
IRONSIDES RUGBY CLUB FIRST AID ARRANGEMENTS AND EMERGENCY PROCEDURES

FIRST AID POLICY &
PROCEDURES



INTRODUCTION

- Clubs and all organisers of rugby activities have a responsibility towards the health and safety of players, staff and volunteers. Measures should be in place to include at least training and first aid provision. Equipment should be in place to ensure that rugby union is delivered to the highest standards in a safe and enjoyable environment.
- As set out in Regulation 9, a first aid specific risk assessment must be completed to ensure there is an appropriate level of immediate care and/or first aid cover, and equipment provided for that rugby activity.
- In respect of contact activity in the age grade game clubs, CBs and those involved in arranging any rugby activity must comply with the First Aid/Immediate care provision standards, Unless it is identified through the risk assessment that a different level of first aid provision is acceptable.
- For the 2022-23 season, within the adult game the provision level remains as guidelines, with the intention to introduce them as standards in the 2023-24 season.
- This document is part of the [RugbySafe](#) Toolkits, a series of digital resources designed to provide information and guidance on the different topics and programmes covering player welfare in rugby union.

GENERAL INFORMATION

- This document provides information on the first aid and immediate care provision standards (FA/IC standards) for all age grade rugby and adult community rugby. They exclude the Premiership, Championship, Women's Premier 15s and BUCS Super Rugby teams, all of whom have competition specific provision FA/IC standards for immediate care and minimum medical standards.
- The standards set out in this document are specific to the requirements for on-field / pitch-side rugby activity (training sessions and matches) only. Off-field first aid provision should be determined as part of a general risk assessment and will be appropriate to each club's requirements.
- The standards set out in this document are the minimum FA/IC pitch-side provision required as part of Regulation 9 (Player Safety). They set out the first aid and immediate care provision for the recognition, assessment and immediate management of potential life and limb threatening injuries during organised training and matches only. All other medical support or provision such as therapist led prehabilitation and rehabilitation, strapping, soft tissue massage and the treatment of potential non-life and limb threatening and musculoskeletal injuries is outside the scope of this document.
- Any organisation and/or practitioner providing additional provision should be appropriately qualified and insured.
- Clubs and other rugby activity providers with employees will likely fall under the Health and Safety (First Aid) Regulations 1981 (SI 1982 No 917) and will need to refer to these for minimum qualification/training standards.

REGULATION 9 (PLAYER SAFETY)

- RFU Regulation 9 (Player Safety) states:
9.3 All clubs and those involved in arranging any rugby activity:
 - a. must complete a risk assessment and ensure there is an appropriate level of immediate care and/or first aid cover, and equipment provided for that rugby activity as determined by such risk assessment.
 - b. must have access to a telephone to ensure that the emergency services can be contacted immediately when needed and ensure there is clear vehicular access for an ambulance or other emergency vehicle; and
 - c. must comply with the RugbySafe First Aid and Immediate Care Provision Standards.
- For the avoidance of doubt, Regulation 9.3(c) is a mandatory requirement where non-compliance will result in disciplinary action
- USEFUL INFORMATION AND LINKS - To read the full version of Regulation 9 (Player Safety) go to the [RFU Regulations page](#).

MEDICAL EMERGENCY ACTION PLAN (MEAP)

- Clubs and rugby activity providers should have a Medical Emergency Action Plan (MEAP) in place to identify needs and protocols in an emergency situation.
- The MEAP should include ensuring Ambulance access is available and access points are kept free of parked vehicles or other obstruction at all times.
- The MEAP should be shared with all relevant individuals such as coaches and team managers.
- More information on the MEAP including a template is available in the [RugbySafe Essential Guides, Forms and Templates Toolkit](#).

WHAT IS AN EMERGENCY FIRST AIDER (EFA) IN RUGBY?

An EFA is an appointed individual who has a minimum Level 3 First Aid Qualification.

EFA's are trained to:

- > Take charge when someone is injured or ill, including calling an ambulance if required
- > Provide emergency first aid to injured or ill persons until more expert help arrives;
- > Look after the first aid equipment, e.g. restocking the first aid box.

They should not attempt to give first aid for which they have not been trained.

Ideally the EFA should be a dedicated role, i.e., the individual is acting solely as the first aider and does not have other roles, e.g. coach.

An EFA's responsibility should end when either:

- > The EFA and player agree that the player is in a fit state to re-join the training session or match.
- > An Age Grade player is handed over to their parent(s), who are appropriately informed of injury/incident and if seeking further treatment is recommended.
- > An adult player is deemed safe to leave the club/venue, having discussed the injury/incident with the EFA and if seeking further treatment is recommended.
- > The player is handed over to the ambulance paramedic crew.

EFA (PITCH-SIDE)

The role and responsibilities of the EFA at training and matches will depend on the circumstances. Clubs and other rugby activity providers should ensure that all appointed EFAs for each training session and match are briefed appropriately and have a clear understanding of their role and responsibilities.

The role and responsibilities of an EFA (pitch-side) should include:

1. Being pitch-side and ready to assess and manage any incidents/ injuries immediately
2. Having their own allocated fully stocked appropriate pitch-side first aid kit.
3. Being familiar with the club/venue Medical Emergency Action Plan for the venue.
4. Ensuring they complete all injury/incident report forms are appropriate.

TRAINING REQUIRED TO BE AN EFA IN RUGBY

The minimum qualification for an EFA involved in rugby is a Level 3 First Aid Qualification (based on the Regulated Qualifications Framework (RQF)), e.g. Emergency First Aid in Rugby Union or Emergency First Aid at Work.

The RFU's Level 3 Emergency First Aid in Rugby Union (EFARU) course is a rugby-specific first aid course. The EFARU is on the RQF, is awarded by 1st4sport Qualifications and in common with many other First Aid qualifications is valid for three years.

The EFARU course awards a qualification that is transferable to the workplace and/or other sports.

Other Level 3 First Aid qualifications are recognised for EFAs covering rugby activity. If selecting an alternative Level 3 qualification, it should meet the minimum requirements:

- > Courses of this level should take a minimum of 6.5 learning hours (usually a one-day course).
- > Be recognised on the RQF and acknowledged with a certificate from the recognised awarding body.
- > The assessment criteria should be competency-based.
- > All courses should have a quality assurance process.
- > The course should cover both more common rugby injuries (such as concussion) and rare but serious injuries (such as spinal injury) in sufficient detail.

Any coach / first aider wishing to attend to either obtain or renew their First Aid qualification should contact first.aid@ironsidesrugby.com.

Anyone wishing to volunteer to be a club First Aider, needs to hold a valid DBS / CRB certificate (or complete the DBS application with the Club Safeguarding Officer), and a valid Emergency First Aid at Work certificate (or higher). This can be obtained either from an external source (copy of certificate must be provided), or by attending a Level 3 First Aid course.

IMMEDIATE CARE - WHAT IS AN IMMEDIATE CARE PRACTITIONER (ICP) IN RUGBY?

- Immediate Care Practitioners are Health Care Professionals (see Health Care Professional and Allied Health Care Professional Descriptors for examples of role descriptors and requirements) who have undertaken specific training to allow them to provide immediate care in the pre-hospital sports/rugby setting.
- For the avoidance of doubt, hospital based Advanced Trauma Life Support (ATLS) or Advanced Life Support (ALS) courses do not meet these standards. It is the satisfactory completion of endorsed immediate care training course that determines the suitability of an individual to work in this area and not their health care practitioner training.
- Practitioners/Therapists/HCPs should be able to provide evidence of registration with, or membership of, their relevant regulatory body or society to help in this process.
- These individuals will have their own insurance arrangements as a requirement of their regulating body. Below the elite level of sport, such insurance will usually be provided at no additional cost to them, as long as they have the appropriate training and experience.
- Clubs and other rugby activity organisers may want to consider having a formal agreement that covers specific responsibilities and provides assurance that the individual has the relevant qualifications, experience and insurance to provide provision as an ICP.

An ICP's responsibility should end when either:

- > The ICP and player agree that the player is in a fit state to re-join the training session or match.
- > An Age Grade player is handed over to their parent(s), who are appropriately informed of injury/incident and if seeking further treatment is recommended.
- > An adult player is deemed safe to leave the club/venue, having discussed the injury/incident with the ICP and if seeking further treatment is recommended.
- > The player is handed over to the ambulance paramedic crew.

ICP ROLE AND RESPONSIBILITIES

The role and responsibilities of the ICP will depend on the circumstances, e.g. they are working regularly with a club, or they are providing provision for a one-off event.

General role and responsibilities of an ICP working with a rugby club may include:

- > Clinical management and clinical governance responsibility for immediate care provision on match days and training to the participating teams and officials.
- > Lead the pre-event medical briefing with participating team medical staff and match officials.
- > Coordination with ambulance service provider and receiving hospital to ensure the safe transfer to the appropriate hospital of players requiring assessment in accident and emergency and/or admission to hospital.
- > Ensuring that the venue medical requirements are met.

ICP (PITCH-SIDE)

Clubs and other rugby activity providers should ensure that all appointed ICPs for each training session and match are briefed appropriately and have a clear understanding of their role and responsibilities.

The role and responsibilities of an ICP (pitch-side) should include:

1. Being pitch-side and ready to assess and manage any incidents/ injuries immediately.
2. Having their own allocated fully stocked Immediate Care/Trauma kit appropriate to the level of training (e.g. PHICIS Level 2).
3. Being familiar with the club/venue Medical Emergency Action Plan for the venue.
4. Ensuring they complete all injury/incident report forms are appropriate.

INJURY REPORTING

- Clubs and rugby activity providers should have a process for recording incidents and injuries that require first aid attention. Every first aider should be made aware of the process/ have access to ensure all applicable incidents /injuries are recorded appropriately. The process must be GDPR compliant, with all records stored appropriately and securely.
- The Ironsides Rugby Club have a contract with [Return 2 Play](https://www.return2play.org.uk) to provide an incident report platform that provides a quick and efficient system to ensure injuries and incidents both on and off the pitch are recorded and maintained in a secure and appropriate manner. <https://www.return2play.org.uk>. ALL injuries including concussions and suspected concussions must be reported through the Return 2 Play platform within 24hr of the incident taking place.
- Clubs and rugby activity providers need to be aware of what injuries should be reported to the RFU. It is crucial that all reportable injury events are submitted to the RFU in order for the appropriate support to be put in place. Reportable injury events are defined as:
 - > An injury which results in the player being admitted to a hospital (this does not include those that attend an Accident or Emergency Department and are allowed home from there).
 - > Deaths which occur during or within six hours of a game finishing.
 - > Clubs and schools are also required to report injuries in which artificial grass pitches or equipment such as sports goggles are involved.
- Visit the [RugbySafe Injury Reporting & Incident Recording Toolkit](#) for more information and for the accident reporting forms.

HEADCASES: CONCUSSION AWARENESS

Clubs and rugby activity providers should ensure that all coaches, match officials, players and parents are aware of the [RFU's HEADCASE concussion guidelines](#).

The [HEADCASE module](#) is a free online training module that takes approx. 30 minutes to complete and provides some key information on what to look out for and how to manage a potential concussion.

Any player with a suspected concussion must be removed from play immediately and not return to the game. **"If in doubt, sit them out"**. They must then undertake a minimum rest period as stated and follow the appropriate Return to Play Programme (GRPT). Concussions and suspected concussions must be reported through the [Return 2 Play](#) platform within 24hr of the incident taking place. [Return 2 Play](#) concussion specialist will guide the injured player through GRTP. Players will need to get cleared by the R2P medical team to be able to attend training/matches with Ironsides Rugby.

Clubs should have a process in place to ensure that parents are informed if their child is suspected of suffering from concussion. This is done through the [Return 2 Play](#) platform. Parents should be asked to inform the school/college if their child has a suspected concussion as the Return to Play Programme may affect their academic studies and other activities.

More information, including the concussion management guidelines, resources and the online awareness modules is available on the [HEADCASE](#) webpage.

FIRST AID / IMMEDIATE CARE EQUIPMENT

- Clubs and rugby activity providers should:
 - > Have a match-day centrally dedicated first aid contact point that is easily recognisable and accessible e.g. first aid room or gazebo/tent.
 - > Provide each EFA with a fully stocked first aid kit, as well as a separate club/central fully stocked first aid/immediate care kit.
 - > Consider the need and practicalities of an allocated first aid room that is set up/ used specifically for FA/IC treatment.
 - > Consider the need and practicalities for any other additional equipment e.g. Automated External Defibrillator(s) (AED) and where appropriate have a process in place for the storage, usage and maintenance as appropriate.
- More information on first aid equipment is available in the [RugbySafe Essential Guides, Forms and Templates Toolkit](#).

FIRST AID EQUIPMENT

The following is a recommended list of contents for the pitch-side and clubhouse first aid kits. Quantities will vary depending on need. The kits should be checked regularly and re-stocked as required.

FIRST AID KIT CONTENTS

Antibacterial hand gel, Single use triangular bandages, Antiseptic wipes, Sterile eye Pads, Disposable gloves, Sterile Water Pods, Adhesive plasters (assorted sizes), Resuscitation aids (Face Shields and/or Pocket Mask), Adhesive & non-adhesive bandages (assorted sizes), Adhesive Tape (assorted sizes), Tough cut scissors/shears, Micropore Tape, Sterile wound dressings (individually wrapped, assorted sizes), Safety pins, Non-Woven Swabs (assorted sizes), Emergency foil blanket or Blizzard Blanket, Sterile wound closure strips (assorted sizes), Clinical Waste bag, Blister Plasters (assorted sizes)

Cold/Heat Sprays should not be used on children.

AGE GRADE RUGBY

Schools and colleges may be subject to different provision requirements as set out by their own governing body regulations, which they must comply with if the level of provision is higher than that specified in this guide.

MINIMUM STANDARD

TRAINING SESSIONS

- > 1 x Emergency First Aider per age-group is based on a ratio of 1 first aider to approx.40 players.
- > For larger groups additional Emergency First Aider (s) may be required and should be considered as part of the first aid risk assessment.
- For smaller groups it may be appropriate for one Emergency First Aider to cover more than one age group e.g. one Emergency First Aider covering U9 and U10 training session where there is a total of 40 or fewer children across both age- groups. This should be considered as part of the first aid risk assessment.

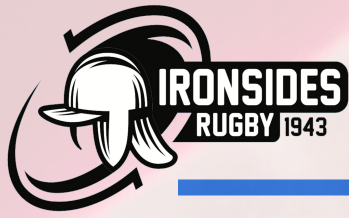
MATCHES

- > U7 – U8: 1 x Emergency First Aider per age group
- > U9 – U18: 1 x Emergency First Aider per match

AGE GRADE RUGBY continued

BEST PRACTICE

- One Emergency First Aider per team will provide a safer experience for the players, and reduces the risk of stoppages in play and disruptions that may occur where there is only one first aider per match.
- When the provision is a first aider per match, the home club/team is responsible for organising/providing the Emergency First Aid cover. Communication between both clubs/teams is encouraged to ensure cover is in place.
- If the minimum standards are not in place, the club/those involved in arranging rugby activity must complete a live first aid risk assessment* to be satisfied that it is safe/appropriate for the rugby activity to go ahead.



AGE GRADE RUGBY PITCHSIDE FIRST AID PROVISION OVERVIEW

For training sessions, 1 EFA per age-group is based on a ratio of 1 first aider to approx.40 players.

For smaller groups it may be appropriate for one Emergency First Aider to cover more than one age group e.g. one Emergency First Aider covering U9 and U10 training session where there is a total of 40 or fewer children across both age-groups.

	MINIMUM STANDARD		BEST PRACTICE
	TRAINING	MATCHES	MATCHES
U7	1 Emergency First Aider per age group	1 Emergency First Aider per age group	1 Emergency First Aider per match
U8	1 Emergency First Aider per age group	1 Emergency First Aider per age group	1 Emergency First Aider per match
U9	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U10	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U11	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U12	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U13	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U14	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U15	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U16	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U17	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team
U18	1 Emergency First Aider per age group	1 Emergency First Aider per match	1 Emergency First Aider per team

ADULT RUGBY

Schools and colleges may be subject to different provision requirements as set out by their own governing body regulations, which they must comply with if the level of provision is higher than that specified in this guide.

MINIMUM STANDARD

TRAINING SESSIONS

- > 1 x Emergency First Aider per training group is based on a ratio of 1 first aider to approx.40 players.
- > For larger groups additional Emergency First Aider (s) may be required and should be considered as part of the first aid risk assessment.
- > For smaller groups it may be appropriate for one Emergency First Aider to cover more than training group e.g. One Emergency First Aider covering two adult team/s training session where there is a total of 40 or fewer players training. This should be considered as part of the first aid risk assessment.

MATCHES – ADULT MEN

- > National Leagues: 1 x Immediate Care Practitioner per team**
- > Regional & County Leagues and Lower XV's: 1 x Emergency First Aider per match.

** The standards including Immediate Care Practitioner provision and medical equipment requirements are set by the [National Rugby League](https://www.rugby-league.com).

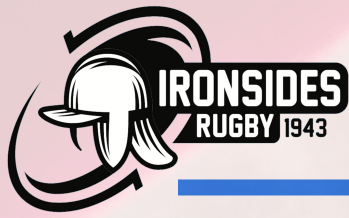
MATCHES – ADULT WOMEN

- > Championship and below: 1 x Emergency First Aider per match.

ADULT RUGBY continued

BEST PRACTICE

- One first aider per team provides a safer experience for the players, and reduces the risk of stoppages in play and disruptions due to having one first aider per match.
- **When the provision is a first aider per match, the home club/team is responsible for providing the Emergency First Aid Cover. Communication between clubs/ teams is encouraged to ensure cover is in place.**
- **If the minimum guidelines are not in place, those involved in arranging the activity must complete a live first aid risk assessment and be satisfied that it is safe for the activity to go ahead.**



ADULT RUGBY PITCHSIDE FIRST AID PROVISION OVERVIEW

For training sessions, 1 EFA per team is based on a ratio of 1 first aider to approx.40 players.

For smaller groups it may be appropriate for one Emergency First Aider to cover more than training group e.g. One Emergency First Aider covering two adult team/s training session where there is a total of 40 or fewer players training.

	MINIMUM STANDARD		BEST PRACTICE
MEN	TRAINING	MATCHES	MATCHES
NATIONAL LEAGUES	1 Emergency First Aider per team	Level 2 Immediate Care Practitioner per team	
REGIONAL LEAGUES	1 Emergency First Aider per team/training squad	1 Emergency First Aider per match	1 Emergency First Aider per team
COUNTIES LEAGUES	1 Emergency First Aider per team/training squad	1 Emergency First Aider per match	1 Emergency First Aider per team
LOWER XV'S	1 Emergency First Aider per team/training squad	1 Emergency First Aider per match	1 Emergency First Aider per team
WOMEN	TRAINING	MATCHES	MATCHES
CHAMPIONSHIP & NATIONAL CHALLENGE LEAGUES	1 Emergency First Aider per team/training squad	1 Emergency First Aider per match	1 Emergency First Aider per team
LOWER XV'S	1 Emergency First Aider per team/training squad	1 Emergency First Aider per match	1 Emergency First Aider per team

TOURNAMENTS AND FESTIVALS

- Where there are multiple teams playing at the same time (e.g. festivals and tournaments) a first aid risk assessment is required to determine the number and type of provision. The organiser should consider the levels of potential additional medical cover that may be required depending on the size of the event e.g. Ambulance/ Paramedic and/or Advanced Immediate Care Practitioner (Doctor) on site.
- The organiser is responsible for determining and organising appropriate venue Emergency First Aider provision as part of the event first aid risk assessment (e.g. requiring that every team brings a first aider and/or organising for specific event first aid/immediate care provision). A designated central first aid tent/area should be considered as part of the event first aid risk assessment.
- Please note that these standards do not account for any medical provision for crowds and spectators at an event or festival, this medical provision should be considered separately to the FA cover provision above.

TOURNAMENTS AND FESTIVALS continued

Schools and colleges may be subject to different provision requirements as set out by their own governing body regulations, which they must comply with if the level of provision is higher than that specified in this guide.

MINIMUM GUIDELINES

NON-CONTACT

- > U7 – U8 Tag Rugby Boys & Girls: Emergency First Aider per 2 matches or 1 full size pitch + 1 Emergency First Aider per venue
- > Non-Contact Formats e.g. Touch/Tag events (including: Adult, Mixed and Age Grade): Emergency First Aider per 2 matches or 1 full size pitch + 1 Emergency First Aider per venue

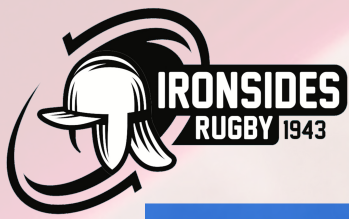
CONTACT RUGBY (E.G. 15 A SIDE, 10S, 7S AND XRUGBY)

- > U9 – U13 Boys & Girls 1 x Emergency First Aider per Match + 1 x Emergency First Aider per venue
- > U14 – U19 Boys & Girls 1 x Emergency First Aider per Match + 1 x Emergency First Aider per venue
- > Adult Men & Women 1x Emergency First Aider per Match + 1 x Emergency First Aider per venue

BEST PRACTICE

One first aider per team and an immediate care practitioner will provide a safer experience and reduce the risk of stoppages in play. The event organiser is responsible for first aid provision and ensuring there is allocated cover for each match.

If the minimum guidelines are not in place, the hose involved in arranging the activity must complete a live first aid risk assessment* and be satisfied that it is safe for the rugby activity to go ahead.



TOURNAMENTS & FESTIVALS PITCHSIDE FIRST AID PROVISION OVERVIEW

Organisers of tournaments and festivals are responsible for undertaking a risk assessment to determine the level of provision.

	MINIMUM GUIDELINES	BEST PRACTICE
AGE GRADE		
TAG, TOUCH & NON CONTACT	1 Emergency First Aider per 2 matches / 1 full pitch	1 Emergency First Aider per team
CONTACT	1 Emergency First Aider per match	1 Emergency First Aider per team
ADULT		
TAG, TOUCH & NON CONTACT	1 Emergency First Aider per 2 matches / 1 full pitch	1 Emergency First Aider per team
MINIMUM GUIDELINES		
CONTACT	1 Emergency First Aider per match	1 Emergency First Aider per team
BEST PRACTICE		
CONTACT	1 Emergency First Aider per match	1 Emergency First Aider per team

USEFUL RESOURCES

- <https://keepyourbootson.co.uk/rugbysafe/>
- <https://www.englandrugby.com/dxdam/a9/a9007ed6-16f5-4c2a-902a-a79b78f5775c/Being%20RugbySafe%20Aug%202021%20FINAL.pdf>
- <https://keepyourbootson.co.uk/rugbysafe-toolkit/community-rugby-first-aid-provision-and-information/>
- <https://keepyourbootson.co.uk/wp-content/uploads/2022/03/Healthcare-Professional-and-Allied-Healthcare-Professional-Information-2022-23.pdf>
- <https://keepyourbootson.co.uk/rugbysafe-toolkit/headcase/>
- <https://keepyourbootson.co.uk/rugbysafe-toolkit/injury-reporting-incident-recording/>