



HHMH Team Trainer Manual

Revision 1

21 Sept 2017

HHMH Team Trainer Handbook 2016-2017 Season

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Letter to my Team Trainer

Dear Team Trainer,

On behalf of the Halton Hills Minor Hockey Association I would like to thank you for volunteering for this important role and committing your time to make the 2015-2016 season a great success for your team.

We believe that your role is important for the safety of our youth participating in the Halton Hills Hockey program.

We hope you will find this year's Team Trainer's Handbook a helpful resource, please send any feedback or comments and suggestions to Deb Harding.

headtrainer@haltonhillsminorhockey.com

Thank you for contributing to the success of our Hockey Club and for creating a great experience for our players.

Sincerely,

Deb Harding

Head Trainer

Halton Hills Minor Hockey

The Team Trainer's Role

A knowledgeable, interested trainer is an essential, valuable part of the team coaching staff.

The trainer's skills are very important in the immediate care of serious injury and recognition of injuries that can produce long lasting effects on the Players.

Information on the specific workshops available to become a trainer can be found on the [OMHA Website](#).

THE TEAM TRAINER SHALL:

- Adhere to the objectives and policies of the Hockey Trainer's Certification Program and of HHMHA and its Constitution, Bylaws, Regulations and decisions.
- Not condone, encourage, engage in or defend unsportsmanlike conduct or practices.
- Strive to achieve the highest level of competence and education possible.
- Hold periodic equipment checks throughout the season.
- Ensure that the goaltender equipment (if applicable) is properly cared for and/or in proper working order
- Never intentionally mislead or lie about their qualifications, education or professional affiliations.
- Recognize that personal problems and conflicts might occur which may interfere with their effectiveness. Accordingly, they should refrain from undertaking any activity in which their personal problems are likely to lead to inadequate performance or harm to an athlete or colleague.
- Not practice or permit discrimination on the basis of race, colour, sex, age, religion, or national origin.
- Maintain the medical information/records on each of the Players and will establish an E.A.P. (Emergency Action Plan) in the case of an emergency. (Pick a parent in the stands that you trust to help with this procedure).
- Ensure that the required accident/injury reports (OMHA injury report) are completed and is responsible for certifying that injured Players only return to play with the appropriate signed medical authorization.
- Identify and Report potentially dangerous situations that may lead to injury (i.e. ice surface, boards, dressing rooms).
- Establish open communications between Players, coaches and parents.
- Strive to improve their knowledge in the field of Athletic/Hockey training.
- Promote healthy living standards.
- Set a sportsmanlike example for the Players, coaches and fans.
- Never leave an injured Player alone.
- Establish an emergency medical plan in the event of an injured player requiring medical attention.

Hockey Canada Risk and Safety Program

The [Hockey Canada Risk and Safety Program](#) is a development initiative of Hockey Canada and is a volunteer safety program. The Hockey Canada web site has a wealth of information on this subject and is a must have resource for all trainers and volunteers involved in hockey safety.

Downloads and Forms

The Hockey Canada [Safety Requires Teamwork Information Guide](#) is an information guide to Hockey Canada's Risk Management and National Insurance Programs. The Hockey Canada **Injury Report** form is available in this guide for trainers.

Every team should have an Emergency Action Plan. Trainers are responsible to have an Emergency Action Plan for their team. Hockey Canada's provides some guidelines for an [Emergency Action Plan](#).

Trainers should also review the Hockey Canada [Safety Person Tips Guide](#) available from the Hockey Canada web site.

HMMHA Injury Procedures

The HMMHA has a procedure to be followed by Trainers when documenting an injury which requires the removal of a player from play. See the Injury Reports procedure section in this handbook.

Medical Information Sheets

Every participant should complete a "Medical Information Sheet", copies for completion can be found on the [HMMH Website](#).

Two copies should be created and kept safely in folders, one for the trainer and one for the coach. The "Medical Information Sheet" is provided by Hockey Canada. See Appendix A.

Trainer Kit and First Aid Supplies

The Trainer of each team will provide a properly maintained trainer's kit and first aid supplies at all times during the season. If the trainer does not have a kit the team can purchase one within their budget. A list of common supplies can be found on [HHMH Website](#).

Emergency Action Plan for Hockey

Person in Charge

- Most qualified person available with training in first aid and emergency control.
- 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
- Know the directions to arena
- Know the best route in and out of arena for ambulance crew
- Ensure proper room to work for person in charge and ambulance crew
- Discuss emergency action plan with: Arena staff, Officials, Opponents
- Ensure that the route for the ambulance crew is clear and available
- Seek highly trained medical personnel (i.e., MD, nurse) if requested by person in charge
- Control Person

Equipment Locations

Locate and identify areas on rink map. (i.e., first aid room, defibrillator, route for ambulance crew, land line telephone access, address of arena for dispatch, etc...)

Emergency Telephone Numbers

- Emergency
- Ambulance
- Fire Department
- Hospital
- Police
- General

Procedure for Reporting an Injury

Each player and coaching staff member on the team must have a completed a Medical Information Sheet and the trainer should have the forms accessible at every team function, this includes but is not limited to games, practices, dryland and tournaments.

A HHMH Injury Report Form must be completed (online form accessed on the HHMH Website) ASAP when any Player or Team Official is injured. This includes parent reported injuries resulting in loss of practice/game etc.

Team Official includes:

- Referee
- Timekeeper
- Coach
- Assistant Coach
- Manager
- Trainer

Once the online form is submitted, the Head Trainer will review each submission and if any further forms are to be filled out, they will be notified to such requirements via email. The email will contain instructions and checklist for completion. **It is imperative that the online form is completed in a timely manner (Expectation is 24 hours from time of injury) to ensure that any potential insurance claims are dealt with appropriately.**

The Head Trainer will email the applicable Director, Rep Hockey in the following cases:

- If a Player or Team Official is injured during a game and misses more than one period.
- If a Player or Team Official is injured during a practice or other association-sanctioned function and requires medical attention.

- If a Player or Team Official reports an injury after the fact (e.g. player is injured during a game and continues play, however attends a doctor the next day for the injury).

Any Player returning from an injury **as outlined above** must present a doctor's letter* stating clearance to participate in minor hockey (with or without contact).

Any Team Official returning from injury must present a Doctor's letter stating clearance to participate in minor hockey in their previous capacity.

Any additional forms requested to be filled out by the Head Trainer in any of the above cases, will require that a copies be scanned and sent via email to the [Head Trainer](#).

See Appendix C for Process Map.

Concussion Awareness

The Four R's

1. Respect for all players, especially yourself
2. Read the [Concussion Card](#). (See Appendix B)
3. Recognize the symptoms of concussion
4. React to it

Prevention for Players

1. Respect all players, coaches and officials.
2. Make sure your hockey helmet fits and is fastened properly.
3. Be aware - play heads-up hockey.
4. Wear a properly fitted mouthguard.
5. Always use correct body checking techniques and never hit another player from behind or in the head.

ALERT - Repeat concussions can severely affect one's lifestyle. It is a Hockey Canada Policy not to send a player back on the ice unless that player has fully recovered

Safe Return to Play Policy

If during a game, practice or team event, a player sustains a direct or indirect injury, he/she is to be immediately removed from play. Trainers and coaches have the authority to make this decision.

Following the removal from play, any player suspected to have sustained a concussion or injury is to be assessed by a medical doctor, to determine the extent of the player's injury.

Players diagnosed with an injury should rest until they are symptom-free and should then begin a step symptom program, only after they are without symptoms for a 24 hour period.

A medical letter stating permission to participate is required prior to returning to practice.

Steps to return to play

1. Rest until asymptomatic
2. Non-checking training drills (if applicable) – requires medical clearance to skate
3. Full contact training with checking (if applicable) – requires medical clearance to engage in contact (for non-checking) and checking (for levels with checking)
4. On-Ice practice with team - requires medical clearance to practice
5. Return to game play - requires medical clearance to play

There should be a minimum 24 hours for each stage involved and the athlete should return to the rest stage should symptoms recur.

**FULL MEDICAL CLEARANCE IS
REQUIRED BEFORE RETURN TO PLAY**

Coach & Safety Person Protocol

1. Keep your concussion card handy.
2. During the pre-game talk, check and remind players of team attitude.
3. Discourage open-ice checks to the head.
4. In case of injury, check for symptoms of concussion/neck and spinal injuries.
5. Monitor the player for listed symptoms, if present remove the player from the game.
6. Permit the player to return to play only after medical clearance.
7. Instruct parents/guardians to inform medical personnel if it is a repeat concussion.

Appendix A – Player Medical Information Sheet

Source: Hockey Canada

[CLICK HERE FOR LINK TO FORM ONLINE](#)



MEDICAL INFORMATION SHEET

Name: _____

Date of birth: Day _____ Month _____ Year _____

Address: _____

Postal Code: _____

Telephone: (____) _____ Cell: (____) _____

Provincial Health Number (optional): _____

Parent/Guardian #1: Name _____

Business Phone Number: (____) _____

Parent/Guardian #2: Name _____

Business Phone Number: (____) _____

Alternate emergency contact (if parents are not available)

Name: _____

Relationship to Player: _____

Telephone: (____) _____ Cell: (____) _____

Doctor's Name: _____

Telephone: (____) _____

Dentist's Name: _____

Telephone: (____) _____

Date of last complete physical examination: _____

Before a player participates in a hockey program it is recommended that they have a medical and that they also have any medical condition or injury problem checked by their family physician

Please check the appropriate response and provide details below if you answer "Yes" to any of the questions.

- | | | |
|--|---|--|
| Yes <input type="checkbox"/> No <input type="checkbox"/> Medication | Yes <input type="checkbox"/> No <input type="checkbox"/> Asthma | Yes <input type="checkbox"/> No <input type="checkbox"/> Health problem that would interfere with participation on a hockey team |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Allergies | Yes <input type="checkbox"/> No <input type="checkbox"/> Trouble breathing during exercise | Yes <input type="checkbox"/> No <input type="checkbox"/> Has had an illness that lasted more than a week and required medical attention in the past year |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Previous history of concussions | Yes <input type="checkbox"/> No <input type="checkbox"/> Heart Condition | Yes <input type="checkbox"/> No <input type="checkbox"/> Has had injuries requiring medical attention in the past year |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Fainting or seizure during or after physical activity | Yes <input type="checkbox"/> No <input type="checkbox"/> Palpitations or Racing Heart | Yes <input type="checkbox"/> No <input type="checkbox"/> Been admitted to hospital in the last year |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Near fainting or Brownouts | Yes <input type="checkbox"/> No <input type="checkbox"/> Family history of heart disease | Yes <input type="checkbox"/> No <input type="checkbox"/> Surgery in the last year |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Seizures and/or epilepsy | Yes <input type="checkbox"/> No <input type="checkbox"/> Family history of unexpected death during physical activity | Yes <input type="checkbox"/> No <input type="checkbox"/> Presently injured
Injured body part: _____ |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Wears glasses | Yes <input type="checkbox"/> No <input type="checkbox"/> Family history of unexplained death of a young person | Yes <input type="checkbox"/> No <input type="checkbox"/> Vaccinations up to date
Date of last Tetanus Shot: _____ |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Are lenses shatterproof | Yes <input type="checkbox"/> No <input type="checkbox"/> Diabetes – Type 1 _____ Type 2 _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> Hepatitis B vaccination |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Wears contact lenses | Yes <input type="checkbox"/> No <input type="checkbox"/> Wears medical information bracelet/necklace
For what purpose? _____ | |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Wears dental appliance | | |
| Yes <input type="checkbox"/> No <input type="checkbox"/> Hearing problem | | |

Please give details if you answered "Yes" to any of the above. (Use separate sheet if necessary)

Medications: _____

Recent injuries: _____

Allergies: _____

Any information not covered above: _____

Medical conditions: _____

I understand that it is my responsibility to keep the team Safety Person advised of any change in the above information as soon as possible. In the event of a medical emergency and that no one can be contacted, team management will arrange to take my child to the hospital or a physician if deemed necessary. I hereby authorize the physician and nursing staff to undertake examination, investigation and necessary treatment of my child. I also authorize release of information to appropriate people (coach, physician) as deemed necessary.

Date: _____

Signature of Player: _____

Date: _____

Signature of Parent or Guardian: _____

Disclaimer: Personal information used, disclosed, secured or retained by Hockey Canada will be held solely for the purposes for which we collected it and in accordance with the National Privacy Principles contained in the Personal Information Protection and Electronic Documents Act as well as Hockey Canada's own Privacy Policy.

Appendix B – Concussion Awareness

Source: Hockey Canada

[LINK TO MOBILE APPS FOR CONCUSSION AWARENESS](#)

Search our applicable APP Stores

[LINK TO CONCUSSION CARD](#)

Hockey Canada / Parachute

Concussion Education and Awareness Program

Concussion in Sport

All players who experience a concussion must be seen by a physician as soon as possible. A concussion is a brain injury.

A concussion most often occurs without a loss of consciousness. However, a concussion may involve loss of consciousness.

How Concussions Happen

Any blow to the head, face, or neck or a blow to the body which causes a sudden jarring of the head and results in the brain knocking against the skull may cause a concussion.

Common Symptoms and Signs of Concussion

Symptoms and signs may have a delayed onset (may be worse later that day or even the next morning), so players should continue to be observed even after the initial symptoms and signs have returned to normal.

***A player may show any one or more of these symptoms or signs**

Symptoms

- Headache
- Dizziness
- Feeling dazed
- Seeing stars
- Sensitivity to light
- Ringing in ears
- Tiredness
- Nausea, vomiting
- Irritability
- Confusion, disorientation

Signs

- Poor balance or coordination
- Slow or slurred speech
- Poor concentration
- Delayed responses to questions
- Vacant stare
- Decreased playing ability
- Unusual emotions, personality change, and inappropriate behaviour
- Sleep disturbance

For a complete list of symptoms and signs, visit www.parachutecanada.org

Caution

All players must consult a physician when a concussion is suspected. Coaches, trainers/safety people, players and parents should not attempt to treat a concussion without a physician's involvement.

Initial Response to Loss of Consciousness

If there is loss of consciousness – Initiate Emergency Action Plan and call an ambulance. Assume possible neck injury. Continue to monitor airway, breathing and circulation.

Concussion – Key Steps

- Remove the player from the current game or practice
- Do not leave the player alone; monitor symptoms and signs
- Do not administer medication
- Inform the coach, parent or guardian about the injury
- The player should be evaluated by a medical doctor as soon as possible
- The player must not return to play in that game or practice, and must follow the 6-step return to play protocol



6 Step Return to Play

The return to play process is gradual, and begins 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, not necessarily when exercising!

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: Sport specific activities and training (e.g. skating).

Step 4: Drills without body contact. May add light resistance training and progress to heavier weights.

The time needed to progress from non-contact to contact exercise will vary with the severity of the concussion and the player. Go to step 5 after medical clearance. (reassessment and written note)

Step 5: Begin drills with body contact.

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

Note: Players should proceed through return to play steps only when they do not experience symptoms or signs and the physician has given clearance. Each step should be a minimum of one day. If symptoms or signs return, the player should return to step 1, and be re-evaluated by a physician.

Never return to play if symptoms persist!

Prevention Tips

Players

- Make sure your helmet fits snugly and that the strap is fastened
- Get a custom fitted mouth guard
- Respect other players
- No hits to the head
- No hits from behind
- Strong skill development

Coach/Trainer/Safety Person/Referee

- Eliminate all checks to the head
- Eliminate all hits from behind
- Recognize symptoms and signs of concussion
- Inform and educate players about the risks of concussion

Education Tips

www.hockeycanada.ca

See Smart Hockey Program at

www.parachutecanada.org

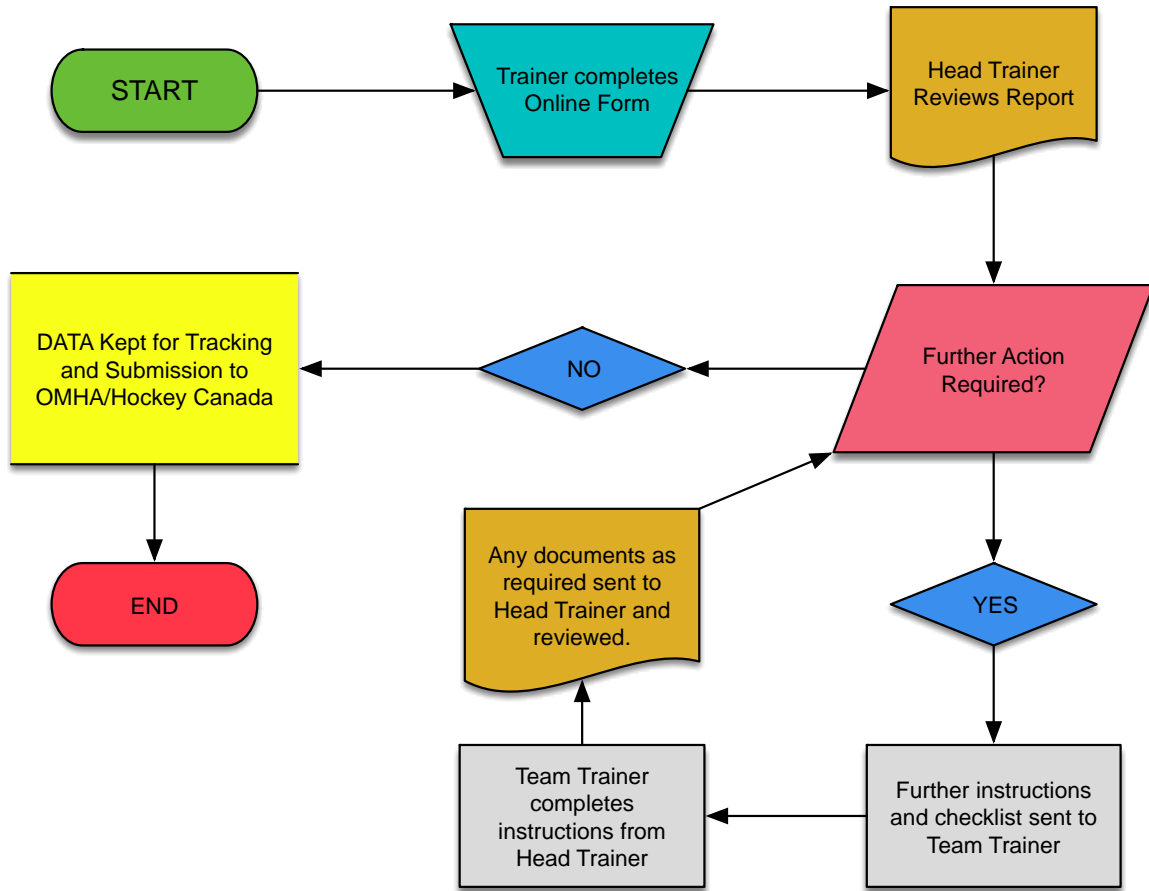
Dr. Tom Pashby Sport Safety Fund website

www.drpushby.ca

Drafted with the assistance of Parachute.

Revised May 2016. Item # 55711

Appendix C – Injury Report Process Map



Process Map for Trainer when Injury Occurs to Player or Team Official