The information in this handbook comprises many different aspects of Risk Management. All information and guidelines may be adopted to meet the needs of your LSC or Club.

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CHAPTER 1: OVERVIEW

Section 1a: Introduction

This manual is a compilation of articles, ideas, and checklists to act as guidelines for risk management and safety in USA Swimming programs. It is not a cookbook for safety; however, at all times safety is the goal. Knowledge, planning and work are required to achieve the goal. The material in this manual is designed to help you with ideas and concepts and by describing protocols/tasks to enhance safety in swimming.

The objective of any athletic competition is to determine the winner. The goal of an athlete is to be that winner. The safety goal is to have no injuries or accidents during training and/or competition in seeking victory. Risk management focuses on achieving the goal of winning with minimal risk to athletes, coaches, officials and spectators in all USA Swimming activities.

A risk management/safety program must comprehensively cover all aspects of our sport including travel to and from the pool, in water activity, dryland training, locker room activity, team activities and avoidance of child predators (this concern is now addressed by Safe Sport). Obviously, a single person (Chair, Coordinator, Marshal, Coach, etc.) cannot be all places at all times. An important component of risk management/safety is raising awareness of all involved in our sport. Simply stated, education. When everyone looks out for safety, we can minimize the athlete’s risk of harm during training and competition.

Most of our athletes are minors, not of legal age to consent to risk nor aware of the consequences of risky behaviors. As Administrators, Officials and Coaches we must have the high goal of protecting the athletes from known and unknown risks and from seen and unseen dangers. Our efforts must also protect all other participants, including competition spectators. Success is simply defined: Seeing everyone leave a swimming venue accident and injury free every time.

Section 1b: Interaction of USA Swimming and the Operational Risk Committee

The Operational Risk Committee (“Committee”) is the volunteer arm of USA Swimming charged with reviewing USA Swimming policies and procedures for risk management, operational risk and safety considerations. The Committee includes volunteers, athletes, representatives of our safety partners (American Red Cross and the Y) and USA Swimming’s insurance broker plus a staff liaison. The Committee develops guidelines and makes recommendations for training, competition and other activities based on accident statistics from the Reports of Occurrence and from developing exposures that may cause harm.
Section 1c: Accident Statistics

USA Swimming compiles accident statistics based on the Reports of Occurrence filed across the organization to identify where accidents are happening, who is being injured and what are the causes. By analyzing this information, the Committee can make recommendations and develop specific programs based on real versus perceived needs. Effective risk management and safety/loss control programs require accurate and complete data. Completion and submittal of online incident reports by member clubs for every accident and injury is a key factor in collecting comprehensive data that accurately reflects what is happening throughout USA Swimming.

Section 1d: Definitions: Risk Management, Safety and Loss Control

Risk Management is the practice of identifying the exposure to risk and taking steps to avoid or decrease the risk.

Safety is defined as freedom from danger, risk or injury.

Loss Control is a risk management technique to reduce the possibility a loss will occur or reduce the severity of those that do occur.

• Safety is our highest goal. Other concerns cannot supersede safety.

• Everyone in USA Swimming must be dedicated to the goal of risk management and safety across the organization. The best efforts of some cannot alleviate risks if others shirk their duty.

• If a program or activity cannot be run safely, it should not be continued. The fact that an accident has not occurred is not a reason to continue a program or activity with known risks.
CHAPTER 2: LSC OPERATIONAL RISK CHAIR

Section 2a: The Role of the LSC Operational Risk Chair

It is the LSC Operational Risk Chair's responsibility to promote safety throughout the LSC swimming community and to promote safety as a part of the LSC philosophy. The LSC Operational Risk Chair is the "point person" in the communication network between the national organization and the grassroots efforts. It is the Chair who contacts the National Headquarters with safety questions and concerns, relays policy decision to the LSC and directs the LSC's Operational Risk program. A strong leader in this position spells success for the LSC's overall Operational Risk program. Duties may include:

- Chair a committee that develops Operational Risk education programs for the LSC and makes recommendations to the LSC Board of Directors.
- Serve as liaison between USA Swimming/LSC and Club Operational Risk Coordinators.
- Provide reports of injuries within the LSC at each LSC Board and House of Delegates meeting as requested.
- Provide input and periodically reviews LSC warm-up guidelines.
- Arrange and/or conduct water safety training opportunities as needed in the LSC.
- Communicate regularly with Club Operational Risk Coordinators.
- Contact USA Swimming, with knowledge of the General Chair unless otherwise agreed to, with safety questions and concerns.
- Disseminate safety information and required forms to all member clubs, coaches and officials of the LSC.
- Provide information for compliance with USA Swimming National rules and LSC rules.
- Review and refine the LSC safety programs and club level programs.
- Promote safety as a topic to be discussed at coaches and official’s pre-meet meetings.
- Prepare and distribute facility checklists, safety checklists and emergency action plans to be used by clubs.
CHAPTER 3: CLUB SAFETY

Section 3a: The Role of the Operational Risk/Safety Coordinator

Each USA Swimming club should designate a registered member of USA Swimming to be the Club Operational Risk Coordinator responsible for distribution of education information received from USA Swimming and the LSC to the club’s athletes, coaches and other members, and to make recommendations to the club concerning operational policy and implementation. The Club Operational Risk Coordinator should contact the LSC Operational Risk Chair and make any reports requested by the LSC Operational Risk Chair.

A safety plan specific for each facility should be developed. In addition to reviewing the club’s safety plan, the Club Operational Risk Coordinator may be involved in pool inspections to identify dangerous conditions and implement processes to correct situations. The Coordinator may also educate volunteers to serve as swim meet Operational Risk Officer or Marshal.

The Club Operational Risk Coordinator should be informed of every safety incident, accident or injury involving any of the club’s members or facilities and work with the coaches, parents, board, and meet management staff to ensure timely completion and submittal of the Report of Occurrence form.

Section 3b: Legal Issues for USA Swimming Clubs

When joining USA Swimming, Clubs have obligations and duties to protect themselves, their members and USA Swimming. Below are several items of which the club must be aware. LSC Operational Risk Chairs should disseminate and reinforce this information at all levels.

Compliance with USA Swimming Rules. To remain in good standing with USA Swimming, every Club has an obligation to comply with the rules and regulations of USA Swimming. These rules relate to sanction of meets, proper registration of coaches and athletes, implementation of safety programs, compliance with membership requirements and other obligations as set forth in the rules and regulations of USA Swimming. All athletes and all coaches must be current USA Swimming members.

Club Organization. Each Club is an autonomous body organized and operated under the laws of its state. Regular reviews should be conducted to be sure that the Club is in total compliance with state laws governing its operation. Regular review by the Club’s legal counsel would be valuable for protection of the officers, board members and employees of the Club. Purchase of separate Directors and Officers Management Liability insurance (D&O) should be considered to protect the non-profit board of directors from personal liability. USA Swimming does not provide D&O as part of the liability insurance program furnished to the club’s as a benefit of membership.
Section 3c: Facility Contracts

Almost every USA Swimming Member Club is a party to a contract with an owner of a swimming pool, public or private. Almost all USA Swimming members, including LSCs and the national organization itself, will, at one time or another, enter into contracts for the use of a swimming venue for a meet or other authorized aquatic activity.

Such contracts will contain language with regard to the liability of both parties during the use of the facility. The owner will usually include indemnification and hold-harmless clauses on liability for bodily injury and property damage resulting from the negligence of the USA Swimming member, its officers, agents and employees.

It will be impossible to avoid such releases or waivers couched in general language. The owners, or their attorneys, will insist on this. The Insurance Summary and Frequently Asked Questions available on USA Swimming’s website – usawimming.org/insurance, insurance documents and forms section, includes a section on facility contracts. Be certain to pay special attention to the highlighted language.

It is extremely important that a USA Swimming member does not sign a contract containing language which indemnifies or exculpates (clears from alleged fault or guilt), the owner from liability for damages resulting from the negligence of the owner or its agents and employees. Such language may or may not be valid in your state. If it is, it is usually subject to strict construction.

If you see the following language, anything like it or are in doubt on contract language, consult local legal counsel at once before signing the agreement:

“Club (LSC) agrees to indemnify Owner against all liability loss, or other damage claims or obligations because of or arising out of personal injury or property damage, related to Club’s use and occupancy of the premises, including that caused by the negligence of the Owner or its agents or employees.”

Keep in mind the following when entering into an Agreement:

- Agreements usually contain indemnification and hold-harmless language addressing injuries and property damage resulting from the Club’s/ LSC’s negligence.
  - Club/LSC should accept only its negligence
  - The Club/LSC should not sign an Agreement indemnifying or exculpating (clears from alleged fault or guilt) the pool owner from the owner, its agents or its employees’ negligence
- Do not accept an Agreement that shifts the Owner’s negligence to your Club/LSC
- When in doubt about the Agreement language contact either the Director of Risk Management, USA Swimming (George Ward) or Risk Management Services (Sandi Blumit)
Here are two examples from executed Agreements – which wording would you approve?

1. You agree to indemnify, defend and hold harmless the Pool Owner (e.g., a public entity) and its elected officials, agents, servants and employees from any loss, damages, suits, claims, demands, cost, charges, attorney’s fees and settlement costs as a result of (i) the breach of any representation, warranty, term or condition of this Agreement; and (ii) any personal injury, bodily injury, property damage or wrongful death arising out of or in any way related to the use of the Premises by Club/LSC.

2. You shall indemnify, hold harmless and defend the Pool Owner (e.g., a public entity) and its Council members, agents, officials and employees against any and all claims, costs, demands, causes of action, suits, losses, expense or liability arising from or out of the acts or omission of the Club/LSC it agents, sub-contractors, officials or employees under this Agreement.

The preferred wording is #2 – the Club/LSC is accepting its liability and holding the Facility responsible for its liability. The wording in #1 transfers the Facility’s liability to the Club/LSC, which is not desirable from the Club/LSC perspective. All member clubs that enter into contracts for the use of facilities owned by others must be careful while reviewing the indemnity and hold harmless language that is used.

CHAPTER 4: FACILITY SAFETY CONSIDERATIONS

Section 4a: Emergency Planning

Accidents seldom “just happen,” and many can be prevented. According to the National Safety Council, 85 percent of all accidents are preventable; accidents that might have occurred are prevented or reduced by those who develop and execute risk management plans and loss control programs.

WHY HAVE A PLAN? Accidental injuries in sports may result in high dollar litigation, making attention to safety especially important. With a risk management plan and ongoing loss control activities, you will be taking a proactive approach to managing accidents. You will project an attitude that says:

• We are knowledgeable professionals.
• We are concerned for your safety.
• We will do what is necessary to provide a safe environment.

A risk management plan is also extremely important in the event of legal action. A proactive program shows intent, serves as a deterrent to legal action, and acts as evidence of responsible care.
Other benefits include:

- Increased safety for all participants.
- Reduced losses to USA Swimming.
- Easier monitoring of claims, losses and insurance coverage.
- High appeal of swimming to potential participants.

WHO IS RESPONSIBLE FOR THE PLAN? There is an old adage that states, “Everyone’s responsibility is no one’s responsibility.” There is irony in that statement when it comes to risk management, because for a plan to work, everyone in the organization needs to be involved. No risk management program can be successful without the complete cooperation and understanding of all members.

USA Swimming shows its commitment to safety and risk management in all areas of the organization. At the national level, USA Swimming has established the Operational Risk Committee, a standing committee. The committee’s role is to determine the best method to develop and monitor a risk management plan and loss control program. Since this program began in 1984 as a task force, it has had a powerful impact on policies and procedures adopted within USA Swimming. Established in 1984 as the Safety Education Committee, the Committee was renamed the Operational Risk Committee in 2011 to better reflect the broader risk management activities of the committee for which safety education is a critical element.

The Local Swimming Committee (LSC) and its LSC Operational Risk Chair play a vital role in risk management planning and safety/loss control execution. The LSC Operational Risk Chair generally has the most influence and control over habits and attitudes throughout the local area. The LSC Operational Risk Chair is responsible for providing leadership in coordinating training and distributing information to all member clubs, coaches and officials in the LSC. A strong leader in this position will spell success for the LSC’s overall risk management and safety program.

When events are held the Club Operational Risk Coordinator, Meet Director, Meet Referee, Safety Marshals and Club coaching staff must address safety as a top priority to be effective.

To ensure that all swimmers are aware of the concerns for their safety and of their role in their safety, it is recommended that the swimmers are active participants in the safety program. LSC Operational Risk Chairs and Club Operational Risk Coordinators should encourage swimmers to discuss any area they perceive to be a problem so immediate corrective steps can be taken.

DEVELOPING THE PLAN. A risk management plan and loss control program should contain procedures in prevention, safety inspections, safety meetings, proper care of the injured party and supervision of the facility. Every type of emergency that could occur should be considered when planning for emergencies. A detailed plan should be put in
writing and thoroughly reviewed and practiced by all members involved.

When developing a plan consider:

**Safety Rules and Regulations:** Establish and adhere to rules and regulations. Facility and USA Swimming policies are designed to minimize the risk of injury.

Assemble all the safety rules and regulations pertaining to the facility and USA Swimming. This includes but is not limited to state and local laws on Concussion Management programs and facility/local Lifeguard requirements. Review all rules and regulations and the procedures used to enforce them. Post and/or publish appropriate rules and procedures, e.g., warm-up procedures. Review the facility’s signage, including directional and warning, and ensure it is adequate and meets current regulations.

The following is from the American Red Cross Safety Training for Swim Coaches Manual: (All suggestions should be adapted to meet the needs of your club or LSC)

“Various types of emergencies can occur at an aquatic facility, even at one that is well supervised. Handling these emergencies is the responsibility of everyone involved, such as lifeguards, coaches and facility management. Consequently, every facility should have written, practiced procedures that are specific to every potential accident or emergency. Any delay during an emergency situation can cause additional injury or death. In the initial development of an emergency plan, the pool or facility management should consider every type of emergency, both life-threatening and non-life-threatening, that could occur at the facility. A detailed plan for emergencies should be put in writing in the operations manual for facility staff. The plan should be thoroughly reviewed and practiced regularly by all staff members.”

Accident prevention begins with managing risks and implementing loss control programs at your facility as well as any activity that occurs in or around your facility. Develop a procedure for handling different types of emergencies and adapt it to all settings.

**Section 4b: Emergency Procedures**

It is important to construct a general plan that will help you handle emergencies. Key components of the plan should include:

- **Communication System:** How will you get the attention of others during an emergency? Where is the nearest phone located? What numbers do you call?

- **Rescue Equipment:** Is rescue equipment easily accessible? Does everyone know how to use it? Is it adequate to meet the needs for the event being held?
• **Accessibility of the Facility**: Plan how rescue personnel can enter the pool facility most quickly. If it is via a locked gate, who has the keys? Work with your local rescue personnel to do a dry run.

• **Emergency Support Personnel**: Who is expected to respond to an emergency? Have they been trained in CPR, First Aid, and water rescue skills?

• **Incident Reporting**: USA Swimming requires that all incidents occurring during meets, practices or club functions be reported online at usaswimming.org/ROO.

Section 4c: Developing an Emergency Action Plan

• **Public Safety Personnel**: Public safety personnel should be consulted and involved in the development of emergency plans. Police, fire and EMS personnel can provide valuable information about response times, lines and limits of authority and the amount and types of assistance that are available and that may be needed. Emergency personnel who are expected to respond to a call from a facility should be given clear directions on how to find and approach the facility. The directions to the facility should be posted by the telephone, enabling anyone to direct safety personnel to the facility. The participation of public safety personnel will help to establish a smooth transition process for the victim and all of the staff who are involved in an emergency.

**First Aid Area**: An area should be designated for first aid care for all victims of accident or illness. When there is no danger of causing further injury, victims should be moved to the First Aid area as soon as possible. The area should be as private as possible, with easy access for rescue personnel. The location of the first aid area should be known to all staff. All personnel and equipment that will be used in this area should be specified so that there will be no confusion during an emergency. This area should have clear identification, such as "Emergency First Aid Room."

**Equipment**: All rescue and first aid equipment should be inspected on a regular basis and should be easily accessible. Any piece of equipment that is not in good condition should be removed and repaired or replaced immediately.

**Emergency Procedures**: While a coach may be the first to respond to an emergency, assistant coaches, swimmers and lifeguards all have responsibilities in the event of an emergency. All appropriate staff, plus swimmers included in this plan, should rehearse the procedures at least once a month.

[ex: for an outdoor facility the plan should include determination of wind direction to conduct an appropriate evacuation upwind from chlorine gas at an outdoor facility. Determination of wind direction by a quick glance at the backstroke flags may help in proper evacuation procedures.]

Repetition develops confidence and the likelihood that procedures will be conducted
competently. Coaches must remember that in all cases their main responsibility is the safety of the swimmers. They must remain calm in all situations and do what they are trained to do.

**Equipment Replacement:** The facility management should make arrangements to replace all equipment and material used during an emergency as soon as possible. For example, if a victim has a suspected spinal injury and is transported to medical care on the facility's backboard, a second board should be available.

**Spokesperson:** In case of emergency, the owner or operator of an aquatic facility should designate a mature person to be responsible for informing the victim's relatives and for providing information and news releases. This helps eliminate the possibility of misinformation about an injury to the swimmer or the cause of the accident.

**Chain of Command:** The chain of command or table of organization should be included so that all persons clearly know and understand the lines and limits of authority and responsibility for their own position and those of others in the structure. This must be clearly understood by the coaches and all staff.

**Local Ordinances:** State or local ordinances should be checked. Facility standards, policies and procedures should be updated to coincide with all ordinances. This information can be obtained from health departments, police and fire department and local utility companies.

**Reports and Records:** All injuries and rescues should be reported in writing via online report of occurrence system – [www.usaswimming.org/reportofoccurrence](http://www.usaswimming.org/reportofoccurrence). A system of records and reports should be developed, and every coach and lifeguard should be thoroughly trained in the proper procedures for filling out and filing occurrence reports.

**Record Keeping:** Past records of injuries and emergencies should be reviewed and analyzed. These records will give insight into the causes of previous injuries and the action that was taken by the staff during these situations. Conditions such as weather, number of swimmers, number of coaches on duty and any other influencing factors should be considered. Action plans should be established for the most common possible injuries.

**Section 4d: Facility Safety Inspection**

The first step toward actively preventing injuries is to recognize potential hazards. This requires a systematic and routine method of inspecting the swimming facilities used by a Club. First determine what is to be inspected and how often. Then develop a series of checklists and establish a method of reporting faulty equipment or facility dangers to the appropriate individuals, such as facility management. Follow up on repair or replacement and be sure any faulty equipment or dangerous areas cannot be accessed.

Facility safety audits can help determine the potential for injuries due to facility
conditions. Objectives of facility safety audit are:

1. Assess overall condition of facility or locations.
2. Identify hazards that may cause or contribute to bodily injury or property damage.
3. Document concerns and make recommendations for corrections to property owner.
4. Document actions taken – put facility on notice, per lease, if necessary.

A sample facility safety checklist is in Appendix G.

A well-stocked first aid kit should be easily accessible for all practices and swim meets. Appendix H lists the contents of a well-stocked first aid kit appropriate for swim team activities.

CHAPTER 5: MEET MARSHALS AND WARM-UP GUIDELINES

Providing an athlete a safe environment during practice and competition is the top priority of every coach, athlete, meet director and official at every USA Swimming meet. Given that more pool injuries occur during meet warm-ups than at any other time, it is important that meet personnel ensure that all persons under their supervision comply with safety policies and procedures. In the interest of providing athletes with a consistent level of safety, regardless of the venue, it is recommended that all LSC Operational Risk Chairs pay attention to the following areas and encourage their LSC to adopt the following recommended guidelines.

Section 5a: Meet Marshals

Athlete injuries occurring during competition warm ups can be reduced with coordination between Coaches, Meet Marshals and the Meet Referee. Meet Marshals have a broad range of authority, in concurrence with the Meet Referee to enforce an unsafe act, as outlined in the USA Swimming Rulebook:

102.19 MARSHALS - Shall wear identifying attire and enforce warm-up procedures and maintain order in the swimming venue. The marshal shall have full authority to warn or order to cease and desist, and, with the concurrence of the Referee, to remove, or have removed from the swimming venue anyone behaving in an unsafe manner or using profane or abusive language, or whose actions are disrupting the orderly conduct of the meet.

During designated warm-up sessions, athletes should enter the competition pool from the starting end only. Athletes are expected to use a three-point entry in which they sit on the side of the pool then slide into the pool (“sit and slide”) with one hand on the wall. The exception is when sprint lanes are designated for practicing racing starts during a warm-up session. During and after competition, athletes using warm-up/warm-down lanes are expected to use a three-point entry.
Coaches are responsible for the safety of their athletes and are expected to monitor them at all times during warm-up sessions. During open warm-up sessions no team has exclusive rights to any pool lanes; teams will need to share lane space and work cooperatively. Warm-up sessions may be divided by time and lanes; marshals should enforce such assignment. Teams must be made aware of changes to warm-up procedures for a meet.

**Pool Capacity and Control:**

Coaches should maintain as much contact as possible with their swimmers throughout warm up. Recommended contact includes both line of sight, and verbal control of all athletes under a coach’s supervision. Safety Guidelines:

- General Warm-up – 3 point entries (sit and slide), no start or diving.
- Specific Lane Warm-up – 1 and 8 (1 and 6) push pace, 2 and 7 (2 and 5) one-way starts, 3-6 (4 and 5) general
- Never have a swimmer on the blocks while another is in the water for a backstroke start.
- Allow enough space between swimmers doing sprints with special notice regarding breaststrokers.
- A minimum two marshals or officials should be assigned to monitor the pool for every 6 to 8 lanes.

**Section 5b: Warm-Up Guidelines**

**Pre-Meet Planning and Coordination Guidelines:**

- Determine what Safety/Warm-Up information is to be included in the Meet Announcement. (required in sanctioning process)
- Subsequent to meet entry deadline host team should determine final safety / warm-up procedures to be implemented based on number of athletes entered.
  
  ✓ Considerations include: total number of swimmers, numbers by age group, and numbers by event / stroke.

- Once appointed, the meet director is responsible for identifying and coordinating meet marshals for the meet. ("arranging for personnel" USA Swimming Rule 102.9)

**Meet Marshal Duties/Responsibilities Guidelines / Meet Referee Oversight:**
Marshals should arrive at the swim venue at least fifteen (15) minutes prior to the beginning of warm-ups. They should check in with the referee to receive instructions, i.e. where they will be positioned, special safety concerns for the meet, etc. (102.11.4)

Marshals should be easily identifiable by a distinctive article of attire. (Hat, jacket, vest, etc.)

During warm-ups, the head marshal should have a whistle.

Warm-down areas must be marshaled throughout the meet.

Locker rooms need to be checked periodically throughout the meet.

Marshals must not leave the area until coverage is provided or until excused by the Referee.

There should be a minimum of 4 marshals for all prelim/final meets and two (2) for other meets. There must be at least one (1) male and one (1) female meet marshal.

Notify lifeguards/meet director and meet referee of any injuries or blood and body fluids in the pool, on the deck/locker rooms.

Lifeguards do not take the place of meet marshals but may supplement the meet marshal contingency.

General Warm-Up

At the direction of the Meet Referee open the pool for meet warm ups.

Make sure that swimmers behave in a safe manner. (No running, abusive behavior, etc.)

During general warm-ups, make sure that swimmers enter the water feet first from the starting end only and ease into the water ("3 point entry"). ABSOLUTELY NO DIVING IS PERMITTED!

Swimmers should enter the pool FROM ONE END ONLY, and never from the sides during warm-up.

Be alert to dangerously overcrowded warm-ups and alert the Meet Referee.

Notifying the coach of any swimmer who is behaving or acting in an unsafe manner.

Maintain professional composure in all interactions with coaches, athletes or patrons.

Help create a safe environment.

Prohibit the use of training equipment in the pool.

Always stand facing the pool.

Specific Warm-Up

Coordinate with coaches and athletes for the opening of "sprint/start" lanes with
the approval of the Meet Referee.

☐ When overseeing "sprint only" lanes, be in position to be able to intervene quickly and effectively if a safety issue should arise. (i.e., a swimmer climbs up on the block with a swimmer already in the water preparing to complete a backstroke start)

☐ Ensure that athletes are being "started" by a supervising coach - as opposed to a teammate or on their own.

☐ Provide assistance to Meet Referee in clearing the competition pool prior to the start of any individual session.

☐ Assist with ensuring pool deck is clear of spectators. Only swimmers, coaches and officials are allowed on the pool deck, but main focus is on safety in the water.

Section 5c: Racing Start Certification

Effective May 1, 2009, USA Swimming’s Board of Directors modified the racing start rule (103.2.2, which provides that racing starts should only be taught in at least six feet of water) to further clarify that racing starts should only be taught under the direct supervision of a USA Swimming member coach, and to expand the definition of teaching racing starts to make clear that no swimmer who has not been certified as proficient by his or her coach in performing racing starts proficiently should be performing racing starts into less than six feet of water.

The certification process is described on the Racing Start Certification Checklist as approved by the Board. The document requires that for swimmer age 10 years and under or swimmers with less than one year of experience, the coach must certify that the swimmer has been trained according to the progression set forth on the form. For older or more experienced swimmer, the checklist requires the coach to certify appropriate skill level based on the coach’s observation. The required certification is based on the coach’s professional judgment and must be recorded in writing for each swimmer. Additional information may be found at the USA Swimming web site: www.usaswimming.org/riskmanagement

See the section on racing start certification.

All clubs must ensure that all team members are certified and that coaches understand and comply with the certification process. Failure to do so could jeopardize club and coach insurance coverage. The record keeping is a Club responsibility.
CHAPTER 6. ADMINISTRATORS, OFFICIALS AND COACHES
SAFETY CONSIDERATIONS

6a: Meet Director Responsibilities

The Meet Director is the organizer and coordinator of all meet activities with a primary goal of hosting a well-organized and efficiently run meet. He/she should be aware of all USA Swimming safety guidelines and warm-up procedures.

The following are suggestions that meet directors should take to help minimize the risk of accidents and injuries at a swim meet.

6b: Preparation

Contact facility management and have a meeting with the person in charge of the pool complex to discuss the following:

- Local Emergency Numbers
  - Police
  - Fire
  - Emergency medical services personnel
- Facility Emergency Action Plan
  - How it works
  - How the meet staff will fit into the plan
- Support of the Facility Staff
  - Lifeguards
  - Security
  - Janitorial
- Location of the Emergency Exits
- Location of Facility Access by Emergency Personnel
- Evacuation Procedure for the Facility
  - Evacuation to a secure location outside the facility
  - Evacuation to a secure location inside the facility
- Location of First Aid Care Area
- Location of Emergency Equipment
  - Fire extinguishers
  - Automated external defibrillator (AED)
  - First aid
6c: Spectators
During a swim meet, it may be necessary to control spectators, including parents, to prevent interference. This may involve:

- Using a firm but calm voice to direct spectators as required.
- Using the public address system to communicate with spectators.
- Repeating commands and requests as often as is necessary.
- Ensuring that emergency exits and path remain clear.

6d: Dealing With Uncooperative Patrons
The Meet Director may encounter an uncooperative spectator. Before assuming that someone is being uncooperative, the director should make sure that the spectator has heard and understands the rules or directions.

If a patron breaks the rules and is uncooperative, you should take immediate action because breaking the rules can be a danger to both the uncooperative patron and to others. Most facilities have procedures for handling uncooperative patrons; however, if your facility does not have a procedure, you should call the lifeguard supervisor or facility manager for help as soon as possible.

A patron may threaten to or commit a violent act. If violence is likely to erupt, call 9-1-1 or the local emergency number.

6e: Parking Areas
- Check to see if the facility that the venue is at requires you to staff for parking attendants.
- Each one of the parking attendants should have a flashlight or something that will draw attention to themselves.
- Use safety cones or other types of equipment to block off areas as needed.
- Each one of the Parking Attendants should have a flashlight or something that will draw attention to themselves.
- Have multiple Parking Attendants working the same area.
- Remind Parking Attendant to stay alert.

6f: In the Event of an Emergency
- Allow the facilities staff to do their jobs and follow facility protocol.
- If needed, seek the assistance of coaches and officials.
CHAPTER 7: ATHLETE SAFETY CONSIDERATIONS

Section 7a: Risk Management

Athletes can become ambassadors for safety. They can become the eyes and ears for facility inspections. Through leadership, they can affect new members' attitudes. They can promote the safety message at home and among friends. Swimmers are an excellent resource for team safety development.

Young people tend to ignore their fallibility and think, "It can't happen to me." How can adults promote safety to this enthusiastic and energetic group of people? How can adults target areas of concern effectively for each age group? The best way to achieve a safe program is to build safety INTO the program. Keep it consistent and reinforce it continuously. Reward safe behavior and remind athletes of the consequences of acting unsafely. See Arizona Swimming video at www.usaswimming.org/riskmanagement - safety/operational risk.

For instance, meet warm-up procedures are designed with water entry rules at specific times. When warm-up sessions start, entry should be feet first (3 point) with racing starts permitted later. Correlate practice to meet warm-ups. If swimmers are habitually reminded to enter "feet first" during practice warm-ups, they will be conditioned to act the same way at a meet. Make it part of practice, be consistent, remind them and recognize their efforts to comply and safety will become a habit. Safety will become a habit in the same way that touching the wall with both hands in breaststroke does. Training works for strokes, it will work for safety.

Section 7b: Coach Safety Certification Requirements

Since 1988, all coach members are required to fulfill safety training requirements as established by the USA Swimming Board of Directors. The current list of the current Coaches Safety Education Requirements are available on the Coaches section of the USA Swimming Web site. Click the link “For You”, then “Coaches”.

Section 7c: Coach Responsibilities

Information on Safety Training for Swim Coaches can be found on the USA Swimming Website under Coaches/Becoming or Renewing Your Coach Membership.

The primary responsibility for the safety of swimmers at practice or meets lies with the coach. The coach has the most time with the swimmers and has a responsibility to the swimmers. The coach must be constantly aware of the hazards posed by the pool environments, practices, and the swimmer's curiosity and enthusiasm.

The coach is also a primary role model and, as such, directly influences the attitude of the swimmer toward safety. The coach designs and supervises the practice and sets the tone
of the practice. The coach's concern for his or her swimmers can be the basis for a safe practice. The coach's attitude and persistent insistence on a safe practice environment translates into a safety conscious swimmer.

- **Health and Wellness**
- **Observing Swimmers**
  - Circle Swimming
  - Swimmer separation
  - Feet first entry
  - Use of Starting Blocks

- **Ethics and Professional Responsibility**
  - Code of Conduct
  - Membership Responsibilities
    - Re-certification of Required Courses
    - Membership Dues
      - Payment of Membership Dues

- **Professional Development**
  - Safety
  - General Knowledge
    - Rules and Regulations
    - Swimming Skills

**Section 7d: Special Safety Considerations – Hypoxic Training**

Hypoxic Training can be potentially dangerous training technique. There have been hypoxic events which have resulted in an athlete’s death. USA Swimming provides Hypoxic Training Recommendations at usaswimming.org/riskmanagement and go to the safety/operational risk section. Appendix B and C contain USA Swimming’s Hypoxic Training Recommendations and a Joint Statement from the American Red Cross, USA Swimming and the YMCA of the USA on Hypoxic Blackout.

If hypoxic training is utilized by coaches in the development of advanced competitive swimmers, it must be conducted only when following appropriate principles under the direct supervision of an experienced coach. These principles are:

1. Coaches should stress to athletes that they should never ignore the urge to breathe.
2. Hypoxic training should involve progressive overload, in line with the athlete’s physical and skill development, e.g., beginning with efforts over 5m, 10m, then 15m, etc.

3. Coaches should ensure adequate rest between hypoxic efforts to ensure full recovery.

4. Athletes should not hyperventilate (e.g., take multiple, deep breaths) prior to any underwater or other hypoxic efforts.

5. Hypoxic training should not involve competitive effort of maximum duration or distance covered.

Section 7e: Special Safety Considerations – Concussion Management

Concussion Management in youth sports is an evolving concept. Over the past several years, there has been an increased awareness of concussions in youth sports. While most of the attention has been directed to sports that traditionally involve head strikes (e.g., football, soccer, baseball and basketball), swimmers, too, have an exposure to concussions, primarily from a head strike in the following areas:

- Against the pool end during a turn or finish
- Against the bottom of the pool if diving inappropriately (e.g., see Sailor/Penguin Dives) or in too shallow of water
- Kicked by another swimmer during lane swimming
- Collides with another swimmer during warm-up/warm-down
- Falls on the pool deck

Many states have passed concussion legislation for youth sports. Concussion Management may vary by state – it is recommended that the LSC/Club review the Concussion Management for youth sports in its state and sports federation (e.g., high schools may have their own requirements). LSC/Club may wish to consider the following actions:

- Annually distribute the “Concussion Information Sheet” to athletes, parent and guardians. This can be located at www.usaswimming.org/riskmanagement, under safety and operational risk section.
- A copy is included in Appendix D. Electronic distribution is acceptable.
Annually distribute the “Concussion Information Sheet for Possible Concussion at the Pool” to Coaches and Officials. These can be located at the same link as above. Copies are included in Appendix F. Electronic distribution should be acceptable.

- Post the documents on the appropriate LSC/Club website.
- Report all head strikes via the online Report of Occurrence. You can find the form and instructions at www.usaswimming.org/reportofoccurrence.
- A member athlete who suffers a concussion should be cleared to the pool (e.g., includes training and competition) by written communication from a qualified healthcare professional who is experienced in treating concussions.

The Operational Risk Committee provides information on Concussions at usaswimming.org/riskmanagement, under safety/operational risk. Copies of these documents are also found in Appendix E. Many states require coaches, officials and administrators to take the CDC or NFHS courses on Concussion Education.

Section 7f: Special Safety Considerations – Sailor or Penguin Dives

Sailor (sometimes referred to as Penguin) dives are when an athlete enters the water head first with the athlete’s arms at his/her side. This type of dive exposes the swimmer’s head and neck to injury and are not allowed in USA Swimming. Serious neck and head injuries have occurred as a result of this type of dive. Coaches and athletes should not use these types of dives off the side of the pool, the racing start platform, or for a backstroke start. While there are videos or clinics that promote the use of this technique, the risk of injury is too great for USA Swimming member coaches or athletes to use.

CHAPTER 8: OPEN WATER SWIMMING

Introduction

This Safety Guide for Open Water Competition will assist in planning the full range of preventative and corrective safety measures prior to an event. It will remind organizers of the various aspects of safety requiring attention. The USA Swimming web site has information at resources/open water as well as Part 7 of the rule book which should be reviewed in detail. Open Water by its nature is not pool swimming.

Safety Statement: USA Swimming places the safety of its athletes as paramount to their involvement in the sport. Therefore the Open Water Development Committee, in conjunction with the Operational Risk Committee, will increase the level of awareness through the education of athletes, coaches, volunteers and officials. The education
program will cover the risks of involvement in competitive swimming and methods to reduce those risks.

**Section 8a: Risk Identification**

The first step toward prevention is awareness of the risks associated with open water swimming competitions followed by the ability to identify them. Listed below are three types of risk factors and potential problems related to each one.

A) Human Factors

*Those directly related to individuals and their psychological and physical condition.*

1. Age of participants
2. Experience of participants
3. Physical condition (technical level)
4. Competition stress
5. Number and competence of lifeguards
6. Competence of guides
7. Officials

B) Mechanical Factors

*Those related to the quality of the competition site and equipment used in the competition.*

1. Swimmer's personal equipment (ear/nose plugs, goggles, swim camp, body grease)
2. Safety equipment (Motorboats, propellers, engine exhaust, kayaks, turning buoys, surf boards, course markers)

C) Environmental Factors

*Those related to the nature and condition of the environment.*

1. Wind velocity
2. Water and air temperature (hypothermia and dehydration)
3. Algae
4. Dangerous marine life
5. Cleanliness of water
6. Water level
7. Visibility
8. Water depth and strength of current
9. Weather conditions
10. Floating objects  
11. Wave conditions/swells

Identifying the risk factors will help to decide which prevention measures are essential to the safety of the participants.

**Section 8b: Risk Control**

After drawing up a list of the risk factors associated with the open water competition, the second phase consists of minimizing risks whenever possible and controlling those factors that cannot be minimized.

In extreme cases, it may be necessary to cancel or postpone a competition when conditions are beyond human control and are unsafe. This is the radical way of minimizing risk factors and should be used only when all other measures have been taken.

It is also possible to control certain risks. For example, by only accepting participants who have demonstrated a standard of physical fitness equal to or greater than the competition's level of difficulty.

This is only an example of controlling a risk. The best way to minimize or control risk is a systematic prevention approach. Planning and foresight are the key to a safe competition. This involves planning all of the possible safety measures in accordance with the *USA Swimming Rules and Regulations* and by following the prevention measures outline.

**PRIMARY PREVENTION**

Primary prevention measures involve reliance on a range of physical, human and financial resources in order to prevent the occurrence of injury:

- Organization
- Information
- Equipment/Facility
- Selection of Participants

1. **ORGANIZATION AND SUPERVISION:** (Refer also to Open Water Meet Manager’s Guide and USA Swimming Rules and Regulations)

**Practices:** Open Water practices should follow most of the same criteria of meets. Good planning, and safety management are still paramount for your athletes.

**Meets:** Organization and supervision refer to services that support and make possible the holding of events. Obtaining official authorization, recruiting personnel and volunteers are all examples of organizational planning. The quality of the organization and supervision efforts depend on the timing and implementation of the operation (When will
the members of the organization committee begin their work?). The organizer of an open water swimming competition should:

a. Request and prepare an Open Water Application and sanction under the policies of the USA Swimming and Local Swimming committee.

b. Request authorization to use an open water venue with appropriate local, state or national authorities:
   - The start and finish area (the beach) (from the municipality or the State, i.e., Department of Recreation, Fish and Game if it is in a State park).
   - Safety escort craft on the waterway to follow the swimmers.
   - Safety escort craft to ensure the safety of all the swimmers.

c. Request the services of duly authorized officers to control traffic around the competition course.

d. Hold or be covered by liability insurance equal to or greater than that required by USA Swimming. Remember to inquire about the liability coverage limits with the local government. If local government is higher, organizers must comply.

e. If swimming competition starts or finishes on private land, reach an agreement with the owner.

f. Ensure that all officials are present.

g. Formulate an intervention plan in order to coordinate personnel and ensure that aid provided quickly and effectively.

h. Arrange for security personnel to be on site who have jurisdiction to expel anyone from the site who disturbs the competition.

i. In swims of 10k or less safety craft should be provided. The ratio of swimmers to craft needed should be: 1-8:3, 9-16:5; 17-24:7; 25-50:10; 50-100:20. (This may vary on size of course recommendations.) In swims over 10k it is recommended to have a 1:1 ratio. In swims over 15k you shall have a 1:1 ratio.

j. Ensure that lifeguards are on hand per application (Safety rules in public pools)

k. Establish criteria for cancellation or postponement.
   - Water Temperature and Currents
   - Wind Velocity
   - Visibility
   - Weather Conditions

l. Draw up a timetable for the event with limits.

2. INFORMATION:

This includes all information provided to the participants, volunteers, coaches, spectators prior to the event. Note: Inform a local hospital when the event will take place.

a. Information session for the coaches and participants.
b. Information session with the escort/safety craft operators. Specifically the difficulties of the course and emergency plans.
   - Position of buoys
   - Distance of the course
   - Strength of the water currents
   - Finish area
   - Safety instructions (Hazardous areas on the course)

c. Information session with all personnel on their duties.

d. If using a public beach, advise recreational swimmers that a competition is being held.

3. FACILITIES AND EQUIPMENT:

All facilities and equipment used in the competition must be carefully planned and checked. This phase constitutes another important aspect of primary prevention.

   a. When using a public beach or land, contact the person responsible for the equipment and facilities to ensure that the latter meet the regulations on safety in public pools.

   b. Ensure that the facilities meet the regulations for USA Swimming.

   c. Designate areas for participants, spectators and officials.

   d. Set up refreshment area.

   e. Mandatory equipment for participants.
      i. Letter or number displayed on both arms at shoulder level, or:
      ii. on the back, or;
      iii. on the swim cap.

   f. U.S. Coast Guard-approved life jackets for persons aboard boats. Note: All persons in motor boats should wear personal flotation devices as a safety precaution.

   g. Protective grid for boat propellers are recommended.

   h. Official boats clearly marked.

   i. Choice of the site:
      i. cleanliness of the water
      ii. approach to and from the waterway are clear of debris, sharp objects and trip hazards
      iii. low volume of traffic
j. Distinctive buoys and markers at the start/finish and each turning point.
k. Sanitary facilities.
l. Parking nearby
m. Timing equipment
n. Finish area management

4. SELECTION:
Selection is the final step in primary prevention. Selection means identifying those participants who are fit or unfit to take part in the competition. Prior to participation:

a. Competitors must read and sign the waiver form.
b. In the event a competitor is under the age of 18, the parent or guardian must read and sign the waiver form.
c. Participants are responsible for being in the proper state of physical fitness to take part in an open water race.
d. Competitors age 40 or older should, upon registering, provide a medical opinion from a licensed physician, which is dated no more than a year prior to the competition date.

SECONDARY PREVENTION:
When all possible precautions have been taken, primary prevention does not guarantee that an accident will not occur. One must anticipate what must be done once an accident has occurred. Providing prompt and effective aid is indispensable to the safety of an event. Without quick and appropriate intervention organizations cannot claim to have an optimum safe environment. It is imperative an organization minimize the possibility of aggravation or complication due to delays or improper medical aid. This leads to a discussion of the secondary prevention measures, which are:

- Detection
- Communication
- First Aid
- Transportation

1. DETECTION:
Detection is the first link in the chain of secondary prevention measures. When an accident occurs, the effectiveness and speed of the intervention are indications that the organization is aware of the accident. The faster safety personnel can detect any accident occurring at the competition site, the safer the competition will be.

a. Professional rescuers
b. Sweeper boats (inflatable rescue boat)
c. Flotation devices
d. Jet skis
e. Kayaks
f. Medical personnel
   ▪ EMS
   ▪ Doctors or Nurses

2. COMMUNICATION:
Communication is also an important function, since it depends on the effectiveness of the safety system and its ability to intervene quickly. After detecting an accident, the personnel involved must be able to rely on an effective means of communication.
   a. Location of telephone
   b. Effective communication between officials and escort/safety craft (Two-Way radios, cellular phone, marine radio/UHF)
   c. List of emergency numbers available

3. FIRST AID:
If detection and communication function properly, first aid should not be delayed. The quality of aid provided to the victim will depend on the human and physical resources available at the site. The first aid phase may include evacuation of the victim from the accident site.
   a. A waterway that does not have a public beach should be equipped with a first aid station.
   b. If the waterway has a public beach, check with the person responsible for the facility to ensure that they have safety equipment and emergency procedures.
   c. Have a first aid station at the start and the finish of the course.

4. TRANSPORTATION:
In the event of an accident, ensure the participant will receive the appropriate treatment, plans must be made for transportation to a treatment unit or a hospital if necessary. Note: Under no circumstances will an official, coach, or volunteer transport anyone to a medical facility.
   a. Emergency vehicle
   b. Access to the hospital

TERTIARY PREVENTION:
EVALUATION:

The final phase of prevention is evaluation and corrective action. If the competition is likely to be repeated, documentation from previous competitions and evaluating the operation of the safety system, help to identify appropriate corrective action and improve the safety of the next competition.

a. A report must be submitted to the Local Swimming Committee no later than 30 days after the sanctioned competition.

b. This report must, among other things, include any infractions which occurred and were brought to the attention of the competition director during the competition. All corrective measures should be duly documented.

c. In the event that an accident or injury occurs during the competition, a report must be submitted to USA Swimming. Use the On-line Report of Occurrence www.usaswimming.org/roo. It should be submitted promptly after the conclusion of the sanctioned competition. Copy LSC Operational Risk Chair your e-mail confirmation or report submission.
APPENDIX A: SAMPLE CLUB SAFETY MANUAL

The following document was designed by Eric Fucito, former member of the Safety Education Committee. It is a sample guide that may be used by clubs for a Club Safety Manual.

{Insert Club Name Here}
Club Safety Manual

I. ADMINISTRATIVE SECTION
A. Approval Process of the Club Safety Manual
   1. Club Head Coach Approval
   2. Club Board of Directors Approval
   3. Facility/Owner Approval
B. Distribution Procedure
C. Maintenance
   1. Forms
   2. Club Safety Manual

II. LEGAL SECTION
A. State and Local Ordinances
   1. Equipment
   2. Lifeguard requirements

III. MAPS
A. Facility Layout
   1. Emergency Exits
   2. Emergency Equipment

IV. CONTACT INFORMATION
A. Emergency Numbers
   1. Fire Department
   2. Emergency Medical Services
   3. Police
   4. Poison Control Center
B. Facility Emergency Numbers
   1. Aquatic and Facility Managers
   2. Chemical and Electrical Companies
C. Insurance Companies
   1. Reporting Accidents
   2. Participant Accident Insurance
D. USA Swimming
   1. Operational Risk Committee Assignee
   2. LSC Operational Risk Chair
   3. Area Club Operational Risk Chairs
E. Club Communication
   1. Club Spokesperson
2. Parent Board of Directors
3. Club Parents Emergency Phone Chains

V. PREVENTIVE PLANS
A. Spectator Designated Areas.
   1. Practice
   2. Meets
B. Facility Inspection
   1. Pre Practice/Meet
   2. During Practice/Meet
   3. Post Practice/Meet
C. Meet Marshal
   1. USA Swimming Rule and Regulation
   2. Responsibilities

VI. EMERGENCY PLANS
A. Facility Emergency Action Plan
B. Facility Evacuation Plans
C. Facility Emergency Access Plan

VII. TRAINING PROGRAM
A. Coaches Safety Training
   1. Certification
   2. In-Service Training
B. Club Parents Safety Training
   1. Board of Directors
   2. General Club Parents
C. Facility Staff Safety Training
   1. Facility Management
   2. Lifeguards
   3. Maintenance Staff
D. Contact Information

VIII. FORMS
A. Report of Occurrence Forms
   1. USA Swimming
   2. Facility
B. Medical Release Forms
   1. How to Fill Out and Who to Send
   2. Blank Forms

IX. REFERENCES
A. USA Swimming Website Links
   1. USA Swimming Insurance and Risk Management Website Link
   2. USA Swimming Safety Education Website Link
B. Other References
X. MISCELLANEOUS

I. Administrative Section

A. Approval Process of the Club Safety Manual
   1. Club Head Coach Approval
      a. Development of the safety manual should be led by the Club Operational
         Risk Chair with input of the coaching staff for the topics to be included.
         Final approval should be from the Club Head Coach. Suggestions of what
         items to place in this manual should be taken from the coaching staff.
   2. Club Board of Directors Approval
      a. The Club Board of Directors should review the manual in its entirety, in
         consultation with legal consul, for liability issues that would be associated
         with the club. The Board of Directors should only approve this manual
         with the endorsement of the Head Coach.
   3. Facility/Owner Approval
      a. The facility the club uses should be consulted on many of the areas in the
         safety manual because the facility has a major role in the implementation
         of all safety/emergency plans.

B. Distribution Procedure
   This section should include a procedure on who would get the manual (i.e. all coaches)
   and also which parts should be distributed to individuals in key roles in the Club.

C. Maintenance
   1. Forms
      a. This section should identify the role in the club who is designated to retain
         all medical release and incident forms. It should cover how the forms will
         be made readily available in the event of an incident. It should cover how
         the latest versions of the forms are distributed to and accessed by the
         proper persons.
   2. Club Safety Manual
      a. Items That Require Approval
         i. This section should include a list of the sections that would need
            the approvals established in the previous section before
            distribution.
      b. Non-Approval Items
         i. This section should include a list of the sections that would not
            need any approvals before distribution.

II. Legal Section

A. State and Local Ordinances
   List the State and Local laws that would affect the club or reference where the laws
   would be found.
   1. Equipment
      a. Required: List all equipment that is required by law for the club or facility
         to maintain.
b. Optional: List all equipment that the club has that is not required by law.

III. Maps
A. Facility Layout
This section should include a map that would indicate various points of interest such as those listed below. Visualizing where these items or areas are makes access to the items or areas easier.

1. Emergency Exits
   a. Emergency Personnel Entrances
      i. Knowing where the emergency personnel would enter the building and the path that they would most likely take to get around the facility would alleviate delays in treatment of victims.
   b. Evacuation Exits
      i. Indicate where everyone would exit the facility in the event of an emergency.

2. Emergency Equipment
   a. Location of:
      i. The following items are important to know the location of in the event of an emergency. The list may be expanded to include other items that are important.
         1) Pump Shut Off Switches
         2) AED
         3) First Aid Kits
         4) Emergency Oxygen Equipment

IV. Contact Information
A. Emergency Numbers - This section should include the physical address and nearest cross streets of the facility. It should also include any detail that would help guide emergency personnel to the location, especially if that location is not immediately obvious from the address. For instance, if the aquatic facility is behind the community center and not visible from the road, instructions regarding how to get to the pool should be posted on the emergency contact sheet. The information about the facility is critical so that anyone making an emergency call can provide the detail that EMS dispatchers will require.

In most communities, 9-1-1 is the number that should be called for any emergency. Non-emergency numbers are also established for situations that require urgent attention of local authorities but are not considered emergencies.

Provide the emergency and non-emergency numbers, and the physical location of local authorities that serve the aquatic facility and club, and include those in this section. Be sure to confirm the numbers for the following local authorities:

1. Fire Department
   a. Address and local phone number of the facility

2. Emergency Services Personnel
3. Police
4. Poison Control Center (local, state and national centers)

B. Facility Emergency Numbers
1. Aquatic and Facility Managers
   a. List the names along with contact information and emergency/after-hours contact information.
2. Chemical and Electrical Companies
   a. Emergency Numbers
   b. General Information Numbers

C. Insurance Companies
List all contact information for USA-Swimming insurance company and club’s insurance companies.

D. USA Swimming
List the contact information located on the Report of Occurrence forms. Also list the staff person’s name and number that would be assigned to insurance and safety.
1. Operational Risk Committee Assignee
   a. List all contact information.
2. LSC Operational Risk Chair
   a. List all contact information.
3. Area Club Operational Risk Chairs
   a. List all contact information.

E. Club Communication
1. Club Spokesperson
   a. List the contact information and Emergency numbers.
2. Parent Board of Directors
   a. List the contact information and Emergency numbers.
3. Club Parents Emergency Phone Chains
   a. List the emergency numbers of everyone that participates. This could be used in the event of an emergency closing or inclement weather or last-minute closings.

V. Preventive Plans
A. Spectator Designated Areas
1. Practice
   a. Limiting the movement of people would reduce the risk of injury. This section should include policies and procedures to limit movement on the deck, such as restricting access only to swimmers and coaches during practice.
2. Meets
   a. This section should include policies and procedures regarding who should be permitted on deck or in the water during meets, including swimmers, coaches, officials and other meet personnel.

B. Facility Inspection
1. Pre-Practice/Meet
   a. The areas and items to inspect prior to a practice/meet should be listed in a check sheet format.
2. During Practice/Meet
   a. The areas and items to inspect during a practice/meet should be listed in a check sheet format.

3. Post Practice/Meet
   a. The areas and items to inspect after a practice/meet should be listed in a check sheet format.

C. Meet Marshal
   1. USA Swimming Rules and Regulations
      a. Consult the current USA Swimming Rules and Regulations for Meet Safety Marshals (102.19).
   2. Responsibilities

VI. Emergency Plans
A. Facility Emergency Action Plan
   - Written emergency action plans should be included to outline what people should do in the event of emergencies at the facility. Consult facilities to learn what they already have in place and know how club members fit into the plans.

B. Facility Evacuation Plans
   - Plan what people should do in the event of an emergency that would require an evacuation of the facility. Also design a plan that would evacuate onlookers from the scene.

C. Facility Emergency Access Plan
   - Have a plan in the event of an emergency that would tell people how to assist the emergency personnel by either directing them to a first aid designated area or by keeping areas clear for complete access.

VII. Training Program
This section should include certification requirements and recommended in-service training for each of the following personnel:
A. Coaches Safety Training
   1. Certification
      a. Include the list of the current required courses and links to the USA Swimming website so up-to-date course listings are easily accessible.
   2. In-Service Training

B. Club Parents Safety Training
   1. Board of Directors
      a. Certification
      b. In-Service Training
   2. General Club Parents
      a. Certification
      b. In-Service Training

C. Facility Staff Safety Training
   1. Facility Management
a. Certification  
b. In-Service Training
2. Lifeguards
   a. Certification  
   b. In-Service Training
3. Maintenance Staff
   a. Certification  
   b. In-Service Training

D. Contact Information  
Information about schools or instructors where certifications can be obtained.

VIII. Forms
A. Report of Occurrence Forms  
   1. USA Swimming  
      a. The Report of Occurrence shall be submitted by the coach, Meet Director or someone affiliated with the club/facility any time there is an accident or injury during any USA Swimming activities such as Sanctioned or Approved swim meets, swimming practices, contracted Swim-a-Thons or approved social events. The parent or injured party should NOT submit the form. The online form does require that certain sections, indicated by an asterisk, be completed before it can be submitted. If you have any questions, please contact George Ward at (719) 866-4578 or email, gward@usaswimming.org.  
      b. The Report of Occurrence form can be found at www.usaswimming.org/reportofoccurrence.
   2. Facility  
      a. How to Fill Out and Who to Send  
      b. Blank Forms
B. Medical Release Forms  
   1. How to Fill Out and Who to Send  
   2. Blank Forms

IX. References
A. USA Swimming Website Links  
   1. USA Swimming Insurance and Risk Management Website Link:  
   2. USA Swimming Safety Education Website Link:  
      - http://www.usaswimming.org (click on Swim Clubs, then Club Operations, then Insurance/Risk Management and “Safety/Loss Control Manual” link

B. Other References  
Add to this section and links to the USA Swimming website so up-to-date course listings are easily accessible.

X. Miscellaneous
Include in this section items that do not fit under other headers but are important for the club safety and risk management program.

END SAMPLE CLUB SAFETY MANUAL

**APPENDIX B: USA SWIMMING OPERATIONAL RISK COMMITTEE HYPOXIC TRAINING RECOMMENDATIONS**

USA Swimming, Inc.
Operational Risk Committee
Hypoxic Training Recommendations
May 3, 2018

If hypoxic training is utilized by coaches in the development of advanced competitive swimmers, it must be conducted only when following appropriate principles and under the direct supervision of an experienced coach. These principles are:

1. Coaches should stress to athletes that they should never ignore the urge to breathe.
2. Hypoxic training should involve progressive overload, in line with the athlete’s physical and skill development – for example, beginning with efforts over 5m, 10m, then 15m etc. - as the swimmer develops the appropriate skills and physiological capacity.
3. Coaches should ensure adequate rest between hypoxic efforts to ensure full recovery.
4. Athletes should not hyperventilate (take multiple, deep breaths) prior to any underwater or other hypoxic efforts.
5. Hypoxic training should not involve competitive efforts of maximum duration, or distance covered.

**Hypoxic Training – On the Surface and/or Underwater**

Drills may be conducted as part of on top of the water training or under water training. Extreme care must be undertaken by the coach when under water training is being conducted. The risk of a swimmer losing consciousness when on the surface is lower than during underwater swimming drills. While on the surface, swimmers are more likely to take a breath when needed whereas underwater they may resist the urge to breathe. In addition, any loss of consciousness while swimming on the surface is more likely to be noticed by coaches or aquatic supervisors, allowing for a faster rescue response. If a swimmer loses consciousness underwater, that swimmer may go unnoticed for a period of time, thereby increasing the likelihood of injury.

Common risk reduction strategies include:

- Hypoxic training should involve progressive overload, in-line with the swimmer’s physical and skill development – for example, beginning with
efforts over 5m, 10m, then 15m etc. - as the swimmer develops the appropriate skills and physiological capacity.

• Adequate aquatic supervision is provided. Swimmers should never swim alone.
• Never hyperventilate (take multiple, deep breaths) prior to any hypoxic training or efforts or before any underwater swims.
• Structuring sessions to minimize involuntary hyperventilation immediately prior to a hypoxic set.
• Encouraging swimmers to breathe as needed and to stay within their comfort zone.
• Ensuring adequate rest for full recovery between hypoxic efforts. Recovery time will vary from swimmer to swimmer.
• Hypoxic training should not involve competitive efforts of maximum duration, or distance covered. Coaches and swimmers must not engage in breath holding games or challenges.

**Underwater Drills**

Common underwater activities that can lead to hypoxic blackout include repeated underwater swims or underwater kicking drills as well as stationary breath holding competitions for time. In all instances, the nature of the risk can be high. Even with successful resuscitation, complications including hypoxic brain damage and respiratory infection can occur.

The following considerations must be factored into hypoxic underwater training:

1. Coaches should be aware of the dangers and understand the risks of hypoxic training.
2. Swimmers should be instructed to surface and breathe when they feel it necessary when swimming underwater. Never resist the urge to breathe.
3. Stationary breath holding should never be used as a training method.
4. Only one deep breath should be allowed prior to submersion. Hypoxic blackout is closely linked to hyperventilation.
5. Underwater drills should be at the start of a workout when swimmers are not close to their maximum aerobic capacity (VO2 max).
6. In general, the drill distance should not exceed 25 yards for a one-time attempt. No immediate repeat attempts or challenges should be undertaken. More experienced, elite, athletes may attempt longer distances but should only do so under direct supervision of an experienced coach.
7. Allow adequate time for recovery, which will vary from swimmer to swimmer. Some guidelines suggest at least a two-minute recovery time should be allowed before attempting another underwater swim, depending on age and experience.
8. No competitions or challenges; i.e. see who can swim the greatest distance underwater or hold their breath for the longest time will be conducted by coaches or swimmers.

9. There will be no pressure or penalties for swimmers who are unable to hold their breath as long as other swimmers.

**APPENDIX C: JOINT HYPOXIC STATEMENT FROM THE AMERICAN RED CROSS, USA SWIMMING AND YMCA OF THE USA**

**CHICAGO, September 29, 2015** – The practices of hyperventilation preceding underwater swimming and extended breath-holding in the water are dangerous and potentially deadly activities. These actions can put the body in a state of hypoxia—a condition in which the body is deprived of adequate oxygen supply.

It is our goal to educate the public about the risks of hypoxia in the water and help ensure that those we teach do not engage in behavior that could result in loss of consciousness and death. Our educational programs reinforce the proper methods to breathe before entering and while in the water.

Some refer to the aftereffects of improper breathing as “shallow water blackout.” The use of this language in these cases is misleading since water depth is not a factor in the body’s response to hyperventilation and extended breath-holding.

To be more clear and accurate, the American Red Cross, YMCA of the USA (Y-USA) and USA Swimming do not use nor endorse the term shallow water blackout. In our training programs and public education, our organizations use terminology that describes the dangerous behaviors that should be prevented—voluntary hyperventilation preceding underwater swimming and extended breath-holding. For simplicity, we refer to this condition as hypoxic blackout.

Shallow water blackout is the medical condition that can result in unconsciousness in water that is typically less than 15 feet (5 meters) deep either from diving equipment failure or as a breath-hold diver returns to the surface. There are specific precautions and prevention strategies for this condition.

Lifeguards, swim instructors and coaches are trained to be alert to prevent swimmers attempting to hyperventilate and engage in extended breath-holding activities and to educate patrons of the dangers of these actions. Lifeguards are taught to respond quickly to any individual who is motionless in the water for any reason, including loss of consciousness. Swim instructors are also taught to limit participants to a single inhalation whenever they ask participants to hold their breath and submerge, and to set safety limits whenever setting up activities that involve underwater swimming. Coaches impart the
proper techniques to their swimmers in the team environment, promoting optimal performance within safety guidelines.

Being confident and comfortable underwater is an essential aquatic skill. Being educated about safe breathing practices is important to exercising good judgment for safe skill practice and supervision of underwater aquatic activities.

APPENDIX D: CONCUSSION INFORMATION SHEET FOR PARENTS AND SWIMMERS

Concussion Information Sheet for Swimmers

Dear Parent/Guardian and Athletes,

This information sheet is provided to assist you and your child in recognizing the signs and symptoms of a concussion. Every athlete is different and responds to a brain injury differently, so seek medical attention if you suspect your child has a concussion. Once a concussion occurs, it is very important your athlete return to normal activities slowly, so he/she does not do more damage to his/her brain.

What is a Concussion?
A concussion is an injury to the brain that may be caused by a blow, bump, or jolt to the head. Concussions may also happen after a fall or hit that jars the brain. A blow elsewhere on the body can cause a concussion even if an athlete does not hit his/her head directly. Concussions can range from mild to severe.

Signs and Symptoms of a Concussion
Athletes do not have to be “knocked out” to have a concussion. In fact, less than 1 out of 10 concussions result in loss of consciousness. Concussion symptoms can develop right away or up to 48 hours after the injury. Ignoring any signs or symptoms of a concussion puts your child’s health at risk!

Signs Observed by Coaches, Officials, Parents or Guardians
- Appears dazed, stunned or confused
- Unsure about event, location of name of meet
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows behavior or personality changes – irritability, sadness, nervousness, emotional
- Can’t recall events before or after incident

Symptoms Reported by Athlete
- Any headache or “pressure” in head - how badly it hurts does not matter
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
• Sensitivity to light and/or noise
• Feeling sluggish, hazy, foggy or groggy
• Concentration or memory problems
• Confusion
• Does not “feel right”
• Trouble falling asleep
• Sleeping more or less than usual

Be Honest
Encourage your athlete to be honest with you, his/her coach and your health care provider about his/her symptoms. Many young athletes get caught up in the moment and/or feel pressured to return to sports before they are ready. It is better to miss practice or meets than the entire season… or risk permanent damage!

Seek Medical Attention Right Away
Seeking medical attention on the day of the event is an important first step if you suspect or are told your swimmer has a concussion. A qualified health care professional will be able to determine how serious the concussion is and when it is safe for your child to return to sports and other daily activities:

• No athlete should return to activity on the same day he/she gets a concussion
• No athlete may return to training, regardless of sport, until he/she is cleared by a heath care professional with a note specifying clearance. Athletes should NEVER return to the pool if they still have ANY symptoms…… in case an athlete returns with a note and then during the practice complains of a headache or other symptoms
• Parents and coaches should never pressure any athlete to return to play

The Dangers of Returning Too Soon
Returning to the pool too early may cause Second Impact Syndrome (SIS) or Post-Concussion Syndrome (PCS). SIS occurs when a second blow to the head happens before an athlete has completely recovered from a concussion. This second impact causes the brain to swell, possibly resulting in brain damage, paralysis, and even death. PCS can occur after a second impact. PCS can result in permanent, long-term concussion symptoms. The risk of SIS and PCS is the reason why no athlete should be allowed to participate in any physical activity before they are cleared by a qualified health care professional.

Recovery
A concussion can affect school, work, and sports. Along with coaches and teachers, the school nurse, athletic trainer, employer, and other school administrators should be aware of the athlete’s injury and their roles in helping the child recover. During the recovery time after a concussion, physical and mental rest is required. A concussion upsets the way the brain normally works and causes it to work longer and harder to complete even simple tasks. Activities that require concentration and focus may make symptoms worse and cause the brain to heal slower. Studies show that children’s brains take several weeks to heal following a concussion.

Returning to Daily Activities
1. Be sure your child gets plenty of rest and enough sleep at night – no late nights. Keep the same bedtime weekdays and weekends.
2. Encourage daytime naps or rest breaks when your child feels tired or worn-out.
3. Limit your child’s activities that require a lot of thinking or concentration (including social activities, homework, video games, texting, computer, driving, job-related activities, movies, parties). These activities can slow the brain’s recovery.
4. Limit your child’s physical activity, especially those activities where another injury or blow to the head may occur.
5. Have your qualified health care professional check your child’s symptoms at different times to help guide recovery.

Returning to School
1. Your athlete may need to initially return to school on a limited basis, for example for only half-days, at first. This should be done under the supervision of a qualified health care professional.
2. Inform teacher(s), school counselor or administrator(s) about the injury and symptoms. School personnel should be instructed to watch for:
   a. Increased problems paying attention.
   b. Increased problems remembering or learning new information.
   c. Longer time needed to complete tasks or assignments.
   d. Greater irritability and decreased ability to cope with stress.
   e. Symptoms worsen (headache, tiredness) when doing schoolwork.
3. Be sure your child takes multiple breaks during study time and watch for worsening of symptoms.
4. If your child is still having concussion symptoms, he/she may need extra help with school-related activities. As the symptoms decrease during recovery, the extra help can be removed gradually.

Returning to the Pool
1. Returning to the pool is specific for each person. As an example, California law requires written permission from a health care provider before an athlete can return to play. Follow instructions and guidance provided by a health care professional. It is important that you, your child and your child’s coach follow these instructions carefully.
2. Your child should NEVER be on deck, practice, or participate in competition if he/she still has ANY symptoms. (Be sure that your child does not have any symptoms at rest and while doing any physical activity and/or activities that require a lot of thinking or concentration).
3. Be sure that the athletic trainer, coach and physical education teacher are aware of your child’s injury and symptoms.
4. Your athlete should complete a step-by-step exercise-based progression, under the direction of a qualified healthcare professional.
APPENDIX E: USA SWIMMING OPERATIONAL RISK COMMITTEE CONSENSUS STATEMENT ON CONCUSSIONS

1.0 Purpose
The operational risk committee is responsible for providing a proactive environment regarding assessment of risks and developing guidelines and educational requirements. USA Swimming and its members are aware of the growing concern regarding concussion management. The purpose of this document is to implement guidelines for member clubs (Clubs), Local Swimming Committees (LSCs) and meet hosts (Hosts). USA Swimming is providing a sample document which may be modified to meet your state requirements.

2.0 Guidelines
All athletes, coaches, officials and parents should receive fact sheets on concussions from their Club, LSC and/or Hosts. Any athlete suspected of sustaining a concussion should be removed immediately and should not return until evaluated and cleared by a licensed health care professional, trained and experienced in evaluating and management of concussions, acting within scope of practice. Compliance with all state and local laws dealing with concussion is the responsibility of the Club and/or LSC. A sample fact sheet is attached to this Policy. Electronic communication of the fact sheet (email blast) is permitted.

3.0 Application of the Guidelines
Clubs, LSCs, and Hosts are responsible for compliance with state laws regarding concussion management and education. Each state may have specific regulations that impact USA Swimming member clubs, coaches, officials, and/or sanctioned events. Some examples: Many states require coaches and officials to take courses on recognizing the symptoms of concussions and head injuries. Other states require sharing of fact sheets on concussions with coaching staff, officials, athletes and parents. A few states, such as California, may require organizations using school district facilities provide a statement of compliance with the policies for the management of concussion and head injuries required of the school districts by state laws. All these guidelines are designed to protect an athlete, who is suspected of sustaining a concussion or head injury during an event, from returning to practice or competition until they are evaluated and cleared by a licensed health care professional trained in the evaluation and management of concussions, acting within the scope of his or her practice. Most states, the National Federation of State High School Associations, and the CDC have educational resources
that can be utilized. Concussion fact sheets must be shared with coaches, athletes, officials and parents.

4.0 Objectives
The primary goal of the Guidelines is to reduce the risk of harm to athletes and to educate coaches, parents, officials, clubs, LSCs, and hosts on the importance of concussion management. To the extent that health care professionals are involved in USA Swimming sanctioned events, they should review the Guidelines and the Consensus statement on concussion in sport developed at the 4th International Conference on Concussion in Sport held in Zurich, November 2012, or similar educational material.

5.0 What is a Concussion?
The Centers for Disease Control and Prevention (CDC) define concussion as “a type of traumatic brain injury (TBI) caused by a bump, blow, or jolt to the head that can change the way your brain normally works.” Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. The Zurich Conference on Concussion in Sport also states that concussion typically results in the rapid onset of short–lived impairment of neurological function that resolves spontaneously. However, symptoms and signs may evolve over several minutes to hours or in some cases may be even more prolonged.

6.0 Signs and Symptoms of Concussions:
Athletes do not have to be “knocked out” to have a concussion. In fact, less than 1 out of 10 concussions result in loss of consciousness. Concussion symptoms can develop right away or up to 48 hours after the injury. Ignoring signs or symptoms can put an athlete’s health at risk!

**Signs Observed by Coaches, Officials, Parents or Guardians**
- Appears dazed, stunned or confused
- Unsure about event, location, or name of meet
- Forgets an instruction or assignment
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior or personality changes – irritability, sadness, nervousness, emotional
- Can’t recall events before or after incident

**Symptoms Reported by Athlete**
- Any headache or “pressure” in head - how badly it hurts does not matter
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light and/or noise
- Feeling sluggish, hazy, foggy or groggy
- Concentration or memory problems
- Confusion
• Does not “feel right”
• Trouble falling asleep
• Sleeping more or less than usual

7.0 Administration
• Most states have passed legislation to establish laws and policies for concussion management and education to effectively prevent and diagnose the condition.
• Each Club, LSC, and Host is responsible to identify and follow the state and local laws including educational and insurance requirements for the management and treatment of concussions.
• All coaches, officials, athletes, and parents should be familiar with the concussion information sheet for swimmers and the Guidelines.
• LSC Officials Chairs are responsible for distributing the Guidelines to “Unattached” Officials.
• USA Swimming provides members an excess accident medical insurance policy. This policy is excess to a member’s personal medical insurance coverage while participating in an USA Swimming sanctioned, sponsored, or approved event, including practice. The policy becomes primary if the member has no medical insurance coverage with a $100 deductible. The coverage is outlined on the USA Swimming website under insurance and risk management.
APPENDIX F: POSSIBLE CONCUSSION AT THE POOL

POSSIBLE CONCUSSION AT THE POOL

1. SIGNS AND SYMPTOMS

☐ Nausea
☐ Vomiting
☐ Headache
☐ Dizziness
☐ Blurry Vision
☐ Balance Problem
☐ Amnesia
☐ Loss of Consciousness

2. NEEDS IMMEDIATE MEDICAL ATTENTION

☐ Unconscious: Not waking up Not able to talk WATCH FOR AIRWAY PROBLEMS IMMOBILIZE NECK
☐ Seizure
☐ Was awake, now is not
☐ Slow to talk
☐ Confused
☐ Not breathing well

3. DO YOU SEND FOR MEDICAL EVALUATION? YES IF:

☐ Person was “knocked out”
☐ They don’t know their name
☐ They have vomited
☐ They feel like they might throw up
☐ They have a severe headache
☐ They can’t walk straight
☐ They just want to take a nap and it’s 10 am
☐ They don’t remember if they did warm ups or not and its midway through the session
☐ They don’t remember the name of their school
☐ They don’t remember their name
☐ They don’t remember what team they are on
☐ They have trouble with their vision- hold up 3 fingers and ask the person how many they see

4. QUESTIONS TO ASK

☐ Ask about their headache- is it an “owie” in one place (normal) OR does their head hurt all over, worst headache of their life
☐ Ask if the sun or bright light bothers them
☐ Ask if they feel like they might throw up.
☐ They should want to eat (unless they just ate)
☐ They should walk normally
☐ They should answer questions clearly and fast

5. RE-EVALUATION

If the swimmer or injured person stays at the pool:
  o Have the coach report back to you on the swimmer’s condition
    ▪ Hourly for a few hours
  o If the person is an adult or driving teenager- find out who else may be with them:
    ▪ Be sure another reliable adult can assist and observe
    ▪ The injured person should not drive
    ▪ Have them check back with you hourly

OR

  o You check back on the injured person hourly

People with a concussion may not be able to make the best decision regarding their own healthcare. Their judgement may not be the best. Concussion symptoms can be subtle, variable, and may not show up until hours after the initial injury.

The Meet Ref or Swim Coach should require the athlete with a possible concussion/head injury be evaluated by a healthcare provider who is experienced in treating concussions, prior to returning to competition or practice. If there is any suspicion of head injury with or without the listed symptoms, the athlete should be referred for follow up with a healthcare provider (experienced in treating concussions). State Law may require this evaluation as well.

The athlete must also present a release to return to swimming competition or practice that has been signed by the healthcare provider.
APPENDIX G: FACILITY SAFETY CHECKLIST

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Date of Safety Check</th>
<th>Action Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deck Checklist</td>
<td></td>
<td></td>
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<tr>
<td>Safety equipment in good condition and available</td>
<td></td>
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<tr>
<td>Rescue tubes and straps in good condition and available</td>
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<tr>
<td>Backboards with head immobilizers and straps readily accessible</td>
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<tr>
<td>First Aid station clean, supplies accessible and well stocked.</td>
<td></td>
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<tr>
<td>First Aid equipment-AED and oxygen equipment accessible</td>
<td></td>
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<td></td>
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<tr>
<td>Telephones working properly – emergency phone numbers posted and visible</td>
<td></td>
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<td></td>
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<tr>
<td>Rules posted and clearly visible</td>
<td></td>
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<tr>
<td>Deck not slippery and in good condition – no raised edges, cracked tiles, etc.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Deck clear of patrons’ belongings</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>All equipment used by patrons stored properly</td>
<td></td>
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<td></td>
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<tr>
<td>Deck is clear of standing water</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Deck is not slippery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deck is clear of glass objects</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Pool Checklist

<table>
<thead>
<tr>
<th>Description</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ladders secured properly</td>
<td></td>
</tr>
<tr>
<td>Steps not slippery and in good condition</td>
<td></td>
</tr>
<tr>
<td>Ramp not slippery and in good condition</td>
<td></td>
</tr>
<tr>
<td>Lane lines attached properly and buoys intact – no sharp edges</td>
<td></td>
</tr>
<tr>
<td>Water temperature in the pool meet the USA Swimming Regulation 103.7</td>
<td></td>
</tr>
<tr>
<td>Pool depth markings/warnings are clearly visible</td>
<td></td>
</tr>
<tr>
<td>Water color and clarity satisfactory</td>
<td></td>
</tr>
<tr>
<td>Pool free of debris and drain cover secured</td>
<td></td>
</tr>
<tr>
<td>Gutters cover intact and with no sharp edges</td>
<td></td>
</tr>
<tr>
<td>Water chemical readings and circulation meet the local ordinance standards</td>
<td></td>
</tr>
<tr>
<td>Starting blocks are anchored properly and secure</td>
<td></td>
</tr>
<tr>
<td>Starting blocks starting surface – non-slippery</td>
<td></td>
</tr>
<tr>
<td>Starting blocks properly labeled or closed for warm-ups</td>
<td></td>
</tr>
<tr>
<td>Backstroke flags at the correct distance and height</td>
<td></td>
</tr>
<tr>
<td><strong>Locker rooms</strong></td>
<td></td>
</tr>
<tr>
<td>All areas clean and free of algae</td>
<td></td>
</tr>
<tr>
<td>Floors clean and not slippery</td>
<td></td>
</tr>
<tr>
<td>Drains clean and wastebaskets empty</td>
<td></td>
</tr>
<tr>
<td>Lighting fixtures operate properly</td>
<td></td>
</tr>
<tr>
<td>Drinking fountains and sinks clean</td>
<td></td>
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<tr>
<td>------------------------------------</td>
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</tr>
<tr>
<td>Lockers/benches secured in place with no rough edges</td>
<td></td>
</tr>
<tr>
<td>Toilets and urinals clean and operating</td>
<td></td>
</tr>
<tr>
<td>Toilet and paper towels stocked and supplies available</td>
<td></td>
</tr>
<tr>
<td>Locker rooms clear of glass objects</td>
<td></td>
</tr>
<tr>
<td>Recreational Equipment and Play Structures</td>
<td></td>
</tr>
<tr>
<td>Ladders to diving boards – Closed</td>
<td></td>
</tr>
<tr>
<td>All play structures – Closed</td>
<td></td>
</tr>
<tr>
<td>Chemical Storage Areas</td>
<td></td>
</tr>
<tr>
<td>Chemicals stored properly</td>
<td></td>
</tr>
<tr>
<td>Doors labeled properly</td>
<td></td>
</tr>
<tr>
<td>Signs legible and in good condition</td>
<td></td>
</tr>
<tr>
<td>Doors locked</td>
<td></td>
</tr>
<tr>
<td>No suspicious odors</td>
<td></td>
</tr>
<tr>
<td>Other Areas of Concern</td>
<td></td>
</tr>
<tr>
<td>Pavements for walkways and parking lots are free of damage and/or deterioration that could lead to accidents resulting in an injury</td>
<td></td>
</tr>
<tr>
<td>Lighting fixtures along walkways and in parking lots are operable</td>
<td></td>
</tr>
<tr>
<td>Building exits are free of debris, permitting easy access and egress</td>
<td></td>
</tr>
<tr>
<td>Fences and gates surrounding the facility are in safe and working order</td>
<td></td>
</tr>
<tr>
<td>Entrances to the pool area can be locked to prevent access during non-operating hours</td>
<td></td>
</tr>
<tr>
<td>Emergency Plans</td>
<td></td>
</tr>
</tbody>
</table>
Facility Emergency Action Plan
Facility Weather Action Plan
Emergency equipment is readily accessible
LSC Incident Report Form Available
LSC Incident Report Form Has Been Completed and Filed

A signature is required of one of the following:
Facility or Meet Director __________________________ Date __________
Referee __________________________________________ Date __________
Designated Safety Officer __________________________ Date __________

APPENDIX H: POOL SPECIFIC FIRST AID KIT

A well-stocked first-aid kit, kept in easy reach, is a necessity in every facility. There are many commercial kids available for purchase, but it is not difficult to put together a good first aid kit. The items will fit into several categories (see below). You don’t need a fancy container for your first-aid items – just make sure you will be able to find what you need without tearing the whole thing apart. You should plan to check and restock the first-aid kit on a regular basis, after every incident it is utilized, after every meet hosted, and at the start of each new season. Remember that all injuries must be reported to USA Swimming via the Report of Occurrence Form and to the LSC Operational Risk Chair.

When deciding which products to put in your kit, think about where and how it will be used and by whom. A first aid kit for outdoor facilities would contain materials for the care of sunburn for instance. A suggested first aid kit contents are listed below.

Protecting yourself first is very important so the item stored within easy reach in your kit will be nonlatex or vinyl gloves.

Artificial Respiration: If the victim is not breathing and you are going to do Artificial Respiration, you will want to protect yourself with a shield or a mask with a one-way valve.

Bleeding Control: Something to absorb blood and perhaps to apply pressure is needed. It may be necessary to pull edges of a cut together. This can be done with a steri strip or
other brand of wound closure strips.

**Cleansing and Disinfecting:** Most injuries will not require pads or pressure dressings but they all must be cleaned to prevent infection. Clean scrapes and cuts with soap and water. Blot dry and then cover with bandage or other dressing. You may use wound cleansers if there are no allergies or sensitivities but soap and water work just fine.

**Dressing the Wound:** Some wounds are bigger than a Band-Aid would cover. There are several different kinds of dressings available and a variety of shapes and sizes to cover most wounds.

**Care of Burns:** Burn injuries can be from heat, cold, electrical or chemical sources. Most burn injuries are from heat sources. It is important to stop the burning process and remove any clothes and jewelry from and near the injured area. If the burn is from chemicals immediately flush the injured area with a large amount of water. Cover burns with a dry dressing and refer the injured person to the closest urgent care or emergency department. Persons with large surface area or burns to the hands, feet, and face or genital areas should be taken to an emergency department for further evaluation and treatment. All electrical burns should be evaluated at the emergency department and transported by ambulance because of the possibility of heart rhythm disturbances.

**Strains, Sprains, Fractures and Splinting:** Ice bags can be made from disposable plastic bags and crushed ice or you can purchase first aid cold packs for use with sprains, strains or possible fractures. Splints can be made from rolled magazines, pillows, and coats that are then taped in place to support an injured arm or leg. Tongue depressors make great splints for fingers.

**Care of Eyes:** An eye flush should be available in case a chemical substance gets in someone’s eye. Flush the eye well with the eye flush over a sick and someone assisting in holding the eyelid open.

Suggested contents of a first-aid kit: See presentation on:  

[www.usaswimming.org/riskmanagement](http://www.usaswimming.org/riskmanagement)

Don’t count on the facility to have a properly stocked kit. On a regular basis before a practice or meet the first aid kit should be checked. It is recommended that each team have their own kit for travel and to supplement supplies at the pool.
APPENDIX I: MARSHAL’S WALLET CARD

APPENDIX J: REFEREE’S SAFETY CHECKLIST WALLET CARD

- Note, Locate, Resolve
  - Locate nearest exits
  - Locate and meet facility Manager and Safety Staff leader
  - Check Emergency Action Plan
  - Locate first aid equipment, check contents
  - Is the pool chemical balance and temperature OK?
  - Locate emergency call phone and numbers
  - Locate: backboard, blood spill equipment and AED
  - Ambulance - on campus or external? Directions to the pool available?
  - Note dangerous areas including loose cords or electric wires - resolve
  - Forms – Are Report of Occurrence forms available?

- 911 and Lightning Protocols
  - Learn - Convey to coaches, officials
    - Who monitors lightning? Are there “Safe” areas?

- Marshals
  - How many? Is coverage adequate? Distinctively dressed?
  - Do they understand their function?

- Are medically trained personnel at the meet?
  - Ask, Introduce yourself

- Pool and Equipment
  - Blocks: stable? not slippery?
    - handgrips safe? sharp edges?
  - Is pool deep enough to use starting platforms?
  - Is diving board blocked off, and not hazardous?
  - Are the lane lines safe? loose wires, stable anchors.
  - Are ladders safe?
  - Is training equipment out of the way?
  - Is the deck too slippery?
  - Are there any open pole or starting block holes?
  - Touch Pad and Anchors: sharp edges, projections
  - Consider accommodations for swimmers with disabilities
  - Is there sufficient gathering area behind the blocks?
  - Are Spectators separated from Meet Operation areas?
  - Can Officials operate safely and without interference?
  - Shade, Hydration and Chairs for Officials and Timers.
  - Warmup Pool – don’t forget all above that’s applicable.

*Don’t hesitate to stop the meet and resolve any safety issues anywhere in the venue!*
APPENDIX K: REPORT OF OCCURRENCE FORM

How do USA Swimming and Risk Management Services, Inc. find out when an accident occurs? The online Report of Occurrence form is used for this purpose. Reporting all incidents, no matter how minor, is important to inform both USA Swimming and its insurer of accidents and potential claims. Go to www.usaswimming.org/ROO.

As stated in the USA Swimming Insurance Summary, a Report of Occurrence form must be completed any time an accident occurs at a USA Swimming function, whether or not it involves a USA Swimming member. This form must be filled out and submitted regardless of how minor the accident may appear. Injuries involving volunteers and spectators should also be reported. The form should be completed by the meet director/referee, their designee or club personnel responsible at the time of the incident; the parents of the injured athletes should not be asked to complete the report form.

Report should be filed online through the following link: https://fs22.formsite.com/usaswimming/form18/index.html

Once the report is received at USA Swimming National Headquarters, information about the incident is entered into the USA Swimming database for future safety education and insurance purposes. When a Report of Occurrence form is received, membership status is verified. If the participant is a USA Swimming registered athlete, information about the Excess Accident Medical Insurance policy and claim forms are sent to the injured party's family. In the case of a non-athlete member or volunteer, claim forms are sent to the injured party. As a reminder, this is an excess accident medical policy. This program is secondary to other primary insurance in place through the member's employment, school or family. The deductible is the greater of the total of other collectible benefits from primary insurance sources applicable to the injury or $100 of medical expense where there is no primary insurance.

The Report of Occurrence form helps USA Swimming and its insurance broker be able to identify potential claims or liability situations. If the accident is of a serious nature, USA Swimming National Headquarters and their insurance broker can immediately forward to the insurer to start an investigation into the circumstances of the claim.
APPENDIX L: PROFESSIONAL CARE FROM THE AGE GROUP PERSPECTIVE

By Debora Packard, Former Chair, USA Swimming Safety Education Committee
(updated by the Operational Risk Committee, Spring 2016)

INTRODUCTION

Everyone benefits from a safety conscious team. The purpose of teaching safety awareness to athletes is to emphasize safe habits and teach accident prevention techniques by providing the necessary tools and guidance.

Every age group has different characteristics and there are methods available that appeal to each one. Team activities that can be used with every group include:

- Publish the rules and go over them with the swimmers
- Talk to the swimmers about safety with a question and answer period
- Give a safety survey to swimmers and discuss the results as a group
- Give safety tips to swimmers before, during and after practice
- Adopt a team safety motto
- Make safety posters around the safety motto and display them in strategic areas
- Include your safety motto in the team newsletter
- Keep records of accident free seasons, months, and weeks; offer a reward
- Designate an annual/seasonal Safety Awareness Week

10 & Under

Children in this category enjoy compliments, games, coloring contests and immediate feedback. They live in the here and now, with a shorter attention span, and will need constant reminders about their actions. Adults and older swimmers are their yardsticks to measure acceptable behavior. This group is easy to teach safety skills to because they haven’t yet developed long standing bad habits. They still try to please adults and aren’t as influenced by peer pressure yet.

- Reward safe behavior with a sticker, pin, etc.
- Sponsor a Safety Poster or coloring contest
- Have a safety scavenger hunt with a facilities checklist
- Be consistent
11-12-13

This group is in a transition stage. They want and need to be treated like adults some of the time, but sometimes they want and need to be treated like children. They are testing and challenging limits constantly, trying to develop their personalities. Peer pressure is a strong factor with this group. They don’t like to stand out in a crowd and common goals will be a key for effective safety education. Give them respect and don’t talk down to them.

14 & Older

The team leaders. They believe they are invincible. They will prefer discussion over worksheets. There is still the factor of peer pressure with this group; they will be more selective about their friends. The coaches’ attitudes are extremely important for this group. They will follow rules for the “sake of the younger children.”

☐ Give them leadership and responsibility
☐ Make them part of the solution rather than part of the problem
☐ Tell them that they are setting the standards
☐ Assign them a younger swimmer or swimmers to help
☐ Let them help write the rules by guiding the discussions with questions such as:
  o How can we make this team safe for the younger swimmers?
  o Can you think of a good game for the younger swimmers?
  o What would you tell a younger swimmer about racing starts?
  o What would you tell a younger swimmer about running around?
☐ Make safety a priority
☐ Be consistent

Coaches need to develop a **safe** philosophy and incorporate **safe** practices into the overall swimming program. This is easy to do with a **positive** attitude. If the coach is having fun with safety the kids will follow suit.

There are several benefits for a swimming club with a Risk Management and Safety Program in place:

1. A risk management and safety program will help increase membership because parents want and expect their children to be in a **safe** environment.
2. Community support and pool use opportunities increase because the various agencies are aware that risk is lowered through active involvement in a **safe** program.
3. Team spirit and camaraderie increase because swimmers have a common **goal**, **goal**
(i.e., accident free seasons and the rewards that go with that).

4. Safety programs do reduce the risk of accidents and injuries! This reduces lost time for swimmers during a season, as well as fewer headaches for coaches.

5. A safety program will make the coaches’ jobs easier.

Guidelines for Safety Discussions

I. Why safety is important

A. Avoid accidents because…
   1. Injuries hurt
   2. Injuries cost money
   3. You will feel bad if you hurt someone else
   4. Injuries result in lost time from swimming

B. You can have more fun being safe because…
   1. You are less likely to get hurt
   2. Your friends are less likely to get hurt
   3. Other kids, parents and coaches won’t get mad at you
   4. You learn to avoid trouble
   5. There will be more time for play if no one gets hurt

II. Safety rules have a reason

A. Following rules makes good times better because…
   1. You know what is expected from you
   2. You might avoid an injury

B. Rules are made to protect you
   1. Imagine a world with no rules
      a. It would be crazy
      b. No one would know what is expected from them
      c. You would have no protection from bullies
      d. You would not be safe
   2. Imagine a swim meet with no rules
      a. There would be running, pushing and fighting
      b. There would be diving, jumping and horseplay everywhere
      c. You might be the one to get hurt and have no protection
3. Rules are good for you
   a. They make the world a safe place
   b. They make swimming pools safer
   c. They are not something the coach just likes to yell about

III. Keys for safe swimming
A. Common Sense
   1. If it could hurt you or someone else, **don’t** do it
   2. If you have doubts about the safety of an action, **don’t** do it
   3. Think about the consequences or results of your actions
   4. Thinking ahead will help you avoid a bad situation
B. Courtesy
   1. Follow the “Golden Rule”
   2. Respect other people and their feelings
C. Commitment
   1. Practice safety every day in everything you do
   2. Remind others about safety

IV. Three rules to avoid accidents
A. Stop
   1. Stop and think before you act
   2. Remind others about safety
B. Look
   1. Look where you are going
   2. Look up, down, and all around
   3. Look before you leap
   4. Look for dangerous areas
C. Listen
   1. Listen to your coach
   2. Listen to the officials
   3. Listen to your parents
   4. Listen to your conscience (no matter how tempting a situation may be, your
V. Safety considerations for pool areas and locker rooms

A. Always walk
   1. Do not play chase games (especially with younger swimmers)
   2. Pool decks and locker room floors are often wet and slippery
   3. You may slip and fall
   4. You might run into someone else
      a. It will hurt you if you run into a bigger person
      b. It will hurt a smaller person if you run over them
   5. You might trip or stumble into a wall or other object
   6. When you play chase, sometimes you don’t look where you’re going

B. Be careful on stairs and bleachers
   1. Use handrails all the time
   2. Stairs and bleachers are steep, and gravity pulls you down fast
   3. Injuries from falls on stairs/bleachers can be extreme
   4. Multiple injuries can result from falls on stairs and bleachers

C. Stay off starting blocks, diving boards, lifeguard stands, railings and other equipment
   1. If you fall from a platform…
      a. You could land on your head on concrete
      b. You could land on a lane rope
      c. You could land on another person
      d. You could break bones or teeth
   2. If you don’t know how to use equipment properly…
      a. You could fall off it
      b. You can be pinched or caught in pulleys and cords
      c. You can damage your muscles, joints, and bones
      d. You can lose an eye, a tooth, bloody your nose or get bruised by popping cords and pulleys
   3. Railings and walls are to be used as boundaries, not climbing equipment

D. Stay out of the water until your coach or instructor is present
   1. You can get into water over your head
2. No one could help you if an accident did occur

E. Keep hands, feet, and other objects to yourself
   1. No pushing, hitting, shoving or tripping
      a. Serious injury can result from falling into something
      b. If someone is pushed into the pool, they can
         (1) land on another swimmer
         (2) hit a lane line
         (3) hit the edge of the pool
         (4) hit the bottom of the pool
   2. No snapping towels, caps or goggles
      a. Black eyes, bloody noses and broken teeth are possible
      b. Broken equipment can result
   3. No hitting or throwing kickboards, paddles, buoys or other equipment
      a. Being hit with equipment hurts a lot
      b. Equipment is hard and can cause gashes, black eyes, bloody noses and lumps

F. Use plastic containers for shampoo, lotion, conditioner, soap
   1. Glass is slippery when it is wet
   2. If glass bottles shatter, sharp pieces will fly in every direction
   3. Someone may get hit in the face with flying shards
   4. Anyone can step on glass slivers which are hard to see

G. Turn cold water on first in the shower
   1. You may be scalded by water that is too hot
   2. Being scalded can cause a reaction and you can fall

VI. Safety rules while you are in the water

A. No dunking or splashing
   1. It causes choking
   2. It scares people

B. Stay in the area of the pool your coach or instructor tells you to
   1. If you flip over the lane lines, you can be run over by other swimmers
   2. You may get in front of someone who is jumping into the pool

C. While circle swimming, watch where you are going
1. You can bump into someone else and both get injured
2. You can catch yourself on lane lines
3. You can run into the walls

D. Look below, into the water, **before** you enter the pool
   1. Enter the water *feet first* the *first time*
   2. Check the depth of the water
   3. No diving
   4. Do **not** practice racing starts without coach’s supervision
   5. Look for swimmers who may be doing backstroke starts
   6. **Always** look for other swimmers

E. Leave candy, gum and food for after practice. They can choke you
   1. Leave jewelry at home
   2. Rings, bracelets, earrings and other jewelry can catch on lane ropes which will wrench you
   3. Jewelry can gash other swimmers
   4. You may lose your jewelry

VII. Summary
   1. You can learn to be safe around the pool
   2. Look out for yourself and others
   3. Respect the rights and feelings of others
   4. Consider your own responsibility for a safe swim team
   5. Be safe, not sorry

**Questions for Safety Surveys** (add your own to the list)

**10 & Under**
- Do you know the safety rules?
- If you pushed someone in the pool, what would you feel like?
- What would they feel like?
- Would you get in trouble?
- What types of safety games do you like to play?

**11-12-13**
- Why is safety important?
What can you do to prevent accidents?
Should you watch out for younger swimmers in practice and meets?
What would you do to avoid a dangerous situation, especially when your friends are doing it?
Is it hard to say no to your friends?
Can you make up a safety game for little kids?
What would you tell an 8 & under if they were running in the locker room?
Have you ever had an accident around the pool?

14 & Older
Why is safety important?
What can you do to prevent accidents?
How would you make this team safer for the younger swimmers?
What would you say to a little guy getting into trouble?
What would you say to a 10 & under hanging from the rafters?
Do you know of any games we can use for younger swimmers?

APPENDIX M: BLOOD BORNE PATHOGENS

Body Fluid Clean Up

Any bodily fluid (blood, vomit, urine, feces) spill on the pool deck, locker rooms etc. must be promptly removed and the area cleaned. Proper personal protection, gloves, eye shields, face masks etc. must be available to all personnel responsible for this duty. The area that must be cleaned will be blocked so no other people will be walking near the area. Someone must be properly positioned to block off the area, so swimmers, coaches, officials and pool personnel do not accidently come in contact with the body fluids. Once the area has been cleaned, continued personnel blocking the area or signage may keep the area free from personal contact until the 20 minutes after the bleach cleanup has occurred. The recipe for a bleach disinfecting solution is 9 parts cool water, 1-part household bleach, add the bleach to the water and gently mix.
APPENDIX N: RISK MANAGEMENT AND SAFETY RESOURCES

USA Swimming Headquarters is there to support you and supply you with other information that can assist in planning and presentation. Call 719/866-4578 and ask for Risk Management.

The American Red Cross is an excellent resource on many of these topics.

Your own team is a source of information: coaches, parents involved in health and safety fields, or legal fields can help risk management and safety activities.

Community resources such as the pool staff, fire departments, medical, legal and risk management professionals are excellent resources.

RESOURCE LIST

National Agencies:

American Red Cross National Headquarters
Preparedness and Health and Safety Services
2025 E Street, NW
Washington, DC 20006

Website: http://www.redcross.org

To find your local aquatics representative, visit: redcross.org/aquatics representatives

OSHA (Occupational Safety and Health Administration)
(Domestic Only)
U.S. Department of Labor
Occupational Safety & Health Administration
200 Constitution Avenue, N.W.
Washington, D.C. 20210

Website: http://www.osha.gov

Insurance - USA Swimming provides an excess accident medical insurance policy for USA Swimming members while participating or volunteering in a USA Swimming sponsored or sanctioned event. Details of the insurance coverage are on the USA Swimming website under Insurance and Risk Management.

Centers for Disease Control and Prevention - www.cdc.gov/Concussion

Zurich Concussion Conference (2012) - Consensus statement on concussion in
sport: the 4th International Conference on Concussion in Sport held in Zurich, November 2012. http://bjsm.bmj.com/content/47/5/250.full

**California Assembly Bill 25 and various other state laws -**

School districts, facilities or other youth organizations that permit athletic competition by nonprofit organizations require an athlete who is suspected of sustaining a concussion or head injury during the meet or practice to be immediately removed from the activity for the remainder of the day. The athlete cannot return until he or she is evaluated by, and receives written clearance from, a licensed health care provider, trained in the management of concussions, acting within the scope of his or her practice.

**ODH Violence and Injury Prevention Program -**
www.healthyohioprogram.org/concussion

**National Federation of State High School Associations -** [www.nfhs.org](http://www.nfhs.org) – Index on concussions and see “A parent’s guide to concussion in sports”.

**CDC –** see [www.healthyswimming.org](http://www.healthyswimming.org) and [www.cdc.gov/concussion](http://www.cdc.gov/concussion)

**USA Swimming Member Services Staff**
1 Olympic Plaza
Colorado Springs, CO 80909
Website: http://www.usaswimming.org
Phone: (719) 866-4578

**Staff Contacts:**

- **Risk Manager and Operational Risk Committee Staff Liaison** and – George Ward
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