



England
Rugby

SCHOOLS REGULATION 9 GUIDANCE

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INTRODUCTION

Schools have a responsibility towards the health and safety of pupils, staff, and volunteers. Measures should be in place to include at least training and first aid provision. Equipment should be in place to ensure that Rugby Union is delivered to the highest standards in a safe and enjoyable environment.

Regulation 9 applies to **ALL rugby union activity**, across a school including training, intra schools matches, block fixtures, festivals, and touch rugby.

This document is part of the **RugbySafe Toolkits**, a series of digital resources designed to provide information and guidance on the different topics and programmes covering player welfare in rugby union.

REGULATION 9 (PLAYER SAFETY)

So, what is needed for schools to ensure they are in line with Regulation 9?

RFU Regulation 9 (Player Safety) states:

9.3 All those involved in arranging any rugby activity:

- a. Must complete a risk assessment and ensure there is an appropriate level of immediate care and/or first aid cover, and equipment provided for that rugby activity as determined by such risk assessment.
- b. Must have access to a telephone to ensure that the emergency services can be contacted immediately when needed and ensure there is clear vehicular access for an ambulance or other emergency vehicle;
and
- c. Must comply with the RugbySafe First Aid (FA) and Immediate Care (IC) Provision Standards.

For the avoidance of doubt, Regulation 9.3(c) is a mandatory requirement and incidents with inadequate first aid provision will be investigated.

Below you will find further guidance, support and minimum standards to ensure your school puts in place the necessary measures, ensuring you're a safe and a compliant rugby playing school.

RISK ASSESSMENT

Schools must consider the First Aid and Immediate care provision as part of a rugby specific risk assessment. As part of your ERFUSU membership you pledge and indicate that you are a SAFE England Rugby School, having a rugby specific risk assessment is a standard as part of this process, and would be available upon request from the RFU/ERFSU.

The risk assessment must consider any specific individual school requirements, the type of activity, number of participants, facility, and pitch locations etc. to determine if additional provision is required.

The risk assessment is particularly important for:

- Matches or training which are simultaneously occurring on more than one site, whereby each site will require the appropriate level of cover.
- Tournaments and festivals, where simultaneous matches occur on different pitches, there are large numbers of players and multiple matches and high levels of activity happening in a short period, e.g., back-to-back games in one day.

The RFU Risk Assessment Tool has been developed in conjunction with Howden, the RFU's brokers of Club liability insurance.

The **Risk Assessment Tool** provides an online, easy to use platform for clubs, whereby pre-set questions are answered to complete and review relevant risk assessments, including a first aid specific version. This is available for universities to use if they would like but is not mandatory if you have your own processes in place. Alternatively, you may use your existing institutional specific risk assessment – the important thing is that students and staff are all familiar with its contents.

USEFUL INFORMATION AND LINKS

For more information on risk assessments visit the free [Risk Assessment tool](#).

INJURY REPORTING

Schools should have a process for recording incidents and injuries that require first aid attention. Every first aider should be made aware of the process/ have access to ensure all applicable incidents /injuries are recorded appropriately. The process must be GDPR compliant, with all records stored appropriately and securely.

There are several injury reporting tools available which schools are welcome to choose from however, the RFU have collaborated with Howden and Proactive to provide an affordable incident report app that provides a quick and efficient system to ensure injuries and incidents both on and off the pitch are recorded and maintained in a secure and appropriate manner. The app is available for schools to trial for free, you can visit the [Rugby Proactive App](#) here.

Schools need to be aware of what injuries should be reported to the RFU. It is crucial that all reportable injury events are submitted to the RFU for the appropriate support to be put in place. Reportable injury events are defined as:

- An injury which results in the player being admitted to a hospital (this does not include those that attend an Accident or Emergency Department and are allowed home from there, which is not reportable but should be recorded by the university in their usual manner.

- Deaths which occur during or within six hours of a game finishing.

AGE GRADE RUGBY

PITCHSIDE FIRST AID IMMEDIATE CARE PROVISION (TRAINING & MATCHES)

Schools and Colleges may be subject to different provision requirements as set out by their own governing body, which they must comply with if the level of provision is higher than that specified in this guide.

For tournaments and other multi-match events, please refer to the Tournaments, Festivals and Multi-match events section.

MINIMUM GUIDELINES

TRAINING SESSIONS

- 1 x Emergency First Aider per training group is based on a ratio of 1 first aider to approx.40 players.
- For larger groups additional Emergency First Aider (s) may be required and should be considered as part of the first aid risk assessment.
- For smaller groups it may be appropriate for 1 Emergency First Aider to cover more than 1 training group e.g. One Emergency First Aider covering U9s and U10s training session where there is a total of 40 or fewer children training. This should be considered as part of the first aid risk assessment.

MATCHES – ADULT MEN

- U7 – U8: 1 x Emergency First Aider per age group
- U9 - U18: 1 x Emergency First Aider Per match

BEST PRACTICE

One first aider per team provides a safer experience for the players and reduces the risk of stoppages in play and disruptions due to having one first aider per match.

Best Practice would be considered as the following:

- An individual not involved in the training or match pitch side to monitor for potential injuries.
- Away teams travelling to fixtures with designated first aider.

Minimum standard would be considered as the following:

- A player, coach or referee who is first aid qualified at the session (per team), or facility staff on site who participants can access in the event of an incident.
- Away team covered by home team first aid provision. Communication between clubs/ teams is encouraged to ensure cover is in place.

When the provision is a first aider per match, the home team is responsible for providing the Emergency First Aid (EFA) Cover.

If the minimum guidelines are not in place, those involved in arranging the activity must complete a live first aid risk assessment and be satisfied that it is safe for the activity to go ahead.

If you wish to report concerns having attended a venue, you can contact the RFU [here](#).

* A 'live risk assessment' is the practice of observing, assessing, identifying and (where removing/reducing risk in the current environment (e.g., playing area, number of people, facilities, provision etc.).

AGE GRADE RUGBY PITCHSIDE FIRST AID PROVISION OVERVIEW

For training sessions, 1 EFA per team is based on a ratio of 1 first aider to approx.40 players. For smaller groups it may be appropriate for 1 Emergency First Aider to cover more than 1 training group e.g. One Emergency First Aider covering U9s and U10s training session where there is a total of 40 or fewer children across both age groups.

	MINIMUM STANDARD		BEST PRACTICE
MEN	TRAINING	MATCHES	MATCHES
U7	1 Emergency First Aider per age group	1 Emergency First Aider per age group	1 Emergency First Aider per age match
U8	1 Emergency First Aider per age group	1 Emergency First Aider per age group	1 Emergency First Aider per age match
U9	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U10	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U11	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U12	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U13	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U14	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team

U15	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U16	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U17	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team
U18	1 Emergency First Aider per age group	1 Emergency First Aider per age match	1 Emergency First Aider per age team

TOURNAMENTS AND FESTIVALS

Where there are multiple teams playing at the same time (e.g., festivals and tournaments) a first aid risk assessment is required to determine the number and type of provision required. The organiser should consider the levels of potential additional medical cover that may be required depending on the size of the event e.g., Ambulance/ Paramedic and/or Advanced Immediate Care Practitioner (Doctor) on site.

The organiser is responsible for determining and organising appropriate venue Emergency First Aider provision as part of the event first aid risk assessment (e.g., requiring that every team brings a first aider and/or organising for specific event first aid/immediate care provision). A designated central first aid tent/area should be considered as part of the event first aid risk assessment.

Please note that these standards do not account for any medical provision for crowds and spectators at an event or festival, this medical provision should be considered separately to the FA cover provision above.

MINIMUM GUIDELINES

NON-CONTACT

- U7 – U8 Tag/Touch Union – Boys and Girls: Emergency First Aider per 2 matches or 1 full size pitch + 1 Emergency First Aider per venue.
- Non-Contact Formats e.g., Touch/Tag events (including Mixed and Age Grade): Emergency First Aider per 2 matches or 1 full size pitch + 1 Emergency First Aider per venue.

CONTACT RUGBY (E.G 15 a side, 10, 7s and xRugby)

- U9 – U13 Boys and Girls 1 x Emergency First Aider per Match + 1 x Emergency First Aider per venue.
- U14 – U18 Boys and Girls 1 x Emergency First Aider per Match + 1 x Emergency First Aider per venue.

BEST PRACTICE

One first aider per team and an immediate care practitioner will provide a safer experience and reduce the risk of stoppages in play. The event organiser is responsible for first aid provision and ensuring there is allocated cover for each match.

If the minimum guidelines are not in place, the host involved in arranging the activity must complete a live first aid risk assessment* and be satisfied that it is safe for the rugby activity to go ahead.

* A 'live risk assessment' is the practice of observing, assessing, identifying and (where removing/reducing risk in the current environment (e.g., playing area, number of people, facilities, provision etc.).

TOURNAMENTS AND FESTIVALS PITCHSIDE FIRST AID PROVISION OVERVIEW

Organisers of tournaments and festivals are responsible for undertaking a risk assessment to determine the level of provision.

	MINIMUM GUIDELINES	BEST PRACTICE
AGE GRADE		
TAG, TOUCH & NON-CONTACT	1 Emergency First Aider per 2 matches / 1 full pitch	1 Emergency First Aider per team
	MINIMUM GUIDELINES	BEST PRACTICE
CONTACT	1 Emergency First Aider per match	1 Emergency First Aider per team

MEDICAL EMERGENCY ACTION PLAN (MEAP)

Schools should have a Medical Emergency Action Plan (MEAP) in place to identify needs and protocols in an emergency situation.

The MEAP should include ensuring Ambulance access is available and access points are kept free of parked vehicles or other obstruction at all times.

The MEAP should be shared with all relevant individuals such as coaches and teachers and staff involved.

USEFUL INFORMATION AND LINKS

More information on the MEAP including a template is available in the [Rugbysafe Essential Guides, Forms and Templates Toolkit](#).

FIRST AID / IMMEDIATE CARE EQUIPMENT

Schools should:

- Have a match-day centrally dedicated first aid contact point that is easily recognisable and accessible e.g., first aid room or gazebo/tent.
- Provide each EFA with a fully stocked first aid kit, as well as a separate team/central fully stocked first aid/immediate care kit.
- Consider the need and practicalities of an allocated first aid room that is set up/ used specifically for FA/IC treatment.
- Consider the need and practicalities for any other additional equipment e.g., Automated External Defibrillator(s) (AED) and where appropriate have a process in place for the storage, usage, and maintenance as appropriate.

HEADCASE: CONCUSSION AWARENESS

Schools should ensure that all teachers, coaches, match officials, parents and players are aware of the [RFU's HEADCASE concussion guidelines](#).

The [HEADCASE module](#) is a free online training module that takes approx. 30 minutes to complete and provides some key information on what to look out for and how to manage a potential concussion.

The Headcase resources have recently been updated to ensure that they are in line with the Government's publication of Concussion Guidelines for Grassroots Sport which now applies across all UK sports.

Any player with a suspected concussion must be removed from play immediately and not return to the game. **"If in doubt, sit them out."** They must then undertake a minimum rest period from all sports as stated and follow the Return to Play Programme. Institutions may wish to consider internal reporting processes to support students with suspected concussions and any impact on their academic studies.

This must be adhered to irrespective of the qualification/profession of the individual providing the pitch-side first aid and/or immediate care provision.

More information, including the concussion management guidelines, resources and the online awareness modules is available on the [HEADCASE](#) webpage.

REMEMBER:

There is NO Head Injury Assessment (HIA) process in the community game.

This includes all age grade and adult games and competitions.

RECOGNISE & REMOVE

A PLAYER SHOULD STOP PLAYING/TRAINING AND NOT RETURN IF:

One or more of the following symptoms are present:

- > Headache
- > Seizure or convulsion
- > Dizziness or balance problems
- > Confusion
- > Difficulty concentrating
- > Nausea or vomiting
- > Drowsiness / fatigue
- > More emotional or sadness
- > Blurred vision, sensitivity to light
- > Irritable
- > Difficulty remembering or amnesia
- > Neck Pain
- > "Don't feel right"

They have one or more of the following observable signs:

- > Loss of consciousness
- > or responsiveness
- > Slow to get up
- > Unsteady on feet
- > Incoordination
- > Clutching of head
- > Blank or vacant look
- > Dazed/ Confused