

## **West De Pere Youth Organization (WDPYO) Steps to Handling a Concern**

Addressing, concluding, and moving beyond an unforeseeable concern is key to the success of developing young players and teams. Below are the guidelines to assist all stakeholders (players, parents, and coaches) in handling concerns successfully. It is the expectation of the WDPYO that ALL individuals work through this process in handling a concern.

**\*\*DO NOT contact the WDP Board of Education, Superintendent, Athletic Director, or Administration.**

### **Phase 1**

#### 24 Hour Rule

- Wait at least 24 hours following a game or incident prior to calmly and respectfully addressing a concern with a coach or parent.
- Do not address a concern in front of other players or parents.
- Call or email the coach/parent to set up a time to discuss the concern. If approached prior to 24 hours following the game or incident, the coach/parent has the discretion to request the full 24 hours to pass prior to discussing.
- Parent and coach meet. If the concern is not resolved satisfactorily, the person with the concern (complainant) should contact the grade lead coach to set up a meeting to discuss with the parties involved. If the concern is still not resolved after the coach, parent, and grade lead coach meet, the complainant is encouraged to complete the WDPYO Concern Form, as detailed below.

### **Phase 2**

#### Complete WDPYO Concern Form

- Fill out the form to the best of your ability. Include detailed events and conversations.
- Essential to the resolution of a complaint is the identification of the action desired by the complainant. For consideration by the WDPYO Board, the complainant shall complete a WDPYO Concern Form, clarifying the nature of the complaint and stating a desired action by the Board. The form shall be delivered to a Board Member or sent by e-mail to [westdeperfastbreak@gmail.com](mailto:westdeperfastbreak@gmail.com) at least five working days before a scheduled board meeting so the issue can be added to the monthly agenda and action taken as appropriate. The complaint will be considered by the Board as soon as possible after it has been thoroughly researched.

### **Phase 3**

#### WDPYO Board Holds a Meeting

The WDPYO President will contact the person who the concern is about and briefly explain the issue. The WDPYO Board will meet with the involved parties to discuss and reach a conclusion.

**\*\*If there is a concern regarding playing time, we highly encourage athletes to first approach the coach in a calm, respectful, and private manner while still abiding by Phase 1, as detailed above.**

WDPYO will, at its discretion, warn or suspend any persons violating or abusing any policy, procedure, or expectation. It is the responsibility of all coaches, players, parents, guardians, and fans to know WDPYO's policies, procedures, and expectations.

**West De Pere Youth Organization (WDPYO)**  
**CONCERN FORM**

PERSON OF CONCERN (RESPONDENT): \_\_\_\_\_

TEAM INFO: Grade: \_\_\_\_ Gender: \_\_\_\_\_ Head Coach: \_\_\_\_\_

CONCERN DESCRIPTION:

- |   |   |
|---|---|
| <input type="checkbox"/> Swearing               | <input type="checkbox"/> Verbal Abuse to Player       |
| <input type="checkbox"/> Arguing with Referee   | <input type="checkbox"/> Physical Abuse to Player     |
| <input type="checkbox"/> Arguing with Coach     | <input type="checkbox"/> Technical Foul               |
| <input type="checkbox"/> Arguing with Parent    | <input type="checkbox"/> Removed from Game/Tournament |
| <input type="checkbox"/> Tobacco/Alcohol Use    | <input type="checkbox"/> Other: _____                 |
| <input type="checkbox"/> Confidentiality Breach |   |

CONCERN DETAILS:

Date of Incident: \_\_\_\_/\_\_\_\_/\_\_\_\_

Time/Place: \_\_\_\_\_

Details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Witness: \_\_\_\_\_ Name of Witness: \_\_\_\_\_

Signature of Witness \_\_\_\_\_ Signature of Witness \_\_\_\_\_

Action Desired by Complainant: \_\_\_\_\_

OFFICE USE ONLY - Respondent's Statement:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Respondent's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Concern Received: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

President Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Board Member Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Action Recommended:

- |   |                            |
|---|----------------------------|
| <input type="checkbox"/> Verbal Warning | Terms of Discipline: _____ |
| <input type="checkbox"/> Suspension     | _____                      |
| <input type="checkbox"/> Termination    | _____                      |
|   | _____                      |

Return form to: WDPYO Board Member or e-mail to westdeperefastbreak@gmail.com