

Centre Wellington Minor Hockey Trainers Handbook

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Team Trainer Handbook

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Dear Team Trainer,

On behalf of Centre Wellington Minor Hockey I would like to welcome you and thank you for volunteering to be your teams trainer this season.

The team trainer is a vital role in any bench staff, the responsibility of the trainer is one that should not be taken lightly. As the trainer you will have the responsibility to ensure player safety, injury prevention, injury reporting & management and overseeing safe return to play practices.

It is our hope that this handbook answers any questions you may have and help to guide you in the right direction if an injury occurs during the season. As always CWMH is here to support you in your role, the CWMH Head Trainer is a resource that is available to help you with any questions or situations that arise.

We are looking forward to another fun and exciting year of hockey where we strive to create a safe environment for our player to grow as hockey players.

Mark Ewing
CWMH Head Trainer
cwmhheadtrainer@gmail.com

Trainers Roles & Responsibilities

A trainers will be one of the first trained responders to assess and treat a player if an injury occurs. However the trainers role goes well beyond treating the injured player, the following are responsibilities that a trainer will take on during the course of a season;

- 1. Adhere to all policies and procedures set out in the Hockey Trainers Certification Program.
- 2. Encourage sportsmanlike play and actions from all players and coaches, and not to engage, encourage or condone unsportsmanlike or bullying behaviour.
- 3. Strive to continue education in areas related to injury prevention and treatment.
- 4. Have knowledge in and ensure players equipment is in proper and functioning condition.
- 5. Maintain correct medical information for each player and coach and ensure that medical forms are available at each team ice time or event.
- 6. Establish an Emergency Action Plan in case of an emergency.
- 7. Follow all CWMH guidelines to report an injury oversee a proper return to play. Complete required forms in the event of major injury.
- 8. Help to provide a safe environment for team events and ice times.
- 9. Never leave an injured player alone, work with parents to ensure care is continued so trainer can return to the bench in a timely manner.

Confidentiality

Confidentiality is one of the core duties of medical practice. It requires health care providers (trainers included) to keep a patient's (players) personal health information private unless consent to release the information is provided by the patient or guardian.

Confidentiality is one of the most important pillars of medicine. Protecting the private details of a patient is not just a matter of moral respect, it is essential in retaining the important bond of trust between the provider/trainer and the individual.

It is your duty as a trainer to keep any and all medical information confidential. Please ensure all medical forms are kept in a sealed envelope and as secure as possible. At the end of the season all medical forms should be shredded or destroyed.

Any paperwork that is completed by a team trainer and submitted to CWMH will be kept in a sealed envelope and secured to ensure confidentiality of any information.

CWMH considers all medical information strictly confidential and will adhere to any and all laws around confidentiality of medical information.

Trainer Guidelines

- 1. Trainers must possess all qualifications as required by hockey Canada & OMHA to be rostered as a trainer on a CWMH roster.
- 2. Trainers must make every effort to be watching the game at all times while on the bench unless treating an injured player.
- 3. The trainers decision is final and will not be influenced by a coach, assistant coach or parent, and must be made regardless of game situation.
- 4. For all injuries a trainer will complete an HDCO form as well as a Hockey Canada Injury report. HDCO can be filled out and submitted online on the HDCO website.
- 5. The trainer will be responsible to ensure that the CWMH Head Trainer is notified if any of the following injuries/situations occur:
 - a. A player is transported by ambulance from a game or team practice
 - b. A player suffers a major injury where he will miss game time ie head or spinal injury, fracture, separated shoulder, ect.
 - This excludes minor injuries cuts, scrapes, sore extremities that cause the player to miss time
 - ii. Game time = more than a period of a game
 - iii. If in doubt please report the injury
 - c. A player is diagnosed with a concussion by a physician
 - d. A coach has overruled a trainer on an injury decision
 - e. A parent has made an objection to a over trainers decision.
- 6. If a player is transported by ambulance from a team ice time, the trainer must complete and submit an injury incident report.
 - a. A CWMH Injury Incident report will provide a brief overview of the incident and any treatment given by the trainer.
 - b. CWMH Incident reports can be completed for any injury and should be completed if there are any unusual circumstances
 - c. Incident reports are to be submitted to the CWMH Head Trainer.

Trainers Guidelines - Cont'd.

- 7. In the event of injury to players, coaches or spectators at a sanctioned hockey event the trainer is responsible for reporting the injury in accordance with the CWMH injury reporting guidelines.
- 8. All teams will have a minimum 1 trainer and are encouraged to have at least 2 or more on their approved or at large roster.
- 9. All trainers are responsible to ensure all players have completed a medical form prior to playing in any game and that the forms are accessible at all team ice times and events.

Trainers Kit

It is your responsibility as a trainer to keep a fully stocked trainers kit available for use at any and all team ice times. Any items used from the trainers kit should be replaced asap. Having a spare kit available is not required, but is encouraged if possible.

Items to be in the kit:

- Sterile Dressings and Bandages
- Ice Packs
- Non Latex Gloves
- Tape
- Towel
- Spare Equipment Mouthguards, skate sharpeners ect.
- Screwdriver & Helmet Screws
- Medical Forms
- Scissors

Emergency Action Plan

In the case of an emergency where a player may need to be assessed by Paramedics the following must be in place:

Person In Charge

- Most qualified person available with training in first aid and emergency control. This does not have to be the team trainer.
- o Familiarize yourself with arena emergency equipment .
- Take control of an emergency situation until a medical authority arrives.
- Assess injury status of player.

Call Person

- Know the location of emergency telephone.
- Have a list of emergency telephone numbers.
- Have the address of arena.
- Identify best route in and out of arena for paramedic crew.

Control Person

- Ensure proper room to work for person in charge and paramedic crew.
- o Discuss emergency action plan with: Arena staff, Officials, Opponents.
- Ensure that the route for the paramedic crew is clear and available.
- Seek highly trained medical personnel (i.e., MD, nurse, paramedic, firefighter) if requested by person in charge
- Discuss player status with parents/guardian

The trainer should have a plan in place prior to the season beginning with designated parents/guardians assigned to these positions in case of emergency.

Injury Reporting Guidelines

The team trainer will be responsible for reporting any injury, completing and submitting all paperwork if an injured player falls into the criteria listed below.

The first priority when a player or official suffers an injury is to ensure the injured player or official receives appropriate medical care for the injury. *Injury reporting should be done in a timely manner only but will not delay care.*

Steps to reporting injury;

- 1. Identify need for reporting injury
 - a. A player is removed from a game and misses 1 period or more
 - b. A player or team official is injured at a team ice or event and requires further medical attention
 - c. A player or a team official suffers an injury and requires medical attention after the event (eg. player is injured during a game and continues to play, however seeks medical attention on their own the next day for the injury)
- 2. Contact the CWMH Head Trainer via email to notify of injury asap after the injury. The CWMH Head Trainer will determine the need to complete further paperwork based on injury and circumstances around injury.
- 3. For all injuries an HDCO Injury report must be completed and can be submitted online through the HDCO webpage.
- 4. For a major injury or concussion a Hockey Canada form must be completed and submitted within 90 days of the injury.

Injury Incident Report - Guide

- 1. Injury Incident Reports are not a legal document
- 2. The report is used to document the incident and what steps were taken by the trainer when an injury occurs, and should be completed ASAP after incident
- 3. The report can be used if any questions are raised about the incident at a later date as a reference for the trainer/team involved.
- 4. No disciplinary actions will be taken as a result of a completed Incident report
- 5. A report should be filled out when:
 - a. A player is transported by ambulance from a team ice or event.
 - b. A player suffers a concussion at a team ice or event.
 - c. Any unusual circumstances occur or a trainer wants to document an incident.
- 6. It is the responsibility of the trainer who treats the injured player to complete the report
- 7. All completed reports must be submitted to the CWMH Head Trainer
- 8. All submitted reports will be stored by CWMH.
- 9. The "Description of Event" section should include:
 - a. What happened
 - b. Approximate time
 - c. All treatment rendered and actions taken by trainer at rink
 - d. Any interaction with players guardians regarding incident
 - e. Anything else you feel is pertinent to the injury
- 10. The report is a reference for the trainer and coach if questions arise at a later date about the incident, the report can contain as much or as little information as you like.

CWMH Concussion Protocol

- 1. A player removed from play with a suspected concussion must receive medical clearance from a Dr to return to play.
- 2. A player will only fall into CWMH Return to Play Protocol (RTPP) only if the player is *diagnosed* with a concussion by a physician.
- 3. A player will fall into the RTPP no matter where the concussion occurs, it is the responsibility of the parents to notify the Head Coach and Trainer that the player has been diagnosed with a concussion.
 - a. If a player is found to have been diagnosed with a concussion and it is not reported he may face further discipline from CWMH.
- 4. Once a concussion has been reported to a team trainer, the trainer will contact the CWMH Head trainer to make him aware of the concussion.
- 5. A player may be removed from or not allowed to return to play if the teams trainer feels the player is exhibiting concussion like symptoms.
- 6. Once the player has been removed from play by the trainer he may only return to play if one of the following criteria have been met;
 - a. The player is assessed by a physician and <u>not diagnosed</u> with a concussion and given clearance to return to play in writing that must be presented to the trainer.
 - b. The player is diagnosed with a concussion and successfully completes the CWMH RTPP.
- 7. The trainer will have the final say whether or not the player returns to play, if he does not feel comfortable allowing the player to return to play he will contact the CWMH Head Trainer for further guidance.
- 8. The trainers decision to withdraw a player cannot and will not be overturned or challenged by a coach or the parents. If there are concerns from the coach or parents, they may contact the CWMH Head Trainer for further guidance.

Player Returning from a Major Injury

- A major injury refers to an injury where:
 - A player can not return to a game and misses additional game(s) due to that injury
 - o A player is removed from practice due to injury and is unable to return
 - An injury is reported and is deemed to be a major injury by the CWMH head trainer
 - Examples fractures, separated shoulder, laceration requiring stitches, ect
- The Player must provide medical clearance (Dr note) before he returns to practice.
- Player must be cleared for body contact if applicable Minor Bantam and Above
- Team trainer must receive or view a copy of the Dr note. The note must be submitted electronically to the CWMH head trainer in a timely manner.
- The CW Head Trainer will file all note electronically
- The player only requires 1 note total. Advise parents before getting clearance that the note must allow full return to play.
- The Player must complete 2 skates prior to participating in game play.
- If the player plays Minor Bantam or above, the first skate will be non contact and the second skate will be full contact.

Medical Clearance (Doctor's Note)

When is a Doctor's note required for a player to return to play:

- 1. A player who has been removed from a game and misses time (a period or more) due to a suspected concussion requires medical clearance (Dr. note) to return to play.
- 2. A player who has been diagnosed with a concussion requires medical clearance (Dr. note) to <u>begin</u> the RTPP.
- 3. A player who is moving through the RTPP requires medical clearance (Dr. Note) to proceed from Step 4 to Step 5.
- 4. A player returning from a broken bone or major injury requires medical clearance (Dr. Note) in order to return to play.

The team trainer <u>must see the note</u>, viewing the note electronically is acceptable.

Dr.'s notes need to be submitted to the Head Trainer electronically. A picture or scanned copy of the note can be emailed to cwheadtrainer@gmail.com once received the notes will be filled electronically by the Head Trainer.

CWMH Return to Play Protocol (RTPP)

The return to play protocol is gradual, and begins only after a doctor has given the player clearance to return to activity.

If any symptoms/signs return during this process, the player must be re-evaluated by a physician. No return to play if any symptoms or signs persist. Remember, symptoms may return later that day or the next, and not necessarily when exercising.

Player should allow 24 hrs before advancing to the next step.

- **Step 1**: No activity, only complete mental and physical rest. Proceed to step 2 only when all symptoms are gone. This includes avoiding both mental and physical stress.
- **Step 2**: Light aerobic exercise, such as walking or stationary cycling. Monitor for symptoms and signs. No resistance training or weight lifting.
- **Step 3:** Light skating and hockey drills (Skate #1) Player can incorporate light off ice resistance/weight training.
- **Step 4:** Higher tempo skate, no body contact. (Skate #2) Player may also continue off ice training with higher resistance.
- **Step 5:** Begin drills with body contact if applicable (Skate #3)

Full medical clearance is required to advance to Step 6

Step 6: Game play. (The earliest a concussed athlete should return to play is one week).

Never return to play if symptoms persist!

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Return to Play Protocol - Notes

- 1. Players may proceed through return to play steps only when they do not experience symptoms or signs and the physician has given clearance.
- 2. Minimum of 24 hrs between steps.
- 3. If symptoms or signs return, the player should return to step 1, and be re-evaluated by a physician.
- 4. If symptoms return at any point during the RTPP the player will return to step 2 and should be be re evaluated by a physician.
- 5. The trainer and/or CWMH must be present for at least 1 of the players skates and must assess player after the ice time.
- **6**. The player may skate with other teams in order to progress through the steps in a timely manner. This can be coordinated with the Head Trainer & Rep Director.
- 7. Young players will require more conservative treatment, the player should progress though the steps in consultation with a physician.
- 8. A player who successfully completes the RTPP must receive clearance from a physician prior to returning to play.
- 9. Successful completion of the RTPP means the player completes all steps symptom free and receives clearance from a physician.
- <u>10</u>. A player who is Minor Bantam or above must be cleared for full contact to return to play. Rep players only.

<u>11</u>. The teams trainer, head coach as well as the CWMH Head Trainer must be notified of successful completion of the RTPP.

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Forms

Medical Form

https://cdn.hockeycanada.ca/hockey-canada/Hockey-Programs/Safety/Safety-Program/ Downloads/player_med_info_e.pdf

Injury Log

https://cdn.hockeycanada.ca/hockey-canada/Hockey-Programs/Safety/Safety-Program/ Downloads/injury_log_e.pdf

Injury Report

http://www.hockeyeasternontario.ca/docs/HC Injury Report Eng.pdf

Concussion Pocket Card

https://cdn.hockeycanada.ca/hockey-canada/Hockey-Programs/Safety/Concussion/Downloads/2017-clean-concussion-tool-5.jpg

Emergency Action Plan

https://cdn.hockeycanada.ca/hockey-canada/Hockey-Programs/Safety/Safety-Program/ Downloads/eap_organization_form_e.pdf

Return to Play Form

http://www.hdco.on.ca/pages/documents/htcp_returntoplay_form_002.pdf

Link to HDOC Forms

http://www.hdco.on.ca/trainers_downloads



Centre Wellington Minor Hockey Injury Incident Report

Date of Incident:
Team:
Location of Incident:
Trainer:
Head Coach:
Player Involved:
Description of Event:

Date:	Name:
Signature:	<u> </u>