

Injury Procedure

Procedure Title:	Injury Procedure
Date of issue:	September 2011
Controlling Body:	Pivotal Gymnastics Management

1.0 Background

In the event of an injury or other accident at Northern Districts Gymnastic Club, or through use of the Club's services, the following steps will be followed:

1.1 If an Accident or Injury Occurs

- 1.1.1 Stop the class and prevent any injured participants from moving or being harmed by further activity.
- 1.1.2 Ensure the rest of the class is safe. (Give responsibility for your group to another coach to remove athletes from the accident site) and remain at all times with the injured person.
- 1.1.3 Request assistance from the First Aid Officer (most senior qualified First Aid person) to assess the nature of the injury and give directions regarding treatment.
- 1.1.4 Talk to the participant:
 - What happened?
 - How did it happen?
 - What did you feel?
 - Where does it hurt?
 - Have you injured this part before?
- 1.1.5 Observe the participant:
 - Is the participant distressed?
 - Is the participant lying in an unusual position?
 - Is there any swelling?
 - Is there any difference when compared to the opposite limb?

1.2 In the Event of a Minor Injury

- 1.2.1 Administer first aid – Rest, Ice, Compression and Elevation (RICE), gloves must be worn if blood is present;
- 1.2.2 Review the participants medical form;
- 1.2.3 Notify parent/guardian at the conclusion of the class, or if required as soon as possible;
 - 1.2.3.1 *If the athlete is unable to return to class within 30 minutes of the incident, the parent must be contacted informing them of the injury.*
- 1.2.4 When talking to parent/guardian, do not make any diagnosis other than the

obvious (e.g. Jane hurt her leg) and do not accept or place blame for the accident on anyone or anything; for example, equipment;

- 1.2.5 Coach or Competitive Programs Manager to follow up with the athlete or parent/guardian within 24 – 48 hours of the injury occurring.

1.3 In the Event of a Major Injury

- 1.3.1 Danger, Response, Airway, Breathing and Circulation (DRABC) and administer first aid as required.
- 1.3.2 Do not move the participant if there is a suspected neck or spinal injury, unless there is a risk to life present (e.g., falling debris, fire and explosion).
- 1.3.3 Stay with the participant and keep them as calm and comfortable as possible.
- 1.3.4 If the seriousness of the injury requires, call an ambulance.
- 1.3.5 Review the participants Medical Form.
- 1.3.6 Telephone the parents/emergency contact and inform them of the situation as soon as possible, trying not to alarm them unnecessarily.
- 1.3.7 When talking to parents, do not make any diagnosis other than the obvious (e.g. Jane hurt her leg) and do not accept or place blame for the accident on anyone or anything; for example, equipment.
- 1.3.8 Club Management to call the athlete or parent/guardian within 24 hours to follow-up on recovery progress of injury.
- 1.3.9 Club Management to email communication to members of the affected group following the incident (as required).

2.0 Roles and Responsibilities

2.1 Coach / Staff Member

- Remain with participant until assistance is provided;
- Make contact with relevant emergency services;
- When in communication with ambulance, provide details regarding the nature of the injury, address and phone number you are calling from and address where injured party is;
- Talk to parent/guardian as soon as possible;
- Follow up with injured participant and parent / guardian; &
- Complete relevant sections of Injury Report Form and Analysis.

2.2 First Aid Officer

- Provide assistance as most qualified first aid present;
- Review medical form and determine appropriate treatment response; &
- Complete relevant sections of Injury Report Form and Analysis.

3.0 Emergency Contacts

- Ambulance, Fire and Police services (emergency only): 000
- Police: 131 444
- State Emergency Services (SES): 132 500

- Refer to membership details for parent / guardian contacts

4.0 Reporting and Follow up

1. An Injury Report Form must be completed for every participant that is injured during class, no matter how minor the injury.
 2. Submit the Injury Report Form to the Competitive Programs Manager at the conclusion of training/competition. Ensure that all witness details available are recorded. Place the form on Competitive Program Manager's desk.
 3. The Competitive Program Manager should enter details on the 'Accident Database' and file original form in 'Accident Record File' within 48 hours.
 - 3.1. The original form must never be removed from Northern Districts Gymnastic Club Inc.
 4. In the case of a minor injury, the supervising coach should follow up with the parent/guardian of the injured athlete within 24-48 hours.
 5. In the case of a major injury, the Competitive Programs Manager should follow up with the parent guardian of the injured athlete within 24 hours.
- Any questions relative to Injury Reports should be directed to the Director of Coaching or Manager.
 - Information on the Accident Database will be utilised for Quarterly Reporting purposes for identifying injury prevention measures.

5.0 Related Policies, Procedures and Forms

- First Aid Policy
- Injury Procedure Chart
- Injury Report Form
- Incident Report Form
- Incident Procedure
- Analysis – Injury Report Template
- Evacuation Plan
- Emergency Charts
- Emergency Procedures

6.0 Appendix

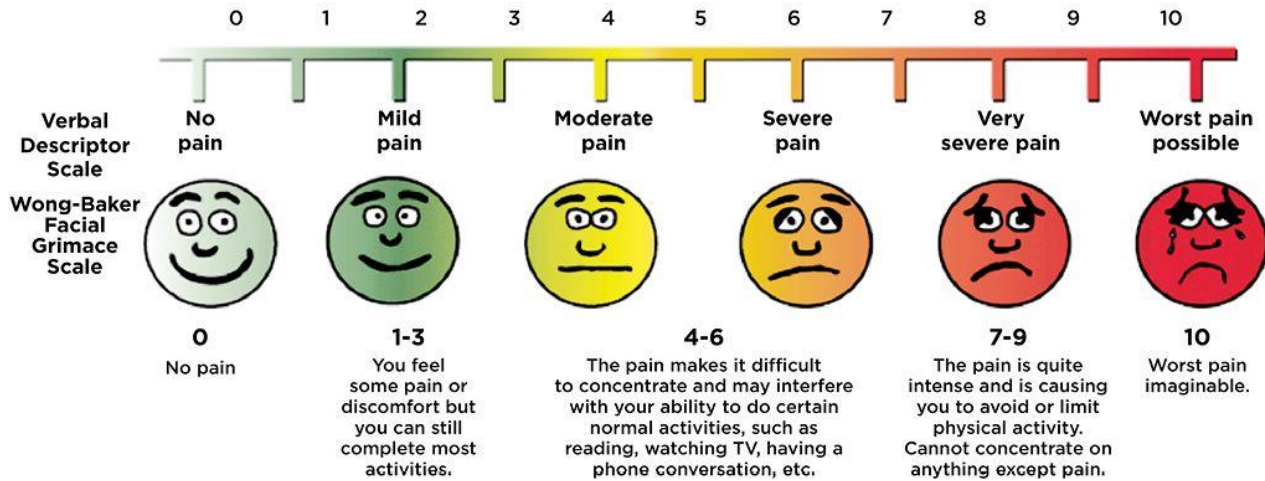


Figure 1: Wong-Baker Faces Pain Rating Scale.

Instructions

Explain to the child that each face is for a person who feels happy because he has no pain (hurt) or sad because he has some or a lot of pain.

- 0 No pain at all. No hurt
- 1 – 3 You feel some pain or discomfort, but you can still complete most activities. Hurts little bit.
- 4 – 6 The pain makes it difficult to concentrate. Hurts even more.
- 7 – 9 The pain is quite intense. Hurts a whole lot.
- 10 Worst pain imaginable. Hurts worst.

Ask the child to choose the face that best describes how he/she is feeling.

Reference: Hockenberry MJ, Wilson D, Winkelstein ML: *Wong's Essentials of Pediatric Nursing*, ed, 7, St Louis, 2005 p.1259.