

**CLYDE COUGARS FOOTBALL CLUB**



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# **TRAINER'S HANDBOOK**

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2025 Edition

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## PURPOSE

The purpose of this handbook is to help Trainers understand the requirements and expectations for the role.

This handbook should be read in conjunction with the AFLSE By-Laws which are available on the Clyde Cougar Football Club's website <https://clydefc.com.au/player-information/policies/>

## 1. Trainer's Role and Responsibilities

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### 1.1 Availability

Present for all team matches (home and away).

### 1.2 First Aid Training

Training courses are provided by CJFC at no cost to club volunteers.

### REQUIREMENTS:

- **CPR annually**
- **First Aid every 3 years**
- **Current WWCC**
- **Registration on PlayHQ**  
<https://www.playhq.com/afl/org/clyde-junior-football-club/0197a5a9/register>  
Trainers must register as a 'Medical Officer'
- **AFL First Aid and Concussion Management online module (every 2 years)**
  - this has been developed to educate volunteers on areas not covered in standard First Aid and CPR courses

The module can be accessed by creating an account on the AFL Learn platform

[https://afl.androgogic.com.au/blocks/androgogic\\_catalogue/view.php?id=761](https://afl.androgogic.com.au/blocks/androgogic_catalogue/view.php?id=761) .

### 1.3 Essential Duties

#### Pre-Game

- Make yourself known to the opposition team's Trainer, ground trainer and/or ground manager (if applicable).
- Ensure you are familiar with location of essential emergency equipment, including venue's stretcher
- Ensure first aid kit is present, and appropriately stocked (strapping tape, bandages, gauze, etc.) (Refer Checklist - Appendix 1)
- Ensure you have access to ice
- Conduct pre-game check with players re: injury concerns, any strapping required should be applied prior to arrival, etc.
- Provide any feedback to coach on any individual player concerns

#### During Game

- Assess injuries and, if required, liaise with home ground Trainer and/or appropriate club personnel
- Complete an Injury Report for such incidents via <https://www.cognitoforms.com/ClydeFootballClub/InjuryReports> or by scanning the Injury Reports QR code (Refer Appendix 2)
- Provide feedback to coach on any individual player concerns

#### Post-Game

- Diagnosis, management, rehabilitation (in conjunction with First Aid Coordinator as necessary, and feedback to coach)
- Request any additional first aid supplies from the club's First Aid Coordinator

## 2. Player/Personal Protection and Medical Information

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Individual medical information is obtained at registration and communicated to the Team Manager to share with the relevant trainers. This information is to be held in confidence and not to be shared.

## 3. Club Committee & Key Contacts

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Katie Atkin – President ..... 0433 462 377

Laura Flynn – Secretary ..... 0438 198 168

Carolyn Tabone – First Aid Coordinator ... 0418 140 954

Carolyn Tabone – Child Safety Director ..... 0418 140 954

## 4. Relevant Policies

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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.

### 15.1 AFL statement on injury management - Statement from the National Community Football Policy Handbook

The AFL expects that Matches at all levels are played in a safe environment. To ensure the prevention of, and prompt attention to, injuries in Australian Football, it is important that adequate and timely first aid is delivered. Sports trainers and first aid providers play a key role in player preparation and safety at all levels.

A sports trainer or first aid provider involved with a Club should have a clear understanding of the role and importance of emergency and injury management in Australian Football and injury prevention.

### 24.9 Protective Gloves - Statement from Laws of Australian Football

Each Club or Team must ensure that any doctor, trainer or any other person treating Players of a Team wears protective gloves.

### 1.1 AFL South East (AFLSE) – Policy & By-Laws

The AFLSE supports the Sports Trainers in Community Australian Football Policy.

#### First Aid Requirements (extract from AFLSE policy & by-laws)

- 18.1 (a) All first aiders must be trained and qualified in accordance with the AFL Trainers Policy.
- (b) Prior to the commencement of each season each First Aider/ERC or Trainer must register as a volunteer with the League through the Competition Management System including their WWC number.
- (c) The First Aider/ERC or Trainer must wear an official uniform as determined by the League as described in the Junior League's Style Guide.
- (d) There may be up to two (2) First Aiders or ERC or Trainers. One is permitted in the coach's box, unless an injured player is being attended to. The other must be located around the ground at least 20 meters from the coach's area.
- (e) First Aiders/ERC and Trainers may only be on the ground to assist any injured players and must leave the ground as soon as they have completed their duties.
- (f) A First Aider/ERC and Trainer may be penalised for loitering on the ground during general play and/or making comments to players and umpires.
- (g) The age of a Trainer must be a minimum of 16 years of age.
- (h) First Aider/ERC or Trainers must not act as Runners or Coach while on the ground.

### Stretchers (extract from AFLSE policy & by-laws)

15.2 (a) The home club must ensure they supply a compliant stretcher for each game.

(b) The stretcher is to be located behind the fence at the Interchange Area. Any breach shall be subject to the relevant fine (Refer Appendix 3)

### Defibrillator (extract from AFLSE policy & by-laws)

15.3 Match venues should have immediate access to a defibrillator in case of an emergency.

### Emergency Access (extract from AFLSE policy & by-laws)

15.6 All access gates must be clear and accessible at all times. Access keys should be readily available during all League matches.

### Concussion (extract from AFLSE policy & by-laws)

30 If a player has suffered a concussion or is suspected of having a concussion, they must be medically assessed as soon as possible after the injury and must NOT be allowed to return to play in the same game/practice session. 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 player should not return until such time as a doctor's certificate has been obtained indicating they are fit to play. This process is to be managed at Club level and is to be in line with the AFL Community Concussion Management Guidelines (Refer Appendix 4).

Additionally, a return to play clearance form must be completed by a medical practitioner. Both clearance forms and checklists can be found in the Trainer's folder. Please hand out to families where required and liaise with the First Aid Coordinator to facilitate the return to play process.

## 5. Location of Key Equipment

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Item	Location
Defibrillator	First Aid Room
CPR Face Shield	First Aid Kit & Bum Bag
Stretcher	First Aid Room
Ice (instant)	First Aid Kit
Ice (frozen)	First Aid Room
Medical Supplies/Tape	First Aid Kit

\* For replenishment of medical supplies, please contact the First Aid Coordinator.

## 6. Emergency Information

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### 6.1 Nearest Hospitals/Medical Centres

#### PUBLIC

Casey Hospital  
62-70 Kangan Drive, Berwick

#### PRIVATE

Peninsula Private Hospital  
525 McClelland Drive, Langwarrin

#### Priority Primary Care Centre

(Mon-Fri 8.00am-10.00pm), 9771 2020  
60 Victor Cres, Narre Warren

#### Medical Centres

- The Avenue Family Medical Clinic  
(Mon-Fri 8.30am-6pm, Sun 9am-1pm), 8768 9091  
4 Stoneleigh Rd, Cranbourne Nth, VIC 3977
- Broad Oak Medical, Dental & Specialist Centre  
(Tues-Fri, Sun 9am-5pm), 5995 1000  
14 Broad Oak Dr, Cranbourne East VIC 3977
- Pro Health Family Medical Centre  
(Mon-Fri 9.00am-10pm, Sun 9am-6pm), 5995 2233  
17/1A Linsell Blvd, Cranbourne East VIC 3977

## 6. Emergency Information Cont.

### 15.6 Emergency Access to Grounds

All access gates must be clear and accessible at all times.

**Clyde Recreation Reserve - access to all ovals is via Vestfold Drive, Clyde**

**All emergency access gates are locked by a universal key (see coach).**

#### Emergency Procedure:

Should an ambulance be called:

- Advise 000 operator which oval to attend and which entrance to enter from
- Trainers must stay with the patient until handover with the ambulance staff
- Complete an injury report (Refer Appendix 2)



## 7. Club Insurance

All Clyde Cougars Junior Football Club players and volunteers are covered for personal injury through Marsh, the appointed insurance broker for the Australian Football League (Bronze level). The policy covers for accidental injuries that occur during club sanctioned, football related activities. By law, this policy can only cover medical costs that are not covered by Medicare.

Should a player incur an injury that may require additional medical treatment, parents will need to complete a Personal Accident Claim Form at <https://au.marsh.com/sport/make-a-claim.html> and keep medical receipts and paperwork within 180 days of the injury. Information regarding Marsh Insurance cover is available at <https://au.marsh.com/sport/afl.html>. Please advise the First Aid Coordinator if there are any injuries that may require an insurance claim and they will facilitate this process.

## 8. Additional Resources

### AFLSE By-Laws

AFLSE By-Laws are available on the Clyde Cougar Football Club's website <https://clydefc.com.au/player-information/policies/>

### AFL Club Help

The following resources can be found on the AFL Community Club website:

#### • Concussion Management

<https://play.afl/learning-resource/afl-community-concussion-guidelines#article-0>

#### • Concussion Education Course (15 minutes)

<https://www.connectivity.org.au/courses/sport-related-concussion-course/>

#### • Critical Incident Response

<https://www.afl.com.au/clubhelp/club-management/critical-incident-response>

### The National Community Football Policy Handbook

The National Community Football Policy Handbook includes community football policies across four key areas: eligibility and registration; member protection and integrity; health and safety; and disciplinary.

The policy handbook can be found at <https://www.afl.com.au/clubhelp/policies/handbook> and includes the following resources:

#### • Member Protection and Integrity

- Vilification and Discrimination
- Safeguarding Children and Young People
- Social Media

#### • Health and Safety

- Injury Management
- Protective Equipment
- Concussion
- Active Bleeding

## Appendix 1 - First Aid Kit

Trainers are to carry first aid kits with them at all games (both home and away). For convenience, a smaller bum bag is provided for quick treatment of injuries during games, whilst the bigger first aid box provides more products for larger injuries.

Kits should be inspected frequently to ensure the completeness and usability of all first aid supplies. Any supply beyond its expiration date should be discarded and reported to the First Aid Coordinator.

Should you require more supplies throughout the season, please contact the First Aid Coordinator.

ITEM	QTY		ITEM	QTY	
	Box	Bag		Box	Bag
<b>Dressings/Adhesives</b>			<b>Hygiene &amp; PPE</b>		
Eye pad	1		Gloves	2	1
Universal Small/Wound Dressing	1		CPR Face Shield	1	1
Combine Dressing 10cm x 10cm	1		Tissues (pack)	1	1
Gauze Swab 10cm x 10cm	1		<b>Antiseptic/Cleaning</b>		
Adhesive Island Dressing	1		Saline: Eye & Skin Wash	3	1
Fabric Knuckles	1		Alcohol Swabs/Cleansing Wipes	10	6
Wound and Skin Closure	1		Safety Pins (small bag)	1	
Adhesive Shapes (box)	1		Hand sanitiser	1	
Band-aids	1	1	<b>Misc General</b>		
<b>Tapes</b>			First Aid Rigid Box	1	
Surgical Tape 2.5cm	1		First Aid Bum Bag		1
Zinc Oxide Dressing Tape 2.5cm	1		Instant Ice Packs	2	
Fabric Adhesive Dressing Tape (box)	1		Vomit Bags	2	
<b>Bandages</b>			Scissors Stainless Steel	1	
Heavy Crepe (firm support) 7.5cm			Tweezers Stainless Steel	1	
Heavy Crepe (firm support) 10cm	1		Tweezers Plastic	1	
Conforming (light support) 2.5cm	1		Splinter Probes Disposable	5	
Conforming (light support) 5cm	1		Note Pad & Pencil	1	
Triangular 110cm	1		Emergency Shock Blanket	1	
<i>* Ice Spray available upon request</i>			Cardboard Ventolin Spacer		1
			Ventolin		1
			Sunscreen	1	

## Appendix 2 - Injury Reporting

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## Appendix 3 – AFL South East Fines Schedule

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FINES SCHEDULE	
Breach	Fine
<b>Match Day</b>	
Incorrectly attired Officials (non-wearing of appropriate uniform as provided for by the By-Laws) -2nd breach and each subsequent breach.	1st breach \$50 2nd breach \$100
Unauthorised persons inside the coach's box	\$50 per breach
Starting or playing a Match without a qualified First Aider, ERC or Trainer (as defined).	Max \$200
Failing to supply a stretcher at the ground.	\$250
Team Officials smoking during the match or whilst wearing their vest/bib	\$250 per breach

## Appendix 4 - AFL South East/(AFLSE) AFL Community Concussion Guidelines

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### Summary:

- Concussion is an injury to the brain.
- All concussions require a cautious and conservative approach.
- Everyone in the team has a role to play in identifying and managing concussion.
- Teams should create a culture that promotes honesty of reporting and safety to optimise the management of concussion

### Day of injury management:

- The most important steps in initial management include:
  - Recognising that a player may have suffered a concussion or injury to their brain;
  - Removing the player from the match or training; and
  - Referring the player to a medical doctor for assessment.
- Any player who has suffered a concussion or is suspected of having a concussion must be medically assessed as soon as possible after the injury and must NOT be allowed to return to play in the same match or training session.
- At a minimum, there should be an appropriately accredited AFL First Aider or sports trainer at every match and the basic rules of first aid should be used when dealing with any player who is unconscious or injured.

### Return to play protocols:

Return to Play Framework: <https://play.afl/sites/default/files/2024-03/Four-Stages-of-Graded-Return-To-Play.pdf>

- The most important aspect of return to play protocols is guiding the player through key stages rather than simply following suggested timeframes or the number of days post injury.
- The critical stages for return to play following concussion include:
  1. A brief period of relative rest (24-48 hours),
  2. A period of recovery,
  3. A graded loading program (with medical clearance required before full contact training)
  4. Unrestricted return to play

It is expected that all trainers have the Head Check Concussion Management App downloaded on their phone

<https://www.headcheck.com.au/>

### Return to Play Overview (As per Page 16 of the AFL Community Concussion Guidelines <https://play.afl/sites/default/files/2024-03/The-Management-of-Sport-Related-Concussion-in-Australian-Football-Mar-24.pdf>):

Medical oversight by a doctor is very important in the management of concussion

- Any player with a concussion or suspected concussion must consult with a doctor:
  - i) As soon as possible after the initial injury to confirm the diagnosis and provide guidance on management,
  - ii) Before the player is allowed to return to full contact training, and
  - iii) If the progress of the player is slow or stalls due to symptoms at any stage (see section on management of more complicated cases below).

The day-to-day progression and movement between the steps of the program can be guided by the player and the medical personnel at the club (physiotherapist, sports trainer, AFL First Aider) or other healthcare providers in the community.

- The overall time taken to return to play = 1-2 days of initial relative rest + time taken to recover completely from the concussion + graded loading program with a medical clearance.
- The duration of concussion-related symptoms in the recovery stage is the largest determinant of timing to return to play.
- The earliest that the player may return to play (once they have completed a graded loading program and have obtained medical clearance) is on the 21st day following the concussion (where the day of concussion is designated day "0", see Appendices 5 and 6). This means that a player who is concussed in a match on a Saturday will miss at least the next two Saturday matches and will only be able to return to play on the third Saturday (i.e. the 21st day after the Concussion was sustained) if they have recovered according to the protocols and have been medically cleared to return to play. In many cases, recovery will be slower than the minimum 21 days.

### Sustaining a Concussion outside of AFLSE matches and/or Training:

If a Player sustains a diagnosed concussion outside of AFLSE matches or training, the Return to Training and Playing Guidelines for players following a Concussion, above are still to be followed.



**FIGURE 3.**

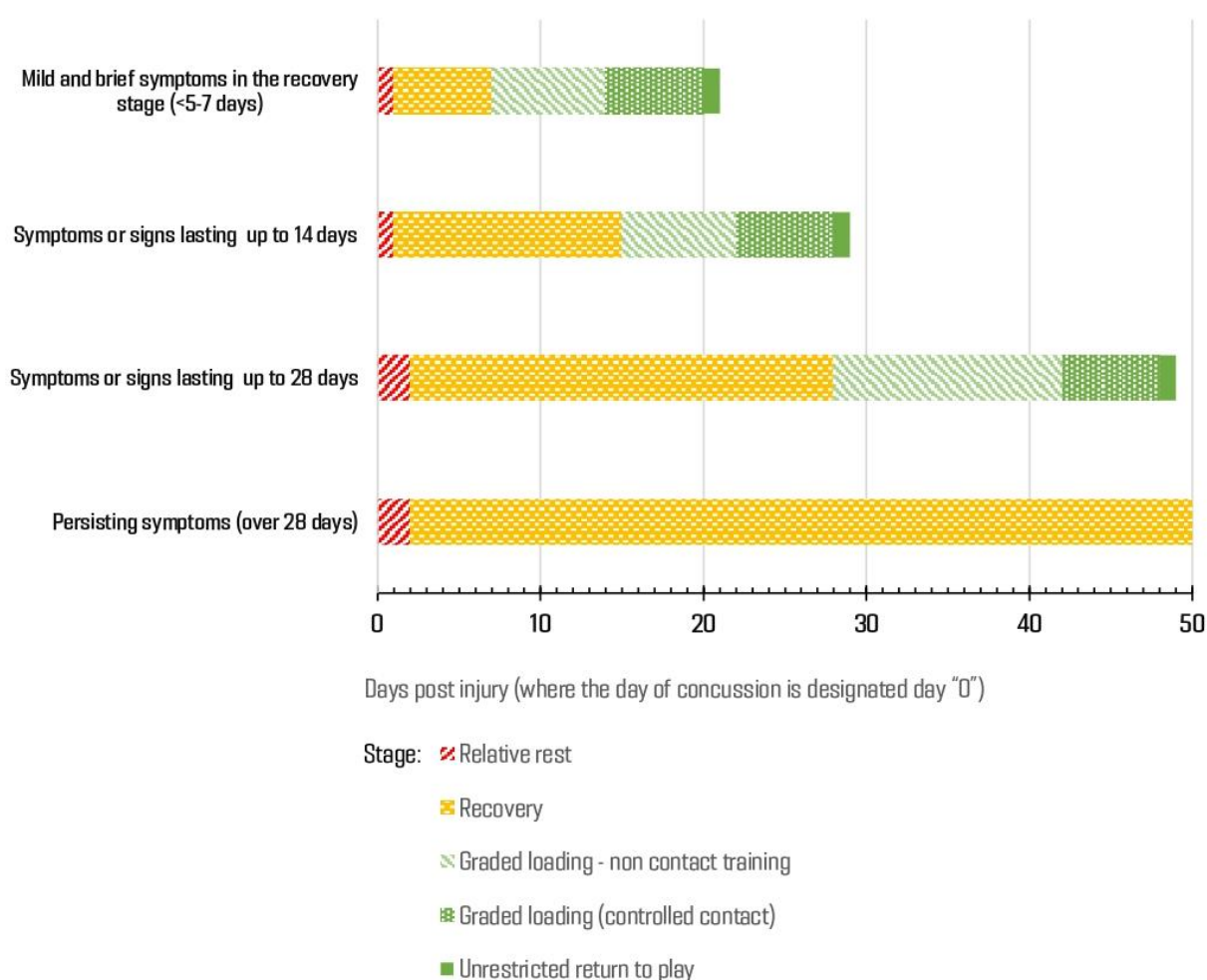
# STAGES OF GRADED RETURN TO PLAY

STAGE 1: RELATIVE REST <span style="float: right;">1</span>		
<b>ACTIVITY</b> <b>Relative rest</b> Gentle day-to-day activities - as guided by symptoms. Minimise screen time (TV, computer/homework/work, phone/social media and gaming)	<b>DURATION</b> 1-2 days	<b>CRITERIA TO PROGRESS</b> Nothing specific - should progress after 1-2 days
STAGE 2: RECOVERY <span style="float: right;">2</span>		
<b>ACTIVITY</b> <b>i. Daily activities that do not provoke symptoms</b> Increase day-to-day activities - as guided by symptoms. Include short walks. Limit screen time (TV, computer/homework/work, phone/social media and gaming) - duration depends on symptoms No team training drills. No resistance training.	<b>DURATION</b> Minimum 1 day	<b>CRITERIA TO PROGRESS</b> Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
<b>ii. Light aerobic exercise</b> Start light activity e.g., walking, jogging or cycling at a slow to medium pace. Aim for about 50-60% maximum heart rate (can carry a conversation when exercising) No team training drills. No resistance training.	<b>DURATION</b> Minimum 1 day	<b>CRITERIA TO PROGRESS</b> Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
<b>iii. Moderate aerobic exercise</b> Start moderate aerobic exercise e.g., walking, jogging or cycling at a medium pace. Aim for about 60-80% maximum heart rate. May continue with moderate aerobic exercise over a number of days/sessions if still has symptoms related to concussion. No team training drills. No resistance training.	<b>DURATION</b> Minimum 2 days	<b>CRITERIA TO PROGRESS</b> Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
<b>iv. High intensity aerobic exercise</b> Start high-intensity aerobic exercise (e.g. running or cycling at high intensity) Up to maximum heart rate. No team training drills. Can commence gentle resistance training (50-75% of usual loads)	<b>DURATION</b> Minimum 2 days	<b>CRITERIA TO PROGRESS</b> Progress if <b>a) Complete recovery of all concussion-related symptoms and signs at rest and with high intensity training;</b> <b>b) Have returned to school or work (without any need for modifications);</b>
STAGE 3: GRADED LOADING PROGRAM <span style="float: right;">3</span>		
<b>ACTIVITY</b> <b>i. Non-contact training</b> Return to full team training sessions - <u>non-contact activities only</u> Minimum of 2-3 training sessions with no consecutive days of football training (to allow for rest and recovery)	<b>DURATION</b> Minimum 7 days	<b>CRITERIA TO PROGRESS</b> Progress if remaining completely free of any concussion-related symptoms*
<b>ii. Limited contact training</b> Full team training allowed -able to participate in drills with incidental and/or controlled contact (including tackling) <u>No consecutive days of training (i.e. must have 'non-contact activity' days in between training sessions)</u>	<b>DURATION</b> Minimum of 7 days to progress through graded contact training	<b>CRITERIA TO PROGRESS</b> Progress if: a) Remaining completely free of any concussion-related symptoms* b) Player is confident to return to full contact training <b>c) Player has medical clearance to return to full contact training</b>
<b>iii. Full contact training</b>		<b>CRITERIA TO PROGRESS</b> Progress if: a) Remaining completely free of any concussion-related symptoms* <b>b) Player is confident to return to play</b>
STAGE 4: UNRESTRICTED RETURN TO PLAY <span style="float: right;">4</span>		

\*If concussion-related symptoms reappear at any time in stage 3 (Graded loading program) then the player should go back to the previous symptom-free step in stage 2 (Recovery) and seek medical review from a doctor.

**FIGURE 4.**

# EXAMPLES OF RETURN-TO-PLAY TIMELINES BASED ON PATTERNS OF RECOVERY FOLLOWING CONCUSSION\*



\*The timing of return to play depends largely on the duration of the recovery stage, which is variable in length from injury to injury and person to person.