



2025 TRAINER'S GUIDE

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

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1. Introduction:

On behalf of the Waverley Park Hawks Junior Football Club, we thank you for accepting the important role of Team Trainer for your child's team. The position of team trainer is critical in helping to ensure the welfare and safety of all participants during club games, and to ensure your team can field a team on game day.

The purpose of this Trainer's Guide is to provide you with all the relevant information you need to assist and enable you to perform the role. It outlines the responsibilities and essential duties of the role and how to report non-minor injuries as well as contact details of key people within the club.

2. 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.

3. Trainers Qualifications, duties and responsibilities:

3.1 Availability:

As stated in section 2.14.9 of the [SMJFL \(League\) 2024 Team Manager's Handbook](#), all Clubs must appoint a minimum of one (1) Trainer per team who holds a minimum qualification of Provide **First Aid** with an **up-to-date CPR component**.

The Team Trainer must have the availability to be present at all team matches including practice matches, home and away matches and finals.

Where one Trainer cannot make the commitment to meet this availability requirement, the team is required to have multiple Trainers.

Trainers must remain in the Team Bench area unless they are attending to an injured player on the field.

The role of the Water Carrier and the Trainer are NOT interchangeable.

3.2 Qualification Requirements:

(Updated March 2025)

Consistent with the [AFL National Community Football Policy Handbook](#) to become an AFL First Aider / Club Trainer, all volunteers must have:

- 1) Obtained a nationally accredited first aid and CPR qualification which is current and up-to-date and includes
 - a. HLTAID011 - Provide First Aid (3-Year update) and
 - b. HLTAID009 - Provide Cardiopulmonary Resuscitation (Annual update); and
- 2) Completed the AFL First Aid and Concussion Management online module within the previous 24 months

If a person has a current / valid Emergency Response Coordinator Certificate, this will also meet the standards of an AFL First Aider in 2025.

Medical Practitioners:

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.

3.3 First Aid Training:

If you do not have a current First Aid or up-to-date CPR, the Club will cover the cost of your First-aid training course, to meet your minimum qualifications.

Colmed is the club's preferred supplier for First Aid training in 2025.

To arrange training please contact Colmed directly to book a course. Advise them that you are from the Waverley Park Hawks, and they can invoice the Club directly.

Alternatively, if you pay for the course yourself, simply submit a receipt for the course to the Club Treasurer (Refer to Key Contacts pg 17) to request a reimbursement.

Once you have completed your training, please send a copy of your certificate to the Club Secretary (Refer to Key Contacts pg 17).

The Colmed Group contact details are provided below:

Head Office - Unit 10, 556 – 598 Princes Highway, Noble Park North VIC 3174

Phone: 1300 550 123 / operations@colmedgroup.com

www.colmedgroup.com / www.firstaidevents.com

Training Courses & Dates:

You can view upcoming First Aid (incl CPR) and ERC training dates at the link

View [First Aid and ERC Courses](#):

3.4 Working With Children's Check (WWCC):

All club Trainers must also hold a valid Working with Children's Check (WWCC).

If you do not have a current WWCC please apply for one via the following link, and please list the Waverley Park Hawks as an organisation that you will be volunteering for.

[Click here to learn how to apply for WWCC](#)

3.5 Registration as a Volunteer on PlayHQ:

All Trainers are also required to be registered as a Club Volunteer on the PlayHQ platform. Registering is simple and a Trainer can simply click on the link below to register and follow the online prompts.

[Click here to register on PlayHQ](#)

3.6 HeadFirst Concussion & Injury Reporting APP



The HeadFirst platform is a cloud-based reporting tool for sports clubs.

The tool replaces paper injury report forms and allows Trainers to report injuries and concussions back to the club officials.

The App also allows the Club to track injury types, monitor emerging trends like recurring injuries, export and analyse injury data, and to upload and view handbooks and policy documents.

HeadFirst can also be used to store existing medical conditions of their players, as provided by the parents / guardians, empowering trainers to make informed decision at time of injury.

The App was adopted by WPH Club in 2024 and all Team Trainers are required to download it onto their smartphones or tablets and to use the platform on game day for injury reporting and concussion management.

A User Guide for the HeadFirst App can be found in the HeadFirst Portal at this URL –


headfirstapp.com/club-portal-user-guide or [CLICK HERE](#) to view this resource.

3.7 Trainer's Essential Duties:

Pre-Game:

- a) Make yourself known to the opposition team's Trainer, the Ground Medic and/or Ground Manager (if applicable).
- b) Ensure you are familiar with the location of essential emergency equipment.
- c) Ensure you are familiar with the contents of the First Aid Kit and their purposes.
- d) Ensure the First Aid Kit is present, and appropriately stocked and topped up after items are consumed. (Refer to checklist in Appendix 1 / Contact Property Manager for Top up supplies).
- e) Ensure you have access to ice and know where it is located.
- f) Conduct pre-game check with players re: injury concerns and special requirements.
- g) Check that the stretcher, ambulance gate and Defibrillator are accessible.
- h) Provide any feedback to the coach on any individual player concerns.

During the Game:

- i) Assess injuries and if required, liaise with the home ground Trainer and/or appropriate club personnel.
- j) Where an injury has occurred, ensure an Injury Report is completed by the Ground Medic or the Club Trainer.
 - Use the HeadFirst App to submit an Injury Report 
 - If the HeadFirst App cannot be used, a paper report form can be found in Appendix 2, pg20. Copies of the injury report are available at the Club in the Columbia Park Trainer's Room.
 - [CLICK HERE](#) to download a copy of the Injury report form.
- k) Any injury reports to be given to Ambulance, GP or Hospital staff and a copy (photo OK) kept for the team officials / Club records.
- l) Provide feedback to the coach on any individual player injury concerns.

Post-Game:

- m) Diagnosis, management, rehabilitation advice for any injuries sustained.
- n) Provide feedback to the coach about the extent of injuries.
- o) Share and archive injury records as per club requirements.

4. Trainer Follow Up Procedures:

If you have a player transported by ambulance to hospital or refer a player to a medical practitioner, please contact the player's family to check on their welfare within 24 hours.

For serious injuries, where there may be significant non-Medicare out of pocket expenses, please make the family aware of the club's Personal Injury Insurance (pg14) and the procedure for lodging a claim. Alternatively, put them in contact with Club Secretary, email: secretary@wphawks.org.au.

For cases of suspected concussion, you will need to make the family aware of the requirement to obtain a medical clearance before they can return to training and/or playing.

A copy of the medical clearance should be attached to the relevant Injury Report and a copy provided to the club via the Club Secretary.

5. Game Day Ground Medics:

The Waverley Park Hawks have a contract with the Colmed Group to provide the Ground Medics at home all games.

All Colmed Ground Medics have been trained in First Aid with a CPR component, and (ERC) Emergency Response Controller training is also a skill requirement for these Medics.

The Colmed Ground Medic is the primary provider of first aid and treatment at a home game with the support of the Team Trainer.

The Ground Medic must be at the ground for the entirety of their allocated game/s and are expected to lead the player treatment and management of any serious injury. Should the Medic(s) for whatever reason have to leave the game, they MUST wait for a replacement Medic to arrive.

It is expected by our Club that the Ground Medic will locate themselves near the Coaches boxes at Columbia Park and Wellington Park grounds during the game.

6. South Metro Junior Football League (SMJFL):

Policy & By-Laws:

The SMJFL supports the ***Sports Trainers in Community Australian Football Policy*** which is available on the AFL Victoria website.

[View and download the Policy –](#)

6.1 Relevant SMJFL By-Law extracts:

Section 18 - Concussion:

18.1 Member Clubs shall comply with **concussion protocols** issued from time to time by the League. [\(Found in the Policies & Guidelines section of SMJFL website\).](#)

18.2 If a Player is deemed to be concussed on match day or at training, they shall not return to the field of play or training as per the concussion protocols and, in addition, following receipt of a doctor's certificate indicating they are fit to resume play and/or training.

Section 18 - Blood Rule:

19.1 Upon a Player being noticed by a Field 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 on any part of the Player's uniform), the Player may be interchanged back onto the ground. For clarity, the clock is not stopped due to the application of this By-law.

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.

Trainers:

20.16 As per the Sports Trainers in Community Football Policy, all Member or Participating 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.

20.17 It is recommended that a Venue Trainer (Ground Medic) is present at all matches. If there is no Venue Trainer (Ground Medic) with Emergency Response Coordinator (ERC) qualifications present, the home team Trainer for Under 13 and above age groups must also have completed ERC training.

(To be updated in 2025)

20.18 A Trainer appointed under By-law 20.16 must be present for the duration of all games in which the Trainer's team participates.

20.19 Each team must provide one first aid kit (including ice) for use by their team Trainer(s).

20.20 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.

20.21 If a Player is injured, a Venue Trainer or a second or third Trainer may enter the field of play. Only one 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.

7. 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 male groin area.

8. COVID Safety Protocols:

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 shown in below, further personal protective equipment may be used but is not compulsory.

Table 1: Conventional use¹

| 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 precautions² | 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 risk³ | 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 Level 2, 3 or 4 | ✓ 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://www2.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>

9. First Aid Kits & Stock Policies:

9.1 Team Kits:

Each team is allocated a fully stocked First Aid kit, where the stock is maintained by the Club Property Steward. Your Waverley Park Hawks Trainer's Kit will contain the items listed in the table shown in Appendix 1.

The Trainer is responsible for managing the First Aid Kit on game day and at training and for keeping track of the use of the contents and for requesting replenishments from the Property Steward.

9.2 Ground First Aid Kits:

Columbia Park and Wellington Park have a Ground First Aid Kit in case a player suffers an injury or a medical emergency during training at the ground.

The Ground's First Aid Kit contains all the essential kit items found in the Trainer's Game Day kits as well as a Ventolin and an EpiPen.

9.3 Ice & Ice Packs:

Your kit contains multiple rapid-activation ice packs however ice blocks are also available from the Trainer's room freezer at Columbia Park and the Canteen freezer at Wellington Park should you wish to use those as well or instead.

9.4 Rigid Sports Strapping Tape Policy:

The Club will supply 1-2 rolls of Rigid sports tape to be used for situations like taping fingers when hurt, as well as to assist to fix dressings and bandages. Rigid tape is available for top up when it is consumed for the purposes above.

The taping of shoulders, ankles and knees to prevent injuries and to provide support, is not a service that our trainers are generally trained for or qualified to perform and are not required to do so.

Players that have existing injuries that require special taping support, should seek professional advice. They are required to purchase their own strapping products and come to the game prepared with taping already applied.

Purposely designed ankle straps are available from physiotherapists and chemists and can provide useful game support.

Trainers should advise those players and their parents of the Club's policy as explained above.

9.5 Ventolin for Asthmatics:

Ventolin for asthmatics must be provided by the child / family. It is the responsibility of the parent / guardian to provide the trainer with a Ventolin supply (with their name on it) for the Trainer's First Aid Kit.

Please note that a Ventolin inhaler is present in the Ground First Aid Kit for use at Training in case the child forgets to bring it to training, and if the Trainer is not present at the training session.

9.6 EpiPens:

EpiPens are provided in the Ground First Aid Kits at Columbia and Wellington Park in case a player suffers an anaphylaxis event at team training.

There is also a training EpiPen in the kits for anyone that wants to practice delivering a dose.

If you use an EpiPen at training, please advise the Club Property Steward (refer Key Contacts) so that a replacement can be purchased.

Here is a link to a video showing how to use the brand of EpiPen.

For questions, advice or instructions on using an EpiPen, you may also contact the Club's Trainer's Advisor to request assistance. You can find their details in the Club Contacts table on page 17.

[Click here to view the EpiPen video.](#)



9.7 Kit Top-up Requests:

For first aid kit top-up requests or queries, please email Club Trainer's Coordinator, Paul Rice at - price@wphawks.org.au. Top-ups will be placed in your team pigeonhole at Columbia Park the earliest time before the next match.

10. Concussion Management:

It is important that all Trainers, team officials, players and parents understand the dangers of concussion and the importance of treating it properly and managing the return to play process.

We have a duty of care to ensure our players are safe when they play football with our Club. Our players are children, and their health and wellbeing must be the priority of the Club, the parents and the volunteers and so we use the statement -

“If in doubt, sit them out”

10.1 AFL Guidelines for Concussion Management:

[CLICK HERE](#) to enter the AFL website – AFL Community Concussion Guidelines.

You can view a helpful array of resources about concussion management on the Play AFL website. Here you can explore the detailed guidelines on managing sport related concussion in Australian Football with a special supplement for the management of concussion in children and adolescents.

Head impacts can be associated with serious and potentially fatal brain injuries. In the early stages of injury, it is often not clear whether you are dealing with a concussion or there is a more severe underlying structural head injury.

For this reason, the most important steps in initial management include:

- Recognising a suspected concussion
- Removing the player from the game
- Referring the player to a medical doctor for assessment.

Where there is no medical doctor present to assess the player, or the diagnosis of concussion cannot be ruled out at the time of injury, the player must NOT be allowed to return to play in the same match / training session.

Any player who has suffered a concussion or is suspected of having a concussion must be medically assessed as soon as possible.

There should be an accredited first aider at every game and the basic rules of first aid should be used when dealing with any player who is unconscious or injured.

The stages for Return to Play following concussion include:

- A brief period of relative rest (24-48 hours)
- A period of recovery
- A graded loading program ([CLICK HERE](#) to view) (NOTE - Players should not enter the graded loading program until they have recovered from their concussion)
- Medical clearance required for return to full contact training. Refer Appendix 3. ([CLICK HERE](#) to view).
- Unrestricted return to play.

Recovery means that all concussion-related symptoms and signs have fully resolved (for at least 24 hours) at rest and with activities of daily living, and they have successfully returned to work or school, without restrictions.

***IMPORTANT: The earliest that a player may return to play (once they have successfully completed a Graded return to play program and they have obtained medical clearance) is on the 21st day after the day on which the concussion was suffered.**

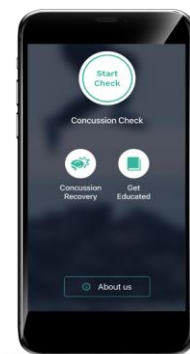
Concussion Tools

Tools such as the CRT6 Concussion Recognition Tool (extract below) or the HeadCheck APP, can be utilised on game day to help you identify a suspected concussion.

It is important to note however that brief sideline evaluation tools (such as HeadCheck or the Concussion Recognition Tool) are designed only to help identify a suspected concussion.

They are not meant to replace a comprehensive medical assessment and should never be used as a stand-alone tool for the management of concussion.

10.2 The Headcheck App:



HeadCheck is an evidence-based app developed by leading concussion experts from MCRI and the AFL. The app is a concussion diagnosis tool to help us recognise concussion early and manage recovery.

Trainers can utilise this App to:

- Concussion symptom assessment.
- Concussion management plan including daily symptoms check and personalised tasks.
- Alerts and education to aid recovery based on progress.

10.3 Concussion Recognition Tool CRT6 –

[CLICK HERE](#) to view and download the full CRT6 Concussion Recognition Tool

Recognise and Remove

Red Flags: CALL AN AMBULANCE

If **ANY** of the following signs are observed or complaints are reported after an impact to the head or body the athlete should be immediately removed from play/game/activity and transported for urgent medical care by a healthcare professional (HCP):

- Neck pain or tenderness
- Seizure, 'fits', or convulsion
- Loss of vision or double vision
- Loss of consciousness
- Increased confusion or deteriorating conscious state (becoming less responsive, drowsy)
- Weakness or numbness/tingling in more than one arm or leg
- Repeated Vomiting
- Severe or increasing headache
- Increasingly restless, agitated or combative
- Visible deformity of the skull

1: Visible Clues of Suspected Concussion

Visible clues that suggest concussion include:

- Loss of consciousness or responsiveness
- Lying motionless on the playing surface
- Falling unprotected to the playing surface
- Disorientation or confusion, staring or limited responsiveness, or an inability to respond appropriately to questions
- Dazed, blank, or vacant look
- Seizure, fits, or convulsions
- Slow to get up after a direct or indirect hit to the head
- Unsteady on feet / balance problems or falling over / poor coordination / wobbly
- Facial injury

2: Symptoms of Suspected Concussion

Physical Symptoms

Headache
"Pressure in head"
Balance problems
Nausea or vomiting
Drowsiness
Dizziness
Blurred vision
More sensitive to light
More sensitive to noise
Fatigue or low energy
"Don't feel right"
Neck Pain

Changes in Emotions

More emotional
More Irritable
Sadness
Nervous or anxious

Changes in Thinking

Difficulty concentrating
Difficulty remembering
Feeling slowed down
Feeling like "in a fog"

Remember, symptoms may develop over minutes or hours following a head injury.

3: Awareness

(Modify each question appropriately for each sport and age of athlete)

Failure to answer any of these questions correctly may suggest a concussion:

"Where are we today?"

"What event were you doing?"

"Who scored last in this game?"

"What team did you play last week/game?"

"Did your team win the last game?"

ANY ATHLETE WITH A SUSPECTED CONCUSSION SHOULD BE IMMEDIATELY REMOVED FROM PRACTICE OR PLAY AND SHOULD NOT RETURN TO ACTIVITY UNTIL ASSESSED MEDICALLY, EVEN IF THE SYMPTOMS RESOLVE

10.4 Concussion Management Resources:

| Document / Resource | Location |
|--|----------------------|
| AIS Concussion & Brain Health Position Statement 2024 | LINK |
| 2024 - The Management of Sport-Related Concussion in Australian Football | LINK |
| CRT6 Concussion Recognition Tool | LINK |
| Sport Concussion Assessment Tool For Adolescents (13 years +) & Adults for use by medical doctors only | LINK |
| AFL Stages of Return to Play post-concussion | LINK |
| AFL Medical Clearance Form | LINK |

10.5 Trainer's Resources on the Waverley Park Hawks website:

Resources relating to concussion can also be found on the Waverley Park Hawks Website on the Trainer's Information page:

- The resources include:
- AIS – Concussion and Brain Health Position Statement 2024
- AFL – Management of Sport Related Concussion in Australian Football Mar-24
- Match Day Head Injury Assessment Form (12 years and under / 13 years and above)
- AFL - Concussion – Four Stages of Graded Return To Play
- AFL – Concussion Medical Clearance Form 2024
- CRT6 Concussion Recognition Tool

[CLICK HERE](#) to view the resource page for Trainers

11. Club Injury Insurance

All members of the Waverley Park Hawks are covered for Personal Injury through this Programme which is provided by Marsh Personal Injury Policy.

The Personal Injury component of the Programme provides partial reimbursement of non-Medicare medical benefits such as ambulance, physiotherapist, and dental. The Programme offers standard Bronze level of cover to all affiliated clubs with an option to upgrade to a higher level of cover with increased benefits and reimbursement of non-Medicare expenses.

- **National Risk Protection Program - AFL community players:**

[Learn more about the insurance cover available to AFL community players at club or association level.](#)

- Marsh Sports Claiming – Online Insurance Application - [View Page](#)
- [AFL club Help Risk Management & Insurance](#)

12. Key Emergency Response Equipment / Ground Set Up:

12.1 Ambulance Access:

Each ground has gated access for ambulances and emergency response vehicles.

The team hosting the first game at one of the club's home venues is responsible for enabling Emergency Access to the Ground as part of the ground setup.

Before the first game at the ground:

- The ambulance gates must be unlocked and opened.
- Cones / witches' hats placed in front of gates to prevent cars blocking ambulance access.

Trainers must check that this has been done for the game they are presiding over.

12.2 Stretchers:

Each ground has a stretcher for use when a player needs to be moved safely from a ground. The location of the stretcher at each ground is shown in the "Location of Key Equipment" table.

Before the first game the stretcher must be moved from its storage to a location between the two coach's boxes.

Trainers must check that this has been done for the game they are presiding over.

12.3 Defibrillators:

Each ground has an emergency response Defibrillator (AED) for delivering an electrical shock to a patient in the event of a sudden cardiac arrest.

The Defibrillators are stored in an AED cupboard inside the club rooms and the specific location of the Defibrillator at each ground is shown in the "Location of Key Equipment" table below.

Please familiarise yourself with the location of the device so you can locate it swiftly in the event of an emergency.

13. Emergency Management & Locations:

- Call for ambulance on 000
- Provide ground location as below:

| WPH Ground | |
|-------------------------------------|-------------------------------------|
| Columbia Park | Wellington Reserve |
| Columbia Drive Wheelers Hill | 36-42 Mackie Road, Mulgrave |
| Nearest main road: Jells Road | Nearest major road: Springvale Road |
| Nearest intersection: Phoenix Drive | Nearest intersection: Suva Street |

14. Location of Key Equipment:

| Emergency & First Aid Equipment / Access / Supplies | WPH Ground | |
|---|--|--|
| | Columbia Park | Wellington Park |
| Ambulance Access | To the left of the Western end goals. Entry via car park from Columbia Drive Wheelers Hill | To the left of the Western end goals. Entry via the main car park accessed from Mackie Road Mulgrave |
| Ground First Aid Kits for Training | Trainer's Room Shelf | Canteen Shelf near entry |
| Defibrillator | Trainer's Room wall near entry | Home team club room near steps |
| Stretcher | Trainer's Room | Home team club room near canteen entry |
| Ice / Ice Packs | Bar freezer / Fridge-freezer Trainer's Room | Canteen Fridge-Freezer |

15. SMJFL– Cabrini Hospital Discount:

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.

16. Location of closest Hospitals:

Monash Medical Centre (Open 24 hours)

Address: 246 Clayton Rd, Clayton VIC 3168

Phone: (03) 9594 6666

Mulgrave Private Hospital (Open 24 hours)

Address: 48 Blanton Dr, Mulgrave VIC 3170

Phone: (03) 9790 9333

Dandenong Hospital (Open 24 hours)

Address: 135 David St, Dandenong VIC 3175

Phone: (03) 9554 1000

17. Location of closest Medical Centres:

Doctors at Brandon Park

Sunday 9am – 3.30pm

Shop 024, Brandon Park Shopping Center, Wheelers Hill 3150

(03) 9574 7932

Brandon Park Medical Centre:

Sunday 9am - 3pm

Shop 116, Brandon Park Shopping Centre Wheelers Hill VIC 3150

Phone (03) 9560 4455

Valewood Medical Clinic Mulgrave:

Sunday 10am - 2pm

Address: 1 Wanda Street (Cnr Wellington Rd), Mulgrave Victoria 3170

Phone (03) 9560 6655

United Medical Centre Mulgrave:

Sunday 9am - 12pm

837 Springvale Rd, Mulgrave VIC 3170 – Phone (03) 9132 5111

18. Key Club Contacts:

| Position | Name | Contact Details |
|--|---------------------|--------------------------|
| Club President | Michael Mastromanno | president@wphawks.org.au |
| Club Treasurer | Bill Valavanis | treasurer@wphawks.org.au |
| Club Secretary | De'arne Whitfield | secretary@wphawks.org.au |
| Team Managers Co-ordinator | Amy Hipwell | a.hipwell@wphawks.org.au |
| Trainer's Coordinator & Trainer's supplies | Paul Rice | price@wphawks.org.au |

19. Helpful Trainer Resources:

19.1 SMJFL By-Laws:

SMJFL By-Laws can be found under Rules, By-Laws, and Policies on the SMJFL website:

www.smjfl.com.au/rules-and-by-laws

19.2 AFL Club Help:

AFL Club Help is a resource with everything a Club needs to help manage and grow the club, as well as support your invaluable people. www.afl.com.au/clubhelp

The following list of resources can be found on the AFL Community Club website. Click on the listed topic to view the webpage.

- [Sports Trainers / First Aid](#)
- Player Welfare
 - [Concussion management](#)
 - [Gender Diversity](#)
 - [Respect and Responsibility](#)
 - [Mental Health and wellbeing](#)

1. Appendix 1 – First Aid Kit Contents:

The following checklist is provided as a guide of what the Trainer's first aid kit should include.

Please familiarise yourself with the contents of your kit and the purpose of the contents so that you are prepared to use them if required.

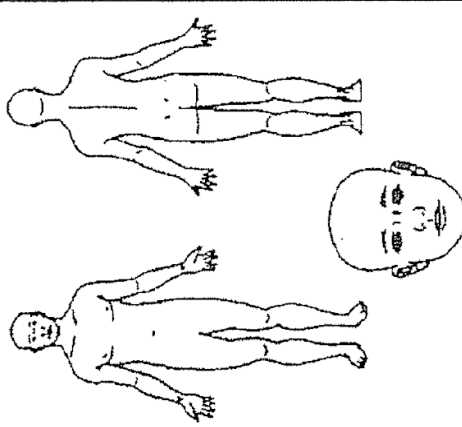
Please contact the Property Steward by email to request kit top ups.

| | |
|--|---|
| First Aid Kit Bum Bag | Roll of Rigid Sports Tape |
| Cloth Towel | Alcohol Disinfectant Swabs |
| Saline Wash Ampules | Roll Paper Tape |
| Bottle of Sanitiser | Triangular Bandage |
| Ice Packs | Eye Wound Pads |
| Note Pad | Steri-strips / Wound Closure strips |
| Scissors & Tweezers | Cotton Crepe 7.5cm |
| Latex Gloves | Bandage |
| Tissues Small Pack | Selection of Non-adhesive dressings and Dressing Pads |
| Emergency Foil Thermal Blanket | Safety Pins |
| Band Aids Pack | Insulation Tape |
| Pack - Eye pads, Cotton buds / Nose buds | CPR Face shield |
| Blood Tissue | Freezer Bags for Ice |

2. Appendix 2 – Injury Reporting Form

INJURY REPORTING FORM

Name: _____ Initials: _____ Position: _____ Circle _____ Player/Umpire/Coach/Spectator _____
 Team: _____ Grade: _____ DOB: ____/____/____ Gender: M ☐ F ☐ Venue/area at which injury occurred: _____

| | | | |
|---|---|---|---|
| <p>Date of Injury ____/____/____</p> <p>Type of activity at time of injury</p> <p><input type="checkbox"/> training/practice</p> <p><input type="checkbox"/> competition</p> <p><input type="checkbox"/> other _____</p> <p>Reason for Presentation</p> <p><input type="checkbox"/> new injury</p> <p><input type="checkbox"/> exacerbated/aggravated injury</p> <p><input type="checkbox"/> recurrent injury</p> <p><input type="checkbox"/> illness</p> <p><input type="checkbox"/> other _____</p> <p>Body Region Injured</p> <p>Tick or circle body part/s injured & name</p> <div style="text-align: center;">  </div> <p>Body part/s _____</p> | <p>Nature of Injury/Illness</p> <p><input type="checkbox"/> abrasion/graze</p> <p><input type="checkbox"/> open wound/laceration/cut</p> <p><input type="checkbox"/> bruise/contusion</p> <p><input type="checkbox"/> inflammation/swelling</p> <p><input type="checkbox"/> fracture (including suspected)</p> <p><input type="checkbox"/> dislocation/subluxation</p> <p><input type="checkbox"/> sprain eg ligament tear</p> <p><input type="checkbox"/> strain eg muscle tear</p> <p><input type="checkbox"/> overuse injury to muscle or tendon</p> <p><input type="checkbox"/> blisters</p> <p><input type="checkbox"/> concussion</p> <p><input type="checkbox"/> cardiac problem</p> <p><input type="checkbox"/> respiratory problem</p> <p><input type="checkbox"/> loss of consciousness</p> <p><input type="checkbox"/> unspecified medical condition</p> <p><input type="checkbox"/> other _____</p> <p>Provisional diagnosis/es _____</p> <p>CAUSE OF INJURY</p> <p>Mechanism of Injury</p> <p><input type="checkbox"/> struck by other player</p> <p><input type="checkbox"/> struck by ball (eg dislocated finger)</p> <p><input type="checkbox"/> collision with other player/referee</p> <p><input type="checkbox"/> collision with fixed object (goal post)</p> <p><input type="checkbox"/> fall/stumble on same level</p> <p><input type="checkbox"/> jumping</p> <p><input type="checkbox"/> landing from jump</p> <p><input type="checkbox"/> slip/trip</p> <p><input type="checkbox"/> twisting to pass or accelerate</p> <p><input type="checkbox"/> overexertion (eg muscle tear)</p> <p><input type="checkbox"/> overuse</p> <p><input type="checkbox"/> temperature related eg heat stress</p> <p><input type="checkbox"/> other _____</p> | <p>Explain exactly how the incident occurred</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Were there any contributing factors to the incident, unsuitable footwear, playing surface, equipment, foul play?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Protective Equipment</p> <p>Was protective equipment worn on the injured body part? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If yes, what type eg mouthguard, ankle brace, taping. _____</p> <p>Initial Treatment</p> <p><input type="checkbox"/> none given (not required)</p> <p><input type="checkbox"/> RICER <input type="checkbox"/> dressing</p> <p><input type="checkbox"/> sling, splint <input type="checkbox"/> crutches</p> <p><input type="checkbox"/> massage <input type="checkbox"/> manual therapy</p> <p><input type="checkbox"/> CPR <input type="checkbox"/> stretch/exercises</p> <p><input type="checkbox"/> strapping/taping only</p> <p><input type="checkbox"/> none given - referred elsewhere</p> <p><input type="checkbox"/> other _____</p> | <p>Advice Given</p> <p><input type="checkbox"/> immediate return unrestricted activity</p> <p><input type="checkbox"/> able to return with restriction</p> <p><input type="checkbox"/> unable to return at present time</p> <p>Referral</p> <p><input type="checkbox"/> no referral</p> <p><input type="checkbox"/> medical practitioner</p> <p><input type="checkbox"/> physiotherapist</p> <p><input type="checkbox"/> chiropractor or other professional</p> <p><input type="checkbox"/> ambulance transport</p> <p><input type="checkbox"/> hospital</p> <p><input type="checkbox"/> other _____</p> <p>Provisional severity assessment</p> <p><input type="checkbox"/> mild (1-7 days modified activity)</p> <p><input type="checkbox"/> moderate (8-21 days modified activity)</p> <p><input type="checkbox"/> severe (>21 days modified or lost)</p> <p>Treating person</p> <p><input type="checkbox"/> medical practitioner</p> <p><input type="checkbox"/> Emergency Medical Technician (EMT)</p> <p><input type="checkbox"/> physiotherapist</p> <p><input type="checkbox"/> nurse</p> <p><input type="checkbox"/> sports trainer</p> <p><input type="checkbox"/> other _____</p> <p>Signature of treating person</p> <p>_____</p> <p>Today's Date: ____/____/____</p> |
|---|---|---|---|

3. Appendix 3 – Medical Clearance Form

MEDICAL CLEARANCE FORM

RETURN TO PLAY CLEARANCE FORM



PLAYER DETAILS

| | |
|-------------|--|
| PLAYER NAME | |
| PLAYER DOB | |
| CLUB | |

The player (or parent / guardian on behalf of their child) must complete the declaration and take the form to a medical doctor to receive medical clearance before returning to full contact training or playing Australian Football.

The player (or parent / guardian on behalf of their child) must return the completed and signed form to their club, who may retain a copy and provide it to the league if requested.

PLAYER DECLARATION

| | | | |
|---|--|--|--|
| I (or my child if applicable) sustained a concussion on | | | |
|---|--|--|--|

I (or my child if applicable) have successfully returned to school/study/work (if applicable) without any issues.

I (or my child if applicable) have progressed through all of the stages of the AFL Concussion Management Protocol (i.e. 1. Relative Rest, 2. Recovery and 3. Graded Loading Program) and have had no symptoms since entering the Graded Loading Program.

| | |
|------------------|------|
| PLAYER SIGNATURE | DATE |
|------------------|------|

(or parent / guardian if Player 18 or under)

MEDICAL PRACTITIONER CERTIFICATION

| | | | | | |
|------------|--|-------------|--|--|--|
| I assessed | | (player) on | | | |
|------------|--|-------------|--|--|--|

Based on the information provided to me, and my clinical assessment, I can confirm that the player has recovered from their concussion (including full resolution of concussion-related symptoms and signs, return to work/study) and has completed a graded loading program without any recurrence of symptoms or signs.

I understand that the earliest that a player can return to play (following successful completion of a graded loading program and with medical clearance) is on the 21st day after a concussion, where the day of concussion is designated day "0".

I understand that a more conservative approach and specialist review may be required in the following:

- A second concussion within the same season (or three concussions within the previous 12 months).
- An apparent lower or reducing threshold for concussion (whereby the player appears to sustain a concussion or increasing symptoms with reduced force of head impact).
- Failure to progress through their return-to-play program due to a recurrence or persistence of symptoms, or
- Self-reported concerns with brain function.

In my opinion, the player is now medically fit to return to full contact training. If they complete full contact training without any issues or concussion symptoms, they can return to playing Australian Football.

| | |
|-------------|------------|
| SIGNATURE | DATE |
| DOCTOR NAME | PROVIDER # |