



BLUE CARD

CONCUSSION INITIATIVE PROTOCOLS AND IMPLEMENTATION PROCEDURES FOR PROVINCIAL UNIONS



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INTRODUCTION

The introduction of the Blue Card Concussion Initiative is the result of a trial conducted by Northland Rugby Union in 2014.

Player welfare is a major priority and Northland Rugby Union was concerned players who had sustained a knock to the head, were continuing to play rugby without appropriate medical clearances.

As a result, a process was introduced to improve player welfare in relation to head knocks and/or concussion.

Northland Rugby Union developed a thorough and robust set of protocols and practices to address this important player welfare issue.

Following the success of the trial, NZ Rugby approved the introduction of the Blue Card Concussion Initiative in other provinces in New Zealand, subject to compliance with the protocols and practices detailed in this booklet.

These protocols and practices are consistent with those implemented by Northland Rugby Union in the 2014 trial and are mandatory when implementing this initiative.

BLUE CARD CONCUSSION INITIATIVE IMPLEMENTATION PROTOCOLS

Implementing the NZ Rugby Blue Card Concussion Initiative requires the following actions:

1. Provincial Rugby Union Board and Management supports the introduction of the Blue Card Concussion Initiative to support and enhance player safety and welfare.
2. Provincial Rugby Union Management delivers an education programme to all clubs and schools (if applicable) in the Union to outline the details and requirements of the Blue Card Concussion Initiative. This process is critical to obtain support and endorsement of the initiative by Clubs and Schools.
3. Provincial Rugby Union Management consults with Referees Association to outline the purpose and protocols to be adopted in implementing the Blue Card Concussion Initiative. The Provincial Union Referee Association ensures members participate in the education programme developed to implement the Blue Card Concussion Initiative.
4. Provincial Rugby Union Management advises the relevant district health authorities of the purpose and protocols associated with implementation of the Blue Card Concussion Initiative and seek cooperation and support of the local health providers, including a process to provide all local medical practitioners with details of the Blue Card Concussion Initiative.
5. Having educated all Clubs, Schools (if applicable) Referees Association, and having informed the regional health authorities, the Provincial Union determines the specific levels of rugby the Blue Card Initiative will apply to. Union's need to recognise the level of referee experience required to confidently apply the Blue Card Concussion Initiative. Provincial Union Management will advise the Referees Association the grades of rugby the Blue Card Initiative will apply to in the province.
6. All affected stakeholders are formally advised.
7. All Referees involved in refereeing grades of rugby in

which the Blue Card Initiative applies, must receive specialist training in identifying the key signs of concussion.

This training can only be delivered by a medical practitioner approved by NZ Rugby. A Provincial Union must submit the name of the medical practitioner to the NZ Rugby Medical Manager for approval, prior to the training being conducted.

It is expected that this medical practitioner will either be a doctor already contracted to the PU to provide healthcare and medical advice to the Union and/or its players or another doctor that has specialist knowledge in concussion management.

The Provincial Union is to maintain a register of referees who have undertaken the training. Participation in this training should also be recorded on the individual's training record in the National Rugby Database.

8. Provincial Union Management must introduce local Competition Rules which comply with all NZ Rugby Blue Card Concussion Initiative protocols, including the loss of competition points for teams not complying.
9. When implementing the Blue Card Concussion Initiative, Provincial Rugby Union Management must comply with all NZ Rugby Off-Field Follow Up Processes and administrative/record keeping requirements, which include:
 - Establishment and maintenance of a Blue Card Concussion Register (refer template page 12)
 - Process to forward a letter to the Club/Team Management of all Blue Carded players advising of requirement to meet all Graduated Return To Play (GRTP) Protocols before returning to play.
 - Blue Carded player being required to produce medical clearance to resume playing.
 - Advise NZ Rugby of the PU staff member responsible for managing and administering implementation of the Blue Card Concussion Initiative.

ON-FIELD PROCESSES/PROCEDURES

WORLD RUGBY LAW 3.10:

THE REFEREE'S POWER TO STOP AN INJURED PLAYER FROM CONTINUING

(a) If the referee decides - with or without the advice of a doctor or other medically qualified person - that a player is so injured that the player should stop playing, the referee may order that player to leave the playing area. The referee may also order an injured player to leave the field in order to be medically examined.

NEW ZEALAND RUGBY DOMESTIC SAFETY LAW VARIATION (DSL) 22.d)

10. THE REFEREE'S POWER TO STOP AN INJURED PLAYER FROM CONTINUING

If the referee believes a player has been concussed or suspects a player has been concussed, the referee must order that player to leave the playing area. That player must not return and play in that match.

Add a new clause:

(b) 4. Without limiting 22.d above, in grades in which Blue Card Concussion Initiatives apply, if the referee believes a player has been concussed, or suspects a player has been concussed, the referee must show a Blue Card to that player, and that player will be required to leave the Playing Area, and not return and play in that match. Further, the player shown a Blue Card may not return to play in any future match without first meeting the requirements for a Graduated Return to Play, as set out in the protocols applicable to the Blue Card Concussion Initiative. Full details of the protocols can be found in the NZ Rugby Booklet titled: *Blue Card Concussion Initiative: Protocols & Implementation Procedures for Provincial Unions*

OFF-FIELD FOLLOW UP PROCESSES/PROCEDURES

REFEREE AND TEAM COACH

1. Issuing of Blue Card (by Referee) initiates:
 - a. Identification of concussed player on Provincial Union official team sheet.
 - b. Provincial Union will forward a letter to the Club and player confirming that the player has been stood down from playing rugby because of a concern regarding concussion. This letter will outline the procedure to facilitate the player's return to training and playing.
 - c. Provincial Union will enter player and incident details into the Blue Card Concussion Initiative Player register.

OFF-FIELD FOLLOW UP PROCESSES/PROCEDURES - PLAYER

The issuing of a Blue Card by the Referee initiates implementation of the Graduated Return to Play (GRTP) outlined on the back cover of this booklet.

The following specific details are noted:

All players suspected of being concussed should not drink alcohol after the game.

It is strongly recommended that a suspected concussed player seek medical attention within 24 hours.

The player must have completed the return to play requirements. Visit www.rugbysmart.co.nz/injuries/concussion/return/

These include:

- Having rested until they have no on-going symptoms; and
- Having completed the minimum rest period from playing; and

- Having undertaken a Graduated Return to Play Protocol (NZ Rugby DSLV Law 22.d); and
- Having seen a medical doctor to obtain a clearance to resume playing.

The player must produce a signed copy of the required Medical Clearance from a medical doctor.

This must be provided to the Provincial Union office at least 24 hours before scheduled match in which a return to play is planned.

Incorrectly issued Blue Card

In rare circumstances a player may challenge the issuing of a Blue Card. See page 8 for details. A player or club wishing to consider this option are urged to contact their provincial union office to discuss further.

OFF-FIELD FOLLOW UP PROCESSES/PROCEDURES - PROVINCIAL RUGBY UNION

1. Introduce and maintain Blue Card (player identified with concussion) register.
2. Forward letter to club of player reminding club/team of the need for this player to obtain a Medical Clearance in order to return to play.
3. Monitor return to play of all players issued with Blue Card.
4. Introduce competition rules sanctioning team/club if they play a player who has not presented a Medical Certificate to confirm fitness to return to play.
5. Provincial Rugby Union to submit Blue Card (player identified with concussion) Register to New Zealand Rugby (as required).

REFEREE TRAINING

All registered referees, officiating grades of rugby the Blue Card applies to, must undertake a specific training and development session focussing on identifying the symptoms of concussion. This training session must be conducted by an appropriate medical professional, approved by NZR.

PROVINCIAL UNION APPLICATION TO IMPLEMENT

Provincial Unions implementing the NZ Rugby Blue Card Concussion Initiative must comply with all NZ Rugby protocols and implementation procedures. Page 10 of this booklet provides an Application to Implement form which is to be submitted to NZ Rugby upon all key steps detailed on the form, having been completed.

Once approval is granted, NZ Rugby will forward a supply of Blue Cards to the Provincial Union for distribution to referees officiating the grades of rugby the Blue Card Concussion Initiative applies.

PLAYER FROM ANOTHER PROVINCIAL UNION ISSUED WITH BLUE CARD

In the event a player from another Provincial Union (where the Blue Card Concussion Initiative is not in place) is issued with a Blue Card all NZ Rugby protocols and practices apply. The issuing Provincial Union forwards advice of the Blue Card to the player's home province and the player must comply with the Graduated Return to Play protocols before resuming contact training and playing.

INCORRECTLY ISSUED BLUE CARD

Where there are grounds to consider that a Blue Card may have been issued incorrectly this may be reviewed.

The mechanism by which this can be reviewed is dependent of the circumstances under which it is believed that the Blue Card was incorrectly issued.

INCORRECT PLAYER IDENTIFIED

(refer to documentation on the management of this situation)

PLAYER WAS INCORRECTLY CONSIDERED SUSPECTED OF BEING CONCUSSED

The decision of a referee to issue a blue card to a player can be

reviewed by an independent specialist medical doctor with expertise in the management of concussion and/or traumatic brain injury. A list of specialists approved to perform this review will be supplied by NZ Rugby on request.

This specialist should be identified prior to the season commencing and must be approved by the NZ Rugby Medical Manager.

The specialist must produce a letter for the player confirming that concussion is no longer suspected and that in their opinion the Blue Card was issued in error. This letter must be supplied to the Provincial Union administrator no less than 24 hours prior to the next match the player is planning to play in.

It is noted that the specialist may require more than one visit to complete their assessment, or alternatively may require additional investigations.

The costs related to this assessment will be borne by the player/club.

The receipt of a letter from the specialist clearing the player of concussion will result in the rescinding of the Blue Card. This allows the player to be free to return to full training and playing immediately providing that the alternative explanation for the circumstances of the Blue Card are not in themselves a reason for the player to be stood-down. Further consideration of this reason and circumstances sits outside the Blue Card protocol.

BLUE CARD CONCUSSION INITIATIVE PROVINCIAL UNION APPLICATION TO IMPLEMENT

PROVINCIAL UNION:

	ACTION	Date Completed	Details/Outcome
1	<p>Provincial Union Board and Management adopts the Blue Card Concussion Initiative.</p> <p>Staff member is appointed to manage implementation of the Blue Card Concussion Initiative.</p>		<p><i>Advise Board Meeting approval date.</i></p> <p><i>Advise name of staff member</i></p>
2	<p>Provincial Union Management delivers education programme to Clubs and Schools (if applicable) of grades the Blue Card Concussion Initiative will apply.</p>		<p><i>Advise relevant meeting dates</i></p>
3	<p>Provincial Union Management introduce sanction(s) for teams not adhering to Graduated Return to Play (G RTP) Protocols.</p>		<p><i>Outline sanctions introduced</i></p>
4	<p>Provincial Union Management informs District/Local Area Health Board of the implementation of the Blue Card Concussion Initiative and the levels of rugby it applies to.</p>		<p><i>Advise process adopted</i></p>

5	Provincial Union Management ensure the Referee Training session is delivered to provide referees with training in identifying the key signs of concussion.		<i>Advise date of meeting</i>
6	Referee Training session provider approved by NZ Rugby		<i>Date approved</i>
7	Grades of Rugby/ Competitions the Blue Card Initiative will be applied are finalised.		<i>List grades/ competitions the Blue Card will apply to</i>
8	Clubs/schools are formally advised of the implementation of the Blue Card Concussion Initiative		<i>Provide copy of letter</i>

LETTER OF NOTIFICATION TO PLAYER

Player Name:
Game Details:
Date of game:
Referee:

Dear _____ (insert name of player),

This letter confirms that you were issued with a Blue Card during the match listed above.

As a result, you are stood down from rugby until you have completed a full return to play protocol. This is to ensure your risk of further injury is reduced as far as possible.

As per the NZ Rugby Blue Card procedure, you are now required to undertake the following steps to return to play:

- Rest until you have no on-going symptoms; and
- Complete the minimum rest period from playing; and
- Undertake a Graduated Return to Play Protocol (see below); and
- See a medical doctor to obtain a clearance to resume playing.

Please note that the medical clearance below, must be signed by a Medical Practitioner and returned to the (insert PU name) office 24 hours before your scheduled return to play.

As per the NZ Rugby Blue Card Concussion Initiative protocols - playing without the required clearance will result in (insert appropriate sanction) as per the NZ Rugby protocols and the (insert PU name) competition rules.

If you have concern regarding this letter and its contents you should contact myself to discuss further in the first instance.

Thank you for your understanding and support in this matter.

Kind Regards

(Insert signature and contact details of responsible PU person)

MEDICAL CLEARANCE FORM

I _____ (insert name), have assessed the above player on the _____ (insert dates) and confirm that they have completed the return to play requirements as outlined in the New Zealand Rugby guidelines - Returning to Play following Concussion and I hereby permit this player to return to play rugby.

Signed: _____ NZ Medical Council Number _____

LETTER OF NOTIFICATION TO CLUB

Player Name:
Game Details:
Date of game:
Referee:

To (insert name of Club Official) of (insert Club name),

The player listed above is hereby stood down from rugby until further notice due to having sustained a concussion or suspected concussion. As per the NZ Rugby Blue Card protocols, this player is now required to obtain clearance from a doctor prior to returning to playing rugby. Please find attached a letter outlining this procedure for the player to provide to the player's doctor along with this letter.

Please note that the medical clearance must be signed by a Medical Practitioner and returned to the (insert PU name) office 24 hours before the scheduled match in which the player wishes to return.

As per the NZ Rugby Blue Card protocols - playing a player who has been issued with a Blue Card without the required clearance will (insert appropriate sanction) as per the (insert PU name) Competition rules

Thank you for your understanding in this matter and for promoting safety amongst our players.

Kind Regards

(Insert signature of responsible PU person)

LETTER OF NOTIFICATION TO LOCAL HEALTH AUTHORITY

(Insert PU letterhead)

(Insert date)

(Insert name and address of relevant party - DHB/ PHO/ GP clinics/ A&E clinics)

Dear (insert name of relevant party),

CONCUSSION MANAGEMENT PROCEDURES IN COMMUNITY RUGBY

New Zealand Rugby (NZR) takes player welfare extremely seriously. Preventing injuries, including concussions is our number one priority, however if a suspected concussion does occur, we want to ensure that anyone involved in rugby knows what to look out for and what to do.

For any concussions within the community game, there is a minimum stand-down period before a player can return to contact training. These timeframes are 23 days for players under 19 years and 21 days for players 19 years and older. During this stand down period players must complete the Graduated Return to Learn/Work and the Return to Play (GRTP) protocols (attached as Appendix A). These protocols are based on international best practice with the goal of helping players recover and get back to school/work and sport.

A medical clearance is required from a doctor before a return to full contact training. Although most players recover within the timeframes of 23 or 21 days, if a player is still displaying concussion symptoms, our advice would be that they seek further medical treatment.

To medically clear a player to return to contact training a doctor must ensure that the player completes the following:

Rest for a minimum of 48 hours

- Complete the GRTP up to the non-contact training stage
- Fully return to school or work
- Have not experienced symptoms when working/studying or when exercising
- If they have a baseline Sport Concussion Assessment Tool (SCAT) score, they should have returned to their baseline values.

Blue Card Concussion Management Procedure

If a player is shown a Blue Card during a match, this indicates that a referee has observed the player display a sign or symptom of a suspected concussion. The player must leave the field and complete the 21 or 23 day stand down.

Prior to their return to contact training, they are required to obtain medical clearance from a doctor.

A player who has received a Blue Card can only be cleared to return to play earlier than the 21 or 23 day stand down by a medical specialist approved by NZR. Please note that the threshold for rescinding a Blue Card is necessarily set extremely high and that in considering the matter NZR errs on the side of caution. Support for medical clearances for players with a Blue Card

A player who has received a Blue Card and who is presenting for a clearance from their medical practitioner to resume contact training can obtain a reimbursement for the ACC surcharge component of their GP visit fee. Players can obtain reimbursement by submitting the receipt for the consultation to their Blue Card Administrator.

Sport Concussion Assessment Tool (SCAT)

The SCAT is a tool that incorporates several tests that have been validated for the assessment of mild Traumatic Brain Injury (mTBI) or concussion and is freely available on the internet. It assesses symptoms, cognition, and balance. The current version is called the SCAT5. A child SCAT is available for use with children aged 5-12.

Medical practitioners being requested to medically clear players for contact training may wish to use this tool (or individual components thereof) in this assessment. The results obtained from the use of this tool are designed to aid the medical practitioner in reaching their decision, however it is not designed to be substituted for the medical practitioner's own clinical opinion. It is not mandatory to use this tool.

If you have interest in the use of an abbreviated concussion assessment tool that NZR has designed in collaboration with local GPs across NZ, please feel free to get in touch with Danielle Salmon at Danielle.salmon@nzrugby.co.nz .

Additional support for longer than expected concussion recoveries

For over 30 years, The New Zealand Rugby Foundation (NZRF) has provided support to NZ Rugby Players (and their families) who suffer serious total and permanent injuries playing our national game. In addition to the above protocols, for any players who have prolonged concussions symptoms (longer than 4 weeks) or who the doctor believes may require additional support, please feel free to share the contact details for the NZRF: Lisa Kingi-Bon 021 212 7399.

Thank you for your support as we work to improve the care of players who sustain a concussion in community rugby.

Kind regards,

Karen Rasmussen (NZR Medical Manager)

GRADUATED RETURN TO PLAY PROTOCOL

See the Graduated Return to Play stages outlined on the back cover of this booklet.

Algorithm of Blue Card Event

Player receives a blue card during a match.

(This includes players who are awarded Blue Card by the ref directly and those who are removed by the team with suspected concussion. This ensures that all players who are concussed or suspected of concussion enter the Graduated Return to Play (GRTP) protocol.



Referee submits name(s) to PU post-match.



Player and club receives a letter from the Provincial Union (Player may have already seen a doctor prior to this or the letter will suggest this happens - NZR do not pay for this and it is not compulsory)



Player completes the compulsory rest period, ensures asymptomatic and GRTP.



Player sees doctor after contact stage of GRTP but before playing.



Medical clearance received by Provincial Union



Player cleared to play

GRADUATED RETURN TO PLAY (GRTP)

All players diagnosed with a concussion or suspected concussion must go through the GRTP described in this poster. For more information talk to your coach, your local union, contact New Zealand Rugby or check out rugbysmart.co.nz



CONCUSSION

Rehabilitation Stage	Minimum Time	
	U19	19+
1 Rest / No Activity Avoid physical activity, thinking tasks and screens (TV, phone and laptops).	2 days	2 days
2 Light to moderate exercise Symptom guided activities such as walking, jogging or stationary cycling.	14 days	14 days
3 Moderate to high exercise Running drills, no impact activities.	2 days	1 day
4 Non-contact training drills Progression to more complex training drills: passing, catching, weight training.	2 days	1 day

MEDICAL CLEARANCE FROM DOCTOR

5 Full contact practice May participate in normal training activities (contact training).	2 days	2 days
6 Return to play Player rehabilitated.	1 day	1 day

RECOGNISE | REMOVE | RECOVER | RETURN

