Safety Officer Training
Training Requirements

- Hold a Red Cross Professional Rescuer CPR/AED & FA certification or equivalent (American Heart Association Healthcare Provider) or advanced certification (EMT or lifeguard)

- All safety officers are required to go through the following training to include bloodborne pathogen training, first aid refresher, concussion emergency procedures, accident reports and emergency contact information

- Complete the online test; passing score of 80% (link at the end of this training)
Safety Officer Duties

• Responds to personal injuries and medical emergencies.
• Takes control in emergency situations.
• Contact the Club Sports professional staff in the event 911 is called or a participant is transported to a medical facility.
• Completes Accident Reports for any and all injuries.
• Ensures objects soiled in blood or other bodily fluids are properly disposed of.
• Ensures the club’s first aid kit is present at all practices and events.
• Confronts those suspected of a concussion, takes them out of practice/play and provides individuals with educational materials.
Practice & Event Requirement

- Two (2) certified Safety Officers must be in attendance at every club practice and event
Bloodborne Pathogens
Training Videos

• Click the links below to watch each training video. Test questions may be taken from content in each video.
  • How Infections Occur
  • Exposure Control Plan
  • Personal Protective Equipment
  • Engineering and Work Practice Controls
  • Exposure Incidents
Handouts

Click the links below to load each handout. It is recommended that you print each handout to reference at a later date. Test questions may be taken from each handout.

- American Red Cross: Preventing the Spread of Bloodborne Pathogens
- OSHA Fact Sheet: Bloodborne Pathogen Exposure Incidents
Review

- Which body fluids may contain bloodborne pathogens?
  - Semen
  - Human Blood

- How can I protect myself?
  - Wear gloves if you need to touch human blood or used condoms
  - Always wash your hands after you remove gloves.
  - Contact a facility staff member to clean up after an exposure incident
    - Do not pick up needles, syringes or broken glass with your hands. Use tongs or broom & dustpan.
    - Use disinfectant to clean up blood.

- What should you do if you think you may have been exposed to bloodborne pathogens?
  - If possible, wash the exposure site with soap & water
  - Seek medical attention
  - Contact the Club Sports professional staff
Biohazard Waste Disposal

- Always use a biohazard bag to dispose of objects which may be soiled in biohazardous waste such as used gloves, gauze/bandages, etc.
- Biohazard bags should be disposed of in the RecWell biohazardous waste container at the Equipment Issue Desk in the Eppley Recreation Center or the Intramural Office in the Reckord Armory. In addition, a supervisor in Ritchie Coliseum should be able to dispose of biohazard bags for you.
- If you are at another facility, ask the facility staff where to properly dispose of your biohazard bag.
First Aid Refresher
To review common injuries and first aid responses
Fracture Dislocation, Sprain, and Strain

- **Fracture**: a break or disruption in a bone
- **Dislocation**: a displacement or separation of a bone from its normal position
- **Sprain**: a partial or complete tearing or stretching of ligaments at a joint
- **Strain**: a stretching or tearing of muscle or tendon fibers
Response

• RICE
  • Rest: Do no move the injured area
  • Immobilize: stabilize in the position found, loosen laces, keep shoe on
  • Cold: Apply ice for periods of 20 minutes (20 on/20 off)
  • Elevate: Only if it does not cause more pain

• Check for circulation below the injury (e.g. toes/fingers), feeling, warmth, color
Soft Tissue Injuries

• Soft tissue includes layers of
  • Fat
  • Skin
  • Muscle

• Wounds (open vs. closed)
  • Bruises (closed)
    • Elevate the injured body part if it does not cause more pain
    • Apply ice (20 on/20 off)
Open Wounds

- Abrasions (turf burn)
- Lacerations
- Punctures
- For minor wounds:
  - Put on gloves!
  - Apply pressure directly to the wound to control the bleeding
  - Wash the wound (running water is best but water from a water bottle would suffice)
Major Wounds

- Shock - Always take steps to avoid shock
  - Keep participant comfortable
  - Monitor ABC’s
  - Elevate legs
- Stitches may be necessary
  - Common places (eye brow, chin, forehead)
- Punctures
  - Do not remove object – this could cause more harm
  - Call EMS immediately
Concussions
Learning Objectives

- Know what a concussion is
- Be able to identify signs and symptoms of a possible concussion
- Know what to do if a participant possibly has a concussion
- Know what things can be done to try and reduce the risk of a concussion
- Understand what steps should be taken before returning to play
Video

- Introductory Video
What is a Concussion?

- According to the CDC, “a concussion is a type of traumatic brain injury cause by a bump, blow, or jolt to the head that can change the way your brain normally works”
- The impact causes the brain to shift or rotate within the skull
  - Which can result in stretching and tearing of brain cells
- After a concussion, the brain is more or less vulnerable to another concussion?
  - More
- What is the average recovery time for a concussion?
  - 2 weeks
  - Some take less time and others can take several months to recover from
Concussions

• According to a Concussion Study (on high school athletes)
  • The sports with the highest rates of concussions are:
    • Ice Hockey
    • Lacrosse
    • Soccer
    • Wrestling
    • Basketball

• Concussions affect 4 areas of function
  • Physical Feeling
  • Emotions
  • Thinking
  • Sleep

• Female participants in the same sport as males were nearly twice as likely to sustain a concussion
**Signs**

- Observed by you
- You observe the Participant is:
  - Dazed and confused
  - Confused about what they are supposed to be doing
  - Forgets plays
  - Unsure of game, score or opponent
  - Moves clumsily
  - Answers questions slowly
  - Loss of consciousness
  - Shows behavior or personality changes
  - Can’t recall events prior to or after the injury

**Symptoms**

- Felt by them
- The Participant is experiencing:
  - Headache
  - Nausea
  - Balance problems
  - Double or fuzzy vision
  - Sensitivity to light or noise
  - Feeling sluggish
  - Feeling foggy or groggy
  - Concentration or memory problems
  - Confusion
Concussion Signs and Symptoms

Participants should not be left alone if you suspect a concussion

- Not all signs and symptoms are apparent right away. Sometimes they don’t appear until the person begins to resume daily activities
- If immediate signs and symptoms begin to worsen, such as,
  - Decreased level of consciousness
  - Inability to be awakened
  - Irregular breathing
  - Sever or worsening headache
  - Persistent vomiting
  - Seizures
- They need to be seen by a Health Care Professional immediately
- Sometimes, dangerous blood clots may develop on the brain
Initial Steps

• If a member, player or participant shows signs or symptoms of a concussion:
  • Immediately remove them from play/the activity
  • Do not allow them to participate further (i.e. re-enter the game, return to practice)
  • Provide them with the Concussion Handout
  • Recommend they get checked out by a medical professional

• As a Safety Officer, it is your responsibility to look out for concussions and remove members, players or participants from play/the activity if necessary!
• We can reduce the risk of a concussion by:
  • Educating all participants about what concussions are and the signs and symptoms
  • Encouraging participants to inform someone if they think they may have a concussion
    • “It’s better to miss one game than the whole season”
  • Making sure that protective equipment fits properly and is well maintained
  • Encouraging good sportsmanship during games and practice
  • Teaching proper technique of the sport and encourage athletes to follow the rules of the sport

• If someone does receive a concussion, it is vital that they rest until fully healed
  • This reduces the possibility of getting a second concussion
  • More importantly, eliminates the possibility of a repeat concussion
REDUCING RISK

Repeat Concussion?
A repeat concussion is a concussion that occurs before the brain has a chance to recover from the first concussion and can slow recovery or increase the chance of long-term problems.

- Rare cases have reported that repeat concussions have resulted in severe swelling and bleeding in the brain that can be fatal.
- What percentage of athletes who have died or have long-term problems were still experiencing symptoms from a previous concussion when sustaining a second?
  - 40%
- How could this have been prevented?
  - Been provided sufficient recovery time
  - Followed return to play protocol
  - Were educated on the dangers of playing with a concussion
Returning to Play

• Follow the steps below until back in the game but stop if symptoms reappear
  • Rest both mentally and physically
    • Limit playing video games, watching TV, texting, listening to music loudly
    • Sleep often and take frequent breaks from school work
    • No form of physical activity (working, running, lifting weights, biking)
  • Wait until all signs and symptoms are completely gone

• Light physical progression
  • Begin with light exercise of 5-10 minutes jogging/biking but no lifting weights
  • Begin to run but still without equipment or gear that sport requires
  • Begin to practice with full gear/equipment but no contact
    • Start to add in lifting weights
  • Full practice with no limitations and then back in the game!
• If you experience any symptoms at each new stage, stop immediately
For more information

http://www.cdc.gov/headsup/index.html

Emergency Procedures
Injuries

1. The club safety officer member(s) certified in CPR/AED and first aid shall respond.
2. Determine the seriousness of the injury.
3. If life threatening, call 911 or send someone for help.
4. Assign other club members or bystanders (when available) to specific tasks (i.e. calling campus police, etc.).
5. Administer first aid to the level of your training.
Serious Injuries

- All serious injuries that require transportation (to The University Health Center, doctor's office, hospital, etc.) should include a 911 call for ambulance assistance.
- Have someone meet the emergency vehicle.
- When in doubt, always believe the injury is more serious than originally thought. Call for help and do not move the injured participant, even if it means delaying an activity in progress. Remain with the injured participant until help arrives.
Contacting RecWell

- If an accident occurs that requires a participant to be transported to a hospital either by ambulance or in a personal vehicle, the club MUST contact a Club Sports professional staff member IMMEDIATELY. If a Club Sport professional staff member is not reachable, contact the RecWell Manager on Duty (MOD) at 301-226-4500.
  - This applies to visiting team members and spectators during home events as well as University of Maryland Club Sport members.
  - Cell phone numbers are listed in the travel binders and first aid kits.
Fire

• Whenever you hear a fire alarm in a facility, stop all activities in progress and evacuate the building.
• When evacuating the building, make sure all sport club members and spectators vacate the area and move outside. Do not allow club members to enter another part of the building to retrieve personal belongings.
• Close all doors leading into the building.
• You may not re-enter the building until the alarm is turned off and/or a uniformed officer gives you permission to enter the building.
• If you discover the fire, activate the closest alarm and then call the emergency number (911) to confirm the report. After evacuating the building, a facility supervisor will direct the firefighters to the correct location.
• Do not attempt to extinguish a fire.
• In RecWell facilities, club members MUST follow the facility supervisor’s instructions.
Bomb Threat

• If you receive a bomb threat, try to learn its specific location. The same person should then immediately report the threat to the campus police and RecWell staff on duty.

• Follow directions given by police (might include evacuation of the building).

• Do not open/pick up any suspicious parcels.
Power Failure

• Suspend all activity in progress. If all areas are dark and it’s too difficult to move activities to a lighted area, ask all club members to sit down and be patient. Make a general announcement informing the participants/spectators that there is no need to evacuate. Remain calm.

• Report the power failure to the RecWell Facility Supervisor on duty. The power failure might only be at the facility where you are.

• Encourage participants/spectators to stay out of dark areas (i.e. locker rooms, bathrooms, etc.).

• In RecWell facilities, club members MUST follow the facility supervisor’s instructions.
Thunder & Lightning

• If thunder and/or lightning can be heard and/or seen, stop the game and seek protective shelter immediately.

• In situations where thunder and/or lightning may or may not be present yet you feel your hair stand on end and skin tingle, immediately assume the following crouched position: drop to your knees, place your hands/arms on your legs, and lower your head. Do not lie flat.

• In the event that either situation should occur, allow thirty minutes to pass after the last sound/sight of thunder and/or lightning strike prior to resuming play.
Tornado

• The University of Maryland Early Warning System will sound for at least 3 minutes when a tornado has been sighted or is indicated on radar. It can be heard through the University community. Take the following steps once the siren has sounded:
  • Take shelter in the lowest level of a brick building; stay away from windows, do not use elevators
  • If a tornado is approaching and you cannot seek shelter, lie in a ditch or low-lying area.
  • In RecWell facilities, club members MUST follow the facility supervisor’s instructions.
Accident Reports

Why are accident reports important?

- To keep students/participants safe
- To protect the university from lawsuits
- To protect the department from health code violations
Filling out the Report

Accident Reports should be…

• Legible and in pen
• Detailed
• Free of conjecture (opinion)
• Complete
<table>
<thead>
<tr>
<th>Question</th>
<th>Section in Document</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who are you?</td>
<td>Personal Data</td>
</tr>
<tr>
<td>Who got hurt?</td>
<td>Personal Data</td>
</tr>
<tr>
<td>When &amp; Where</td>
<td>Details of Accident</td>
</tr>
<tr>
<td>Injured What?</td>
<td>Part of Body Injured</td>
</tr>
<tr>
<td>What Happened?</td>
<td>How Did Injury Occur</td>
</tr>
<tr>
<td>Possible resulting injury?</td>
<td>Suspected Classification of Injury</td>
</tr>
<tr>
<td>Who played Doctor?</td>
<td>First Aid Administered By</td>
</tr>
</tbody>
</table>
Individual Filing Report

John Doe

Men’s Basketball Safety Officer

Date: 6/23/17  Time: 6:42 AM [x] PM

Police Responded? [x] Yes [ ] No

Officer Name and Badge #: Officer Miller #372

If you are the one filling out the report, you fill in this section.

Who are you?
If a student does not know their UID#, you can look it up on the online roster.

Who got hurt?

Led
Zach
1115 Eppley Rec Center
College Park MD 20472
301-226-5500
5/1/94
M
123456789
If anyone saw what happened, get their phone number. Always get TWO witnesses.

**Witnesses?**

### ACCIDENT WITNESSES

1. First and Last Name: Kurt Klier  
   Daytime Phone: (301) 226-5681

2. First and Last Name:  
   Daytime Phone:  

**If anyone saw what happened, get their phone number. Always get TWO witnesses.**
The time and place of the accident. Make sure to note the specific area where the injury occurred.

When & Where

6/23/17  Club Men's Basketball Practice
6:40 am pm  Men's Basketball
Near baseline
Give details about where on the body part the injury occurred. If the participant can not determine an exact spot, make that note.

<table>
<thead>
<tr>
<th>Injured What?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cut on the right side of his forehead just above the eye</td>
</tr>
<tr>
<td>Top lip</td>
</tr>
</tbody>
</table>
Make sure that you only state facts about how it happened, no opinions. Ex. “Slipped on Floor”, NOT “Floor was slippery”

What happened?

Zach was cutting across the court and got elbowed in the mouth

“My mouth hurts”
You are not doctors, so this section is just what you think the injury could be. Note any history as needed.

Possible resulting injury?
Person administering first aid may differ from the person filing the report, so make sure to get their information and account of the situation.

Kurt Klier

301 226-5681

ACTION TAKEN:   [x] Applied Ice   [x] Kept Immobile

DESCRIBE IN GREATER DETAIL

Used ice pack to reduce swelling. Kept immobile due to possible concussion.
If additional assistance is necessary, you need to fill in the information in Black.

If a transport is necessary, you need to fill in the information in Black and Blue.

If a transport occurs, you need to contact a Sport Clubs Professional Staff Member ASAP!

---

**EMERGENCY RESPONSE AND CONTACT INFORMATION**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additional Assistance Summoned?</td>
<td>Yes</td>
</tr>
<tr>
<td>Exact time of arrival of EMS</td>
<td>6:52 am/pm</td>
</tr>
<tr>
<td>Ambulance #/Name of Company responding</td>
<td>#314</td>
</tr>
<tr>
<td>Person (parent, friend, coach) notified if transported to hospital:</td>
<td>Jamie Martinez</td>
</tr>
<tr>
<td>First and Last Name*</td>
<td>Jamie Martinez</td>
</tr>
<tr>
<td>*CONTACT SPORT CLUBS PROFESSIONAL STAFF AFTER PARTICIPANT HAS BEEN TRANSPORTED. Name of person who made the call:</td>
<td>Wallace Eddy</td>
</tr>
</tbody>
</table>

---

**ACCIDENT REPORT FOLLOW-UP**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIRST REVIEW BY (initial &amp; date)</td>
<td></td>
</tr>
<tr>
<td>CALL LOG</td>
<td></td>
</tr>
<tr>
<td>Attempt #1 Date</td>
<td></td>
</tr>
<tr>
<td>Attempt #1 Time</td>
<td></td>
</tr>
<tr>
<td>Attempt #2 Date</td>
<td></td>
</tr>
<tr>
<td>Attempt #2 Time</td>
<td></td>
</tr>
<tr>
<td>Attempt #3 Date</td>
<td></td>
</tr>
<tr>
<td>Attempt #3 Time</td>
<td></td>
</tr>
<tr>
<td>Status of Injured Participant</td>
<td></td>
</tr>
<tr>
<td>1) Injured participant is fine, no complications.</td>
<td></td>
</tr>
<tr>
<td>2) Injured participant is fine, but reports.</td>
<td></td>
</tr>
<tr>
<td>3) Injured participant has not been to a doctor but has an appointment or is planning to see a doctor soon.</td>
<td></td>
</tr>
<tr>
<td>The athlete was seen by the emergency medical attention at the:</td>
<td></td>
</tr>
<tr>
<td>1) University Health Center Hospital</td>
<td>Presidential Office/ Urgent Care Center</td>
</tr>
<tr>
<td>Diagnosis as:</td>
<td></td>
</tr>
<tr>
<td>1) Unknown - need to contact injured participant reason:</td>
<td></td>
</tr>
</tbody>
</table>

---

**EMERGENCY RESPONSE AND CONTACT INFORMATION**

**Additional Assistance Summoned?** [Yes] [No]

- Exact time of call made to EMS: 6:43 am/pm
- Exact time of arrival of EMS: 6:52 am/pm

**Person (parent, friend, coach) notified if transported to hospital:**

- First and Last Name: Jamie Martinez
- Phone: (301) 226-5500

**CONTACT SPORT CLUBS PROFESSIONAL STAFF AFTER PARTICIPANT HAS BEEN TRANSPORTED.**

- Name of person who made the call: Wallace Eddy
- Time: 6:55 am/pm
If the participant is UNABLE or UNWILLING to sign that the report is accurate, check the appropriate box.

Signature of Injured Participant (or parent of minor dependent) ______________________ Date 6/23/17

Acknowledges report is accurate

[] Injured participant was UNABLE to sign this report.  [] Injured participant was UNWILLING to sign this report.
If a transport occurs, you need to contact the MOD/Professional Staff ASAP. They will make the emergency contact call.

The Department of Transportation Services (DOTS) will transport injured participants to the University Health Center (301-314-2255). Under NO circumstances can you transport a patron with an injury in a State Vehicle.
It is very important to make sure that you note all items that were disposed of and where. "BHWB @ EI" is short for Bio-Hazardous Waste Box at Equipment Issue.

Blood? And where did it go?

BLOODBORNE PATHOGEN EXPOSURE CONTROL

Blood or potentially infectious materials present? [x] Yes [ ] No
Personal protective equipment (gloves) worn? [x] Yes [ ] No
If no, did an Exposure Incident occur? [ ] Yes [x] No
Biohazardous waste created? [x] Yes [ ] No
Did disposed of properly in BHW container? [x] Yes [ ] No
Specify what was disposed of and where (e.g. gloves & bandages in BHW bag taken to ERC) Gauze, Gloves, Bandages, and paper towels are in BHWB @ EI

Did participant leave the RecWell facility before contaminated items could be collected for proper disposal? [ ] Yes [x] No
The last three sections of the accident report are for follow-up and will be completed by either a Club Sports or Member Services Staff.

Remember to double check that all sections are completed before turning in the paperwork to the Club Sports Office.
# Emergency Contacts

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Work</th>
<th>Cell</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMS</td>
<td>Emergency Medical Services</td>
<td>9-1-1</td>
<td>9-1-1</td>
<td></td>
</tr>
<tr>
<td>Kurt Klier</td>
<td>Assistant Director-Sport Clubs</td>
<td>(301) 226-5681</td>
<td>(301) 395-3941</td>
<td></td>
</tr>
<tr>
<td>Rainer Tandaju</td>
<td>Interim Coordinator-Sport Clubs</td>
<td>(301) 226-5715</td>
<td>(240) 506-9353</td>
<td></td>
</tr>
<tr>
<td>ERC Info Desk</td>
<td>Manager on Duty</td>
<td>(301) 226-4500</td>
<td>N/A</td>
<td>Call for Incidents &amp; Accidents When Others are Not Available</td>
</tr>
</tbody>
</table>
Additional Resources

• Safety Officers are responsible for the contents of the Safety & Risk Management section of the Club Sports Handbook.
Safety Officer Test
Passing – 80% or greater

CLICK HERE TO TAKE THE TEST