



**SPEED  
SKATING  
BC**

Guidelines:

# **Sport Injury Management**

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## Introduction

These guidelines set out the principles of sport injury management that all Speed Skating BC (SSBC) clubs must follow for all practices and competitions. If the competition is sanctioned by Speed Skating Canada (SSC), SSC guidelines must also be followed and will supersede the SSBC guidelines.

## Sport Injury Prevention

Sport injuries may be prevented with thorough and consistently-applied risk management procedures. It is outside the scope of this document to fully detail risk management concepts. The following are risk management areas which should be considered by clubs when hosting practices and/or competitions:

- [Protective padding](#)
- [Developmentally-appropriate programming](#)
- Adequate [warm-up](#)
- Adequate [sport nutrition](#)
- Appropriate [safety equipment](#).

## Emergency Action Plan

There should be a customized Emergency Action Plan (EAP) for each venue and each type of event (i.e. a practice held in the same venue as a competition should have a unique EAP). The EAP should be a comprehensive document that is also immediately useful in the event of an emergency. More information on developing an EAP can be found in the Coaching Association of Canada (CAC) [Emergency Action Plan module](#), available on-demand for free. The CAC has also provided a [template EAP](#).

## Practice Requirements

Designated First Aid Personnel are not required at club practices; however, clubs are strongly encouraged to support their coaches to have a valid first aid certificate to be able to respond quickly to sport injuries sustained during practice. Volunteers with valid first aid certificates should provide first aid only to the level at which they are trained.

Clubs should have a practice-specific EAP and should have a Club First Aid kit available:

### Club First Aid Kit

- 2 eye patches
- 1 plastic eye patch
- 15-30 plain strip dressings (band-aids)
- 3-4 triangular cotton arm slings
- 10-15 elastic knuckle dressings
- 10-15 elastic fingertip dressings
- 1-2 pressure bandages
- 1 pair of bandage scissors
- 2 – 3” tensor bandage rolls
- 2 – 4” tensor bandage rolls
- 2” x 2” sterile gauze dressings (small box)
- 3” x 3” sterile gauze dressings (small box)
- 6-8 sterile non-stick dressings (Telfa type) 2” x 3” is best
- 2 rolls 1” adhesive gauze roller bandages
- 3 rolls 3” adhesive gauze roller bandages
- 1 pack assorted steri-strip closure dressings (10 large and 10 medium)
- 4-5 3” compressed bandages 1 roll 1/2” micropore adhesive tape
- 1 roll 1 1/2” pink plastic strapping adhesive
- Sufficient quantity assorted mole skin pads, foam pads and bunion pads for use over or under skater’s foot and ankle blisters
- 3-4 instant ice packs
- Ziplock bags to put arena snow in
- 10 or more SSBC Injury Report forms

## Competition Requirements

### First Aid Personnel

The term “First Aid Personnel” within this document shall refer to an individual with a valid certificate at the following level or equivalent/higher:

- Standard First Aid (2-day course) for competitions with an SSBC Local or SSBC Regional Sanction
- First Responder (40 hour course) for competitions with an SSBC Provincial Sanction.

All First Aid Personnel must be oriented to the sport of speed skating so that they understand what types of injuries can occur, and must be oriented to the venue where the competition will occur.

All First Aid Personnel should be easily identifiable by specific clothing or safety vest (bright green or orange work well) or some other type of identifying garb. The First Aid Personnel must always be present at ice side during all official practices, warm-ups and competitions. The official practice, warm-up and or competition cannot start until First Aid Personnel have arrived. There must be enough First Aid Personnel to look after the injured skater off ice and have someone at ice level at all times; at least two First Aid Personnel are required. First Aid Personnel must be designated and dedicated to the first aid needs of the skaters. The First Aid Personnel cannot hold any other position within the meet.

The First Aid Personnel must respond quickly to the needs of the skater(s) on the ice. The First Aid Personnel may:

- Stabilize and move the injured skater(s) to the treatment room for further treatment or assessment
- Call 911 (or request 911 be called by the designated 911 caller) for an ambulance
- Determine that the skater may get up off the ice without assistance.

Spectator first aid is not the responsibility of the first aid personnel and should follow the first aid protocol of the venue.

## Equipment and Facilities

There must be a medical/treatment room available for all competitions. This room must be easily identified to all. The treatment room must:

1. Have unobstructed access to the ice surface and be no more than 100 meters from the ice surface
2. Be open at all times during the competition, warm-up or practice; if the medical/treatment room is locked, the First Aid Personnel must have the key
3. Be large enough to deal with multiple injuries at once
4. Have washing facilities if possible (e.g. sink, toilet).

The First Aid Personnel will determine the equipment needed as per the level of speed skating competition that will be occurring. Ensure the First Aid Personnel know what injuries can occur in the sport of speed skating. Before the start of the competition, the First Aid Personnel and Meet Coordinator must ensure that all equipment is functional and that all the team members understand their use and are entitled to respond to all emergency procedures for this equipment. A cooler with ice bags (ice bags can be snow in plastic bags) should be readily available at the rinkside.

Two cut kits should be available, one at either end on the ice surface, within the corner located next to the track stewards. The cut kit should consist of:

- 4 sets of Sterile gloves (2 of size 7, two of size 8) in each kit
- 4 sets of non-sterile gloves (nitrile preferably) in each kit
- 5 abdominal sterile compression pads in each kit
- 10 sterile 4x4 gauze in each kit
- 2 disposable tourniquets in each kit
- 1 pair of first aid scissors in each kit.

## Medical Plan Day of Competition

A meeting with the on-site emergency response team should occur prior to Coaches/Officials Meeting:

- Referee(s)
- Track Stewards
- First Aid Personnel
- Call person (if assigned by the First Aid Personnel)
- A person that will assist opening doors to access ice and directing the ambulance to ice
- Clerk of the Course
- Meet Coordinator.

Physically walk with the emergency response team to all the locations and make sure everyone knows what to do in the event of an injury. Test opening doors and go outside to where the ambulance will enter. Answer questions, take suggestions, and make changes if necessary. The team needs to be clear and agree on what to do. Ensure the cut kits are on the playing surface before the start of practice and competition.

At the Coaches/Officials Meeting, the Meet Coordinator will welcome everyone, then immediately review the EAP, the location of the treatment room, identify the First Aid Personnel and their location. The Meet Coordinator will also review the protocol around concussions (see below in this document for details).

Upon injury or suspected injury occurring:

1. The Chief Referee and/or designates, at their discretion, will stop the race and signal the First Aid Personnel onto the ice. Track Steward(s)/Referees may help the First Aid Personnel get to the injured skater.
2. The First Aid Personnel become the trauma leader. The First Aid Personnel will decide if 911 is called. The First Aid Personnel may decide to have a dedicated 911 caller. This 911 caller can be anyone who is an Official with a working cell phone. The cell phone must be tested in the arena prior to the event.
3. An Official will be designated to open the doors at ice level and direct the ambulance to the injured skater. If necessary, the Track Stewards will move the mats for the ambulance to have access to the ice playing surface.
4. At the discretion of the Chief Referee, the Meet Coordinator or Clerk of the Course will direct the non-injured skaters off the ice and back to their designated change rooms.

## Concussions

A concussion is a brain injury. More information specific to concussion in sport can be found in the [Pre-Season Concussion Education Sheet](#).

In the event of an impact to the head, face, neck, or body of an on-ice participant\*, a screen for concussion must occur. There are three indications for a concussion screen to be initiated:

1. The First Aid Personnel at a competition initiate the screen; and/or
2. Any official at a competition requests a screen\*\*; and/or
3. The skater or the skater's own support team (parent/guardian, coach, and team manager) requests the screen at a competition or practice.

The steps of the [Canadian Sport Concussion Pathway](#) (see image below) should be followed, with the following three possible outcomes:

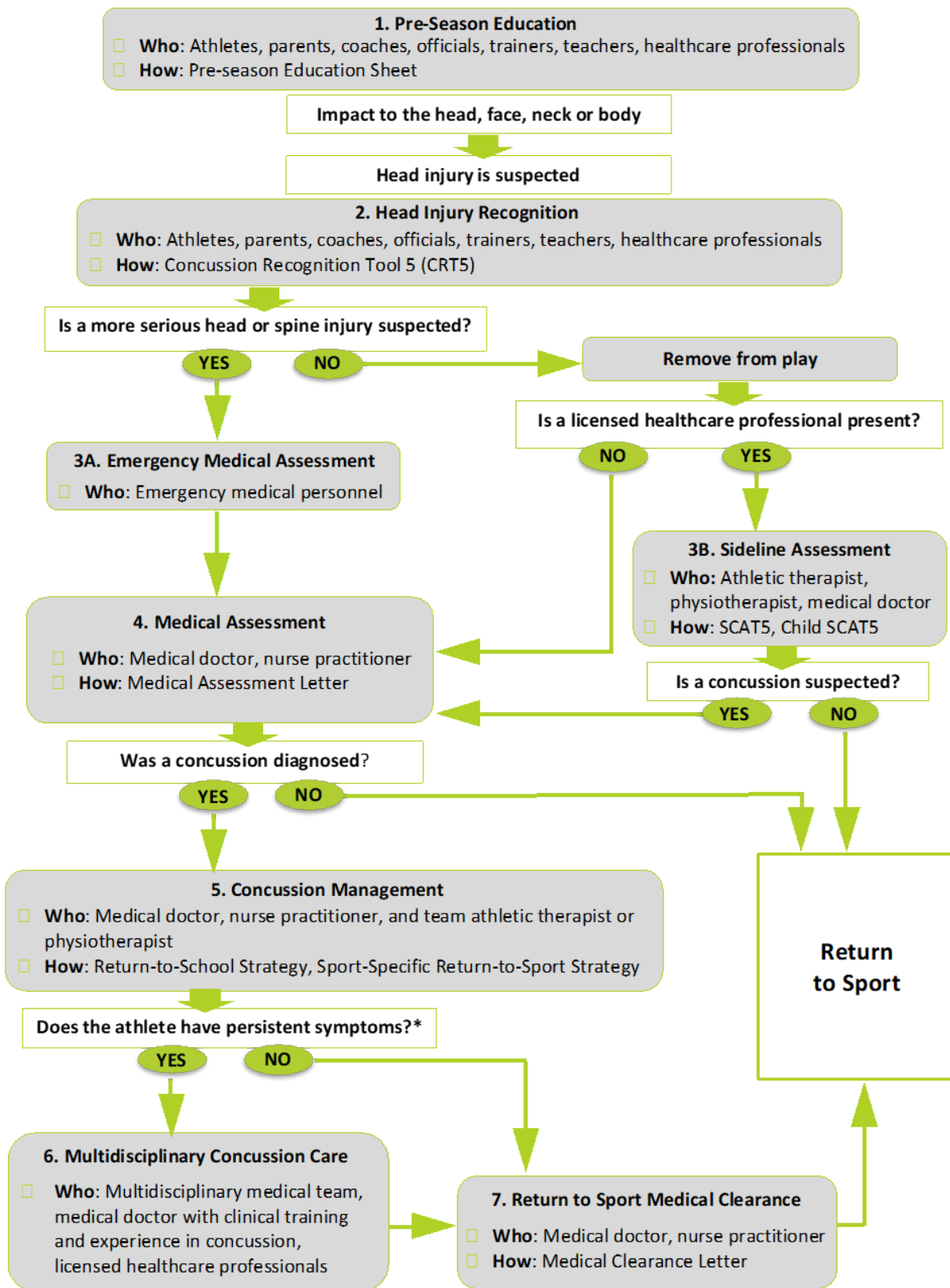
1. If the skater, parent/guardian or the skaters' coach/manager refuses the screen, the skater will be removed from the practice/competition.
2. If a concussion is suspected, the skater will be removed from the practice/competition and sent for medical assessment. The skater will not be allowed to return without medical clearance for Return to Play (RTP).
3. If a licensed healthcare professional completes a sideline assessment with no suspicion of a concussion, the skater may return immediately to active participation.

*\*Note that the screening protocol and RTP protocol applies to skaters and to other on-ice participants (e.g. coaches, referees, track stewards, volunteers).*

*\*\*It is not the job of the on-ice officials to determine if the skater has a concussion. However, on-ice officials should be able to recognize potential situations that might result in a concussion, for example:*

1. *Skater falls and hits their head/helmet on the ice. Skater gets up slowly and skates to the finish line. Race is not blown down. Referee asks the skater to be seen by the first aid personnel after the race.*
2. *A skater takes a fall into the mats and hits their head on the ice, the race is called for injury. The skater is escorted off the ice. The first aid personnel are asked to see the skater immediately.*
3. *A skater is seen to take a heavy fall into the mats. The skater is seen to stagger to their skates and stumbles around on the ice. The race should be called for injury. The skater is escorted off the ice. The skater is seen by the first aid personnel immediately.*

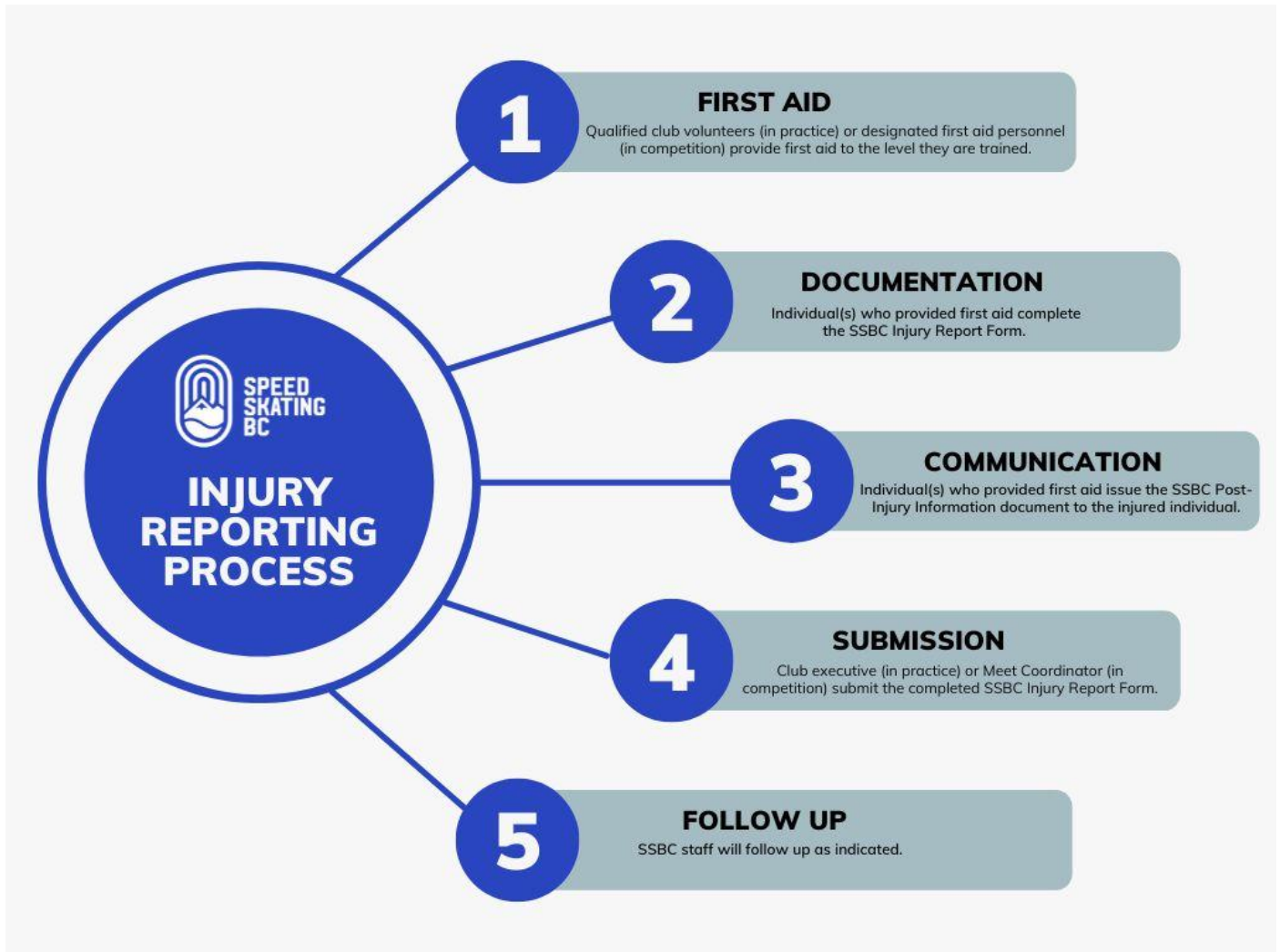




\*Persistent symptoms: lasting > 4 weeks in children & youth or > 2 weeks in adults

## Injury Reporting

Injury reporting in practice or in competition should follow these five steps:



Links to Resources:

[SSBC Injury Report Form](#)

[SSBC Post-Injury Information](#)

