

GEC Concussion Protocol

Effective 1st July 2019

Based on the EA Concussion Protocols dated June 2019.

[Equestrian Australia Concussion Protocols link](#)

For all training days, horsemanship and fun days and all competitions

1. A person with a current First Aid Certificate must be present at all events. This person can be an Event Organiser, an EA Coach or a designated First Aider. Our club liability insurance is through EA and indemnity may be denied if we have not followed EA protocols. It is also a condition of hiring the grounds from Hornsby Council.
2. A copy of our Concussion Protocol and a laminated copy of the Concussion Recognition Tool (CRT 5) must be available at all events for use in the event of a fall and kept where easily accessible at the event. Any external first-aiders, judges and/or instructors will be pre-briefed when we book them that we follow the EA protocols and the event organiser must ensure a laminated copy of the CRT 5 is readily available which we will use to decide whether anyone who has a fall may have a suspected concussion.
3. It is best practice at any event that a group of 3 attend any fall. Ideally this will be the event organiser, the person with current First Aid Certificate and the judge/instructor who saw the fall. If not, a member of the committee who is present at the event should step in.
4. If someone falls off, the group of 3 will attend the rider and use a) visual evidence (someone will have seen how the rider fell) and (b) the CRT 5 tool to determine whether there is a possibility of concussion.
5. For major injuries, or severe signs and symptoms of concussion as outlined in Step 1 of the Concussion Recognition Tool 5 (attachment 1) an ambulance will be called immediately. If an ambulance is called the event in that arena will be suspended until the ambulance arrives. The rider will not be allowed to remove their helmet. The rider will not be moved unless required for airway support.
6. If no Red Flags as outlined in the Concussion Recognition Tool 5 are present, the group of 3 (e.g. event organiser, first aider and judge/instructor) together will proceed to assess whether there are any observable signs (Step 2) or symptoms (Step 3) and whether the rider is cognitively “present” (Step 4). **If there are any signs or symptoms under these three Steps, we will assume there is a possibility of concussion.** The rider be eliminated from that event, will not be allowed to get back on a horse for any purpose that day, will not be allowed to drive themselves home and will not be left unattended whilst at the grounds. Any minor first aid that is required will be administered. If there is any doubt as to the severity of the signs and symptoms in Steps 2, 3 or 4 then ‘000’ will be called to ascertain if an ambulance is required.
7. We will contact the “person to contact in an emergency” (EC) who has been named on the rider’s entry and/or any friend or family member who is present at the grounds. Therefore, it is the rider’s responsibility to provide the name and contact details of a person to contact in an emergency before entering any training day, horsemanship or fun day or competition

and when asked by any Committee Member, First Aider or Event Organiser. The EC must be a competent adult and be capable of driving the rider's float and horse home if required. Riders suspected of concussion must not drive. The Committee, Event Organisers and First Aiders are all volunteers and will **NOT** be expected to drive other people's vehicles or floats. They can assist the rider to contact their EC and make alternative arrangements.

8. If there is another responsible adult available to take care of the rider, we will provide that person (and/or the rider) with an "Concussion Injury Advice Card" as provided by EA (attachment 2) completed as required. The rider must follow the directions on the Advice Card including that they need medical clearance before they can ride again and before they can drive a vehicle again.
9. We will ensure that another responsible person is able to drive the rider home. If there is no-one able to take the rider home, the organiser is responsible for making whatever alternative arrangements she can within reason.
10. **The rider must follow the Return to Sport Protocol** (diagram 1, or diagram 2 for 18 years and younger) of the Concussion in Sport Australia position statement, namely the rider will be suspended from competition for at least six (6) days (14 days for 18 years and younger) from the concussion incident. The rider will be suspended from competition until they have written clearance to return by a medical practitioner. This is the rider's responsibility to organise.
11. The Event Organiser will email the rider (copying 'reporting@equestrian.org.au') (attachment 3) thus reporting the concussion or suspected concussion incident to the appropriate officials at EA.

CONCUSSION RECOGNITION TOOL 5 ©

To help identify concussion in children, adolescents and adults



Supported by



RECOGNISE & REMOVE

Head impacts can be associated with serious and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRT5) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion.

STEP 1: RED FLAGS – CALL AN AMBULANCE

If there is concern after an injury including whether ANY of the following signs are observed or complaints are reported then the player should be safely and immediately removed from play/game/activity. If no licensed healthcare professional is available, call an ambulance for urgent medical assessment:

- Neck pain or tenderness
- Double vision
- Weakness or tingling/ burning in arms or legs
- Severe or increasing headache
- Seizure or convulsion
- Loss of consciousness
- Deteriorating conscious state
- Vomiting
- Increasingly restless, agitated or combative

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Assessment for a spinal cord injury is critical.
- Do not attempt to move the player (other than required for airway support) unless trained to do so.
- Do not remove a helmet or any other equipment unless trained to do so safely.

If there are no Red Flags, identification of possible concussion should proceed to the following steps:

STEP 2: OBSERVABLE SIGNS

Visual clues that suggest possible concussion include:

- Lying motionless on the playing surface
- Slow to get up after a direct or indirect hit to the head
- Disorientation or confusion, or an inability to respond appropriately to questions
- Blank or vacant look
- Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements
- Facial injury after head trauma

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STEP 3: SYMPTOMS

- Headache
- "Pressure in head"
- Balance problems
- Nausea or vomiting
- Drowsiness
- Dizziness
- Blurred vision
- Sensitivity to light
- Sensitivity to noise
- Fatigue or low energy
- "Don't feel right"
- More emotional
- More Irritable
- Sadness
- Nervous or anxious
- Neck Pain
- Difficulty concentrating
- Difficulty remembering
- Feeling slowed down
- Feeling like "in a fog"

STEP 4: MEMORY ASSESSMENT

(IN ATHLETES OLDER THAN 12 YEARS)

- Failure to answer any of these questions (modified appropriately for each sport) correctly may suggest a concussion:
- "What venue are we at today?"
 - "Which half is it now?"
 - "Who scored last in this game?"
 - "What team did you play last week/game?"
 - "Did your team win the last game?"

Athletes with suspected concussion should:

- Not be left alone initially (at least for the first 1-2 hours).
- Not drink alcohol.
- Not use recreational/ prescription drugs.
- Not be sent home by themselves. They need to be with a responsible adult.
- Not drive a motor vehicle until cleared to do so by a healthcare professional.

The CRT5 may be freely copied in its current form for distribution to individuals, teams, groups and organisations. Any revision and any reproduction in a digital form requires approval by the Concussion in Sport Group. It should not be altered in any way, rebranded or sold for commercial gain.

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

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Attachment 2

CONCUSSION INJURY ADVICE	Venue/Event:
(To be given to the person monitoring the concussed athlete) Pay special attention in the first 4 hours preferably do not leave alone for 12-24 hours	Athletes Name:
This athlete has suffered a suspected concussion. Recovery time is variable across individuals and the patient will need monitoring for a further period by a responsible adult. Your treating doctor will provide guidance as to this time frame. A return to sport protocol depending on the persons age should be followed as outlined at https://www.concussioninsport.gov.au/	Date/Time of Injury:
If you notice any change in behaviour, vomiting, dizziness, worsening headache, double vision or excessive drowsiness, please contact your doctor or the nearest hospital emergency department immediately.	Date/Time of assessment:
Other Important points: <ul style="list-style-type: none"> - Rest (physically and mentally) including training or playing sports until symptoms resolve and you are medically cleared - No alcohol - No prescription or non-prescription drugs without medical supervision Specifically <ul style="list-style-type: none"> No sleeping tablets Do not use aspirin, anti-inflammatory medication or sedating pain killers <ul style="list-style-type: none"> - Do not drive or operate heavy machinery until medically cleared - Do not train or play sport until medically cleared 	Assessing Official/ Medical Service:
	Contact Details:
Clinic Phone Number:	

Diagram 1

Diagram 1: Return to Sport Protocol for adults over 18 years of age

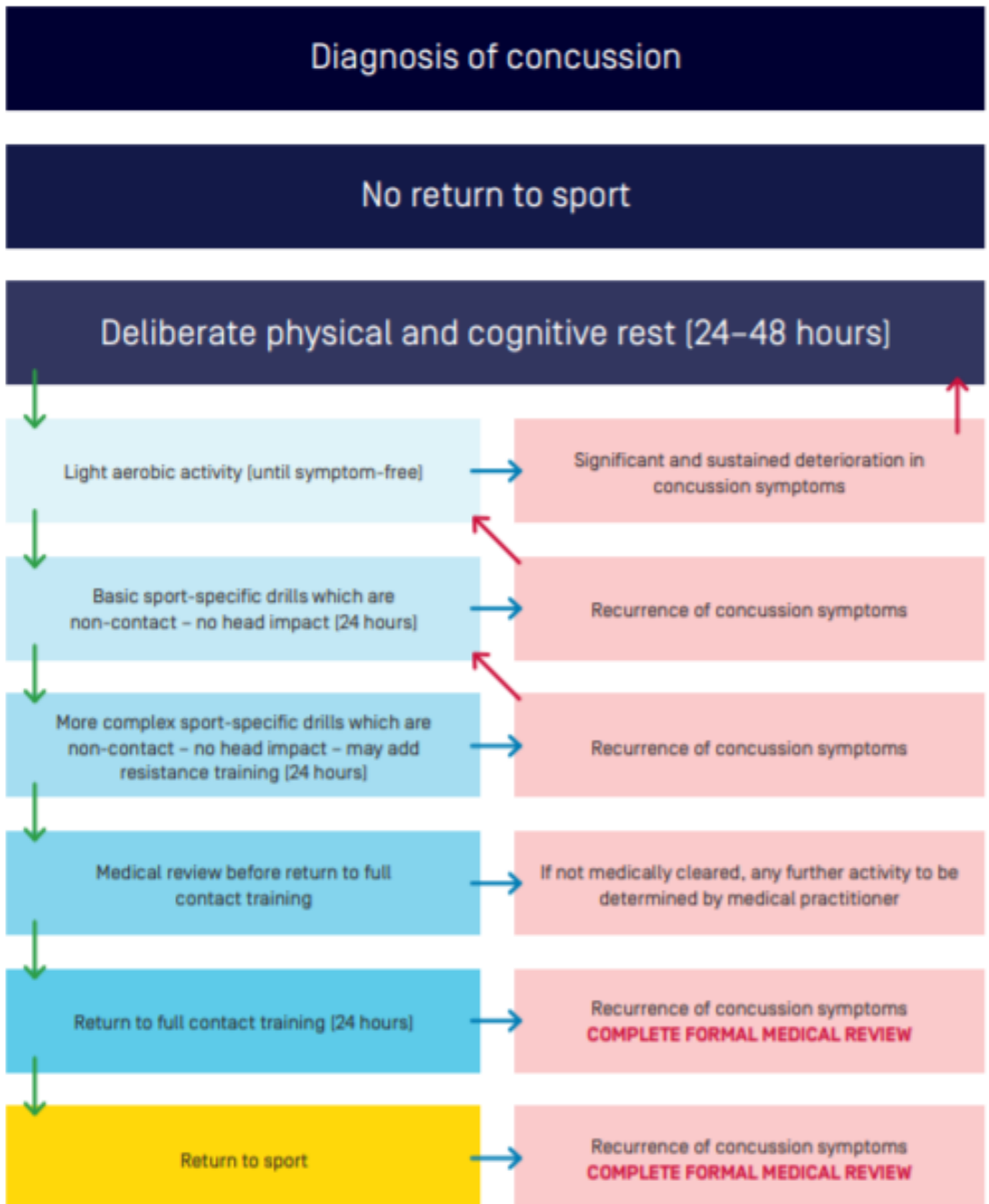
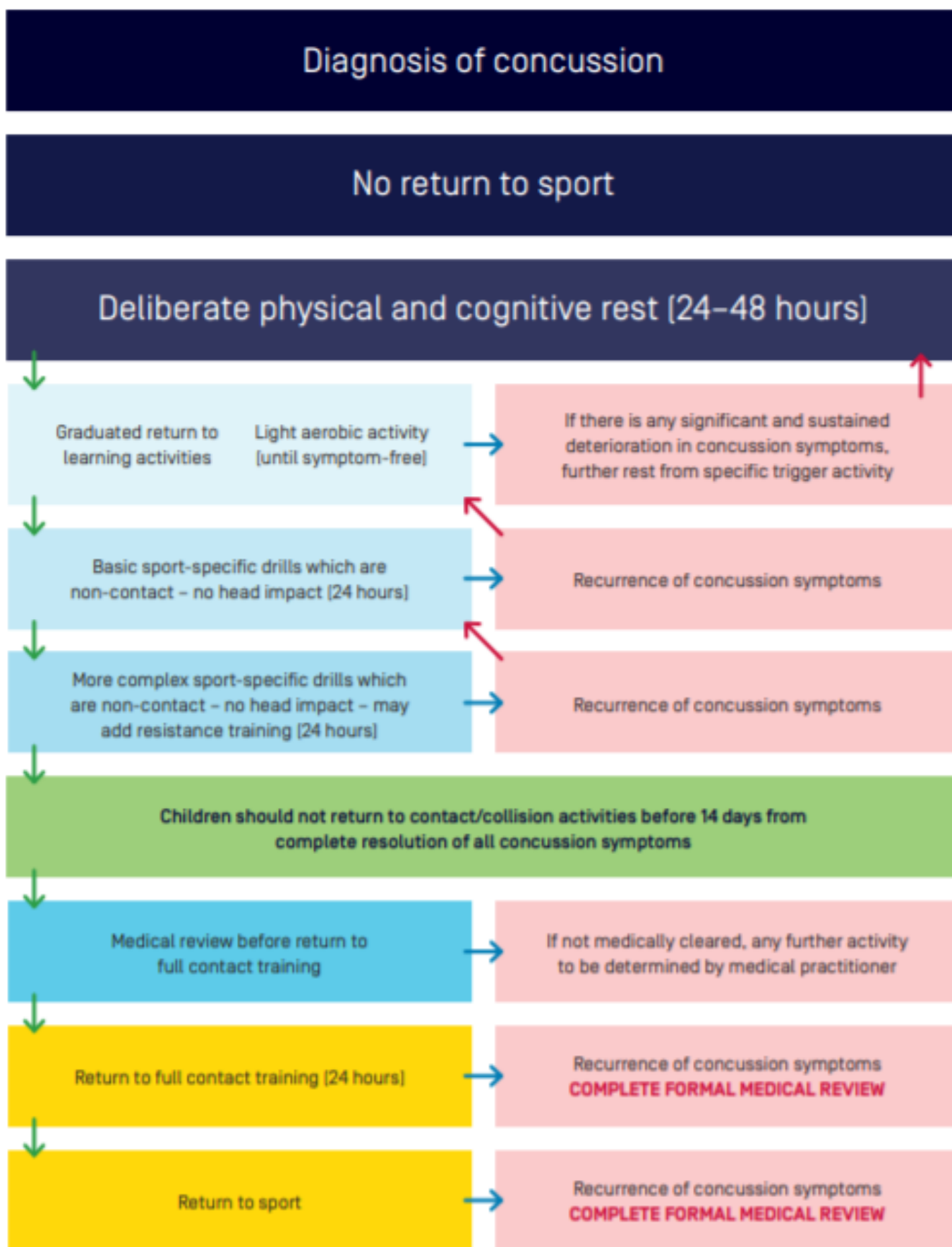


Diagram 2

Diagram 2: Return to Sport Protocol for children 18 years of age and under



Attachment 3

To:<riders email>

CC: reporting@equestrian.org.au, gecsecretarymail@gmail.com

Dear Athlete and/or guardian name

I am writing to you as **Official Position** (eg Technical Delegate) of the recent **EVENT NAME** (eg Woody Yallock Horse Trials)

I hope you are well and recovered from your fall -our records show that you are suspected of having sustained a concussion.

Under Equestrian Australia General Regulations, all riders suspected of sustaining a concussion, may not ride at another competition for a minimum of 14 days, if aged 18 years or younger, or a minimum of 6 days if aged 19 years or older.

We strongly recommend that you seek medical advice and follow a graduated return to sport policy as outlined at <https://www.concussioninsport.gov.au/>

You must also obtain a signed medical certificate from your General Practitioner or medical professional, indicating you are free from any impairment resulting from your suspected concussion, and are cleared to ride. This must be returned via email to myself (please select reply all) and reporting@equestrian.org.au and presented to the Officials at your next EA competition.

If you have any further questions regarding this suspension, please feel free to contact me, or have your parents/ guardians contact me, either via return email, or on xxxxxxxx

Regards

XXXXXX

References:

https://www.concussioninsport.gov.au/_data/assets/pdf_file/0005/683501/February_2019_-_Concussion_Position_Statement_AC.pdf

https://www.equestrian.org.au/sites/default/files/EA%20Concussion%20Protocols%20-%20Athlete%20Briefing%20June%202019_0.pdf

https://www.equestrian.org.au/sites/default/files/EA%20Concussion%20Protocols%20-%20Officials%20Seminar%20June%202019_0.pdf