

Coaching for Athlete Safety

AusDBF - eLearning Modules

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Coaching for Athlete Safety

Welcome to AusDBF eLearning module –
Coaching for Athlete Safety.

This presentation contains texts, graphics,
videos and an online survey questionnaire.

It is important that you read all the text and
instructions before you proceed to the next
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Coaching for Athlete Safety

The role of the sports coach includes a vast range of responsibilities.

Probably one of the most important roles is to provide an environment that is safe for the athlete to compete without unnecessary injury.

It is acknowledged that there is risk of injury in many sports.

An effective coach must be concerned with the prevention immediate care and rehabilitation of sports injuries.

In addition, the coach should have an understanding of some of the less tangible problems that athletes may be confronted with when participating in competitive sport.

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Coaching for Athlete Safety

TO BE EFFECTIVE IN THE AREA OF SPORT SAFETY THE COACH MUST BE FAMILIAR WITH:

- injury prevention
- injury management
- types and usage of safety and protective equipment
- fluid replacement
- importance of referral
- other personnel involved in injury prevention

**‘An injury to an athlete can be frustrating and can sometimes occur even with the best training and coaching methods.
Prevention is better than cure’**

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INJURY PREVENTION

One of the most frustrating aspects of competitive sport for the athlete is being injured. The problem is, even with good training and coaching methods, injuries still occur.

**THE GOLDEN RULE FOR ALL SPORTS INJURIES IS
'PREVENTION IS BETTER THAN CURE'.**

THE FOLLOWING KEY POINTS WILL HELP THE COACH PREVENT INJURIES IN SPORT.

- Pre Screening
- Warm Up, Stretching, Cool Down
- Considering the athlete's fitness & experience
- Setting Guidelines / Obeying the Rules
- Training Facilities/Race equipment and venues
- Use of Protective Devices & clothing
- Monitoring of environmental conditions
- Hot & Cold Weather Conditions
- Fluid Replacement

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PRE SCREENING OF ATHLETES

Selecting a sport that suits the athlete's physical stature and ability will minimise the exposure to injury and is particularly important for young children.

In order to plan a safe, beneficial and appropriate training program, the coach must know the relevant medical history of all the athletes under his/her care.

It is also useful to know about other sporting and social commitments an athlete may have. These might include activities such as other sports, part-time work commitments and membership of other groups.

To obtain this information, a pre-season medical and activity questionnaire must be completed by all athletes or their parents. In addition to this, a question or two relating to the athlete's goals and aspirations for the season could be included here. (eg. gaining skills and fitness to tryout for this year's State team)

The questionnaire should be updated throughout the season as necessary.

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Warm-up, stretching and cool downs

An effective warm-up is a vital part of any competition or strenuous exercise session. The more prepared your body is, the risk of becoming injured is minimized.

EVERY TRAINING SESSION SHOULD INCLUDE -

- warm up
- conditioning phase (main part of training session)
- cool down

THE BENEFITS OF A GOOD WARM UP –

Prepares the athlete both physically and mentally for the coming activity

- increases muscle temperature
- increases body core temperature
- increases respiratory rate
- increases heart rate and blood flow to the working muscles
- increases the elasticity of the muscles
- warms up the fluid in the joint capsules (decreases viscosity of fluid)

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Warm-up, stretching and cool downs

A warm-up generally involves about 10 minutes of general activity.

It is important that the warm-up begins at a low intensity and gradually builds to the level required in the competition/session.

INITIAL STAGES OF THE WARM UP

- should be graduated, starting with light aerobic, whole body type activities, and building on intensity.

AFTER THE INITIAL STAGE

- movement based exercises should be come more dynamic in nature,
- replicate the specific actions of the sport or training session to come.

A good indication of an effective warm-up is a light sweat and raised HR.

Young children may find the traditional warm-ups uninteresting and the coach can achieve the same outcome through short games, such as the many variations of tag games.

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Stretching

STRETCHING IS IMPORTANT AND CAN REDUCE THE CHANCE OF INJURY....

however is best as part of a cool down or as a specific Training Method to increase one's flexibility (a health-related fitness component)

There is no evidence to support the inclusion of static stretching (holding the end point of a stretch for up to 30 sec.) in a warm up. (other for the minority of sports that require participation to hold a static stretch as part of their performance)

Many of the acute responses, initiated during a more dynamic warm up, may be reversed and be counter productive, by static stretching.

The stretching of muscles, **through a range of motion**, is effective and could be interspersed throughout the warm-up, and involve all muscle groups, in preparation for other warm up activities.

WHEN STRETCHING –

- warm up prior to stretching
- always stretch gradually – never bouncing
- always breath through the stretch – never hold your breath

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Stretching

Stretching is most effective in the **COOL DOWN**,

- as the body is still warm from exercise and will benefit from flexibility work.
- can reduce the chance of muscle stiffness.

Working in pairs, resistance bands and foam rollers are commonly used.

BENEFITS OF STRETCHING USING A RESISTANCE BAND –

- can easily be used for a comprehensive, full body stretch, covering all the major muscle groups of the body
- cost effective and add variety

FOAM ROLLERS ARE ALSO EFFECTIVE IN STRETCHING, WITH BENEFITS –

- increasing blood flow
- maximising effectiveness of stretching
- eliminates painful trigger points in soft tissues
- accelerates the removal of waste products after exercise
- assist in increasing O2 to muscles

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Cool Down

A WELL PLANNED, STRUCTURED COOL DOWN AFTER THE MAIN TRAINING SESSION IS IMPORTANT FOR RECOVERY.

The benefits of a cool down include -

- return body to pre exercise levels
- reverse the effects of fatigue
- removing waste products from the working muscles
- gradual recovery of heart & respiratory rate and blood pressure
- prevents the effect of blood pooling
- reduce the effects of DOMS (Delayed Onset of Muscle Soreness)

A cool down both **on the water**, (eg. paddling at a lower intensity) and **on land** should be planned.

An effective cool-down consists of a gradual reduction in activity levels for about 5 minutes, followed by a comprehensive stretching program.

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Health & Skill related Components of Fitness

Health-related components

- directly relate to good health, disease prevention and well being.

Skill-related components - improve motor skills

- are often referred to as performance components or athletic ability correlate often with high athletic performance

Health Related components	Skill Related components
Aerobic Power (aerobic capacity)	Anaerobic Capacity
Body composition	Agility
Flexibility	Balance
Muscular Endurance (Local ME)	Coordination
Muscular Strength	Muscular Power
	Reaction Time
	Speed

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Developing Fitness

THE DEVELOPMENT OF, & IMPROVING THE LEVEL OF FITNESS OF ATHLETES – IN ALL SPORTS, INCLUDING DRAGON BOAT RACING.....

- supports better performance
- prevents/reduces risk of injury

A gradual progression is especially important with athletes returning to exercise, returning from injury, and for those wishing to increase their level of performance.

General fitness (aerobic fitness) can be improved and developed using the **F.I.T.T. PRINCIPLES**.

- Frequency – 3 to 5 sessions/week
- Intensity - 60-75% max Heart rate
- Time – duration of activity - > 20 mins
- Type – whole body type activities – run, swim, cycle, row machine etc.

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Developing Fitness

(and specific Training Programs for DB)

All of the components of fitness, both health related and skill related should be considered when designing a training program.

All training programs, developed to improve dragon boat racing performance, should be based on the recognised Training Principles.

THE CORE TRAINING PRINCIPLES ARE -

- Specificity
- Intensity
- Type
- Time/Duration
- Frequency
- Progressive Overload
- Variety

More on Training programs and Training Principles are covered later in the course.

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Setting Guidelines / Obeying the Rules

Many of the rules of sport are specifically designed to create a safe training/racing environment.

All athletes should be encouraged to learn and observe both the written and unwritten rules of the game.

Athletes should be continuously reminded of the importance of good sporting behaviour and fair play.

COACHES SHOULD DEVELOP CLEAR, WRITTEN RULES/GUIDELINES FOR TRAINING, REGATTAS AND GENERAL CONDUCT.

These should be developed in consultation with Club's committee.

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Training/Racing areas, facilities & equipment

For all athletes, coaches, officials and spectators.

SPORTS SAFETY PLANNING IS ABOUT 'TRAINING SMART'

- being aware,
- being prepared
- being pro-active in promoting a safe sporting environment

Sport safety planning and implementation is not hard, just common sense. Nor is it a one-off event, but rather a cycle of continuous improvement.

The **SafeSport Program** is an initiative of **Sports Medicine Australia** and **Active Australia**.

Two booklets are particularly useful resources.

- How to Become a Sport Safe Club
- How to Become a Sport Safe Facility

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Training/Racing areas, facilities & equipment

USING APPROPRIATE AND PROPER EQUIPMENT IS ESSENTIAL TO REDUCE THE RISK OF INJURIES.

ESPECIALLY WHEN DEALING WITH CHILDREN, (OR ANY PARTICIPANT!)

All equipment that is used should be:

- suited to the size and ability of the athlete
- regularly checked and maintained
- sufficient in number
- padded as appropriate
- stable or movable if necessary
- properly erected / constructed.

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Protective Devices / Lifejackets

Many protective devices are designed to reduce injuries in specific sports.

In dragon boating PFDs, life jackets, anti-slip seat mats, anti-slip paddle pants and knee pads are protective devices commonly used in dragon boating.

Use of PFDs or life jackets, is mandatory in some states, and strongly recommended in other states, and should be worn where appropriate. example – for children and those not comfortable/able to swim

When PFDs or life jackets are being worn, it is important that they are correctly fitted (correct size / weight) & in good serviceable condition.

All coaches should refer to the appropriate maritime/boating authority to check on all requirements and appropriate PFD/Lifejackets needed.
*eg. In Victoria – **Victorian Recreational Boating Safety Handbook** produced by the *Maritime Safety Authority*, www.transportsafety.vic.gov.au*

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Environmental conditions - Heat

Coaches are encouraged to know their athletes.

Children, the aged or individuals who are unfit or overweight are more susceptible to heat illness.

Encourage athletes to wear loose, lightweight, light coloured clothing made from a natural fibre (e.g. cotton). Intense activity should be avoided in hot or humid conditions.

Coaches should monitor athletes carefully for **signs of heat illness**.

These include tiredness, weakness, headache, cramps, nausea, flushed skin, excessive sweating, fainting.

In the event of an athlete suffering from heat illness, the coach should remove them from the activity, lay them down in a cool place, give plenty of water to drink and cool the athlete by sponging them with cool water or placing wet towels over them.

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Environmental conditions -Sunburn

SUNBURN IS A MAJOR PROBLEM IN AUSTRALIA'S HARSH CONDITIONS.

Participants should follow the advice of:

- slip on a T-shirt
- slop on some sunscreen
- slap on a hat.
- seek shade or shelter,
- slide on some sunglasses.

It is important to use shade as much as possible, both on land, (warm up, cool down, briefings etc.) and on the water where possible.

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FLUID REPLACEMENT

More than half your body weight and over 70% of your body mass is water.

The body requires approximately 2litres of fluid to balance what is lost, (not including that lost when sweating.)

FLUID SERVES MANY IMPORTANT FUNCTIONS OF THE BODY such as -

- transport energy, waste, hormones and antibodies
- dilute waste products
- lubricates surfaces and membranes
- helps to regulate body temperature
- involved in chemical reaction throughout the body

Performance has been shown to decrease as an athlete becomes dehydrated, and extreme dehydration can become life threatening.

Good hydration practices include developing good fluid intake practices before, during and after training sessions or competitions.

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FLUID REPLACEMENT

COACHES SHOULD BE AWARE OF THE FOLLOWING POINTS:

- athletes should be well hydrated before activity begins
- thirst is a poor indicator of fluid replacement — encourage athletes to drink before they are thirsty
- schedule regular drink breaks during the activity

FLUID INTAKE NEEDS TO COMPENSATE FOR SWEAT LOSS DURING EXERCISE

When	How much?
Prior to the session	200-600 mL
During the exercise session – total	approx. 500-1000mL fluid per hour
Begin early during exercise by replacing fluid gradually through the session	200-300mL per 15-20 minutes of exercise

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FLUID REPLACEMENT

WATER & SPORTS DRINKS

- Water is a suitable fluid replacement, especially when exercise last for less than 60 minutes.
- Sports drinks are best when doing intense, sustained exercise for over 90 minutes.
- As well as water, electrolytes (salts and minerals eg. sodium & potassium) are also lost during exercising.
- The body may take from 4 – 24 hours to completely rehydrate, depending on the exercise undertaken.

Studies has shown that fluid intake of an athlete increases if the drinks are cool, flavoured and contain sodium. The use of sports drinks, particularly **ISOTONIC Sports Drinks**, may encourage drinking and fluid intake.

ADVANTAGES OF SPORTS DRINKS

- rehydrate, replace electrolytes and refuel carbohydrates- good in recovery
- are used by muscles, nerve and cardiac cells and assist with the conduction of electrical messages
- reduce urine output, enable fluid to empty quickly from the stomach, promote absorption from the intestine and encourage fluid retention

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Environmental conditions – Hypothermia, Wind Chill Factor ...

Cold weather can also have life-threatening consequences.

More commonly, it causes injuries through the cooling of warm muscles.

Long breaks, during a training session or between races, may cause the body to cool down, thus athletes should be encouraged to wear adequate warm clothing such as thermals, fleece, beanie, wind jackets, tracksuits during training, and change into warm, dry clothing and use windproof jackets in between sessions.

Coaches should plan training sessions appropriately to avoid long breaks. Another warm-up period may need to be considered if long rest periods cannot be avoided.

Coaches should ensure that athletes:

- avoid standing exposed to the cold for long periods
- change wet clothing as soon as practicable
- wear clothing that is appropriate for cold conditions
- (e.g. dress in layers to trap heat, wear gloves and a hat to reduce heat loss).

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MANAGING EXISTING INJURIES PROPERLY

Returning to sport too early after injury can make the athlete susceptible to further injury.

COMMUNICATION – ATHLETE – MEDICAL PERSONNEL - COACH

The coach should ensure that the risk of recurrence of injury is reduced by requesting that the athlete obtain a doctor's or physiotherapist's clearance to play.

A **“return to play” action plan** should be considered, ensuring that a return to sport starts minimally, within the athlete's capabilities, and includes incremental increases, while aiming for the athlete's previous training levels and intensities.

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Illness, medical conditions and participation

During times of illness, the athlete's body is particularly vulnerable, with the risk of damage to tissues or organs being very high.

Thus, when ill or feverish the athlete should not participate.

The risk of infection to others in the boat, or around the club, should be considered.

Coaches should be aware of, and adhere to all current Federal & State Government, DB Association and Club policies and procedures, regarding flu, virus and disease transmission. eg. COVID19, influenza etc.

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Illness, medical conditions and participation

A number of conditions may prevent participation either temporarily or permanently.

These include:

- chronic infections – chest, skin
- cardiovascular abnormalities, for example heart conditions, valve disorders
- musculoskeletal problems, such as active joint disorders and arthritis
- medical conditions such as diabetes, epilepsy and asthma.
- return from surgery, eg. breast cancer surgery or rehabilitation

These conditions should not prevent participation permanently because adequate medication is available to allow most sports involvement. Sports Medicine Australia (SMA) has published a pamphlet Guidelines for Safety in Children's Sport and Recreation containing further information.

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Balanced competitions

It is important to keep competitions **balanced** in order to reduce injuries.

To ensure balanced competitions, coaches should consider the following factors when setting up and rostering crews, both in training and a regatta situation -

- age,
- size,
- gender,
- strength,
- skill level
- experience
- psychological maturity of the players

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First aid for sports injuries

THE RISK OF INJURY IS AN INHERENT PART OF MOST SPORTS.

Coaches have a responsibility **to manage that risk** and keep it to a minimum.

They also have a responsibility **to deal appropriately with injuries** that do occur to their athletes.

In **managing an injury**, the main aim is to do no further damage.

Statistics show that more than 50% of injured athletes receive inadequate first aid, causing an increase in the recovery time necessary before returning to play.

It is important that either the coach or a member/parent involved in the club, or sport, have a minimum of **Level 2 First Aid and CPR**, and/or Level 1 Sports Trainers accreditation from SMA's Safer Sport program.

Follow up referrals to a sports injury practitioner can be an important stage in the athlete's recovery and return to sport.

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First aid for sports injuries

When an injury occurs, there are many decisions to be made.

IMPORTANT CONSIDERATIONS FOR THE COACH

- the safety and wellbeing of the athlete is paramount
- what first aid or assistance is needed
- whether the athlete should continue to participate or not

Coaches should always err on the side of caution as resuming participation may cause further damage to an injured part.

Given that all coaches need to have a current first aid certificate, the following is a brief overview of some of the important aspects.

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The five principles of first aid

Preserve

- casualty
- Bystander
- rescuer

Protect

- Casualty from further harm
- Ensure the scene is safe

Provide pain relief

- Such as applying ice pack, use of a sling or support

Prevent further injury or illness

- Ensure the treatment you provide does not make the condition worse

Provide Reassurance

- Stay with the casualty and give emotional support

It is important to understand that first aid has its limitations and does not take the place of professional medical treatment.

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The Unconscious Casualty

THE CHAIN OF SURVIVAL

1. Early recognition and call for help
2. Early CPR
3. Early defibrillation
4. Early advanced care (Post resuscitation care)



**IF THE ATHLETE BECOMES UNCONSCIOUS,
IT BECOMES A LIFE-THREATENING SITUATION.**

The **CHAIN OF SURVIVAL** and the **DRSABCD** routine should immediately be commenced.

It is so important that the coach keeps both First Aid and CPR accreditation up to date. Others within the club should be encouraged to also be qualified and kept up to date.

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The Unconscious Casualty – D. R. S. A. B. C. D



- Check for any risk/dangers to yourself, bystanders and casualty
- Conduct a primary survey of the scene



- **C.O.W.S.**
- Can you hear me? Open your eyes.
- What's your name? Squeeze my hands.



- Shout for help and assistance
- If possible, direct a bystander to call for ambulance (000, 112)
- direct bystander to bring an AED if available

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The Unconscious Casualty - D. R. S. A. B. C. D

Airways

- Ensuring an **open and clear airway** is essential. This will take priority of any injuries.
- Adults (8yrs and over) - a gradual full head tilt is recommended:
- Children (1 – 8yrs) - a gradual full head tilt & managed as for adults.
- Infants (under 1yr) - maintain a neutral head position/jaw support.

Breathing

- **Look** to see if the chest rises and falls
- **Listen** at the mouth for sounds of normal breathing
- **Feel** for air against your cheek
- If casualty IS breathing 'normally' - roll into the "recovery position"

CPR

- **30 compressions**, followed by **2 rescue breaths**
- at a **rate of 100-120 compressions** per minute
- **Same for all ages**

Defibrillation

- Use an **Automated External Defibrillator (AEDs)**
- Follow instructions with unit

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THE CONSCIOUS CASUALTY

Injury Management

S.T.O.P. → S.A.L.T.A.P.S. → R.I.C.E.R. → No H.A.R.M.

Injury management

S top the activity T alk to the person O bserve the injured part P revent further injury (via the three options below)		
↙	↓	↘
Get help (Severe injury)	RICER regime (Less severe injury) <i>See next slide for detail</i>	Play on (Minor injury)



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S	STOP/SEE	<ul style="list-style-type: none"> • see the injury happen? • assess situation and stop the activity • gain access to the athlete
A	ASK	<ul style="list-style-type: none"> • ask for consent, What happened? Ask those around • get a detailed history • evaluate for pain (facial expression, posture) orientation
L	LOOK	<ul style="list-style-type: none"> • look at injury and appearance at the injury site • look for swelling, bleeding, discolouration, bruising, bone/joint deformity, muscle spasm • to gauge severity, compare with other side if possible eg. leg, knee, foot, wrist, hand etc.
T	TOUCH	<ul style="list-style-type: none"> • gently touch injury site if the casualty will allow to assess degree of pain. • press very gently to find the site of pain, noting any response
A	ACTIVE MOVEMENT	<ul style="list-style-type: none"> • check for mobility • allow athlete to move affected area, themselves through full range of movement
P	PASSIVE MOVEMENT	<ul style="list-style-type: none"> • if active movement is OK, the First Aider can gently move the joint though it's range of movement. • pain or tenderness at this point may mean there is a ligament or tendon injury • the casualty should seek medical advice. gently move the injured area through movements needed to play
S	SKILLS/STRENGTH TEST	<ul style="list-style-type: none"> • see if casualty can perform the required actions needed to continue play • move against a resistance, stand unaided, progress through a functions test, etc

S.A.L.T.A.P.S.

A checklist for the procedure to be followed when diagnosing a sports injury.

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First Aid for Soft Tissue Injuries

The management plan used to achieve the **immediate** and **longer term** treatment of an **acute injury**



REST - Cease activity

ICE - Apply
for up to 20 mins. per treatment

COMPRESSION - Secure with
Medichill Cohesive Bandage

ELEVATION - of injured area above
level of heart where possible

REFERRAL - to healthcare professional



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Injury Management - No H. A. R. M.

- especially in the first 24/48-72 hours, where the goal is to reduce blood flow to the soft tissue injury

No HEAT

- such as a sauna, spa, hot water bottle/heat pack, hot liniment rubs
- applying heat causes blood vessels to dilate, allowing more unwanted blood to the injured area

No ALCOHOL

- Causes further swelling and bleeding through dilation of blood vessels creating unwanted blood flow to the injury site

No RUNNING

- no running or exercising
- this causes increased blood being transported to the muscles and injury site

No MASSAGE

- massaging increases unwanted blood flow to the injured area increasing swelling and bleeding at the injury site

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RECORDING FIRST AID INCIDENTS & INJURIES

COACHES SHOULD RECORD DETAILS OF -

- any injury to an athlete and
- any treatment administered.

This information should be available to the parents of young athletes so that they might be able to monitor the athlete.

The injury record may also be useful to the club in future risk management planning AND INSURANCE CLAIMS

A suggested injury record form follows.

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Injury Record Form

Date: _____ / _____ / _____	
Athlete's Name:	
DOB: _____ / _____ / _____	Male <input type="checkbox"/> Female <input type="checkbox"/>
Injury Location of injury How injury occurred:	
Place: _____	Time of injury: _____
Other witnesses:	
Care and treatment Briefly detail initial care rendered:	
Who administered care:	
Print Name: _____	Signature: _____
Was the athlete referred to other treatment (if so, record details):	
Remedial action taken:	Notification:
	Tick appropriate boxes:
	<input type="checkbox"/> Parents
	<input type="checkbox"/> Competition organiser
Suggested remedial action to be taken:	<input type="checkbox"/> Club officials
	<input type="checkbox"/> Other

Sample of Injury Record form

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Other considerations while using S.T.O.P.

STOP (in conjunctions with SALTAPS)

- Stop the athlete from continuing to participate and, if necessary, stop the game or competition.
- Remember, when an injury occurs, the most important individual is the injured person.
- The coach's reaction at this time will have a significant impact on the injured person's state of mind. Panic is no answer in a crisis.

TALK

- Talk to the injured athlete. Ask questions such as 'How did it happen?'
- The coach should listen carefully to the answers to these questions, paying particular attention to the athlete's anxiety levels.
- Remember, remain calm, no matter how severe the injury is.
- This is a good time for the coach to give a few words of encouragement.
- Keep it simple, positive and re—assuring.
- Plan what might be said to ensure the athlete does not do anything to further complicate the injury while at the same time keeping the athlete's mind off the possible consequences of what has happened.

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Other considerations while using S.T.O.P.

OBSERVE (in conjunction with SALTAPS)

While the coach is talking to the athlete, they should observe the:

- athlete's personality:
- is it normal?
- is the athlete distressed?
- injury site:
- is there any swelling? is it red, apparent bruising?
- is there any difference when compared to the other side/limb?
- is there any deformity?

If the answer to any of the above questions is yes, trained first aid support should be sought.

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Other considerations while using S.T.O.P.

SERIOUS INJURY - DON'T MOVE THE ATHLETE — GET PROFESSIONAL HELP

PREVENT FURTHER INJURY

- Make sure you keep spectators far away.
- Comfort and reassure the casualty until an accredited sports trainer, experienced first aider or ambulance officer arrives.
- Comments should be encouraging, positive, and aimed at keeping the athlete calm.
- Carefully communicate information to the athlete know what will happen next without giving them any further reason for concern.

RICER / no HARM

- The first 48 hours are vital in the effective management of any soft tissue injury.
- Injuries managed effectively in the first 48 hours can reduce the time spent on the sidelines by up to six weeks.
- Immediate management of an injury should follow the RICER regime.
- This regime is used for ligament sprains, muscle strains and muscle haematomas (corks) in fact any bumps or bruises, which occur in sport.

After 72 hours – heat to the soft tissue issue is advantageous, in helping in the removal of wastes and damaged tissue from the injury site.

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Please **turn up your volume** then click on the URL link below to view a short video of the Coaching for Athlete Safety.

When the video is completed please return and go to the next slide in this presentation.

AusDBF Video

<https://youtu.be/o4k8qK0Hsls>

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