

Dundee, Genoa, Hampshire & Huntley Park District
Youth Soccer League
Coaches Handbook

Coaches Manual & General
Rules
Pre K – 8th Grade

Table of Contents

Game
Procedures.....
.....3-5

What to expect when coaching different age
groups.....6-11

Common Soccer
Terms.....12

Practice Help for
coaches.....13

First Aid
Information.....1
4-19

Pre-Game Procedures:

1. Please have your team arrive to the field at least 15 minutes before your scheduled game time.
2. Warm-ups for your team are encouraged. (i.e. quick shooting drills, stretching, running, etc...)
 - a. Your team may use the game field if it is not being played on at that time
 - b. Otherwise choose an area to the side where your team can warm-up
3. **Introduce yourself to the referee(s)/opposing coach** to go over any details that might need to be covered before the game begins. (The refs will be instructed to do the same)
4. 5 minutes before your game time the referee will check equipment for each team to make sure each player is properly equipped with uniform, shin guards, & shoes.
5. Prior to each game and practice the coach and/or their assistants should walk the field identify any hazards with the field.
Ensure all soccer goals are properly anchored. Safety warning stickers affixed to all goals.
6. Any potential or existing safety hazard that is observed must be reported immediately to the Recreation/Athletic Supervisor through verbal or written form. If the hazard can be rectified immediately, by doing such things as removing litter, the coach should take action to do so prior to the game/practice. It is the responsibility of the coach to report any such matter.
7. Once equipment has been checked and approved by the referee/coach –For all grade levels, coaches will send 2 captains to the middle of the field for the pre-game coin toss to see which team will kick-off to and which goal to defend to start the game. (if no one has a coin, rock papers, scissors will suffice)
 - If your team wins the coin toss – You choose Kick-off or which goal to defend
 - Opposing team chooses which goal to defend for the first half or they will kick-off

Game Conduct

1. During the game the **goal lines must be kept clear of all spectators.**
2. The two teams must sit on the same side of the field & all spectators **MUST** sit on the opposite sides of the field.
3. All spectators must remain about 3 yards away from the field of play. The referees are instructed to enforce this rule. We ask that the coaches assist the referees in enforcing this rule.
4. At half-time for all grade levels – Teams must switch sides and defend the opposite goal from the first half.
5. Both teams must line up and shake hands at the conclusion of the game. Unsportsmanlike conduct will not be tolerated at this time; this applies to the players, coaches, and spectators.

Substitutions

1. Substitutions shall be unlimited
2. Substitutions must be made with the **CONSENT OF THE REFEREE/COACH** during the following:
 - a. Prior to a throw-in
 - b. Prior to a goal kick by either team
 - c. After a goal is scored
 - d. At half-time
 - e. After an injury by either team, when the referee stops play

- f. Prior to a corner kick IN YOUR FAVOR (if a sub is made, the opposing team may sub as well)

For 1st & 2nd Grades, substitutions can be made at any dead ball

If a player is yellow carded (warned), that player may be replaced before play continues

Goalies

1. When a goalie is in full or partial possession of the ball, contact with the goalie should be avoided at all times. Referees have been instructed to “blow a quick whistle” to avoid potential contact that could result in serious injury. THIS IS A JUDGEMENT DECISION SOLEY AT THE DISCRETION OF THE REFEREE. Coaches should instruct all players before each game to avoid deliberate contact at all times.
2. For 3rd & up Grades goalies have only 6 seconds with the ball before kicking/throwing it. If a goalie holds the ball for longer than 6 seconds an indirect free kick may be awarded to the opposing team. 3rd & 4th Grade punting is NOT allowed.
3. A goalie may use their hands with-in the penalty area only. If a goalie touches the ball with their hands outside the penalty area it is considered an intentional handball. For 3rd & up Grades the referee may award the opposing team a direct kick.
4. For 3rd & up Grades - in case of a penalty kick, the opposing goalie shall stand without moving his/her feet on the goal line, between the goal posts until the ball is kicked. (1st & 2nd Grades no penalty kicks are awarded at any time)
5. All goalies must have a distinctive jersey different from all other players on the field.

Fouls

1. For 1st & 2nd Grade all fouls will be at the referee’s discretion & will result in the opposing team awarded an indirect kick from the point of the foul. (Indirect kick = 2 players must touch the ball before a goal is scored). No penalty kicks for K – 2nd Grade.
2. For 3rd & 4th Grade all fouls called will be under the discretion of the referee(s)

For specific game rules for your grade level see the NWRSL rule book that has been provided.

Required Player Equipment

1. Soccer shoes that fit well are encouraged
2. Shin guards are required to be worn for both games and practices. Our referees have been instructed to check for shin guards before the beginning of each game. If a player is not wearing shin guards, that player may not play until he/she is wearing shin guards.
3. Every player is encouraged to bring his or her own soccer ball to practice.
4. Players must be in full uniform: Jersey, Shorts & Socks

Clothing for inclement weather is permitted if worn under the official uniform. Only soft fabric, knitted ski-type hats may be worn on cold days. Headbands to control hair are permitted at any time as long as they conform to N.F.H.S. rules.

General Rules

Here are some general rules that we would like all coaches to follow during the season.

Length of Games

1st & 2nd Grade – Four (4) - Ten (10) minute quarters

1 minute breaks in-between quarters and 5 minutes at half

3rd & 4th Grade –Two (2)-Twenty-Five (25) minute halves

5th & 6th Grade –two (2)-thirty (30) minute halves

7th & 8th Grade –two (2)-thirty-five (35) minute halves

5 minutes at half time

The referee(s) will keep time

Of Players on the Field (All #'s are including a goaltender)

1 st & 2 nd Grade	Games will be played	6 vs. 6 includes goalie – 1 st Grade 1 coach/team allowed on the field 2 nd Grade NO Coaches allowed on the field
3 rd & 4 th Grade	Games will be played	7 vs. 7 including goalie - no coaches allowed
5 th & 6 th Grade	Games will be played	9 vs. 9 including goalie – no coaches allowed
7 th & 8 th Grade	Games will be played	11 vs. 11 (league may adjust dependent on #'s)

*The only time that these #'s may vary are if both team's coaches & the referee(s) agree to play with a less amount of players for both teams because of low attendance. The #'s may not go up however.

1st & 2nd Grade – must have a minimum of 5 players to start the game

3rd & 4th Grades must have a minimum of 6 players to start the game.

5th & 6th Grade must have a minimum of 7 players to start the game

7th & 8th Grade must have minimum of 9 players to start the game

If the minimum requirements are not met by 10 minutes after the scheduled game-time, a forfeit will occur.

***Even though one team has fewer than the # of players needed for a full team, the opposing team does not have to match the lower number. Or teams must match the lower number**

*The only time that these #'s may vary are if both team's coaches & the referee(s) agree to play with a less amount of players for both teams because of low attendance. The #'s may not go up however.

Playing Time for the Players

1. Coaches are expected to play their team members who are in good standing, at least one half (1/2) of the game.
2. If the coach has players missing practices without notifying the coach or who have discipline problems, he may play a team member less than the required time, but **the coach must inform the player's parents & Park District before doing so.**

Spirit of Sportsmanship

1. **If one team has fewer than the required # of players on the field the opposing team has the option to match their opponents number and play the game with less players or to play at full strength.**
2. If one team takes a FOUR-GOAL LEAD (4) over an opponent, the leading team must rotate offensive and defensive players or substitute players upon gaining a four-goal lead.
3. If one team takes a FIVE-GOAL LEAD (5) over an opponent, the trailing team will be allowed to add one player to the game and play with a manpower advantage until the lead has been reduced to 4 goals.
 - a. The trailing team is entitled to a one-player advantage (12 vs. 11) with a 5 –goal lead.
 - b. The trailing team is entitled to a two-player advantage (13 vs. 11) with a 7 – goal or greater lead.
 - c. The trailing team would remove a player from the game upon scoring a goal.

4. If a team began the game with less than a complete team (see rule #1 above), the relative player advantage would remain as listed. If the trailing team has no additional player, the team with the lead would remove one or more players from the field to meet the requirements of this ruling. The minimum number of players would be seven (7).

Thank you and please do not hesitate to ask if you have any questions or concerns about the upcoming soccer season, or if there is anything the Addison Park District can do to make your coaching experience more enjoyable.

What to expect when coaching youth soccer players from Pre K–8th Grade

Drills & Ideas

Characteristics of Pre K - Kindergarten Soccer Players

- Short attention span
- Can attend to only one problem at a time
- May understand simple rules that are explained briefly and demonstrated
- May or may not understand or remember: What lines mean on the field; what team they are on; or what goal they are shooting for. Please be patient and laugh with them as they get “lost” on the field.
- Children at this age group are very easily bruised psychologically. Shout praise often. Give “hints” and never criticize. Children need to play without pressure in order to be successful.
- Children at this level are very individually oriented (me, my, mine).
- They are constantly in motion, but have no sense of pace. They will chase something until they drop. They are easily fatigued but recover very quickly.
- Development for boys and girls is very similar.
- Physical coordination is limited – Eye – hand and eye – foot coordination is not developed.
- Love to run, jump, roll, hop, etc...
- Can balance on their “good” foot.

Things to expect of Pre K - Kindergarten Soccer Players

As coaches of these younger players there are things that we know that we can expect during training and games. If we know what to expect, we will be more effective in dealing with the hundreds of situations that come up. This will help us relax, and in turn, allow us to enjoy the unpredictable nature of working with these children even more. Here is what we can expect:

- Most players cry immediately when something is hurt. Some cry even when something is not hurt.
- No matter how loud we shout, or how much we “practice” it, they cannot or will not pass the ball.
- Somebody will come off the field in need of a toilet. Somebody will stay on the field in need of a toilet.
- The only player that will stay in the instructed position of play is the goalie. Everyone else will act like a magnet to the ball and forget what position they are playing.
- Several players will slap at the ball with their hands, or pick it up. Several parents will yell at them not to do that.

- A model rocket that is launched from a nearby field will get 99% of the player's attention. By all means, stop whatever you are doing and go watch for a couple of minutes!
- During the season, you will end up tying at least 40-50 shoelaces.
- They will do something that is absolutely hysterical. Make sure that you laugh with them!

Coaching Rational:

It is important to understand at the outset that players coming to any sport at the ages of 4 or 5 years old, in general, do not do so by their own choice. As a result, their coaches need to give them something about which to get excited about. Further, at this age, learning soccer is secondary to most other things in their lives. Let's take a look at some things that we can do to energize this age level and get them to the point where they will enthusiastically want to play soccer year after year!

- Each practice session should be geared around touching the ball as many times as possible. Basic movements such as running, skipping, hopping, etc... need to be emphasized. If these are done while kicking, catching, rolling, or dribbling a ball.... All the better!
 - Try to have as many different types of activities ready as you can get into one hour. REMEMBER-The emphasis needs to be placed on what is FUN!
 - Even though each player may have similar birth dates, his or her physical and/ or mental maturity may vary as much as 36 months (3 years). Activities need to accommodate these differences whenever possible.
 - Team play and passing the ball are alien concepts to these players. They know that if they pass the ball, they may never get it back. In fact, they will often steal the ball from their own teammates. Don't get frustrated if your players do not pass, let them dribble to their heart's content.
 - Plan for at least 4-90 second drink breaks, especially in warmer weather. Their "cooling system" is not as efficient as older players. This will also allow you to break up your practices to teach different skills after each break, or review what has already been taught.
-

Characteristics of 1st & 2nd Grade Soccer Players

- Attention span is a bit longer than the previous age group players, but they are still not at a "competitive" stage.
- Inclined towards small group activities.
- Always in motion: scratching, blinking, jerking, rocking etc...
- Easily bruised psychologically. They will remember negative comments for a long time. Shout praise and give hints to encourage success.
- They want everybody to like them.
- They begin to imitate older players or sport heroes. They want the same "gear" as them.
- Lack a sense of pace. They go flat out until they drop.
- Their skeletal system is growing rapidly. This often results in apparent lack of coordination.
- Cardiovascular and temperature regulation system is not developed. Their heart rate peaks quickly and they overheat quickly. Make sure they get adequate water breaks.
- Limited understanding with personal evaluation. They perceive it as if they try hard they performed well, regardless of their actual performance. For that very reason, they need to be encouraged constantly and asked, "Now, can you do this?"
- Better at recognizing when the ball is out of play and remembering what goal they are going for, but in the heat of the battle they will sometimes forget.
- They find it difficult to really be aware of more than one thing at a time.

Things to expect from 1st & 2nd grade soccer players:

This grade level will be able to follow 2 or 3 step instructions and are starting to have a good understanding of what it means to play a "game". They are also starting to cooperate more with their teammates. In fact they now will recognize that they even have teammates by the fact that they occasionally, and I mean occasionally, will pass the ball to a teammate, on purpose. Often, they will repeat the phrase "I can't do that", but will quickly run to show you that they can, and even when they only think that they can do something. Try to encourage your players that they can do anything with

practice. Here are some other things that you can expect to happen during the season with these soccer players:

- There will be at least 200-300 falls during the season, but now they usually pick themselves back up.
- The puddle in front of the goal is still too tempting to resist.
- Some of the girls are a lot tougher than the boys.
- It will be impossible to remember who is whose best friend as you try to make up teams.
- School conflicts will come up...please let them go (they must face their teachers five days a week).
- They will wear their uniform to bed.

Coaching rational:

Some of these players have had two years of soccer experience and thus have touched the ball a few thousand times in their lives. This, however, does not mean these players are ready for the mental demands of tactical team soccer. True, they do have some idea of the game, but the emphasis still needs to be placed on the individual's ability to control the ball with his/her body. They are still there to have fun, and because some of the players may be brand new to the sport, it is imperative that activities are geared towards individual success and participation. Here are some items for you (the coach) to consider while developing your practice plan.

- Small-sided soccer is the best option for these players. Not only will they get more touches on the ball, but also, it is an easier game to understand.
 - Because of rapid growth spurts during this age, players will go through times when they seem to have lost control of their body. What they could easily do 2 weeks ago now seems unattainable. BE PATIENT.
 - Passing is not an important part of their game, no matter how much anybody yells at them to pass the ball, it is much more fun to dribble and shoot. LET THEM.
 - Challenge them to get better by giving them homework at the end of each practice session. Give them a specific skill for them to work on and review at the beginning of your next practice. There is no rule that says they cannot learn by themselves.
 - Incidental things are important. They are forming the habits that will impact their future participation. Ask them to take care of their equipment, cooperate, listen, behave, and try hard. Realize that they will often forget to do any of those things and will need to be reminded very frequently. Again, be patient.
 - Ask them to work with others to solve certain challenges. Start them with just one partner and work from there. This is how you plant the seed to develop the concept of a TEAM.
-

Typical practice session for Pre K-Kindergarten, 1st & 2nd grade soccer players:

WARM-UP: A brief warm-up is appropriate in order to get the players thinking about soccer. Any activities that involve the soccer ball are key. It will keep them interested and the more times they touch the ball the better they will become at handling the ball, which will make coaching a little easier.

INDIVIDUAL ACTIVITIES: Follow the warm-up with some kind of individual activity. Tag games, a game of "Red Light-Green Light", or any game that will keep the players in motion at all times. Avoid having the players stand in lines. Play games of "inclusion" instead of games where the "looser sits". Teach them skills such as dribbling

PLAY THE GAME: move on to a real game, but make sure it is a 2 vs. 2, 3 vs. 3 or 4 vs. 4 games. Switch the game every 5 minutes or so. Be creative. Play with 4 goals, or 2 balls. Play with or without boundaries. Use cones if you do not have real goals. Keep the players involved. Have more than one game going on at a time if necessary. It is important that every player has a chance to shoot on a goal as often as possible.

COOL-DOWN & HOMEWORK: Finish the session with a cool-down. Give them some more stretches to do with the ball. You may want to review what you started the session with. Also, give them homework so they can practice on their own. Think of some ball trick that you would like to see them do, like bounce the ball off their thigh and then catch it. It is important to finish practice on time. This is

especially essential if the players are really into the practice. Stop at this point and you will get an enthusiastic return.

Remember to give your players at least 4-90 second water breaks during practice

Characteristics of 3rd and 4th grade soccer players:

- Gross and motor skills are becoming more refined and reliable. Boys and girls are beginning to develop separately.
- Ability to stay on a task is lengthened. They have the ability to sequence thought and actions.
- Greater diversity in playing ability and physical maturity.
- Skills are emerging and are becoming more predictable and recognizable.
- Some children begin to move from concrete thinking to abstract thinking.
- Able to pace themselves and plan ahead.
- They have an increased self-responsibility. They remember to bring their own equipment...sometimes.
- Starting to recognize basic tactical concepts, but not exactly sure why certain decisions are better.
- Repetition of technique is very important, but it must be dynamic, not static.
- Continued positive reinforcement is needed.
- Explanations must be brief, concise, and always mention "why".
- Becoming more "serious" and are openly competitive, without intention of fouling.
- Still mostly intrinsically motivated. Peer pressure starting to be a factor.
- Adult outside of the family may take on added significance.
- Prefer to have identification with a team.
- More inclined towards wanting to play instead of being told to play. Will initiate more play.

Things to expect from 3rd and 4th grade soccer players:

Some coaches say that this age group is beginning to "turn the corner" and starting to look like real soccer players. However, games are still frantically paced and unpredictable for the most part. These players are starting to find out how much fun it is to play the game skillfully, but they will stop and laugh if the referee gets hit in the backside with the ball during a game. Some other things that we can expect when working with this age group are:

- They start to understand off-sides, but still forget when the goal is in front of them.
- They will really beat up on each other during practice.
- During the game, parents will scream out "HANDBALL" or "COME ON REF, CALL IT BOTH WAYS" at least fifteen times.
- They might cry after the game if they lose, but will forget it if you ask them if they want to go out for burgers and fries.
- You might actually catch them practicing on their own without you telling them to do so.
- Their parents are telling them to do one thing during the game, you (the coach) are telling them another thing, but they will probably end up doing is what their friend is telling them to do.
- You will see a pass that is deliberate. You might even see more than one pass during a possession of the ball... Don't count on it though.
- You will see your first \$100 pair of cleats during practice.
- They will call the other team bad names...very bad names. The Park District does not condone this however.

Coaching rational:

The emphasis for this age group still needs to be placed on having players learn how to control the ball with his/her body, but now, they need to find themselves in more game-like situations. Training is more dynamic and starting to have players make simple, basic decisions such as "Which way is there more space?" or "Who should I pass to?" Here are some other items to consider when coaching 3rd and 4th grade soccer:

- Use small-sided games as the main teaching tool. Not only will they get more touches with the ball, but also the full 11-a-side game is still too complicated for them to understand.

- How we group players during training takes on even added significance because of the wide margins of ability levels. We need to mix players up often.
- Stretching is becoming more important, along with a good warm-up. Since the game is faster make sure that each player has all of the required equipment for both games and practices. Safety for all the players is key.
- Put them in competitive environments as much as possible. This will not only keep them focused, but it will allow the game itself to teach them. It will also keep things fun for them, and allow the coach to deal with issues such as “winning and losing” which is now a very big concern for them.
- Now it is possible to team them positional play with the expectation that the players will understand it at some point. Do not allow players to specialize in any one position. They need to learn basic principles of the game first. Having them play all of the positions is best for their individual development. Remember as coaches it is your first responsibility to develop players and let them have fun.
- Whenever possible, allow them to solve their own questions about the game. Constantly ask them “What do you think?” Do not immediately give your players all of the answers. Challenge them to come up with their own solutions; you’ll be surprised what your players can come up with.

Characteristics of 5th/6th Grade & 7th/8th grade soccer players:

- They begin to develop the abilities to sustain complex, coordinated skill sequences.
- Some of the players have reached puberty. Girls, in general, arrive earlier than boys.
- Most of the players are able to think abstractly and are thus able to understand some team concepts.
- They are beginning to be able to address hypothetical situations, and solve problems systematically.
- They are spending more time with their friends and less time with their parents. They are susceptible to conform to peer pressure.
- They are developing a conscience, morality and scales of values...HOPEFULLY.
- Players tend to be highly self-critical. Instruction needs to be enabling. Show them what can be done instead of telling them what not to do.
- Although they are more serious in their play, they are still mainly involved because it is fun.
- They are openly competitive. A few may foul on purpose.
- They are looking towards their role models and heroes in order to know how to act.
- They have a more complex and developed sense of humor.

Things to expect from 5th/6th and 7th/8th grade soccer players:

Coaches at this level say that these players have “turned the corner” and are looking like real soccer players. However, games are still frantically paced and a bit unpredictable for the most part. These players know how much fun it is to play the game skillfully. As a result, we begin to see some of the players drop out who recognize the importance of skill and become discouraged with their lack of skill. We can also expect that these players may do the following as well:

- They will yell at their teammates when they make a mistake.
- They will openly question the referee’s decisions.
- Players will encourage each other.
- They will pass the ball even when they know that they will not get it back.
- Team cooperation is emerging. They will run to a spot, away from the play, even when they know that they might not get the ball.
- They will point out inconsistencies between what you say and what you do. They are “moral watch dogs”.
- The difference in skill levels between players is very pronounced.
- Some players might be as big as you are, some might be half your size.
- Not only will some of the players come to practice with expensive cleats, but also some will come with matching uniforms, sweat-suits, and bag.

- Parents, during games, can be brutal. Some will yell at the referee at almost every call.
- They will get together with friends and be able to set up and play their own game.

Coaching rational:

Coaching at this age level is a challenge because many of the players view themselves as real soccer players; while others are at the point where it is not as much fun as it used to be because they feel that their lack of skill development does not enable them to have an impact on the game. They see their skillful friends able to do magical things with the ball and since they cannot do this themselves, they begin to drop out. Our (the coaches) challenge then, if players are willing, is to keep all of the players engaged, involved, and make them feel important and a part of the team. Skills still need to be the primary focus of training and players need to be put into environments where they are under pressure so that they learn how to use their skills in a variety of contexts. Here are some other points to consider while coaching 5th/6th & 7th/8th grade soccer players:

- Our goal is to develop players in a fun, engaging environment. Winning has its place but must be balanced with other goals of teaching them to play properly. Some decisions will need to be made that might not necessarily lead to wins. This is how you build a team concept in the players' minds. We want the players to understand that the team should come first.
- Smaller, less skilled players cannot be ignored. Although it may be tempting to “win” by playing only bigger, highly skilled players in key positions, the smaller, less skilled players must also be put into areas of responsibility. Again trying to get everyone focused on the team concept.
- Small-sided games are still the preferred method of teaching the game. It makes learning fun and more efficient. You also get to see your player's creativity to come out.
- Flexibility training is essential. Have them stretch after they have broken a sweat in the beginning of practice, also have them stretch at the end of practice as a method of cooling down.
- They are ready to have a preferred position, but it is essential for their development for them to occasionally play out of their preferred spot, in training, as well as during games.
- Practices should focus on one or two topics a session. Activities should be geared to progressing from fundamental activities that have little or no pressure from an opponent to activities that are game-like in their intensity and pressure.

Typical Practice Session for 3rd, 4th, 5th/6th & 7th/8th grade soccer players

WARM-UP: A brief warm-up is appropriate in order to get the players thinking about soccer and to prepare them physically for the time ahead. This should involve individual body activities that involve the ball. Since there can be one theme to the practice, hopefully the warm-up will lead into the theme of the day. Static stretching is also appropriate at this time after the players have broken a sweat. The warm-up should get the players ready to play. It should be lively, fun, and engaging as well as instructional. There is nothing like a good, fast paced activity to grab the player's attention and make them glad that they came to practice.

INDIVIDUAL OR SMALL GROUP ACTIVITIES: Follow the warm-up with some kind of individual activity, not necessarily a real 1 vs. 1 game, but some kind of activity where the players act as individuals or cooperate in small groups. An example would be a tag game, or a keep-away game. The key is to keep the players in motion at all times. Avoid having them wait in lines. Play games where everyone is involved and avoid playing games that cause individual to become eliminated or has to sit and watch. Be creative. These players enjoy “crazy” games with lots of action.

PLAY THE GAME: Small sided soccer can be used to heighten intensity and create some good competition. Play 2 vs. 2 or 4 vs. 4 (whatever the numbers on your team allow you to play). Play with more than one goal, or use two balls. Be creative to keep the players interested and active. You could emphasize a certain skill by telling you players that they can only score if they pass the ball 2 times before they shoot, or they may score a point by dribbling the ball over the goal line. There are a million variations you can do. Challenge your players to become better every time. Switch teams

often, have more than one game going on at a time, and give everyone a chance to win. It is also important to give every player a chance to shoot at the goal as often as possible.

COOL-DOWN & HOMEWORK: finish the session with a cool-down. Give them some stretches to do and explain to them why you are doing the stretches. You may want to review what you started the session with. Give your players some homework so they can practice on their own. Think of a ball trick that they can work on and they can show you during the warm-up for the next practice. An idea for a ball trick is to have them bounce it off their head, then their thigh, and finally their foot and then catch it. It is important to finish on time. It is especially critical when the players are really into the practice. End the practice and you will get an enthusiastic return.

Remember to give your players at least 4-90 second water breaks during practice

Common Soccer Terms

- **Cautioned Player** – *A player notified by an official that his/her activities are not in the best interest of the contest. Such a player must be shown a yellow card and shall leave the field and may be replaced.*
- **Dead Ball** – *A term used to indicate a time when the ball is out of play. A goal can never be scored while the ball is dead.*
- **Defense** – *Team not in possession of the ball. A team remains on defense until it establishes possession of the ball.*
- **Direct Free Kick** – *A free kick from which a goal may be scored against an opponent without a second player touching the ball.*
- **Disqualified Player** – *A player barred from further participation in the game. Such player shall be shown a red card and shall not be replaced during the game.*
- **Dribbler** – *An offensive player in control of the ball who attempts to move the ball by periodic touches with the feet.*
- **Foul** – *A rule infraction for which a penalty is prescribed.*
- **Free Kick** – *A method by which a dead ball becomes alive. The ball is placed on the ground and, while motionless, it is kicked unchallenged in any direction prior to being touched by another player. The ball is to be considered to have moved when the kicker's foot touches it.*
- **Goalkeeper** – *The only designated player of each team who may handle the ball within his/her own penalty area.*
- **Hand Ball** – *Deliberately playing the ball with one's hand or arm. The hand or arm must move toward the ball or the hand or arm must be carried in an unnatural position before an infraction of the rule can be charged.*
- **Indirect Free Kick** – *A free kick from which a goal may not be scored unless the ball is played or touched by another player of either team.*
- **Offense (Attacking Team)** – *Team which is in possession of the ball.*
- **Offside** – *An infraction which occurs when an official judges a player in an offside position to be involved in active play by interfering with play or with an opponent, or gaining an advantage by being in the offside position.*
- **Pass** – *The movement of the ball from one player to another by foot, head, or other portion of the body (other than the hand)*
- **Penalty Kick** – *A kick awarded to a team because an opponent was charged with one of the major offenses, within his/her own penalty area, which requires a direct free kick.*
- **Substitute** – *A team member who has properly reported to enter the game. A substitute becomes a player when he/she is beckoned onto the field by an official.*
- **Throw-In** – *A method by which a dead ball becomes alive. A player throws the ball using both hands. The ball must be delivered from behind and over the head in one continuous movement, while both feet are on the ground on or behind the touchline and the player must be facing the field.*

More Resources for Coaches

The Huntley Public Library has many great books, videos, and DVD's regarding youth soccer drills and coaching tips from the beginners all the way to the highly skilled advanced players.

Check out the following web-sites for ideas for designing a game plan for practices and games:

www.kwikgoal.com - Great web-site for animated drills and game scenarios

www.decatursports.com - Great site for free drills and practice plans – A lot of info on this site!

www.soccerhelp.com - Good site for formations, practice games, and other ideas

www.eteamz.com - Good interactive site w/ ideas from other coaches from all over the country

www.joesoccer.com - Good site for animated drills from former U.S. National team member Greg Thompson

www.soccer.org - American Youth Soccer Organization Website

<http://www.ucs.mun.ca/~dgraham/manual/> Great Resource for coaches Tons of material!!!

www.usyouthsoccer.org - U.S. youth soccer site

First Aid and Safety Procedures

Accident/Incident Reporting

If an accident or incident occurs during practice and games that is considered to be serious. Please notify the park district as soon as possible. It is important to give as many details as possible on the incident so the park district can properly report it to our risk manager. It is important that the names of all witnesses be listed on the report.

Coaches should not admit guilt or liability on the part of the Park District or themselves at any time. If a patron, or parent, asks who will pay their medical bills, you should inform them that they will need to talk to the Recreation/Athletic Supervisor regarding the situation. The Huntley Park District will then investigate the accident or incident.

All accident/incident reports must be submitted to the Park District office within twenty-four (24) hours after the incident occurs. Should an incident, at any time, require outside or "attention besides coach-administrated first-aid" the coach should contact the Recreation/Athletic Supervisor immediately.

First Aid Kits

All First Aid Stations/Kits should contain at the very minimum:

- Band-Aids
- Antiseptic wipes
- Gauze Pads
- Bee Sting Wipes
- Disposable Gloves
- Ice Packs

1. It is important that anytime you need to provide first aid that proper personal protective equipment be used. Latex gloves should be used at all times when blood or other bodily fluids are present. A Micro shield should always be used if mouth-to-mouth resuscitation is necessary.
2. If any items are running low or you have used the last one, please inform the Recreation/Athletic Supervisor about replenishing the first aid kit.
3. If someone is injured, do not allow the injured party to rummage through the first aid kit. Provide the injured individual with the supplies they need.

Ice Pack Dispensing

The following procedures should be followed when ice packs are used:

1. *Cover the ice pack with a paper towel when popping the inner pouch to prevent spraying into eyes or mouth. (Note: Never let a child pop the inner pouch of the ice pack)*
2. Examine the ice pack to make sure it is not leaking. If it is leaking, dispose of it immediately.
3. Wrap the ice pack with a clean paper towel, napkins, or a cloth before giving it to a child. Do not apply directly to skin.
4. Do not allow the child to remove the wrap from the ice pack at any time.
5. Supervise the child while they are using the ice pack.
6. Dispose of the ice pack in a place that is not accessible to children.

If the contents of the ice pack do leak into eyes or on skin, immediately flush with water. If accidentally swallowed, induce vomiting and contact physician or call the Poison Control at 1-800-222-1222 or <http://webpoisoncontrol.org/> .

Minor Injury

1. Administer necessary first aid while utilizing proper protective barriers (disposable gloves). Remember: first aid is temporary and immediate aid given until the services of a physician can be obtained.
2. Remind a minor victim to inform his/her parents when they get home and to show them the injury. Or notify the minor's parents yourself and inform them of the situation. Let them decide what is to be done next and let them do it.
3. In all cases of injury, fill out an incident report – this includes such things as applying a Band-Aid or giving an ice pack. No incident is insignificant.

Major Injury

1. One person should take control of the situation.
2. Send one person to notify EMS (**Call 911**) and to get the first aid kit.
3. An individual trained in CPR/first aid should perform a primary assessment. This shall include checking and maintaining the airway, control bleeding, and checking for signs of shock. The individual shall provide treatment as necessary utilizing proper protective barriers such as disposable gloves, and a micro shield.
4. Apply first aid if necessary or advisable, making sure to utilize proper protective barriers.
5. Make the patient as comfortable as possible. Do not move the victim unless the current location is an immediate threat to life. Wait for Paramedics to arrive.

First aid tips, as recommended by Medic First Aid, are included in the appendices.

Communicable Disease Policy

The Addison Park District has implemented Communicable Disease Guidelines in accordance with the OSHA Blood borne Pathogens Standard (29 CFR 1910.1030). The purpose of the Blood borne Pathogens Standard is to reduce occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV) and other blood borne pathogens that employees may encounter in their workplace.

The purpose of the guidelines is to; (1) help to prevent the spread of communicable diseases, (2) inform employees of the potential for exposures in the workplace, (3) protect as much as possible, employees who are or may reasonably be expected to be exposed, (4) Protect the rights of employees and patrons of the Park District, and (5) bring greater attention to the escalating problem posed by blood borne pathogens.

In order to become infected with a blood borne pathogen you must come in "contact" with an infected persons blood or bodily fluid. Blood borne Pathogens are primarily carried in ones blood; however, blood may also be found in vomit, urine, feces, saliva and semen. Contact with your bloodstream can happen by any one of six ways. 1) Through an opening in the skin, such as a cut, open sore or lesions, skin that is chafed or abraded or even hang nails. 2) Through and injection or puncture in the skin with and contaminated needle or sharp object. 3) Through intimate contact. 4) Contact with the mucus membranes such as the eyes, nose and mouth. 5) From mother to fetus. 6) Through blood transfusions with contaminated blood. Blood borne Pathogens cannot be spread by casual social contact such as shaking hands, hugging, social kissing, crying, coughing, sneezing, spitting or a runny nose. It cannot be contracted from doorknobs, linens, clothing, telephones, office machinery, furniture or other articles touched by an infected person.

You can protect yourself from contracting a Blood borne Pathogen by not allowing bodily fluids to come in contact with your bloodstream. This can be done by wearing disposable gloves to protect your hands, glasses/goggles to protect your eyes and a Micro shield to protect your mouth during mouth-to-mouth resuscitation.

If you have any questions or concerns please feel free to speak with the Recreation/Athletic Supervisor or the Safety Coordinator.

Concussions

Concussions have become a big concern in youth sports. It is the responsibility of the Addison Park District to make you aware of concussions and how to handle them if you might think one has occurred.

What Should I do If a Concussion Occurs?

If you suspect that an athlete has a concussion, implement your 4-step action plan:

- 1. Remove the athlete from play.** Look for signs and symptoms of a concussion if your athlete has experienced a bump or blow to the head or body. When in doubt, keep the athlete out of play.
- 2. Ensure that the athlete is evaluated by a health care professional experienced in evaluating for concussion.** Do not try to judge the severity of the injury yourself. Health care professionals have a number of methods that they can use to assess the severity of concussions. As a coach, recording the following information can help health care professionals in assessing the athlete after the injury:
 - Cause of the injury and force of the hit or blow to the head or body.
 - Any loss of consciousness (passed out/knocked out) and if so, for how long.
 - Any memory loss immediately following the injury.
 - Any seizures immediately following the injury.
 - Number of previous concussions (*if any*).
- 3. Inform the athlete's parents or guardians about the possible concussion.** Make sure they know that the athlete should be seen by a health care professional experienced in evaluating for concussion.
- 4. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says they are symptom-free and it's OK to return to play.** A repeat concussion that occurs before the brain recovers from the first—usually within a short period of time (hours, days, or weeks)—can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.

Please take a look at the following websites for concussion related materials:

<http://www.cdc.gov/Features/ConcussionABCs/>

Seizure Management Policy and First Aid Procedures

Policy Overview:

In order to maximize a safe and healthy recreation environment for patrons and staff, the Addison Park District has established the following seizure management policy and procedures. This policy is intended to complement and supplement the agency's medical emergency response plan.

1. Registration forms should encourage patrons to volunteer any important health information such as seizure disorders and/or to identify any need for reasonable accommodation. When seizure conditions are disclosed, adult participants (or parents/guardians of minor patrons) should be asked to provide information such as:
 - nature and duration of the seizure
 - frequency
 - triggering mechanisms
 - symptoms
 - date(s) of most recent seizures
 - parental/patron instructions &/or recommendations
 - up-to-date medical protocol from the primary health care provider
2. Depending on the frequency and/or nature of the seizures, the feasibility and need to provide 1:1 supervision should be evaluated. In the interim, the member should consider the appropriateness of temporarily suspending participation pending an analysis of the ability of the patron to safely participate in any activity, with or without reasonable accommodation.
3. Staff should begin monitoring and responding to the seizure as soon as the symptoms are recognized – this includes implementing established seizure/emergency procedures; coordinating with other emergency medical providers; monitoring the duration of the seizure from the moment staff first observed the symptoms (and when possible, from the time of onset) and; documenting the nature/character of the seizure.
4. As with any medical emergency, prepare a PDRMA incident report documenting all pertinent information about the event (when, where, how, responders, witnesses, victim condition, etc.).

When to Activate the EMS (911) system:

1. *Anytime you are unaware of a pre-existing seizure disorder, summon EMS immediately.*
2. *Anytime you are uncomfortable with either the situation or the condition of the person, call EMS. Always err on the safe side, for the patrons' safety.*
3. *Anytime the seizure is different in nature or character than prior seizures, summon EMS immediately.*
4. **If you know the person is prone to seizures or is being medically treated and you have written instructions from the patron or patron's parents/guardians not to summon EMS, it may or may not be necessary to activate EMS unless:**
 - *The seizure lasts longer than 1-3 minutes*
 - *Another seizure begins within 1 hour after the first*
 - *The person does not regain consciousness after the convulsions or seizure have stopped*
 - *The person stops breathing for longer than 30 seconds*
 - *Seizure occurs after a head injury or the person complains of a sudden severe headache*
 - *The person is pregnant*
 - *The person has a medical alert tag or diabetic alert tag*
 - *The person appears injured*
 - *The person has swallowed excess amounts of water*
 - *You are at all uncomfortable with the situation*
5. *If you are provided patron/parent instructions on how to manage a seizure and/or not to summon EMS in the event of the seizure, you should:*

- *Require that the instructions be in writing and provided by or signed by or on behalf of the primary care physician (the physician's recommendations/instructions as to managing the seizure, or approval of the management instructions **must be dated and written within the past 6 months.***
- *Make several copies of the instructions and provide copies to relevant staff (i.e. staff that need to know!)*
- *In the interim summon EMS in the event of a seizure or temporarily suspend participation until receipt and review of the requested documentation*
- *If, after receipt of the documentation, you are uncomfortable with the instructions (or despite the instructions, you are at all uncomfortable with the situation), summon EMS in the event of a seizure --- you are not necessarily legally required to comply with patron/parent/physician instructions!*

Definition and Description:

Generalized Seizures are caused by abnormal electrical activity over the entire brain simultaneously.

Partial (focal) Seizures are seizures begin in one part of the brain instead of all over.

Hypoxic convulsions are due to lack of oxygen in the brain.

Emergency Procedures:

1. Prevent the person from injuring themselves. Place something soft under their head, loosen tight clothing, clear the area of hard and sharp objects, and remove eyeglasses if needed.
2. Place the person in a recovery position to allow saliva to drain from the mouth.
3. Start timing the seizure as soon as symptoms are recognized.
4. If uncomfortable with the situation, contact EMS immediately.
5. **Do not** restrain the person's movements.
6. **Do not** place any items in the person's mouth and **do not** attempt to give any liquids.
7. Be sensitive of the environment and the person's privacy.
8. If staff is unfamiliar with the person, unsure if previously diagnosed as seizure prone or medically treated, contact EMS immediately.
9. Maintain the person's airway.
10. After the seizure subsides, complete an initial assessment to determine the condition of the person (airway, breathing, circulation, physical condition).
11. If the person is not breathing, begin CPR. Make sure EMS is contacted.

12. Provide an area for the person to rest until fully coherent, where the person can be observed by a responsible adult. Consider a shaded area or an office.
13. The person involved in the episode should be restricted from any aquatic programs for the remainder of the day.
14. If a minor, the occurrence of a seizure should always be reported to the person's parents or guardians.

First Aid Tips

1. **Diabetic Coma** – If signs/symptoms indicate diabetic coma, seek medical aid. If unsure whether the problem is high blood sugar or low blood sugar, give sugar and seek medical aid. At no time should insulin ever be given. If unresponsive, place patient in the recovery position.
2. **Dislocation** – Immobilize the joint in the position it is found. Do not attempt to reduce or straighten a dislocation. Apply a cold ice pack to reduce swelling. Seek medical aid.
3. **Fainting** - Keep patient lying down, with head lowered and the lower limbs raised. Loosen tight clothing, sprinkle face with cold water. Keep lying down until completely recovered. If fainting is prolonged, seek medical aid.
4. **Fractures** – Immobilize fracture site. Use cold ice pack to minimize swelling. Seek medical aid.
5. **Head Injuries** – Immobilize head and neck. Do not try to control bleeding or leaking from nose and ears. Seek Medical Aid.
6. **Heat Cramps** – Apply gentle pressure to the affected muscles. Gentle stretching may also be helpful. Have patient drink water. Do not give salt. Have patient rest. If problem persists, seek medical advice.
7. **Heat Exhaustion** - Symptoms: Tired, headache and nausea; in more severe cases - pale face, skin moist and cool; sweating profusely, weak pulse, temperature normal or high, often faint but seldom remains unconscious for more than a few minutes Treatment: Patient should lie down with feet elevated 8-12 inches. Maintain normal body temperature. Give patient water. If patient does not respond to rest, seek medical aid.
8. **Heat Stroke** - Signs: Red tissue color, very hot and dry skin, temperature 105o F and rising. Patient may be disoriented, confused or suffer from a loss of coordination. Treatment: Cool patient as quickly as possible. Use cold water, cold bath or blow cold air on patient using ice and fan. Activate EMS. Continue to cool patient but do not chill.
9. **Insulin Shock** – To a conscious patient give sweet juice, candy or other sweet substances. Do not use artificial sweeteners. If unresponsive, activate EMS, place patient in recovery position on side and carefully monitor airway.
10. **Nose Bleed** - Have a child sit up, holding head level and pinching nose four or five minutes. (Do not have the head thrown back.) Apply cold wet compresses over the nose. If blood has not clotted or bleeding stopped - repeat. If bleeding continues, seek medical aid. Tell the person with the nosebleed not to blow their nose for a few hours.
11. **Seizure** - Do not force anything into the mouth, including your finger. Protect the patient during the seizure by removing surrounding objects and protect head from hitting ground with blanket or shirt. Do not restrain the patient. Activate EMS.
12. **Strains & Strains** - Apply cold ice pack to lessen pain and swelling. Elevate and immobilize.

