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OPERATIONAL MANUAL

Programs & Services

Last updated July 31, 2025

any sections in YELLOW are pending possible CHANGES

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A. INTRODUCTION

1. Mission, Vision and Fundamental Principles

A mission statement describes the primary business or thrust of an organization, its reason for being.

To support and optimize competitive sport performance through the delivery of high quality and evidence-based sport medicine and science services to athletes and coaches with a priority on the Sask Sport Inc. membership.

Vision is shaped by values and values come alive through vision. The vision describes the preferred future. The future state articulates a view of a realistic, credible, attractive future for the constituency.

To be recognized as experts and leaders, within the Sask Sport Inc. community, in the development and delivery of quality sport medicine and science services.

To contribute to the optimal performance and enhanced health and safety of all designated Sask Sport Inc. members.

Values are the fundamental principles and beliefs that form the foundation of an organization. These principals guide the organization's behavior, services and programs.

- The SMSCS believes in providing the highest quality, evidence-based sport medicine and science services.
- The SMSCS believes in services being provided by the most qualified professionals (consultants and staff) available.
- The SMSCS believes in continuous learning for all its professional members, consultants and staff.
- The SMSCS believes in "True Sport" the national ethics strategy for sport.
- The SMSCS believes in governance, management and operation that is consistent with democratic principles.
- The SMSCS believes in providing accessibility to all programs and services it offers to designated Sask Sport Inc. members.
- The SMSCS believes participation in sport contributes to a healthy lifestyle and improves the quality of life.

2. Strategic Priorities

1. Delivery of Direct Science and Medicine Services to Athletes, Coaches and Officials
2. Development of Sport Medicine and Science Professionals
3. Organizational Development

3. Board of Directors

The Board of Directors manages the property and business of the SMSCS, develops policy and provides leadership, and provides direction and guidance to the Management Committee in order to promote the objectives of the SMSCS.

4. Staff

The following is the contact information for the staff of the Sport Medicine and Science Council of Saskatchewan.

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B. SERVICE TIERS & ELIGIBILITY

1. Service Tiers (Effective April 2024)

Canadian Sport Centre Saskatchewan - Athlete Science Service Eligibility

<u>Service Area</u>	<u>CA Elite - Podium, SR Card</u>	<u>CA Elite - C or D Card</u>	<u>CA Development & Retired</u>
<u>Strength, Nutrition, Mental Performance, Physiology, Biomechanics, Testing/Screens</u>	<u>25 hours yearly with no more than 50% used in S&C</u>	<u>20 hours yearly with more than 50% used in S&C</u>	<u>7 hours yearly with no more than 50% used in S&C</u>

Canadian Sport Centre Saskatchewan-Athlete Treatment Reimbursement Service Levels

Service Area	% Eligible	CA Elite - Podium, SR Card	CA Elite - C or D Card	CA Development & Retired
Massage, Acupuncture, Physical Therapy, Athletic Therapy, Chiropractic	100%	See CAIP Insurance Program	See CAIP Insurance Program	See CAIP Insurance Program, if applicable
Sport Bracing, Orthotics, Other	Contact for details	Considered on a case by case basis	Considered on a case by case basis	Considered on a case by case basis

CSCS Notes:

- Payment for these services is provided by the Canadian Sport Centre Saskatchewan.

Sport Medicine and Science Council of Saskatchewan

Jan 1, 2024

TIER	ELIGIBILITY	SERVICES
PSO (Tier 1)	<p>*See notes below in regards to SMSCS services.</p> <p>*In addition to the SMSCS "service eligibility" may also be eligible for "enhanced services" through the CSCS (see below for details)</p>	<ul style="list-style-type: none"> \$4750 towards a holistic comprehensive Sport Medicine & Science service plan
PSO (Tier 2)	<p>*See notes below in regards to SMSCS services.</p> <p>*In addition to the SMSCS "service eligibility" may also be eligible for "enhanced services" through the CSCS (see below for details)</p>	<ul style="list-style-type: none"> \$3950 towards a holistic comprehensive Sport Medicine & Science service plan
PSO (Tier 3)	<p>*See notes below in regards to SMSCS services.</p> <p>*In addition to the SMSCS "service eligibility" may also be eligible for "enhanced services" through the CSCS (see below for details)</p>	<ul style="list-style-type: none"> \$3150 towards a holistic comprehensive Sport Medicine & Science service plan
PSO (Tier 4)	<p>*See notes below in regards to SMSCS services</p>	<ul style="list-style-type: none"> \$1200 for Science and/or Medicine Services
Sask High Schools Athletic Assoc Coaches Association of Sask Districts for Sport, Culture and Rec. Sask Games Council	<p>*See notes below in regards to SMSCS services</p>	<ul style="list-style-type: none"> \$1450 for Science and/or Medicine Services
UNIVERSITY TEAM & INDIVIDUAL (University)	<ul style="list-style-type: none"> Huskie athletes/teams Cougar/Rams athletes/teams <p>*See notes below in regards to SMSCS services.</p>	<ul style="list-style-type: none"> Each Saskatchewan University is allocated a specific dollar allocation, with each team receiving an equal amount of service. (currently \$650 per University team per year) Requests must be made through the Coach.
INDIGENOUS SPORT ENHANCEMENT PROGRAM	<ul style="list-style-type: none"> Sport Teams preparing for North American Indigenous Games Indigenous Summer and Winter Games (eg. Tony Cote Games) Other Elite Teams attending Nationals 	<ul style="list-style-type: none"> lump sum \$3950 Other reasonable expenses (i.e.: travel) will also be provided on a case per case basis.
FEE-for-SERVICE (services provided to clients not eligible for "in kind services")	<ul style="list-style-type: none"> Grassroots Athletes, Schools, Club Teams, Rec. Boards, Health Districts, Recreational and professional Athletes, Non-Profits Corporate, Retail, and for-profit Businesses 	<ul style="list-style-type: none"> Cost of \$130/hr (+GST) for Consulting Service Consulting will be provided as per the SMSCS Policy.

● **SMSCS NOTES:**

- Service Access is based on the PSO's Fiscal or Competitive year. Additional Service in Excess are available at a subsidized cost as long as budget permits.
- Service for the PSO is expensed at \$130/hr & Individualized service is expensed at \$85/hr
- All Travel Expenses and any additional Expenses are the responsibility of the athlete/team.
- Free Services provided does not include Medical Coverage at Events (personnel at events) Exercise/Rehab/Training Equipment and Supplies, 1st Aid Supplies and Kits Sales, Equipment Rental
- Priority will be given to sports that have a comprehensive science/medicine plan.
- Requests must be made through the Coach, Technical Director, High Performance Director, or Executive Director.
- Consulting and services available will be provided as per the SMSCS Policy.
- Unless authorized, no more than 50% of service allocation can be provided within one specific science or medicine area.
- If an athlete insists, they are within a specific Tier, it is the responsibility of the athlete to confirm his/her Tier Level through a PSO or NSO.
- PSO's may be eligible to utilize (medicine) to cover the cost of an initial injury assessment for Saskatchewan High Performance Athletes only if approval is obtained from the PSO and all other insurance programs have been utilized. Contact the SMSCS at edcoordinator@smscs.ca prior to the appointment to discuss payment/coverage options. Any additional treatments will be at the cost of the athlete paid directly to the clinic/therapist.

CSCS ENHANCED SERVICES FOR TARGETED PSO'S

The main purpose of the enhanced sport science and sport medicine service program is to increase and support the holistic development of athletes in the identified sports. This will include development, implementation, monitoring and supervision of a comprehensive strength and conditioning program (core strength, weight training, stretching, etc.). In addition, service and education in all areas as identified by the CSCS and SMSCS below should be part of the holistic plan.

This program will be led by the network of consultants (experts) currently available to our sports through the Council. This increased service access will come with increased accountability for these sports through the requirement of clearly outlined plans that include important components including monitoring and key expected outcomes (testing outcomes, etc.).

1. As mentioned, holistic development will be the focus. Encouraging access to services in the following areas is strongly recommended:

- Nutrition
- Mental Performance
- Fitness Testing (eg. A pre activity physical assessment such as FMS or other sport related tests either through a university laboratory or consultant field testing)
- Sport Medicine (eg. sessions on injury care and prevention education, concussion education, self-massage education, sport injury prevention and care workshops, sport wrapping & taping workshops)
- Sleep & Performance
- Biomechanical Analysis (e.g. video & technical skill analysis)

2. The Council and CSCS have a contracted Integrated Support Team (IST) Planner whose job description is to contact, meet and solicit science and medicine plans from the Provincial Sport Organizations (PSOs). In addition, the IST Planner will coordinate IST meetings periodically for each PSO. The SMSCS will coordinate and provide services to each PSO and ensure the plan is holistic in provision.

3. Sport science and sport medicine services are provided using SMSCS approved staff and “casual” consultants.

Listed below are the current targeted PSO's who are eligible for the enhanced sport science and sport medicine services. Total funding amounts for each sport are determined by the CSCS and SMSCS and may change depending on each sports plan submission. Total funding allocation for 2024-2025 is \$165,000.00.

Artistic Swim (synchro), Athletics, Baseball, Basketball, Curling, Diving, Gymnastics, Hockey, Judo, Rowing, Skate Canada (figure skating), Ski - Biathlon, Speed Skating, Soccer, Swim, Tennis, Triathlon, Volleyball, Water Polo, Wheelchair Sports (Bball), Wrestling, ParaSport(other)

2. Eligibility and Service

Canadian Sport Centre Saskatchewan Athletes

- Athletes are provided limited individualized service based upon the Tier they are in.
- Services are usually based upon the CSCS fiscal year of April 1st – March 31st.
- Additional Service Hours in excess are available at a subsidized cost.
- All Travel Expenses and any additional Expenses are the responsibility of the athlete.
- The allocation of the hours should not exceed more than 50% in any one area during the time period mentioned above.

Provincial Sport Governing Body Tiers

- PSO teams/groups are provided limited group service based upon the Tier they are assigned too.
- For group service the request for support should come through the Coach, Technical Director or High Performance Director, or Executive Director. Group service may be provided to athletes, coaches, officials, parents or any combination as determined by the PSO.
- The SMSCS will provide “individual athlete support” based upon the expenditure of 1.5hrs of individualized service = 1.0hrs of group service.
- For individualized service the request for support should come through the Coach, Technical Director or High Performance Director, or Executive Director who will then make the request to the SMSCS on their behalf.
- No single athlete may exceed 50% of the total allocation of individual athlete support.
- The services will be provided by a consultant based on the Consultant Selection Criteria.
- The SMSCS through consultation with the coach, executive, technical, or high performance director will determine the planning of service hours.
- The allocation of the hours should not exceed more than 50% in any one area during the time period of a calendar year (January – December).
- Additional Service Hours in Excess are available at a subsidized cost.
- All Travel Expenses and any additional Expenses are the responsibility of the team.

UNIVERSITY TEAMS

- The SMSCS has provided a specific budget allocation of \$650.00 to each University team (5 hours X \$130/hour). However, the Varsity Sport programs may choose to ‘pool’ the team funds into 1 larger pot of available service access.
- Additional Service Hours in excess are available at a subsidized cost.
- All Travel Expenses and any additional Expenses are the responsibility of the team.
- The allocation of the hours should not exceed more than 50% in any one area during the time period of a calendar year (January – December).
- The SMSCS will provide “individual athlete support” to each University sport team that will be credit against their allocation.
- Athletes involved in University Sports must make the request for individual support through their Coach or Athletic Director, who will then make the request to the SMSCS on their behalf.

- The determination of eligibility of these additional individual services hours would be the responsibility of the coach.
- The services will be provided by a consultant based on the Consultant Selection Criteria.
- Additional Service Hours in Excess are available at a subsidized cost.
- All Travel Expenses and any additional Expenses are the responsibility of the athlete.

3. Fee-For-Service Policy “Draft” to be determined in 2025 Strat Plan

A. Overview

Currently the Council provides some fee-for-service to athletes, teams, schools, etc who have either: (1) utilized all their “in kind” services or (2) are not part of our designated core clients (Sask Sport members) and therefore do not receive any in-kind services.

B. Designated core clients who have utilized their in-kind service allocation

The Council will always provide fee-for-service for designated core clients who have utilized their in-kind service allocation and have other resources for additional services.

The Council will charge the consultant fee only to designated core clients who have utilized all their in-kind services

These clients include the following:

PSO’s (PSO designated athletes, coaches and officials for “in-kind” services)

University varsity teams

Sport Districts

Saskatchewan High Schools Athletics Association

Coaches Association of Saskatchewan

Sask Games Council

C. Non-Designated Clients

These clients include the following:

PSO’s members/teams who are not eligible for “in kind” services (eg. club teams)

Professional Sport Teams (eg. Saskatoon Blades, Saskatchewan Roughriders, etc)

Private companies

Club sport teams (not affiliated with a PSO)

Professional athletes

Recreational athletes

Current Status of Fee-for-Service for Non-Designated Clients

Sport Science

Currently requests for sport science services from non-designated clients are handled as follows:

Request comes directly to the Council – Council will set-up the request, invoice the client and pay the consultant (no profit). This is not ideal, as the Council consumes administrative time paid for by Sask Sport funding to provide services to a non-designated client. This time could be used to promote and provide services to our designated clients.

Request comes from a consultant to the Council – Council informs consultant they should do the request themselves and invoice said client directly. Council would track this request as a referral. Less work and administrative time for the Council.

Sport Medicine

Currently requests for sport medicine services from non-designated clients are handled as follows:

Concussion, injury prevention, athlete sport massage presentations

Request comes directly to the Council or from a consultant–The Council will set-up the request, invoice the client and pay the consultant (no profit for Council). This is not ideal as this request consumes Council administrative time paid for by Sask Sport funding to provide services to a non-designated client. This time could be used to promote and provide services to our designated clients. However, the Council would not refer on to a consultant as the programs/services/presentation above were created by the Council.

Note: In the rare case where a request involves a service the Council does not offer the Council informs consultant they should do the request themselves and invoice said client directly.

Event Coverage

Request comes directly to the Council or from a consultant–The Council will set-up the request, invoice the client and pay the consultant (no profit for Council) for all requests from our designated core clients (eg. PSO's, Universities)

If a request received is from a non-designated client the Council's first option is to not handle the request but forward the request on to our consultants and allow them to fill request. The Council would track request as a service statistic under referrals. Providing service to a non-designated clients consumes valuable staff time that could be used to promote and provide services to our designated clients (eg. PSO's). In rare instances, the Council may decide to cover request if not too busy or to get hours for consultants and service providers.

Sport Aid and Sport Taping Workshop

Request comes directly to the Council or from a consultant. The Council will provide this service but only to designated clients. This service is not available on a fee-for-service basis to non-designated clients.

D. Fee-for-service recommendations and/or options for the future

Sport Science Services

Option 1 – Sport Science - Council operates a referral service – Requests come to the Council and we refer on to the list of consultants interested in providing the service. Consultant would determine fee and invoice the client directly for the service. Council could track the “referral” in its services provided report. This helps private business consultants and the Council could track the referrals in our service statistics.

Option 2 – Sport Science - Council operates a fee-for-service for non-designated clients – Requests come to the Council and we set-up the request, invoice the client and pay the consultant. In this option, the Council would need to add an administrative fee (example \$50.00) to the consultant fee. Total charge as of January 1, 2023 would be \$180.00 for group services and \$135.00 for individual services. The Council must not consume administrative time that is

paid for by Sask Sport funding, to provide service to a non-designated client. This type of request takes away valuable staff time that could be used to promote and provide services to our designated clients (eg. PSO's)

This Option may require significant staff and consultant resources. This may not be feasible. Also, the fees may be cost prohibitive for club teams and other non-profit organizations.

Note: May need to have a separate charge for club and recreational teams and other non-profits as the cost could be prohibitive. However, the administrative time is the same for all groups.

Sport Medicine Services (injury care and prevention, concussion, athlete sport massage)

Only option here is the Council operates a fee-for-service for non-designated clients. The reason for this is that the presentations/sessions available were developed by the Council and would need to be provided by the Council – Requests come to the Council and we set-up the request, invoice the client and pay the consultant. In this option, the Council would need to add an administrative fee (example \$50.00) to the consultant fee. Total charge as of January 1, 2023 would be \$180.00 for group services and \$135.00 for individual services. The Council must not consume administrative time that is paid for by Sask Sport funding, to provide service to a non-designated client. This type of request takes away valuable staff time that could be used to promote and provide services to our designated clients (eg. PSO's)

This Option may require significant staff and consultant resources. This may not be feasible. Also, the fees may be cost prohibitive for club teams and other non-profit organizations.

Note: May need to have a separate charge for club and recreational teams and other non-profits as the cost could be prohibitive. However, the administrative time is the same for all groups.

Sport Medicine Services – Event Coverage

The recommendation for this program is that we continue with the current policy as follows:

Request comes directly to the Council or from a consultant–The Council will set-up the request, invoice the client and pay the consultant (no profit for Council) for all requests from our designated core clients (eg. PSO's, Universities)

If a request received is from a non-designated client the Council's first option is to not handle the request but forward the request on to our consultants and allow them to fill request. The Council would track request as a service statistic under referrals. Providing service to a non-designated clients consumes valuable staff time that could be used to promote and provide services to our designated clients (eg. PSO's). In rare instances, the Council may decide to cover request if not too busy or to get hours for consultants and service providers.

Sport Aid and Sport Taping Workshop

Request comes directly to the Council or from a consultant. The Council will provide this service to designated and non-designated clients. Non-designated clients would be charged an appropriate administrative fee in addition to all regular charges. Providing service to a non-designated client consumes valuable staff time that could be used to promote and provide services to our designated clients (eg. PSO's).

C. CONSULTANT POLICIES & PROCEDURES

1. Service Provision Mandate

The SMSCS's Mandate for educational consultations is as follows:

- To provide **Group/Team/Sport** consultation and education
- To provide **Coach** consultation and education
- To provide **Individual Athlete** consultation and education only for the purpose of problem solving or troubleshooting, above and beyond any service that has already been provided to the **Group/Team**. Requests for **Individual Athlete** consultation and education will only be provided through confirmation with the athlete's Coach, Technical Director, etc.

2. Selection Criteria of Consultants for Consultations

The following criteria will be used to determine what Consultant performs a service request:

1. Teams, groups, and athletes will have the liberty to select the consultant they wish to utilize based upon the science or medicine area they are requesting for. The following can be offered in the assistance of their consultant selection:
 - SMSCS Staff availability
 - Geographical Location
 - Most Knowledge and Experience relevant to the Sport/Group
 - Referral to the Consultant Directory <http://www.smscs.ca/directory.htm>
2. In the case where, teams, groups, athletes refuse to choose their consultant, Staff will make the selection based on the following:
 - SMSCS Staff
 - Geographical Location
 - (If a request occurs in a specific location and we have an approved Consultant in that area, that individual will be considered)
 - Most Knowledge and Experience relevant to the Sport/Group
(If numerous Consultants with the same qualifications reside in one specific area, the Consultant who is most knowledgeable to the Sport/Group will be used)
 - In the case where the above two (2) criteria do not determine the consultant to be utilized. The first consultant to respond to the request will be given the consult.

3. Consultant Qualifications (minimum standards)

Consultant Qualifications (minimum standards) (As of June 2024)

<u>Science / Medicine</u>	<u>Minimum Qualifications</u>	<u>Services</u>
BIOMECHANICS	Master of Science <u>or</u> Master of Kinesiology <ul style="list-style-type: none">• Must have valid liability insurance• Should have teaching/presentation experience• Should have experience working with high performance athletes and be actively involved in high performance sport science (<i>new applicants</i>)	<ul style="list-style-type: none">• Technical Skill Analysis by looking at the muscular, joint, and skeletal actions while performing a given task.

	<p><i>must have the ability to demonstrate their knowledge & experience)</i></p> <ul style="list-style-type: none"> • Must have experience with video analysis & technical skill analysis 	<ul style="list-style-type: none"> • Can be accomplished through: <ul style="list-style-type: none"> - Qualitative research in order to understand a problem (ie: injury, skill flaw) and possibly develop potential quantitative research. - Quantitative research in order to generate numerical data in order to use statistics (ie: angles, speed, distances, etc) - May use: (Video, GPS, Accelerometry, Motion Sensors, Force Plates, Gyroscopes, Radar) • Sleep and Performance Workshop (must attend instructors' workshop)
EXERCISE PHYSIOLOGIST	<p>Master of Science or Master of Kinesiology or Post Graduate Diploma in Kinesiology Relevant to the Science of Exercise Physiology</p> <ul style="list-style-type: none"> • Must have valid liability insurance • Should have teaching/presentation experience • Should have experience working with high performance athletes and be actively involved in high performance sport science (<i>new applicants must have the ability to demonstrate their knowledge & experience</i>) • Must have one of the following certifications; CSCS, CSEP-CEP, ACSM-ET • Should be a member in one of the following; NSCA, SKESA, CSEP, ACSM 	<ul style="list-style-type: none"> • Metabolic Conditioning: Training the Aerobic and Anaerobic Systems • Physiological Program Planning & Design • Physiological Testing-Lab <ul style="list-style-type: none"> -Testing includes: Max VO₂, flexibility, lean body mass, fat mass, and capacities, aerobic/anaerobic power etc. • Physiological Testing-Field <ul style="list-style-type: none"> -Testing includes: leger, vertical jump, sit-ups, etc.) • Sleep and Performance Workshop (must attend instructors' workshop)
STRENGTH & CONDITIONING SPECIALIST	<p>Must have a post-secondary degree in a health science related field</p> <ul style="list-style-type: none"> • Must have valid liability insurance • Should have teaching/presentation experience • Should have experience working with high performance athletes and be actively involved in high performance sport science (<i>new applicants must have the ability to demonstrate their knowledge & experience</i>) • Should be a member in one of the following; NSCA, SKESA, CSEP, ACSM • <u>Credentials</u>: Must have Certified Strength & Conditioning Specialist (CSCS) with the following: <ul style="list-style-type: none"> - a minimum of 100 hours of direct strength conditioning experience with a healthy Sport population supervised by a CSEP-CEP or CSCS certified individual; - must provide a detailed accountability of the required experience hours and have this experience verified and signed by a CSEP-CEP or CSCS certified supervisor. 	<ul style="list-style-type: none"> • Core Strength • Concepts in Warm-up, Cool-down, before competition or practice • Stretching properly before competition or practice • Weight Training Exercise Technique • Resistance Exercise Training for Muscle Mass, Strength, and Power • Foot Speed & Agility Development • Plyometric Training • Exercise Program Design and Prescription • Exercise Ball Training • Field Physiological Tests (eg. physical assessment, leger, vertical jump, sit-ups) • Sleep and Performance Workshop (must attend instructors' workshop)

	<p><u>Or</u></p> <ul style="list-style-type: none"> • <u>Credentials</u>: Canadian Society of Exercise Physiology – Certified Exercise Physiologist (CSEP-CEP) designation <p>Note: If an applicant possesses both CSEP-CEP & CSCS credentials, the CSEP-CEP takes priority.</p>	
MENTAL PERFORMANCE CONSULTANT	<p>Minimum of a Master's Degree in Kinesiology, Science, Arts, or Education with relevance in sport psychology or sport mental skills.</p> <p>All new mental performance consultant applicants must have one of the following prior to applying:</p> <ul style="list-style-type: none"> • A professional membership with the Canadian Sport Psychology Association (CSPA) https://www.cspa-acps.com/ • Be a Certified Consultant with the Association of Applied Sport Psychology (AASP) https://appliedsportpsych.org/ 	<ul style="list-style-type: none"> • Parent-Athlete-Coach-Relations • Communication Skills • Team Building & Group Dynamics • Attentional control (focus/concentration) • Emotional control (stress management) • Arousal control, Self-awareness • Goal Setting, Mental Imagery • Self-Talk • Routines before, during and after competition • Ideal Performance State • Mental Toughness Training • Maximizing effectiveness of practice • Sleep and Performance Workshop (must attend instructors' workshop)
SPORT DIETITIAN	<p>OPTION #1 - Applicants must have Minimum of a Bachelor of Science in Nutrition</p> <ul style="list-style-type: none"> • Must be a member with Dietitians of Canada (DC) https://www.dietitians.ca/ • Must be a member of Saskatchewan College of Dietitians (SCD) • Must have liability insurance • Must have teaching/presentation experience • Must have completed one of the following: <ul style="list-style-type: none"> - Certified Specialist in Sport Dietitian (CSSD) designation https://www.cdrnet.org/ - International Olympic Committee (IOC) Sport Nutrition Diploma https://www.sportsoracle.com/Nutrition/Home/ - Master's Degree in Science (MSc) in a field/discipline relevant to sport nutrition - Successful challenge of the SMSCS "Sport Nutrition Competency Exam" & fulfillment of the SMSCS Mentorship process <p>Note: approved SMSCS Sport Nutrition Consultants are referred to as Sport Dietitians</p> <p>OPTION #2 - Applicants must have Minimum of a Bachelor of Science in Nutrition</p>	<ul style="list-style-type: none"> • Basic Sport Nutrition • Fluids for Sport • Pre-Event and Post-Event Nutrition • Nutrition on the Road • Tournament and Multi-Event Nutrition • Weight Issues – Gaining and Losing Weight • Supplements • Sleep and Performance Workshop (must attend instructors' workshop)

	<ul style="list-style-type: none"> • Must be a member with Dietitians of Canada (DC) https://www.dietitians.ca/ • Must be a member of Saskatchewan College of Dietitians (SCD) • Must have liability insurance • Must have teaching/presentation experience • Must Meet with SMSCS Staff Sport Dietitian regarding the "Sport Nutrition Competency Exam". • Must write "SMSCS Sport Nutrition Competency Exam" & get a minimum of 75% to be a Successful Applicant (Note: Exam will be developed by SMSCS Staff Sport Dietitian based upon similar material in the CSSD exam). • Successful Applicant Must sit through a minimum of 2 presentations provided by the SMSCS Staff Sport Dietitian. • Successful Applicant Must present a minimum of 2 presentation in the presence of SMSCS Staff Sport Dietitian. • Upon completion of the above the Successful Applicant must meet with SMSCS Staff Sport Dietitian for a final debrief and approval. 	
SPORT PHYSICAL THERAPIST (SMSCS Consultant)	<p>Diploma or Certificate of Sport Physiotherapy</p> <ul style="list-style-type: none"> • Must hold a current license with the Saskatchewan College of Physical Therapists (SCPT) • Must be a member in good standing of Sport Physiotherapy Canada-Sask Section • Should have experience working with high performance athletes • Must have valid liability insurance <p>Note: Must attend drug education facilitators workshop if consultant intends on facilitating/instructing drug education workshop).</p> <p>Note: Must attend concussion education facilitators workshop if consultant intends on facilitating/instructing concussion education workshops.</p>	<ul style="list-style-type: none"> • Sport Injury Prevention and Care Workshop • Sport Wrapping & Taping Workshop • Injury Prevention & Management Session (1 hr) • Self-Massage & the Athlete Session (1h hr) • Concussion Education Awareness and Prevention Workshops (must attend instructors' workshop) • Concussion Protocol Management Guidelines/Policies Development/ • Sleep and Performance Workshop (must attend instructors' workshop) • Medical Coverage at Events
ATHLETIC THERAPIST (SMSCS Consultant)	<p>Certified Athletic Therapist through CATA</p> <ul style="list-style-type: none"> • Must be a member in good standing of the Canadian Athletic Therapists Association (CATA) and Saskatchewan Athletic Therapists Association (SATA) • Must be a certified member of the CATA • Should have experience working with high performance athletes • Must have valid liability insurance <p>Note: Must attend concussion education facilitators workshop if consultant intends on facilitating/instructing concussion education workshops.</p>	<ul style="list-style-type: none"> • Sport Injury Prevention and Care Workshop • Sport Wrapping & Taping Workshop • Injury Prevention & Management Session (1 hr) • Self-Massage & the Athlete Session (1h hr) • Concussion Education Awareness and Prevention Workshops (must attend instructor's workshop) • Concussion Protocol Management Guidelines/Policies Development/Review • Sleep and Performance Workshop (must attend

		instructors' workshop) • Medical Coverage at Events
SPORT PHYSICIAN (SMSCS Consultant)	<p>'Diploma in Sport and Exercise Medicine' through CASEM. OR 'Certificate of Added Competence in Sport and Exercise Medicine' through the College of Family Physicians of Canada (upon completion of a Sports Fellowship Program).</p> <ul style="list-style-type: none"> • Must have an unrestricted license in Canada and be actively practicing in Canada • The primary care physician must be a member in good standing with the Canadian Academy of Sport and Exercise Medicine (CASEM) and the Saskatchewan Academy of Sport Medicine (SASM) • Other specialists, certified as FRCPC or FRSCS may not require a CASEM diploma • Should have experience working with high performance athletes • Must have valid liability insurance <p>Note: Must attend concussion education facilitators workshop if consultant intends on facilitating/instructing concussion education workshops.</p>	<ul style="list-style-type: none"> • Sport Injury Prevention and Care Workshop • Sport Wrapping & Taping Workshop • Injury Prevention & Management Session (1 h) • Self-Massage & the Athlete Session (1hr) • Concussion Education Awareness and Prevention Workshops (must attend instructors' workshop) • Concussion Protocol Management Guidelines/Policies Development/Review • Medical Coverage at Events
SPORT MASSAGE THERAPIST (SMSCS Consultant)	<p>Sport Fellow Member in Sport Massage Therapy through the Canadian Sport Massage Therapists Association (SFM-CSMTA)</p> <ul style="list-style-type: none"> • Must be a registered massage therapist • Must be a graduate of a 2200-hour curriculum-based massage therapy school • Must be licensed to practice in the province of Saskatchewan • Must be a member of the Canadian Sport Massage Therapists Association (CSMTA) • Should have experience working with high performance athletes • Must have valid liability insurance 	<ul style="list-style-type: none"> • Injury Prevention & Management Session (1 hr) • Self-Massage & the Athlete Session (1h hr) • Sport Injury Prevention and Care Workshop • Sport Wrapping & Taping Workshop • Sleep and Performance Workshop (must attend instructor's workshop) • Medical Coverage at Events
SPORT CHIROPRACTOR (SMSCS Consultant)	<p>Sport Sciences Fellowship with the RCCSS</p> <ul style="list-style-type: none"> • Must be a member in good standing of the Chiropractors Association of Saskatchewan (CAS) and/or Royal College of Chiropractic Sport Sciences (Canada) aka: RCCSS • Must be licensed in the jurisdiction where they practice • Should have experience working with high performance athletes • Must have valid liability insurance. 	<ul style="list-style-type: none"> • Sport Injury Prevention and Care Workshop • Sport Wrapping & Taping Workshop • Concussion Education Awareness and Prevention Workshops (must attend instructors' workshop) • Sleep and Performance Workshop (must attend instructor's workshop) • Medical Coverage at Events

Additional Consultant Credentials and Education required & renewed every 3 years:

- Canadian Centre for Ethics in Sport (CCES) on-line e-learning
- Criminal Record Check or ePic (Vulnerable Section only once required)
- Respect in Sport (RiS)

- Signoff on the SMSCS Safe Sport Policy
- Signoff on the Canadian Sport Centre Saskatchewan – Universal Code of Conduct to Prevent & Address Maltreatment in Sport (UCCMS)
- Screening Disclosure (yearly)

NOTE: Exception to Minimum Consultant Standards:

In very rare circumstances a person who is currently not a Council Consultant may be allowed to provide services on behalf of the Council if they meet all the qualifications and at least one of the following circumstances exists:

- geographical considerations: a request for service in a non-consultant area of the province whereby a current Consultant would need to travel a vast distance and is unwilling to do so, this may be a one time or ongoing service for a specific team or athlete with approval for up to 6 months.
- a situation whereby a National or International expert is visiting the province: this will be a one-time service for a specific team or athlete with approval for 6 months.
- Consultants that may be considered for applying for the above “exception to minimum consultant standards” must provide a current CV whereby the SMSCS staff will then submit the CV to the Board of Directors with an explanation of the request and the need for the exception.

4. Criteria for approving New Consultants

4.1 Science Consultants

In order to represent the SMSCS as a Consultant and be able to invoice the SMSCS for approved science services, all new Consultant applicants will be subjected to the following process.

Process

- Applicants must express the interest to represent the SMSCS as a Consultant.
- Applicants must submit a completed and signed consultant application form (including submitting all appropriate documentation and reference letters).
- Applicants must meet all the “consultant qualifications” for their specific sport science discipline as outlined within our Programs and Services Manual.
- Staff will screen consultant applications to ensure they meet the minimum qualifications, have the ability to demonstrate their knowledge and experience working with athletes and specifically high-performance athletes and will check references.
- If the applicant meets all the requirements the staff will then submit the application to the Board of Directors for final review.
- Staff will notify the interested applicant of the Boards final decision. If the applicant is approved, staff will confirm and obtain any further information that may be required and send the Consultant the appropriate information (eg. programs & services policy manual and code of business conduct policy).
- Consultants will be approved for up to three (3) years. (Note: Renewal based on the expiry of the criminal record check.

Note: (1) The Council reserves the right to deny approval even if the applicant meets all the criteria. (2) The Council reserves the right to limit the number of consultants it approves for any science discipline.

Exception: The Canadian Sport Centre Saskatchewan receives some funding from Sport Canada through the Own the Podium Program. In some circumstances Centre athletes may be allowed to use consultants from “out of province” or “in province” that meet our qualifications but are not currently on our list of approved consultants. This will be up to the discretion of the SMSCS staff in consultation with the Centre.

4.2 Sport Medicine Consultants

In order to represent the SMSCS as a Consultant and be able to invoice the SMSCS for approved sport medicine services, all new Consultant applicants will be subjected to the following process.

Process

- Applicants must express the interest to represent the SMSCS as a Consultant.
- Applicants must be a member in good standing with their Provincial Body
- Applicants must submit a completed and signed consultant application form (including submitting all appropriate documentation).
- Applicants must meet all the “consultant qualifications” for their specific sport medicine discipline as outlined within our Programs and Services Manual.
- Staff will screen consultant applications to ensure they meet the minimum qualifications, have the ability to demonstrate their knowledge and experience working with athletes and specifically high-performance athletes and will check references.
- Staff will notify the interested applicant and obtain any further information that may be required and send the Consultant the appropriate information (eg. programs & services policy manual and code of business conduct policy).
- Consultants will be approved for up to three (3) years. (Note: Renewal based on the expiry of the criminal record check.

Note: The Council reserves the right to deny approval to our list even if the applicant meets all our criteria.

Note: The Council reserves the right to limit the number of consultants it approves for any sport medicine discipline.

Exception: The Canadian Sport Centre Saskatchewan receives some funding from Sport Canada through the Own the Podium Program. In some circumstances Centre athletes may be allowed to use consultants from “out of province” or “in province” that meet our qualifications but are not currently on our list of approved consultants. This will be up to the discretion of the SMSCS staff.

4.3 Exception to Minimum Standards

In very rare circumstances a service provider may be considered for involvement even if they have not met all the qualifications outlined. A practitioner who has vast experience working with high performance athletes, major games experience and has played a significant leadership role within their field will have the opportunity to contribute upon review by the SMSCS Board of Directors. This practitioner must be seen to be in the process of achieving the required qualifications, or will be granted equivalency by virtue of their standing and experience. In any

case the exception must be seen to be in the best interests of the athletes, without compromising the support system standards of the SMSCS.

5. Procedure for renewing current Consultants

On an annual basis, the SMSCS will contact all current Consultants on file to inquire about continued interest in maintaining their status as an “approved consultant” for the Council. Consultants will be asked to submit a ‘Screening Renewal Form’ every year. Consultants will be asked to submit an updated, completed and signed consultant application form every three years or when their criminal record check has expired (3 years), whichever comes first.

Staff will review the consultant application form and the required submitted documentation. Staff will also send the Consultant the latest version of the programs and services policy manual and code of business conduct policy and obtain any further information as required.

6. Consultant Application Form & Templates

6.1 - Sport Science

please visit the application via the links below.

APPLICATION

[SCIENCE-Consultant-Application-Form-2025](#)

EMPLOYER LETTER TEMPLATE

[-Sport-Science-New-Consultant-Applicant-Employer-Reference](#)

CLIENT LETTER TEMPLATE

[Consultants-Sport-Science-New-Consultant-Applicant-Clientele-Reference-Letter-2025](#)

STRENGTH TRAINING PRACTICAL ACCOUNTABILITY FORM

[Consultants-Strength-Training-Practical-Accountability-of-Experience-Form-2025](#)

6.2 - Sport Medicine

please visit the applications via the links below.

[SPORT MEDICINE-Consultant-Application-Form-2025](#)

6.3 - New Consultant Approval Template Letter

Dear:

Thank you for submitting your application to the Sport Medicine & Science Council of Saskatchewan and expressing your interest to be a Consultant on the behalf of the SMSCS. Your application was approved and you will be added to our casual consultant list as well as our website.

Just so that you are aware, being an approved _____ Consultant provides no guarantee of work through the SMSCS. All of our Consultants are casual consultants and work is usually directed to them by the SMSCS through request of the athlete or team. We encourage you to self-promote to the Provincial Sport Governing Bodies so that sports do request you to be their Consultant. You can acquire contact information via the Sask Sport Inc website located at <http://www.sasksport.sk.ca/PSOs.php> . If someone is interested in using you through your own self-promotion, refer them to the SMSCS since they may be eligible for free limited services.

A large majority of our clientele are what we would categorize as “High Performance” which receive limited free services through us. These are usually athletes registered with the Canadian Sport Centre Saskatchewan or else groups and teams that are Provincial teams through their respective Provincial Sport Governing Bodies (PSO). We provide services to all levels of athletes (Canadian Sport Centre Saskatchewan, University Sport, Canada Games, Provincial Teams, & Club Teams). If you receive any requests that you feel might be eligible for free service, please inform me prior and I can let you know whether they would qualify or not. If they are eligible, you would be able to invoice us directly for providing a specified amount of service.

Any other athletes or teams that are not high performance are what we categorize as “grass roots” and would be on a fee-for-service. This latter group you can provide service directly to on a fee-for-service paid directly to you.

Please review our attached Programs & Services Consultant Manual so that you can familiarize yourself with how we operate and the policies for the Consultants.

Finally, I would like to also request that you forward me information so that we can post on our website located at www.smscs.ca . The following information is posted on our website about you:

- Employer
- 5 Sports work with regularly
- Credentials/Education
- Additional certifications
- Years sport experience within profession

Thank you for applying and we will now add you onto our Consulting list and to future communications. If you have any questions, feel free in asking me.

Sincerely, SMSCS

7. Consultant Pay (includes admin & student support)

Note: The SMSCS has the right to negotiate a specific Consulting Fee with a Consultant for any specific request or service that may be out of the ordinary. This may be necessary in circumstances where a request for service comes from: (1) a remote or distant area in Saskatchewan, (2) is for a long duration of time (eg. one day), (3) requires extra long preparation time; or (4) is for a service provided directly to the SMSCS (eg. policy development).

The fee negotiation is at the discretion of the Executive Director, the Education Coordinator and the Safety and Professional Development Coordinator. **This will be reviewed in the fall of 2025**

- \$85/hour individual consultations plus any expenses (as per SMSCS policy)
- \$130/hour group/team presentations plus any expenses (as per SMSCS policy)
- \$595/day - Sport Injury Prevention and Care (SIPaC) Workshop Facilitator Fee (7-hr workshop)
- \$595/day - Sport Wrapping and Taping (SWAT) Workshop Facilitator Fee (7-hr workshop)
- Medical Coverage of Events
 - \$50/hr for Therapists/Chiropractors
 - \$200/session for a Physician on call (session length to be negotiated)
 - \$85 for a Physician on-site
 - \$100/hour + \$2/athlete for Physician Skin Checks
- \$85 - Nutrition Dietary Analysis Data Entry
- Mental Training TAIS or MEYERS-BRIGGS QUESTIONNAIRE Data Entry
 - actual cost or standard rate
- Fee-for Service \$130 per hour group or individual (for non-core clients not eligible for in-kind service)
- Lab or Field Tests (eg. anthropometrics) provided by a University or Business will be at their (or standard) rates
- Student Support
 - \$17/hr for Administrative work
 - \$22/hr - \$30/hr for Consulting Assistance (depending upon experience)
- The SMSCS, at its discretion, may provide a "consultant travel fee" of \$30 per hour within province for consultants/service providers who must travel a lengthy distance to fulfill a request (Note: This fee is in addition to the normal mileage rate)
- The SMSCS, at its discretion, may provide consultants with additional pay at \$70/hr for development of presentations or programs as well as additional required work required to provide service (ie: grocery shopping time, etc)

8. Consultant Expense Reimbursement

- Travel Expense: - \$0.57 per km Round trip (only for out-of-town travel).
- Meal Allowance (out-of-town/city) - Travel & Consulting over 4 hours = \$20/day (no receipts required)
- Meal Allowance (out-of-town/city) - Travel & Consulting over 10 hours = \$40/day (no receipts required)
- Meal Allowance (in-town/city) - Consulting over 7 hours = \$20/day (no receipts required)
- Meal Allowance (in-town/city) - Consulting over 10 hours = \$40/day (no receipts required)
- Accommodations (reasonable amount to be pre-approved prior with SMSCS staff)
- NOTE: Expense reimbursement is reviewed each May & October and is set at the Sask Sport Inc. rate which is the provincial government rate.

- NOTE: All travel expenses and any additional expenses are the responsibility of the team/group, and will be invoiced to them by the SMSCS.
- NOTE: Expense rates may be negotiated with clients in certain instances.

9. Cancellation Policy

- If a booked individual consult (athlete/coach) or group consult (team and/or group of athletes, coaches, or officials, etc.) does not show up (no-show) for a consultation/presentation, the Consultant is to contact the Council who will then contact the absentee within 5 business days to inform them that they missed a Consultation, and will be invoiced \$85 for the missed 1-hr Individual consult, \$130 for the missed 1-hr Group consult/session, and \$595 for a SIPaC or SWaT workshop. Any further no-shows will result in the inability of the individual or group to book consult/sessions.
- The Council will not permit any further Consultations to the absentee until all invoices have been paid.
- Consultant Cancellation fees/charges:
 - If cancellation occurs within 24 hours of the request, the Consultant is allowed to invoice for 50% of the consultation fee (for both individual and group consults)
 - If cancellation occurs at time of the consult due to a client “no-show”, the Consultant can invoice for 100% of the consulting fee (for both individual and group consults)
- NOTE: SMSCS to invoice the PSO the amount for a ‘no-show’ or ‘24hr’ cancellation (subtract from In-Kind funding total).
- Relating to Medical Coverage of Events:
 - If the scheduled event is canceled:
 - If the HOST gives at least 72 hours’ notice prior to the scheduled start of the event, no monetary charge.
 - If notification is given within 72 hours of the start of the event, the SMSCS will charge the HOST 25% of the Consultants/Service Providers honorarium (which will be paid to the contracted medical personnel).
 - If the scheduled event is canceled at any point after the commencement of the event, SMSCS will charge the HOST a service fee of \$50/day, plus 50% of the Consultants/Service Providers honorariums.
 - The cancellation fees will not apply if the reason for the cancellation is deemed to be beyond the control of the HOST. Acceptable conditions include: adverse environmental conditions and acts of God.

10. SMSCS Safe Sport Policy

The SMSCS is required to have all Consultants sign off on its Safe Sport Policy. The Policy includes the following

- Introduction & Definitions
- Athlete Protection Policy - Rule of 2
- Code of Conduct and Ethics
- Discipline & Complaints Policy
- Discrimination, Harassment, Maltreatment and Prohibited Behavior
- Social Media Policy
- Conflict of Interest Policy

please visit the Policy via the link below.

[Safe Sport – SMSCS](#)

10.1 Respect in Sport Online Education Program

Consultants are expected to participate in the Sask Sport Inc's Respect in Sport On-line Education Program. The program was developed by Sask Sport Inc. with the support of the Saskatchewan Government to assist coaches and sport leaders in identifying abuse, bullying, harassment and neglect in sport. The program's goal is to provide a safer and more respectful sporting environment for all to participate. For further details on the program including its content please visit the following website: <http://respectgroupinc.com/respect-in-sport/>. Contact information for the program is as follows: Respect in Sport Toll Free: 1-888-329-4009; TEXT 1-306-717-9636; resource@respectgroupinc.com. OR Kids Help Phone 1-800-668-6868

10.2 Sport Canada's Universal Code of Conduct to Prevent and Address Maltreatment in Sport.

Please see link below for this code of conduct.

[UNIVERSAL CODE OF CONDUCT TO PREVENT AND ADDRESS MALTREATMENT IN SPORT](#)

*****Note: Circumstances may arise which may cause consultants to question whether or not a particular activity falls within acceptable behavior, and which are not covered by these guidelines. In these circumstances, consultants should discuss their proposed course of conduct with the Executive Director.

11. Communicable (Infectious) Disease Prevention and Screening

A. Overview

Communicable diseases are diseases that can be spread from one person to another and cause a large number of people to get sick. They are caused by germ-like bacteria, viruses, fungi, parasites, or toxins. Germs that may cause communicable diseases are spread in a number of ways including:

- physical contact with an infected person, through contact with skin
- through the air (eg. respiratory droplets when you cough or sneeze)
- contact with a contaminated surface or object
- food
- blood (HIV, hepatitis B and hepatitis C)
- water
- bites from insects or animals capable of passing the disease (West Nile virus, Lyme disease and rabies)

As with most communicable diseases (eg. COVID-19), all office/classroom/facility environments are susceptible to their spread because of the proximity between workers and volunteers and the frequency of contact with shared surfaces and objects. Infected droplets may be deposited on surfaces and objects, and another person may touch contaminated surfaces or objects, and then touch their mouth, eyes or nose. Someone can also catch the virus by breathing in droplets of infected fluid if they are standing within close proximity of another person.

B. Policy, Procedures and Protocol Purpose

The prevention and control of communicable diseases during any activities (eg. programs and services) delivered by the SMSCS to our clients.

C. General Policy, Procedures and Protocol

- The Council will adhere to all infectious disease (eg. COVID-19) guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan regarding the prevention and control of communicable diseases.
- The Council will adhere to all infectious disease (eg. COVID-19) guidelines established by the Sask Sport Administration Centre Buildings (offices) and any other facilities (eg. meeting/conference rooms, gyms, etc) in Saskatchewan where Council activities may take place as long as said guidelines do not contravene any guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan.
- The Council will adhere to all infectious disease (COVID-19) guidelines established by Provincial Sport Governing Bodies as it relates to Council services being provided to said PSO as long as said guidelines do not contravene any guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan.
- To ensure the ultimate safety of our members, consultants, service providers, staff, and also the clients we provide service to, the SMSCS can establish mandatory health protocols relating to medical precautions, which will be in addition to municipal, provincial, and federal health guidelines that are in effect.

D. SMSCS Consultant/Service Providers (staff and casual) Protocol

Note: Consultants and service providers will do their best to ensure all precautions are taken to mitigate the spread of any infectious diseases, however SMSCS clients and participants need to do their part as well and SMSCS consultants and service providers are not responsible for failure of clients and participants to follow proper infectious disease guidelines and reserve the right to cancel a session/consult if any information or issues arise that put their health or the health of the participants at risk .

When providing services on behalf of the SMSCS consultant/service providers must operate according to the following instructions (protocol):

1. When relevant, consultant/service providers should discuss with the sport organization (coach/manager) and/or host/facility prior to any service/session being provided to determine if there are any communicable disease risks (eg. COVID-19, seasonal flu, etc)
2. Whenever it is determined that there is a communicable disease risk, the first priority is to conduct service remotely (e.g., web and video conference calls, phone, email) if possible. Note: The consultant/service provider is responsible to ensure the privacy of all attendees when conducting business remotely (eg. use of passwords, no sharing of meeting links, etc.).
3. In situations when the service needs to be in person and it has been determined there may be a communicable disease risk the service should be either cancelled, conducted remotely (eg. Zoom) or as a last resort the following must occur;
 - Check with the client(s) to ensure infectious disease pre-screening of participant(s) has taken place prior to the service being conducted. In the case, where the client is a group the consultant/service provider must check with the coach/manager/host. If appropriate screening has not occurred, the consultant/service provider should conduct screening or cancel the service. (Note: See attached screening tool).
 - Practice physical distancing (minimum 6 ft). This means making changes in your routines in order to minimize close contact with others, including: avoiding crowding in

areas within the facilities, avoid common greetings, such as handshakes, limit personal contact, especially with other people at high risk (eg. older adults and those in poor health), keep a distance of at least 2 meters from others, as much as possible.

- Have and wear personal protective equipment (surgical masks, examination gloves, etc), hand sanitizer, spray bottle disinfectant and cloths or disinfectant wipes for participants and yourself as appropriate.

Note: Any Personal Protective Equipment (PPE) required should follow personal liability coverage standards and professional governing bodies expectations.

- Ensure sports organization (coach/manager) and or host/facility informs the consultant/service providers of any other specific policies they have that relate to communicable disease transmission.
- Practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Clean and disinfect your work/presentation area (if possible).
- Maintain safe food practices.
- Avoid close contact with people who are sick.
- If you are sick, stay home.
- Move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants during in person consultations.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing workshop/session equipment and/or supplies
- Avoid sharing pens and office supplies/equipment. Disinfect after each use

4. In situations when the service needs to be in person and it has been determined there is no immediate communicable disease risk the following should occur;

- Recommended that Service Providers and Consultants wear a mask at indoor venues when in close contact with other people. Masks are not likely to be beneficial if a distance of 6 feet or more can be maintained or if the venue is outdoors/open air. However, masks may be worn in any setting at each individual's discretion.
- Practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Clean and disinfect your work/presentation area (if possible).
- Maintain safe food practices.
- Avoid close contact with people who are sick.
- If you are sick, stay home.
- Do not shake hands, touch anyone, move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants during in person consultations.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing workshop/session equipment and/or supplies
- Avoid sharing pens and office supplies/equipment. Disinfect after each use.
- Promote the above protocol to all the participants of the service

In addition to the above the following protocol should occur for the specific service referenced below.

Specific to Event Coverage

In situations when it has been determined there may be a communicable disease risk the following must occur;

- All consultants or service providers must wear the following PPE at all times:
 - Disposable mask (minimum three layers of protection)
 - Face shield (must be sanitized after use by each consultant/service provider)
 - Gloves - must be changed with each new client.
 - **Note:** Any Personal Protective Equipment (PPE) required should follow personal liability coverage standards and professional governing bodies expectations.
- Must wipe down treatment tables with the disinfectant after each use. Frequently clean and disinfect all other equipment (minimum after each client/athlete) as this is important to prevent spread of the disease. This includes first aid kits (including hardware and handles), pens/pencils, and coolers. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.
- The SMSCS will provide containers/garbage cans for the disposal of all used masks and gloves.
- When on-field assessment or treatment is required, consultant's/service providers are required to bring out additional masks for the athlete. If they decline to wear a mask, the consultant or service provider's PPE will act as a sufficient barrier.
- If lifesaving interventions are needed – only provide chest compressions. Mouth to mouth is not recommended.
- When a spinal injury is suspected and there is no way to apply a mask on the athlete without putting them in a compromised position, the PPE the consultant or service provider is wearing will act as a sufficient barrier.
- PPE for all events will be provided by the SMSCS; however, individual service providers or consultants can use their own PPE, but must ensure they are still following all SMSCS safety protocol guidelines, and are responsible for all financial costs associated with the usage of their own PPE.
- Host groups will be the financial responsibility for the costs associated with SMSCS PPE. The current base cost rate is \$30 per day, but is subject to change depending on the number of athletes, usage, number of venues, and the length of the event.

In situations when it has been determined there is no immediate communicable disease risk the consultant/service provider should operate as follows and use their own discretion as required:

- All consultants or service providers will have the following PPE available at all times:
 - Disposable mask (minimum three layers of protection)
 - Face shield (must be sanitized after use by each consultant/service provider)
 - Gloves - must be changed with each new client.
 - **Note:** Any Personal Protective Equipment (PPE) required should follow personal liability coverage standards and professional governing bodies expectations.
- Should, as required, wipe down treatment tables with the disinfectant after each use. Frequently clean and disinfect all other equipment (minimum after each client/athlete) as

this is important to prevent spread of the disease. This includes first aid kits (including hardware and handles), pens/pencils, and coolers. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.

- The SMSCS will provide containers/garbage cans for the disposal of all used masks and gloves.
- When on-field assessment or treatment is required, consultant's/service providers should, if required, bring out additional masks for the athlete. If they decline to wear a mask, the consultant or service provider's PPE will act as a sufficient barrier.
- If life saving interventions are needed – only provide chest compressions. Mouth to mouth is not recommended.
- When a spinal injury is suspected and there is no way to apply a mask on the athlete without putting them in a compromised position, the PPE the consultant or service provider is wearing will act as a sufficient barrier.
- PPE for all events will be provided by the SMSCS; however, individual service providers or consultants can use their own PPE, but must ensure they are still following all SMSCS safety protocol guidelines, and are responsible for all financial costs associated with the usage of their own PPE.
- Host groups will be the financial responsibility for the costs associated with SMSCS PPE. The current base cost rate is \$30 per day, but is subject to change depending on the number of athletes, usage, number of venues, and the length of the event.

Specific to Sport Safety Program Workshops (Sport Wrapping and Taping (SWaT) and Sport Injury Prevention and Care (SIPaC) Workshop (7hr workshops)

In situations when it has been determined there may be a communicable disease risk the following must occur;

- Consultants and participants will have the option to wear examination gloves and a disposable mask (minimum 3 layers of protection) and/or face shield as required but definitely during any “hands on” practical portions of the workshop/presentation (eg. taping practice on a partner, etc.).
- Frequently clean and disinfect the equipment as this is important to prevent spread of the disease. This includes tables, first aid kits (including hardware and handles), light switches, door handles, tables, counter tops, touch screens/mobile devices and keyboards. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.
- Do not shake hands, touch anyone, move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants whenever possible.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing pens and office supplies/equipment. Disinfect after each use.

In situations when it has been determined there is no immediate communicable disease risk the consultant/service provider should operate as follows and use their own discretion as required:

- Consultants and participants will have the option to wear examination gloves during any “hands on” practical portions of the workshop/presentation (eg. taping practice on a partner, etc.).
- If required, clean and disinfect the equipment as this is important to prevent spread of the disease. This includes tables, first aid kits (including hardware and handles), light

switches, door handles, tables, counter tops, touch screens/mobile devices and keyboards. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.

- Do not shake hands, touch anyone, move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants whenever possible.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing pens and office supplies/equipment. Disinfect after each use.

Specific to Supervised Strength Training

Supervised strength training services are normally conducted in an approved consultant provider's gym or other facility. Consultants who provide these services to our clients and who own or operate a gym/facility are expected to follow the communicable disease guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan. Note: In the case where a strength program is developed and given to a client (no supervision) the client is on his/her own with direction from their coach if required, to determine where to conduct their training and to follow communicable disease guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan.

E. Participants (clients) Procedures and Protocol for the prevention of communicable diseases (eg. COVID-19).

****When it has been determined there may be a communicable disease risk the session should be either canceled or conducted remotely (eg. Zoom), OR the following must occur:**

Educational Classroom Sessions/Workshops/Consults (hands off) Protocol

Participants must follow the following protocol:

Must be pre-screened for infectious disease symptoms prior to the session/workshop being conducted.

- Please see the SMSCS screening tool. (Note: If appropriate screening has not occurred prior to the session the consultant can choose to conduct the screening themselves or cancel the session).
- Must have personal protective equipment (eg. surgical mask) and hand sanitizer as appropriate.
- Must practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Must practice physical distancing (minimum 6 ft).
- Must wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Maintain safe food practices.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing workshop/session equipment and/or supplies
- Avoid sharing pens and office equipment. Disinfect after each use.

SIPaC and SWaT Workshop (hands on) Protocol

Participants must follow the following protocol:

- Must be pre-screened for infectious disease symptoms prior to the session/workshop being conducted. Please see the SMSCS screening tool. (Note: If appropriate screening has not occurred prior to the session the consultant can choose to conduct the screening themselves or cancel the session).
- Must have personal protective equipment (eg. surgical mask, gloves) and hand sanitizer as appropriate.
- Must practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Must practice physical distancing (minimum 6 ft).
- Must wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Maintain safe food practices.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing workshop/session equipment and/or supplies where possible
- Avoid sharing pens and office equipment. Disinfect after each use.

Event Coverage Protocol

Participants must follow the following protocol:

- Must be pre-screened for infectious disease symptoms prior to any service being provided. Please see SMSCS screening tool. (Note: If appropriate screening has not occurred prior to the service the medical professional (consultant) can choose to conduct the screening themselves or cancel the service).
- Must have personal protective equipment (eg. surgical mask, gloves) and hand sanitizer as appropriate.
- Must practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Must practice physical distancing (minimum 6 ft) where possible.
- Must wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Maintain safe food practices.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.

F. Notification of Illness

As an organization, individuals, and a community, we are responsible for ensuring our actions do not put others at risk. We encourage everyone to remember that there are individuals in our society who may be immune compromised and would be at significant risk if they are exposed to serious illness. Everyone should take preventative measures, to mitigate the spread of the illness.

During the course of Council business, if a consultant/service provider becomes aware that a client, coach, volunteer or any other individual is has tested positive for and infectious disease

or is experiencing infectious disease symptoms, or lives with or has been in contact with someone that has tested positive for and infectious disease or is experiencing infectious disease symptoms we are asking that this information be passed on to the Executive Director at travis.laycock@sasktel.net or 306-975-0867 and/or that you call the Saskatchewan Healthline at 811. The Council will only use this information to disclose to the appropriate authorities that an individual (eg. client) has been experiencing infectious disease symptoms, has been in contact with someone who is experiencing infectious disease symptoms, or has tested positive or been in contact with someone who has tested positive for an infectious disease. The Council will not disclose the identity of any individual, or any specific details about their medical condition or symptoms, to other individuals.

G. Other Information and Considerations

Cleaning and sanitizing surfaces are an important part of reducing the risk of exposure to communicable diseases (eg. COVID-19).

1. What do you need to know?

- Viruses (eg. COVID-19) can survive for several days on different surfaces and objects.
- Frequent cleaning and disinfection are important to prevent spread of the disease
- Many common household and commercial disinfectant products will destroy viruses (eg. COVID-19 virus).
- Some disinfectants will have an eight-digit Drug Identification Number (DIN). These products are approved for use by Health Canada.
- Common disinfectants include; quaternary ammonium (QUAT), alcohol (70 per cent), peroxide and household bleach (five per cent sodium hypochlorite) may not have a DIN, but may be used following specific instructions (see below for how to use).
- Vinegar, tea tree oil solutions, etc. are not proven to be effective disinfectants

2. Is There a Difference Between Cleaning and Disinfecting?

- Cleaning products remove dirt, dust and oils, but don't always kill germs.
- Disinfectants are applied after cleaning to destroy germs.
- Cleaning is required prior to disinfection to remove soil and ensure the effectiveness of disinfection (unless otherwise indicated by manufacturer).

3. How to make a Bleach Disinfecting Solution.

Always read product labels and follow the manufacturer's directions. Do not use expired products. According to Health Canada, a disinfecting solution can be made by mixing one part of bleach into nine parts of water. Do not mix soap or other cleaners into the bleach and water solution. Apply the disinfecting solution using a spray bottle or a clean wiping cloth. Always use appropriate PPE for working with bleach, including protective gloves. Note: If using disinfectant wipes, the manufacturer's recommended contact time (i.e., how long the surface remains wet) must be met. Disinfectant wipes are not recommended for heavily soiled surfaces.

Pre-Session (in person) Communicable (infectious) Disease (eg. COVID-19) Screening Questionnaire

Prior to any Council sessions/consultations, we will require the client to answer the following questions;

Do you have any of the following symptoms?

- Fever
 - New onset of (or worsening of chronic) cough
 - Shortness of breath or difficulty breathing
 - Sore throat, trouble swallowing
 - Runny Nose
 - Loss of taste or smell
 - Not feeling well
 - Nausea, vomiting, diarrhea
2. Have you been outside of Canada, including to the United States, in the past 14 days?
 3. Have you had close contact with someone who is sick or has a confirmed or probable case of an infectious disease (eg. COVID-19)

If you answer YES to any questions above, please do not attend the meeting. Go home immediately and self-isolate. Call Healthline at 811 or your health care provider to find out if you need to be tested.

12. Recognition and Promotion of the SMSCS and Sask Sport's Safe Sport

All Consultants must promote the Council and its programs and services. They must also recognize the Council as the co-presenter of all session/presentations.

In order to ensure this happens in a consistent manner the Council has developed four slides (see below) that all approved consultants will need to incorporate into any presentation being paid for by the Council.

Slide 1

Land Acknowledgment:

Before we begin, I want to start by acknowledging that our organization's work is province-wide and reaches lands covered by Treaties 2, 4, 5, 6, 8 and 10, the traditional lands of the Cree, Dakota, Dene, Lakota, Nakota and Saulteaux peoples, as well as homeland of the Metis.

Slide 2

This presentation is being brought to you by



The SMSCS is a non-profit organization that provides sport medicine and science services and programs that contributes to the optimal performance and enhanced health and safety of amateur athletes, coaches, and officials in Saskatchewan.

www.smscs.ca

This organization receives funding from:



Slide 3

SMSCS Programs & Services

- Exercise Physiology Consultation
- Strength & Conditioning Services
- Sport Nutrition Programming and Services
- Mental Performance Programming and Services
- Biomechanics Services
- Sleep and Performance Session
- Sport Wrapping and Taping (SWaT) Workshop (7hr)
- Sport Injury Prevention and Care (SIPaC) Workshop (7hr)
- Sport Medicine Education Sessions (sport specific injury prevention)
- Self Massage & the Athlete Session
- Initial Injury Assessment Program
- Medical Coverage (personnel) at Sport Events
- Medical Equipment Loaner/Rental Program
- Concussion Education, & Concussion Management Protocol Planning
- Sport 1st Aid Kits and Supplies Sales Program

Slide 4

Athlete Support Resources



Concerned about bullying, abuse, harassment or discrimination in sport?
Reach out
help@resource.ca
phone 1.888.329.4009
text 306.717.9636
Confidential - Anonymous - Professional - Bilingual - Free Support



Kids Help Phone
1-800-668-6868
<https://kidshelpphone.ca/>

It should be noted that the Council has no issue with the Consultants promoting themselves or their business as the co-presenter of the session or providing event coverage but it should be kept to one or two slides as well.

13. Communication Framework – Requests for Service

A request for service MUST follow the following process, or the Consultant WILL NOT receive payment for services provided. If a Consultant is contacted by a user group or athlete, they must forward the individual to the Sport Medicine and Science Council of Saskatchewan to make a formal request.

ATHLETE/TEAM/SPORT DISTRICT REQUESTS SERVICE FOR A SPECIFIC CONSULTANT TO → SPORT MEDICINE AND SCIENCE COUNCIL OF SASKATCHEWAN CONTACTS REQUESTED CONSULTANT → CONSULTANT WHO CONTACTS → ATHLETE/TEAM

14. Payment Procedures

In order to get paid, a detailed summary of the service provided including dates, names, length of service (hours), service provider contact information, and a digital signature are strongly encouraged. Any of the following must be sent monthly by the **5th** of the month, or at the conclusion of the workshop/presentation/consult in order to receive payment:

- CONSULTANTS OWN PERSONAL INVOICE
- MONTHLY SUMMARY FORM
- MONTHLY EXPENSE/HONORARIUM FORM
- DETAILED EMAIL

Invoices and expense/honorarium forms can be emailed to the Council. Payments come out of the SMSCS Saskatoon office and are usually received by the consultant near the 3rd week of each month.

For Sport Science or Sport Medicine Education send to:

edcoordinator@smscs.ca

For Medical Coverage, SWAT, or SIPAC send to:

safetycoordinator@smscs.ca

15. Gifts from Customers and Suppliers

No consultants of the SMSCS shall accept gifts, favors or trips from customers or suppliers or prospective customers or suppliers, nor shall they use their status with the Council to obtain personal gain from those doing or seeking to do business with SMSCS.

16. Evaluations

The SMSCS will evaluate Consultants directly with the user group/athlete.

Consultants can also use the following link to send to SMSCS Clients

[SMSCS Session Surveys](#)

Feedback will be provided to the Consultant when provided by the user.

In a case where the Council receives a formal complaint from a client regarding a Consultant the Council will investigate said complaint and where appropriate use Councils (Sask Sport Inc mandated) Dispute Resolution Process to resolve. If a further process is required the Council will obtain the services of their legal counsel. Please see Consultant Discipline and Complaints Policy and Service Evaluation sections for further details.

D. SERVICE PROVIDERS (Medical Coverage) POLICY AND PROCEDURES

1. Service Provider Mandate

Note: SMSCS ‘Service Providers’ are members that have NOT obtained their SPORT CREDENTIALS within their profession. The Medical Coverage of Events Program and the Injury Assessment Program are the only programs that non-sport credentialed (SMSCS Service Providers) can provide on behalf of the SMSCS. These programs are “service” oriented as opposed to others that are educational in nature.

- Medical Coverage of Events Program:
 - Provide individual athletes with emergency and first aid services at sport events. Note: All individuals will be required to have an updated First Responder for Medical Professional (FRMP) certification (or equivalent)
 - Profession specific treatment services. FRMP not required if only providing profession specific treatment services
- Injury Assessment Program:
 - If approved by the PSO, high performance athletes may be able to utilize funding for an Initial Injury Assessment. These assessments will only be paid for if an SMSCS Consultant performs the service. Consultants will always be contacted first, and Service Providers second to fill these requests.
 - No SMSCS funding is provided if the client chooses to use a Service Provider to perform the assessment.

2. Selection Criteria for ‘Service Providers’ for Service Provision

The following criteria will be used to determine what Service Provider performs a service request:

1. Medical Coverage of Event Program:
 - Unlike group education session requests, sport groups that request this program do not have the option to request specific individual Medical Personnel.
 - It will be the sole responsibility of the SMSCS to ensure the quantity and quality of medical personnel is assigned based on the risk and frequency of potential injuries, best practices, the number of athletes competing, the facility set-up, and the availability of Medical Personnel to cover large time slots during the day.
2. Injury Assessment Program:
 - Athletes will always be directed firstly to medical professionals that have obtained their sport credentials (SMSCS Consultants) within their profession.
 - The athlete will also be notified that funding is only available if a Consultant is used (as opposed to a Service Provider).
 - The different Initial Injury Assessments that are part of this program include:

- Initial injury assessments
- Concussion assessments
- Functional Movement Assessments
- Return to Sport Following an Injury Programming

3. Service Provider (minimum qualification standards)

Service Provider (minimum qualification standards) (As of July 2021)

Note: All approved sport medicine “service providers” (See C. Service Providers - Policies and Procedures) can provide the services listed in the chart below.

Medicine Discipline	Minimum Qualifications	Services
PHYSICAL THERAPIST	<ul style="list-style-type: none"> • Must be a member (Level 1) of Sport Physiotherapy Canada-Sask Section • Must hold a current license (non-restricted license) with the Saskatchewan College of Physical Therapists (SCPT) • Must have valid CPR & First Aid certification • Should have taping and “return to sport decision” skills • Must have valid liability insurance • Must have a First Responder certification (or equivalent) to provide on-site emergency and first aid care. 	<ul style="list-style-type: none"> • Medical Coverage for Sporting events Program (emergency care, including immediate on-site assessment and management of injuries), profession specific treatment (such as chiropractic, massage, taping, etc). • Injury Assessment Program
PHYSICIAN	<ul style="list-style-type: none"> • Must have an unrestricted license in Canada and be actively practicing in Canada • Must be a “General” member of the Saskatchewan Academy of Sport Medicine. • Should have experience working with high performance athletes • Must have valid liability insurance • Must have a First Responder certification (or equivalent) to provide on-site emergency and first aid care 	<ul style="list-style-type: none"> • Medical Coverage for Sporting events Program (emergency care, including immediate on-site assessment and management of injuries) • Injury Assessment Program
MASSAGE THERAPIST	<ul style="list-style-type: none"> • Must be a registered massage therapist and be a member of the Canadian Sport Massage Therapists Association (CSMTA) • Must be registered as a “Certification Candidate” with the CSMTA • Must be a graduate of a 2200-hour curriculum-based massage therapy school • Must be licensed to practice in the province of Saskatchewan 	<ul style="list-style-type: none"> • Medical Coverage for Sporting events Program (emergency care, including immediate on-site assessment and management of injuries) • Injury Assessment Program • Provide pre and post event massage when requested and applicable

	<ul style="list-style-type: none"> • Should have experience working with high performance athletes • Must have valid CPR, First Aid • Should have taping and “return to sport decision” skills • Must have valid liability insurance • Must have a First Responder certification (or equivalent) to provide on-site emergency and first aid care 	
CHIROPRACTOR	<ul style="list-style-type: none"> • Must be a member in good standing of the Chiropractors Association of Saskatchewan (CAS) and/or Royal College of Chiropractic Sport Sciences (Canada) aka: RCCSS • Must be a member of the Chiropractors Association of Saskatchewan – Sport Interest Group and the SMSCS. • Must be licensed in the jurisdiction where they practice • Should have experience working with high performance athletes • Must have valid CPR & First Aid • Should have taping and “return to sport decision” skills • Must have valid liability insurance. • Must have a First Responder certification, (or equivalent) to provide on-site emergency and first aid care 	<ul style="list-style-type: none"> • Medical Coverage for Sporting events Program (emergency care, including immediate on-site assessment and management of injuries) • Injury Assessment Program • Provide chiropractic treatment when requested and applicable.

4. Criteria for Approving New Service Providers

In order to represent the SMSCS as a Consultant and be able to invoice the SMSCS for approved sport medicine services, all new Consultant applicants will be subjected to the following process.

Process

- Applicants must express the interest to represent the SMSCS as a Service Provider.
- Applicants must be a member in good standing with their Provincial Body
- Applicants must submit a completed and signed consultant application form (including submitting all appropriate documentation).
- Applicants must meet all the “Service Provider qualifications” for their specific sport medicine discipline as outlined within our Programs and Services Manual.
- Staff will screen consultant applications to ensure they meet the minimum qualifications, have the ability to demonstrate their knowledge and experience working with athletes and specifically high-performance athletes and will check references.
- Staff will notify the interested applicant and obtain any further information that may be required and send the Service Provider the appropriate information (eg. programs & services policy manual and code of business conduct policy).

- Service Provider will be approved for up to three (3) years. (Note: Renewal based on the expiry of the criminal record check.

Note: The Council reserves the right to deny approval to our list even if the applicant meets all our criteria.

Note: The Council reserves the right to limit the number of Service Provider it approves for any sport medicine discipline.

5. Procedure for Renewing Current Service Providers

On an annual basis, the SMSCS will contact all current Service Providers on file to inquire about continued interest in maintaining their status as an “approved Service Providers” for the Council. Service Providers will be asked to submit a ‘Screening Renewal Form’ every year. Service Providers will be asked to submit an updated, completed and signed Service Provider application form every three years or when their criminal record check has expired (3 years), whichever comes first.

Staff will review the Service Provider application form and the required submitted documentation. Staff will also send the Service Provider the latest version of the programs and services policy manual and code of business conduct policy and obtain any further information as required.

6. Service Provider Application Form

please visit the applications via the links below.

[SERVICE-PROVIDER-Application-Form-2025 \(Medical-Coverage\)](#)

7. Service Provider Pay

Note: The SMSCS has the right to negotiate a specific service fee with a service provider for any specific request or service that may be out of the ordinary. This may be necessary in circumstances where a request for service comes from a remote or distant area in Saskatchewan, is for a long duration of time (eg. one day) or is for a service provided directly to the SMSCS (eg. policy development). The fee negotiation is at the discretion of the Executive Director, the Manager of Science Programs & Services, and the Manager of Medicine Programs & Services.

- Medical Coverage of Events - \$50/hr
\$200/session for a Physician on call (session length to be negotiated)
\$85 for a Physician on-site
\$100/hour + \$2/athlete for Physician Skin Checks
- \$70 - approximate fee for Injury Assessment and Functional Assessment (at a clinic)
- The SMSCS at its discretion may provide a “service provider travel fee” of \$30 per hour within province for service providers who must travel a lengthy distance to fulfill a request (Note: This fee is in addition to the normal mileage rate).

8. Service Provider Expense Reimbursement

- Travel Expense: Current rate -\$0.55 per km Round trip (only for out-of-town travel)
- Meal Allowance (out-of-town/city)-Travel & Consulting over 4 hours = \$15/day (no receipts required)
- Meal Allowance (out-of-town/city)-Travel & Consulting over 10 hours = \$30/day (no receipts required)
- Meal Allowance (in-town/city)-Consulting over 7 hours = \$15/day (no receipts required)
- Meal Allowance (in-town/city)-Consulting over 10 hours = \$30/day (no receipts required)
- Accommodations (reasonable amount to be pre-approved prior with SMSCS staff)
- NOTE: Expense reimbursement is reviewed each May & October and is set at the Sask Sport Inc. rate which is the provincial government rate.
- NOTE: All travel expenses and any additional expenses are the responsibility of the team/group, and will be invoiced to them by the SMSCS.
- NOTE: Expense rates may be negotiated with clients in certain instances.

9. SMSCS Safe Sport Policy

The SMSCS is required to have all Consultants sign off on its Safe Sport Policy.

The Policy includes the following

- Introduction & Definitions
- Athlete Protection Policy - Rule of 2
- Code of Conduct and Ethics
- Discipline & Complaints Policy
- Discrimination, Harassment, Maltreatment and Prohibited Behavior
- Social Media Policy
- Conflict of Interest Policy

please visit the Policy via the link below.

[Safe Sport – SMSCS](#)

9.1 Respect in Sport Online Education Program

Service Providers are expected to participate in the Sask Sport Inc's Respect in Sport On-line Education Program. The program was developed by Sask Sport Inc. with the support of the Saskatchewan Government to assist coaches and sport leaders in identifying abuse, bullying, harassment and neglect in sport. The program's goal is provide a safer and more respectful sporting environment for all to participate. For further details on the program including its content please visit the following website: <http://respectgroupinc.com/respect-in-sport/>. Contact information for the program is as follows: Respect in Sport Toll Free: 1-888-329-4009; TEXT 1-306-717-9636; resourceline@respectgroupinc.com. OR Kids Help Phone 1-800-668-6868

9.2 Sport Canada's Universal Code of Conduct to Prevent and Address Maltreatment in Sport.

Please see link below for this code of conduct.

*****Note: Circumstances may arise which may cause consultants to question whether or not a particular activity falls within acceptable behavior, and which are not covered by these guidelines. In these circumstances, consultants should discuss their proposed course of conduct with the Executive Director.

10. Communicable (Infectious) Disease Prevention and Screening

A. Overview

Communicable diseases are diseases that can be spread from one person to another and cause a large number of people to get sick. They are caused by germ-like bacteria, viruses, fungi, parasites, or toxins. Germs that may cause communicable diseases are spread in a number of ways including:

- physical contact with an infected person, through contact with skin
- through the air (eg. respiratory droplets when you cough or sneeze)
- contact with a contaminated surface or object
- food
- blood (HIV, hepatitis B and hepatitis C)
- water
- bites from insects or animals capable of passing the disease (West Nile virus, Lyme disease and rabies)

As with most communicable diseases (eg. COVID-19), all office/classroom/facility environments are susceptible to their spread because of the proximity between workers and volunteers and the frequency of contact with shared surfaces and objects. Infected droplets may be deposited on surfaces and objects, and another person may touch contaminated surfaces or objects, and then touch their mouth, eyes or nose. Someone can also catch the virus by breathing in droplets of infected fluid if they are standing within close proximity of another person.

B. Policy, Procedures and Protocol Purpose

The prevention and control of communicable diseases during any activities (eg. programs and services) delivered by the SMSCS to our clients.

C. General Policy, Procedures and Protocol

- The Council will adhere to all infectious disease (eg. COVID-19) guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan regarding the prevention and control of communicable diseases.
- The Council will adhere to all infectious disease (eg. COVID-19) guidelines established by the Sask Sport Administration Centre Buildings (offices) and any other facilities (eg. meeting/conference rooms, gyms, etc) in Saskatchewan where Council activities may take place as long as said guidelines do not contravene any guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan.
- The Council will adhere to all infectious disease (COVID-19) guidelines established by Provincial Sport Governing Bodies as it relates to Council services being provided to said PSO as long as said guidelines do not contravene any guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan.

- To ensure the ultimate safety of our members, consultants, service providers, staff, and also the clients we provide service to, the SMSCS can establish mandatory health protocols relating to medical precautions, which will be in addition to municipal, provincial, and federal health guidelines that are in effect.

D. SMSCS Consultant/Service Providers (staff and casual) Protocol

Note: Consultants and service providers will do their best to ensure all precautions are taken to mitigate the spread of any infectious diseases, however SMSCS clients and participants need to do their part as well and SMSCS consultants and service providers are not responsible for failure of clients and participants to follow proper infectious disease guidelines and reserve the right to cancel a session/consult if any information or issues arise that put their health or the health of the participants at risk .

When providing services on behalf of the SMSCS consultant/service providers must operate according to the following instructions (protocol):

1. When relevant, consultant/service providers should discuss with the sport organization (coach/manager) and/or host/facility prior to any service/session being provided to determine if there are any communicable disease risks (eg. COVID-19, seasonal flu, etc)
2. Whenever it is determined that there is a communicable disease risk, the first priority is to conduct service remotely (e.g., web and video conference calls, phone, email) if possible. Note: The consultant/service provider is responsible to ensure the privacy of all attendees when conducting business remotely (eg. use of passwords, no sharing of meeting links, etc.).
3. In situations when the service needs to be in person and it has been determined there may be a communicable disease risk the service should be either cancelled, conducted remotely (eg. Zoom) or as a last resort the following must occur;
 - Check with the client(s) to ensure infectious disease pre-screening of participant(s) has taken place prior to the service being conducted. In the case, where the client is a group the consultant/service provider must check with the coach/manager/host. If appropriate screening has not occurred consultant/service provider should conduct screening or cancel the service. (Note: See attached screening tool).
 - Practice physical distancing (minimum 6 ft). This means making changes in your routines in order to minimize close contact with others, including: avoiding crowding in areas within the facilities, avoid common greetings, such as handshakes, limit personal contact, especially with other people at high risk (eg. older adults and those in poor health), keep a distance of at least 2 meters from others, as much as possible.
 - Have and wear personal protective equipment (surgical masks, examination gloves, etc), hand sanitizer, spray bottle disinfectant and cloths or disinfectant wipes for participants and yourself as appropriate.
Note: Any Personal Protective Equipment (PPE) required should follow personal liability coverage standards and professional governing bodies expectations.
 - Ensure sports organization (coach/manager) and or host/facility informs the consultant/service providers of any other specific policies they have that relate to communicable disease transmission.
 - Practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
 - Wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
 - Avoid touching your eyes, nose and mouth with unwashed hands.
 - Clean and disinfect your work/presentation area (if possible).
 - Maintain safe food practices.

- Avoid close contact with people who are sick.
 - If you are sick, stay home.
 - Move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants during in person consultations.
 - Limit the exchange of papers (e.g., handouts). If documents must be exchanged leave them on a clean surface while maintaining a two-metre distance.
 - Avoid sharing workshop/session equipment and/or supplies
 - Avoid sharing pens and office supplies/equipment. Disinfect after each use
4. In situations when the service needs to be in person and it has been determined there is no immediate communicable disease risk the following should occur;
- Recommended that Service Providers and Consultants wear a mask at indoor venues when in close contact with other people. Masks are not likely to be beneficial if a distance of 6 feet or more can be maintained or if the venue is outdoors/open air. However, masks may be worn in any setting at each individual's discretion.
 - Practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
 - Wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
 - Avoid touching your eyes, nose and mouth with unwashed hands.
 - Clean and disinfect your work/presentation area (if possible).
 - Maintain safe food practices.
 - Avoid close contact with people who are sick.
 - If you are sick, stay home.
 - Do not shake hands, touch anyone, move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants during in person consultations.
 - Limit the exchange of papers (e.g., handouts). If documents must be exchanged leave them on a clean surface while maintaining a two-metre distance.
 - Avoid sharing workshop/session equipment and/or supplies
 - Avoid sharing pens and office supplies/equipment. Disinfect after each use.
 - Promote the above protocol to all the participants of the service

In addition to the above the following protocol should occur for the specific service referenced below.

Specific to Event Coverage

In situations when it has been determined there may be a communicable disease risk the following must occur;

- All consultants or service providers must wear the following PPE at all times:
 - Disposable mask (minimum three layers of protection)
 - Face shield (must be sanitized after use by each consultant/service provider)
 - Gloves - must be changed with each new client.
 - **Note:** Any Personal Protective Equipment (PPE) required should follow personal liability coverage standards and professional governing bodies expectations.
- Must wipe down treatment tables with the disinfectant after each use. Frequently clean and disinfect all other equipment (minimum after each client/athlete) as this is important to prevent spread of the disease. This includes first aid kits (including hardware and

handles), pens/pencils, and coolers. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.

- The SMSCS will provide containers/garbage cans for the disposal of all used masks and gloves.
- When on-field assessment or treatment is required, consultant's/service providers are required to bring out additional masks for the athlete. If they decline to wear a mask, the consultant or service provider's PPE will act as a sufficient barrier.
- If lifesaving interventions are needed – only provide chest compressions. Mouth to mouth is not recommended.
- When a spinal injury is suspected and there is no way to apply a mask on the athlete without putting them in a compromised position, the PPE the consultant or service providers is wearing will act a sufficient barrier.
- PPE for all events will be provided by the SMSCS; however, individual service providers or consultants can use their own PPE, but must ensure they are still following all SMSCS safety protocol guidelines, and are responsible for all financial costs associated with the usage of their own PPE.
- Host groups will be the financial responsibility for the costs associated with SMSCS PPE. The current base cost rate is \$30 per day, but is subject to change depending on the number of athletes, usage, number of venues, and the length of the event.

In situations when it has been determined there is no immediate communicable disease risk the consultant/service provider should operate as follows and use their own discretion as required:

- All consultants or service providers will have the following PPE available at all times:
 - Disposable mask (minimum three layers of protection)
 - Face shield (must be sanitized after use by each consultant/service provider)
 - Gloves - must be changed with each new client.
 - **Note:** Any Personal Protective Equipment (PPE) required should follow personal liability coverage standards and professional governing bodies expectations.
- Should, as required, wipe down treatment tables with the disinfectant after each use. Frequently clean and disinfect all other equipment (minimum after each client/athlete) as this is important to prevent spread of the disease. This includes first aid kits (including hardware and handles), pens/pencils, and coolers. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.
- The SMSCS will provide containers/garbage cans for the disposal of all used masks and gloves.
- When on-field assessment or treatment is required, consultant's/service providers should, if required, bring out additional masks for the athlete. If they decline to wear a mask, the consultant or service provider's PPE will act as a sufficient barrier.
- If life saving interventions are needed – only provide chest compressions. Mouth to mouth is not recommended.
- When a spinal injury is suspected and there is no way to apply a mask on the athlete without putting them in a compromised position, the PPE the consultant or service providers is wearing will act a sufficient barrier.
- PPE for all events will be provided by the SMSCS; however, individual service providers or consultants can use their own PPE, but must ensure they are still following all SMSCS safety protocol guidelines, and are responsible for all financial costs associated with the usage of their own PPE.

- Host groups will be the financial responsibility for the costs associated with SMSCS PPE. The current base cost rate is \$30 per day, but is subject to change depending on the number of athletes, usage, number of venues, and the length of the event.

Specific to Sport Safety Program Workshops (Sport Wrapping and Taping (SWaT) and Sport Injury Prevention and Care (SIPaC) Workshop (7hr workshops)

In situations when it has been determined there may be a communicable disease risk the following must occur;

- Consultants and participants will have the option to wear examination gloves and a disposable mask (minimum 3 layers of protection) and/or face shield as required but definitely during any “hands on” practical portions of the workshop/presentation (eg. taping practice on a partner, etc.).
- Frequently clean and disinfect the equipment as this is important to prevent spread of the disease. This includes tables, first aid kits (including hardware and handles), light switches, door handles, tables, counter tops, touch screens/mobile devices and keyboards. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.
- Do not shake hands, touch anyone, move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants whenever possible.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing pens and office supplies/equipment. Disinfect after each use.

In situations when it has been determined there is no immediate communicable disease risk the consultant/service provider should operate as follows and use their own discretion as required:

- Consultants and participants will have the option to wear examination gloves during any “hands on” practical portions of the workshop/presentation (eg. taping practice on a partner, etc.).
- If required, clean and disinfect the equipment as this is important to prevent spread of the disease. This includes tables, first aid kits (including hardware and handles), light switches, door handles, tables, counter tops, touch screens/mobile devices and keyboards. Clothing and fabric items (eg. towels) should be laundered and dried on the highest temperature setting possible. Ensure items are thoroughly dried.
- Do not shake hands, touch anyone, move participants desks/chairs/tables as far apart as possible and maintain appropriate distance from the participants whenever possible.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing pens and office supplies/equipment. Disinfect after each use.

Specific to Supervised Strength Training

Supervised strength training services are normally conducted in an approved consultant provider’s gym or other facility. Consultants who provide these services to our clients and who own or operate a gym/facility are expected to follow the communicable disease guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan. Note: In the case where a strength program is developed and given to a client (no supervision) the client is on his/her own with direction from their coach if required, to determine where to conduct their training and to follow communicable disease guidelines established by the Minister of Health and the Chief Medical Officer of Saskatchewan.

E. Participants (clients) Procedures and Protocol for the prevention of communicable diseases (eg. COVID-19).

****When it has been determined there may be a communicable disease risk the session should be either canceled or conducted remotely (eg. Zoom), OR the following must occur:**

Educational Classroom Sessions/Workshops/Consults (hands off) Protocol

Participants must follow the following protocol:

Must be pre-screened for infectious disease symptoms prior to the session/workshop being conducted.

- Please see the SMSCS screening tool. (Note: If appropriate screening has not occurred prior to the session the consultant can choose to conduct the screening themselves or cancel the session).
- Must have personal protective equipment (eg. surgical mask) and hand sanitizer as appropriate.
- Must practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Must practice physical distancing (minimum 6 ft).
- Must wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Maintain safe food practices.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing workshop/session equipment and/or supplies
- Avoid sharing pens and office equipment. Disinfect after each use.

SIPaC and SWaT Workshop (hands on) Protocol

Participants must follow the following protocol:

- Must be pre-screened for infectious disease symptoms prior to the session/workshop being conducted. Please see the SMSCS screening tool. (Note: If appropriate screening has not occurred prior to the session the consultant can choose to conduct the screening themselves or cancel the session).
- Must have personal protective equipment (eg. surgical mask, gloves) and hand sanitizer as appropriate.
- Must practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Must practice physical distancing (minimum 6 ft).
- Must wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Maintain safe food practices.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.
- Avoid sharing workshop/session equipment and/or supplies where possible

- Avoid sharing pens and office equipment. Disinfect after each use.

Event Coverage Protocol

Participants must follow the following protocol:

- Must be pre-screened for infectious disease symptoms prior to any service being provided. Please see SMSCS screening tool. (Note: If appropriate screening has not occurred prior to the service the medical professional (consultant) can choose to conduct the screening themselves or cancel the service).
- Must have personal protective equipment (eg. surgical mask, gloves) and hand sanitizer as appropriate.
- Must practice proper cough and sneezing etiquette (into a tissue or the bend of your elbow).
- Must practice physical distancing (minimum 6 ft) where possible.
- Must wash your hands often with soap and water; if soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Maintain safe food practices.
- Limit the exchange of papers (e.g., handouts). If documents must be exchanged, leave them on a clean surface while maintaining a two-metre distance.

F. Notification of Illness

As an organization, individuals, and a community, we are responsible for ensuring our actions do not put others at risk. We encourage everyone to remember that there are individuals in our society who may be immune compromised and would be at significant risk if they are exposed to serious illness. Everyone should take preventative measures, to mitigate the spread of the illness.

During the course of Council business, if a consultant/service provider becomes aware that a client, coach, volunteer or any other individual is has tested positive for and infectious disease or is experiencing infectious disease symptoms, or lives with or has been in contact with someone that has tested positive for and infectious disease or is experiencing infectious disease symptoms we are asking that this information be passed on to the Executive Director at travis.laycock@sasktel.net or 306-975-0867 and/or that you call the Saskatchewan Healthline at 811. The Council will only use this information to disclose to the appropriate authorities that an individual (eg. client) has been experiencing infectious disease symptoms, has been in contact with someone who is experiencing infectious disease symptoms, or has tested positive or been in contact with someone who has tested positive for an infectious disease. The Council will not disclose the identity of any individual, or any specific details about their medical condition or symptoms, to other individuals.

G. Other Information and Considerations

Cleaning and sanitizing surfaces are an important part of reducing the risk of exposure to communicable diseases (eg. COVID-19).

1. What do you need to know?

- Viruses (eg. COVID-19) can survive for several days on different surfaces and objects.
- Frequent cleaning and disinfection are important to prevent spread of the disease

- Many common household and commercial disinfectant products will destroy viruses (eg. COVID-19 virus).
- Some disinfectants will have an eight-digit Drug Identification Number (DIN). These products are approved for use by Health Canada.
- Common disinfectants include; quaternary ammonium (QUAT), alcohol (70 per cent), peroxide and household bleach (five per cent sodium hypochlorite) may not have a DIN, but may be used following specific instructions (see below for how to use).
- Vinegar, tea tree oil solutions, etc. are not proven to be effective disinfectants

2. Is There a Difference Between Cleaning and Disinfecting?

- Cleaning products remove dirt, dust and oils, but don't always kill germs.
- Disinfectants are applied after cleaning to destroy germs.
- Cleaning is required prior to disinfection to remove soil and ensure the effectiveness of disinfection (unless otherwise indicated by manufacturer).

3. How to make a Bleach Disinfecting Solution.

Always read product labels and follow the manufacturer's directions. Do not use expired products. According to Health Canada, a disinfecting solution can be made by mixing one part of bleach into nine parts of water. Do not mix soap or other cleaners into the bleach and water solution. Apply the disinfecting solution using a spray bottle or a clean wiping cloth. Always use appropriate PPE for working with bleach, including protective gloves. Note: If using disinfectant wipes, the manufacturer's recommended contact time (i.e., how long the surface remains wet) must be met. Disinfectant wipes are not recommended for heavily soiled surfaces.

Pre-Session (in person) Communicable (infectious) Disease (eg. COVID-19) Screening Questionnaire

Prior to any Council sessions/consultations, we will require the client to answer the following questions;

Do you have any of the following symptoms?

- Fever
 - New onset of (or worsening of chronic) cough
 - Shortness of breath or difficulty breathing
 - Sore throat, trouble swallowing
 - Runny Nose
 - Loss of taste or smell
 - Not feeling well
 - Nausea, vomiting, diarrhea
4. Have you been outside of Canada, including to the United States, in the past 14 days?
 5. Have you had close contact with someone who is sick or has a confirmed or probable case of an infectious disease (eg. COVID-19)

If you answer YES to any questions above, please do not attend the meeting. Go home immediately and self-isolate. Call Healthline at 811 or your health care provider to find out if you need to be tested.

12. Recognition and Promotion of the SMSCS and Sask Sport's - Safe Sport

All service providers must promote the Council and its programs and services. They must also recognize the Council as the co-presenter of all session/presentations.

In order to ensure this happens in a consistent manner the Council has developed four slides (see below) that all approved service providers will need to incorporate into any presentation being paid for by the Council.

Slide 1

Land Acknowledgment:

Before we begin, I want to start by acknowledging that our organization's work is province-wide and reaches lands covered by Treaties 2, 4, 5, 6, 8 and 10, the traditional lands of the Cree, Dakota, Dene, Lakota, Nakota and Saulteaux peoples, as well as homeland of the Metis.

Slide 2

This presentation is being brought to you by



The SMSCS is a non-profit organization that provides sport medicine and science services and programs that contributes to the optimal performance and enhanced health and safety of amateur athletes, coaches, and officials in Saskatchewan.

www.smscs.ca

This organization receives funding from:



Slide 3

SMSCS Programs & Services

- Exercise Physiology Consultation
- Strength & Conditioning Services
- Sport Nutrition Programming and Services
- Mental Performance Programming and Services
- Biomechanics Services
- Sleep and Performance Session
- Sport Wrapping and Taping (SWaT) Workshop (7hr)
- Sport Injury Prevention and Care (SiPaC) Workshop (7hr)
- Sport Medicine Education Sessions (sport specific injury prevention)
- Self Massage & the Athlete Session
- Initial Injury Assessment Program
- Medical Coverage (personnel) at Sport Events
- Medical Equipment Loaner/Rental Program
- Concussion Education, & Concussion Management Protocol Planning
- Sport 1st Aid Kits and Supplies Sales Program

Slide 4

Athlete Support Resources



**SASK SPORT
RESOURCE LINE**

Concerned about bullying, abuse,
harassment or discrimination in sport?
Reach out

help@resourceline.ca
phone 1.888.329.4009
text 306.717.9636

Confidential • Anonymous • Professional • Bilingual • Free Support

Kids Help Phone 

1-800-668-6868
<https://kidshelpphone.ca/>

It should be noted that the Council has no issue with the Consultants promoting themselves or their business as the co-presenter of the session or providing event coverage but it should be kept to one or two slides as well.

13. Communication Framework – Requests for Service

A request for service **MUST** follow the following process, or the Service Provider **WILL NOT** receive payment for services provided. If a Service Provider is contacted by a user group or athlete, they must forward the individual to the Sport Medicine and Science Council of Saskatchewan to make a formal request.

ATHLETE/TEAM/SPORT DISTRICT *REQUESTS SERVICE FOR A SPECIFIC CONSULTANT TO* → SPORT MEDICINE AND SCIENCE COUNCIL OF SASKATCHEWAN *CONTACTS REQUESTED CONSULTANT* → SERVICE PROVIDER *WHO CONTACTS* → ATHLETE/TEAM

14. Payment Procedures

In order to get paid, a detailed summary of the service provided including dates, names, length of service (hours), service provider contact information, and a digital signature are strongly encouraged. Any of the following must be sent monthly by the **5th** of the month, or at the conclusion of the workshop/presentation/consult in order to receive payment:

- OWN PERSONAL INVOICE
- MONTHLY SUMMARY FORM
- MONTHLY EXPENSE/HONORARIUM FORM
- DETAILED EMAIL

Invoices and expense/honorarium forms can be emailed to the Council. Payments come out of the SMSCS Saskatoon office and are usually received by the consultant near the 3rd week of each month.

For Medical Coverage, send to:
safetycoordinator@smscs.ca

15. Gifts from Customers and Suppliers

No service provider of the SMSCS shall accept gifts, favors or trips from customers or suppliers or prospective customers or suppliers, nor shall they use their status with the Council to obtain personal gain from those doing or seeking to do business with SMSCS.

16. Evaluations

The SMSCS will evaluate Service Providers directly with the user group/athlete. Service Providers can also use the following link to send to SMSCS Clients

[SMSCS Session Surveys](#)

Feedback will be provided to the Service Provider when provided by the user.

In a case where the Council receives a formal complaint from a client regarding a Service Provider, the Council will investigate said complaint and where appropriate use Councils (Sask Sport Inc mandated) Dispute Resolution Process to resolve. If a further process is required the Council will obtain the services of their legal counsel. Please see Consultant Discipline and Complaints Policy and Service Evaluation sections for further details.

E. PROGRAMS & SERVICES

Note: The Council Staff reserves the right to monitor the services being provided by the SMSCS consultants and service providers by making unannounced visits to gyms, clinics, classroom sessions etc when services are being conducted.

Note: The Council recommends that all athletes receive a pre-activity screen that may include, but not limited to, the following assessments; medical, physical, neurological, nutritional and mental, prior to participating in any sporting activity or sport medicine or science training regime.

Note: The Council conducts educational workshops in person or via online/web services (eg. Zoom). In the case, where the client would like to educational session recorded the following policy will apply:

SMSCS Policy Regarding In-Person and On-line Platform Recordings

Time Limit - All educational sessions provided/presented by the SMSCS (this includes staff, members, consultants, and service providers) either in-person OR through on-line platforms such as Zoom, can be recorded and utilized by the requesting agency for up to two weeks following the presentation date.

Intended Purpose of Recordings – Is for participants who could not attend the original session due to extenuating circumstances. If a PSOs initial on-line platform session ends up having low attendance compared to pre-registration numbers (75% or lower), recordings of all future sessions will not be permitted. Having Live education with the opportunity for discussion and questions is vital for face-to-face-learning.

Scheduling – Host group must ensure that sessions for targeted group (i.e., teams, clubs, etc.) should not be scheduled at the same time as practices, games, or training sessions.

Exceptions – In certain circumstances, the SMSCS and/or the presenter may request the presentation not be recorded.

Prior Agreement - The requesting agency must agree to this policy prior to the SMSCS setting up the original session/presentation.

1. Sport Nutrition Sessions/Consultations

Topics

- **Optimal Sports Nutrition** -Sport Nutrition workshop focusing on fuel requirements for sport performance (carbohydrates, proteins and fats), timing of intake (pre, during and recovery) and hydration planning.
- **Protein Timing**- this session focuses on the importance of optimal protein dosage, timing and type of dietary proteins. Education will be focused on maximising the training response.
- **Recovery snack preparation**- this hands-on session will provide the participants with an opportunity to build the ideal recovery snack (based on their personal recovery nutrition needs). * There would be an additional cost for food ingredients (*in-person only*)
- **Training camp planning**- this session will focus on the training camp schedule and ensuring that foods and fluids are organized to meet the energy needs for each athlete. The athletes in attendance will have an opportunity to plan out their training camp with optimal meals and snacks.
- **Cooking for Performance**- this session will provide the athletes with a hands-on cooking experience and will encourage them to learn new skills in the kitchen. Recipes will be provided. * There would be an additional cost for the food ingredients (*in-person only*)
- **Competition planning**- this session will focus on nutrition planning in the week leading into a competition, travel foods to pack, grocery list development and planning a competition day (in relation to competition schedule)
- **Grocery Store Tours**- this session can be done in a local grocery store (max. of 12 participants/tour) or it can be held on a virtual platform (Zoom). The tour will focus on label reading and making informed food choices that can support the training demands of the sport.
- **Sport Supplements** - A workshop educating about the risks, research and possible benefits of sport supplements, review of the 3rd party certification programs that exist regarding supplements (NSF Certified for Sport, Informed Sport, Informed Choice, etc.).
- **Anthropometrics** (see below for further details on this content area)

Rationale as to WHY Assess Anthropometrics

- Anthropometry is the scientific study of the measurement and proportions of the human body, while body composition pertains to the amount and distribution of lean (fat-free) body mass as well as fat mass.
- Sport performance is impacted by many factors, therefore changing specific aspects of the body may not have a direct impact on performance.
- Prior to any assessment of anthropometrics, serious consideration must be given to the purpose of the assessment
- Anthropometric assessment is beneficial to sport performance only if it is purposeful and necessary to optimize the health and performance of an athlete (Wells, 2020).
- The primary purpose of obtaining an assessment of anthropometrics is to help educate the high-performance athlete and support them in achieving their health and performance goals.
- With proper education, the assessment of anthropometrics can be a useful tool in helping high performance athletes understand the changes in lean mass and fat mass that may occur with modifications of diet and training programs.
- An assessment of anthropometry will only be used as part of a comprehensive support plan and ideally in the off season.
- The emphasis must be placed on tracking individual changes over time and NOT as a one-time measure or for comparisons between athletes.
- Planning must be in place to ensure proper scheduling of anthropometric measures.
- *“The true value of body composition assessments is achieved through multiple measurements, tracking longitudinal changes within individual athletes, conducted in a positive and supportive environment”* (Jessop, Hong, 2018).
- Assessments **MUST** take place with proper nutrition support already in place (Wells, 2020).

SMSCS Position

The Sport Medicine & Science Council of Saskatchewan (SMSCS) acknowledges the use of Anthropometric assessments and monitoring as a useful tool in supporting the development of high- performance athletes when used appropriately. SMSCS is committed to establishing best practices and protocols based on the core principles of athlete well-being, safety, and evidence-informed practices

Any SMSCS Consultants or external integrated support team (IST) members involved in any portion of the anthropometric process with SMSCS clientele are encouraged to review and adhere to the best practices and protocols outlined in this document

WHAT are the Assessments of Anthropometrics and Body Composition methods:

- Monitoring and/or measuring an athlete's **height, weight & girth measurements** - Height, weight and selected girths locations are basic measures of physical height (cm or feet/inches), weight (pounds or kilograms) and girth (cm).
- **Sum of skinfolds** - Skinfold measures involve the physical measurement with calibrated calipers of six to eight sites on the body. The sum of those skinfold sites is then used to track changes in skinfold measures (thicknesses) over time.
- **Dual-energy X-ray absorptiometry (DXA) measurements** - DXA measurements must be conducted by a trained technician and it is a very costly test. A DXA scan provides the support staff with a detailed report on bone mineral content, bone mineral density, fat mass (FM) and fat free mass (FFM).

- **Bioelectrical impedance analysis (BIA)** - A BIA scan involves a low level electrical current placed on the body. The resistance of the flow through the body is then measured. The flow of the electrical current is based on the water content of the tissue. The electrical current is highly conductive through blood and muscle tissue. The current is highly restrictive through fat tissue, air filled space and bone. An estimate of FFM is then calculated after normalising for height.
- **BOD POD (air displacement plethysmograph)** - The BOD POD uses an air displacement plethysmograph to measure body volume. Pre-assessment procedures, similar to those mentioned above, must also be followed to minimize error.

** For both the DXA and BIA assessments, a standard procedure for pre-assessment (exercise timing, time of day, hydration and food intake) must be followed in order to minimize the error of the measurement.*

Objectives:

- **Education:** must be provided to the athletes prior to the assessment of anthropometrics. The education session will address the purpose of the assessment, how it will be collected (which method will be used and rationale for use), who will conduct the assessment, who will have access to the information and the timeline for follow up measures/assessment. Follow up assessment by a sport physician may also be necessary if any red flags are noted with the body composition assessment.
- Education will be provided to the coaching staff, integrated support team (IST) and parents when working with athletes who are under the age of 16.
- Education sessions will also be provided (upon request) to coaching staff and IST members when working with athletes over the age of 16.
- **Safe & Healthy Messaging:** De-emphasize anthropometrics as a sole determinant of sport performance creates a culture of positive language throughout the assessment (prior, during and completion). Positive body image is one of the protective factors against the development of disordered eating practices. It forms a foundation for the most effective eating disorder prevention programs (Wells, 2020)
- **Coach language:** Coaches have a tremendous influence over their athletes and they must be conscious of their own attitudes, behaviours and language used in relation to body composition and anthropometric measures. If an athlete does need to change body weight for weight classification, or health, it is the role of the Sport Dietitian to address this sensitive issue with the athlete directly. Coaches **MUST NOT** mandate or suggest body composition goals for individuals or teams
- **Established Protocols:** Having a clearly established assessment process and protocols. This includes;
 - Determination of the appropriate anthropometric assessment method
 - Ensuring that collection and transfer of data is standardized and confidential
 - Allowing for education prior, during and post assessment.
 - Provide ongoing support if an athlete experiences any negative issues related to their health or well-being resulting from assessment.

POLICY – The Protocol & Process for Athlete Assessments

IDENTIFY all athletes who are being considered for assessment

Coaching staff working with athletes involved in sport at the developing and/or junior level, in the “Train to Train” and “Train to Compete” stage according to the long-term athlete development model (LTAD), must be focusing on supporting a positive body image environment. Monitoring body composition is not necessary or encouraged.

Athletes have the right to opt out of assessments of anthropometrics

REFERRAL REQUIRED to the SMSCS

If the athlete would like to work on changing their current anthropometric measures, a referral must be made to the team Sport Dietitian. This referral must be made by the Sport Coach, Strength Coach, Mental Performance Consultant, or Athlete. The Request must be done in a confidential and respectful manner.

PRIOR TO ASSESSMENT

A Sport Dietitian will conduct a team or individual education session for all of those who will be taking part in the body composition assessment

ASSESSMENT PROCESS

Determine the appropriate method for assessment.

Determine the appropriate frequency of assessments. Anthropometric assessments must always be done at a set schedule. One-time measures will not be part of an athlete’s performance plan since they are not useful.

Athlete’s consent must be given to the service provider.

Assessment of anthropometrics will be conducted by someone certified or formally trained to conduct the required testing method. (NOTE: The 2 University Testing Laboratories are responsible for setting their own testing credentials. However, the SMSCS recommends that individuals have the CSEP-CEP certification for testing, with the exception that a Radiology Technician conducts the DXA testing).

The coach must NOT be involved in the assessment of anthropometrics

If possible, a Sport Dietitian will attend any assessment to provide athlete guidance.

The entire process of assessments and feedback must be treated as personal and confidential medical information. It must be made clear where the information is being stored, who the information is being shared with and for what specific purpose (Wells, 2020)

Athlete’s must NOT be given ‘ideal ranges’ (e.g., normative data) or team averages/ranking for any of the assessment data.

Athlete’s must NOT be compared to each other.

POST ASSESSMENT

Once the assessment is completed, a follow up education session by a Sport Dietitian will be required to address any final questions, concerns or guidance for the athletes.

The coach will only gain access to the assessment data with the athlete’s consent and when necessary

A planning meeting on how to utilize the assessment data must occur with the Sport Dietitian, the Strength Coach, the athlete, and possibly the Sport Coach and/or any other required Support Staff members.

NOTE: Additional screening, using a validated screening tool, for disordered eating will be conducted by a SMSCS Sport Dietitian if required.

Adapted from:

Canadian Sport Institute Ontario Body Composition Assessment and Monitoring Best Practices & Protocols. 2021

University of Michigan Body Composition Policy. 2018

University of Toronto, Body Composition Summary, Katie Jessop, RD and Landon Hong, 2018

University of Texas, Body Weight as a Performance Factor and The Prevention of Eating Disorders Among Student-Athletes, 2017

Princeton University, Policy: Weight Management and Body Composition Testing with Student Athletes, 2011

Reference:

Wells, KR., Jeacocke, NA., Appaneal R., Smith,HD., Vlahovich ,N., Burke ,LM., Hughes, D. The Australian Institute of Sport (AIS) and National Eating Disorders Collaboration (NEDC) position statement on disordered eating in high performance sport. Brormance sport. British Journal of Sports Medicine, 2020,0:1-13.

Age of Participants

- The minimum recommended age for a Sport Nutrtiion course is 11 years of age and over.
- Age for group sessions or individual consultations will vary.

Course Hosting Requirements - The following hosting requirements for courses are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor/Consultant desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable)
 - Participant chairs and desks set up in a classroom (if applicable)
- Must cover all additional costs of the instructor/consultant (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course
- Honor any invoice sent by the SMSCS at the completion of the course/consult (base amount, course conductor expenses as noted above)

Group/Individual Consultation Requirements – See Service & Tier Chart for specifics.

Resource Material

- Various Handouts

Service Fees

- See Service & Tier Eligibility Chart and Consulting rates for specifics
- Approved sessions will vary from 1 – 3 sessions depending upon circumstances
- Travel Expense, Meal Expense, Facility Rental (if applicable)

Nutrition Long Term Plan Guideline

- See Appendix in back of Manual

2. Mental Performance Sessions/Consultations

Topics

- Team Building and Group Dynamics - this session will focus on educating on cohesion, trust, and team dynamics.
- Emotional control (stress management) – this session will focus on educating on stress, managing energy, and using coping strategies.

- Goal Setting – this session will focus on goal setting, setting realistic short term & long-term goals, monitoring goals.
- Mental Imagery – this session will focus on educating on how to use mental imagery & visualization effectively.
- Self-Talk - this session will focus on educating on Self-Talk and Negative thought through thinking patterns
- Routines before, during and after competition – this session will focus on educating on how to use routines & practices effectively.
- Ideal Performance State- this session will focus on educating on the factors and barriers in achieving one's IPS.
- Attentional control (focus/ concentration)
- Parent-Athlete-Coach-Relations

Age of Participants

- The minimum recommended age for a course is 11 years of age and over.
- Age for group sessions or individual consultations will vary.

Hosting Requirements - The following hosting requirements are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor/Consultant desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable)
 - Participant chairs and desks set up in a classroom (if applicable)
- Must cover all additional costs of the instructor/consultant (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course
- Honor any invoice sent by the SMSCS at the completion of the course/consult (base amount, course conductor expenses as noted above)

Group/Individual Consultation Requirements – See Service & Tier Chart for specifics.

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- Approved sessions will vary from 1 – 3 sessions depending upon circumstances
- Travel Expense, Meal Expense, Facility Rental (if applicable)

Mental Performance Long Term Plan Guideline

- See Appendix in back of Manual

Mental Fitness for Peak Performance

RATIONALE

The Council staff proceeded on the development of this Committee at the direction of the Board since it was felt that the Council should look at how it can support athletes with mental health issues even though we do not provide clinical counselling or therapy.

- A gathering in Saskatoon with the Mental Performance Consultants occurred back in 2001 in order to identify essential issues and skills in Mental Performance.

- Over time, the needs of athletes and coaches have changed specially for youth sport because children and adolescents are impacted by social and technological changes that undermine mental health and well-being.
- Many agree that mental wellness is the foundation for athlete development and performance in sport. However, that foundation is weaker because Mental Health issues outside of sport are more common throughout Saskatchewan.
- Mental illness, self-harm, suicide, and addiction are rising concerns in public health. The problems are reaching such high levels that an all-hands approach is needed. Clinical mental health practitioners need support from schools, clubs, community organizations, First Nations, and sport.
- It is for these reasons that the SMSCS Board would like the Council to offer awareness, information, education and resources to athletes and coaches throughout the province.
- The Council's focus on Mental Fitness will help athlete development and performance in sport.
- The Council will provide families and coaches with more strategies, resources, and protective factors supporting mental well-being.

OBJECTIVES:

The Council presentation will help athletes, coaches, and parents to:

- Understand differences between mental performance in sport and clinical mental health, including the practitioners in those fields.
- Be more aware of ill mental health, including sign, symptoms, and risk factors.
- Understand protective factors and actions that athletes, coaches, and parents can take to improve mental wellbeing, resiliency, and performance.
- Access resources available to athletes, parents, and coaches – including information that is available nationally.
- Access information about community networks and steps that can be taken to support anyone dealing with mental health issues (e.g., referral and mental health first aid).

SMSCS PRESENTATION OUTLINE – Mental Fitness & Performance –

- Presentation Method: In-Person or 'Live' Virtual
- Presentation Time Length ~ 60-75mins
- the Committee will determine what credentials/certifications will be required from the SMSCS Membership and Consultants to be a facilitator to deliver it?

A. FOUNDATION ISSUES

Introduction:

- Why this presentation is important:
- How Mental Health plays into one's day to day life:
- How Mental Health plays into sport and performance:

Definitions & Terminology:

Professions & Scope Of Practice

B. RISK FACTORS

What are the Risks to be aware of
Actions & Supports
Case Study (optional)

C. PROTECTIVE FACTORS & POSITIVE ACTIONS

What Mental Fitness looks like:

D. SUMMARY

Q&A (or small group activity)
Key Takeaways
Other Community Supports

3. Strength & Conditioning Sessions/Consultations

The Council recommends that a “physical evaluation process” be incorporated into the development and ongoing maintenance of any prescribed strength and conditioning program.

Sessions

- Core Strength
- Concepts in Warm-up, Cool-down, before competition or practice
- Stretching properly before competition or practice
- Weight Training Exercise Technique
- Resistance Exercise Training for Muscle Mass, Strength, and Power
- Foot Speed & Agility Development
- Plyometric Training
- Exercise Program Design and Prescription
- Field Physiological Tests (eg. leger, vertical jump, sit-ups)
- Small group training sessions with our approved training consultants. (*in-person only*)

Age of Participants

- The minimum recommended age for this course is 13 years of age and over.
- Age for group sessions or individual consultations will vary.

Hosting Requirements - The following hosting requirements are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor/Consultant desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable)
 - Participant chairs and desks set up in a classroom (if applicable)
 - Open space for practical exercise components
- Must cover all additional costs of the instructor/consultant (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course
- Honor any invoice sent by the SMSCS at the completion of the course/consult (base amount, course conductor expenses as noted above)

Group/Individual Consultation Requirements – See Service & Tier Chart for specifics

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- Approved sessions will vary from 1 – 3 sessions depending upon circumstances
- Travel Expense, Meal Expense, Facility Rental (if applicable)

4. Exercise Physiology Sessions/Consultations

Content

- Metabolic Conditioning: Training the Aerobic and Anaerobic Systems
- Physiological Program Planning & Design
- Physiological Testing

Laboratory - The SMSCS will refer requests for laboratory physiological testing (eg. Max VO₂, flexibility, lean body mass, fat mass and capacities, aerobic/anaerobic power, etc.) for athletes identified as 'High Performance' to either the College of Kinesiology at the University of Saskatchewan, or at the Faculty of Kinesiology & Health Studies at the University of Regina. If the closest testing facility is unable to meet the request, the SMSCS has the liberty to contract out the testing to other certified fitness testers.

Field - The SMSCS will refer requests for field physiological testing (eg. leger, vertical jump, sit-ups) for athletes identified as 'High Performance' to either the College of Kinesiology at the University of Saskatchewan, the Faculty of Kinesiology & Health Studies at the University of Regina or to any of our qualified exercise/strength consultants.

Anthropometrics (see below for further details on this content area)

Guideline/Education Plan for the Assessment of Anthropometrics

Rationale as to WHY Assess Anthropometrics

- Anthropometry is the scientific study of the measurement and proportions of the human body, while body composition pertains to the amount and distribution of lean (fat-free) body mass as well as fat mass.
- Sport performance is impacted by many factors, therefore changing specific aspects of the body may not have a direct impact on performance.
- Prior to any assessment of anthropometrics, serious consideration must be given to the purpose of the assessment
- Anthropometric assessment is beneficial to sport performance only if it is purposeful and necessary to optimize the health and performance of an athlete (Wells, 2020).
- The primary purpose of obtaining an assessment of anthropometrics is to help educate the high-performance athlete and support them in achieving their health and performance goals.
- With proper education, the assessment of anthropometrics can be a useful tool in helping high performance athletes understand the changes in lean mass and fat mass that may occur with modifications of diet and training programs.
- An assessment of anthropometry will only be used as part of a comprehensive support plan and ideally in the off season.
- The emphasis must be placed on tracking individual changes over time and NOT as a one-time measure or for comparisons between athletes.
- Planning must be in place to ensure proper scheduling of anthropometric measures.

- *“The true value of body composition assessments is achieved through multiple measurements, tracking longitudinal changes within individual athletes, conducted in a positive and supportive environment” (Jessop, Hong, 2018).*
- Assessments MUST take place with proper nutrition support already in place (Wells, 2020).

SMSCS Position

The Sport Medicine & Science Council of Saskatchewan (SMSCS) acknowledges the use of Anthropometric assessments and monitoring as a useful tool in supporting the development of high-performance athletes when used appropriately. SMSCS is committed to establishing best practices and protocols based on the core principles of athlete well-being, safety, and evidence-informed practices

Any SMSCS Consultants or external integrated support team (IST) members involved in any portion of the anthropometric process with SMSCS clientele are encouraged to review and adhere to the best practices and protocols outlined in this document

WHAT are the Assessments of Anthropometrics and Body Composition methods:

- Monitoring and/or measuring an athlete’s **height, weight & girth measurements** - Height, weight and selected girths locations are basic measures of physical height (cm or feet/inches), weight (pounds or kilograms) and girth (cm).
- **Sum of skinfolds** - Skinfold measures involve the physical measurement with calibrated calipers of six to eight sites on the body. The sum of those skinfold sites is then used to track changes in skinfold measures (thicknesses) over time.
- **Dual-energy X-ray absorptiometry (DXA) measurements** - DXA measurements must be conducted by a trained technician and it is a very costly test. A DXA scan provides the support staff with a detailed report on bone mineral content, bone mineral density, fat mass (FM) and fat free mass (FFM).
- **Bioelectrical impedance analysis (BIA)** - A BIA scan involves a low level electrical current placed on the body. The resistance of the flow through the body is then measured. The flow of the electrical current is based on the water content of the tissue. The electrical current is highly conductive through blood and muscle tissue. The current is highly restrictive through fat tissue, air filled space and bone. An estimate of FFM is then calculated after normalising for height.
- **BOD POD (air displacement plethysmograph)** - The BOD POD uses an air displacement plethysmograph to measure body volume. Pre-assessment procedures, similar to those mentioned above, must also be followed to minimize error.

** For both the DXA and BIA assessments, a standard procedure for pre-assessment (exercise timing, time of day, hydration and food intake) must be followed in order to minimize the error of the measurement.*

Objectives:

- **Education:** must be provided to the athletes prior to the assessment of anthropometrics. The education session will address the purpose of the assessment, how it will be collected (which method will be used and rationale for use), who will conduct the assessment, who will have access to the information and the timeline for follow up measures/assessment. Follow up assessment by a sport physician may also be necessary if any red flags are noted with the body composition assessment.
- Education will be provided to the coaching staff, integrated support team (IST) and parents when working with athletes who are under the age of 16.

- Education sessions will also be provided (upon request) to coaching staff and IST members when working with athletes over the age of 16.
- **Safe & Healthy Messaging:** De-emphasize anthropometrics as a sole determinant of sport performance creates a culture of positive language throughout the assessment (prior, during and completion). Positive body image is one of the protective factors against the development of disordered eating practices. It forms a foundation for the most effective eating disorder prevention programs (Wells, 2020)
- **Coach language:** Coaches have a tremendous influence over their athletes and they must be conscious of their own attitudes, behaviours and language used in relation to body composition and anthropometric measures. If an athlete does need to change body weight for weight classification, or health, it is the role of the Sport Dietitian to address this sensitive issue with the athlete directly. Coaches **MUST NOT** mandate or suggest body composition goals for individuals or teams
- **Established Protocols:** Having a clearly established assessment process and protocols. This includes;
 - Determination of the appropriate anthropometric assessment method
 - Ensuring that collection and transfer of data is standardized and confidential
 - Allowing for education prior, during and post assessment.
 - Provide ongoing support if an athlete experiences any negative issues related to their health or well-being resulting from assessment.

POLICY – The Protocol & Process for Athlete Assessments

IDENTIFY all athletes who are being considered for assessment

Coaching staff working with athletes involved in sport at the developing and/or junior level, in the “Train to Train” and “Train to Compete” stage according to the long-term athlete development model (LTAD), must be focusing on supporting a positive body image environment. Monitoring body composition is not necessary or encouraged.

Athletes have the right to opt out of assessments of anthropometrics

REFERRAL REQUIRED to the SMSCS

If the athlete would like to work on changing their current anthropometric measures, a referral must be made to the team Sport Dietitian. This referral must be made by the Sport Coach, Strength Coach, Mental Performance Consultant, or Athlete. The Request must be done in a confidential and respectful manner.

PRIOR TO ASSESSMENT

A Sport Dietitian will conduct a team or individual education session for all of those who will be taking part in the body composition assessment

ASSESSMENT PROCESS

Determine the appropriate method for assessment.

Determine the appropriate frequency of assessments. Anthropometric assessments must always be done at a set schedule. One-time measures will not be part of an athlete’s performance plan since they are not useful.

Athlete’s consent must be given to the service provider.

Assessment of anthropometrics will be conducted by someone certified or formally trained to conduct the required testing method. (NOTE: The 2 University Testing Laboratories are responsible for setting their own testing credentials. However, the SMSCS recommends that individuals have the CSEP-CEP certification for testing, with the exception that a Radiology Technician conducts the DXA testing).

The coach must NOT be involved in the assessment of anthropometrics
If possible, a Sport Dietitian will attend any assessment to provide athlete guidance.
The entire process of assessments and feedback must be treated as personal and confidential medical information. It must be made clear where the information is being stored, who the information is being shared with and for what specific purpose (Wells, 2020)

Athlete's must NOT be given 'ideal ranges' (e.g., normative data) or team averages/ranking for any of the assessment data.

Athlete's must NOT be compared to each other.

POST ASSESSMENT

Once the assessment is completed, a follow up education session by a Sport Dietitian will be required to address any final questions, concerns or guidance for the athletes.

The coach will only gain access to the assessment data with the athlete's consent and when necessary

A planning meeting on how to utilize the assessment data must occur with the Sport Dietitian, the Strength Coach, the athlete, and possibly the Sport Coach and/or any other required Support Staff members.

NOTE: Additional screening, using a validated screening tool, for disordered eating will be conducted by a SMSCS Sport Dietitian if required.

Adapted from:

Canadian Sport Institute Ontario Body Composition Assessment and Monitoring Best Practices & Protocols. 2021

University of Michigan Body Composition Policy. 2018

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University of Texas, Body Weight as a Performance Factor and The Prevention of Eating Disorders Among Student-Athletes, 2017

Princeton University, Policy: Weight Management and Body Composition Testing with Student Athletes, 2011

Reference:

Wells, KR., Jeacocke, NA., Appaneal R., Smith,HD., Vlahovich ,N., Burke ,LM., Hughes, D. The Australian Institute of Sport (AIS) and National Eating Disorders Collaboration (NEDC) position statement on disordered eating in high performance sport. Brormance sport. British Journal of Sports Medicine, 2020, 0:1-13.

Age of Participants

- The minimum recommended age for this course is 13 years of age and over.
- Age for group sessions or individual consultations will vary.

Hosting Requirements - The following hosting requirements are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor/Consultant desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable)
 - Participant chairs and desks set up in a classroom (if applicable)
- Must cover all additional costs of the instructor/consultant (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course

- Honor any invoice sent by the SMSCS at the completion of the course/consult (base amount, course conductor expenses as noted above)

Group/Individual Consultation Requirements – See Service & Tier Chart for specifics

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- Approved sessions will vary from 1 – 3 sessions depending upon circumstances
- Laboratory and Field Test costs as per University (or standard) rates
- Travel Expense, Meal Expense, Facility Rental (if applicable)

5. Biomechanics Sessions/Consultations

Content

- Provide technical skill analysis by looking at the muscular, joint, and skeletal actions while performing a given task. Can be accomplished through:
 - Qualitative research in order to understand a problem (ie: injury, skill flaw) and possibly develop potential quantitative research.
 - Quantitative research in order to generate numerical data in order to use statistics (ie: angles, speed, distances, etc)
 - May use: (Video, GPS, Accelerometry, Motion Sensors, Force Plates, Gyroscopes, Radar)

Age of Participants

- The minimum recommended age for this course is 13 years of age and over. ‘
- Age for group sessions or individual consultations will vary.

Hosting Requirements - The following hosting requirements are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor/Consultant desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable)
 - Participant chairs and desks set up in a classroom (if applicable)
- Must cover all additional costs of the instructor/consultant (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course
- Honor any invoice sent by the SMSCS at the completion of the course/consult (base amount, course conductor expenses as noted above)

Group/Individual Consultation Requirements – See Service & Tier Chart for specifics

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- Approved sessions will vary from 1 – 3 sessions depending upon circumstances
- Travel Expense, Meal Expense, Facility Rental (if applicable)

6. Sport Medicine Education Sessions

Content - This program has two main components:

1. **Injury Care and Management Session** (1-hr in length):
 - a. Resources –
 - i. Power point utilizing an Injury Prevention module consisting of four components:
 - A) Injuries
 - B) Risk factors
 - C) Intervention
 - D) Evaluating the Effectiveness
 - ii. Library of previous presentations
2. **Self-Massage and the Athlete Session** (1-hr in length):
 - b. Resources –
 - i. Power point presentation:
 - A) How self-massage assists in injury prevention and enhances training
 - B) Hands on instruction on different massage strokes.

Age of Participants

- The minimum recommended age for the sessions is 13 years of age, although content and presentation style can be adjusted for any age group.

Hosting Requirements - The following hosting requirements are required:

- Appropriate location (large enough room for the number of participants)
- Must handle all registration and attendance requirements
- Must provide:
 - Set-up – consultant/facilitator desk/table (if applicable), participant chairs and desks set up in a classroom style (if applicable)
 - LCD projector, laptop, extension cord, and screen/white wall (if applicable)
- Must cover all additional costs of the consultant (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the session
- Honor any invoice sent by the SMSCS at the completion of the session/consult (base amount, consultant expenses, etc., as noted above)

Group/Individual Consultation Requirements – See Service & Tier Chart for specifics

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- Approved number of sessions will vary depending upon circumstances. Most common will be to a max of three.
- Travel Expense, Meal Expense, Facility Rental (if applicable)

Instructor/Consultant Remuneration

- \$130/hr for group consulting
- \$85/hr for individual consulting

Note: Some sport medicine education sessions (eg. injury prevention) are very sport specific and often require substantial preparation time. A \$70 per hour prep time fee may be provided to a consultant when this is the case and on approval by the Manager of Sport Medicine Services or the Executive Director.

7. Concussion Education and Management Program

Introduction

Concussion in sport is a recognized public health problem. Concussion is a brain injury and is defined as the complex pathophysiological process affecting the brain, induced by biomechanical forces. Concussions occur in all sports and presents with a range of domains which may include symptoms such as head ache, cognitive impairment, physical signs, behavioral changes, and sleep disturbances. In most athlete's, concussion symptoms will resolve in a couple weeks, but some may take longer.

In its mission to support and optimize competitive sport performance through the delivery of high quality and evidence-based sport medicine services to its clients, the SMSCS is a leader in concussion education and the implementation of best practices for concussion prevention and management. Care of the concussed athlete begins with a concussion management guideline that provides concussion education, recognition and management, including an emergency action plan.

The Canadian Concussion Collaborative recommends that all organizations responsible for operating, regulating or planning sport or sporting events have a concussion management protocol. This goes beyond increasing awareness, knowledge and attitudes about concussion. The development of a protocol will identify ways to improve concussion prevention and management specific to the organization and resources available. It will aim to identify an environment that will minimize the incidence of concussion, optimize early identification of concussion, optimize the management of concussed athletes, and identify available resources for a graduated return to school, work, and sport in the community.

Athletes, parents and coaches may lack the knowledge needed to make informed decisions about concussion. The SMSCS can play a significant role in the health and safety of athletes through the dissemination of knowledge on concussion. Education geared to athletes, parents, coaches and administrators can enhance the recognition of concussion and improve management and prevention. Preseason education should include definition of sport concussion, recognition, assessment, management, return to academics and sport protocols, fair play, education and consistent modeling of the rules, and prevention (equipment fitting, practice design, correct playing techniques and behaviors). This will help to underline the significance and importance of this injury better.

This program has two main components:

A. Concussion Education Sessions (both 1-hr in length):

1. Athlete Presentation (power point)
2. Coach/Parent/Administrator Presentation (power point)

Content:

1. Athlete power point presentation:
 - What is a concussion?
 - Reasons for an athlete not to report a Concussion
 - Culture of Safety
 - Health and Performance Consequences Playing While Symptomatic
 - Mechanisms of Injury
 - Suspected Concussion
 - Early and Late Signs & Symptoms

- Physical
- Cognitive
- Sleep
- Emotional
- Most Common Symptoms
- Who Can Diagnose?
- Return to Learn
- Return to Play

2. Coach/Parent/Administrator power point presentation:

- Concussion Myths
- What We Know
- What Is Promising
- What is a Concussion
- When to Suspect a Concussion – Red Flags
- Concussion Management
 - Using the SMSCS 'Concussion Action Plan':
 - Flow Chart
 - Record of Concussion
- Management Team
- Return to Learn
- Return to Play
- What's Next?
- Injury Spotters

Age and Level of Participants

- The minimum recommended age for the Athlete Presentation is 12 years of age, but educational sessions can be modified for younger clients.

Resource Material

- Concussion Education Session (power point presentations).
- SMSCS Concussion Action Plan handout
- SASM Concussion handout see Appendix in back of document

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics.
- Travel Expenses, Meal Expenses, Facility Rental (if applicable) are per SMSCS policy.

this will need updating with what Rhonda Shishkin finalizes

B. Concussion Management Protocol Plan Development

Content

- Concussion Management Planning Tool (CMPT)
 - This can be used by PSOs as a 'template' to develop their own Concussion Management Protocol Plan.
- Concussion Plan Development Process
 - The SMSCS has developed the following six-step process to assist sport organizations (PSOs) in the development of their Concussion Management Protocol Plan:
 - 1) Contact the SMSCS to receive a copy of the Council's CONCUSSION MANAGEMENT PLANNING TOOL (CMPT).

- 2) Review the CMPT with the PSO. The PSO then goes through the numerous other resources the SMSCS has listed on their website (video's, handouts, SMSCS 1-hr education session, websites, posters, apps) to see which of these resources best suit the needs of their sport organization to assist in the development their CMPT.
- 3) Re-contact the SMSCS to set up a meeting to discuss the CMPT, the sport's specific concerns/questions, as well as the PSO's selected resources.
- 4) Develop the sport organization's Concussion Management Protocol Plan and forward it to the SMSCS to be reviewed by an approved SMSCS consultant/expert. The PSO's can use some of their free service hours/funding for this service. This consultant review usually takes between 1 to 4 hours.
- 5) The PSO then makes the appropriate changes recommended by the SMSCS Consultant, and then brings the Plan forward to their Board of Directors for approval.
- 6) Submit approved Plan to SMSCS to keep on file.

Age and Level of Participants

- These 'reviews' are performed for any PSO or organization that requests one.

Resource Material

- The SMSCS website has an extensive resource section that all organizations can use to assist them in the development of their Concussion Management Protocol Plan.
- The SMSCS will provide the following resources to assist organizations in the development of their Concussion Management Protocol Plan:
 1. SMSCS Concussion Management Planning Tool (CMPT)
 2. SMSCS Concussion Action Plan – Flow Chart
 3. SMSCS Concussion Action Plan – Record of Concussion
 4. SMSCS Sample Emergency Action Plan
 5. SMSCS AEP – Best Practices Recommendations

Note: SMSCS Office has the above resources in an electronic file.

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- Travel Expense, Meal Expense, Facility Rental (if applicable) are per SMSCS policy
- Generally, pre-planning sessions are 1 hr, and reviews can take from 1hr – 4hrs.

Instructor/Consultants

- Qualifications:
 - Must attend an in-service educational session hosted by the SMSCS
 - Must meet the current SMSCS Consultant Guidelines – having obtained sport credentials through a national professional sport body, often at the post graduate level. Meeting these criteria would assume consultants have been examined on concussion knowledge and a level of competence achieved. At this time the following 'medicine' related consultant groups meet the criteria:
 - CASEM Physician
 - Certificate in Sport Physiotherapy
 - Diploma in Sport Physiotherapy
 - Certified Athletic Therapist

Notes Regarding Baseline Concussion Testing:

The SMSCS will not provide funding to PSO's for Baseline Concussion Testing due to the following:

- Completing a comprehensive baseline testing battery on athletes can be very time intensive, cost prohibitive, and logistically challenging especially for our PSO clients.
- Funding to PSO's for sport medicine services is limited.
- Scientific evidence in this area is relatively new and still evolving.

However, if a PSO chooses to conduct Baseline Concussion Testing using their own funds the Council will strongly recommend that the PSO has a comprehensive Concussion Management Plan in place that includes education of their athletes, coaches, parents and administrators on prevention, recognition, management and return to learn/play. PSO's should also have a clear policy for collection, interpretation, storage, access, and use of data.

Finally, the SMSCS will also recommend that PSO's utilize practitioners that meet the SMSCS Consultant criteria and select baseline testing that is supported by the most current recommendations.

8. Sport Medicine Assessments and Rehab Planning Program

Content

- Initial Injury Recognition/Assessments
- Functional Assessments
- Rehab Exercise Program Design Services

Age of Participants

- Age individual consultations will vary.

Instructor/Consultant/Service Provider Remuneration and Procedures

Note: Actual cost for Clinical Initial Assessment (clinic) or Rehabilitation Exercise Program Design will vary.

Note: The Council will only reimburse for Initial assessments:

- (1) after all other avenues of health insurance have been accessed.
 - (2) if it is performed by a Consultant (as opposed to a Service Provider).
 - (3) the consult has been pre-approved by the PSO
- Notification and Approval of Individual Clinical Injury/Functional Assessments and Rehabilitation Exercise Program Design Consultations must be approved by the SMSCS **PRIOR** to the scheduling between an athlete/coach and the consultant.
 - Athletes must pay the Consultant/Clinic and then submit the appropriate form (Initial Injury Assessment Reimbursement Form (Form is a PDF on file in the office) to the SMSCS for reimbursement. (NOTE: under special circumstances whereby athletes receive national funds to cover these expenses, the provider may direct invoice the SMSCS)

- SMSCS would provide a list of medical professionals throughout the province who have interest in sport medicine to the parent, athlete or coach for their use. These professionals can provide expert advice on an athlete's injury.

9. Sport Safety Program

This Program consists of two 7-hour educational workshops:

- Sport Wrapping and Taping (SWaT)
- Sport Injury Prevention and Care (SIPaC)

Note: The above two workshops offered by the SMSCS are NOT certified workshops. They do not give anyone any type of official certification or designation. They are educational workshops only, and are not recognized by any professional body.

9.1 Sport Wrapping and Taping (SWaT) Workshop

Content – 7 hour non-certified educational workshop consisting of the following components:

- Information about SMSCS
- Types of Soft Tissue Injuries
- Cycle of Athletic Injury
- Mechanism of Injury
- HOPS Assessment
- Stages of Healing
- Return to Sport Guidelines
- RICE Principle
- Taping Theory
 - Purpose
 - Benefits
 - Common Taping Mistakes
 - When not to Tape
 - Tape Application
 - Common Taping Techniques
 - Taping Supplies
- Taping Techniques
 - Ankle
 - Wrist
 - Thumb
 - Finger
- Functional Wraps
 - Hip

Age of Participants

- The minimum recommended age for this course is 13.

Hosting Requirements - The following hosting requirements are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable), extension cord
 - Tables for participants to sit on in order to be taped

- Participant chairs and desks set up in a classroom style (if applicable)
- Participant names & addresses
- Must ensure a minimum of 6 participants and no more than 24 participants
- Must cover all additional costs of the instructor (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course
- Honor any invoice sent by the SMSCS at the completion of the course (base amount, course conductor expenses as noted above)

Resource Material

- PPT Presentation
- Mandatory Forms
 - Participant Evaluation Forms
 - Registration Form
 - Consultant Expense Form
 - Sport Taping Workshop Handout Package (one per participant)
 - Heel Lock Wrap Technique
 - Sport First Aid Kits (for sale)
 - SMSCS Info
 - Sport 1st Aid Supplies Order Form
 - Procedures to Receive Certification of Program Completion Form
 - Sport 1st Aid Rules Regarding Blood and Other Body Fluids

Material used for Workshop

- Tape, 1.5"
- Tongue Depressors
- Heel & Lace Pads
- Pro Wrap
- Skin Lube
- Shark Cutters
- Zip Cutters
- Tensors, 2", 3", 4", 6", Groin
- Tape Adherent Spray
- Scissors: Universal, Tape/Bandage
- Ankle Wraps
- Foam 'horseshoes'
- Other Taping Items for Demo purposes:
 - Lightplast:
 - Leukotape P:
 - Kinesiotape:
 - Elastic Adhesive tape: 2", 3", 4"

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- \$595 + taxes for a full length 7-hour course
- Travel Expense, Meal Expense, Accommodation, Facility Rental (if applicable)
- Taping Supplies (SMSCS 'MED' Pricing List + Taxes)
- \$5 per participant for workshop handout package

Instructor/Consultant Remuneration

- \$595 for the 7-hour workshop

Sponsorship

- no sponsorship.

9.2 Sport Injury Prevention and Care Workshop (SIPaC)

Content – 7-hour non-certified educational workshop consisting of the following components:

- Information about SMSCS
- Role of the first-aiders
- On-Field Assessment
- Safety Procedures and Equipment
- Injury Prevention
- Injuries

Age of Participants

- The minimum recommended age for this course is 13 years of age.

Hosting Requirements

The following hosting requirements are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable), extension cord
 - Participant chairs and desks set up in a classroom (if applicable)
 - Participant names & addresses
- Must ensure a minimum of 6 participants. There is no maximum limit set.
- Must cover all additional costs of the instructor (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course
- Honor any invoice sent by the SMSCS at the completion of the course (base amount, course conductor expenses as noted above)

Resource Material

- Various Handouts
- Sport Injury Prevention and Care (SIPaC) workshop Participant Resource booklet

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- \$595 + taxes for a full length 7-hour course
- \$5 per person for Participant Resource Booklet
- Travel Expense, Meal Expense, Facility Rental (if applicable as per SMSCS policy)

Instructor/Consultant Remuneration

- \$595 for the 7-hour workshop
- plus mileage, travel time, meals, and accommodations

Sponsorship

- The Sport Injury Prevention and Care Workshop currently has no sponsorship.

Confirmation of Attendance

In order for participants to receive a **Confirmation of Attendance letter** to verify that they have attended both of the workshops associated with the Sport Safety Program, the SMSCS requires that individuals contact the SMSCS directly with specific information on when and where they

attended the workshops: The Confirmation of Attendance letter is simply a recognition of attending the two educational workshops.

See Appendix in back of the document

10. Drug Education and Awareness Program

Overview

- As of January 1, 2022 this program will consist of the SMSCS acting as a liaison to the Council's client groups regarding the various aspects relating to drug-free sport. This is primarily accomplished by:
 - Referring clients to the CCES and their website
 - Having staff be updated on the latest issues relating to the subject of drugs and sport, the CCES, WADA, etc.
- The SMSCS can also assist organizations in developing drug education policies and programming.
- The SMSCS supports the Canadian Centre for Ethics in Sport and its Canadian Anti-Doping Program (CADP) and agrees to abide by the CADP Covenant and to ensure all consultants and targeted athletes and coaches are educated on the current prohibited substances, ethics issues, and doping control procedures through the SMSCS's own workshop and/or the CCES on-line education program.

11. Sleep and Performance (rest and recovery) Presentation

Overview

The purpose of this program is to provide a general multi-disciplinary presentation that can address some common questions and thoughts in regards to athletes and proper sleep. The focus is on sleep and performance education. The overall objective is to create an educational presentation from a multi-disciplinary approach and not a "sleep plan" for athletes. There are private experts that conduct sleep plans for businesses and athletes, however that is not the SMSCS's intention or goal with this presentation. The presentation is 1-1.5 hours in length

Content

- Are you getting enough sleep?
- Travel, Jet Lag & Sleep
- Sleep Questionnaire
- Sleep and Nutrition
- Studying and Sleep
- Sleep, Well-being and Stress
- Sleep and Sport Performance
- Sleep and Exercise
- Sleep and Physiological Indicators
- Sleep and Injuries
- Sleep and Medical Disorders
- Sleep and Screen Time
- How to Assess Sleep
- Sleep Tips

Age of Participants

- There is no minimum age to attend the workshop as it is intended for Canada Games Teams, University Teams, or Provincial Sport Governing Bodies. Workshops can also be provided to schools, sport clubs and on occasion on an individual basis.

Hosting Requirements - The following hosting requirements are recommended.

- Appropriate location (large enough room for the number of participants)
- Must provide:
 - Course conductor/Consultant desk/table (if applicable)
 - LCD projector, laptop, and screen/white wall (if applicable)
 - Participant chairs and desks set up in a classroom (if applicable)
- Must cover all additional costs of the instructor (travel, meals, lodging). The SMSCS will try to provide the closest consultant for the course
- Honor any invoice sent by the SMSCS at the completion of the course (base amount, course conductor expenses, etc., as noted above)

Service Fees

- See Service & Tier Eligibility Chart and Consultant Pay for specifics
- Workshops for Canada Games, Western Canada Games, University teams, PSO's and Sport Districts are provided free of charge. Most other groups and schools are charged the service fee and travel costs according to the SMSCS Services Costs Guidelines.
- Designated clients of the SMSCS (eg. PSO's, University Teams, Sport Districts, etc.) are eligible to utilize one of their free "sport medicine service" hours offered by the SMSCS.

12. Grassroots Program-Partnership with Sask Sport Districts for Sport, Culture, and Recreation

Overview

The purpose of this program is to establish a partnership with the seven Sask Sport Districts for Sport, Culture, and Recreation to provide sport medicine and science programming and services to grassroots and rural athletes and coaches across Saskatchewan.

Program Areas

- Sport Medicine and Science Educational Sessions
- Resource Development
- Sask Games Preparations - Pep Rally Presentations

1. Sport Medicine and Science Grassroots Education Sessions

Promotion

- SMSCS:
 - Will develop a promo piece for all Districts to utilize to assist in the promotion of the program.
- Districts:
 - The Districts promote in their Newsletter

Hosting

- Each of the seven Districts will act as the host for requests that can access the free service
- Districts will:
 - Promote within their District
 - Take the Request from the Requestee within their District
 - Contact the SMSCS with the request
 - Assist the SMSCS Presenter with the session (if required)
- SMSCS will:
 - put the Presenter in contact with the District representative &/or Requestee representative to ensure all details for the presentation are finalized.

Payment and Remuneration

- Payment for Honorariums will be the responsibility of the SMSCS

2. Resource Development

- The SMSCS will assist in the development of grassroots educational resources such as pamphlets, handouts, etc. as requested by the Districts and is deemed necessary by the SMSCS

3. Sask Games Preparation - Pep Rally Presentations

- The SMSCS will provide Consultants to facilitate educational sessions at District Pep Rallies.

Payment and Remuneration

- The Consultant Honorarium will be paid from the In-Kind Funding allocated annually to each District.
- The Travel, Meals, and Accommodation costs will be invoiced directly back to the Host District.

13. Sask Games Council- Canada Games Team Sask Mission Staff Medical and Science Personnel Program and Policies

13.1 Overview

The SMSCS and the Sask Games Council have a partnership that ensures sport medicine (eg. medical liaison) and sport science personnel (eg. mental performance consultant, dietitian) are part of the Team Saskatchewan Mission who attend major games (eg. Canada Games).

The role of the sport medicine and sport science personnel is to ensure the safety of all athletes and improve their performance and experience at major games.

The number of sport science and sport medicine personnel on Team Sask mission staff will vary from games to games and depends on coaches and athlete needs, location of games and budget(s). However, normally a minimum of one(1) medical liaison and one(1) sport science

consultant will be part of the mission staff at each games with an option for additional staff depending on the factors mentioned above.

The Sask Games Council normally pays the expenses (travel, meals accommodations, uniform) for one medical liaison and one sport science consultant. The SMSCS is responsible for any additional expenses incurred by the sport medicine or science personnel attending a major games as part of the Team Sask Mission Staff. In addition, the sport science and medical liaison consultant positions are paid positions (if not occupied by a staff member) Remuneration for both positions is set at \$350 per day including travel days.

13.2 Medical Liaison & Sport Science Consultant Job Descriptions

CANADA GAMES TEAM SASK MISSION STAFF – MEDICAL LIAISON

Medical Liaison (updated May 24, 2024)

QUALIFICATIONS

- Has a proven paramedical or medical background as per the SMSCS qualifications.
- Is interested in/has experience in medical administrative-type duties.

PROFILE

- Paid Consultant Position (unless a staff member) - \$350 per day including travel days)(other expenses, eg. hotel, meals, etc normally paid by the Sask Games Council
- Is a member of the Team Sask Mission Staff.
- Primary responsibility is to act as the medical expert/liaison between the Host Society and Team Sask specific to all health and safety matters of Team Sask. participants.
- Additional responsibilities as Mission Staff with one or more of the sports (see mission staff job description attached).

JOB DESCRIPTION – MEDICAL LIAISON

- Directly responsible to the Chef de Mission of Team Sask.
- Attend all Team Sask meetings/events organized by the Sask Games Council.
- Serve as the main contact to the Team Sask Chef de Mission prior to and during the Games regarding issues relating to medical requirements.
- Manage confidential medical records and information for all Team Sask participants. Advocate for the proper completion of medical history forms in the GEMS.pro registration system by all Team Sask members.
- Ensure the Chef de Mission and the Host Medical Committee are aware of any areas of serious medical concern prior to the arrival of the team.
- Work in collaboration with the other SMSCS representatives on Team Sask to provide an integrated, thorough, and high-quality service to the athletes, teams, coaches, and members of Team Sask
- Become acquainted with all Host Medical Committee operations and procedures and help educate Team Sask mission staff and Coach/Managers.
- Act as a communication link (“trouble-shooter”) between the Host Medical Committee, the Chef de Mission, and the coaches and athletes.
- Function as the main Mission Staff contact on all matters pertaining to the health and safety of team members.
- Main point of contact between the host medical committee in the polyclinic and the coach/manager.

- Provide medical reports and updates to the Chef de Mission regarding the health status of members of Team Sask.
- Responsible to work in cooperation with the Chef de Mission and the Mission Staff on all matters pertaining to the sport medicine and science needs of all athletes and coaches.
- Communicate and update the Sport Medicine and Science Council of Saskatchewan (SMSCS) staff on a regular basis on any matters pertaining to them.
- Responsible, with assistance from the SMSCS staff, to promote the SMSCS programs and services, prior to and during the games, to all athletes, coaches, mission staff, and parents involved with the Games.
- Responsible, in cooperation with SMSCS staff, if appropriate, to understand the CCES doping control procedures and provide support to any Saskatchewan athlete that is identified for testing at the Games.
- Be familiar with the CCES anti-doping online education and training module.
- Present, as part of the agenda, at the Team Sask Coach/Manager meetings prior to and during the Games related to medical.
- Participate in the pre-Games Provincial/Territorial Medical Liaison meeting via conference call and the onsite polyclinic tour upon arrival at the Games led by the Host medical services team Chair and the Chief Medical Officer (CMO).
- Play a support role in navigating the medical system for those Team Sask athletes who are taken to the hospital or an outside clinic for emergency care. Effective and timely communication with the Chef de Mission and Head Coach are critical in this situation.
- Be familiar with the concussion protocol being used at the Games as well as the “athlete removed from play” procedures.
- Be familiar with the Host Medical Team policies regarding the prevention and spread of communicable (infectious) diseases (eg COVID-19) and ensure Team Sask is aware of and follows such policies.
- Provide a comprehensive follow up report to the Chef de Mission and to the SMSCS following completion of the Games. The report should include a summary of the Games, challenges, and recommendations for change/improvement.

Note: Given that the Host Medical Committee is responsible for providing high quality medical care at the polyclinic and at the competition and training venues, the Medical Liaison will not provide hands-on service medical care.

Communication protocol regarding serious injury or illness where an athlete is removed from play

The Team Sask Medical Liaison is responsible for communication between the host medical services team and the coach/manager. Once the Medical Liaison finds out the details of the situation, they will promptly relay that information to the coach/manager who is then responsible to advise the athlete’s parent/guardian. Timely communication to all parties is important.

- If deemed necessary by the Team Sask Medical Liaison, they can facilitate a meeting with the parent(s) after the initial communication from the Team Manager or Coach to better explain the medical situation and the rationale for why the athlete has been removed from play.
- In situations deemed appropriate by the Team Sask Medical Liaison, they may facilitate a meeting between the Coach, Parent(s) and Chief Medical Officer (CMO) to help all parties better understand the situation and safety priorities of the athlete.
- After the initial communication by the Team Manager or Coach the Medical Liaison is free to communicate with Parent(s) on the status of the athlete’s condition.

- The Chef de Mission will speak on behalf of Team Sask in a situation where serious injury or death creates a need to speak publicly. The Medical Liaison will be asked to be in attendance and provide any information or support required.

JOB DESCRIPTION – MISSION STAFF

- In addition to the role as Medical Liaison, this person will also be asked to act as a Mission Staff person assigned to a team/sport during Phase 1 and Phase 2 of the Games. For the roles and responsibilities of the Team Sask Mission Staff please refer to that document available from Team Sask (Saskatchewan Games Council).

Science Liaison – Mental Performance (updated May 24, 2024)

CANADA GAMES TEAM SASK MISSION STAFF – MENTAL PERFORMANCE CONSULTANT

QUALIFICATIONS

- Is a current consultant or staff member with the Sport Medicine and Science Council of Saskatchewan in the Mental Performance area.
- Qualifications as per the Sport Medicine and Science Council of Saskatchewan Consultant Qualifications (minimum standards)

PROFILE

- Paid Consultant Position - \$350 per day including travel days (other expenses: eg. hotel, meals, etc normally paid by the Sask Games Council)
- Is a member of the Saskatchewan Mission Staff.
- Primary responsibility is to ensure that the mental performance needs of the athletes and coaches both prior to and during the Games are being met.
- May have additional responsibilities as Mission Staff with one or more of the sports.

JOB DESCRIPTION & DUTIES

General

- Directly responsible to the SMSCS in leading up to the Games and the Chef de Mission of Team Saskatchewan while at the Games.
- Serve as a contact, to the Chef de Mission on all matters pertaining to the mental performance needs of all athletes and coaches.
- Become acquainted with all Host operations and procedures and provide information to such mission staff that will relate to sport science issues.
- Function as a Mission Staff contact, on all matters pertaining to mental performance.
- Provide updates, to the Chef de Mission regarding the mental performance needs of members of team Saskatchewan.
- Provide a comprehensive follow up report to the Chef de Mission and to the Sport Medicine and Science Council of Saskatchewan following completion of the Games. The report should include a summary of the Games and recommendations.

Prior to Games

- Where appropriate, work with teams and/or their mental performance consultants to ensure every team has an appropriate mental performance plan.
- Assist coaches and other members of the IST in the monitoring of mental performance issues for the athletes.
- Work with the IST to develop jet lag plans and strategies.
- Work in close co-operation with the other integrated sport science and sport medicine support team (IST) members to provide an integrated, thorough, and high quality service to the athletes, teams, coaches, and members of Team Sask
- Become a member of your designated sport and act as a liaison between your sport and the Chef de Mission to ensure all logistical requirements for your sport are fulfilled.
- Act as a liaison between the sport and the Chef de Mission on all logistical requests (eg. online registration, media guide, uniform sizing, etc).
- Attend any Team Sask meetings organized by the Sask Games Council.

At the Games

- Provide mental performance services as required to members of Team Saskatchewan.
- Continue to be the liaison member between your designated sport and the Chef de Mission to ensure all logistical requirements for your sport are fulfilled.
- Provide Team Sask Newsletter articles as requested.
- Work the Mission Desk if required.
- Contact and discuss daily with Team Sask Coaches to inquire about service needs.
- Attend Team Sask daily practices/competitions/games and be readily available for meetings and/or consultations
- Attend various Team Sask functions (daily staff meetings, weekly Mission/Coach Events, Opening/Closing Ceremonies, etc)
- Responsible to keep a detailed daily log of all services/activities provided to Team Saskatchewan.

Science Liaison – Sport Nutrition Consultant (updated May 24, 2024)

CANADA GAMES TEAM SASK MISSION STAFF – SPORT NUTRITION CONSULTANT

QUALIFICATIONS

- Is a current consultant or staff member with the Sport Medicine and Science Council of Saskatchewan in the Sport Nutrition area.
- Qualifications as per the Sport Medicine and Science Council of Saskatchewan Consultant Qualifications (minimum standards)

PROFILE

- Paid Consultant Position - \$350 per day including travel days (other expenses: eg. hotel, meals, etc normally paid by the Sask Games Council)
- Is a member of the Saskatchewan Mission Staff.
- Primary responsibility is to ensure that sport nutrition and any special dietary needs of the athletes and coaches both prior to and during the Games are being met.
- May have additional responsibilities as Mission Staff with one or more of the sports.

JOB DESCRIPTION & DUTIES

General

- Directly responsible to the SMSCS in leading up to the Games and the Chef de Mission of Team Saskatchewan while at the Games.
- Serve as a contact, to the Chef de Mission on all matters pertaining to the sport nutrition needs of all athletes and coaches.
- Become acquainted with all Host operations and procedures and provide information to such mission staff that will relate to sport science issues.
- Function as a Mission Staff contact, on all matters pertaining to mental performance.
- Provide updates, to the Chef de Mission regarding the sport nutrition needs of members of team Saskatchewan.
- Provide a comprehensive follow up report to the Chef de Mission and to the Sport Medicine and Science Council of Saskatchewan following completion of the Games. The report should include a summary of the Games and recommendations.

Prior to Games

- Serve as the main contact to the Saskatchewan Chef de Mission prior to the Games regarding issues relating to sport nutrition.
- Present, as part of the agenda, on the nutrition area at the Team Sask Coach/Manager meetings prior to the Games.
- Contact Canada Games Coaches/Teams that currently are not utilizing Nutrition services and get them active.
- Contact all Canada Games coaches to meet and let them know of your role and attendance for the Games.
- Make contact with other Integrated Service Team (IST) members of teams to make them aware of the monitoring of sport nutrition performance issues for the athletes.
- Work with the IST Team to develop bus or jet lag plans and strategies.
- Meet with Sask Games Council to review travel day plans - schedule, eating opportunities, need for additional snacks
- Make recommendations for travel snacks - noting food allergies and intolerances
- Meet with teams to review competition schedule and discuss any nutrition concerns with meal and snack timing (build on knowledge base from sessions prior to the CG)
- Make contact with coaches in the monitoring of nutrition issues for the athletes.
- Continue to provide sport nutrition services leading up to the Games.
- Act as a liaison between your designated sport (if applicable) and the Chef de Mission on all logistical responsibilities (eg. online registration, media guide, uniform sizing, etc).

- Attend all Team Sask meetings/events organized by the Sask Games Council.
- Three (3) months prior to the Games, contact other dietitian consultants to inquire what services they have provided to teams that they have been working with leading up to the Games.
- Attend a training camp/tryout/competition for your designated sport/team to meet the coaches and athletes and start to build a relationship prior to arriving at the Games.
- Make a presentation at the Team Sask Coach/Manager/Mission meetings about your role and the services available to the teams (provide handouts/materials if applicable).
- Contribute to Canada Games coach professional development sessions or workshops hosted prior to the Games (as requested).
- Review menu prior to arrival at Canada Games/WCSG site, noting hours of operation, food and fluid content, labeling and allergy information
- Responsible, in cooperation with the other science/medicine mission staff, to promote the SMSCS programs and services to all athletes, coaches, mission staff, and parents involved with the Games.
- Be familiar with the CCES anti-doping online education and training module.

At the Games

- Directly responsible to the Chef de Mission of Team Sask.
- Serve as the main contact to the Saskatchewan Chef de Mission during the Games regarding issues relating to sport nutrition.
- Become acquainted with all Host food service operations and procedures and provide information to such mission staff that will relate to sport nutrition issues.
- Act as a communication link (“trouble-shooter”) between the Host Committee, the Chef de Mission and the coaches and athletes.
- Function as the main Mission Staff contact on all matters pertaining to sport nutrition.
- Provide updates to the Chef de Mission regarding the sport nutrition needs of members of Team Saskatchewan.
- Responsible to keep a detailed daily log of all services provided to Team Saskatchewan
- Work in collaboration with the other sport science representatives on Team Sask to provide an integrated, thorough, and high-quality service to the athletes, teams, coaches, and members of Team Sask
- Responsible to work in cooperation with the Chef de Mission and the Mission Staff-Medical Liaison on all matters pertaining to the sport nutrition and special dietary needs of all athletes and coaches including:
- Provide sport nutrition consulting services as required to members of Team Saskatchewan

- Review menu and meal plans for all remote sites
- Review, understand and play the lead role regarding boxed meals (ordering procedures, meal content to ensure adequate choice; quantity, quality and proper temperature regulation)
- Meet with teams/athletes as needed to review menu and highlight optimal choices for performance
- Meet with specific athlete who have food allergies and intolerances and guide them through the menu to ensure adequate choices
- Support team managers/coaches if alternate food choices are needed due to allergies or intolerances
- Review drinking water access at sport venues and within the Athletes Village
- Support sports with refueling needs at the venues - boxed recovery snacks
- Support team managers/coaches as they plan the team's recovery snacks at the venues
- Support team managers/coaches as they plan for the team's hydration needs (sport drinks, etc.)
- Work in close co-operation with the other integrated sport science and sport medicine support team (IST) members
- Communicate and update the Sport Medicine and Science Council of Saskatchewan as required.
- Present, as part of the agenda, on the nutrition area at the Team Sask Coach/Manager meetings held during the Games.
- Responsible, in cooperation with the medical liaison, to understand the CCES doping control procedures and provide support to any Saskatchewan athlete that is identified for testing at the Games.

Following the Games

- Provide a comprehensive follow up report to the Chef de Mission and to the Sport Medicine and Science Council of Saskatchewan following completion of the
- Games. The report should include a detailed daily summary of your Games activities (ie: travel, meetings, consults, mission duties, mission events, etc) as well as the identification of challenges, recommendations for improvement, etc.

13.3 Sport Medicine (Medical Liaison) and Sport Science Consultant – Selection Criteria **(updated May 30th, 2024)**

The Council considers these positions to be excellent professional development opportunities for our members and consultants.

For the Medical Liaison, the Council's goal is to ensure as many members and consultants as possible get to experience being part of Team Saskatchewan as support personnel so priority will be given to individuals who have not attended a Canada Games previously

The selection criteria for the above positions are as follows:

- Medical Liaison (filled by Sport Medicine Consultant or Service Provider)
 - Sport Science Liaison (filled by Sport Science Consultant)
 - *Due to budget constraints, the Council will send a staff member as the medicine/science liaison if possible.*
 - *In cases when that is not possible the following point scoring system will be used to determine the successful candidate.*
 - *The number of positions sent for each Games will be at the discretion of the Management Committee and the budget available to do so.*
-

The following point scoring system will be used to determine the successful candidate. In the case of a tie, the Management Committee (by majority vote) will determine the successful candidate.

- General Consulting -
 - 10 points - For 6 or more consults or sessions done for the Council in the past 4 years (includes event coverage-1 shift equals 1 consult).
 - 5 points - For 3 to 5 consults or sessions done for the Council in the past 4 years (includes event coverage- 1 shift equals 1 consult).
- General Team/Group and Individual Consulting -
 - 10 points – For consulting work done for the Council in the past 4 years with 4 or more different teams/groups.
 - 5 points – For consulting work done for the Council in the past 4 years with 2 or 3 different teams/groups.
- Canada Games Team/Group and Individual Consulting

In addition to the above general consulting points, points will be awarded for all consulting done with Canada Games teams/groups or individuals as follows:

- 10 points - For 6 or more consults or sessions done for the Council in the past 2 years with Canada Games teams or individuals.
- 5 points - For 3 to 5 consults or sessions done for the Council in the past 2 years with Canada Games teams or individuals.

- 10 points – For consulting work done for the Council with Canada Games teams or individuals in the past 2 years with 4 or more different teams/groups or individuals.
- 5 points – For consulting work done for the Council with Canada Games teams or individuals in the past 2 years with 2 or 3 different teams/groups.

Note: The above is specific to working with Canada Games teams or individuals who will be part of the Games the consultant is applying for.

- Past Major Games Involvement
 - 2 points for each major games attended as a host medical, science personnel, coach or staff in the past 10 years (max 5 Games)
- Miscellaneous Sport Involvement and Experience
 - Sport and volunteer experience that would be beneficial as part of your duties. This can include:
 - 5 points for SMSCS Board or Committee work in the last 4 years
 - 2 points for work with in the past; events covered, coaching, sports participated in the last 4 years
- Sask Games Council Recommendation(s) - Points may be awarded at the discretion of the Management Committee as follows for any recommendation from the Sask Games Council
 - recommendation – 3 points

Note: The Sask Games Council is not required to give a recommendation and the Management Committee is not obligated to accept it if provided.

Other Notes

- Medical Applicants who have their sport credentials (eg. CASEM Diploma (physicians), Diploma and Certificate (physiotherapist), CATA © (athletic therapists), Sport Fellowship (chiropractors), Sport Fellow Member (sport massage therapists). will be considered first, non-sport credentialed applicants will only be considered if no sport credentialed applicants apply.
- The successful applicant will be the individual who scores the highest point total based on the above criteria.
- In case of a tie the Management Committee reserves the right to select the successful applicant.
- No medical applicant can be selected for more than one Games Cycles in a row, unless they are the only qualified application received. (Exception: Applicants with their sport credentials can be selected for successive games if all the other applicants do not have their sport credentials).
- The point scoring system will determine the successful candidate, however, in the case where there may be exceptional extenuating circumstances the Management Committee by majority vote can overrule the scoring system.

Canada Games Applicant Scorecard

Applicant Name: _____

General Consulting		
· 6 or more consults or sessions over past 4 yrs.	10 points	
· 3 or more consults or sessions over past 4 yrs.	5 points	
· 4 or more different groups or teams over past 4 yrs.	10 points	
· 2 or more different groups or teams over past 4 yrs.	5 points	
Canada Games Consulting		
· 6 or more CG consults or sessions over past 4 yrs.	10 points	
· 3 or more CG consults or sessions over past 4 yrs.	5 points	
· 4 or more different CG teams or indivs over past 4 yrs.	10 points	
· 2 or more different CG teams or indivs over past 4 yrs.	5 points	
Past Major Games Involvement		
· # _____ major games attended in past 10 yrs. as host medical, coach or staff (max 5 Games)	2 points each	
Misc. Sport Involvement & Experience		
· SMSCS Board or Committee last 4 years	5 points	
· Events or coaching participated last 4 years	2 points	
Sask Games Council		
· Recommendation to attend by SGC	3 points	

TOTAL Points _____

Canada Games-Team Sask Mission Staff Application Forms

- Can be found as Appendixes in the back of this document

13.4 PSO Team Selection - Medical Replacement Policy – Recommended Guidelines

- In the case of an injury to a player while trying out for the final selection to a Canada Games or Provincial Team, the decision to keep or release the player will be left up to the discretion of the Head Coach, after consultation with the parents and family physician.
- In the case where a player is on a Canada Games or Provincial Team, is injured during a pre-championship and/or Games event, tournament, practice, camp, etc. and is questionable whether they could play in the championship and/or Games, the decision to keep or release the player will be left up to the discretion of the Head Coach, after consultation with the parents and family physician.
- In the case where a player is on the Canada Games or Provincial Team, is injured during a pre-championship or Games event, tournament, practice, camp, etc. and is unable to play in the Games and or championship, the Head Coach will select an alternate player.
- In the case of an athlete who doesn't have a family physician, or when a second opinion is required by the parent, athlete or coach, the Sport Medicine and Science Council of Saskatchewan would provide a list of medical professionals throughout the province who have interest in sport medicine to the parent, athlete or coach for their use. These professionals can provide expert advice on an athlete's injury.

14. Educational Resource Materials & Information

Overview

- The purpose of this program is to provide athletes with direct access to various educational materials relating to all aspects of sport medicine and sport science. However, due to the proliferation of on-line resources the Council only offers some "limited educational resources"
- Majority of the educational materials are not offered on-line or for distribution with the exception of when hosting specific workshops, courses or educational sessions.

On-line -The Council's website contains limited resource material.

Hard Copy -The Council's limited hard copy resource material are not offered for distribution with the exception of when hosting specific workshops, courses or educational sessions.

Electronic Email Newsletters – Two separate editions are published and distributed three times a year. One is directed to towards clients, and the other towards Consultant & Membership groups.

Fees - Handout materials depending on the quantity requested may be subject to a photocopying fee.

15. Sport First Aid Supplies, Kits, and Rehab & Training Supplies

Overview

The purpose of this program is:

- to provide athletes with direct access to various supplies/equipment that assist with training and rehabilitation exercises (tubing, exercise balls, etc).
- to provide a source where the PSOs can order sport 1st aid supplies and kits, as well as get their kits restocked when supplies are low.
- to provide self-help revenue source through the sale and re-stocking of items to limited non-Sask Sport Inc. members.

Target Clients

The SMSCS primary clients are.

- Sask Sport Inc members which includes:
 - Provincial Sport Governing Bodies with a focus on their provincial level teams, clubs, leagues, athletes, coaches.
 - SHSAA and their members (High Schools)
 - Sport Districts and their members (Recreation boards)
 - FSIN and their sport programs/teams
 - Sask Games Council (and their Games medical committees)
- Non-Sask Sport Inc. members which includes: (note: the following are not clients the SMSCS places promotional resources towards but does sell items to as an avenue to generate 'self-help').
 - Individual athletes.
 - Private medicine/therapy/training clinics and facilities who are members or consultants of the Council and involved in sport.
 - Grassroots sports organizations and clubs (non-Sask Sport members).

NOTE: the SMSCS does not sell to government agencies such as Health Authorities, etc or private businesses or individuals not involved in sport.

Supplies for Purchase

- Various Sport 1st Aid Supplies such as tapes, band-aids, tensors, scissors and tape cutters, gels and powders, cleansers and antiseptics, etc.
 - View first aid kit, items included and price at www.smscs.ca
 - View first aid kit supplies and prices at www.smscs.ca
 - A re-stocking fee of \$20/hr. is charged to re-stock first aid kits to non-PSO clients. Example of this would be minor hockey associations, volleyball clubs, schools, etc.

Fees

- Costs for these items are set annually and can be viewed at www.smscs.ca.

Sponsorship

- On an annual basis the SMSCS receives a negotiated % discount from our supplier.

16. Medical Coverage Program

Overview

On a request basis the Sport Medicine and Science Council of Saskatchewan (SMSCS) will make every attempt to provide the following to assist Sask Sport Inc members (eg. PSO's, SHSAA, Universities, etc.) with adequate and agreed-upon (via an MOU) medical coverage for their athletes, teams, and host agencies during events. (Note: Please see the section on Communicable (infectious) Disease Prevention and Screening in this manual for further details on required event coverage policies and guidelines).

- 1) Medical personnel (Consultants & Service Providers)
- 2) Medical equipment
- 3) 1st aid supplies
- 4) Personal protective equipment (PPE)
- 5) Administrative services (scheduling, invoicing, etc.)

The Medical Personnel Coverage component of this Program has four (4) levels of coverage priority:

- 1) 1st Priority - To provide medical personnel coverage for PSO's hosting major competitions such as Provincial, Western, Canadian, and international championships. Examples of this include Sask Judo Association Provincial Championship, Volleyball Saskatchewan's Provincial Championships, Football Canada's Flag Football Championships hosted by Football Saskatchewan, and so on.
- 2) 2nd Priority - If a PSO does not host major competitions such as a provincial championship, then other PSO level events such as Sask First Training and I.D. camps may be covered if staff time and medical personnel are available. It should be noted however, that covering PSO hosted championships will always take priority over covering camps.
- 3) 3rd Priority – If a PSO has a need for on-going, long-term coverage with numerous camps and/or events throughout the year, the SMSCS will provide assistance to the PSO in finding medical personnel to act as their designated PSO therapist(s). Agreement on honorariums, time commitment, etc. are then negotiated between the PSO and the individual therapist(s).
- 4) 4th Priority - If the requesting agency is not a Sask Sport Inc. level organization (ie. Regina High School Football, North East School District Track and Field meet, etc.), the SMSCS will provide assistance by contacting individuals on the SMSCS's Medical Coverage of Events list and directing these individuals to contact the host organization directly if interested in providing event coverage services. Agreement on honorariums, time commitment, etc. are then negotiated between the Requesting Agency and the individual therapist(s).

Service Providers and Consultants (Hereafter referred to as Medical Personnel)

- The following are the medical professionals that act as Medical Personnel for the program:
 - physiotherapists (must be “fully licensed”)
 - medical doctors

- athletic therapists
 - massage therapists
 - chiropractors
- The Medical Personnel for this program MUST come from the five SMSCS member groups.
 - Each of these groups has a specialized sport medicine/therapy division/chapter that is a member of the SMSCS.
 - Members that have obtained their sport credentials within their medical profession are considered SMSCS CONSULTANTS.
 - Members that have not obtained their sport credentials are considered SMSCS SERVICE PROVIDERS.
 - Selection Process: The selection process for Medical Personnel to cover events will be as follows:
 - Upon receiving notice from a user group (Host) of their interest in utilizing this Program, SMSCS staff will request the Host fill out a 'Medical Coverage of Events Initial Request Form'. After reviewing this form, staff will then bring forward any recommended additions/deletions with the Host. SMSCS staff will then develop an MOU for services that will be agreed on by both parties.
 - SMSCS staff will then develop an 'Initial Coverage Schedule' and send it out to all medical personnel on the SMSCS's Medical Coverage of Events list. The schedule will also include an initial date to respond (as determined by SMSCS staff for each event) regarding medical personnel availability.
 - After the initial date to respond has passed, a schedule will be developed, utilizing the Medical Personnel who responded by the initial response date, using the following criteria:
 - The Medical Personnel with sport credentials (Consultants) located in the same city/area of the event that responded by the Initial Date to Respond will be given first priority for the shifts they indicated they are available for. If more than one Medical Personnel requests the same shift(s), in general the shift will be assigned to the one that responded first. However, in certain situations, other considerations (such as workload, shift distribution, etc.) may be discussed and agreed upon by the medical personnel involved and SMSCS staff.
 - The Medical Personnel without sport credentials (Service Providers) located in the same city/area of the event that responded by the Initial Date to Respond will be given first priority for the shifts they indicated they are available for that are not scheduled/filled by Consultants (see exceptions below).
 - If the above two points don't result in enough Medical Personnel to fill all shifts, Medical Personnel with Sport Credentials located in the same city/area of the event that responded AFTER the initial date to respond will be given priority to fill the remaining open shifts, followed by those that do not have their Sport Designation.

- If the previous point does not result in all shifts being filled, then Medical Personnel from outside the host city/area that responded by the initial date to respond will be asked to fill shifts, with the first priority being those that responded first and have sport credentials.
- If the above point does not result in all shifts being filled, correspondence (emails, texts, phone calls) will be sent out again to all medical personnel on the SMSCS's Medical Coverage of Events list inquiring of availability and/or additional shift availability.

NOTE #1: Regardless of sport credentials, priority will always be given to the Medical Personnel located in the same city/area where the event is being hosted in order to lessen the financial burden on the Host. The only exception to this is if the Host has given the SMSCS permission to utilize Medical Personnel from outside the host city/area and are willing to pay the corresponding expenses (travel, accommodations, meal allowance, etc.).

NOTE #2: On occasion, event schedules may change during the planning/scheduling process, including days and hours leading up to the event. This, of course, will have an effect on Medical Coverage Schedules. The SMSCS asks all Medical Personnel for their understanding and cooperation should this occur.

NOTE #3: With the recent implementation of the SMSCS First Responder Subsidy Program special exceptions may be considered for those requiring coverage hours to obtain a certain level within the Subsidy Program. For this to occur, any Medical Personnel who may be directly affected by the potential loss of a shift(s) will be consulted and must provide their consent prior to approving the other medical personnel for that shift(s).

Responses/conversations/names will be kept confidential between the SMSCS staff and the affected medical personnel should approval not be obtained.

- If 'Taping' is specifically requested, the Medical Personnel that have obtained their Sport Credentials (Consultants) through their sport specific educational programming (CATA Certified, SPC Diploma and Certificate, etc.) will be selected first, followed by those who have attended the SMSCS's 'Taping and Wrapping Health Care Professionals Re-Fresher/Upgrade Session', OR, have obtained other recognized taping courses/classes which will need to be approved by the SMSCS.
- All Medical Personnel providing emergency care, including immediate on-site assessment and management of injuries, must have current First Responder certification (FRc), or equivalent. A list of courses that are deemed as equivalent are listed below.

Courses deemed equivalent to the 44 Hour Red Cross First Responder (As of September 2020)

Alberta College of Paramedics Emergency Medical Technician
 Alberta Health and Safety Training Institute Emergency Medical Responder

American Health and Safety Institute Wilderness First Responder	
American Red Cross Wilderness and Remote First Aid (including Oxygen module)	
American Red Cross Emergency Medical Response (including Oxygen module)	
Arctic Star Wilderness Medicine Level III Industrial First Responder	
Canadian Red Cross Emergency Medical Responder	
Canadian Red Cross First Responder	
Canadian Ski Patrol System Advanced First Aid	
Kinetic Medical Emergency Medical Responder	
National Safety Council First Responder	
Peak Emergency Response Training Non-Urban Occupational Emergency Care	Pre-
Hospital Emergency Care Council Emergency First Response	Professional
Medical Associates Emergency Medical Responder (must include BLS)	Sport
Physiotherapy Canada First Responder	Sports
Emergency Medical Responder	Sports
First Responder	St. John's
Ambulance Advanced Medical First Responder I	United States
Department of Transportation First Responder	Vital Signs
Emergency Medical Responder	Wilderness
Medical Associates International Wilderness First Responder	

Note: Equivalency list should be reviewed every few years.

Disclaimer – Although the SMSCS requires first responder training, the SMSCS does not carry/supply all the appropriate medical equipment/supplies required to provide all first responder emergency services. For example, the SMSCS provides only the ‘basic’ oxygen connection services/supplies such as oropharyngeal airways, CPR pocket mask, and a bag-valve-mask.’

IF HOST ORGANIZATIONS REQUIRE ALL THE FIRST RESPONDER EMERGENCY SERVICES, SUPPLIES, AND EQUIPMENT, THEY WILL BE INFORMED IT IS THEIR RESPONSIBILITY TO ENSURE THEY HAVE THE REQUIRED EMERGENCY PERSONNEL/SERVICES ON HAND (EG. AMBULANCE, ETC.).

- Medical Personnel providing services not related to emergency and/or on-site assessment and management of injuries, such as massage therapy, chiropractic treatment, modality treatment, and taping and wrapping only, will not require a First Responder certification for that specific event.
- All Physicians (SASM Members) will not be required to have First Responder Certification to be eligible to be part of the SMSCS’s Medical Coverage of Events program. However, as is the case with all other Medical Personnel groups involved this Program, priority for selection will be based on the following Sport Credentials levels:

- SASM members who have obtained their Diploma in Sport and Exercise Medicine from CASEM (Consultants) will be asked and selected first.
- Secondly, those that have obtained their Certificate of Added Competence in Sport and Exercise Medicine (Consultants).
- Thirdly, those that are general SASM members (Service Providers).

Roles and Duties of Medical Personnel

• Duties of all Medical Personnel

- Be familiar with EAP for the event (or complete EAP if one is not already developed)
- Be familiar with sport rules regarding access to field of play and what first aid can be applied on the field of play, injury timeouts and other sport rules pertaining to injuries occurring during a competition.
- Be familiar with the SMSCS's Concussion Protocol as well as any Concussion Protocol already established by the specific Sport Organization.
- Review the Scope of Medical Coverage for the event as outlined on the Medical Coverage Memorandum of Understanding (MOU) Form.
- Ensure any injury documentation is kept in a secure (locked) location if the event is held over several days.
- Ensure the Host has obtained prior written/implied consent for treatment from all participants attending the event.
- Ensure the Host has obtained prior written confirmation indicating all participants have declared themselves communicable disease (eg, Covid-19) free.
- Provide appropriate assessment and management as per each discipline's current scope of practice.
- Establish and maintain personal and professional rapport with medical team members.
- Maintain appropriate injury documentation records.

• Physiotherapists

(The list of potential duties outlined will vary based to the qualifications of each individual and the size and nature of the event itself.)

1. Deal with any emergency situations by providing immediate on-site assessment and first-aid treatment of injuries. This may include basic life support and securing appropriate care from other team members and transportation to an emergency facility.
2. In the absence of a physician, fully assess an injury situation and determine whether an injured athlete is fit to return to competition. Where necessary, ensure appropriate medical referrals.
3. Provide advice regarding follow up care and referral for post-event care.
4. Provide preventative taping and wrapping if required.
5. May provide treatment in certain cases (eg. ultrasound, interferential).
6. Provide pre and post event massage when applicable.

• Medical Doctors

(The list of potential duties outlined will vary based on the qualifications of each individual and the size and nature of the event itself.)

1. Provide primary medical diagnoses and appropriate on-site treatment for injured participants. This may include basic life support and securing appropriate care from other team members and transportation to an emergency facility.
2. Ensure appropriate medical referrals, or, if required, follow up treatment programs for the athlete upon returning home from competition.
3. Provide “skin checks” prior to events such as boxing, wrestling and judo.

NOTE: Medical doctors will provide ‘event coverage’, not Pre-Event Medicals. Pre-event medicals should be completed by a team or family physician prior to the event.

- **Athletic Therapists**

(The list of potential duties outlined will vary according to the size and nature of the event itself and the qualifications of each individual.)

1. Deal with any emergency situations by providing immediate on-site assessment and first-aid treatment of injuries. This may include basic life support and securing appropriate care from other team members and transportation to an emergency facility.
2. In the absence of a physician, fully assess an injury situation and determine whether an injured athlete is fit to return to competition. Where necessary, ensure appropriate medical referrals.
3. Provide advice regarding follow up care and referral for post-event care.
4. Provide preventative taping and wrapping if required.
5. May provide treatment in certain cases (eg. ultrasound, interferential)

- **Chiropractors**

(The list of potential duties outlined will vary according to the size and nature of the event itself and the qualifications of each individual.)

1. If FRC, the provision of on-site acute care of athletic injuries by a chiropractor may include: injury assessment and diagnosis, basic emergency life support, provision of first aid, securing appropriate care from other team members and transportation to an emergency facility.
2. Provide advice regarding follow up care and referral for post-event care.
3. May provide preventative taping and wrapping if required, and have met the SMSCS educational requirements.
4. May provide chiropractic treatment in certain cases in the event that chiropractic services were previously requested by the host agency as part of the services offered by the SMSCS.
5. Athletes receiving Chiropractic Treatment are required to fill out the CONSENT for TREATMENT form that is in the Appendix at the back of this document.

- **Massage Therapists**

(The list of potential duties outlined will vary according to the size and nature of the event itself and the qualifications of each individual.)

- If FRC, the provision of on-site acute care of athletic injuries by a massage therapist may include: injury assessment and diagnosis, basic emergency life support, provision of first aid, securing appropriate care from other team members and transportation to an emergency facility.
- Provide advice regarding follow up care and referral for post-event care.

- May Provide preventative taping and wrapping if required, and have me the SMSCS educational requirements.
- May provide massage treatment in certain cases that massage therapy services were previously requested by the host agency as part of the services offered by the SMSCS.
- Provide pre and post event massage when applicable
- Massage Therapists providing massage services at events are to be aware of the REGISTERED MESSAGE THERAPIST - EVENT COVERAGE GUIDELINES that is in the Appendix at the back of this document.
- **No Coverage Provided**
 - In situations when the SMSCS cannot provide medical coverage, or the host agency cannot afford the fees, the SMSCS will then inquire if the host agency wants the SMSCS to send out an email notice to everyone on our Event Coverage email list informing them of the event. If this is requested, the interested service providers/consultants will be instructed to contact the host agency directly and NOT the SMSCS. It will then be up to the host group to schedule them accordingly.
 - The SMSCS will not be responsible for any further issues such as liability, payment, etc. relating to these individuals and the HOST.
 - In these types of situations, all equipment rented through the SMSCS will have a rental charge applied to it.

Notification and Scheduling

- **Process for User Groups to Obtain Medical Personnel Coverage:**
 - The SMSCS receives notification from a user group (HOST) that they would like to utilize the SMSCS's Medical Coverage Program.
 - The HOST will be asked to fill out the "SMSCS Medical Coverage of Events – Initial Service Request Form". (see Appendix for form)
 - Upon receiving the Request Form from the HOST, the SMSCS will make contact with the HOST and explain in detail the following information:
 - The potential availability of the service(s) they have requested and the process that is involved in obtaining these services/individuals.
 - Suggested changes/additions to the type and number of Medical Personnel requested by the Host.
 - the potential costs associated with the services they have inquired about. This includes meal allowance for everyone covering the event, as well as meal, travel, and accommodation costs for medical personnel from outside the host city/area.
 - the role(s) the SMSCS will perform in association with the event such as:
 - contacting & scheduling of medical personnel
 - providing equipment (HOST agency to pick up and return if possible)
 - providing 1st aid supplies (to be charged back to the HOST)
 - inventory management and invoicing of equipment, supplies, and hours that were covered by Medical Personnel.
 - In addition, the SMSCS can provide advice/consultation services in the pre-event planning stages as well as provide on-site advice/consulting during the actual event. The terms (including fees) for these "advise/consulting" services must be agreed upon well in advance of any event in order for the SMSCS to perform these duties.

- For events requiring Emergency Care and, including immediate on-site assessment and management of injuries, the medical personnel must have a current First Responder certification or equivalent. NOTE: Medical coverage requirements will determine how many Emergency Care personnel on site per shift.
- Once all details are finalized and agreed to by both parties, the SMSCS's Memorandum Of Understanding (MOU) (See Appendix for form) will be filled out and signed by both the SMSCS and the HOST.
 - Note #1: All potential and current HOSTS have been notified that they should give the SMSCS at least three months' notice for provincial & regional events, and six months' notice for national & international events. Priority will be given firstly to National and International events, and then to Provincial and Regional (Western) events.
 - Note #2: In certain circumstances the SMSCS will require the HOST to have a 'minimum' amount of medical personnel at the event in order to provide a minimum standard of care and that 'Best Practices' are maintained at all times. The SMSCS will not place the Medical Personnel and athletes in a situation that does not provide for 'Best Practices' and safe standard of care.
- The SMSCS then notifies all Medical Personnel on the Events Coverage List what the HOST has requested regarding dates, times, location, etc. of the event.
- Initially, notification to all Medical Personnel will be done through email. Follow-up contact will be made with everyone should the schedule not be filled by a pre-determined date.
- Once the schedule is completed, the SMSCS will contact the HOST notifying them of the schedule of Medical Personnel who will be covering the event. A previously agreed upon date will be established to notify the host agency of the finalized schedule or any problems that may be arising with the schedule. If a situation arises that the SMSCS cannot fulfill or only partially fulfill the request for personnel, the HOST group will be informed.
- The SMSCS will then make one last contact with each of the Medical Personnel to ensure their commitment to the time slots they previous agreed to cover.
- It should be noted that on occasion event schedules will change at any time in the planning process, including days and hours leading up to the event. This of course will have an effect on Medical Coverage Schedules. The SMSCS asks all Medical Personnel for understanding and cooperation should this occur.

Remuneration and Invoicing

- Rates: The SMSCS charges the following rates on behalf of the Medical Personnel:
 - Therapists/Chiropractors on Site - \$50/hr
 - Physicians on call - \$200/session (session length to be negotiated)
 - Physician on Site - \$85/hr
 - Physician Skin Checks - \$100/hr + \$2 athlete seen
- Process for Payments and Invoicing:
 - The SMSCS sends an honorarium/expense form to each Medical Personnel that covered the event. Those individuals will note the hours covered and any other previously agreed upon expenses. They then return their signed honorarium/expense form.
 - all hours covered
 - any other approved Medical Personnel expenses (travel, meals, etc)

- inventory used from all sport 1st aid kits and other medical bags
- any extra supplies utilized that were sent to the event.
- The invoice will then be forwarded to the HOSTThe SMSCS then develops an invoice including the following:
- T agency for payment to the SMSCS.
- The SMSCS then collects payment from the HOST and distributes the hourly coverage fees and approved expenses (cheque) to each individual Medical Personnel.

NOTE #1: Out-of-town and major games medical coverage will be negotiated and must additionally include meals, transportation, accommodations (if necessary), and any other previously agreed upon expense.

NOTE #2: As a general rule, hourly rates are not charged for all Saskatchewan, Western Canada, and Canada Games, as well as Canadian Special Olympics when held in Saskatchewan. These are the only non-payment exceptions when requests are done through the SMSCS. Invoices are still forwarded for all supplies used. Invoices are still forwarded for all supplies used.

NOTE #3: The same standard fee of \$50/hour will be charged whether Medical Personnel are providing services relating specifically to their profession (ie. chiropractic treatment, massage therapy treatment, taping services, etc.) OR actual emergency or 1st aid type services.

- **Other Invoicing Charges:**

- Damage or Lost Equipment/Supplies - The HOST will be responsible for any damage and/or lost equipment and supplies that was not the fault of the Medical Personnel. This includes during shipping, and storage at the event.
- Non-Sask Sport Inc Administration Fee – In the rare occurrence that the SMSCS provides coverage for a non Sask Sport Inc. member, an Administration Fee of \$50/per day (plus GST) will be charged.

- **Special Personnel Requests:**

- Special Personnel Requests Fee - On occasion, the SMSCS may be requested to provide Organizational/Personnel Assistance relating to the medical component of an event. The fees for such services will be negotiated with each HOST on an individual basis. The following are examples of the types of roles the SMSCS can provide:

1. Medical Coordinator

a) Profile

- The medical coordinator should have extensive experience in coordinating event medical coverage. This individual does not necessarily have to be a medical practitioner but familiarity with personnel, equipment and supplies is essential. In most instances this position shall be a staff person of the SMSCS. If there is no medical coordinator, the in charge person must ensure that the duties listed below are completed.

b) Duties

- (The list of potential duties outlined will vary according to the size and nature of the event itself.)
 - Act as a medical liaison available to meet with event organizers, particularly during the preparation phases of the event.
 - Coordinate and schedule qualified medical/paramedical personnel (physicians, massage therapists, chiropractors, physiotherapists,

athletic therapists, and any other personnel the host group may have assisting with the event) to cover the event.

- Ensure all medical and paramedical personnel have appropriate qualifications, proper malpractice insurance, etc.).
- Assist in the establishment of specific emergency protocol and procedures for the event and ensure all medical and paramedical volunteers are familiar with the established protocol.
- Ensure a safety check of the event site is completed prior to and on the day of the competition.
- Ensure on-site communication, including access to an emergency telephone.
- Establish necessary liaisons with local medical and emergency departments.
- Determine and assemble the required medical and first aid supplies and equipment.
- Coordinate ambulance support, if required.
- Ensure all treatments are properly documented.
- Compile and present a final medical report with recommendations from the medical staff concerning future events.

2. Chief Medical Officer (CMO)

a. Profile

- The CMO should be a physician licensed to practice in Sask and must carry standard malpractice insurance. He/she should have recognized experience in emergency medicine and, ideally, have experience in the field of sports medicine (re: CASM diploma). This role would primarily be for national or international caliber events.

b. Duties

- (The list of potential duties outlined will vary according to the size and nature of the event itself.)
 - Determine the number and composition of the medical team.
 - Participate in the selection of necessary medical equipment, supplies and medications.
 - Head the medical team and supervise all medical and paramedical personnel. Establish and maintain personal and professional rapport with the medical team.
 - Ensure all personnel are aware of the emergency protocol and procedures.
 - Provide primary medical diagnoses and appropriate on-site treatment for injured participants.
 - Compile a final medical report, in conjunction with the medical coordinator, outlining recommendations (if any) for future events.

3. Head Therapist

a. Profile

The Head Therapist should be a physical therapist or athletic therapist licensed to practice in Sask and must carry standard malpractice insurance. He/she should have recognized experience in emergency medicine and, ideally, have experience in the field of sports medicine (ie: SPC –Certificate/Diploma or Certified Athletic Therapist), as well past experience in event coverage situations. This role would primarily be for national or international caliber events.

b. Duties

(The list of potential duties will vary according to the size and nature of the event itself.)

4. SMSCS Staff Roles

Depending on the request, in some situations SMSCS staff (administrative and/or medical) may be utilized with event coverage. This may involve a wide assortment of duties ranging from providing administrative consultation with the overall development of the medical protocol for the event to actual treatment of athletes. The list of potential duties will vary according to the size and nature of the event itself and the expertise and/or experience required.

Team/Individual Coverage

1. On occasion, the SMSCS will receive a request from a PSO, the CSC-SK, a provincial or university team, or an individual athlete, asking for a "Trainer" to work with them for a weekend training camp, an out-of-town tournament, or for an entire season. Depending on the specific request, the SMSCS can send out a group email to the professional Medical Personnel that have indicated an interest in providing this service and have them contact the requesting agency directly if they are interested and/or available. (on an annual basis, the SMSCS will contact all provider group members as to their interest in being on the list).
2. The SMSCS does not endorse nor recommend any specific Medical Personnel over another. We simply send out the request on behalf of the requesting agency/individual and then ask that they notify us who they have confirmed to provide coverage.
3. All fees/honorariums/expenses are negotiated on an individual case basis between the requesting agency/athlete and the Medical Personnel being utilized for the medical coverage. SMSCS equipment is available to be rented as per the "Medical Equipment Rental/Loaner" guidelines noted within this policy.

Medical Coverage of Events Program -Initial Service Request Form-

- see form in the Appendix at the back of the document

MOU Medical Coverage of Events

- see form in the Appendix at the back of the document

MEDICAL COVERAGE PROGRAM INJURY & TREATMENT REPORTING FORM

- see form in the Appendix at the back of the document

Sport First Aid Kit Inventory List:

- see form in the Appendix at the back of the document

SPORT FIRST AID RULES REGARDING BLOOD AND OTHER BODY FLUIDS POLICY

- see form in the Appendix at the back of the document

Mentoring (shadowing) Policy

Approved May 21, 2025

The SMSCS believes mentorship and professional educational opportunities for its potential members, service providers and consultants are important. Therefore, physiotherapy students and recent graduates are encouraged to participate in our medical event coverage mentoring (shadowing) program. This program will provide opportunities to shadow “on site” with our professional Medical Event Coverage Personnel as follows:

Physiotherapy Students & Recent Graduates

The mentoring process will be as follows:

- **Physiotherapy Residents** (graduated but restricted licensed) as well as **Second year students** will be asked to participate. They will be referred to as Mentoring Participants.
- The SPC-Sask member engagement executive person will send an email to the school of physiotherapy class representative each September to see if any of the above are interested in shadowing at SMSCS event coverage.
- The student rep compiles a list that are interested, including their email (and any other details required by the SMSCS) and sends that email to the SPC-Sask member engagement person and the SPC-Sask/SMSCS liaisons.
- The SPC-Sask liaisons will send an email to the SMSCS staff person responsible for the event coverage program that contains the list of interested Mentoring Participants to be added to the event coverage correspondence (emails).
- As the requests for coverage go out, the Mentoring Participants will receive the email as well, and be asked to indicate their interest in shadowing by a certain date. If they are interested, the SMSCS staff person can add the participant to the event coverage spreadsheet, but only as an extra, as the Mentoring Participants will not have a full license to do the coverage on their own.
- The Mentoring Participants are only able to shadow for shifts that a Licensed Physiotherapist with the Sport First Responder Certification (SMSCS Service Provider) is covering.
- The Licensed Physiotherapist (SMSCS Service Provider) providing the medical coverage would have to agree/give consent to have Mentoring Participants shadow them.
- For liability reasons, the Mentoring Participants cannot provide any medical or 1st aid treatment. They can only observe, ask questions or assist as directed by the physiotherapist.
- The Mentoring Participants will have to sign the Sport Medicine & Science Council MOU prior to being involved, thus agreeing to the role assigned to them through the ‘shadowing’ experience
- Mentoring Participants are not eligible for any type of payments/honorariums/expense reimbursements.
- There is a Limit of 2 Mentoring Participants ‘shadows’ that will be allowed per shift.

MENTORSHIP MOU

- see form in the Appendix at the back of the document

17. First Responder Certification (FRc) course (or equivalent) Subsidy Program (Effective November 10, 2023)

Overview

The Council requires all medical personnel who are part of the Medical Coverage of Events Program who are providing emergency care, including immediate on-site assessment and management of injuries, to have current First Responder certification (FRc), or equivalent. The Council believes in our consultants and service providers having the highest possible qualifications as this ensures we maintain our goal of being the experts in the delivery of quality evidence-based sport medicine and science services and education to our clients.

Program Objective

The objective of the Subsidy Program is to provide various levels of financial reimbursement based on hours/events covered over a specific period of time for medical personnel involved with the Medical Coverage of Events Program. As a result of the Council making FR(c) mandatory, it was felt those providing service should be eligible to receive some or all of the course fee reimbursed in the form of a subsidy based on the amount of service provided.

Program Details

A.Active/Current Consultants and Service Providers

1. 100% Subsidy: The Council will provide 100% of the First Responder Course Fee OR Recertification Course fee for active/current consultants and service providers who over the previous three-year period have:
 - (1) provided 60 hours of event coverage service AND/OR were involved in 18 events (shifts)
 - (2) successfully completed a First Responder or Re-certification Course
 - (3) completed and submitted the First Responder Course Fee Subsidy Application Form including proof of course completion and payment (receipt)
 - (4) approval from the management committee.
2. 50% Subsidy: The Council will provide up to 50% of the First Responder Course Fee OR Recertification Course fee for active/current consultants and service providers who over the previous three-year period have:
 - (1) provided 30 hours of event coverage service AND/OR were involved in nine events (shifts)
 - (2) successfully completed a First Responder or Re-certification Course
 - (3) completed and submitted the First Responder Course Fee Subsidy Application Form including proof of course completion and payment (receipt)
 - (4) approval from the management committee.
3. 25% Subsidy: The Council may provide a subsidy up to 25% of a First Responder Course fee OR Recertification Course fee if the consultant or service provider does not meet the requirements for the 50% Subsidy. The Management Committee reserves the right to determine the percentage based on the individual's previous service and circumstances.

Note 1 - The three (3) year period is back-dated from the day the consultant and/or service provider obtains their certification or recertification.

Note 2 - Active” means you are currently providing service and are an approved consultant or service provider available to provide coverage.

Note 3 - The Council tracks all events and coverage hours provided by our consultants and service providers.

B.New Consultants and Service Providers

1. 50% Subsidy: The Council will provide up to 50% of the required first responder course certification fee for NEW consultants and service providers. In return, consultants and service providers ‘agree’ to provide 30 hours and/or be involved with nine (9) events/shifts over a three year period.

The subsidy will be paid upon:

- (1) successful completion of the First Responder Course
- (2) completion and submission of the Subsidy Application form including proof of course payment (receipt)
- (3) approval from the management committee

2. 100% Subsidy: The Council will provide 100% of the required first responder course certification fee for NEW consultants and service providers if they provide 60 hours and/or were involved with nine (18) events/shifts over their first three year consulting time period.

The subsidy will be paid upon:

- (1) successful completion of the First Responder Course
- (2) completion and submission of the Subsidy Application form including proof of course payment (receipt) AND proof of the required hours and/or events/shifts covered.
- (3) approval from the management committee.

Note 1 - The three (3) year period starts on the date the consultant or service provider becomes an “active” consultant or service provider with the SMSCS.

Note 2 - The above noted hour and/or events/shifts requirement is based on the current annual three-year average of 30 requests per year received by the Council. The Management Committee reserves the right to change the hours/events requirement based on an increase/decrease of future requests for event coverage.

EXCEPTIONAL CIRCUMSTANCES: The Management Committee will consider requests from consultants or service providers with exceptional circumstances as it relates to approval for the subsidy. The Management Committees decision will be final.

FIRST RESPONDER COURSE FEE SUBSIDY - APPLICATION FORM

- see form in the Appendix at the back of the document

Medical Coverage of Events Program-PSO Specific Requirements

- see form in the Appendix at the back of the document

18. Medical/Fitness Testing Equipment Rental/Loaner Program

Overview

- The SMSCS has medical equipment and Fitness Testing equipment that can be loaned and/or rented. Some restrictions apply.

Usage/Rental Guidelines

- Members Usage
 - Events Booked and Invoiced Through the SMSCS That Our Members Are Covering
 - No charge for equipment rental for events booked through the SMSCS that the SMSCS is charging a fee for personnel coverage. Any perishable supplies consumed from the trainer med kits, trauma kits, physician kits/bags, etc., will be charged accordingly to the host group. Any damages/loss to equipment or shipping charges will also be charged back to the host group.
 - Members Utilizing Equipment for Events/Team Coverage Where the SMSCS is Not Charging for Hourly Personnel Coverage (Not Booked through the SMSCS).
 - In essence this shall primarily apply to members covering events where the SMSCS is not charging a fee for our member to be involved or when members are covering events not requested through the SMSCS and wish to utilize the equipment. It must be previously agreed upon who shall be invoiced for the equipment rental and supply usage (the individual or the host agency) prior to the equipment being used.
- Non-Members
 - Non-Members Utilizing Equipment for Events Not Booked Through the SMSCS. Restrictions apply dependent upon user - SMSCS Medical Equipment must only be used by qualified medical personnel trained in the use of such equipment (eg. interferential, ultrasound, tens, respond, and physicians trauma kits, etc.).
- Major Games (ie. Saskatchewan Summer or Winter Games, Special Olympics)
 - No charge for usage.
 - Host groups will be charged for the following:
 - shipping of the equipment and supplies to and from the host community.
 - any perishable supplies consumed from the trainer med kits, trauma kits, etc.
 - any damage/loss of the equipment
- For-Profit Companies (Physio clinics, Hospitals, Universities, etc)
 - For-profit businesses or companies may rent SMSCS equipment when available. All other requests receive priority.
 - Rental groups will be charged the following:
 - a rental charge as per the rates noted in the Rental Fee Schedule #3.
 - for all shipping of the equipment and supplies to and from the facility.
 - will be invoiced for any perishable supplies consumed from the trainer med kits, trauma kits, etc.
 - any damage/loss of the equipment

Equipment Maintenance

- Maintenance of all medical equipment will be completed twice annually by SMSCS staff.
- All modality (electrical) equipment will be scheduled for maintenance and calibration on a yearly basis.

- Specific Guidelines regarding Physicians bags (CASM bags):
 - These bags will be reviewed and inventoried on an annual basis.
 - If necessary, a SASM member will assist SMSCS staff with this review.
 - All medications will be stored in the Regina office and only be placed in a bag at the request of the Medical Professional for each event.
 - All medications, when expired, must be re-filled by a SASM member and written out to the SMSCS as the “client”.

Fees

- The SMSCS has set up a rental fee schedule based on who is the ‘renter’ of the equipment.
- Members and Consultants, in general, will receive cheaper rental rates.
- Rates are as follows:
 - Non-Member (Client) Group/Organization
 - For Provider Group members utilizing equipment for events/team coverage requested/invoiced through the SMSCS by a NON-MEMBER CLIENT.
 - Sport 1st Aid Trainers Kit - \$5.00
 - Treatment Table - \$10.00
 - Spine Board w/head immobilizers - \$10.00
 - B Splint Kit - \$15.00
 - Medisac Physicians Kit - \$20.00
 - Muscle Stim/Tens. Unit - \$30.00
 - Ultrasound Unit - \$50.00
 - Interferential/Ultrasound/Multi Stim Unit - \$100.00
 - Metal Scoop Stretcher - \$10.00
 - FMS Testing Kit - \$25.00
 - Vertec Jump Stand - \$20.00
 - Sit and Reach Tester - \$10.00
 - AED - \$20.00
 - Provider Group Members
 - For Provider Group members utilizing equipment for events/team coverage not requested/invoiced through the SMSCS.
 - Sport 1st Aid Trainers Kit - \$5.00
 - Treatment Table - \$10.00
 - Spine Board w/head immobilizers - \$10.00
 - B Splint Kit - \$15.00
 - Medisac Physicians Kit - \$20.00
 - Muscle Stim/Tens. Unit - \$30.00
 - Ultrasound Unit - \$50.00
 - Interferential/Ultrasound/Multi Stim Unit - \$100.00
 - Metal Scoop Stretcher - \$10.00
 - FMS Testing Kit - \$25.00
 - Vertec Jump Stand - \$20.00
 - Sit and Reach Tester - \$10.00
 - AED - \$20.00
 - Non-Member Provider Groups

- For non-SMSCS Provider Group members utilizing equipment for sport/recreation events not requested/invoiced through the SMSCS (minimum charges). Restrictions applied dependent upon user.
 - Sport 1st Aid Trainers Kit - \$10.00
 - Treatment Table - \$20.00
 - Spine Board w/head immobilizers - \$20.00
 - B Splint Kit - \$25.00
 - Medisac Physicians Kit - \$40.00
 - Muscle Stim/Tens. Unit - \$50.00
 - Ultrasound Unit - \$75.00
 - Interferential/Ultrasound/Multi Stim Unit - \$150.00
 - Metal Scoop Stretcher - \$20.00
 - FMS Testing Kit - \$30.00
 - Vertec Jump Stand - \$25.00
 - Sit and Reach Tester - \$15.00
 - AED \$40.00
- Private Clinics/Businesses
 - For-profit institutions (minimum charges). Restrictions applied dependent upon user.
 - Sport 1st Aid Trainers Kit - \$20.00
 - Treatment Table - \$30.00
 - Spine Board w/head immobilizers - \$30.00
 - B Splint Kit - \$35.00
 - Medisac Physicians Kit - \$60.00
 - Muscle Stim/Tens. Unit - \$70.00
 - Ultrasound Unit - \$100.00
 - Interferential/Ultrasound/Multi Stim Unit - \$200.00
 - Metal Scoop Stretcher - \$30.00
 - FMS Testing Kit - \$35.00
 - Vertec Jump Stand - \$30.00
 - Sit and Reach Tester - \$20.00
 - AED \$60.00

Other Notes

- **Advance Payment** – May be due in advance for the use of the ultrasound or interferential.
- **Equipment Pick Up** - At the SMSCS office prior to the event and must be returned within three days following the event. If the equipment/supplies cannot be picked up it will be the responsibility of the renter to pay for **shipping charges**.
- **Damage Deposit** – An agreed upon **damage deposit** will be charged for the use of the ultrasound or interferential Combo Unit, which will be refunded following the safe return of the equipment. Equipment may be taken **out-of-province** by members only. However, the SMSCS will consider each request on an individual basis. There will be a charge for any equipment, which is returned damaged.
- **Personal Financial Gain** – Under no circumstances mentioned in the above policies may an individual benefit financially from the use of the SMSCS medical equipment when covering an event for the SMSCS.

NOTE: The SMSCS Sport Medicine Programs Committee may, in extenuating circumstances, consider exceptions to the above policies.

Equipment Rental & Waiver Form

- see form in the Appendix at the back of the document

19. Professional Development Program (updated as of Oct 2023)

19.1 Program Overview and Description

The overall program goal is to provide a wide variety of multi-disciplinary professional development opportunities for active consultants, service providers, and members of the Council. Listed below is a summary of the professional development streams offered by the Council.

The annual professional development program will vary from year to year depending on a variety of factors to at least include; consultant/service provider and member professional development priorities, current hot topics/issues and budget availability.

The annual professional development program plan will be determined by the Council's professional development committee and board of directors.

19.2 Stream #1 - Member and Consultant Multidisciplinary Conferences

Overview

Consists of one half (½), one (1), OR multi-day conferences offering a multidisciplinary, educational approach to sport medicine and sport science relevant topics.

- The half-day or one-day conferences are hosted solely by the Council (ie. Sport Med/Sci Saturday).
- Multi-day conferences should only be held in partnership with Sask Sport, Coaches Association of Saskatchewan, or other partners, or contract out the management and administrative responsibilities to an outside agency such as CME or CERS, due to the significant administrative time required to put on these conferences.

Attendance

Members, consultants, and service providers will be strongly encouraged to attend and support the Council's conferences for the following reasons:

1. The need to obtain yearly professional development/credits is part of the SMSCS application renewal process.
2. The primary reason these conferences are organized is for the benefit of the SMSCS membership, consultants, and service providers.
3. The SMSCS will need members and consultants to play an active role in providing presentations for these conferences.

Timelines

- Multi-day conferences - usually offered every three to five years depending on the need, or a significant anniversary, or a special event occurring in Saskatchewan (ie Grey Cup).
- Half-day or one-day events - generally held on an annual basis either in the spring or the fall.

Location

Usually held in Regina and/or Saskatoon

Promotion

Either type of conference will be promoted through emails, the Council's website and newsletter. The larger two-day events will consist of a shared promotional plan with the partnering agency.

Sponsorship

Sponsorship for both of the smaller SMSCS only events will not be a priority, whereas it should be considered for the larger 2-day conference if there are budget concerns.

Financial/Budget

The half-day/one-day conferences do not have to break even, however, a break-even point or profit will always be sought if it is feasible. The SMSCS will, on an annual basis, have a specific budget for the ½ day/full-day SMSCS conferences. The larger two-day events should operate on a break-even basis as items like registration fees and sponsorship are possibilities. A detailed proposed budget must be developed detailing projected revenues and expenditures for all conferences.

Fees

Registration fee (if required) is determined and/or recommended by the Staff and the Professional Development Program Committee.

Continuing Education Credits

All member organizations and professions associated with the Council are encouraged to provide educational credits to their members that attend the conferences. Each group is individually responsible to apply for the accreditation process and inform the SMSCS of the results.

Administrative Assistance

For a contractual fee, 'outside' organizations or individuals may be utilized to manage/organize the conference such as the University of Saskatchewan-CERS, University of Saskatchewan-CME, or professional event organizers.

19.3 Stream #2 - Member Provider Group or Consultant Group Educational Upgrading**Description and Overview**

The primary responsibility for the development and organization of these professional development opportunities is the responsibility of each individual SMSCS member group/discipline.

The SMSCS will partner and provide support (funding and/or administrative) to the following SMSCS Medicine groups and Science service areas/groups that are interested in hosting educational upgrading sessions that will enhance their sport medicine or science expertise to assist in the development and care of Saskatchewan amateur athletes.

Medicine:

- SASM
- SPC-SK Section

- SATA
- CAS-SIG
- CSMATA-Sask Chapter

Science:

- Nutrition
- Strength & Conditioning
- Exercise Physiology/Biomechanics
- Mental Performance

SMSCS Financial Assistance

The SMSCS will provide grants up to a maximum of \$1,500 annually to member/consultant groups interested in hosting professional development opportunities. The goal of the grant is to assist the host/member group with the costs associated with the professional development session. Grants will not be provided for sessions that generate an overall profit for the host/member. Actual grant amounts will be determined once the SMSCS has received the final overall report including a financial report listing all revenue and expenses.

Criteria for Consideration for the SMSCS to Support the Request

- The member/consultant group must provide:
 - Overall Budget – This should include profit/loss estimates for the conference/workshop.
 - Description/Purpose - of the professional development session/course.
- Topic must be relevant to service providers, consultants, and members of the SMSCS.
- The overall benefit to the SMSCS and its clients will be considered.
- Topic must relate to athlete injury prevention, care, or treatment, and/or increased training and performance.
- All SMSCS consultants, service providers, and members within that profession must be allowed to attend.
- Must take place in Saskatchewan if hosted 'in-person'.
- Must have developed an Evaluation Tool for participant feedback.

SMSCS Role Relating to Administrative Assistance

The SMSCS's staff primary role is to only provide minimal administrative support such as but not limited to the following:

- promotion/advertise to members/consultants
- assist in facility booking if the group cannot secure a location on their own
- pay for eligible expenses (see below) if appropriate.
- provide a room if hosted in one of the two Administration Sport Centre's in Regina and Saskatoon.

Eligible Expenses

The following are considered eligible expenses (receipts to be included with follow-up)

- Presenter Expenses (honorarium/speaker fees, accommodations, travel, meals)
- Room rental (if required, and if not done through Zoom, etc)
- Coffee break type items (coffee, cookies, etc)
- Audio/visual equipment rental
- Photo copying

The following items are NOT eligible expenses:

- Individual member/consultant expenses (accommodations, travel, etc)
- Food/meals for participants/registrants

Follow Up Report

The Host group must provide the following before the SMSCS can approve the grant and provide the corresponding payment of eligible expenses:

1. Financial statement, including receipts.
2. Attendance List
3. Brief report on the content of the presentation:
4. Copies of evaluations
5. Recommendations

MOU and Follow Up Reporting

- see form in the Appendix at the back of the document

19.4 Stream #3 - Other SMSCS Hosted/Subsidized or Partnered Events

Description and Overview

The Council's overall program goal is to provide a wide variety of multi-disciplinary and in-service professional development opportunities for active service providers, consultants, and general members of the Council. The Council realizes that the above Streams may not be comprehensive enough to cover all potential professional development opportunities and scenarios. This Stream's goal is to either; (1) host or subsidize targeted professional development or; (2) partner with other organizations or businesses on professional development opportunities including workshops, seminars and in-service sessions that may arise from time to time and that are not relevant to the previous three Streams.

SMSCS Hosting and/or Subsidizing

The Council may provide professional development opportunities of its own choosing with no assistance from businesses or other organizations. In this instance the Council will determine all parameters of the professional development including retaining any profit, covering any losses, of hosted events or providing any subsidies for targeted professional development, including in-service sessions. (eg. first responder course, taping refresher course or other general professional development or in-service sessions.)

This will also include staff organizing a total of 4 (lunch 'n' learn or evening PD sessions) (September, November, February, & April) with 2 at lunch time and 2 in the evening. The topics may be a variety of current interest or SMSCS mandated sessions.

Partnership Events Agreement

The Council may partner with a business or organization to provide a professional development opportunity. Support (financial and/or administrative) will be determined on a case by case basis taking into consideration the following:

- benefits to the Council, membership, consultants and service providers
- cost to the Council (direct support (\$), administrative support (staff time) and profit/loss sharing)

20. Volunteer Recognition

Program Goal

The goal of this program is to recognize volunteers who have substantially contributed to the development of the Council.

Board and Executive Members

The Executive Director and Staff will determine the appropriate recognition to be given to outgoing Board and Executive members at the Annual General Meeting according to the following guidelines:

- New Board Member – golf shirt or equivalent if available
- Outgoing Board Member (including Secretary/Treasurer) 4-10+ years of service – a combination of engraved watch/print, gift certificate, desk clock and recognition plaque (\$300-\$500 total)
- Outgoing President – a combination of engraved watch/print, gift certificate, desk clock or recognition plaque (\$1000-\$1500 total)
- Past President – Service Plaque/Print for 6-10+ years of volunteer service.

Committee Members

The Executive Director and Staff will determine the appropriate recognition, if any, to be given to any long serving outgoing Committee members who are not members of the Board. Examples may include a golf shirt, gift certificate or recognition plaque.

Volunteer Members

Staff will solicit nominations from the membership as required for the following awards:

- Saskatchewan Sports Hall of Fame
- Saskatchewan Sport Awards-Volunteer Recognition
- Other (example: specific member category awards)

Note: The Council will not nominate individuals or purchase tickets for local award events as we are a provincial organization. However, if made aware, the Council will recognize members and consultants nominated for local awards through our newsletter and/or advertisements.

21. Sponsorship, Communication, and Promotion to be reviewed for STRAT Plan in 2025

Sponsorship

The goals and objectives for the sponsorship program are as follows:

- To try and secure sponsorship for any professional development conferences/seminars/workshops (1/2-day, 1-day or multiple days).
- Maintain or enhance current pricing agreement with Diamond Athletic Medical Supplies (minimum 15% off list prices)
- Consider or investigate sponsorship for specific programs if relevant

Communication

External Communication

The external communication goals and objectives are as follows:

- to educate and inform our clients (Sask Sport Membership) on the mission, vision and strategic goals and objectives of the Council. These clients include:
 - Provincial Sport Governing Bodies (65)
 - Saskatchewan Games Council
 - Coaches Association of Saskatchewan
 - Provincial Districts for Sport, Culture and Recreation (9)
 - Saskatchewan High School Athletics Association
 - University of Regina Athletic Teams
 - University of Saskatchewan Athletic Teams
 - Aboriginal Excellence Programs (eg. North American Indigenous Games)
- to educate the Sask Sport Inc membership (administrators, coaches, and athletes) on the importance and benefits of the Council's sport medicine and science services.
- to assist the Sask Sport Inc membership on the importance of establishing holistic annual sport medicine and science plans.

To achieve the above goals the following programs and services have been established:

- Email Correspondence – As required and also when direct or time sensitive information needs to be sent to clients.
- E-Newsletter (constant contact) - Client Edition:
 - is produced three times per year and sent out via email
 - April, August, December
 - Distribution list includes:
 - PSO's
 - Sport Districts
 - University teams
 - University faculty
 - Coaches Assoc. of Sask
 - FSIN
 - Sask Games Council
 - Relevant Sask Sport staff
 - SHSAA
 - Objectives:

- #1 - promote eligibility for in-kind services
 - #2 - promote the programs and services of the Council to our clients
 - #3 - to promote new policies and procedures that affect clients. utilization of the SMSCS's programs and services.
 - #4 – to promote one-time educational and service opportunities.
- Promotional Brochure – develop and maintain a brochure explaining the programs and services provided by the Council.
 - Display Panel – a Council display board with information and pictures is available to be set up at conferences.
 - Co-operative Work - work is done in conjunction with other organizations that represent athletes and/or coaches within the province.
 - Website - the Council's has a detailed web site located at <http://www.smscs.ca>
 - Primary objective – information for our targeted clients (athletes and coaches) on the SMSCS vision, mission, goals and objectives and our programs and services.
 - Presentations - general presentations are available to requested service groups to inform them of the Council.
 - explore social media and other online/internet technologies to determine relevance (if any) to the Council.

Internal Communication

The internal communication goals and objectives are as follows:

- Staff meetings as required.
- Staff phone and email contact on a regular basis.
- Executive Director email contact with the Board of Directors on a regular basis.
- Staff and Executive Director correspondence regarding Board and committee meetings on a regular basis.
- Annual email and mail outs to membership to at least include; AGM notice, Articles of Incorporation and Bylaws, membership information, newsletter and special meeting notices).
- Regular communication with approved consultants and service providers on any issues relevant to them (eg. consultant and service provider application process, expense claims, invoicing requirements, program and service issues, etc).

To achieve the above goals the following programs and services have been established:

- Email Correspondence – As required and also when direct or time sensitive information needs to be sent to staff, board or committee members, consultants and service providers.
- E-Newsletter (constant contact) - Consultants and Service Providers Edition:
 - Is produced three times per year and sent out via email
 - March, July, November
 - Distribution list includes:
 - Sport Medicine Consultants and Service Providers
 - Science Consultants
 - Objectives:

- #1 – to keep the consultants, and service providers up to date on revised and new policies and procedures that affect the Council's programs and services and/or their ability to provide services on behalf of the SMSCS.
- #2 – to promote the SMSCS's Mission, Vision, Goals, and Objectives.
- #3 – to ensure they are aware of all SMSCS's programs and services including professional development opportunities
- #4 - to ensure they are aware of who the SMSCS clients are .

- E-Newsletter (constant contact) - Members Edition:

- Is produced three times per year and sent out via email
-March, July, November
- Distribution list includes:
 - SASM members
 - SATA members
 - SPC-SK members
 - CAS-SIG (Sport Interest Group) members
 - CSMTA-SK Chapter members
 - University members

- Objectives:

- #1 – to keep the members up to date on the overall operations of the SMSCS (programs and services, clients, volunteer opportunities, annual reports, etc.
- #2 – to promote the SMSCS's Mission, Vision, Goals, and Objectives.
- #3 – to ensure they are aware of all professional development opportunities
- #4 - .to ensure they are aware of all opportunities to become a consultant or service provider for the Council.

- Promotional Brochure – develop and maintain a brochure explaining the programs and services provided by the Council.
- Display Panel – a Council display board with information and pictures is available to be set up at conferences.
- Co-operative Work - work is done in conjunction with other organizations that represent athletes and/or coaches within the province.
- Website - the Council has a detailed website located at <http://www.smscs.ca>. Primary objective – information for our members, consultants and service providers on the SMSCS vision, mission, goals and objectives and our programs and services.
- Presentations - general presentations are available to requested service groups to inform them of the Council.
- Explore social media and other online/internet technologies to determine relevance (if any) to the Council's communication goals.

Promotion

The promotional goals and objectives are as follows:

- Increase the visibility of the Council to all clients, members, consultants and service providers.

To achieve the above goal the following programs and services have been established:

- Purchase promotional items from time to time for giveaways to clients, board and committee members, consultants, service providers, members and staff as required. These items can include but are not limited to the following:

- clothing
- water bottles
- towels
- key chains
- etc.

Note: Please note the following pertaining to the promotion of 'non-SMSCS' educational opportunities.

- Any sport science or sport medicine relevant course/workshop provided by or sponsored by our membership groups that is deemed to be beneficial to our members will be promoted by email and posted on our website.
- Any sport science or sport medicine relevant course/workshop provided by or sponsored by private business/others directed to our members that is deemed to be beneficial to our members may be promoted by email. *(Disclaimer - The SMSCS is aware that presenters may or may not possess credentials that the SMSCS requires of our own Consultants. However, it is up to each Member/Consultant to decide which PD Opportunity is beneficial for them. As a result, the SMSCS will not partner or endorse these PD Opportunities and will only forward on the information)*
- Any sport science or sport medicine relevant course/workshop provided by or sponsored by private business/others directed to our clients (athletes and coaches) will receive no endorsement or promotion from the Council.

22. SPC-SASK Facca Bursary



SPORT PHYSIOTHERAPY CANADA – SASK DIVISION Chris and Lindsay Facca Memorial Credentialing Program Award

Purpose

This Award was established in the memory and celebration of the lives of Chris and Lindsay Facca. This annual award recognizes Saskatchewan physiotherapists who embody the qualities and ideals of the Facca's and who have shown accomplishment and successful completion in either the Certificate or Diploma portion of the Sport Physiotherapy Canada credentialing program.

Award Criteria

To be considered for the annual \$1000.00 Lindsay and Chris Facca Memorial Credentialing Program Award, Applicants must meet the following criteria:

1. Must be a registered physiotherapist in the province of Saskatchewan and a Sport Physiotherapy Canada member.
2. Must show proof of successful completion of the certificate or diploma portion of the Sport Physiotherapy Canada credentialing program in the same calendar year in which the Chris and Lindsay Facca Memorial Credentialing Program Award is to be granted.
3. Has not received the Lindsay and Chris Facca Memorial Credentialing Program Award in the past

4. All materials must be postmarked no later than **June 1st** of the year applying. Complete and forward this form and the required documentation to the Sport Medicine and Science Council of Saskatchewan by mail to 510 Cynthia Street, Saskatoon, SK, S7K7K7 or email to travis.laycock@sasktel.net.

Note: The award funds will be available once annually unless no qualified applicants are received.

Please ensure you complete all sections below

Personal Information

Name: _____

Phone number: _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Email: _____

I hereby request consideration for the Chris and Lindsay Facca Memorial Credentialing Program Award based on the attached evidence confirming having met the criteria as outlined and my completion of the application form. I understand that award of these funds is made on a competitive basis and that the information provided is complete and accurate to the best of my knowledge.

Applicant's Signature

Date

23. SMSCS Legacy Fund

Description

The Sport Legacy Fund is a fundraising program established for the continued and future development of amateur sport in Saskatchewan. It represents the culmination of sport-specific funds established by each participating provincial sport organization. Participation in the program is voluntary and available to members in good standing with Sask Sport Inc.

The Sport Legacy Fund provides an opportunity for individuals who have benefited from sport or those who believe in the value of sport to contribute financially to sport programs for current and future generations. Cash donations, monthly/annual contributions, planned financial gifts (i.e. life insurance policies, interest free loans, bequests, etc.) or gifts in kind are encouraged. Contributions result in recognition and significant tax savings for the donor.

Funds raised are used to ensure quality sporting opportunities will continue to be available to everyone in Saskatchewan. Each participating organization may develop directed program(s) within their respective fund to channel dollars toward specific causes. For example, a scholarship fund may be established to assist athletes to continue to meet sport and academic goals, a Canada Games fund may be established to cover costs of team development, or a basic legacy fund may be used to cover ongoing operational costs. The applications are bounded only by the creativity of the sport organization.

Although the program's generic name is the Sport Legacy Fund each organization is encouraged to develop a personal fund name for marketing purposes.

The Council with assistance from Sask Sport Inc has recently established a sport legacy fund. The fund is called the **Sport Medicine and Science Council of Saskatchewan Legacy Fund**.

Definitions

A **cash donation** refers to an outright gift of a lump sum, monthly contribution, or annual contribution. Cash donations provide the fundamental donor data base from which a large scale legacy program can be developed.

A **gift in kind** is a donation of property other than cash (e.g. a gift of real estate or art). These types of gifts will require the evaluation of an independent appraiser for tax receipt purposes. Certain types of gifts such as gifts of time or service, payment of admission or membership fees, or gifts of little or no value are not eligible for a charitable tax receipt.

A **planned gift** is any contribution which results from a donor's careful consideration of how the transfer of a gifted asset will affect current financial planning and long-range estate planning.

**Gifts/donations must be voluntary and the transfer of a gift cannot be made with expectation of receiving a benefit or return.*

Sask Sport Inc. Support Program

Objectives:

The objectives of the Sport Legacy Fund Support Program are as follows:

- To facilitate a "turn key" fund raising program for Provincial Sport Organizations.
- To ensure the critical success factors outlined for the program are achieved.
- To assist organizations in tailoring the Sport Legacy Fund to meet their specific needs.
- To ensure the critical success factors outlined for the program are achieved.

Benefits:

The Sport Legacy Fund Support Program offers the following resources and services to participating organizations:

- Sport Legacy Fund image and promotional material on a cost recovery basis (i.e. brochures, posters, donor cards provided on a cost recovery basis).
- Donation administration
- Donor data-base management
- Donor consulting on a request basis
- Volunteer/staff education - Each participating organization will be offered consultation in customizing the Sport Legacy Fund to meet the organization's fund raising and donor needs.
- Basic donor recognition program
- Basic donor stewardship plan

Donor Incentive Program

Purpose:

- The Sport Legacy Fund Incentive Program is designed to assist member organizations to attract donors of cash or planned gifts.

Eligible Donations:

- Gifts involving a minimum cash contribution of \$10 per month or \$120/year.
- Gifts naming Sask Sport Inc. and/or member organization(s) as the beneficiary.
- Lump sum donations, bonds, monthly/annual donations, life insurance, paid-up life insurance policies and interest free loans are eligible gifts for the incentive program.
- Gifts must be deferred for a minimum period of five years or applied toward a life insurance policy.

- Donors must designate the end-use of the donation, (e.g. scholarship, training, etc.) This donation must be made voluntarily without any conditions and with no expectation of return to you (or related parties) as a result of your contribution.
- Donations must originate from an individual or family to be eligible.

Description:

- An additional 20% of the total value of the donation will be contributed by Sask Sport Inc. in the name of the donor.
- Incentive dollars will be contributed at the time of donation but will be deferred for a period of five years.

Procedures:

- Donations will be received and invested in accordance with the guidelines established by Revenue Canada and the Sport Legacy Fund.
- Donors will only receive a receipt for their portion of the donation.
- Each plan will be evaluated individually to determine eligibility for the incentive program. Sask Sport Inc. reserves the right to refuse any request for the incentive program based on the above criteria; however, every attempt will be made to maintain the best interest of the donor and the beneficiary organization.
- This program is available to Provincial Sport Organizations and is effective for the first year of the organization's Legacy program. Continuation of the incentive program will be evaluated annually.

Employee* Donor Incentive Plan

Purpose:

- To encourage employees of sport organizations to contribute to the Sport Legacy Fund of their employer.

Eligible Donations:

- Gifts made by employees of Sask Sport Inc. or employees of a member Provincial Sport Organization naming their respective employer as the beneficiary.
- Cash donations of not less than \$10/month or \$120 annually up to \$5,000 annually.
- Matched donations must be invested for a minimum of five years or applied toward a life insurance policy.
- Employees must designate the end-use of the donation, i.e. scholarship, training, etc.

Description:

- Sask Sport Inc. will contribute 50% of the total donation amount in the name of that employee when that employee designates a gift to their employer. The employee will receive a receipt for their portion of the donation.
- Employees are under no obligation to contribute and may discontinue contributions at any time.
- Cash donations must originate from the staff person.
- This program is available to Provincial Sport Organizations for the first year of the organization's Legacy program. Continuation of the program will be evaluated annually.

* NOTE: Employees are defined as those individuals employed either full-time, part-time or contractually by a Sask Sport Inc. member Provincial Sport Organization or Sask Sport Inc. itself. Employees of clubs, leagues, teams, etc. are not eligible.

SMSCS and Sask Sport Inc. Recognition Plan – The Donor club

Purpose:

- To fairly and equitably recognize the contributions of all donors.
- To reward donors and reinforce positive feelings about their donation.
- To motivate new donors and encourage repeat donations.
- To meet the individual recognition needs of donors.

Description:

- The Sport Legacy Fund Donor Club is a sport federation based donor recognition program. All donors making a contribution to member organizations of Sask Sport Inc. will be recognized in accordance with the following policy.
- Donors will be recognized for the present value of a gift, i.e. a life insurance policy of \$25,000 will be recognized as a gift of \$25,000.
- All donors will be recognized for the culmination of their donations to the Sport Legacy Fund. For example, if an individual makes a donation of \$5,000 in 2008 they will be recognized at that time for the donation. If that same individual makes an additional donation of \$25,000 in 2009, it will be recognized as a \$30,000 contribution. A data base will be maintained to track donors and their ongoing donations. Donations may be made to any number of Sask Sport Inc. member organizations.
- The Sport Legacy Fund Donor Club shall represent the individual interests of the donor. Standard recognition tools may be modified or omitted where appropriate, to meet the needs of the donor, i.e. a donor may wish to remain anonymous.

All donors making contributions of \$240 to \$4999 will receive the following basic recognition:

- Letter of recognition from the Sask Sport Inc. President and/or Provincial Sport Organization President.
- Membership in the Donor Club.
- Formal presentation of the respective donor club pin at a time and place appropriate to the donor.

Planned gifts of \$5,000 to \$19,999 will receive the following additional recognition:

- Recognition as a "Sport Benefactor".
- Recognition on the Donor Wall.

Planned gifts of \$20,000 to \$99,999 will receive the following additional recognition:

- Recognition as a "Major Contributor".
- Recognition on the Donor Wall.
- Gift Item.

Planned gifts of \$100,000 will receive the following additional recognition:

- Recognition as a "Patron of Sport".
- Recognition on the Donor Wall.
- Gift Item.

SMSCS and Sask Sport Inc. Stewardship Plan**Purpose:**

- To maintain ongoing positive relations with the Sport Legacy Fund.
- To encourage and foster repeat donations.
- To ensure each donation is managed in accordance with the donor's wishes.
- To report to the donor the impact the gift has had on the organization and/or the periodic investment growth on a deferred gift.

- To ensure the donor continues to have positive feelings about the organization.
- To confirm the trustworthiness of the organization in managing the donor's gift.

Description:

- "Thank you" letter and receipt - All donors will receive a thank you letter and receipt (for tax purposes) representing all contributions received.
- Donor Newsletter - provided to all donors outlining current events in the sport federation.
- "Season's Greetings" cards - provided to all donors of \$240 or more annually.
- Other - depending upon the age, motivation and needs of the donor, additional activities may be undertaken; i.e. statements indicating financial performance of the gift, personal phone calls, periodic meetings, names of or details on gift beneficiaries, etc. This will be determined with the donor.

Program Goals and Objectives

- Provide an opportunity for members and/or individuals, who have benefited from sport and/or their involvement with the Council and who believe in the value of sport, to contribute financially to the SMSCS programs for current and future generations.
- Ensure a variety of programs are available for donors to contribute to that will include the existing programs of the Council and also include the other programs designed specifically for the sport legacy program

Donations will be targeted to the following SMSCS programs;

- Professional Development Grants – Sport Medicine
- Professional Development Grants – Sport Science

Communication and Promotion

The Council will promote the program to all potential donors via the newsletter, website and direct contact through email and regular mail.

23.1 SPORT LEGACY – Professional Development Subsidy Program (APPROVED July 16, 2025)

Overview

The Council believes our consultants need to have the highest possible qualifications as this ensures we maintain our goal of being the experts in the delivery of quality evidence-based sport medicine and science services and education to our clients. As a result, the Council requires all Consultants to have specific certifications or credentials in order to be an SMSCS Consultant.

Program Objective

The objective of the SPORT LEGACY Professional Development Subsidy Program is to provide a level of financial reimbursement based on hours involved with the Council over a 3-year period of time for SM/SS consulting or committee/board volunteer involvement.

Program Details

As a result of the Council requiring specific certifications or credentials in order to be an SMSCS Consultant, those achieving FULL certification of the credential are eligible to receive some or

all of the certification reimbursed in the form of a 1-time subsidy based on the amount of service provided to the Council.

Consultant Exams recognized for reimbursement:

- Sport Physiotherapy (Certificate or Diploma)
- Sport Exercise Medicine Diploma
- Certified Athletic Therapy
- Royal College of Chiropractic Sport Science Residence Program
- Canadian Sport Massage Therapy
- Certified Mental Performance Consultant
- Certified Specialist Sport Dietitian

Notes:

- Applicants can only access a single SMSCS certification reimbursement program and are not eligible for multiple subsidies.
- Applicants must receive 'full' certification for the credential that is pursued
- Only the following types of actual 'exam' costs are eligible for reimbursement (ie: written, verbal, or practical exam cost).
- Total exam cost reimbursement will be determined at the discretion of the SMSCS Management Committee

A. Consultants who have recently received the required professional certification or credential and are ACTIVE with the SMSCS

4. 100% Subsidy: The Council will provide 100% of the certification or credential fee for consultants who over the previous three-year period have:
 - successfully completed (passed) the necessary certifications or credentials in order to be fully certified
 - are ACTIVE with the Council by providing a minimum of 30 hours of SM/SS consulting or committee/board volunteer involvement
 - completed and submitted the SPORT LEGACY Professional Development Subsidy Program Application Form including proof of course completion and applicable receipts
5. 75% Subsidy: The Council will provide 75% of the certification or credential fee for consultants who over the previous three-year period have:
 - successfully completed (passed) the necessary certifications or credentials in order to be fully certified
 - are ACTIVE with the Council by providing 15-29 hours of SM/SS consulting or committee/board volunteer involvement
 - completed and submitted the SPORT LEGACY Professional Development Subsidy Program Application Form including proof of course completion and applicable receipts
6. 50% Subsidy: The Council will provide 50% of the certification or credential fee for consultants who over the previous three-year period have:

- successfully completed (passed) the necessary certifications or credentials in order to be fully certified
- are ACTIVE with the Council by providing 5-14 hours of SM/SS consulting or committee/board volunteer involvement
- completed and submitted the SPORT LEGACY Professional Development Subsidy Program Application Form including proof of course completion and applicable receipts

Additional Notes:

- The three (3) year period starts on the date the consultant obtains the necessary SS/SM certification or credential.
- “Active” means you are currently involved with the Council and are an approved consultant.
- The Council tracks SM/SS consulting or committee/board volunteer involvement.

EXCEPTIONAL CIRCUMSTANCES: The Management Committee will consider requests from consultants with exceptional circumstances as it relates to approval for the subsidy. The Management Committee's decision will be final.

SPORT LEGACY PROFESSIONAL DEVELOPMENT SUBSIDY PROGRAM - APPLICATION FORM

- see form in the Appendix at the back of the document

24. Special Programs/Projects/Committees

Canadian Sport Centre Saskatchewan – Contract for Service. The Sport Medicine and Science Council of Saskatchewan (SMSCS) is currently contracted by the Canadian Sport Centre Saskatchewan (CSCS) to deliver sport medicine and science services to its athletes and coaches. The current agreement is available upon request

Other Projects/Committees - From time to time the SMSCS will be associated with special committees and projects where our staff/consultants can provide expertise and/or promote the SMSCS's program and services.

25. Service Evaluation

The Council regularly conducts evaluations of its consultants and services in order to ensure the service we are providing is meeting our strategic goals.

Consultant and service evaluation surveys are sent out to all clients who receive service from the Council or can be accessed from the Council's website [SMSCS Session Surveys](#)

The surveys contain questions on the quality and value of our programs and services. Surveys also include questions on consultant performance.

Survey data is compiled for presentation to the Board of Directors. The information collected is used to evaluate our current services and improve our future services.

Other evaluation procedures may include having staff members or peers sit in on consultant presentations or having consultants provide a copy of their presentation/session.

F. OTHER POLICIES, PROGRAMS & SERVICES

1. SMSCS General Privacy & Confidentiality Policies and Procedures

A. Privacy Policy

For not-for-profit organizations in Saskatchewan, the privacy of personal information is governed by the Personal Information Protection and Electronic Documents Act (PIPEDA). This policy is based on the standards required by PIPEDA as interpreted by SMSCS.

1. Purpose

The SMSCS recognizes members, consultants, service providers and staffs' right to privacy with respect to their personal information. This policy describes the way that SMSCS collects, uses, safeguards, discloses, and disposes of personal information.

2. Application of this Policy

2.1. This policy applies to all SMSCS representatives (members, consultants, service providers and staff) in connection with personal information that is collected, used or disclosed during SMSCS activity.

2.2. Except as provided in PIPEDA, the SMSCS's board of directors will have the authority to interpret any provision of this policy that is contradictory, ambiguous, or unclear.

3. Obligations

3.1. SMSCS representatives are obligated to follow and abide by PIPEDA in all matters involving the collection, use, and disclosure of personal information.

3.2 In addition to fulfilling the legal obligations required by PIPEDA, SMSCS's representatives will not:

- Publish, communicate, divulge, or disclose to any unauthorized person, firm, corporation, or third party any personal information without the express written consent of the individual.
- Knowingly place themselves in a position where they are under obligation to any organization to disclose personal information.
- In the performance of their official duties, disclose personal information to family members, friends, colleagues, or organizations in which their family members, friends, or

colleagues have an interest. Derive personal benefit from personal information that they have acquired during the course of fulfilling their duties with SMSCS

- Accept any gift or favour that could be construed as being given in anticipation of, or in recognition for, the disclosure of personal information

4. Accountability

4.1. The Executive Director (or designate) shall act as the privacy officer and is responsible for the implementation of this policy and monitoring information collection and data security, and ensuring that all staff receives appropriate training on privacy issues and their responsibilities. The privacy officer also handles personal information access requests and complaints.

Duties - The privacy officer will:

- Implement procedures to protect personal information.
- Establish procedures to receive and respond to complaints and inquiries.
- Record all persons having access to personal information.
- Ensure any third party providers abide by this policy.
- Train and communicate to staff information about the SMSCS's privacy policies and practices.

5. Identifying Purposes

5.1. The SMSCS may collect personal information from representatives for purposes that include, but are not limited to:

5.1.1 Communications

- Sending communications in the form of e-news or a newsletter with content related to SMSCS's programs, events, fundraising, activities, judicial processes, and other pertinent information.
- Publishing articles, media relations and postings on the SMSCS's website, displays, nominations, biographies, and media relations.
- Communication within and between SMSCS representatives.
- Discipline results and long-term suspension list.

5.1.2 Sales, Promotions and Merchandising

- Purchasing equipment, coaching manuals, resources and other products.
- Promotion and sale of merchandise

5.1.3 General

- Travel arrangement and administration.
- Implementation of SMSCS's screening program.
- Medical emergency, emergency contacts or reports relating to medical or emergency issues. Determination of membership demographics and program wants and needs, by means of surveys or other like mechanisms for collection of information.
- Managing insurance claims and insurance investigations.
- Video recording and photography for personal use, and not commercial gain, by spectators, parents/guardians/caregivers and friends.
- Video recording and photography for promotional use, marketing and advertising by the SMSCS
- Payroll, honorariums, company insurance and health plans

5.2 The SMSCS may collect personal information from members, consultant and staff and prospective members, consultants and staff for other purposes, provided that documented consent specifying the use of the personal information is obtained from the party involved.

6. Consent

6.1. By providing personal information to the SMSCS, the participant consents to use that personal information for the purposes identified in the identifying purposes article of this policy.

6.2. At the time of the collection of personal information and prior to the use or disclose of the personal information, the SMSCS will obtain consent from members, consultants and staff by lawful means. The SMSCS may collect personal information without consent when it is reasonable to do so and permitted by law.

6.3. In determining whether to obtain written or implied consent, the SMSCS will take into account the sensitivity of the personal information, as well the individual's reasonable expectations. Members, consultants, service providers and staff may consent to the collection and specified use of personal information in the following ways:

- Completing and/or signing an application form.
- Checking a check box, or selecting an option (such as 'Yes' or 'I agree')
- Providing written consent either physically or electronically.
- Consenting orally in person.
- Consenting orally over the phone.

6.4. The SMSCS will not, as a condition of providing a product or service, require members, consultants, service providers or staff to consent to the use, collection, or disclosure of Personal Information beyond what is required to fulfill the specified purpose of the product or service.

6.5. A member, consultant, service provider or staff person may withdraw consent in writing, at any time, subject to legal or contractual restrictions. The SMSCS will inform the member of the implications of withdrawing consent.

6.6 The SMSCS will not obtain consent from individuals who are minors, seriously ill, or mentally incapacitated. Consent from these individuals will be obtained from a parent/guardian, or a person having power of attorney.

6.7. The SMSCS may disclose personal information without the member, consultant, service provider or staff member's knowledge or consent only:

- To a lawyer representing the SMSCS.
- To collect a debt that the member owes to the SMSCS.
- To comply with a subpoena, a warrant, or an order made by a court or other body with appropriate jurisdiction.
- To a government institution that has requested the information and identified its lawful authority, if that government institution indicates that disclosure is for one of the following purposes: enforcing or carrying out an investigation, gathering intelligence relating to any federal, provincial, or foreign law, national security or the conduct of international affairs, or administering any federal or provincial law.
- To an investigative body named in PIPEDA or a government institution, if the SMSCS believes the personal information concerns a breach of an agreement, contravenes a

federal, provincial, or foreign law, or if the SMSCS suspects the personal information relates to national security or the conduct of international affairs.

- To an investigative body for purposes related to the investigation of a breach of an agreement or a contravention of a federal or provincial law.
- To governing authorities and/or partner organizations (eg. Sask Sport) and other organization working on behalf of the SMSCS
- In an emergency threatening a member's, consultant's or staff's life, health, or security (SMSCS will inform the individual of the disclosure).
- To an archival institution 20 years after the individual's death or 100 years after the record was created If it is publicly available as specified in PIPEDA.

6.8 The SMSCS is not required to obtain the member, consultant, service provider or staff's consent for the collection of personal information, only if:

- It is clearly in the member, consultant, service provider or staff's interest and the opportunity for obtaining consent is not available in a timely way.
- Knowledge and consent would compromise the availability or accuracy of personal information and collection is required to investigate a breach of an agreement or a contravention of a federal or provincial law.
- An emergency threatens a member, consultant, service provider or staff's life, health, or security.
- The information is publicly available as specified in PIPEDA.

6.9 The SMSCS is also not required to obtain consent for the collection of personal information if the information is for journalistic, artistic, or literary purposes

7. Accuracy, Retention, and Openness

7.1 To minimize the possibility that inappropriate personal information may be used to make a decision about a member, consultant, service provider or staff member, personal information will be accurate, complete, and as up-to-date as is necessary for the purposes for which it will be used.

7.2 Personal information will be retained as long as reasonably necessary to enable participation in the SMSCS programs, events, and activities, and in order to maintain historical records as may be required by law or by governing organizations.

7.3 SMSCS representatives will be made aware of the importance of maintaining the confidentiality of personal information and are required to comply with the SMSCSs Confidentiality Policies.

7.4 Personal information will be protected against loss or theft, unauthorized access, disclosure, copying, use, or modification by security safeguards appropriate to the sensitivity of the personal information.

7.5 Personal information that has been used to make a decision about a member, consultant or staff will be maintained for a minimum of one year in order to allow the individual the opportunity to access the personal information after the decision has been made.

7.6 The SMSCS will make the following information available to members, consultants, service providers and staff:

- This privacy policy.
- Any additional documentation that further explains the SMSCS's privacy policy.
- The name or title, and the address, of the person who is accountable for the SMSCS's privacy policy.
- The means of gaining access to personal information held by the SMSCS.
- A description of the type of personal information held by the SMSCS, including a general account of its use.
- Identification of any third parties to which personal information is made available.

8. Access

8.1. Upon written request, and with assistance from the SMSCS after confirming the member, consultant, service provider or staff's identity, individuals may be informed of the existence, use, and disclosure of their personal information and will be given access to that personal information. Members are also entitled to be informed of the source of the personal information, and provided with an account of third parties to which the personal information has been disclosed.

8.2. Unless there are reasonable grounds to extend the time limit, requested personal information will be disclosed to the individual, at no cost, within thirty (30) days of receipt of the written request.

8.3. Members, consultants, service providers and staff may be denied access to their personal information if the information:

- Is prohibitively costly to provide.
- Contains references to other individuals.
- Cannot be disclosed for legal, security, or commercial proprietary purposes.
- Is subject to solicitor-client privilege or litigation privilege.

8.4. If the SMSCS redacts/refuses a request for personal information, it shall inform the individual of the reasons for the refusal and/or redaction and shall identify the associated provisions of PIPEDA that support the refusal.

9. Compliance Challenges

9.1. Members, consultants, service providers and staff are able to challenge the SMSCS for its compliance with this policy.

9.2. Upon receipt of a complaint, the SMSCS will:

- Record the date the complaint is received.
- Notify the privacy officer who will serve in a neutral, unbiased capacity to resolve the complaint. Acknowledge receipt of the complaint in writing and clarify the nature of the complaint within seven (7) days of receipt of the complaint.
- Appoint an investigator using the SMSCS's personnel or an independent investigator, who will have the skills necessary to conduct a fair and impartial investigation and will have unfettered access to all files and personnel.
- Upon completion of the investigation and within thirty (30) days of receipt of the complaint, the investigator will submit a written report to the SMSCS

- Notify the complainant of the outcome of the investigation and any relevant steps taken to rectify the complaint, including any amendments to policies and procedures.

9.3 The SMSCS will not dismiss, suspend, demote, discipline, harass, or otherwise disadvantage any SMSCS member, consultant, service provider or staff person who:

- Challenges the SMSCS for its compliance with this policy
- Refuses to contravene this policy or PIPEDA
- Takes precautions not to contravene this policy or PIPEDA; even though said precautions may be in opposition to the regular duties performed by the member, consultant or staff person

B. Confidentiality Policy

1. Purpose

1.1. The purpose of this policy is to ensure the protection of confidential information that is proprietary to the SMSCS

1.2. SMSCS members, consultants, service providers and staff are responsible to ensure that their confidentiality policy use and regulations are consistent with this policy

2. Application of this Policy

This policy applies to all individuals employed by or engaged in activities with the SMSCS. People affected by this policy include, but are not limited to, employees, members, volunteers, consultants, contract personnel, committee members, and directors and officers of the SMSCS.

3. Confidential Information

3.1. The term 'confidential information' includes, but is not limited to, the following:

3.1.1 Personal information of SMSCS representatives (members, consultants and staff) including, but is not limited to:

- Home address
- Email address
- Personal phone numbers
- Date of birth
- Financial information
- Employment records
- Medical history
- Police Record Checks

3.1.2. The SMSCS intellectual property, proprietary information, and business related to the SMSCS programs, fundraisers, procedures, business methods, forms, policies, marketing and development plans, advertising programs, creative and training materials, trade secrets, knowledge, techniques, data, products, technology, computer programs, manuals, registration lists, software, financial information, and information that is not generally or publicly known or distributed.

3.1.3 Confidential information does not include the following: name, title, business address, work telephone number, or any other information widely available or posted publicly.

3.1.4 SMSCS members, consultants, service providers or staff who voluntarily consent to the publication of basic personal information in a public forum (such as the listing of an email address on a website) forfeit the expectation of confidentiality for that personal information for as long as it is available publicly.

4. Responsibilities

4.1. SMSCS members, consultants, service providers or staff will not, either during the period of their involvement or employment with the SMSCS or any time, thereafter, disclose to any person or organization any confidential information acquired during their period of involvement/employment, unless expressly authorized to do so.

4.2. The SMSCS will not publish, communicate, divulge, or disclose to any unauthorized person, firm, corporation, or third party any confidential information without the expressed written consent of the SMSCS.

4.3. The SMSCS members, consultants, service providers or staff will not use, reproduce, or distribute confidential information without the expressed written consent of the SMSCS.

4.4. All files and written materials relating to confidential information will remain the property of the SMSCS and, upon termination of involvement/employment with the SMSCS or upon request of the SMSCS, the SMSCS representatives or members will immediately return all written or tangible confidential information, as well as copies and reproductions, and any other devices containing confidential information and delete files that are SMSCS property from personal electronic devices and/or anywhere else confidential information may have been saved.

5. Intellectual Property

Copyright and any other intellectual property rights for all written material (including material in electronic format or posted on a website or social media platform) and other works produced in connection with employment or involvement with the SMSCS will be owned solely by the SMSCS, which shall have the right to use, reproduce, or distribute such material and works, in whole or in part, for any purpose it wishes. The SMSCS may grant permission for others to use its intellectual property.

6. Enforcement

A breach of any provision in this policy may be subject to legal recourse, termination of the employment or volunteer position, or sanctions pursuant to the SMSCS's Formal Complaints Policy.

2. SMSCS Funding Contingency Plan

1. Overview

1.1. A **contingency plan** is a plan devised for an outcome other than in the usual (expected) plan. It is often used for risk management for an exceptional risk that, though unlikely, would have catastrophic consequences.

1.2. In the Council's case a contingency plan is important when and if the main source of revenue, Saskatchewan Lotteries Funding ceases to exist or is significantly decreased (50% or more)

2. The Plan

In the case where Sask Lotteries Funding ceases to exist or is severely decreased the following procedures would be implemented:

- The Board/Executive and Staff would meet to determine the future of the Council. Options could include: (1) continuing operations in a reduced/scaled down capacity or, (2) dissolution of the Council (see constitution and bylaws for further details) in an orderly manner.
- Once a plan was agreed upon the Council would need to hold a meeting of the members to obtain approval.

Note: The Sask Sport Inc Management Team (staff) would be able to provide some assistance with the plan as well.

Note: If Sask Lotteries Funding ceased to exist or was significantly reduced the Council's clients (PSO's etc.) would also lose their funding as well including Sask Sport Inc. This would significantly affect the need for sport science and sport medicine programs as the sports would have little or no staff and the focus would be mainly on ensuring their sport continued to operate leagues and games. Additional services would not be a priority or affordable.

3. SMSCS Vaccination Policy (Effective March 29, 2023)

1. Purpose

1.1. The Sport Medicine and Science Council of Saskatchewan (SMSCS) has a responsibility to provide and maintain a safe environment for our employees, board and committee members, consultants, service providers and clients (athletes and coaches). We have an obligation to eliminate known hazards and dangers in our sites and events. Communicable diseases (eg. COVID-19) represent a significant health risk to our employees, board and committee members, consultants, service providers, clients and the community at large. This policy is necessary to ensure that the SMSCS meets our obligation to provide a safe and healthy environment by reducing the potential spread of communicable diseases.

1.2. Additionally, the SMSCS will act in compliance with all municipal, provincial and federal workplace health and safety legislation and guidelines.

2. Scope

It is strongly recommended that all SMSCS employees (including part-time), board and committee members, consultants and service providers be fully vaccinated (a complete primary series of shots) against communicable diseases (eg. COVID-19) as recommended by the Ministry of Health, Chief Medical Officer and/or local SHA Senior Medical Officer. The SMSCS also recommends employees (including part-time), board and committee members, consultants and service providers “stay up to date” (means a person has received all recommended communicable disease vaccine doses, including any booster dose(s) when eligible).

3. Documentation

3.1. If required, all SMSCS employees, board and committee members, consultants and service providers must provide proof of vaccination by emailing or mailing their documentation specifically to the Executive Director only. In the case of the Executive Director, proof of vaccination is provided to the President.

3.2. Acceptable documents serving as evidence of communicable disease vaccination include:

- a digital (QR code) or physical record of immunization.
- a record from MySaskHealthRecord/EhealthSask
- a record card(s) provided at time of vaccination by the Saskatchewan Health Authority.
- medical records signed by a licensed health care provider on that provider's letterhead indicating vaccine name and date(s) of administration.

3.3 The SMSCS (Executive Director) will comply with all requirements under applicable legislation regarding the storage of personal health information to ensure that this information is maintained in a secure and appropriate manner. Once an employee, board or committee member, consultant and service provider's vaccination status has been confirmed, all supporting documentation will be destroyed. The SMSCS will maintain a record of the individual's vaccination status only.

4. Notification

If an employee, board and committee member, consultant or service provider is exposed to a communicable disease or develops any symptoms related to a communicable disease, they should disclose their exposure risk to the SMSCS as soon as possible and will be required to follow any applicable Sask Public Health Orders set out by the Ministry of Health and Chief Medical Officer.

5. Compliance

Employees, board and committee members, consultants and service providers who make false statements about, or provide false documents related to, being vaccinated may be subject to disciplinary actions, up to and including termination from their respective position.

The SMSCS reserves the right to amend this policy from time to time as circumstances dictate.

4. SMSCS Policy Regarding In-Person and On-line Platform Recordings

Time Limit - All educational sessions provided/presented by the SMSCS (this includes staff, members, consultants, and service providers) either in-person OR through on-line platforms

such as Zoom, can be recorded and utilized by the requesting agency for up to two weeks following the presentation date.

Intended Purpose of Recordings – Is for participants who could not attend the original session due to extenuating circumstances. Any unauthorized use of the recording after the two-week period is strictly prohibited. Under no circumstances can a host agency save or copy the presentation onto other websites or media platforms in order to be shown at a later date.

Low Attendance - If a PSOs initial on-line platform session ends up having low attendance compared to pre-registration numbers (75% or lower), recordings of all future sessions may not be permitted. Having live education with the opportunity for discussion and questions is vital for face-to-face-learning.

Ownership – All presentations are the property of the SMSCS and/or the Presenter.

Scheduling – Host groups must ensure that sessions for targeted group (ie. teams, clubs, etc.) should not be scheduled at the same time as practices, games, or training sessions.

Exceptions – In certain circumstances, the SMSCS and/or the presenter may request the presentation not be recorded.

Prior Agreement - The requesting agency must agree to this policy prior to the SMSCS setting up the original session/presentation.

5. SMSCS Strategy for Equity, Diversity, Inclusion & Accessibility

Sask Sport Inc has been working diligently on a strategy for EDIA and expects their member organizations to do the same. Therefore, the Council is committed to following their lead and promoting equity, diversity, inclusion & accessibility (EDIA) by striving to offer sport medicine and sport science services through professional experts whom have diverse knowledge, backgrounds and life experiences. In addition, our services are available to all Saskatchewan athletes and coaches regardless of racial and ethnic origin, gender identity, sexual orientation, physical or mental ability, social economic status, age or religious belief.

The Council's EDIA Strategy will focus on;

- Becoming more diverse through the Board, Staff, Consultants and Service Providers of the Council.
- Educating Staff, Board, Consultants and Service Providers in regards to EDIA
- Working with existing and potential client groups to understand and address their needs when it comes to EDIA

Board, Staff and Consultant Service/Provider Diversity

- Ensure the organization fosters a sense of belonging that makes everyone feel like they are part of the team.
- Where possible, ensure diversity by being inclusive of different backgrounds and national origins including racial and ethnic origin, gender identity, sexual orientation, physical or mental ability, social economic status, age or religious belief

Board

- ACTION - when vacancy occurs, encourage member groups to proactively recruit and nominate individuals from diverse backgrounds.
- ACTION - ensure board term limits to ensure inclusion of all members who would like to be involved at the board level.
- ACTION – utilize the member-at-large positions to increase board diversity where appropriate.

Staff

- ACTION - when hiring staff, create and post job advertisements to encourage applicants of diverse backgrounds, who meet the necessary education, skill and knowledge requirements for the open positions to apply.

Consultants & Service Providers

- Continue to consider all applicants who meet the Council’s educational or certification requirement.
- Highlight and promote our event coverage mentorship program
- ACTION - proactively promote and/or recruit possible future consultants through promotion and communication with students at universities and other organizations

EDIA Professional Development for Members, Board, Staff and Consultant/Service Providers.

- ACTION – implement confidential self declaration, where appropriate, to gain an understanding on the demographics of the Council members in order to meet the needs of our clientele
- ACTION - survey consultants and members, periodically, to inquire on what areas of EDIA they would be interested in receiving education on.
- ACTION - organize and offer ongoing educational sessions on a variety of EDIA topics which may include but not be limited to;
 - race & ethnicity education and awareness
 - gender, gender identity & sexual orientation education and awareness
 - age education and awareness
 - physical ability education and awareness
 - mental ability education and awareness
- ACTION - actively promote all external EDIA professional development opportunities that the Council Staff are made aware of (eg. conferences, virtual sessions, in-person sessions or professional development days).
- ACTION - actively promote the Sask Sport identified awareness days and/or events recognizing diverse groups
- ACTION - when appropriate, actively promote land acknowledgements through our presentations and email correspondence
- ACTION - recognizing and using desired pronouns where applicable

Services for Clients and Potential Clients

- Ensure equity, inclusion and accessibility to our services for all clients and potential clients.
- Continue to proactively work with and provide “limited in-kind services” to Sask Sport member groups, and sports organization’s athletes and coaches regardless of racial and ethnic origin, gender identity, sexual orientation, physical or mental ability, social economic status, age or religious belief.

- Continue to work with the diverse groups in the province including but not limited to; NAIG Games, Cote First Nation Games, Tribal Councils, Metis Nations, Coaches Association - Women in Sport, Special Olympics, Wheelchair Sports, Blind Sports and Deaf Sports.
 - ACTION - work with the provincial sports organizations (PSO's) member groups to identify and understand their needs and how best to provide services to them from an EDI perspective.
 - ACTION: Offer limited free service to non Sask Sport groups, teams, and sport organizations that represent diverse groups when the SMSCS is approached by them.
 - ACTION - talk to the PSO member groups to identify and understand any other diverse groups or members of theirs that are not already being provided services to through the Council.
 - ACTION – Facilitate educational opportunities identified by PSO members.

6. Sask Sport - Safe Sport Manual (Effective March 31, 2024)

Overview

Sask Sport membership conditions require Active and Affiliate Members to have Dispute Resolution and Harassment and Abuse policies and procedures. The purpose of this membership condition is to place our members in a position to manage or mitigate discipline concerns, complaints, dispute resolution or appeals using a recognized fair and due process. To support this requirement, Dispute Resolution policy templates and procedures had been developed by Sask Sport to assist members. Adoption and implementation of these policies is required for membership and any updates to the templates, must be approved by Sask Sport, prior to implementation.

The current version of the required policy templates was provided by Sask Sport, for adoption, by our members in 2016. The amateur sport landscape has changed since 2016, with more emphasis on the importance of enhancing participant safety. Accordingly, the core policy requirements have been updated. The Safe Sport policy manual “draft” is attached. This manual will replace the existing, five-part Dispute Resolution policy suite (Code of Conduct, Discipline and Complaints policy, Appeals policy, Conflict of Interest policy and Alternative Dispute Resolution policy) that PSO members were required to adopt in 2016.

[Safe Sport – SMSCS](#)

Appendices

Appendix #1

Nutrition Long Term Plan Guideline

1. Initial Group Session: Optimal Sports Nutrition

- Introduction to Sport Nutrition Guidelines
- Introduction to Canada's Food Guide
- Energy balance
- Energy requirements for aerobic training, strength training, growth and development
- Adjustments for energy requirements for weight classification sports, weight loss and weight gain
- Carbohydrate (CHO) needs based on training volume, intensity, competition schedule
- Healthy CHO choices versus unhealthy choices
- Protein needs based on training volume, intensity and type of sport involvement
- Healthy protein choices versus unhealthy choices
- Hydration guidelines, sweat rate testing protocols, rehydration planning
- Timing of food intake in relation to training and competition schedule

2. Follow up session: Nutrient Timing for Optimal Performance

- Presentation of current guidelines for fuel consumption before training or competition
- Optimal composition and type of CHO to consume pre-event
- Quantity of CHO to consume pre-event
- Hydration strategies pre-event
- Timing of intake pre-event
- Impact of protein intake pre-event
- Energy needs during training sessions and competitive events lasting over 1 hour
- CHO needs during training and competitive events
- Fluid needs during training and competitive events
- Electrolyte needs during training and competitive events
- Examples of food and fluids choices to meet fuel requirements during the event
- Recovery nutrition
- Current research presented- sport specific examples
- Optimal amounts of key nutrients (CHO, protein)
- Snack and meal examples to consume post event
- Fluids and electrolytes for optimal recovery

3. Follow up session: Nutrition Monitoring for Optimal Performance

- Nutritional needs assessment
- Current strengths and weaknesses with the training diet, hydration status, timing of food intake, quality of choices
- Nutritional goal setting (SMART goals)
 - 1. Activity- recording goals
- The importance of monitoring during training
- Examples of nutrition monitoring tools
- Introduction of 20-point recovery scale (10 points for nutrition)
- Development of sport specific monitoring tools

4. Follow up session: Nutritional Sport Supplements

- Definition of supplements
- Current use of supplements by Canadian athletes
- Risks of supplement use, current research presented on the contamination of supplements

- How to evaluate supplement brands and companies
- Review of the certification programs that exist regarding supplements (NSF certified for sport)
- Presentation of key supplements (claims, current research, dosages, health and safety issues, bottom line)
 1. Protein powders and amino acid combinations
 2. Creatine
 3. Caffeine and other stimulants
- The Canadian Centre for Ethics in Sport's (CCES) position on supplement use

5. Follow up session: Competition Nutrition

- Review of the International Olympics Committee (IOC) consensus statement on sports nutrition
- Activity: development of a competition nutrition plan
 1. Foods to consume the week prior to the competition
 2. Foods to consume the night before the competition
 3. Breakfast meal examples
 4. Development of a healthy snack list for optimal pre and post event eating
 5. Lunch meal examples
 6. Development of a hydration protocol for competition days
 7. Supper meal examples
- Key considerations for weight classification sports (lightweight rowing, wrestling, etc.)

Appendix #2

Mental Performance Long Term Plan Guideline

1. Initial Group Session: Introduction to Mental Performance

- Introduction to Mental Training
- Introduction to the basic mental skills used to achieve excellence in sport

2. Building a Mental Skills Toolbox: Basic mental skills needed to optimal performance

- **Self-Awareness:** Identifying physical, technical, tactical and mental strengths and weaknesses
- **Goal Setting :** Building confidence and enhancing motivation through S.M.A.R.T goal setting
 - Goal Setting Fundamentals
 - Why should you set goals and why is goal-setting important?
 - Types of goals
 - Criterion used for setting goals
 - Monitoring goals
 - Goal adherence and accountability
- **Thinking Patterns:** Self-Talk and Negative thought stopping
 - Understanding self-talk and it's physiological and mental effects
 - Using positive self-talk statements and negative thought stopping techniques
- **Arousal Control:** Understanding and achieving your optimal level of arousal
 - The "Inverted U" theory
 - Types of relaxation and energizing techniques
- **Emotional Control:** Understanding emotion
 - Identifying different emotions
 - Identifying emotional "triggers"
 - Establishing a plan to use or overcome emotions
- **Attention Control:** Focus and Re-focusing skills/ strategies
 - Focus:
 - The effects of focus (or lack thereof)
 - Identifying distracters (internal and external)
 - Establishing a focusing plan
 - Re-focusing
 - The effects of re-focusing (or lack thereof)
 - Strategies for re-focusing
- **Mental Imagery:**
 - How it works
 - How and when to use it
 - Applied imagery exercises
- **Ideal Performance State:** Understanding your IPS profile
 - Factors affecting IPS
 - Barriers to achieving IPS
 - Identifying the skills (mental and physical) needed to achieve IPS
 - Developing plan to achieve (and maintain) IPS
- **Pre-Competition and Competition routines**
 - Developing a comprehensive routine (pre-competition, competition) that enables complete preparation (physical, technical, tactical, mental)

3. Additional topics for sessions: For Coaches

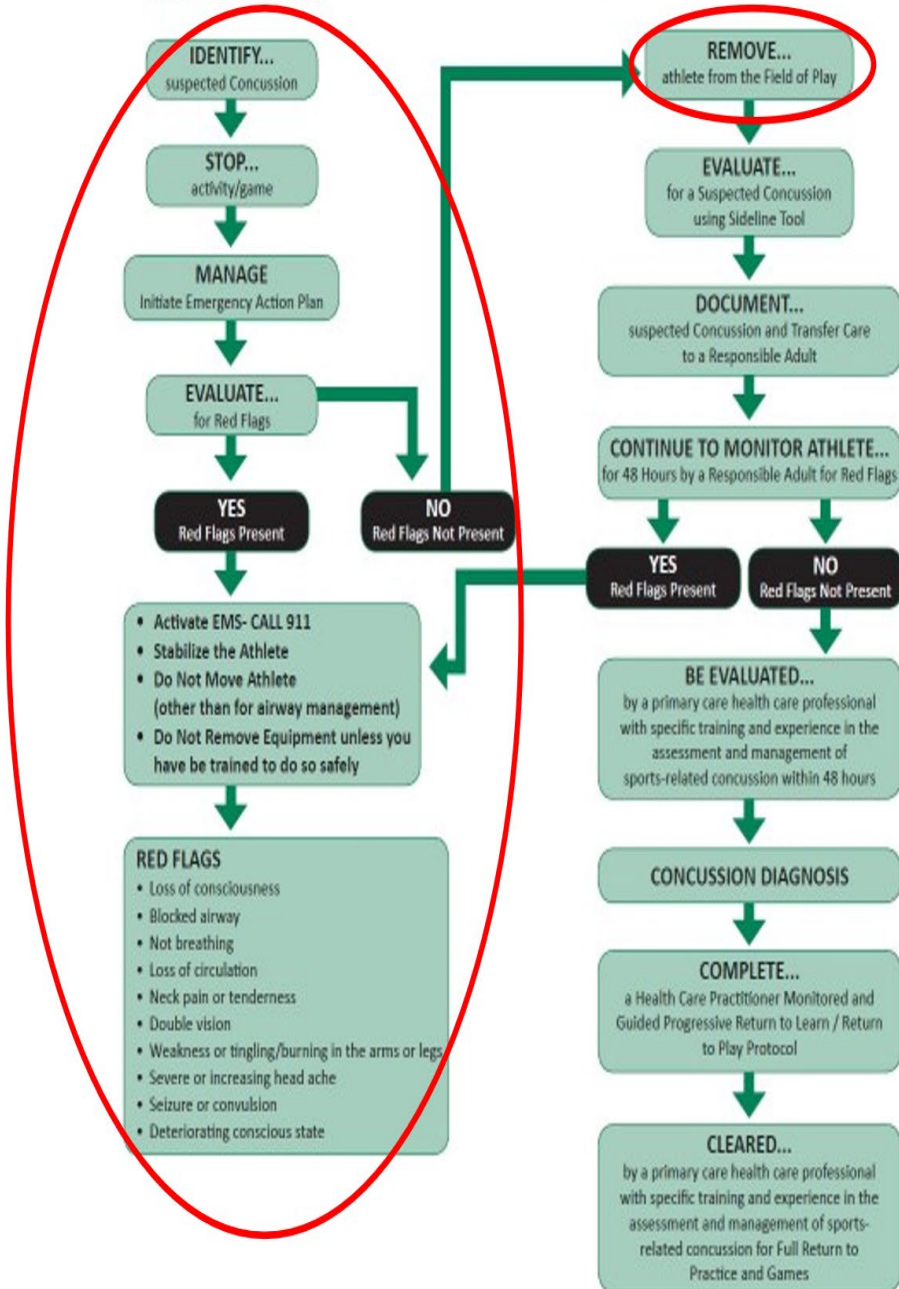
- **Practice organization and presentation:**
 - Time management, Prioritization, etc
- **Debriefing:**
 - The importance of debriefing
 - The debriefing process
 - Guidelines for efficient and effective debriefing
- **Athlete Monitoring:**
 - The importance of monitoring

- How and what to monitor
- Follow up and feedback
- **Feedback:**
 - Types of feedback
 - Feedback scheduling
- **Group Dynamics/ Group Cohesion/ Team Building:**
 - Using the team as a medium of change for individual players
 - Use of a Team Building Model: Understanding team environment, team structure, and group processes as ways to build a cohesive unit
 - Team Development: Stages of group development
 - Team Climate: Factors that affect team climate
 - Leadership

Appendix #3

Concussion Management and Planning

SMSCS CONCUSSION ACTION PLAN FLOW CHART



SMSCS CONCUSSION ACTION PLAN

Record of Concussion

• Athlete Name: _____

• Date of Suspected Concussion: _____

• Name of Person Monitoring Athlete at the scene: _____

• Relationship to the athlete: _____

• Description of what happened: (Blow to head, Hit to the body, etc): _____

• EMS called: ☐ Yes ☐ No OR

• Athlete care transferred to responsible adult: ☐ Yes ☐ No

• Name of Parent/Guardian responsible for at home monitoring of athlete: _____

• Relationship to the athlete: _____

• Concussion information sheet provided: ☐ Yes ☐ No

• Date athlete assessed by primary care health care professional: _____

• Supervising health care professional: _____ Profession: _____

• Concussion Diagnosis: ☐ Yes ☐ No

• Athlete Returned to School: ☐ Yes ☐ No

• Cleared for Participation in Non-Contact Training Drills (Step 4 SCAT5): ☐ Yes ☐ No Date: _____

• Supervising health care professional: _____ Profession: _____

• Note from Professional Received: ☐ Yes ☐ No

• Cleared for Full Contact Practice (Step 5 SCAT5): ☐ Yes ☐ No Date: _____

• Supervising health care professional: _____ Profession: _____

• Note from Professional Received: ☐ Yes ☐ No

• Cleared for Return to Play/Sport (Step 6 SCAT5): ☐ Yes ☐ No Date: _____

• Supervising health care professional: _____ Profession: _____

• Note from Professional Received: ☐ Yes ☐ No

Appendix #4

Sport Safety Program Workshops **-Confirmation of Attendance-**

This letter verifies that _____ has attended both of the workshops associated with the Sport Medicine and Science Council of Saskatchewan's (SMSCS) SPORT SAFETY PROGRAM. Your newly learned skills and knowledge will certainly assist you in prevention of injury and ensure safe actions and support if an injury occurs. Be sure you know your role! You are not a medical expert, so don't try to be one. Always 'refer' to a medical professional!

- *SMSCS Sport Injury Prevention and Care (SIPAC) Workshop*
 - *Name:* _____
 - *Date attended:* _____
 - *Location:* _____
- *SMSCS Sport Wrapping and Taping (SWAT) Workshop*
 - *Name:* _____
 - *Date attended:* _____
 - *Location:* _____

It should be noted this letter does not give anyone any type of official certification or designation. The two SMSCS workshops noted above are 'educational' workshops only, and are not certified by any professional body.

Date

SMSCS Signature

Appendix #5.1

Canada Games-Team Sask Mission Staff Medical Liaison Application Form

SECTION I - GENERAL INFORMATION

Name:
Address:
City:
Province:
Postal Code:
Email:
Phone (work or home):
Phone: (cell):
Fax:

Please answer the following questions:

- I would be able to attend the 2025 Canada Summer Games in St. John's Newfoundland and Labrador from August 8 – 24, 2025 inclusive for both weeks. YES _____ NO _____

(Note: Actual time commitment will vary/be extended depending on travel arrangements)

- I have read the enclosed job descriptions and I am confident I can perform all the duties involved:

YES _____ NO _____ SOME _____

Professional Associations (Please check where appropriate)

Canadian Academy of Sport and Exercise Medicine _____

Canadian Athletic Therapists Association _____

Sport Physiotherapy Canada _____

Chiropractors Association of Saskatchewan _____

Canadian Sport Massage Therapists Association _____

Other(s) (specify): _____

Academic Background

College, University, Medical School: _____

Date of Graduation: _____

Sport Medicine Credentials Obtained within your Profession (Please check where appropriate) note: priority will be given to those with Sport Credentials

Diploma in Sport Medicine (CASEM) _____

Sport Massage Diploma _____

CATA Certified_____

SPC Certificate_____, Diploma_____

CAS Fellowship in Sport Medicine _____

Other(s) (specify):_____

SECTION II – CONSULTING WORK/EXPERIENCE

Briefly describe the consulting work you have done on behalf of the Council the past three (3) years. Include teams worked with, events covered, sessions and workshops facilitated, etc.

SECTION III – PAST VOLUNTEER WORK

List all volunteer (board and committee) work done for the Council the past three (3) years:

SECTION IV – PAST GAMES INVOLVEMENT/EXPERIENCE

List all past Games experience (4 years maximum): Include past experience as athlete, coach, manager, official, mission staff, medical staff, etc. If applicable, identify the specific sports you were involved with for each listed experience).'

note: no applicant can be selected to be Medical Liaison for 2 consecutive Games unless they are the only qualified applicant received.

SECTION V - SPORT and/or VOLUNTEER EXPERIENCE

Briefly describe your sport experiences and volunteer work that you feel would be beneficial as part of your duties as Medical Liaison. (include teams worked with in the past, events covered, other relevant education (eg. coaching theory courses, sports participated in, etc.)

SECTION VI – REFERENCES

Please list 3 work and/or volunteer references (include contact information)

Reference#1

Name:
Address:
City:
Province:
Postal Code:
Email:
Phone (work or home):
Phone: (cell):

Reference#2

Name:
Address:
City:
Province:
Postal Code:
Email:
Phone (work or home):
Phone: (cell):

Reference#3

Name:

Address:
City:
Province:
Postal Code:
Email:
Phone (work or home):
Phone: (cell):

_____	_____
Signature	Date

Note: Please sign and date your application if submitting by mail or fax.

DEADLINE FOR APPLICATIONS is May 31, 2024.

Please submit application to:

travis.laycock@sasktel.net

Appendix #5.2

Canada Games-Team Sask Mission Staff Mental Performance Application Form

SECTION I - GENERAL INFORMATION

Name:
Address:
City:
Province:
Postal Code:
Email:
Phone (work or home):
Phone: (cell):
Fax:

Please answer the following questions:

- I would be able to attend the 2025 Canada Summer Games in St. John's Newfoundland and Labrador from August 8 – 24, 2025 inclusive for both weeks. YES _____ NO _____

(Note: Actual time commitment will vary/be extended depending on travel arrangements)

- I have read the enclosed job descriptions and I am confident I can perform all the duties involved:

YES _____ NO _____ SOME _____

Academic Background

College, University: _____

Date of Graduation: _____

Other relevant Certification: _____

SECTION II – CONSULTING WORK/EXPERIENCE

Briefly describe the consulting work you have done on behalf of the Council the past three (3) years. Include teams worked with, sessions and workshops facilitated, etc.

--

SECTION III – PAST VOLUNTEER WORK

List all volunteer (board and committee) work done for the Council the past three (3) years:

--

SECTION IV – PAST GAMES INVOLVEMENT/EXPERIENCE

List all past Games experience (4 years maximum): Include past experience as athlete, coach, manager, official, mission staff, medical staff, etc. If applicable, identify the specific sports you were involved with for each listed experience).

--

SECTION V - SPORT and/or VOLUNTEER EXPERIENCE

Briefly describe your sport volunteer work that you feel would be beneficial as part of your duties as Mental Performance Consultant at the Games. (include teams worked with in the past, events covered, other relevant education (eg. coaching theory courses, sports participated in, coached, etc.)

--

SECTION VI – REFERENCES

Please list 3 work and/or volunteer references (include contact information)

Reference#1

Name:
Address:
City:
Province:
Postal Code:
Email:
Phone (work or home):

Phone: (cell):

Reference#2

Name:

Address:

City:

Province:

Postal Code:

Email:

Phone (work or home):

Phone: (cell):

Reference#3

Name:

Address:

City:

Province:

Postal Code:

Email:

Phone (work or home):

Phone: (cell):

Signature

Date

Note: Please sign and date your application if submitting by mail or fax.

DEADLINE FOR APPLICATIONS is May 31, 2024.

Please submit application to: travis.laycock@sasktel.net

Appendix #6

CONSENT TO CHIROPRACTIC TREATMENT

It is important for you to consider the benefits, risks and alternatives to the treatment options offered by your chiropractor and to make an informed decision about proceeding with treatment.

Chiropractic treatment includes adjustment, manipulation and mobilization of the spine and other joints of the body, soft tissue techniques such as massage, and other forms of therapy including, but not limited to, electrical or light therapy and exercise.

Benefits

Chiropractic treatment has been demonstrated to be effective for complaints of the neck, back and other areas of the body caused by nerves, muscles, joints and related tissues. Treatment by your chiropractor can relieve pain, including headache, altered sensation, muscle stiffness and spasm. It can also increase mobility, improve function and reduce or eliminate the need for drugs or surgery.

The risks associated with chiropractic treatment vary according to each patient's condition as well as the location and type of treatment.

The risks include:

- Temporary worsening of symptoms - usually, any increase in pre-existing symptoms of pain or stiffness will last only a few hours to a few days.
- Skin irritation or burn - skin irritation or a burn may occur in association with the use of some types of electrical or light therapy. Skin irritation should resolve quickly. A burn may leave a permanent scar.
- Sprain or Strain - Typically, a muscle or ligament sprain or strain will resolve itself within a few days or weeks with some rest, protection of the area affected and other minor care.
- Rib fracture - While a rib fracture is painful and can limit your activity for a period of time, it will generally heal on its own over a period of several weeks without further treatment or surgical intervention.
- Injury or aggravation of a disc - Over the course of a lifetime, spinal discs may degenerate or become damaged. A disc can degenerate with aging, while disc damage can occur with common daily activities such as bending or lifting. Patients who already have a degenerated or damaged disc may or may not have symptoms. They may not know they have a problem with a disc. They also may not know their disc condition is worsening because they only experience back or neck problems once in a while.

Chiropractic treatment should not damage a disc injury that is not already degenerated or damaged, but if there is a pre-existing disc condition, chiropractic treatment, like many common daily activities, may aggravate the disc condition.

The consequences of disc injury or aggravating a pre-existing disc condition will vary with each patient. In the most severe cases, patient symptoms may include impaired back or neck mobility, radiating pain and numbness into the legs or arms, impaired bowel or bladder function, or impaired leg or arm function. Surgery may be needed.

- Stroke - Blood flows to the brain through two sets of arteries passing through the neck. These arteries may become weakened and damaged, either over time through aging or disease, or as a result of injury. A blood clot may form in a damaged artery. All or part of the clot may break off and travel up the artery to the brain where it can interrupt blood flow and cause a stroke.

Many common activities of daily living involving ordinary neck movements have been associated with stroke resulting from damage to an artery in the neck, or a clot that already existed in the artery breaking off and travelling up to the brain.

Chiropractic treatment has also been associated with stroke. However, that association occurs very infrequently, and may be explained because an artery was already damaged and the patient was progressing toward a stroke when the patient consulted the chiropractor. Present medical and scientific evidence does not establish that chiropractic treatment causes either damage to an artery or stroke.

The consequences of a stroke can be very serious, including significant impairment of vision, speech, balance and brain function, as well as paralysis or death.

Alternatives

Alternatives to chiropractic treatment may include consulting with other health professionals. Your chiropractor may also prescribe rest without treatment, or exercise with or without treatment.

Questions or Concerns

You are encouraged to ask questions at any time regarding your assessment and treatment. Bring any concerns you have to the chiropractor's attention. If you are not comfortable, you may stop treatment at any time.

Please be involved in and responsible for your care. Inform your chiropractor immediately of any change in your condition. **DO NOT SIGN THIS FORM UNTIL YOU MEET WITH THE CHIROPRACTOR**

I hereby acknowledge that I have discussed with the chiropractor the assessment of my condition and the treatment plan. I understand the nature of the treatment to be provided to me. I have considered the benefits and risks of treatment, as well as the alternatives to treatment. I hereby consent to chiropractic treatment as proposed to me.

Name (Please Print)

Signature of Patient (or legal guardian)

Date _____ 20____

Signature of Chiropractor

Date _____ 20____

Appendix # 7

REGISTERED MASSAGE THERAPIST-EVENT COVERAGE GUIDELINES

A. General Guidelines and Responsibilities:

- 1) Have a general knowledge of the sport. Do some research.
- 2) Be cognizant of athletes who have never had a pre-event massage. Modify the pre-event massage to not over stimulate them.
- 3) Do not offer technical (sport) advice to the athlete.
- 4) Work as a 'team' with other medical/therapy staff that are at the event on behalf of the SMSCS.
- 5) Dress in comfortable attire.
- 6) Check the Emergency Action Plan set-up. Discuss with other medical/therapy staff.
- 7) Ensure you have updated CPR/First Aid
- 8) Do only what you have been trained to do.

B. Supplies:

- 1) In most instances the SMSCS will provide the following equipment and supplies relating to massage:
 1. Portable Treatment Table
 2. Disinfectant wipes (to clean off table)
 3. Paper Towels
 4. Sport 1st Aid Kit and other supplies used by all therapy and medical personnel (RMT, P.T., A.T., chiro, M.D., etc).
- 2) Bring your own supplies as needed:
 1. Oils/lotion
 2. Rubber gloves
 3. Hand cleaner
 4. Timer/wrist watch
 5. Water bottle

NOTE: the SMSCS will reimburse you (if you want) for any supplies (oils/lotions, hand cleaner, gloves) that you personally bring.

C. Scheduling/Charting:

- 1) Arrive approximately 30 minutes prior to your shift. This will allow you to set up (if you are the first one), and/or to get a report from the previously scheduled RMT and other medical personnel.
- 2) Don't over treat. Remember, you are there to provide short pre and post event massage treatments of 15 – 20 minutes. Adjust the amount of time you spend with each athlete if the requests/schedule for treatments are high (ie, athletes are waiting or 'lined up'). This is NOT the place and time to be providing injury rehab.
- 3) If more than one RMT is scheduled per shift, ensure each of you take turns working on the athletes unless the athlete has a preference.
- 4) Ensure you record all treatments on the INJURY REPORTING FORM supplied by the SMSCS. Don't forget to sign/initial the form.
- 5) If you committed to work and have to cancel, find someone to replace you.
- 6) Provide the SMSCS with a follow-up indicating the hours you provided coverage, as well as information you feel relevant for follow-up/evaluation purposes. You may also be asked to fill out an Expense/Honorarium Form.

Appendix # 8

MEDICAL COVERAGE OF EVENTS

*-Initial Service Request Form-
(Updated March 2025)*

Medical Coverage of Events Program - SMSCS

-Initial Service Request Form - send to safetycoordinator@smscs.ca

Date Received: Click or tap to enter a date.

Name of Event:

CONTACT INFORMATION:

Sport/Host:	Phone:
Invoice Address:	Postal Code:
Name:	Email:

EVENT INFORMATION:

Location(s)/Facility(s):
Date(s)/Time(s):
Playing surfaces (gym, court, mat, field, etc):
Curtained off area/private room available:

SERVICE AREAS REQUESTED (check all applicable):

On-Site Injury Management (includes all services listed below) <input type="checkbox"/>	Event Treatment Services (for events 2+ days in length) <input type="checkbox"/>	Physician Services (indicate requirements) <input type="checkbox"/>
On Site/Field Coverage	Pre-Event Taping/Wrapping <input type="checkbox"/>	Skin Checks <input type="checkbox"/>
Acute Injury Management (including concussion assessment)	Chronic/Non-Event Injury Assessment <input type="checkbox"/>	Pre-Event Medical Clearance <input type="checkbox"/>
Emergency Injury/Incident Management	Acute Event Injury Treatment <input type="checkbox"/>	On-Site Coverage <input type="checkbox"/>
Acute Injury Taping/Wrapping	Pre/Post Event Massage <input type="checkbox"/>	On-Call Service <input type="checkbox"/>
Assessments-Return to Sport	Chiropractic Services <input type="checkbox"/>	
Injury Care/First Aid		
Special Requests:	Special Requests:	Special Requests:

SERVICE PROVIDERS REQUESTED (Check the Service Provider group(s) you are requesting):

(Note: The SMSCS will determine the final number of Service Providers required based on safety, liability, and best practice principles).

Physiotherapist <input type="checkbox"/>	Athletic Therapist <input type="checkbox"/>	Physician <input type="checkbox"/>
Chiropractor <input type="checkbox"/>	Massage Therapist <input type="checkbox"/>	

EQUIPMENT REQUESTED (Check the Equipment you will need):

(Note: A mandatory \$30/day PPE supplies fee will be charged to all Host agencies to ensure the safety of all medical personnel, athletes, and coaches).

Treatment Table <input type="checkbox"/>	Sport 1 st Aid Kit (stock) <input type="checkbox"/>	Ice Cooler <input type="checkbox"/>
B Splint Kit <input type="checkbox"/>	Physicians Med Bag (stock) <input type="checkbox"/>	AED <input type="checkbox"/>
Quick (speed) Splint <input type="checkbox"/>	Trauma Bag (stock) <input type="checkbox"/>	Spine Board <input type="checkbox"/>

Ultrasound Unit <input type="checkbox"/>	Interferential Unit <input type="checkbox"/>	Tens/Stim Unit <input type="checkbox"/>
--	--	---

EXTRA/ADDITIONAL SUPPLIES REQUESTED (In addition to contents of the Sport 1st Aid Kit, see below):

Trainers Tape <input type="checkbox"/>	Under-wrap <input type="checkbox"/>	Ice Bags <input type="checkbox"/>	Tensor Wraps <input type="checkbox"/>
Cover Roll Tape <input type="checkbox"/>	K-Tape <input type="checkbox"/>	Leukotape P <input type="checkbox"/>	Band-aids (various) <input type="checkbox"/>
Gauze, Non-Sterile <input type="checkbox"/>	Gauze, Sterile <input type="checkbox"/>	Elastic Adhesive Tape <input type="checkbox"/>	
Other:			

Standard First Aid Contents:

Tools/Hardware/PPE	
Black Handle/rescue Scissors	Large Medical Bandage Scissors
Tape Shark	Tweezers
Nail Clippers	Safety Pins-20
Tongue Depressors-10	CPR Mask
Table/Disinfectant Wipes	Pens-2
Penlight	Facial Tissue
Tensors	
Groin-2	4"-2
6"-2	3"-2
Tape (rolls)	
White Athletic-12	Pro-Wrap-2
Lightplast Pro (3")-3	Lightplast Pro (2")-3
Elastikon (4")-2	Elastikon (3")-2
Elastikon (2")-2	Leukotape K-1
Leukotape P-1	Cover-Roll (2")-1
Cover-Roll (4")-1	Kinesio Tape-1
Mole Skin (squares)-2	Felt (3x4)-2
Heel/Lace Pads-40	Razor (disposable)-1
Blood/Bandage/First Aid	
Gloves (pairs; S,M,L)-10	Gauze-Sterile; non-adherent-10
Gauze-Sterile (2x2)-10	Gauze-Sterile (3x3)-10
Gauze-Sterile (4x4)-10	Gauze-Non Sterile (2x2)-10
Gauze-Non Sterile (3x3)-10	Gauze-Non Sterile (4x4)-10
Telfa Pads (3x4)-10	Nose Plugs-10
Cotton Tipped Swabs-10	Alcohol Swabs-10
Polysporin-1	Regular/Strip Band-aids-10
Knuckle Band-aids-10	Digit Band-aids (small)-5
Digit Band-aids (large)-5	Patch (small)-5
Patch (large)-5	Butterfly Wound Closure-3
Steristrips (1/4 x 3)-3	Regular Eye-1
Junior Eye-1	Second Skin (circles)-3
Foam-High Density (1/2")-1	Foam-High Density (1/4")-1
Foam-Low Density (1/2")-1	Foam-Low Density (1/4")-1
Instant Cold Packs-2	Ice Bags-20
Sprays/Lotions	
Pre-Adhesive Spray (10oz)-1	Tape Remover (4oz)-1
Opsite-1	Massage Lotion-1
Skin Lube (3oz)-1	Atomic Balm (3oz)-1
Isogel (115 ml)-1	Saline-1
Splinting	
Sam Splint-1	Speed Splint-1
Finger Splint-1	Triangular Bandage-5

Appendix # 9

MOU – Medical Coverage of Events - SMSCS **(relating to Medical, 1ST Aid, & Therapy Coverage) – updated March 2025**

THIS AGREEMENT/MOU made on this day, ____ Click or tap to enter a date. ____ (date) by and between:

Sport Medicine & Science Council of Saskatchewan, with its principal place of business at 2205 Victoria Ave, Regina, Saskatchewan, S4P 0S4 (hereinafter referred to as “**SMSCS**”),

and

--

With its principal place of business at:

Address:	
City/Town:	P. Code:
Email:	Phone:
Contact Person:	

(hereinafter referred to as “**HOST**”)

The intent of this MOU is to outline the services SMSCS will provide to the HOST, and to define the respective obligations of each organization.

This term of this MOU is Click or tap to enter a date. (today’s date) through to Click or tap to enter a date. (date one month after the event).

The parties agree as follows:

Article 1 – Event Details and Coverage:

SMSCS and the HOST will mutually determine and agree to the level of coverage required. The SMSCS has the right to withdraw services if the HOST does not agree with the SMSCS’s recommendation of level of services based on the safety of the medical personnel and the athletes, as well as Best Practice principles.

Dates are confirmed; however, times are tentative and will be confirmed a minimum of two weeks prior to the event by the HOST.

Name of Event:
Date(s):
Hours to be Covered:
Location/Facility:
Playing Surfaces:

MEDICAL PERSONNEL REQUIRED (TOTAL NUMBER):

Physiotherapist: Choose an item.

Athletic Therapist: Choose an item.

Physician:(on site)☐ (on call) ☐

Massage Therapist: Choose an item.

Chiropractor: Choose an item.

SERVICES AREAS REQUIRED/AGREED UPON BY BOTH PARTIES (checked boxes):

On-Site Injury Management (includes all services listed below) <input type="checkbox"/>	Event Treatment Services (for events 2+ days in length) <input type="checkbox"/>	Physician Services (indicate requirements) <input type="checkbox"/>
On Site/Field Coverage	Pre-Event Taping/Wrapping <input type="checkbox"/>	Skin Checks <input type="checkbox"/>
Acute Injury Management (including concussion assessment)	Chronic/Non-Event Injury Assessment <input type="checkbox"/>	Pre-Event Medical Clearance <input type="checkbox"/>
Emergency Injury/Incident Management	Acute Event Injury Treatment <input type="checkbox"/>	On-Site Coverage <input type="checkbox"/>
Acute Injury Taping/Wrapping	Pre/Post Event Massage <input type="checkbox"/>	On-Call Service <input type="checkbox"/>
Assessments-Return to Sport	Chiropractic Services <input type="checkbox"/>	
Injury Care/First Aid		
Special Requests:	Special Requests:	Special Requests:

Disclaimer – All Medical Personnel providing On-Site Injury Management have first responder training. However, the SMSCS does not carry all the appropriate medical equipment required to provide all first responder emergency services. We can provide basic oxygen connection services.

IF YOU REQUIRE ALL FIRST RESPONDER EMERGENCY TYPE SERVICES, PLEASE ENSURE YOU HAVE EMERGENCY PERSONNEL ON HAND (EG. AMBULANCE, ETC.).

Article 2 – SMSCS Roles & Responsibilities:

- A. SMSCS will coordinate and schedule the appropriate and mutually agreed upon Medical Personnel (see above) for the event noted above.
- B. SMSCS will provide a 'draft' budget to the HOST for the potential costs associated with the event. It will be noted that it is only an 'estimate' as the number of hours and Medical Personnel could change, the supplies used could be more or less than anticipated, travel/meals/accommodations may be different than originally budgeted, etc.
- C. SMSCS will inform the Medical Personnel team assigned to the event the policies, procedures, and sport specific rules relating to medical services provided by the HOST.
- D. SMSCS will provide all medical and 1st aid supplies/equipment for the Medical Personnel. All supplies used will be invoiced back to the HOST.
- E. All required medical equipment will be supplied by the SMSCS free of charge as long as the Medical Personnel for the event are scheduled and invoiced through the SMSCS.
- F. Prior to the event the SMSCS will submit a final schedule of Medical Personnel to the HOST Medical Event Coordinator/Contact.
- G. Following the event, the SMSCS will report back to and invoice the HOST in a timely manner.
- H. Following the event, the SMSCS will store in a secure location all Injury and Treatment Reporting Forms. If treatment is needed after the event, a copy of the form will be provided (if requested) to

the medical personnel. It is the Medical Personnel's responsibility to abide by all privacy related rules and regulations relating to the sharing and distribution of any medical records.

Article 3 – SMSCS Fee-For-Service and Other Program Expenses:

- A. In reference to the services listed in Article 1, the HOST will pay the SMSCS:
- i. Any administration expenses above and beyond what would be 'normal' administration costs will be invoiced back to the HOST upon completion of the event.
 - ii. A medical services coordination/administration fee of \$50/day (plus GST) per event will be charged to all non-Sask Sport Inc. members.
- B. The HOST will be invoiced for the following expenses (plus GST) for which the SMSCS will manage the payment to all Medical Personnel staff (honoraria and related expenses) and suppliers. The following expenses have been discussed and the amounts agreed upon:
- i. Honoraria:
 - Therapists/Chiropractors, \$50/hr per medical personnel
 - Physician on call, \$200/session
 - Physician on site, \$85/hr
 - Physician Skin Checks, \$100/hr, and \$2/per athlete checked
 - ii. Medical Personnel will also be eligible to claim:
 - parking expenses
 - travel time and mileage (if the personnel are from out-of-city).
 - travel time to the location is charged at **\$30 per hour**
 - mileage will be the current SMSCS rate which is the Government of Saskatchewan rate.
 - meal allowance if covering for more than four consecutive hours.
See below for specifics:
 - Out-of-Town/City-Travel & Consulting over 4 hours = \$15/day
 - (no receipts required)
 - Out-of-Town/City)-Travel & Consulting over 10 hours = \$30/day (no receipts required)
 - In-Town/City-Consulting over 7 hours = \$15/day (no receipts required)
 - In-Town/City)-Consulting over 10 hours = \$30/day (no receipts required)
 - iii. Damages:
 - Damages to SMSCS equipment and property that are the result of the action of any individual other than a SMSCS Medical Personnel.

Article 4 – HOST Roles & Responsibilities:

The HOST and their Medical Committee will adhere to the following roles and responsibilities:

- A. The HOST will communicate, at their earliest ability with SMSCS, any changes from the original agreed upon schedule. It should be noted that these schedule changes may not be able to be accommodated by the SMSCS depending on availability of medical personnel.

Host Contacts (include phone numbers):

- B. The HOST will be responsible for the securing and setting up the medical/treatment room/area, unless otherwise specified and contracted for the SMSCS to coordinate.

- C. The HOST or the Event Coordinators will provide, if available, the Medical Team (Medical Personnel) with a means of rapid communication during the event. ie: Two-Way Radios
- D. The HOST will inform the SMSCS what the procedures are for when SMSCS Medical Personnel are recommending an athlete not continue to participate as a result of an injury and/or suspected concussion.
- E. The HOST will provide a short orientation for the Medical Personnel prior to the event outlining:
 - i. Method of emergency communication procedures.
 - ii. Sport specific rules and regulations regarding treatment guidelines (ie. on-field notifications, taping rules, return to play rules, etc.
 - iii. The HOST's specific rules and regulations concerning code of conduct and etiquette for that sport/event.
- F. If available and previously agreed upon, provide the Medical Personnel with meals onsite during the event.
- G. Transport the medical supplies and equipment to and from the SMSCS office, or the HOST or arrange transport to locations out of Regina/Saskatoon.
- H. Provide a secure and lockable location to store equipment and supplies if the event is longer than one day.
- I. The HOST has declared that they have obtained consent for treatment for all participants in the event.

Article 5 – Cancellation Policy/Associated Fees:

- A. If the scheduled event is cancelled:
 - a. If the HOST gives at least 72 hours' notice prior to the scheduled start of the event, no monetary charge.
 - b. If notification is given within 72 hours of the start of the event, the SMSCS will charge the HOST 25% of the Medical Personnel honorarium (which will be paid to the contracted medical personnel).
 - c. If the scheduled event is cancelled at any point after the commencement of the event, SMSCS will charge the HOST a service fee of \$50/day, plus 50% of the Medical Personnel honorariums.

The cancellation fees will not apply if the reason for the cancellation is deemed to be beyond the control of the HOST. Acceptable conditions include: adverse environmental conditions and acts of god.

Article 6 – Failure to Perform:

- A. If either party shall fail to perform any of the terms and conditions of the Agreement, and such failure or breach shall not be cured within thirty (30) days after giving written notice thereof, the other party shall have the right to terminate this Agreement, without prejudice to the right of compensation for losses and damage thereby sustained.

Article 7 – Rights and Obligations:

- A. This Agreement and the rights and obligations of either party hereunder are not assignable without the prior written consent of the other party.
- B. All provisions hereof, are severable, and the invalidity, illegality, and unenforceability of any such provision shall be deemed not to affect the validity, enforceability or legality of the remaining provisions.

Article 8 – Notice:

- A. Any notice required or permitted to be given hereunder shall be in writing and may be given by facsimile, email, or by registered mail (postage prepaid), addressed to the party to whom the notice is given at the following address:

In the case of SMSCS:	In the case of HOST:
2205 Victoria Ave	
Regina, SK S4P 0S4	
Attn: Safety Coordinator	
Ph: (306) 780-9446	
Email: safetycoordinator@smscs.ca	

Any notice shall be deemed to have been received, if given by facsimile or email twenty-four (24) hours after dispatched, or, if mailed, the seventh (7th) day.

THE PARTIES AGREE TO THE ABOVE TERMS AND HAVE HEREBY EXECUTED THIS AGREEMENT.

HOST

Name(printed):	
Name(signature):	
Position:	Date:Click or tap to enter a date.
Organization:	

SMSCS

Name(printed):	
Name(signature):	
Position:	Date:Click or tap to enter a date.
Organization:	

Appendix #10

SPORT MEDICINE & SCIENCE COUNCIL OF SASKATCHEWAN MEDICAL COVERAGE PROGRAM - Injury & Treatment Reporting Form -

Athlete Information:

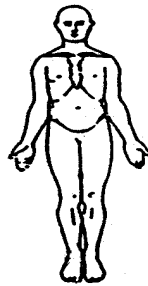
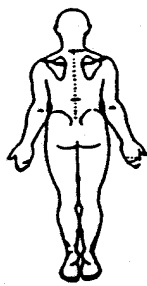
Name:	Phone:	
Address:	City:	P.Code:
Health Card #:	DOB:	Date/Time:
Sport/Event/Team:		

Consent for Assessment/Treatment/Sharing of Information: I hereby give consent to the attending medical personnel to assess my condition, provide treatment for my condition(s), and to disclose/share my personal and medical information with other persons and/or organizations who have a 'need to know' for such information for the purpose of providing additional or follow-up treatment and services.

Signature: _____

Medical Personnel Information:

Name: _____
Phone: _____ Profession: _____

Injury Status: <input type="checkbox"/> New Injury <input type="checkbox"/> Pre Existing Injury <input type="checkbox"/> <6 weeks <input type="checkbox"/> >6 weeks <input type="checkbox"/> Re Injury <input type="checkbox"/> <6 weeks <input type="checkbox"/> >6weeks <input type="checkbox"/> Illness	Type of Injury/Diagnosis: <input type="checkbox"/> Abrasion <input type="checkbox"/> Laceration <input type="checkbox"/> Blister <input type="checkbox"/> Sprain <input type="checkbox"/> Burn <input type="checkbox"/> Strain <input type="checkbox"/> Concussion <input type="checkbox"/> Overuse Injury <input type="checkbox"/> Contusion <input type="checkbox"/> Hyperthermia <input type="checkbox"/> Dislocation/ <input type="checkbox"/> Hypothermia Subluxation <input type="checkbox"/> Fracture <input type="checkbox"/> Other	 
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Treatment/Recommendations: <input type="checkbox"/> RICE <input type="checkbox"/> Wound Management <input type="checkbox"/> AR/CPR <input type="checkbox"/> Stretching <input type="checkbox"/> Immobilization/Splinting <input type="checkbox"/> Counselling/Education <input type="checkbox"/> Tape <input type="checkbox"/> Exercise Prescription <input type="checkbox"/> Sling <input type="checkbox"/> Mobilization <input type="checkbox"/> Crutches <input type="checkbox"/> Other:	Position of Athlete: Recommendations on Return to Play: <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:
--	--

Vital Signs <input type="checkbox"/> NA Time _____ Pulse _____ BP _____ Resp Rate _____ Temp _____
--

Referred To: <input type="checkbox"/> Hospital <input type="checkbox"/> Minor Emergency <input type="checkbox"/> Family Physician <input type="checkbox"/> Other:	Transported By: <input type="checkbox"/> Ambulance <input type="checkbox"/> Team Transport <input type="checkbox"/> Event Transport <input type="checkbox"/> Other:
--	--

Home Care Instructions: _____ _____ _____ _____ _____ _____
--

Release of Health Care Providers from legal action resulting from advice given to the athlete not to participate in an athletic event. I HEREBY ACKNOWLEDGE that I have been advised NOT to participate in one or more athletic events and I hereby release _____ from all liability and agree not to institute legal action with regard to that advice.
--

Date: _____	<input type="checkbox"/> MD <input type="checkbox"/> PT
Signature of Athlete:	<input type="checkbox"/> AT <input type="checkbox"/> Chiro
Signature of Parent/Guardian:	<input type="checkbox"/> Massage
Name of Health Care Provider:	<input type="checkbox"/> Sport First Aider

Signature of Health Care Provider:	<input type="checkbox"/> Other
------------------------------------	--------------------------------

Additional Comments:

Patient Follow Up Treatment (include date & time):

Patient Follow Up Treatment (include date & time):

Patient Follow Up Treatment (include date & time):

Appendix #11

Sport First Aid Inventory List

TRAINER/MEDICAL KIT(S) ITEMS

Hardware Items	Quantity	Price/unit	Item Code	Total
Pens	2	\$0.50	MED45	\$1.00
Pen Light (disposable)	1	\$6.40	MED30	\$6.40
Universal Scissor	1	\$9.75	FAKS62	\$9.75
Tape/bandage scissor-7.25"	1	\$4.25	MED31	\$4.25
Shark Tape Cutter	1	\$15.00	MED29	\$15.00
Splinter Forceps/Tweezers	1	\$1.25	MED36	\$1.25
Tongue Depressors	10	\$0.05	MED39	\$0.50
Finger Nail Clipper	1	\$3.85	MED35	\$3.85
CPR Pocket Mask	1	\$11.75	MED37	\$11.75
Vinyl Gloves – pair (S,M,L)	15	\$3.00	MED38	\$3.00
Safety Pins	20	\$2.00	MED12	\$2.00
First Aid Items	Quantity	Price/unit	Item Code	Total
Sterile Saline 0.9%, 4oz	1	\$3.75	FAKS131	\$3.75
Triangular Bandage	5	\$1.10	MED11	\$5.50
Foam, 3" x 5"	3	\$1.65	MED21	\$4.95
Polysporin,30g tube	1	\$19.35	MED13	\$19.35
Gauze (sterile) 5 – 2" x 2"	5	\$0.10	MED14	\$1.00
Gauze (sterile) 5 - 3" x 3"	5	\$0.20	MED 14	\$1.00
Gauze (sterile) 5 - 4" x 4"	5	\$0.25	MED 14	\$1.25
Gauze (non-sterile) 10-2"x2"	10	\$0.05	MED51	\$0.50
Gauze (non-sterile) 5-3" x 3"	10	\$0.10	MED24	\$1.00
Gauze (non-sterile) 5-4" x 4"	10	\$0.10	MED24	\$1.00
Telfa Pads (3" x 4")	10	\$0.35	MED59	\$3.50
Ice Baggies (8"x10")	20	\$0.30	MED18	\$6.00
Moleskin, 3 X 3 square	2	\$1.00	MED25	\$2.00
Felt, 3" x 4"	2	\$4.25	MED22	\$8.50
Isagel, 115ml	1	\$3.00	FAKS126	\$3.00
Alcohol Prep	10	\$0.05	MED15	\$0.50
Second Skin – circles	3	\$1.00	MED16	\$3.00
Cotton Tipped Swabs	10	\$0.05	MED23	\$0.50
Analgesic Ointment/Balm, 3oz	1	\$3.85	MED20	\$3.85
Nasal Plugs	10	\$0.25	MED19	\$0.25
Sport First Aid Booklet	1	\$1.80	FAKS150	\$1.80
Instant Cold Packs	2	\$1.85	MED58	\$1.85
Band-aids (assorted)	Quantity	Price/unit	Item Code	Total
Knuckle	10	\$0.10	MED10	\$1.00
Regular	10	\$0.10	MED10	\$1.00
Butterfly Wound Closure	5	\$0.10	MED10	\$1.00
Regular Eye	1	\$0.85	MED49	\$0.85
Junior Eye	1	\$0.85	MED49	\$0.85
Digit (small)	5	\$0.10	MED10	\$0.50
Digit (large)	5	\$0.10	MED10	\$0.50
Patch (small)	5	\$0.10	MED10	\$0.50
Patch (large)	5	\$0.10	MED10	\$0.50
Steri-strip wound closure,3 strips, ¼" x 3"	3	\$1.65	MED50	\$ 4.95

Taping/Wrapping Supplies	Quantity	Price/unit	Item Code	Total
Trainers Tape, 1.5"	12	\$5.00	MED01	\$60.00
Razor (disposable)	1	\$2.40	MED09	\$2.40
Tape Adherent, 4 oz.	1	\$10.35	FAKS16	\$10.35
Elastic Adhesive Tape, 2"	2	\$5.00	MED03	\$10.00
Elastic Adhesive Tape, 3"	2	\$7.75	MED04	\$15.50
Elastic Adhesive Tape, 4"	2	\$17.50	MED05	\$35.00
Mid-Grade Tensors - 3"	2	\$2.10	MED60	\$4.20
Mid-Grade Tensors - 4"	2	\$2.75	MED61	\$5.50
Mid-Grade Tensors - 6"	2	\$3.75	MED62	\$7.50
Mid-Grade Groin Tensors - 6"x10 yd	2	\$6.25	FAKS26	\$12.50
Skin Lube, 3 oz.	1	\$3.90	MED06	\$3.90
Underwrap,	2	\$2.25	MED07	\$4.50
Heel & Lace Pads	40	\$0.05	MED08	\$2.00
Lightplast Pro Rip Tape, 2"	2	\$4.75	FAKS05	\$9.50
Lightplast Pro Rip Tape, 3"	2	\$7.35	FAKS06	\$14.70
Splinting	Quantity	Price/unit	Item Code	Total
Sam Splint	1	\$17.50	FAKS104	\$17.50
Speed Splint (in B-Splint bag)	1	\$15.25	FAKS94	\$15.25
Finger Splint (1/2" x 18")	1	\$4.90	FAKS77	\$4.90
Additional Therapist Bag	Quantity	Price/unit	Item Code	Total
Stethoscope <i>(not billable)</i>	1		N/A	\$0.00
Blood Pressure Cuff <i>(not billable)</i>	1		N/A	\$0.00
Reflex Hammer <i>(not billable)</i>	1		N/A	\$0.00
Tuning Fork <i>(not billable)</i>	1		N/A	\$0.00
Vinyl Gloves-1Box	1	\$6.50	FAKS146	\$6.50
Kinesio Tape, 2"(blue)	1	\$17.50	FAKS129	\$17.50
Leukotape P	1	\$13.25	FAKS89	\$13.25
Lightplast Pro Rip Tape, 3"	1	\$7.35	FAKS05	\$7.35
Cover roll Stretch-4"	1	\$15.25	FAKS103	\$15.25
Facial Tissue <i>(not billable)</i>			N/A	\$0.00
Disposable Masks <i>(not billable)</i>	20		N/A	\$0.00
Disinfectant Wipes <i>(not billable)</i>	10		N/A	\$0.00
OP Airways <i>(not billable)</i>	1		N/A	\$0.00
Pulse Oximeter <i>(not billable)</i>	1		N/A	\$0.00
Bag-Valve-Mask <i>(not billable)</i>	1			\$0.00

Appendix #12

SPORT FIRST AID RULES REGARDING BLOOD AND OTHER BODY FLUIDS POLICY

A. Introduction

1. The increasing prevalence of blood and body fluid borne pathogens, including Human Immunodeficiency Virus (HIV) and Hepatitis (HBV) increases the risk that those providing health care/sport 1st aid will be exposed to blood from infected athletes, coaches, and officials, especially when blood and body-fluid precautions are not followed for ALL participants in sport.
2. Protective equipment should be designed and maintained to prevent bloody injuries. Equipment designed to prevent open wounds such as mouth pieces to prevent penetration of another participant's skin should be considered for all contact sports.
3. All staff physicians, therapists, student, and volunteers should receive blood borne pathogens training as part of a First Responder training.

B. Equipment and Materials

1. Universal precaution prevention for bloody injuries includes the use of appropriate personal protective equipment (PPE). The purpose of PPE is to prevent blood and body fluids from reaching the health care providers' skin, mucous membranes, or personal clothing. PPE can include, but not limited to, items such as disposable gloves, gowns, shoe covers, face shield, goggles, glasses with side shields, masks, and resuscitation bags.
2. Recommended equipment for 'clean up' include a biohazard bag or bin, adhesive tape or zip ties, disposable absorbent materials such disposable gloves, paper towels, cleaning/sterilization fresh solution of bleach, or other disinfection products. All equipment and surfaces contaminated with blood and other body fluids must be cleaned with a solution of one part household bleach to ten parts water. This solution must be prepared fresh daily.
3. Recommended supplies for 'wound care' includes disposable gloves (must be changed after contact with each patient, athlete, etc), gauze pads, wound closure strips, antiseptics wipes (if soap and water are not readily available).
4. Sharps and syringes must be considered as potentially infectious and handled with extraordinary care in order to prevent accidental injuries. After they are used, syringes, needles and other sharp items must be placed in a puncture-resistant container for disposal in the approved manner for medical waste. Needles and blades should never be purposefully bent, broken, removed or otherwise manipulated by hand.

C. Dealing With a Bloody Wound/Body Fluids

1. If bleeding occurs where other participants may be exposed to blood, the individual's participation must be interrupted until the bleeding has been stopped. The wound must both be cleansed with antiseptic or soap and water and securely covered.
2. All clothing soiled with blood must be replaced prior to the athlete resuming training or competition. Clothing soiled with blood and other body fluids must be washed in hot, soapy water.
3. While cleaning blood or other body fluid spills, the following must be done:
 - wear waterproof gloves
 - wipe up fluids with paper towel or disposable cloths
 - disinfect the area as described in point B.2. on previous page
 - place all soiled waste in a plastic bag for disposal
 - remove gloves and wash hands with soap and water.
4. Other wounds including abrasions and all skin lesions and rashes on athletes, coaches and officials must be reviewed by medical personnel. All wounds, skin lesions and rashes must be confirmed as non-infectious and be securely covered prior to the athlete starting or continuing participation.
5. Care providers with weeping skin lesions, open wounds or dermatitis must routinely wear waterproof gloves when treating people.
6. Note: Treatment for life threatening injury including control of bleeding and mouth-to-mouth resuscitation can proceed without gloves or mouth pieces, although they should be used if available.

Disclaimer

The content and resources is intended for educational purposes only. It is not meant to be a substitute for appropriate medical advice or care. We strongly recommend that you contact a qualified health professional for appropriate diagnosis, treatment, and handling of any injuries that result in blood or body fluid issues or contamination. The SMSCS has made responsible efforts to include accurate and timely information. However the SMSCS, its staff, members, and consultants make no representations, warranties, or guarantees regarding the accuracy of the information contained and specifically disclaim any liability in connection with the content.

Appendix #13

FIRST RESPONDER COURSE FEE SUBSIDY - APPLICATION FORM

Name _____

Address _____ P.Code: _____

Profession _____

Phone: _____(C), _____(W)

Are you applying as an 'Active/Current' __OR a 'New' __ Consultant/Service Provider?

Are you Applying for the 100% _____ 50% _____ OR 25% _____ Subsidy?

Note the Hours and/or Events (shifts) Provided in the Last Three Years,

Year 20__ _____ Year 20__ _____ Year 20__ _____

Name of First Responder Course Attended: _____

Certification _____ OR Recertification _____ Course Fee: _____

Location of Course: _____ Date(s) of Course: _____

Signature: _____

Actual Signature required (electronic or faxed acceptable)

NOTE: RECEIPTS must be submitted to substantiate the subsidy payment..

SUBMIT to:

Sport Medicine and Science Council of Saskatchewan, 2205 Victoria Ave. Regina, SK.,
S4P 0S4 or 510 Cynthia St., Saskatoon, SK, S7L 7K7 or Email to: smcs@sasktel.net or
travis.laycock@sasktel.net

Appendix #14

MEDICAL COVERAGE OF EVENTS PROGRAM-PSO SPECIFIC REQUIREMENTS

(Final Oct 1, 2024)

There are 65 individual Provincial Sport Organizations (PSO's) within the Sask Sport system, many with individual disciplines within their sport, and very often have sport specific rules and guidelines relating to the provision of medical and 1st aid coverage and treatment requirements. The following document was developed to provide the SMSCS staff, as well as the medical personnel (SMSCS Consultants and Service Providers) involved with the SMSCS's Medical Coverage of Events Program, with pre-event and coverage knowledge to ensure there is an increased awareness of all PSO's most common injuries, how the medical personnel access the athlete to provide 1st aid/treatment, what additional supplies may be required, as well as concussion policies and procedures in place. It also outlines the suggested number and type of Medical Personnel that should be in attendance as it relates to associated and inherent risks of sports to ensure adequate coverage is obtained as well as the maintenance of best practices.

A. FACTORS DETERMINING THE NUMBER OF MEDICAL PERSONNEL

The number of medical personnel for any event is determined by a multitude of factors including, but not limited to the following:

- 12) number of participants/teams involved
- 12) skill level and age of the participants/teams
- 12) length of the event – days/hours
- 12) is taping/wrapping part of the services requested?
- 12) number of venues
- 12) number of playing surfaces within each venue
- 12) injury risk level involved
- 12) sport utilization level of medical services
- 12) the amount of notice given to the SMSCS
- 12) consideration of the Host's budget/costs associated with medical coverage
- 12) the number of medical personnel available
- 12) changes, at any time, to the medical personnel schedule due to:
 - a. changes to the event schedule by the Event Host organizers as result of teams/individuals being added and/or deleted for various reasons at any given moment.
 - b. Medical personnel, changing their availability after being scheduled, due to various reasons.

B. SPORT RISK

Although some sports are played year-round, all sports are classified as either winter or summer based on their primary training/competitive season(s).

1. High Risk Sports:

The following sports are relatively high risk where the potential for a serious, and in rare instances, life-threatening injury exists:

Summer: Blind Sports, Cycling, Diving, Equestrian, Football, Lacrosse, Athletics -Pole Vault, Rugby, Soaring, Triathlon, Water Polo, Water-Skiing/Wakeboard

Winter: Alpine and Freestyle Skiing, Broomball, Boxing, Cheerleading, Fencing, Figure Skating, Gymnastics, Hockey, Judo, Karate, Ringette, Snowboarding, Speed Skating, Tae Kwon Do, Weightlifting, Wrestling (NOTE: Wrestling events will require skin checks by a medical doctor).

‘Suggested’ Minimum Medical Personnel Requirements:

One therapist on site per two playing fields, courts, surfaces, etc., with first responder certification and SMSCS taping requirements.

Additional therapists may be required depending on:

- 6) The number of athletes/teams at that location.
 - 6) The degree of utilization of medical personnel.
 - 6) If teams are, or are not, bringing along their own professional medical personnel.
 - 6) The ‘set-up’ of the facility/event. For example, if two playing fields, courts, etc., cannot be viewed at all time by just one therapist, a second therapist may be required to be in attendance.
 - 6) If on-site ‘taping and wrapping’ is required/requested. If there is an expectation that the playing fields/activity must be viewed/watched at all times, then a second therapist should be scheduled for each shift.
 - 6) Additional coverage may also be provided by the local Ski Patrol in the winter for skiing related sports and the Royal Life Saving Society for water sports.
- Note:** There is NO substitute for Ski Patrol members and water rescue experts. Their services should be actively sought.

Physicians – Depending on the sport, some will require a physician to be on-site at all times, while others will only require one to be on-call.

Ambulance - Notification given by the Host to the local ambulance service that the event is occurring, and which door/gate they should access the facility or playing surface.

2. Moderate Risk Sports:

The vast majority of injuries in the following sports are minor to moderate in nature, although the possibility of a serious injury does exist.

Summer: Athletics (track and field), Baseball, Biathlon, Soccer, Softball/Slo-pitch, Team Handball, Tennis, Ultimate (frisbee), Volleyball

Winter: Basketball, Cross-Country Skiing, Racquetball, Squash,

‘Suggested’ Minimum Medical Personnel Requirements:

One therapist on site with first responder certification, and SMSCS Taping requirements (if taping is requested by the Host).

The scheduling of additional therapists who have on-site experience and good taping skills will be determined by the number of athletes, the location and set-up of the event, and the degree of medical/1st aid utilization of the sport.

Notification given by the Host to the local ambulance service that the event is occurring, and which door/gate they should access the facility or playing surface.

3. Low Risk Sports:

The following low risk sports will primarily require medical personnel to be located in a medical area or room to provide 1st aid and taping/wrapping services, and therefore it will not be a requirement for medical personnel to be viewing the competition at all times.

Summer: Archery, Canoe/Kayak, Golf, Horseshoe, Lawn Bowling, Pickleball, Rowing, Sailing, shooting sports (Skeet, Rifle, Trap, Target), Synchronized Swimming, Table Tennis

Winter: Badminton, Baton Twirling, Bowling (5 and 10 pin), Curling, Darts, Swimming

‘Suggested’ Minimum Medical Personnel Requirements:

One therapist on site with first responder certification, and SMSCS Taping requirements (if taping is requested by the Host).

Notification given by the Host to the local ambulance service that the event is occurring, and which door/gate they should access the facility or playing surface.

4. Physically Challenged Sports: (Wheelchair Sports, Blind Sports, Deaf Sports):

Participants with disabilities are subject to the same Risk and Utilization categories as previously described. Special considerations may apply depending on the nature of the participants' disabilities. To ensure the best possible situations are created for these athletes, the medical facilities should be toured to ensure accessibility and that adequate shelter is provided at outdoor venues. It is advisable to recruit medical volunteers with knowledge and experience working with individuals with disabilities.

5. Special Olympics:

When working with Special Olympians the main thing to consider is if the athlete is on any medications. Some athletes are on medication to control seizures. Thus medical personnel should always review the athlete's medical history.

Special Olympics participants are susceptible to similar sport-specific injury patterns. Of note, however, is atlantoaxial instability of the spinal cord, which is common in individuals with Down's Syndrome. A medical examination for this condition should precede participation by these individuals in any activity which could forcibly flex the cervical region of the spinal cord. Athletes that test positive may not participate in the following activities; gymnastics, alpine skiing, diving, soccer, pentathlon, butterfly stroke in aquatics, diving starts in swimming, high jump, floor hockey and equestrian sports.

Saskatchewan Special Olympics has a comprehensive policy in force for athletes with Down's Syndrome. Please contact their office for further details; 353 Broad St., Regina Sask, S4R 1X2, Toll Free Phone Number 1-888-307-6226, Fax 780-9441, E-Mail: sos@specialolympicssask.ca

C. ADVERSE WEATHER RQUIRMENTS:

The potential for extremes of weather or drastic changes in weather may make for special concerns in open water events such as rowing, canoe/kayaking and sailing. Additional experienced personnel should be available in the case of dangerous weather conditions.

Extremely hot or cold weather conditions may increase the number of medical personnel required at venues for certain sports. All participants in events taking place in hot summer or cold winter conditions

are vulnerable to heat or cold related injuries. Medical volunteers experienced in dealing with environmental injuries should be scheduled at venues most exposed to the elements.

D. SPORT SPECIFIC MEDICAL NEEDS, REQUIREMENTS, and PROTOCOLS

In addition to predicting the utilization of medical services, it is beneficial to have some general knowledge of the sport as it relates to typical injuries, sport specific rules regarding the provision of 1st aid and medical treatment.

Prior to the event, the SMSCS staff should review the technical package (if available) and forward all pertinent information to the medical personnel covering the event.

It should be noted that local, provincial, national, and international rules in these matters tend to change over time, so updates should be obtained from the proper authorities. As a result, the following information should be used only as a guide. The following information relating to the 65 Provincial Sport organizations within the Sask Sport system was attained from:

- 4) Reviewing previous events covered by the SMSCS.
- 4) Input from medical personnel who previously covered events for the SMSCS.
- 4) Feedback obtained from the five Medicine Provider Groups associated with the SMSCS.
- 4) Input from PSO's.

Sports are listed in alphabetical order, followed by the name of the provincial sport organization (PSO) under the Sask Sport system.

Archery - Saskatchewan Archery Association Inc.

- 6) **Typical Injuries Include:** Tennis elbow (lateral epicondylitis) biceps strain, finger strains & sprains.
- 6) **Mechanism of Injury:** Injuries are usually chronic due to overuse.
- 6) **Scope of Utilization:** Low utilization of medical services.
- 6) **Protocols Governing Medical intervention:** In the event of a medical issue, verified by medical personnel, extra time may be given for the medical personnel to determine the problem and decide whether or not the athlete is fit to continue competing unassisted.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** Archery Canada Concussion Policy

Badminton - Saskatchewan Badminton Association inc.

- 6) **Typical Injuries Include:** Foot and ankle sprains, low back pain, calf/achilles pain, tendinitis of shoulder, patello-femoral complex, tendonitis of elbow, eye injuries.
- 6) **Mechanism of Injury:** planting and pushing off, contact with partner, contact with partners racquet.
- 6) **Scope of Utilization:** Low utilization of medical services. Some taping and massage may be required.

- 6) **Protocols Governing Medical intervention:** If a participant is injured during play, the Umpire will signal the referee who will request the medical personnel enter the court to assess the injured athlete.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol-** Badminton Canada Concussion Policy

Baseball - Baseball Sask

- 6) **Typical Injuries Include:** shoulder and elbow strains, head injuries, scrapes, lacerations/contusions, fractures.
- 6) **Mechanism of Injury:** Throwing, sliding, running, contact with other players, contact with the ball.
- 6) **Scope of Utilization** Baseball requires moderate utilization of experienced therapists. There are a large number of chronic as well as some acute injuries (which may increase with poor field conditions).
- 6) **Protocols Governing Medical intervention:** Medical personnel must wait until the umpire interrupts and/or stops the play in order for medical personnel to attend to injuries on the field. Pitchers cannot wear white bandages or tape on their arms, wrists or fingers (on the throwing hand). Bandages must be skin color, or a long sleeve shirt must cover the bandages. Pitchers also are forbidden to wear batting gloves underneath their catching gloves.
- 6) **Additional/Specialized Equipment and Supplies Needed** (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits): No additional supplies needed.
- 6) **Concussion Policy/Protocol:** Baseball Canada Concussion Policy

Basketball - Basketball Saskatchewan Inc. (BSI)

- 6) **Typical Injuries Include:** ankle, knee and finger sprains, contusions, concussion
- 6) **Mechanism of Injury:** Direct impact with another player, the ball, or the floor.
- 6) **Scope of Utilization:** Requires moderate utilization of experienced therapists. There are a large number of pre-existing and/or chronic injuries, as well as some acute injuries that occur during actual games. Skill level can determine injury rates.
- 6) **Protocols Governing Medical intervention:** Medical and paramedical personnel cannot go onto the court until play has been stopped by the official's whistle. No time limit, but player must leave the floor/playing surface.

The use of tape and wraps – depends on application of rules by officials. Rule book states it must be the same for all players and match their accessories. Can use white athletic tape, or brown 'leuko tape'. Special attention should be paid when using is prowrap and Ktape of different colors. Knee braces need to be covered.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):**
Nose plugs and steri-strips for blood management

- 6) **Concussion Policy/Protocol:** Basketball Canada Concussion Policy

Baton Twirling - Saskatchewan Baton Twirling Association Inc.

- 6) **Typical Injuries Include:** Bruising and lacerations, finger fractures, ankle sprains.
- 6) **Mechanism of Injury:** Impact injuries from metal baton, Joint sprains due to improper skill technique.
- 6) **Scope of Utilization:** Low utilization of medical services.
- 6) **Protocols Governing Medical intervention:** The first aid table is located in the gym, next to the competition floor so that the first aid personnel has access to the competition floor. Medical personnel are allowed on the competition floor if needed. The signal to attend to the athlete can come from the athlete, judge, or competition.

If an athlete is injured during a routine, the music will stop, and the individual will be tended to immediately. There is no maximum time limit to provide an assessment or treatment. Any tape or wraps require a Physicians note in order to have them on while competing.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol – Canadian Baton Twirling Federation Concussion Policy**

Bowling (Five and Ten Pin) - Bowling Federation of Saskatchewan

- 6) **Typical Injuries Include:** Bowler's elbow (medial epicondylitis), Bowler's thumb (ulnar digital nerve neuropathy due to compression of bowling ball hole), carpal tunnel, trigger finger, shoulder and back strains, crush injuries of digits.
- 6) **Mechanism of Injury:** Most injuries are due to overuse. Acute injuries may include crushing fingers between balls.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:** A player who leaves a game due to injury or emergency, cannot return to the same game (Canadian 10 Pin Federation)
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol – Canadian 5 Pin Bowlers' Association/Canadian 10 Pin Federation Concussion Policies**

Boxing - Boxing Saskatchewan Inc.

- 6) **Typical Injuries Include:** wrist and finger sprains, contusions and lacerations of the face and hands, fractures (cheek, nose, finger), concussion.
- 6) **Mechanism of injury:** Punches to various body parts.

- 6) **Scope of Utilization** The potential for traumatic injury in boxing is high but relatively infrequent. Medicals are performed before the event. Physician is required to be present.
- 6) **Protocols Governing Medical intervention:** Team staff are usually responsible for taping.
 - a) **Weigh-in**
In the morning of the competition day, and in conjunction with the official weigh-in, all competitors must undergo a medical inspection. Specifically, conduct a visual examination for contagious skin conditions (eg. ringworm). In addition, all referees must also undergo a physical examination prior to the beginning of a bout. These medical inspections are the responsibility of the attending physician. The equipment required includes: Ophthalmoscope/Otoscope, Stethoscope, BP Cuff. The athletes generally have a medical book/history which must be initialed by the medical officer prior to the fight.
 - b) **During the Fight:**
A physician is required to be in attendance at all times during competition. If the attending physician wishes to examine a boxer, he or she may instruct the referee during the 1-minute inter-round rest interval to stop the bout. After the bell has sounded starting the next round, the referee will bring the boxer to the physician for examination. However, during a round, the referee can call for time and have the boxer examined by the physician. The referee has the ultimate authority to stop a bout, however, the referee must follow the advice of the ring-side physician. The boxer must not appear with bandages, dressings, or sutures on the face, neck or hands during a bout.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Ensure a Stocked Physician Bag with various medications.
- 6) **Concussion Policy/Protocol** – Boxing Canada Concussion Management Protocol

Broomball - Saskatchewan Broomball Association

- 6) **Typical Injuries Include:** Contusions, muscle strain, knee ligament sprains, shoulder sprains, head and face contusions and lacerations, concussion.
- 6) **Mechanism of Injury:** Many injuries are a result of contact with other players and brooms, the slippery ice surface, and contact with the boards/net.
- 6) **Scope of Utilization:** The potential for traumatic injury is high but uncommon. Extensive use is made of all medical personnel. Taping and wrapping are very common requests. Massage therapy is also very often requested.
- 6) **Protocols Governing Medical intervention:** Must be signaled by one of the two on-ice officials to come onto the ice surface.

Signal = arms crossed over the officials' head. In-charge medical personnel and coaching staff must wait until the play has stopped prior to going on the ice. The player is eligible to return to competition after the injury has been treated and cleared by medical personnel. Medical personnel must wear broomball shoes in order to be allowed on the ice.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):**
No additional supplies needed.
- 6) **Concussion Policy/Protocol** – the coach, player, team training staff and referees can remove a player from play if they suspect a concussion. If it is a tournament, the player is not

eligible to play for the remainder of the event unless medical clearance has been obtained. Medical clearance (form) must be obtained and signed from a medical professional. Saskatchewan Broomball Association Concussion Policy.

Canoe and Kayak - Canoe/Kayak Saskatchewan Inc.

- 6) **Typical Injuries Include:** extensor tenosynovitis, epicondylitis of the elbow, carpal tunnel syndrome, shoulder strains, bicipital tendinitis, low back pain.
- 6) **Mechanism of Injury:** Chronic injuries due to overuse or improper technique. Kayakers are at risk for blunt head trauma and hypothermia due to roll-overs.
- 6) **Scope of Utilization** Athletes who kayak and canoe sustain similar injuries which are usually chronic and overuse in nature. Massage may be requested
- 6) **Protocols Governing Medical intervention:** "Life Saving" personnel must be present to follow the races.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Waterproof tape
- 6) **Concussion Policy/Protocol:** Canoe Kayak Canada Concussion Policy

Cheerleading - Saskatchewan Cheerleading Association Inc.

- 6) **Typical Injuries Include:** ankle sprains, wrist sprains, knee ligament sprains, wrist and ankle fractures, concussion, muscle strains.
- 6) **Mechanism of Injury:** Most significant injuries typically occur from athlete falling from a height during a toss or stunt. Athletes perform difficult acrobatic skills and tumbling that may lead to muscle strains and joint sprains. Injuries may also occur due to collisions with teammates.
- 6) **Scope of Utilization:** Utilization is typically low, although there is potential for significant injury. Taping may be requested.
- 6) **Protocols Governing Medical intervention:**
Once an injury is recognized, the performance music will stop. Only the medical personnel may attend to the athlete. Within 30 seconds, the coaches will be responsible to hold a privacy screen on the performance surface, while the athlete is being attended to.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** Cheer Canada Concussion Protocol

Curling - CURLSASK

- 6) **Typical Injuries Include:** Lower back strain, groin strain, shoulder strain.
- 6) **Mechanism of Injury –** Falls, slipping on ice, over-use injuries.

- 6) **Scope of Utilization:** Low utilization of medical services. Massage may be requested.
- 6) **Protocols Governing Medical intervention:** When competitors are on the playing surface, the Head Official will check on the athlete, then the coach. The player or coach will request that the Medical Personnel enter and assess the injured athlete if needed, unless a serious injury is in need of prompt attention.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol – CURLSASK Concussion Policy**

Cycling - Saskatchewan Cycling Association Inc.

- 6) **Typical Injuries Include:** abrasions/lacerations, calf strains, low back pain, cervical pain, quadriceps strain, ankle sprain.
- 6) **Mechanism of Injury:** Collisions, crashes, metabolic trauma such as dehydration and heat stress is increased during longer competitions.
- 6) **Scope of Utilization:** Low utilization of medical services, but there is potential for significant injury. Massage is highly utilized by cyclists.
- 6) **Protocols Governing Medical intervention:** In road races, ambulance or medical personnel are to follow the race and are directed to crashes by the race commissioner. If a track race is stopped for a crash, ten minutes is allowed for tending to a rider.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Additional blood management supplies (falls)
- 6) **Concussion Policy/Protocol:** Saskatchewan Cycling Association Concussion Guidelines

Darts - Saskatchewan Darts Association Inc.

- 6) **Typical Injuries Include:** Overuse injuries to the elbow and wrist.
- 6) **Mechanism of Injury:** Puncture wounds or lacerations due to contact with dart are possible, although extremely rare.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:** No specific protocols identified.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** No Specific Concussion Policy Identified

Disk/Frisbee Sport - Saskatchewan Ultimate Players Association Inc.

- 6) **Typical Injuries Include:** Muscle strains, knee ligament sprains, ankle sprains, shoulder sprains and dislocations.

- 6) **Mechanism of Injury:** Most injuries are due to overuse. It is a limited contact sport that combines elements of soccer, football, and basketball. Players must run, cut, guard, jump, throw, catch and sometimes dive with outstretched arms for a flying disc.
- 6) **Scope of Utilization:** Low utilization of medical services. Medical 1st aid has been provided during provincial championships.
- 6) **Protocols Governing Medical intervention:** No protocols identified.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Sask Ultimate Players Association Concussion Policy

Diving - Dive Saskatchewan inc.

- 6) **Typical Injuries Include:** cervical sprain, low back strain/sprain, quadriceps strain, wrist sprain.
- 6) **Mechanism of Injury:** Impact with water, rarely impact with diving board may occur.
- 6) **Scope of Utilization:** Competitive diving has a relatively low injury rate. However, although a rare occurrence, there is the potential for severe trauma. Because of the impact nature (with the water) of the sport, divers require the services of experienced therapists. Fully trained paramedical personnel should be present at all times during competition and practices (i.e. lifesaving, ambulance). Paramedical personnel should be trained to use a spine board.
- 6) **Protocols Governing Medical intervention:** Emergency drills should be practiced prior to competition. Medical intervention during competition is allowed. The lifeguard crew from the pool will be the first responders when an athlete is injured. Other medical personnel must wait until the injured person is on the pool deck before beginning an assessment. The athlete is eligible to return to competition but must do so by his/her next turn to dive.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Waterproof gauze and Tapes.
- 6) **Concussion Policy/Protocol:** Dive Saskatchewan Concussion Policy

Equestrian - Saskatchewan Horse Federation Inc.

- 6) **Typical Injuries:** Include: Low back and knee sprains.
- 6) **Mechanism of Injury:** Injuries are typically chronic in nature, although the potential exists for serious injury if a rider is thrown off their horse.
- 6) **Scope of Utilization:** Low utilization of medical services, but serious injury could occur. It may be beneficial to have a veterinarian "on call" as well.
- 6) **Protocols Governing Medical intervention:** It is mandatory that all competitions where persons are required to jump over obstacles have Emergency Medical Service on site. There should be a minimum of Advanced First Aid and Basic cardiac life support (BCLS) provided. Ambulance at the site is not required. A crises plan should be prepared.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy –** Saskatchewan Horse Federation Concussion Policy

Fencing - Saskatchewan Fencing Association

- 6) **Typical Injuries Include:** Overuse injuries such as strains and sprains of the ankles, wrists, knees and hip. Minor cuts and bruises are also common. Punctures, usually the result of broken equipment, may occur, but these injuries are rare.
- 6) **Mechanism of Injury:** Proper use and maintenance of equipment and the use of proper technique can prevent injuries.
- 6) **Scope of Utilization:** Low utilization of medical services The injury rate in fencing is low. Proper use and maintenance of equipment and the use of proper technique can prevent such occurrences.
- 6) **Protocols Governing Medical intervention:** There are specified periods of rest for injury during combat (20 minutes) during which the fencer may leave the piste (fencing strip) to be treated and then return to combat. If the fencer is unable to continue within that period of time due to the severity of the injury, that person is retired from competition.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** Canadian Fencing Federation Concussion Policy

Figure Skating - Skate Canada-Saskatchewan Inc

- 6) **Typical Injuries Include:** Sprains to knee and ankle joint complex, tendinitis, chondromalacia, lacerations, contusions, fractures, concussions.
- 6) **Mechanism of Injury:** Overuse accounts for approximately 50% of figure skating injuries. Collisions and falls are also a major mechanism of injury, particularly during practice sessions where multiple skaters are on the ice.
- 6) **Scope of Utilization:** Utilization of services is moderate. Stretching and massage may be requested pre and post event.
- 6) **Protocols Governing Medical intervention:** Medical or paramedical personnel must wait for the referee's signal for assistance. Skaters, on their own, have 40 seconds to resume skating after a fall/injury. At any time, the referee feels there is a health or safety concern, they may blow a whistle to signal the skater to stop skating, and give them three minutes to resolve the situation.

At any time the referee feels there is a possible head injury or concern of a concussion or if advised by Medical, they should blow the whistle or stop the music to signal to the skaters to stop skating. The referee will allow a break for up to three minutes for the skaters to be assessed.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Large pressure gauze pads, 'ice-traction' cleat attachments for shoes of therapists (to avoid slipping on the ice).
- 6) **Concussion Policy:** Skate Canada Concussion Policy

Football - Football Saskatchewan

- 6) **Typical Injuries Include:** Contusions, lacerations, ankle/knee sprains and strains, fractures, neurotrauma (brachial plexus, concussion, cervical spine), shoulder dislocation/separation.
- 6) **Mechanism of Injury:** Contact with other player or the turf. With recently updated practice guidelines (less contact) participants often incur more injuries during a game than during practice (60% versus 40%).
- 6) **Scope of Utilization:** Football is a high user of medical personnel including trainers, therapists, and physicians.
- 6) **Protocols Governing Medical intervention:** Medical providers may attend to injured player once the whistle is blown to stop the play, and have been signaled onto the field by an on-field official. If the play is stopped for an injury, that player is required to leave the game for at least 3 plays.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Ensure adequate immobilization supplies.
- 6) **Concussion Policy/Protocol:** Football Saskatchewan Concussion Policy

Gliding - Soaring Association of Saskatchewan

- 6) **Typical Injuries Include:** Injuries are very rare, but can include spinal cord injuries, fractures and fatalities.
- 6) **Mechanism of Injury:** Most accidents occur during landing and take-off. Fatalities typically occur due to a stall/spin and midair collisions.
- 6) **Scope of Utilization:** Low utilization of medical services.
- 6) **Protocols Governing Medical intervention:** No protocol identified.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** No Specific Concussion Policy Identified

Golf - Golf Saskatchewan

- 6) **Typical Injuries Include:** Overuse injuries to Neck, Shoulder, Elbow, Lower back/spine, knees and hips.
- 6) **Mechanism of Injury:** Injuries are typically due to overuse or poor technique, over training, too rapid increase in load, lack of preparation/warm-up. Acute injuries may also occur due to being struck by a ball or club.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:** Players may use tape to help with an injury, but it must not be excessive and must not help the player more than is necessary for the medical reason (for example, it must not immobilize a joint to help the player swing the club)
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Sunscreen, water.
- 6) **Concussion Policy/Protocol:** Golf Canada Concussion Policy

Gymnastics - Gymnastics Saskatchewan Inc.

- 6) **Typical Injuries Include:** knee and ankle sprains, patellofemoral syndrome, wrist strains, low back and neck sprains/strains, dislocated elbows, shoulder injuries.
- 6) **Mechanism of Injury:** Acute injuries occur mainly during the landing phase of vaults and dismounts.
- 6) **Scope of Utilization** Gymnastics has a high rate of injury, which increases with the level of competition.
- 6) **Protocols Governing Medical intervention:** Medical personnel are allowed to enter area of competition once an injury has occurred.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Ensure proper color of tape/wraps are present.
- 6) **Concussion Policy/Protocol:** Gymnastics Saskatchewan Concussion Policy

Hockey - Hockey Saskatchewan

- 6) **Typical Injuries Include:** contusions, lacerations, fractures, dislocations, muscle strain (groin), knee ligament sprains, concussions.
- 6) **Mechanism of Injury:** Many injuries are a result of contact with other players, sticks, the ice surface, and the boards. The potential for traumatic injury is high but uncommon.
- 6) **Scope of Utilization.** Extensive use is made of all medical personnel.
- 6) **Protocols Governing Medical intervention:** In-charge medical personnel must wait until the play is stopped prior to going on the ice. The player is eligible to return to competition after the injury has been treated.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Laceration bandages/supplies, ice/cold packs. potentially 'ice-traction' cleat attachments for shoes of therapists (to avoid slipping on the ice)
- 6) **Concussion Policy/Protocol:** Hockey Saskatchewan Concussion Policy

Horseshoe - Horseshoe Saskatchewan Inc.

- 5) **Typical Injuries Include:** Overuse injuries such as shoulder and elbow sprains/strains. Although rare, impact injuries are possible.
- 5) **Mechanism of Injury:** Repetitive Strain, Impact from horseshoe
- 5) **Scope of Utilization:** Low utilization of medical services
- 5) **Protocols Governing Medical intervention:** No protocol identified
- 5) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.

Judo - Judo Saskatchewan

- 6) **Typical Injuries Include:** Knee ligament sprains, shoulder ligament sprains and rotator cuff injuries, finger and toe sprains, concussion, abrasions and contusions.
- 6) **Mechanism of Injury:** Most injuries are due to quick changes of direction, repeated falling and constant physical contact.
- 6) **Scope of Utilization:** Low utilization in comparison to other similar contact sports.
- 6) **Protocols Governing Medical intervention:** There are strict rules concerning medical assistance. When a judoka is allegedly injured during a match, the referee will stop the match. If she/he judges it necessary, or if the contestant requests it, the referee will stop the match. If she/he judges it necessary, or if the contestant requests it, the referee will call for assistance on the mat. Medical personnel can only go on the mat (taking their shoes off) when called by the referee. Any treatment or assistance must be performed on the mat as quickly as possible. This treatment may only be performed after consultation with the referee. Illegal treatment without the referee's expressed opinion may result in disqualification. Leaving the mat area means disqualification by withdrawal for the fighter. Matches run 4 to 5 minutes and 7 minutes for the finals (stopped time). Contestants are allowed a total of two time-outs per match for medical reasons. If a contestant is purposely injured by his opponent, the medical time out will not be counted. If he/she is unable to continue in the match after being medically cleared, she/he forfeits the match.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Blood care-extra nasal plugs.
- 6) **Concussion Policy/Protocol:** Judo Canada Concussion Policy

Karate - Saskatchewan Karate Association

- 6) **Typical Injuries Include:** Nose sprains or fractures, knee, ankle, shoulder and elbow sprains and contusions. Finger sprains or fractures.
- 6) **Mechanism of Injury:** Struck by an opponent when sparring.
- 6) **Scope of Utilization:** Moderate utilization of medical practitioners covering event
- 6) **Protocols Governing Medical intervention:** If an athlete is injured, medical personnel must be waved into the competition area by the official. Five minutes is allowed for injury assessment. The referee, in consultation with the physician (if in attendance), will decide if the match is to continue. There are no rules regarding taping.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** extra blood control and clean up supplies, extra nasal plugs
- 6) **Concussion Protocol –** Saskatchewan Karate Association Concussion Policy

Lacrosse (Field & Box) - Saskatchewan Lacrosse Association Inc.

- 6) **Typical Injuries Include:** Muscle strains, sprains, and contusions, lacerations, fractures, dislocations, shin splints, foot blisters.
- 6) **Mechanism of Injury:** Contact with other players, contact with the ground, inadvertent stick or ball contact.
- 6) **Scope of Utilization:** Moderate risk sport - Many injuries are a result of contact with other players and sticks. The potential for traumatic injury is high but uncommon. Extensive use is made of all medical personnel.
- 6) **Protocols Governing Medical intervention:** Medical personnel must wait to be waved on to the playing surface by the referee. Participants cannot wear exposed metal braces.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** Lacrosse Canada Concussion Policy

Lawn Bowling - Bowls Saskatchewan Inc.

- 6) **Typical Injuries Include:** Knee and ankle sprains, cervical pain, low back pain.
- 6) **Mechanism of Injury:** Although the players are generally older than other participants, the injury incidence is very low. Medical history information may identify participants with cardiac or other notable conditions, which may necessitate making special arrangements such as having oxygen available on-site. Falls account for around 60% of associated injuries, overexertion account for about 30%. Strain on hips/ lower back, and wrists account for about 8%. 2% is being struck by bowls.
- 6) **Scope of Utilization:** Lawn bowlers require very little in the way of medical services at their events.
- 6) **Protocols Governing Medical intervention:** Individual Clubs and Provincial Championships have a unique set of rules regarding medical intervention.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Access to AED machines
- 6) **Concussion Policy/Protocol –** Bowls Canada Concussion Policy

Martial Arts - Saskatchewan Martial Arts Association Corp.

- 6) **Typical Injuries Include:** Contusion, abrasions, strains and sprains, fractures, dislocations, concussions.
- 6) **Mechanism of Injury:** Combative body contact. Most injuries in martial arts are mild to moderate in severity and are confined to the extremities.
- 6) **Scope of Utilization:** The rate of injury in martial arts is lower than that found for other contact/combative type sports such as wrestling and football.
- 6) **Protocols Governing Medical intervention:** Specific to the martial arts discipline.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Extra blood control and clean up supplies.
- 6) **Concussion Policy/Protocol:** Policy depends on which discipline is involved.

Pickleball - Pickleball Saskatchewan Inc.

- 6) **Typical Injuries Include:** Ankle sprains, Tennis elbow (lateral epicondylitis), rotator cuff strains, lower back and knee strains, achilles injury, wrist strains.
- 6) **Mechanisms of Injury:** Quick changes in directions and repetitive movements, sudden stops and lateral movements, lunging, overuse of wrist joint.
- 6) **Scope of Utilization:** Low utilization of medical services, may ask for massage and therapy modalities.
- 6) **Protocols Governing Medical intervention:** Medical Timeouts are permitted. Medical staff are called, and a 15-minute timer is started by the referee to allow for an assessment, first aid, or perform other necessary procedures. In the event that one player is bleeding, a referee timeout will be called and will last as long as is necessary for the bleeding to be controlled or stopped and for any blood to be cleaned off of the court and the players' clothing or equipment.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Protocol –** Pickleball Saskatchewan Concussion Policy

Racquetball - Saskatchewan Racquetball Association Inc.

- 6) **Typical Injuries Include:** Eye injuries (Hyphema), Knee and Ankle sprains, rotator cuff strains, wrist and elbow strain (tennis elbow), lumbar spine, blisters (hand, feet), cuts and abrasions

- 6) **Mechanism of Injury:** Quick changes in directions and repetitive movements, sudden stops, lateral movements, lunging, Overuse Injuries - hyperextension, flexion, and rotation. Traumatic injuries caused by impact with racquet, the ball, the player, or the playing surface.
- 6) **Scope of Utilization:** Low utilization of medical services, taping and massage may be requested.
- 6) **Protocols Governing Medical intervention:** No regular time-out is charged to a player who is injured during play. An injured player is allowed a cumulative total of up to 15 minutes during a match. If the injured player is not able to resume play after this time period, the match is awarded to the opponent(s). On any additional injury to the same player, the tournament director or the referee, after considering any available medical opinion, will determine whether the injured player will be allowed to continue. Should any external bleeding occur, the referee must halt play as soon as the rally is over, charge an injury time-out to the subject, and not allow the match to resume until the bleeding has stopped (up to 15 minutes). Muscle cramps, fatigue, and other ailments not caused by direct contact with the ball, racquet, wall, floor, or opponent will not be considered for an injury timeout.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** Racquetball Canada Concussion Policy

Ringette - Ringette Association of Saskatchewan Inc.

- 6) **Typical Injuries Include:** Shoulder and knee sprains/strains, concussion, contusions, low back/hip strains, arms/wrist sprains or fractures.
 - 6) **Mechanism of Injury:** Although a non-contact sport, about two thirds of injuries are caused by body contact. Of these, about a third of injuries involved intentional contact with another player. About a third of injuries involve no contact with a player (ice, boards, stick), and the last third involved incidental contact with a player.
 - 6) **Scope of Utilization:** Extensive use is made of all medical personnel.
 - 6) **Protocols Governing Medical intervention:** If a participant is injured during play, the referee will stop the play and if required request medical personnel to step onto the ice to assess the injured athlete. Qualified Medical personnel are allowed on the ice during a stoppage of play. They are waived onto the ice by an on-ice official. There is no time limit for an on-ice assessment/treatment, however, if an athlete is able to be removed from the ice safely, the on-ice officials will encourage that. There are no rules regarding tapes/wraps.
- Ringette Sask required all registered team to have at least one member of the bench staff to have proof of First Aid and CPR Certification OR active employment in a recognized healthcare profession.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
 - 6) **Concussion Protocol – Ringette Canada Concussion Protocol**

Rowing - Saskatchewan Rowing Association inc.

- 6) **Typical Injuries Include:** Upper and Lower back strains, quadriceps strains, paddler's wrist, blisters, piles, rib stress fractures.
- 6) **Mechanism of Injury:** Injuries in rowing are usually caused by overtraining, over sculling, and poor technique.
- 6) **Scope of Utilization:** Low utilization of medical services. Interventions always done on shore when athlete is out of the boat.
- 6) **Protocols Governing Medical intervention:** First Aid/Water Safety personnel are the first respondents to an incident on the field of play. Given the field of play is water, the injured participant is removed from the field of play by the first respondents to a shore location where further medical attention may be had. On the playing field situations would include: collisions, capsizing of vessels, collapse of athletes due to overexertion or heat stroke.

The level of injury would be any injury or perceived injury that the first respondents deem serious enough to escort or carry the injured party from the field of play. The protocol for the removal of an athlete from competition is left up to the chief medical officer.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** waterproof tape/wraps/etc.
- 6) **Concussion Policy/Protocol:** Rowing Canada Concussion Policy

Rugby - Saskatchewan Rugby

- 6) **Typical Injuries Include:** Contusions, concussion, sprains and strains, lacerations, oral/dental injury, fractures, subluxation/dislocation, cauliflower ear.
- 6) **Mechanism of Injury:** Collisions and body contact between players are the most common mechanisms of injury. Most injuries are sustained to the leg, arm, and head/neck region.
- 6) **Scope of Utilization:** Extensive use of all medical professions. Taping and wrapping skills are essential.
- 6) **Protocols Governing Medical intervention:** The use of metal braces (even if covered) and eyeglasses is prohibited.

Play may continue during minor injuries with a medically trained person being permitted to come on the field to attend to the injured player. When a player is injured, the referee should not allow more than a one-minute delay unless a longer period is necessary to remove the player or give essential treatment. A player who is off to have a bleeding wound attended to may be temporarily replaced. There is no time limit for his absence from the match. A player who has suffered a definite concussion should not participate in any match or training session for a period of at least 3 weeks from the time of injury, and then only subject to being cleared by a proper neurological examination.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** extra nasal plugs, and anything to do with controlling bleeding. Also, extra wraps and tapes.
- 6) **Concussion Policy/Protocol:** Saskatchewan Rugby Concussion Policy

Sailing - Saskatchewan Sailing Clubs Association

- 6) **Typical Injuries Include:** Contusions and lacerations to upper and lower extremities from direct contact with the boat and lines under tension. Environmental risks include solar exposure, hypothermia, immersion injuries, and motion sickness. Overuse injuries are to the back, knees, shoulders, wrists.
- 6) **Mechanism of Injury:** Falls and impacts from various parts of the sailboat. High winds, operator inexperience, and operator inattentions are the most common contributing factors for injury. Direct contact with the boat and lines under tension.
- 6) **Scope of Utilization:** Low utilization of medical services. Majority of times, there are trained medical (Rescue) in boats that will bring the athlete back to shore for 1st-aid type treatment.
- 6) **Protocols Governing Medical intervention:** If done in open water, ensure you or someone with appropriate training assesses the overall situation and examine the athlete quickly and thoroughly. Make sure boat is secured and you and the athlete are safe prior to administering treatment.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Sunscreen
- 6) **Concussion Policy/Protocol:** Saskatchewan Sailing Clubs Association Concussion Policy

Skeet Shooting - Saskatchewan Skeet Shooting Association Corp.

- 6) **Typical Injuries Include:** Hearing loss, shoulder and cheek contusions (recoil injuries), wrist and finger sprains, cuts and abrasions (handling the firearms), sunburn. Chronic injuries include cervical and low back pain, and shoulder strains.
- 6) **Mechanism of Injury:** High incidence of overuse injuries from improper stretching and warmups, and incorrect body mechanics.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:** No specific Regulations
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol:** No Policy Identified

Skiing Sports (Alpine, Biathlon, Cross Country, Freestyle, Disabled, Snowboard) - Saskatchewan Ski Association

a) Cross County:

- 6) **Typical Injuries Include:** Lower extremity bursitis, tendinitis, low back pain, hypothermia, cuts/abrasions, sprains, dislocations, fractures.
- 6) **Mechanism of Injury:** commonly due to overuse at the shoulder, knee, lower leg, foot, heel ankle and achilles tendon.

6) **Scope of Utilization:** Low utilization of medical services

6) **Protocols Governing Medical intervention:** If the athlete is on the track (race course) during a race, the athlete cannot be aided without disqualifying the athlete.

The race protocol dictates that the race cannot be stopped unless approved by the Chief of the Course or Technical Delegate. If the injury or position of the injured athlete warrants immediate medical help then the athlete should be removed from danger so that medical personnel can treat the injury without further injury to the athlete or themselves

Note: The local ski patrol should also be requested to be on duty at all races.

6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.

6) **Concussion Policy/Protocols:** Nordiq Canada Concussion Protocol

a) Alpine:

6) **Typical injuries Include:** Knee sprains (ACL) & strains, fractures, contusions, shoulder joint dislocation rotator cuff injuries, and concussions.

6) **Mechanism of Injury:** Falls and collisions

6) **Scope of Utilization:** Moderate utilization of medical services. Injury incidence is high.

6) **Protocols Governing Medical intervention:** No specific regulations. Skiing can be considered relatively high risk, and a physician and emergency personnel should be scheduled to cover the races. The local ski patrol should also be on duty.

6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.

6) **Concussion Policy/Protocols:** Sask Alpine Concussion Policy

c. Snowboard:

6) **Typical Injuries Include:** Knee sprains (ACL) & strains, fractures, contusions, shoulder joint dislocation rotator cuff injuries and concussions.

6) **Mechanism of Injury:** Falls and collisions

6) **Scope of Utilization:** Moderate utilization of medical services. Injury incidence is high.

6) **Protocols Governing Medical intervention:** No specific regulations. Snowboarding can be considered relatively high risk and a physician and emergency personnel should be scheduled to cover the races. The local ski patrol should also be on duty.

6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.

6) **Concussion Policy/Protocols:** Canada Snowboard Concussion Policy

ci. Skiing for the Disabled:

6) **Typical Injuries Include:** knee joint sprains and strains, fractures, contusions, abrasions. Further risk of injury may depend on the individual athlete and their physical disability.

- 6) **Mechanism of Injury:** The mechanism and type of injuries sustained by disabled skiers are similar to those of non-disabled skiers.
- 6) **Scope of Utilization:** Injury incidence is high
- 6) **Protocols Governing Medical intervention:** No specific regulations. Skiing can be considered relatively high risk and a physician and emergency personnel should be scheduled to cover the races. The local ski patrol should also be on duty.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** No Concussion Policy Identified

f. Biathlon:

- 6) **Typical Injuries Include:** Ankle and knee sprains, muscle strains, shoulder sprains
- 6) **Mechanism of Injury:** Repetitive nature of cross-country skiing, falls and collisions
- 6) **Scope of Utilization:** Low utilization of medical services.
- 6) **Protocols Governing Medical intervention:** No policies identified.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Biathlon Canada Concussion Policy

Soccer - Saskatchewan Soccer Association Inc.

- 6) **Typical Injuries Include:** Knee and ankle joint sprains, quadriceps & hamstring strains, contusions, concussions.
- 6) **Mechanism of injury:** Body contact between opposing players, head-to-head contact, 'heading' the ball, quick change of directions.
- 6) **Scope of Utilization:** Moderate utilization. Field conditions, level of play (Skill level), and age all relate to number of injuries sustained. Taping and wrapping skills required.
- 6) **Protocols Governing Medical intervention:** The referee will not allow medical personnel to enter the field while a game is in progress. If she/he deems it necessary, the referee will wave the medical team member onto the field. It is up to the discretion of the referee, in consultation with the attending medical person, as to whether the injured player will be removed from the field. There is not a time limit to assess/treat.

Tape/Wraps- unless clear over any sock must be the same color of the participating sock color.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocol –** Saskatchewan Soccer Association Concussion Policy

Softball (Slo-pitch, fast-pitch, and modified/orthodox) - Softball Saskatchewan

- 6) **Typical Injuries Include:** ankle joint sprains/fractures, knee joint sprains, hand sprains and fractures, contusions, subluxations, dislocations.
- 6) **Mechanism of Injury:** The most common mechanisms of injury are sliding and base running. Running, diving for the ball, getting hit by a pitch, colliding with another player, and crashing into the home run or out-of play fences are also mechanisms of injury.
- 6) **Scope of utilization:** Low utilization of medical services, depending on field conditions and level of competition.
- 6) **Protocols Governing Medical intervention:** In most cases the coach will ask for 'time' to be called, and will enter the field of play to assess the player. The coach will then determine if additional medical assistance is required. Casts may not be worn in a game.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Softball Saskatchewan Concussion Policy

Speed Skating (Short Track and Long Track) - Saskatchewan Amateur Speed Skating Association

- 6) **Typical injuries Include:** shoulder dislocations, muscle strains, contusions, frost bite/hypothermia, concussion, lacerations to the hands and forearms. Overuse injuries, particularly to the back, groin and knees.
- 6) **Mechanism of Injury:** Cold weather (outside), contact with other skaters, crashing into the boards, reaching too far at finish line.
- 6) **Scope of Utilization:** Low utilization, but serious injuries can occur.
- 6) **Protocols Governing Medical Intervention:** If a participant falls or is injured and would be a hazard to themselves or others either through obstruction or compromised safety, the referee shall halt the race and call the medical personnel on to the ice if necessary. Medical personnel are not allowed on the field of play while a race is in progress. Once the medical team is on the scene, the lead medical personnel has control off the scene. For injuries where the athlete is mobile, medical personnel shall use the provided examination space to assess and or treat the injury.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Ensure large pressure gauze/padding is included.
- 6) **Concussion Policy/Protocols:** Speed Skating Canada Concussion Policy

Skydiving - Sport Parachute Association of Saskatchewan Inc.

- 6) **Typical injuries Include:** Foot and ankle sprains, knee ligament injuries. Rarely, injuries can be significant involving fractures, spinal cord injuries and potential fatalities.
- 6) **Mechanism of Injury:** Improper landing technique, failure of parachute equipment (rare)
- 6) **Scope of Utilization:** Low utilization of medical services

- 6) **Medical Coverage Rules:** No specific regulations identified
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** No Concussion Policy Identified

Squash - Saskatchewan Squash Inc.

- 6) **Typical Injuries Include:** Lower extremity muscle strains, knee and ankle sprains, contusions
- 6) **Mechanism of Injury:** Chronic overuse, and over lunging for the ball, impact with the ball.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:** Medical personnel must be "waved on" the court by the official, player, or coach. Five minutes is allowed for injury assessment/treatment. There are no rules regarding tape/wraps.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy:** Squash Canada Concussion Policy

Synchronized Swimming - Saskatchewan Artistic Swimming Association

- 6) **Typical Injuries Include:** Hypothermia (cold water), patellofemoral syndrome, hip strains associated with eggbeater kick, rotator cuff strain.
- 6) **Mechanism of Injury:** collisions, lifts, jumps, incorrect technique. Most injuries are of the chronic overuse nature.
- 6) **Scope of Utilization:** Low utilization of medical services. Lifeguard is on duty
- 6) **Protocols Governing Medical intervention:** Should an emergency occur; usual pool emergency procedures would be followed. Once the athlete has entered the water for either the figures competition or routine competition, the athlete should not be attended to unless the referee has blown the whistle and notified the judges. The coach can notify the referee for such an interruption. If the physician/medical personnel feel the athlete is in need of assistance, notification of the coach or referee is the correct course of action. If an athlete's performance has been interrupted for medical reasons, the athlete would most likely be allowed to re-swim her performance at a later time.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Ensure any tapes/wraps that are permitted are waterproof.
- 6) **Concussion Policy/Protocols:** Canada Artistic Swimming Concussion Protocol

Swimming - Swim Saskatchewan Inc.

- 6) **Typical Injuries Include:** shoulder strains, rotator cuff tendonitis, knee pain ("breaststroker's knee"), ear & nose congestion, low and mid back strain.
- 6) **Mechanism of Injury:** Chronic and overuse injuries are common due to long training sessions.
- 6) **Scope of Utilization:** Swimmers are substantial users of medical services. Physiotherapy and massage therapy are used extensively.
- 6) **Protocols Governing Medical intervention:** The lifeguard crew from the pool will be the first responders when a participant is injured. Other medical personnel must wait until the injured person is on the pool deck before beginning an assessment.

Any kind of tape on the body is not permitted unless pre-approved by the referee. Examples of when it may be permitted is for medical reasons such as a wound closures and protection - band aids, smaller dressings, and 'butterfly' type are allowed as long as It does not enhance any performance or unfair advantage.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** waterproof tape
- 6) **Concussion Policy/Protocols:** Swim Canada Concussion Policy.

Table Tennis - Saskatchewan Table Tennis Association

- 6) **Typical Injuries Include:** Shoulder and hip strains, overuse injuries of the spine, sprains of wrist and ankle joints
- 6) **Mechanism of Injury:** Abrupt, bursts-of-movement, both in upper and lower extremities.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:**
On receiving a valid request for a time-out the umpire shall suspend play. Play will be resumed when the player or pair who called it is ready to continue or at the end of one minute, whichever is sooner.

The referee may allow a suspension of play of the shortest practical duration, and in no circumstances more than 10 minutes, if a player is temporarily incapacitated by an accident, provided that in the opinion of the referee the suspension is not likely to be unduly disadvantageous to the opposing player or pair.

A suspension shall not be allowed for a disability which was present or was reasonably to be expected at the beginning of the match, or where it is due to the normal stress of play. Disability such as cramp or exhaustion, caused by the player's current state of fitness or by the manner in which play has proceeded, does not justify such an emergency suspension, which may be allowed only for incapacity resulting from an accident, such as injury caused by a fall.

If anyone in the playing area is bleeding, play shall be suspended immediately and shall not resume until that person has received medical treatment and all traces of blood have been removed from the playing area.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** No Policy Identified

Tae-Kwon-Do - Saskatchewan Tae-Kwon-Do Inc.

- 6) **Typical Injuries Include:** Nose sprains or fractures, contusions, knee and ankle, sprains, concussions, rib sprains or fractures.
- 6) **Mechanism of Injury:** Contact with opponent, quick change of direction
- 6) **Scope of Utilization:** High utilization due to the combative nature of the sport.
- 6) **Protocols Governing Medical Intervention:** Medical is allowed on mats when needed once the match is stopped. The center referee would stop the match and either the umpire or coach would call for medical.

Medical has three minutes per match to provide an assessment or treatment.

Tapes and wraps must first be signed off by the umpire committee and must be soft material only. It cannot contain any hard component such as plastics or metal.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Extra blood control supplies.
- 6) **Concussion Policy:** A concussion incident form that must be filled out and followed.

Target Shooting (Rifle and Pistol) - Saskatchewan Target Shooting Association

- 6) **Typical Injuries Include:** chronic cervical pain, low back pain, thoracic pain, shoulder joint sprains.
- 6) **Mechanism of Injury:** Shooters often have a very high incidence of overuse cervical spine problems. The incidence of other injuries is low.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:** Safety aspects are monitored by Line Referee.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** No Concussion Policy Identified

Team Handball - Saskatchewan Team Handball Federation Inc.

- 6) **Typical Injuries Include:** Lower extremity strains, knee and ankle sprains, shoulder sprains and strains, contusions
- 6) **Mechanism of Injury:** Contact with other players, quick pivots and change of direction. Players who play over the 6-metre line are the most affected by injuries, while women have a higher probability of injury.

- 6) **Scope of Utilization:** Moderate utilization of medical services
- 6) **Protocols Governing Medical intervention:** A player who is bleeding or has blood on the body or uniform must leave the court immediately and voluntarily (through a normal substitution), in order to have the bleeding stopped, the wound covered, and the body and uniform cleaned off. The player must not return to the court until this has been done. A player who does not follow the instructions of the referees in connection with this provision is deemed guilty of unsportsmanlike conduct.

In the case of an injury, the referees may give permission (through hand signals) for two of the persons who are entitled to enter the court during a time-out, for the specific purpose of assisting an injured player from their team. After receiving medical care on the playing court, the player has to leave the court immediately. He can only re-enter the court following the third attack of his team.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Handball Canada Concussion Policy

Tennis - Tennis Saskatchewan

- 6) **Typical Injuries Include:** Abrasions, lateral epicondylitis (tennis elbow), shoulder tendinitis, tendinitis of wrist flexors, low back pain, gastrocnemius & adductor muscle strains.
- 6) **Mechanism of Injury:** Lunging, slip and falls. Most injuries are of the chronic and due to overuse.
- 6) **Scope of Utilization:** Low utilization of medical services
- 6) **Protocols Governing Medical intervention:** Players are allowed one three-minute medical time-out for each distinct treatable medical condition or injury, and in general shall be evaluated and/or treated at a changeover or set break. Only in the case that a player develops an acute medical condition (one that develops suddenly and prevents the player from continuing play, eg. A player is seen to roll-over on his/her ankle) that requires immediate medical attention may the player request immediate evaluation and/or treatment. Medical personnel must wait to be "waved on" to the court by the referee before performing an assessment.

If tape is applied to a player's serving hand, it must not be the same color as the balls being used in the match. Players may not receive a medical time-out for cramping. If a player is bleeding, play must stop as soon as possible, and a total of up to five minutes may be allowed to assure control of bleeding.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Tennis Canada Concussion Policy

Track and Field - Saskatchewan Athletics

- 6) **Typical Injuries Include:**

- a. **Track:** hamstring strains, calf/tendo-achilles strains, low back pain, quadricep strains, tibial muscle strains, foot & ankle sprains, iliotibial band syndrome, blisters, hyperthermia, dehydration (usually endurance events), shin spints.
 - b. **Field:** foot and ankle sprains, low back pain, hamstring strains, calf/tendo-achilles pain, tendinitis of the shoulder, cervical muscle strain.
- 6) **Mechanism of Injury:** Various depending on the discipline.
- 6) **Scope of Utilization:** Athletics participants are very high users of medical services. Injury occurrence is moderate, ongoing therapy is high, and the use of recuperative therapy (massage) is high.
- 6) **Protocols Governing Medical intervention:** Medical and paramedical personnel are not allowed on the track or in the field during competition unless directed to do so by the Field Marshall. Medical personnel may be in these areas only during the warm-up period.
- a. *Note: Pole Vault, Shot Put, Discus, Hammer, Javelin*
Competitors are allowed to place a substance on their hands to obtain a better grip. The use of a forearm cover, or tape on the hands or fingers shall not be allowed except in the case of the need to cover an open wound.
- 6) **Additional/Specialized Equipment and Supplies Needed: (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** sunscreen, extra tape and ice/ice packs.
- 6) **Concussion Policy/Protocols:** Athletics Canada Concussion Policy

Trapshooting - Saskatchewan Amateur Trapshooting Association inc.

- 6) **Typical Injuries** – Injuries are not typical in this sport.
- 6) **Mechanism of Injury:** N/A
- 6) **Scope of Utilization:** Services are not typically utilized for this sport.
- 6) **Protocols Governing Medical intervention:** Activity is on the trap line which is monitored by the line referee and the squad leader. Trapshooting has a great safety record.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** No Concussion Policy Identified

Triathlon - Saskatchewan Triathlon Association Corp.

- 6) **Typical Injuries Include:**
- **Swim** – Shoulder impingement, shoulder bursitis (over-use)
 - **Biking** – Scrapes, bruising and dislocations due to crashes, patellofemoral pain, nerve compression in wrists,
 - **Running** – Shin splints heel pain, IT band Syndrome, planter fasciitis
- 6) **Mechanism of Injury:**
- **Swimming** – repetitive nature of swimming strokes
 - **Biking** – Crashes, improper bike fitting, overuse injury (back and neck) with posture on the bike,

- **Running** – mostly over-use injuries.
- 6) **Scope of Utilization:** Three disciplines within one sport. Typically there is low utilization of medical services
 - 6) **Protocols Governing Medical intervention:** No protocol identified, likely depends on which discipline the injury occurs in.
 - 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Water proof tape.
 - 6) **Concussion Policy/Protocols:** Triathlon Canada Concussion Policy

Disk/Frisbee Sport - Saskatchewan Ultimate Players Association Inc.

- 6) **Typical Injuries Include:** Knee ligament sprains, lower extremity strains, ankle sprains, shoulder subluxations and dislocations.
- 6) **Mechanism of Injury:** It is a limited contact sport that combines elements of soccer, football, and basketball. Players must run, cut, guard, jump, throw, catch and sometimes dive with outstretched arms for a flying disc.
- 6) **Scope of Utilization:** Low utilization. They have used us to provide medical/1st aid coverage for their provincial championships in the past.
- 6) **Protocols Governing Medical intervention:** No protocols identified.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Saskatchewan Ultimate Players Association Inc. Concussion Policy

Volleyball - Sask Volleyball

- 6) **Typical Injuries Include:** finger sprains/strains, knee sprains, jumper's knee, ankle sprains, shoulder tendonitis, concussion.
- 6) **Mechanism of Injury:** Most serious injuries occur when the participant is jumping and twisting on impact with the floor, contact with other players, contact with the net and other players, chronic overuse injuries.
- 6) **Scope of Utilization:** Moderate usage. Pre-game taping and wrapping is common.
- 6) **Protocols Governing Medical intervention:** Medical personnel cannot enter the court until the referee has blown the whistle. The referee has the authority to end the play at any time. If the referee sees an athlete injured on the court, the whistle should go immediately. The medical personnel can then enter the court. The injured player must then be substituted, either legally or exceptionally. If the injured player cannot be substituted, the player is given a 3-minute recovery time, but not more than once for the same player in the match. If he/she does not recover, his/her team is declared incomplete.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Extra tapes and wraps, extra ice/ice packs
- 6) **Concussion Policy/Protocols:** Sask Volleyball Concussion Policy

Water Polo - Water Polo Saskatchewan Inc.

- 6) **Typical Injuries Include:** Knee joint Sprain (MCL), rotator cuff strain, low back pain, hand and finger sprains.
- 6) **Mechanism of Injury:** it is a sport with a lot of quick changes in direction and agility while hitting. Knee injuries are often associated with the "egg beater kick" and shoulder injuries are associated with throwing. Most injuries are of the chronic overuse nature.
- 6) **Scope of Utilization:** Low. Aquatic Life Saving personnel are on hand for initial water rescue.
- 6) **Protocols Governing Medical intervention:** If a player is bleeding, the referee shall immediately order the player out of the water with the immediate entry of a substitute and the game shall continue without interruption. If accident, injury or illness, other than bleeding occurs, a referee may at his discretion suspend the game for not more than three minutes. If the player leaves the game through any medical reason including cramps, the referees shall allow the immediate entry of a substitute. The injured player shall not return with one exception, that being a bleeding athlete may return once the bleeding has completely stopped.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Water proof tapes
- 6) **Concussion Policy/Protocols:** Water Polo Saskatchewan Concussion Policy

Water Skiing and Wakeboarding - Water Ski and Wakeboard Saskatchewan inc.

- 6) **Typical Injuries Include:** Knee and ankle sprains, contusions, dislocations, concussions
- 6) **Mechanism of Injury:** Over extension or crashes during slalom or trick events.
- 6) **Scope of Utilization:** Low utilization of medical services The Jump event present the highest risk factor, which is mitigated by the presence of trained lifeguard who enters the water immediately upon any sign of trouble and a zodiac that heads to the site.
- 6) **Protocols Governing Medical intervention:** Medical is allowed, usually in a boat, The athlete will signal, OR through simple observation by medical personnel. No rules regarding tapes/wraps. The National body has very strict rules for competition. Coaches must have First Aid along with their Build the Skills courses. Most common has the athlete able to get on the boat and return to shore where they receive medical assistance.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** Waterproof tapes/wraps
- 6) **Concussion Policy/Protocols:** Water Ski and Wakeboard provincial championships will utilize the following process to assess concussions that occur at the championships - Any athlete suspected of suffering a concussion will be asked to consult with a medical professional and may be asked to cease participation in the event. In Club setting-Any athlete suspected of suffering a

concussion must be immediately removed during the competition or practice. The athlete will be monitored until a parent or guardian can be notified and care is transferred to them.

Weightlifting - Saskatchewan Weightlifting Association Inc.

- 6) **Typical Injuries Include:** knee joint sprains, patellar tendonitis, low back strain, shoulder sprain, quadriceps strain, wrist sprains, elbow sprains, cervical strain.
- 6) **Mechanism of Injury:** Most injuries are caused by errors when performing maximal lifts.
- 6) **Scope of Utilization** - Low utilization of medical services.
- 6) **Medical Coverage Rules:** Extensive bandaging rules exist (i.e. wrist and knee bandages are allowed to a maximum width of 10 cm at the wrist and 30 cm at the knees). No bandages are allowed on the elbows or thighs. Any other bandages worn by the athlete must be requested by the physician on duty and authorized by the jury prior to competition.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Weightlifting Canada Concussion Policy

Wheelchair Sports - Saskatchewan Wheelchair Sports Association

- 6) **Typical Injuries Injury:** Upper Extremity sprains and strains, shoulder tendonitis, bursitis, blisters, lacerations, abrasions, carpal tunnel syndrome.
- 6) **Mechanism of Injury:** The mechanism of injury depends on the nature of the sport. There is a high risk of crashes in fast moving sports such as basketball, track, and road racing. Wheelchair athletes with spinal cord lesions have an increased vulnerability to heat and or cold because of thermoregulatory disorders below the level of the lesion.
- 6) **Scope of Utilization:** Dependent on the sport and the skill level.
- 6) **Protocols Governing Medical intervention:** Dependent on the sport. Will need to inquire for each event.
- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** No Policy Identified

Wrestling - Saskatchewan Amateur Wrestling Association

- 6) **Typical Injuries Include:** Knee ligament sprains, wrist & finger sprains, low back strains, quad, adductor and calf strain, elbow, foot & ankle sprains, cervical strain, concussion
- 6) **Mechanism of Injury:** Body contact, throwing, excessive exertion on joints
- 6) **Scope of Utilization:** High utilization of services.
- 6) **Protocols Governing Medical intervention:** Supervision of the weigh-in, in addition to the bouts is required. During the weigh-ins, physicians can examine the athletes and evaluate their

condition of health (eg. conduct a visual check for contagious skin conditions such as ringworm). This is the case in all international competitions. In domestic meets when the presence of a physician is not possible, the official will administer the weigh-ins. If there appears to be a condition, the official will hold back the admittance of the wrestler to the meet until a physician can diagnose the condition.

The wrestler must never leave the platform unless he sustains a serious injury requiring his immediate removal, or if he is vomiting or if an illness is clearly evident. The total time out in case of injury in a bout cannot exceed two minutes for each wrestler. Following a minor injury, however, the physician can allow an injured wrestler to continue competing in the following round.

- 6) **Additional/Specialized Equipment and Supplies Needed (in addition to what is already stocked in the SMSCS Medical Coverage of Events kits):** No additional supplies needed.
- 6) **Concussion Policy/Protocols:** Saskatchewan Amateur Wrestling Association Concussion Protocol

Appendix #15

EQUIPMENT RENTAL & WAIVER FORM

Name of Renter: _____
print

Member _____ Non-Member _____ Business: _____

Address of Renter: _____
P. Code: _____

Phone: _____ Email: _____

Equipment Rented: _____

Start Date of Rental Period: _____ End/Return Date: _____

Event/Reason for Renting: _____

The renter agrees to pay the rates as per described, plus the cost of repairs if damaged, and the replacement costs if lost or stolen.

Signature (renter): _____

Date: _____

Signature (SMSCS): _____

2205 Victoria Ave. Regina, SK S4P 0S4
510 Cynthia St. Saskatoon, SK S7L 7K7
www.smcs.ca

MEDICAL EQUIPMENT RENTAL (minimum charges)

1. **MEMBERS:** For SMSCS individual members/consultants utilizing equipment for events not requested/invoiced through the SMSCS.

	CODE	QUANTITY	TOTAL
Trainers Kit - \$5.00/week	EQR 01	_____	_____
Treatment Table - \$10.00/week	EQR 03	_____	_____
Spine Board w/head immobilizers - \$10.00/week	EQR 04	_____	_____
B Splint Kit - \$15.00/week	EQR 06	_____	_____
Physician Medisac - \$20.00/week	EQR 07	_____	_____
Muscle Stim. Unit - \$30.00/week	EQR 08	_____	_____
Tens Unit - \$30.00/week	EQR 09	_____	_____
Ultrasound Unit - \$50.00/week	EQR 10	_____	_____

Interferential/Ultrasound/Multi Stim Unit - \$100.00/week	EQR 11		
Metal Scoop Stretcher - \$10.00/week	EQR 25		
FMS Testing Kit - \$25.00/week	EQR 39		
Vertec Jump Stand - \$20.00/week	EQR 42		
Sit and Reach Tester - \$10.00/week	EQR 45		
AED - \$20.00/week	EQR 48		

2. **NON-MEMBERS:** For non-SMSCS members/consultants (including PSO's) utilizing equipment for sport/recreation events not requested/invoiced through the SMSCS. Restrictions applied dependent upon user.

Trainers Kit - \$10.00/week	EQR 12		
Treatment Table - \$20.00/week	EQR 14		
Spine Board w/head immobilizers - \$20.00/week	EQR 15		
B Splints Kit - \$25.00/week	EQR 17		
Physician Medisac - \$40.00/week	EQR 18		
Muscle Stim. Unit - \$50.00/week	EQR 19		
Tens Unit - \$50.00/week	EQR 20		
Ultrasound Unit - \$75.00/week	EQR 21		
Interferential/Ultrasound/Multi Stim Unit - \$150.00/week	EQR 22		
Metal Scoop Stretcher - \$20.00	EQR 26		
FMS Testing Kit - \$30.00/week	EQR 40		
Vertec Jump Stand - \$25.00/week	EQR 43		
Sit and Reach Tester - \$15.00/week	EQR 46		
AED - \$40.00/week	EQR 49		

3. **PRIVATE CLINICS/BUSINESS:** 'For-profit' institutions (including physio clinics). Restrictions applied dependent upon user.

Trainers Kit - \$20.00/week	EQR 27		
Treatment Table - \$30.00/week	EQR 29		
Spine Board w/head immobilizers - \$30.00/week	EQR 30		
B Splints Kit - \$35.00/week	EQR 32		
Physician Medisac - \$60.00/week	EQR 33		
Muscle Stim. Unit - \$70.00/week	EQR 34		
Tens Unit - \$70.00/week	EQR 35		
Ultrasound Unit - \$100.00/week	EQR 36		
Interferential/Ultrasound/Multi Stim Unit - \$200.00/week	EQR 37		
Metal Scoop Stretcher - \$30.00	EQR 38		
FMS Testing Kit - \$35.00/week	EQR 41		
Vertec Jump Stand - \$30.00/week	EQR 44		
Sit and Reach Tester - \$20.00/week	EQR 47		
AED - \$60.00/week	EQR 50		

TOTAL RENTAL CHARGES	\$	
GST 5%	\$	
SHIPPING/HANDLING (MED40)	\$	
S/H GST	\$	
GRAND TOTAL RENTAL CHARGES	\$	

Appendix #16

PROFESSIONAL DEVELOPMENT MEMORANDUM OF UNDERSTANDING

Member Provider Group or Consultant Group Educational Upgrading

I. PARTIES TO THE UNDERSTANDING

This memorandum of understanding between:

The **SPORT MEDICINE AND SCIENCE COUNCIL OF SASKATCHEWAN**, hereinafter called the **SMSCS** and the _____ hereinafter called the **HOST**.
(medicine/science member or provider group)

II. PREAMBLE

The purpose of this memorandum is to confirm a contract between the SMSCS and the HOST for administrative support and financial assistance from the SMSCS to the HOST based on compliance with the specific terms and conditions outlined in this document and noted in the SMSCS's Policy and Procedure manual (previously send to the HOST).

III. TERMS AND CONDITIONS

A. ADMINISTRATIVE SUPPORT

The SMSCS agrees to provide the following administrative support:

B. FINANCIAL SUPPORT

Upon receiving a completed Follow-Up Report from the Host/Member Group the SMSCS agrees to pay for any deficits the professional development session incurs up to the maximum grant amount of \$_____

C. OTHER

The parties of this agreement further agree that:

D. WITNESS WHEREOF the parties hereto have executed this Understanding as the day & year written below.

SMSCS:

Per: _____

Date_____

HOST:

Per: _____

Date_____

FOLLOW UP REPORT

Member Provider Group or Consultant Group Educational Upgrading

The Host group must SUBMIT the following before the SMSCS can process payment of the grant to reimburse the eligible expenses:

Financial Summary (including receipts if possible)

--

Attendance List

--

Brief report on the content of the presentations:

--

Copies (or summary) of evaluations

--

Recommendations for future

--

Appendix #17

MOU – Physiotherapy Mentoring Shadow Program – SMSCS

The intent of this MOU is to outline the conditions for the collaborative mentoring shadowing experience provided for Physiotherapy Mentoring Participants, and to define the respective obligations of each party involved in the experience.

THIS AGREEMENT/MOU made on this day, _____ (date) by and between:
Sport Medicine & Science Council of Saskatchewan, (hereinafter referred to as “**SMSCS**”),
and

--

hereinafter referred to as “**mentoring participant**”

Mentoring Participant Contact Information:

Address:	
City/Town:	P. Code:
Email:	Phone:

Scope of Collaborative Mentor Experience

The SMSCS will offer observational learning opportunities during SMSCS Medical Coverage of Events program. This will be supported by SMSCS approved Service Providers that are fully-licensed Physical Therapists who will offer engagement and support during the mentoring session.

Responsibility of Each Party

The SMSCS will work with SPC-SK member engagement personnel to identify Physiotherapy students with an interest in Sport Physiotherapy. Only students from the following groups will be able to participate in this program:

Physiotherapy Residents (have already graduated but currently have a restricted license) OR **Second year Physiotherapy students**

Once identified, SMSCS will assign a mentor, based on availability, to the mentoring participant. A schedule for the experience will be set and details will be outlined as per this agreement.

The Mentoring Participants are only able **to shadow for shifts that a Licensed Physiotherapist with the Sport First Responder Certification (SMSCS Service Provider) is covering.**

The Licensed Physiotherapist (SMSCS Service Provider) providing the medical coverage agrees/gives consent to have Mentoring Participants shadow them.

For liability reasons, the Mentoring Participants **cannot provide any medical or 1st aid treatment.** They can only observe, ask questions or assist as directed by the physiotherapist.

Mentoring Participants are **not eligible** for any type of payments/honorariums/expense reimbursements.

Duration of MOU

This term of this MOU is **Click or tap to enter a date.** (today's date) and will conclude December 31st.


It is understood that this opportunity is based on the availability of SMSCS Service Providers and the schedule of Medical Coverage provided on behalf of SMSCS to client groups. The availability/schedule is subject to change through no fault of SMSCS. Should this occur, SMSCS will work with the mentoring participant to reschedule the learning opportunity.

Confidentiality

By signing this MOU, all parties agree to keep confidential any proprietary or sensitive information shared during the collaborative experience.

Signatures & Acceptance

We declare that all information provided here is accurate and that we agree to the terms outlined above.

 Travis Laycock Executive Director	2025-05-21
Signature (SMSCS)	Date Signed

	Click or tap to enter a date.
Signature (Mentoring Participant)	Date Signed

Appendix #18



SPORT LEGACY Professional Development Subsidy Program - APPLICATION FORM

Name _____

Address _____ P.Code: _____

Phone: (C) _____ Email _____

Profession _____

Name of Professional Certification fully Completed:

Date(s) of Full Completion: _____

Are you Applying for 100% _____ 75% _____ 50% _____

Signature: _____

NOTE: EXAM RECEIPTS must be submitted to substantiate the subsidy payment.

SUBMIT to:

Sport Medicine and Science Council of Saskatchewan, 510 Cynthia St., Saskatoon, SK,
S7L 7K7 or Email to: travis.laycock@sasktel.net