li> <li>• Ringing in the ears (Tinnitus)</li> <li>• Sleep disturbances</li> </ul>	<ul style="list-style-type: none"> <li>• Fogginess</li> <li>• Difficulty thinking</li> <li>• Slowness in thinking</li> <li>• Difficulty concentrating and remembering</li> </ul>

## **Recovery of Symptoms After Concussion**

Not everyone will experience all of these symptoms. Your concussion recovery should follow a typical pattern of improvement in **your** symptoms and daily function over time. Symptoms can fluctuate from day to day or week to week. These fluctuations, or “good days” and “bad days”, are common and expected.

Symptoms can be related to other physical injuries, psychological factors, or a separate health condition. Symptoms can also be caused by other conditions related to your injury (e.g. sleep or mood issues). They even occur in healthy people sometimes, and many people have some of these symptoms before a concussion. Symptoms that you had before the concussion might be worsened while you are recovering.

**If you suspect that you have suffered a concussion, see your doctor or other independent medical professional.**

## **Managing Symptoms Can Help Recovery**

It will be important to work with your health care providers to address your symptom management. Over time, different problems, such as sleep difficulties, stress, changes in mood, headaches, or pain can interact to keep each other going. Work with your family doctor to identify which symptoms areas may be best to focus on for treatment.

## **Self-Management Strategies Can Help Recovery**

The good news is there are things you can do to take control of your recovery! In the *Becoming a Self Manager* section we help you understand how self-management strategies can help with concussion recovery. Many of these strategies can help with all of your



symptoms. Additional information about specific symptom areas and management strategies are outlined in the *Symptom Areas* section.

In some cases, short term medical management or rehabilitation may be helpful for managing symptoms. Self-management strategies are an important part of your concussion recovery that should be used together with medical and rehabilitation treatments from other health professionals.

## When to Seek More Help

While symptom fluctuations are common and expected, you should consult a family doctor if you are concerned about symptoms that are not improving or if new symptoms arise.

A family doctor can:

- Assess for another medical condition causing or contributing to your symptoms
- Treat common co-occurring conditions that can influence recovery (depression, insomnia, etc.)
- Guide you on how to get back to activities
- Refer to other health care professionals

**If you or your coach suspects that you may have suffered a concussion, you may not return to any Field Art activity until you have been cleared to do so by your doctor or nurse practitioner. Before you can return to training or competition, you must provide Field Art's Risk Management Officer with written evidence that you have been cleared to return to play by your doctor or nurse practitioner.**

## Making a Plan for Return to Soccer

There are helpful steps to follow when returning to soccer. It is generally best to start with light non-contact exercise such as going for a walk or jog. When you feel well during and after light exercise, you may be ready to move on to the next step.

The next step is to gradually return to training. You may start with warm up drills then progress to higher level skills and drills. If you feel ready, you can participate in scrimmages and multi player drills where other players are not allowed to have any body contact with you.

## Competitive Play and Contact Training

You can return to contact training and competitive play once you have been cleared to do



so by your doctor or nurse practitioner.

Remember that the return to sport process and your symptoms should be continually monitored by yourself and your health care provider even after you have been “cleared”.

## Are You Really Ready to Return to Soccer?

There are questions to consider before returning to sports. Complete this "Self-Checklist of Readiness" to help you determine whether you may be ready:

- Has my health care provider(s) “cleared” me to return to play?
  - Am I able to run or use a stationary bike for 30 minutes without any symptoms?
  - Have I tried more vigorous activities such as sprinting or jumping?
  - Have I tried sport-specific drills or balance and agility exercises?
  - Have I attended non-contact practice successfully?
  - Is my fitness level back to where it was before my injury?
  - Have I returned to other activities in my life successfully that are important to me?
- If your answer is no to any of the above, it is important to speak with your healthcare provider. Your league may have specific policies and rules for returning to play after a concussion.

I have reviewed this concussion protocol with my child and I understand our obligations under the protocol and the conditions for my child’s return to Field Art activities after suffering a concussion.

Child’s name: \_\_\_\_\_

Name of parent of guardian: \_\_\_\_\_

Signature of parent of guardian: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_.

## Field Inspection Protocol

Prior to the start of a Field Art event, an Adult Official must inspect the field to be used for hazards. A hazard includes objects on the field, holes in the field, and any objects, such as structures, trees, branches, which may fall onto the field. Weather may also pose a hazard.

## Non-Weather Related Hazards

Any hazards that can be safely remediated must be remediated. If there are any hazards that cannot be safely remediated, the Adult Official must contact the organization responsible for maintaining the field (see below) and advise them of the nature of the hazard and advise the Technical Director or a coach.



If there are any hazards that cannot be safely remediated by an Adult Official but can be remediated by the organization responsible for maintaining the field in a timely manner, the Technical Director or coach will advise the referee (if present) and the head coach of any teams from other organizations present.

If there are any hazards that cannot be safely remediated by an Adult Official and cannot be remediated by the organization responsible for maintaining the field in a timely manner, the Technical Director or coach will advise the referee (if present) and the head coach of any teams from other organizations present and the event will be postponed or abandoned in accordance with any applicable rule or policy of the league or association under which the event is sanctioned.

## **Weather Related Hazards**

The current Canada Soccer Lightning Safety / Severe Weather Policy applies to Field Art events.<sup>4</sup>

[canadasoccer.com](http://canadasoccer.com)<sup>4</sup>

