

RUGBYSAFE & PLAYER WELFARE



Club RugbySafe Lead (previously Medical Officer)

Annual First Aid Risk Assessment	<input type="text"/>	Date of Completion:	<input type="text"/>
Medical Emergency Action Plan	<input type="text"/>	Date of Completion:	<input type="text"/>

Facilities & Equipment:	
Ambulance Access clearly marked	<input type="text"/>
Maintenance process all first aid supplies and equipment	<input type="text"/>
Exclusive use Medical Room	<input type="text"/>
Automated External Defibrillator (AED)	<input type="text"/>
Registered with Ambulance Service and/or Community Heartbeat Trust	<input type="text"/>

Data & Monitoring:	
Please tick where there is a process for completing and securely securing the following:	
Incident and Injury forms	<input type="text"/>
Player Medical history	<input type="text"/>
Emergency Contact details	<input type="text"/>

Personnel:		
Appointed Club Doctor	<input type="text"/>	<input type="text"/>
Appointed Club Physio	<input type="text"/>	<input type="text"/>
Other Health Care Professionals	<input type="text"/>	<input type="text"/>
Total number of qualified appointed first aiders	<input type="text"/>	
First aid training provider/ course	<input type="text"/>	

Please list any additional first aid equipment, other than standard first aid kits e.g. spinal board, stretcher, oxygen

Teamwork Respect Enjoyment Discipline Sportsmanship

March 2019

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Pitch-side First Aid/Immediate Care Provision all matches (home and away) and training: *Tick appropriate box per age group*

Team	Yes	No	N/A	Team	Yes	No	N/A	Team	Yes	No	N/A
U7				U15				Girls U13			
U8				U16				Girls U15			
U9				U17				Girls U18			
U10				U18				Women			
U11				U19				Other			
U12				Men's 1 st XV							
U13				Men's 2 nd XV							
U14				Men's 3 rd XV							

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