### **Cambridge University Aikido Club**

## **Safety Policy**

Cambridge University Aikido Club (the Club) is fully committed to the health, safety and wellbeing of all members.

Aikido is a contact sport and injuries do happen from time to time. However, with care and attention, a few basic precautions, and the guidance of a qualified coach, it may be practiced safely.

In order to promote the safety of everyone involved in the Club's activities, members are required to adhere to the guidance set out in this document.

#### 1. Safety

- 1.1. It is the policy of The Club to ensure, so far as reasonably possible, the health and safety of all participants and instructors engaged in training and competition with the Club.
- 1.2. The Club is affiliated to the British Aikido Board (BAB), which is recognised by Sport England as the national governing body for Aikido in the United Kingdom.
- 1.3. It is the responsibility of the Club's instructors to ensure that reasonable steps are taken to provide a safe and healthy environment for members to train in, including the completion of periodic risk assessments, making available this and other Club policies to the members, and responding appropriately to members' concerns if and when they arise.
- 1.4. It is required that a Club instructor, who is both recognised as a certified coach and insured by the BAB to teach Aikido, be present at all training sessions to ensure safe and healthy practice.
- 1.5. The Club expects all of its members to take reasonable precautions for their own safety and that of others.

#### 2. Coaching Staff and Committee Responsibilities

- 2.1. The Head Coach is accountable for all Health and Safety matters relating to the Club. The Head Coach enacts this responsibility in part by completing periodic risk assessment and updating this Safety Policy as necessary.
- 2.2. It is the responsibility of the Head Coach to ensure that all members of the Club are aware of the Safety Policy and that they observe the Club's Code of Conduct.

2.3. It is the responsibility of the Head Coach and those of the Club's instructors attending each practice session to ensure that mats are safe and in good condition, to maintain an atmosphere conducive to safe practice at all times, and to ensure that any accidents, injuries or 'near misses' are reported to the Head Coach, who may also be responsible for reporting these to the training venue.

#### 3. Club Members' Responsibilities

- 3.1. All Club members are expected to be familiar with the Club's Code of Conduct.
- 3.2. All Club members must wear suitable clothing for training. This requires Club members to buy a *dogi* (training uniform) suitable for the practice of Aikido or Judo, which should be white in colour, and to tie this with an *obi* (belt). Beginners are permitted to practice in suitable clothing (e.g. t-shirt, tracksuit bottoms or shorts).
- 3.3. Footwear must be removed before entering the mat area and must be put back on when leaving the mat area, including during breaks. Shoes or sandals must be worn when laying down or clearing away mats.
- 3.4. No jewellery, including watches and piercings, may be worn on the mat, as this may result in injury to the member or others.
- 3.5. Fingernails and toenails must be trimmed short and kept clean.
- 3.6. Water and sports drinks are permitted in the training venue but should be in a plastic bottle with a tight-fitting lid to avoid breakages and spillages. Drinks may not be brought onto the mat and any spillages must be cleaned up immediately.
- 3.7. Food should not be consumed in the training venue during regular sessions. Food may be permitted during organised competitions, but should not be consumed on or near the matted area.
- 3.8. Club members should abstain from consuming alcohol before training. Any member suspected of being under the influence of alcohol or drugs will be asked to leave the session and may be subject to the Club's disciplinary procedures.
- 3.9. It is the responsibility of all members to bring to the attention of the instructor(s) any injury, illness or other factor that may impact on their health or safety, or that of others.
- 3.10. It is the responsibility of all members to bring to the attention of the instructor(s) any situation which they feel to be unsafe or any shortcomings they perceive in the Club's safety procedures.
- 3.11. When practicing the competitive element of the sport of Aikido, a match or bout shall begin when the instructor calls *hajime* ('*start*') and play must stop when the instructor calls *mate* ('wait'). The match or bout shall end when the instructor calls *yame* ('*stop*').

- 3.12. Members participating in matches or bouts shall keep within the designated mat area at all times.
- 3.13. Aikido is a contact sport which includes pinning and locking techniques. A player may signal their intent to submit by tapping the floor or their opponent with their hand or foot, or by making a clear verbal signal. Without exception, upon registering this signal, their opponent shall release the lock or pin immediately.
- 3.14. Members observing a match or bout, or receiving instruction, shall be mindful of the safety of others. They should sit either in *seiza* or with the legs crossed.
- 3.15. It is the responsibility of all members to ensure that their *dogi* is clean and to maintain appropriate levels of personal hygiene for a sport which involves physical contact.
- 3.16. It is the responsibility of all members to adhere to any Health and Safety instructions relating to the use of the venue, for example, Fire Safety procedures.

#### 4. Accident Procedure

- 4.1. Accidents must be reported to an instructor and, when training at the University Sports Centre, to the reception staff.
- 4.2. Club instructors are trained in First Aid and should manage any accidents as appropriate to the injury or injuries sustained.
- 4.3. The accident reporting procedures of the training venue will be followed as soon after the accident as is reasonably possible. See the Appendices to this policy for details of the Minor Head Injury Protocol and Stepwise Return from Injury Protocol adhered to by the Club.
- 4.4. First Aid will be available to all members participating in competitive events.

#### 5. Insurance

- 5.1. The affiliation of the Club, venue and instructors to the BAB provides the Club, its instructors and members with Public Liability Insurance and its instructors with Professional Indemnity Insurance.
- 5.2. The affiliation of the Club to the BAB covers beginners for their first two sessions prior to registration. It is the responsibility of the Club's instructors to register new members.
- 5.3. All Club members must also be active members of the BAB to ensure that they are covered by the BAB's Insurance Policy.
- 5.4. Further information regarding the BAB Insurance Scheme may be viewed online at <a href="https://www.bab.org.uk/insurance">www.bab.org.uk/insurance</a>.

- 5.5. The Club contracts its coaches on a voluntary basis and requires that they are active members of the BAB and have a valid coaching certificate. Coaches are also expected to have been checked by the Disclosure and Barring Service (DBS) and to have an active Safeguarding certificate.
- 5.6. All Club equipment (not including members' own equipment) is maintained by the Club's Junior Treasurer, who is responsible for ensuring that it is safe and in good condition before and during use. Members may use their own equipment, but must ensure that this is also safe and in good condition at all times.

### **Appendix A:**

## **Minor Head Injury Protocol**

The Club takes the health and safety of its members seriously and follows the following protocol in the event of a minor head injury resulting in unconsciousness and/or concussion during training or competition.

Following the injury, if the person is awake (conscious), and there is no deep cut or severe head damage, it is unusual for there to be any damage to the brain. However, sometimes a knock to the head can be serious and may result in unconsciousness and/or concussion, in which case the following protocols should be adhered to.

Unconsciousness may result from a direct blow to the head, face, neck, or elsewhere on the body where an impulse force is transmitted through to the head and may result in the player being concussed.

Concussion can occur without the player being knocked out and losing consciousness – it should always be considered a possibility and be taken seriously.

We encourage any member who has concerns following a head injury to themselves or to another person, regardless of the injury severity, to seek immediate medical advice.

Second Impact Syndrome (SIS) is a serious medical condition in which a second concussion occurs before the first has properly healed, causing rapid and severe brain swelling. SIS can result from even a mild concussion which occurs days or weeks after the initial concussion and can have catastrophic results. By following the above protocols, the risk of SIS will be greatly reduced.

Concussions may result from many types of incidents, but unique issues arise from sports-related concussions because decisions need to be made about safe return to practice and competition after a period of recovery. Concussion is an 'invisible injury' that disrupts the brain's normal physiology and can affect mental stamina and function, causing the brain to work harder to complete even simple tasks. A concussion may involve loss of consciousness (being "knocked out"), but the majority of concussions are not associated with unconsciousness. All concussions are brain injuries and should be treated seriously.

Typical symptoms of concussion may include:

- Headache
- Nausea/vomiting
- Dizziness
- Unsteadiness/loss of balance and poor coordination
- Confusion
- Feeling stunned/dazed
- Seeing stars or flashing lights
- Ringing in the ears
- Double vision
- Typical signs of concussion may include:
- Loss of consciousness/impaired consciousness

- Fitting/seizures
- Slowness at answering questions/following instructions
- Being easily distracted/unable to concentrate on tasks
- Displaying inappropriate emotions (e.g. laughing, crying)
- Slurred speech
- Personality changes
- Sudden loss of motivation or 'fighting spirit'

If a player displays any of the above symptoms or signs, then possible concussion should be considered. Any player suspected of having concussion must be treated as though they are concussed, immediately withdrawn from a competition or training and assessed by a doctor or other qualified medical professional.

In the event of a blow causing unconsciousness/concussion, the affected member must be immediately withdrawn from training.

It is recommended that the player be sent to the local Accident and Emergency (A&E) department on the day of the incident for medical assessment and follow up even if they appear to be unaffected after the incident.

Complete physical and mental rest is mandatory for 7-10 days following the incident. This period of rest should be followed by a graduated return to training (see Stepwise protocol, Appendix B) over the following 14 days (NHS guidelines state that contact sports should be avoided for at least 3 weeks).

It is strongly recommended that the player be re-assessed by a competent medical professional before restarting training.

An incident report form must be completed.

NHS advice (NHS, 2018) states that the player should go to A&E if they have:

- been knocked unconscious but have woken up
- been vomiting since the injury
- a headache that does not go away with painkillers
- a change in behaviour, for example, being unusually irritable
- problems with memory
- a blood clotting disorder (e.g. hemophilia) or take blood thinners (e.g. warfarin)
- had brain surgery in the past

999 should be called if the player has:

- been knocked unconscious and has not woken up
- difficulty staying awake or keeping their eyes open
- a fit (seizure)
- problems with their vision
- clear fluid coming from their ears or nose
- bleeding from their ears or bruising behind their ears
- numbness or weakness in part of their body
- problems with walking, balance, understanding, speaking, or writing

## **Appendix B:**

# **Stepwise Return from Injury Protocol**

Returning to training after a minor head injury or other injury requiring medical attention should take place in a graduated way over a period of at least two weeks following the steps described below, with a minimum of 24 hours between each step. A player may only progress to the next step if they do not exhibit persistent or delayed symptoms. If symptoms persist or reoccur, the player should seek the advice of a relevant medical professional.

Step 1 - No Activity

Complete physical and cognitive rest for 7-10 days or until the player shows no symptoms. Players under 16 years of age require clearance from a relevant medical professional.

Step 2 – Light Aerobic Exercise

This can be walking, swimming or stationary cycling at an intensity of less than 70% of maximum heart rate.

Step 3 – Sport-specific Drills

For example, agility drills involving changes in direction, *tsugi-ashi* ('movement'), *tai-sabaki* ('avoidance') and light *uchi-komi* ('balance-breaking practice').

Step 4 – Contact Drills

Including progressive *uchi-komi*, *nage-komi* ('throwing practice') and combination drills.

Step 5 – Return to Training

Normal training resumes including *randori* ('free practice').

Step 6 – Return to Competition

Complete return to normal practice and competition.