

2024 TRAINERS' HANDBOOK

This handbook should be read in conjunction with the SMJFL By-Laws which are available on the league website

I. Trainers Role and Responsibilities

I.I Availability

Present for all team matches (home and away).

I.2 First Aid Training

2024 Training Session Tuesday 26th March @ Chadwick Pavilion 6PM

I.3 Essential Duties

Pre-Game

- a) Make yourself known to the opposition team's Trainer, ground trainer and/or ground manager (if applicable).
- b) Ensure you are familiar with location of essential emergency equipment
- c) Ensure first aid kit is present, and appropriately stocked (strapping tape, bandages, gauze, etc.) (Refer Checklist Appendix 1)
- d) Ensure you have access to ice
- e) Conduct pre-game check with players re: injury concerns, any strapping required, etc.
- f) Provide any feedback to coach on any individual player concerns

During Game

- g) Assess injuries and, if required, liaise with home ground Trainer and/or appropriate club personnel
- h) Complete an Injury Report for such incidents (Refer Appendix 2)
- i) Provide feedback to coach on any individual player concerns

Post-Game

- j) Diagnosis, management, rehabilitation (in conjunction with Head Trainer as necessary, and feedback to coach)
- k) Keep records as per club requirements

2. <u>Player/Personal Protection and Medical</u> <u>Information</u>

Any personal information provided to the club is stored in a secure Dropbox and only accessible by relevant committee members.

3. Club Committee & Key Contacts

Kingsley Williams	President	president@djfc.org.au	0423 564 509
Luke Hardeman	Vice President Football Op's	vicepres@djfc.org.au	0458 243 596
Greg Corrie	Vice President Family / Social Op's	vicepres@djfc.org.au	0439 112 361
Sandra Harry	Secretary	secretary@djfc.org.au	0419 933 446

Nick Reid	Treasurer	treasurer@djfc.org.au	0409 006 934
Dylan Baker	Football Manager	coaches@djfc.org.au	0439 487 443
Dylan Baker	Equipment	equipment@djfc.org.au	0439 487 443
Greg Corrie	Merchandise	merchandise@djfc.org.au	0439 112 361
Luke Hardeman	Incident Officer	incident@djfc.org.au	0458 243 596
Ally Waller	Social Co-ordinator	social@djfc.org.au	
Sandra Harry	Communications Co- ordinator	communications@djfc.org.au	0419 933 446
Luke Hardeman	Child Safety Officer	cso@djfc.org.au	0458 243 596
Kerry Russell	Team Managers Co-ordinator		
Matthew Waller	Trainer Co-ordinator		0409 180 281
Liam Grimwade	Auskick Co-ordinator	auskickdingley@gmail.com	
Matthew Waller	Pavilion and Oval Manager		0409 180 281
Sandra Harry	Registrar	admin@djfc.org.au	0419 933 446

4. Relevant Policies

4.1 Trainers Role - Statement from the AFL

The AFL expects that football matches at all levels will be played in good quality environments and the safety of participants is central to that environment. Sports trainers and first aiders have been part of Australian Football since the origins of the game. They are part of the fabric of every club and play a key role in player preparation and safety at all levels.

In community Australian Football clubs, first aid is usually provided by sports trainers or by other volunteers with medical or higher level allied health (e.g. nursing, physiotherapy, occupational health & safety) qualifications and experience. Sports trainers are likely to play a more major role when there is no-one else with medical or allied health qualifications at a game or training. It is important that sports trainers, and others, are well trained in the first aid needs specifically relevant to Australian Football at the level at which they are involved (e.g. Auskick, juniors, youth, seniors, females, talent pathway, AFL clubs, veterans etc).

The Australian Football League (AFL) believes that planning and practicing what to do when an emergency occurs is an essential part of risk management. All football leagues and clubs must be conversant with first aid procedures and able to deal with emergencies so participants are well cared for. All leagues and clubs should ensure that:

- A person with current first aid qualifications is available at all football games and training sessions.
- An appropriately and adequately stocked first aid kit and well maintained sport-specific rescue/transport equipment are accessible at all training and competition venues.

4.2 South Metro Junior Football League (SMJFL) – Policy & By-Laws

The SMJFL supports the <u>Sports Trainers in Community Australian Football Policy</u> which is available on the AFL Victoria website.

18. Concussion

18.1. If a player is deemed to be concussed on match day, they should not return to the field of play (or training) until such time as a doctor's certificate has been obtained indicating they are fit to play. This process is to be managed at club level.

19.Blood Rule

19.1. Upon a player being noticed by an umpire to have blood on them, the player must leave the ground immediately via the designated interchange area to be attended to; and may be immediately replaced with an interchange player. Once the bleeding has

stopped, and all blood cleansed or covered (including uniform), the player may be interchanged back onto the ground.

- 19.2. This rule applies to all persons entitled to be on the ground during game times.
- 19.3. Trainers must wear gloves when attending to bleeding players, and all blood infected materials must be bagged separately and disposed of in an appropriate manner.

Relevant SMJFL By-Laws

Trainer

- 20.15. As per the <u>Sports Trainers in Community Football Policy</u>, all Member Clubs must appoint a minimum of one Trainer per team who holds a minimum qualification of Provide First Aid with an up to date CPR component.
- 20.16. It is recommended that a venue trainer is present at all matches. If there is no venue trainer with Emergency Response Coordinator (ERC) qualifications present, trainers for under 13 and above age groups must also have completed ERC training.
- 20.17. A Trainer appointed pursuant to By-Law 20.15 must be present for the duration of all games in which the Trainer's team participates.
- 20.18. Each team must provide one first aid kit (including ice) for use by the team Trainer(s).
- 20.19. Medical Practitioners can act as a trainer provided, they are in a current clinical practice, are registered with the AHPRA and hold a current CPR qualification.
- 20.20. In the event of an injury to a player, a venue trainer or a second or third trainer may enter the field of play. Only I trainer is permitted on the team bench. Any additional trainers must be stationed off the field (outside the fence) and must be wearing the appropriate SMJFL bib.
- "Medical Practitioners" means practicing and registered osteopaths, physiotherapists, chiropractors, practicing (acute care only) and Australian Health Practitioner Regulation Agency (AHPRA) registered medical doctors and nurses and paramedics.

4.3 Gender Specific Guidelines

All trainers should be aware of gender specific circumstances that could potentially arise on game day.

- Breast trauma, e.g being elbowed or hit while playing sports.
- Female hygiene items available in the medical kit e.g pads, tampons etc.
- Testicular injury e.g knee to groin area

4.4 COVID Safety Protocols

In order to ensure the safety of all players and trainers the following guidelines should be adhered to:

- Trainers should only be attending first aid incidents, that is emergency care or treatment for an ill or injured player prior to referral to a medical professional
 - Players with pre-existing injuries should not receive treatment from a trainer for strapping or taping prior to games
 - Trainers should not be massaging players
 - Trainers must follow protocols as outlined in infection control training (i.e. disposal of gloves in between treatments, wearing of face masks).
 - Medical equipment must be sterilised between uses, which includes disposable cover/sheet to be used for player massage tables.
 - Treatment equipment to be wiped down and sanitised before and after each use.
- As per DHHS guidelines further personal protective equipment may be used but is not compulsory

Table 1: Conventional use

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TIER	For use in	Hand hygiene	Disposable gloves	Level 1 disposable gown and single use plastic apron	Disposable gown (level 1,2,3,4)	Surgical mask (level 1,2,3)	Surgical P2 / N95 respirator ¹	Eye protection (Glasses/ Goggles/ Face Shield)
Tier 0 – Standard precautions ²	For people assessed as low risk or no risk for COVID-19, that is, they do not meet the clinical criteria for COVID-19.	<	As per standard precautions	As per standard precautions	As per standard precautions	As per standard precautions	×	As per standard precautions
Tier 1 – Area of higher clinical risk	In areas of higher clinical risk ³ and where the person is NOT suspected or confirmed to have COVID-19 and is not in quarantine ⁴ .	>	As per standard precautions	As per standard precautions	As per standard precautions	Level 1	×	As per standard precautions
Tier 2 – Droplet and contact precautions	Direct care or contact with a person who is suspected or confirmed to have COVID-19 or is in quarantine ⁵ or where a history cannot be obtained.	>	~	✓ [or V Level 2, 3 or 4	Level 2 or 3	×	~
Tier 3 – Airborne and contact precautions	Undertaking AGP ⁶ on a person: with suspected or confirmed COVID-19; is in quarantine; or where a history cannot be obtained.	~	~	×	Level 2, 3 or 4	×	~	~

¹ Fit-check P2/N95 mask with each use. For information on P2/N95 respirators/masks go to https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19 ² For information on standard precautions and hand hygiene, see https://www.2.health.vic.gov.au/public-health/infectious-diseases/infection-control-guidelines/standard-additional-precautions

³ Areas of higher clinical risk include: intensive care units, urgent care centres, and emergency departments.

⁴ The current clinical criteria for testing is found at https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19

⁵ All people confirmed or suspected of having COVID-19 or are in quarantine should wear a surgical mask, where tolerated, during the period of care or quarantine when in contact with other people.

⁶ AGPs = aerosol-generating procedures. Examples include: bronchoscopy, tracheal intubation, non-invasive ventilation (e.g. BiPAP, CPAP), high flow nasal oxygen therapy, manual ventilation before intubation, intubation, cardiopulmonary resuscitation, suctioning, sputum induction, nebuliser use (nebulisers should be discouraged and alternatives considered such as a spacer). See the COVID-19 Infection prevention and control guideline at https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19

5. Location of Key Equipment

ltem	Location
Defibrillator	Trainer Room and Social Room
Stretcher	Trainer Room
lce	Trainer Room Freezer
Medical Supplies/ Tape	First Aid Kits & Trainer Room

6. Emergency Information

6.1 Nearest Hospitals

Monash Medical Centre Address: 246 Clayton Rd, Clayton VIC 3168 Emergency department: Open 24 hours Phone: (03) 9594 6666

Holmesglen Private Hospital 490 South Rd, Moorabbin VIC 3189 Emergency department: Open 24 hours Phone: (03) 9567 9000

All SMJFL footballers will receive a 50 per cent discount on their attendance at a Cabrini Emergency Department and a bulk billed Sports Physician follow-up visit on the Monday.

6.2 Emergency Access to Grounds

A Council A1 key is required to unlock any gates for an ambulance to access the ground. There is one of these available in the office of Chadwick Pavilion or via various coaches & committee members

6.3 Follow Up Procedures

An SMJFM Incident report should be completed by each trainer at the time of incident, These are stored in a secure Dropbox by the DJFC Committee.

7. Club Insurance

Information available on request

8. HANDY RESOURCES

SMJFL By-Laws

SMJFL By-Laws can be found under Rules, By-Laws and Policies on the SMJFL website: <u>www.smjfl.com.au</u>.

AFL Policy

The <u>Sports Trainers in Community Australian Football Policy</u> can be found on the AFL Victoria website: <u>www.aflvic.com.au</u>.

AFL Club Help

The following resources can be found on the AFL Community Club website: <u>https://www.afl.com.au/clubhelp</u>:

- Player Welfare
 - o <u>Concussion</u>
 - o Inclusion & Vilification
 - o Mental Health
 - o Social Media Usage
 - o <u>Respectful Relationships</u>

- Concussion Management
- Helmets & Mouthguards
- The Management of Injuries and Medical Emergencies in Community Australian Football
- Stretchers and Cervical Collars
- Musculoskeletal Screening for Australian Football
- Growth Related Injuries in Junior Footballers
- Soft Tissue Injuries
- Hamstring Strains

Appendix I – First Aid Kit

The following checklist is provided as a guide of what the first aid kit should include but is by no means exhaustive, for example players with asthma may require a Ventolin inhaler.

ltem	QTY	ltem	<u>QTY</u>
Hygiene & PPE		Dressings	
CPR Face Shield	I	Low/Non Adherent Large	2
Tissues (pack)	I	Low/Non Adherent Small	3
Nitrile Gloves (pair)	5	Island Dressing Large	2
Antiseptic & Cleaning		Island Dressing Small	3
Saline Ampule	5	Eye Pad (Sterile)	2
Alcohol Swab	4	Gauze Swabs Sterile 7.5cm	4
lodine Swab	4	Flesh Colour Strips	20
Hand sanitiser	I	Fabric Strips	20
Safety pins (small bag)	I	Wound Closure Strips	5
Freezer Bags (packet)	I	Misc. General	
Adhesives		Rigid First Aid Box	Ι
Micropore Tape 2.5cm	I	Thermal Blanket	Ι
Rigid Sports Tape	I	Instant Ice Packs	4
Bandages		Stainless Steel Scissors	Ι
Cotton Crepe, 5cm	2	Note Pad & Pen	Ι
Cotton Crepe, 7.5cm	2	Diabetic	
Heavy Weight Bandage 7.5cm	2	Jelly Beans (small bag)	Ι
Triangular 110cm	2		

Provisional severity assessment □ mild (1-7 days modified activity) □ moderate (8-21 days modified activity) □ severe (>21 days modified or lost) Emergency Medical Technition (EMT) Advice Given chiropractor or other professional \Box able to return with restriction \Box unable to return at present time Signature of treating person Player/Umpire/Coach/Spectator Treating person Treating person T medical practitioner T bhysiotherapist nurse Sports trainer other Other medical practitioner ambulance transport physiotherapist Venue/area at which injury occurred: Referral C no referral C no referral C physiotheray C chiropractor C ambulance t C other C other Today's Date: Explain exactly how the incident occurred Were there any contributing factors to the □ manual therapy □ stretch/exercises Was protective equipment worn on the If yes, what type eg mouthguard, ankle incident, unsuitable footwear, playing none given - referred elsewhere □ dressing injured body part? 🔲 yes 🗆 no □ crutches Circle none given (not required) RICER RICER aling, splint crutche massage manua CPR strapping/taping only none given - referred elsewh other surface, equipment, foul play? **Protective Equipment** Gender: M 🗆 F 🗆 Initial Treatment INJURY REPORTING FORM brace, taping. collision with fixed object (goal post) struck by ball (eg dislocated finger) overuse injury to muscle or tendon collision with other player/referee temperature related eg heat stress DOB: _/_/_ unspecified medical condition fracture (including suspected) overexertion (eg muscle tear) CAUSE OF INJURY twisting to pass or accelerate open wound/laceration/cut fall/stumble on same level Position: abrasion/graze open wound/laceration/ct bruise/contusion inflammation/swelling fracture (including suspeted allocation/subluxation sprain eg ligament tear strain eg muscle tear ovtruse injury to muscle blisters contussion respiratory problem loss of consciousness dislocation/subluxation Provisional diagnosis/es Nature of Injury/Illness struck by other player Mechanism of Injury landing from jump Initials: jumping slip/trip overuse □ unspec Grade: Tick or circle body part/s injured & name 7 Type of activity at time of injury new injury exacerbated/aggravated injury recurrent injury 10 3-0 **Reason for Presentation Body Region Injured** □ training/practice □ competition Date of Injury 1:4) Body part/s

□ illness □ other

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□ other

Team :

Name:

other

Appendix 2 – Injury Reporting Form