# Sept-2023

# Vision Volleyball Club Member Handbook



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# **1. WELCOME TO THE VISION VOLLEYBALL CLUB**

The Board of Vision Volleyball Club (VVC) welcomes all of those returning to our Club and the many new athletes and families joining us this season. We truly appreciate that you have selected our club. It is our goal to help all of our athletes improve their skills and level of competitiveness while having fun playing the sport they are passionate about.

Established in 2009, the Vision Volleyball Club (formerly Wildcat) is a proud member of the Ontario Volleyball Association (OVA). We look forward to providing young, enthusiastic and hard-working volleyball players with an opportunity to learn and develop their skills in a competitive volleyball club system.

Vision is proud of our skilled coaching staff, the parent reps and volunteers that are focused on nurturing each athlete's experience this upcoming season. We are fortunate to have highly experienced coaching resources overseeing our programming.

As an athlete, whether you plan to pursue post-secondary competitive volleyball or take a recreational path, we hope to provide a solid, lifelong foundation for you.

The VVC website provides a source of information for our athletes, families and coaches. Our domain is <u>www.visionvolleyball.ca</u>. The website along with our social media feeds will provide vital information and updates to our members.



# 2. ORGANIZATIONAL STRUCTURE

The Vision Volleyball Club organization has been run by a dedicated group of coaches and parents from its inception. The VVC Board is made up of volunteers who are active in securing capable coaches for the VVC. They are responsible for the smooth operations of the VVC, establishing the fee structure as well as being committed to the development of the well-being of our athletes. The current organizational structure within the Vision Volleyball Club is available on our website.

# 3. IDENTITY OF THE VISION VOLLEYBALL CLUB

- The name of the organization shall be the "Vision Volleyball Club" herein referred to as the VVC.
- The official logo will be used for all VVC teams, and assorted VVC clothing:



- The official colours of the VVC shall be Royal blue, red, and/or white.
- All VVC teams shall wear warm ups, game and affiliated VVC clothing as approved by the VVC executive.
- The term "VVC activities" will be understood to include all activities in which any or all VVC executive, coaches, players, and/or parents are involved in the capacity of representing the VVC. These include, but are not limited to all meetings, practices, tournaments, the hosting of tournaments, fundraising ventures, and community events.

# 4. GOALS OF THE CLUB

The philosophy of the Vision Volleyball Club is driven by the objective for assisting in the development of a positive self-image for each VVC member within their team as well as within the VVC. We emphasize hard work, responsibility, dedication, self-discipline, good organizational skills, excellent physical fitness and sound basic volleyball techniques and tactics. Our Club goals are:

- To establish a continuum of teams that reflects our common goals for both male and female athletes.
- To establish the Vision Volleyball Club as one of the premier volleyball clubs in the province.
- To promote, foster and teach the sport of competitive volleyball and encourage training for competition, self-development, leadership and sportsmanship.
- To promote competitive volleyball for the enjoyment of each individual who participates in the program both from a training viewpoint and in competition as well.
- To promote volleyball as a lifetime activity that will enhance the physical fitness of all athletes throughout their lifetime.
- To attempt to provide opportunities for each member of the organization to train and compete at the highest level of competition for which they are capable.



- To reinforce the positive ideals of what it takes to participate at a competitive level in a team sport.
- To encourage and promote our athletes to train and perform to the best of their ability, on and off the court.
- To assist in the running of Vision Volleyball Camps for youth in our community that aid in the development of young athletes, and foster a passion for the game.

# 5. CLUB FEES

The current year's fees and payment schedule will be provided to parents early in the season at a team meeting. VVC fees are specific to each team's VVC internal classification and age group. For more detailed information on Team Classifications, please visit our website. All consideration has been made to make the fees fair and equitable for all teams. All costs are carefully formulated and calculated to offset the costs of running the VVC.

- All players are to be registered with the club through our online system. Payments can be made online by selecting instalments or pay in full. Post-dated cheques are acceptable and are to be made payable to the "Vision Volleyball Club". All post-dated cheques are to be handed in with your first payment.
- The club fees do not include any expenses for food or any extra OVA sanctioned tournaments (e.g. playing up a division, pre- or post-season tournaments, etc.). These are the responsibility of each athlete.
- Any NSF charges will require payment of <u>\$40</u>, by the responsible party.
- Trips to the Nationals or tournaments outside the OVA are not included in the Club fees. Coach's expenses, tournament fees and other associated expenses to these tournaments are the responsibility of the parents and their fundraising efforts for the VVC.
- All players' fees must be paid in full before commencing play on any team in the association unless the President in consultation with the treasurer has granted special circumstance.
- Prorated refunds to players will be considered by the Executive if a player has been released by the coach, a documented injury occurs that ends the player's season or the player is removed by the Executive. This is on a case-by-case basis.
- Players who remove themselves from the team will receive no refund.

# 6. PARTICIPATION ASSISTANCE FUND

## 6.1. Preamble

The Board of the Vision Volleyball Club (VVC) supports access to our Club teams by all interested and motivated athletes. A limited pool of funds has been set aside to address the financial needs of prospective players.

### 6.2. Process

Information is provided on the VVC website to notify parents of the availability of support and to encourage them to contact a Club representative. A subcommittee of the Board (participation support committee) is responsible for helping parents to quantify the level of support required in order for their



athlete to participate fully in Vision Volleyball. A member of this committee will attend the information night and registration night for each team in order to meet with parents and obtain the required information. The committee will meet prior to the coaches finalizing their respective team rosters and will notify parents regarding the plan for support. The support plan will specifically indicate any costs involved and the amount that can be transferred from the participation fund. The participation support committee can authorize use of monies from the participation fund up to a yearly maximum. Once this maximum has been reached, further funds can be released only with Board approval.

# 6.3. Limitations

It may not always be possible to provide the full level of support required by an athlete. There will be a limit to the amount of funds available in a given year in order to ensure the continuity of the fund. Priority will be given to individuals who are requesting financial support for the first time in order to provide at least one opportunity to participate in Vision Volleyball for the greatest number of players. Repeat requests will certainly be considered and in special circumstances the committee may explore other options such as individual sponsorship by service organizations or individual donors. Candidates may also be asked to provide proof that application has been made to other support organizations such as Jumpstart (http://jumpstart.canadiantire.ca/en/).

# 6.4. Timing of Requests

It is the responsibility of parents to identify the requirement for financial aid at the time of the athlete's registration. If a parent does not identify the need, then the VVC is not obligated to meet these needs on an ad hoc basis; however, it will make best efforts to do so in consultation with the Board.

# 6.5. Third Party Nomination

Athletes can also be nominated for financial support by a third party. For example, this could be a teacher or a fellow athlete who knows the athlete well and believes that he or she would be a strong candidate for a team. If this individual is able to provide the relevant information and has consent from the parent to share this with VVC, the request will go directly to the participation committee.

# 6.6. Confidentiality

Information gathered will be shared only with the members of the participation fund committee and will be destroyed at the end of each season.

# 7. CLUB FUNDRAISING AND SPONSORSHIPS

Teams must have VVC Executive approval for all fundraising events so that there will be no conflicts.

All funds raised by the VVC for Club fundraising becomes part of the VVC financials. All funds are used directly by the Club and VVC teams. No funds raised for the VVC will be refunded or returned to any team or individual.

If you, or someone you know is interested in assisting the Vision Volleyball Club with sponsorship, please contact the President (president@visionvolleyball.ca).



Vision Volleyball Club provides a developmental and training program geared to compete at an elite level. The goal of every team is to develop throughout the season and ultimately play to win the Provincial Championship and National Championship, or to finish as high as possible within their respective tier. Other than in OVA designated 'Fair-Play' age groups, playing time is earned through focus, hard work and dedication to practice, in weekly physical training, and demonstrated abilities on the court. Regardless of the roles that evolve over the season, all players and parents are expected to remain positive and committed to the individual goal of having each player develop to their maximum potential and the team goal of finishing their best throughout the season.

# 8.1. When Dealing with Player Concerns

#### In 17U and 18U:

- Players are expected to resolve concerns directly with the coaching staff. When a player is selected for a team their role on the team is communicated directly to them. If a player has an issue (e.g. playing time, role, etc.) they should talk to the coaching staff at an appropriate time.
- Unless a player has been physically or morally harmed, the athlete is encouraged to make every effort to resolve issues with coaches before involving parents or guardians. Since this is the environment that athletes will experience at higher levels (university or college, provincial, national or international) it is in the best interest of each athlete to develop the ability to resolve issues on their own.
- "What do I need to do to earn more playing time?" is an appropriate way to discuss playing time issues with coaching staff.

#### In 12U-16U age groups:

• Parents can assist players in communicating concerns to coaches, but it should always be done jointly and involve the player, whereby helping to develop communication and problem resolution in an effective manner for their future.

#### At all age groups:

- Please keep in mind that common sense is the rule. All coaches are volunteers and their main concern is the well-being of all of the players and the success of the team.
- Respect the coaches and the athlete's time. Meeting with a coach during a practice, or interrupting a coach during a practice session, or immediately after a game is disrespectful to the entire team. Meetings with coaches must be scheduled so as not to impact other players. Coaches should refuse requests for meetings that are not requested at an appropriate time, outside team time.
- Respect the 24 Hour Rule. Direct confrontation, especially when emotions are high, is counter-productive for everyone. The "24-hour rule" applies to all teams. Please do not talk to coaches about volleyball-related issues or team or player problems within 24 hours before or 24 hours after a tournament.
- Where possible, communicate issues through your team Parent Rep.

- If concerns still remain unresolved, players and their parents can communicate their concerns, in writing directly to the President. This step should only be taken after a player and parent has voiced their concerns to the coaches, without resolution.
- If deemed necessary, the President will engage the Conflict Resolution Committee Chairperson who will attempt to work to a resolution with the coaches, followed by a response they deem appropriate to the player and parent.

### 8.2. Off-Court Issues

Athletes are representatives of the Vision Volleyball Club and as such project our Club within the community.

Our athletes who wear their Vision clothing to school and in the community are acting as representatives of the Club. We expect our athletes to conduct themselves in an exemplary manner at all times.

When on the court, athletes are accountable to their coaches. When off the court, athletes are accountable to their coaches and to the Club. At all times athletes are required to uphold the high standards of the Club, both during the season and during summer months when participating in Club-sanctioned activities of Volleyball Canada or the OVA (e.g. Fundamentals program, Athlete Development Program and Regional Team Training Centre, High Performance Centre, Team Ontario).

Our athletes are required to sign our Athlete Code of Conduct, which covers behaviour both on and off the court. Inappropriate behavior on or off-court can be grounds for removal of the player from the Club.

Dealing with off court-issues is the responsibility of the Club Conflict Resolution Committee.

- All concerns should be addressed to the Conflict Resolution Committee Chairperson. This is the starting point for all concerns.
- Feel free to discuss issues with members of the Club Executive Directors.

## 8.3. Escalating Issues to Region 2 or OVA

In the rare event that you have not been able to adequately resolve an issue at the Club level, or if it is an issue that goes beyond the Club, we ask that you escalate the issue to our OVA Region 2 Executive or the OVA in accordance with the OVA Discipline and Complaints Policy.



The Club requires its members, including athletes, coaches, executive and parents, to abide by the Codes of Conduct they have signed, and by other stated Club policies. This procedure applies to misconduct violations of the codes or policies.

**Bullying and Harassment** is a specific form of violation of Club policies. It is the policy of the Club that there be no harassment, abuse or bullying of any member athlete, official, coach or executive involved in any of our programs. The Club expects all members to take reasonable steps to safeguard all members against harassment, abuse and bullying. As agreed to in our Code of Conduct agreements, during the course of all Club programs, all members shall conduct themselves, at all times, in a fair and responsible manner and refrain from comments or behaviour that are disrespectful, offensive, abusive, racist or sexist. In particular, the Club will not tolerate behaviour that constitutes harassment, abuse or bullying.

## 9.1. Definitions

**Member.** Athletes, coaches, executive and parents who have agreed to abide by (signed) a club Code of Conduct.

**Abuse.** Child abuse is any form of physical, emotional and/or sexual mistreatment or lack of care which causes physical injury or emotional damage to a child. A common characteristic of all forms of abuse against children or youth is an abuse of power or authority and/or breach of trust.

Circumstances under which a person has a legal duty to report to report child abuse are defined under Section 72 of the Child and Family Protection Act, Revised Statutes of Ontario 1990, Chapter C.11.

**Harassment.** Harassment is offensive behavior – emotional, physical and/or sexual – that involves discrimination against a person because of their race, national or ethnic origin, age, colour, religion, family status, sexual orientation, sex or gender, disability, marital status, or pardoned conviction.

**Bullying.** Bullying is intentionally hurting someone in order to insult, humiliate, degrade or exclude him or her. Bullying can be broken down into four categories: physical, verbal, relational (for example, trying to cut off victims from social connection by convincing peers to exclude or reject a certain person), and reactive (for example, engaging in bullying as well as provoking bullies to attack by taunting them).

# 9.2. Lodging a Complaint

Any member can submit a complaint in writing ("Written Complaint"), directed to the Club Conflict Resolution Committee Chairperson as published on the Club website. The Written Complaint must be submitted within 14 days of the incident that has occurred. The Written Complaint must be submitted by completing the Club "Incident/Complaint Report Form" which is attached hereto as "Appendix G"

The complaint should identify the parties involved, the nature of the violation, and provide sufficient evidence to substantiate the complaint. The complaint can optionally identify other parties who can substantiate the violation.



### 9.3. Receiving a Complaint

When a Written Complaint is received it will be addressed within a reasonable timeframe.

The Club will acknowledge receipt of a complaint within 48 hours.

- a) All complaints will be treated by the Club in a confidential manner that safeguards any members involved.
- b) Upon acknowledgement of the complaint, the Club will begin investigation of the said complaint.

### 9.4. Investigation

When there is a complaint of alleged **abuse** of a child participant there will be no investigation by the Club. Any investigation will be conducted by the police or the appropriate child protective agency.

When there is a complaint of any other violation the Club will begin investigating the complaint once it has been acknowledged.

- a) The Club will gather information from the parties involved.
- b) Prior to extensive investigation, the Conflict Resolution Committee has the authority to dismiss frivolous and/or vexatious complaints.
- c) Any member of the Club who is the subject of a complaint of harassment, abuse or bullying may be suspended from their position, or made subject to other precautionary measures, for the duration of an investigation.
- d) Where possible, the Club will resolve the issue by a meeting of all parties involved.
- e) If the respondent acknowledges the facts of the incident, the respondent may waive the hearing in which case the panel will determine the appropriate action.
- f) If the issue cannot be resolved by a meeting, or when warranted by the seriousness of the complaint, the Club will conduct a Disciplinary Hearing.

## 9.5. Disciplinary Hearing

If, based on initial investigation, the Club determines that a Disciplinary Hearing is required, it will convene a hearing within 21 days of acknowledgment of the complaint.

- a) The Club will identify a Disciplinary Panel, which may consist of a single adjudicator, or an adjudicator and up to two additional panel members, at the Club's discretion.
- b) The complainant and all other parties involved in the complaint will be asked to provide written responses to the Disciplinary Panel, prior to the hearing.
- c) The complainant and all other parties involved in the complaint will be invited to attend the Disciplinary Hearing to provide evidence supporting their position in the complaint. The hearing may be in person, or by telephone.
- d) The Disciplinary Panel will consider the evidence presented and communicate a decision to the Complainant and other parties within 14 days of the hearing.
- e) At their discretion, the Disciplinary Panel may choose to meet with parties individually, to safeguard the identity and confidentiality of parties involved in the complaint.



The following decisions resulting from any investigation may be made:

- a) The complaint is with merit;
- b) The complaint is without merit;
- c) There is insufficient information to enable a conclusive decision to be made; or
- d) The complaint is outside of the jurisdiction of the investigating body.

### 9.7. Reporting

Disclosure of any part of the disciplinary report, will be provided at the discretion of the Club's executive directors, and where third party confidentiality is required the report may not be provided. Upon final determination, a summary report may be available to the relevant parties who may include, but are not limited to, the person who initiated the complaint, the person(s) against whom the complaint was made, and any person(s) against whom any adverse finding is made.

### 9.8. Disciplinary Action

The following disciplinary actions may result from the investigation of a complaint or a Disciplinary Hearing:

- a) Verbal apology;
- b) Written apology;
- c) Letter of reprimand from the Club;
- d) Referral to counseling;
- e) Mediation between the parties to resolve the issue;
- f) Removal of certain privileges of membership;
- g) Temporary suspension of the member;
- h) Permanent suspension of the member;
- i) Other consequences deemed appropriate by the Disciplinary Panel.

Any member of the Club who knowingly brings a false complaint may be disciplined up to and including removal from the Club.

Any member of the Club who is discovered by means other than a police criminal record check to have a conviction that may have an impact on their position, may be disciplined up to and including removal from the Club.



# 9.9. Disciplinary Action Pending a Hearing

Upon investigating, the Club may decide that the misconduct is serious enough that any of the Disciplinary Actions may be applied immediately, pending a Disciplinary Hearing.

# 9.10. Confidentiality

The discipline and complaints process is confidential, and no party can divulge information related to the complaint, investigation, hearing, or decision to any person not involved in the disciplinary process.

The decision will become a matter of public record, unless decided by the Panel to remain confidential.

# 9.11. Appeal of Decision

Any decision undertaken by this disciplinary process can be appealed to the OVA according to the OVA Appeal Policy.



# APPENDIX A – ATHLETE CODE OF CONDUCT

As a member of the Vision Volleyball Club you are expected to conduct yourself in a manner that demonstrates good sportsmanship and a respect for others at all times. It is essential that you support your fellow teammates, your coaches and your Club, to the best of your ability.

As an athlete you will be expected to adhere to the following standards of behaviour throughout the volleyball season. Failure to adhere to these principles is grounds for dismissal from the Club.

- Good sportsmanship is always the first priority.
- Respect your fellow teammates, your coaches, and your Club, and support them to your utmost in your team endeavors.
- Embrace your role on the team, as explained to you by your coaches, and execute that role to the best of your ability.
- Treat all opposing athletes, coaches, officials and spectators with respect, and use only appropriate language.
- Abide by, and accept gracefully, the decisions of the officials, no matter which team those decisions may favour.
- Demonstrate appreciation for, and applaud good play, and never make derogatory remarks about officials, coaches or the athletes of any team.
- Respect and care for the facilities in which practices and competitions are being held, and listen to those in authority.
- Be aware of, and abide by, the regulations and "Code of Conduct" of the Ontario Volleyball Association. The OVA Code of Conduct is attached as "Appendix E"
- Exhibit the same standard of behaviour when out in public and on social media, as you do on the court. Realize that when off the court, especially when wearing Club attire, you are a representative of Vision Volleyball.
- We encourage our athletes to use social media to celebrate accomplishments and comment on their season. In doing so, we expect our athletes to refrain from posting comments which are negative or disrespectful to other athletes, teams or clubs. Any form of cyber-bullying will not be tolerated, and sanctions will be imposed.

I understand and agree to be held accountable for adhering to the Athlete's Code of Conduct as stated. Failure to do so will result in disciplinary actions which are in place according to the Club's policies in effect at the time.

Printed Name: \_\_\_\_\_

Signature:	

Date: \_\_\_\_\_



# **APPENDIX B – PARENT CODE OF CONDUCT**

As a parent/guardian/member of the Vision Volleyball Club your child is expected to conduct themselves in a manner that demonstrates good sportsmanship and a respect for others, at all times. Similarly, it is essential that you, as their parents/guardians, also display and model behavior that is consistent with the highest ideals of good sportsmanship.

As a parent, you are expected to adhere to the following standards of behaviour before, during and after any practice or competition:

- Good sportsmanship is always the first priority. Respect all athletes, coaches, officials, and spectators.
- Abide by, and accept gracefully, the decisions of officials, no matter which team those decisions may favor.
- Respect and care for the facilities in which practices and competitions are being held, and listen to those in authority.
- Respond politely to the requests of event organizers.
- Be polite and courteous as a spectator, and use appropriate language only.
- Refrain from any behaviour which might distract players or interfere with the progress of a match.
- Demonstrate an appreciation for, and applaud good play, and never make derogatory remarks about officials, coaches or the athletes of any team.
- Be aware of, and abide by, the contents of the Club's Parent/Player Handbook.
- Be aware of, and abide by, the regulations and "Code of Conduct" of the Ontario Volleyball Association. The OVA Code of Conduct is attached as "Appendix E"
- Should concerns arise resulting from a practice or competition, abide by the "**24-hour rule**", that is, do not approach coaches within 24 hours prior to a competition, and do not approach coaches until at least 24 hours has passed since the circumstances giving rise to a concern.
- We encourage our parents to use social media to celebrate accomplishments and comment on their season. In doing so, we expect our parents to refrain from posting comments which are negative or disrespectful to other athletes, teams or clubs. Any form of cyber-bullying will not be tolerated, and sanctions will be imposed.

I understand and agree to be held accountable for adhering to the Parent's Code of Conduct as stated. Failure to do so will result in disciplinary actions which are in place according to the Club's policies in effect at the time.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# **APPENDIX C – COACH'S CODE OF CONDUCT**

As a coach of the Vision Volleyball Club you are expected to conduct yourself at all times in a manner that demonstrates good sportsmanship and a respect for others. You will adhere to the following standards of behaviour throughout your involvement with the Club. Failure to adhere to these principles is grounds for dismissal from the Club.

- Treat your athletes with respect. Never do anything to harm athletes entrusted to your care, either mentally, morally or physically.
- Develop each of your athletes to their full potential.
- Respect your fellow coaches, and support them to your utmost in your team endeavors. Understand your role on the coaching staff and execute that role to the best of your ability.
- Respect all officials, opposing athletes and coaches, and spectators, and use only appropriate language.
- Abide by, and accept gracefully, the decisions of officials, no matter which team those decisions may favour.
- Demonstrate appreciation for and applaud good play, and never make derogatory remarks about officials, coaches or the athletes of any team.
- Respect and care for the facilities in which practices and competitions are being held, and listen to those in authority.
- Be aware of and abide by the regulations and "Code of Conduct" of the Ontario Volleyball Association. The OVA Code of Conduct is attached as "Appendix E"
- Exhibit the same standard of behaviour when out in public, as you do on the court. Realize that when off the court, especially when wearing Club attire, you are still a representative of Vision Volleyball.
- We encourage our coaches to use social media to celebrate accomplishments and comment on their season. In doing so, we expect our coaches to refrain from posting comments which are negative or disrespectful to other athletes, teams or clubs. Any form of cyber-bullying will not be tolerated, and sanctions will be imposed.
- Should concerns arise between parents/guardians or spectators, abide by the "24-hour rule", that is, do not approach them until at least 24 hours has passed since the circumstances giving rise to a concern.

I understand and agree to be held accountable for adhering to the Coach's Code of Conduct as stated. Failure to do so will result in disciplinary actions which are in place according to the Club's policies in effect at the time.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# APPENDIX D – PERSON IN AUTHORITY (PIA) CODE OF CONDUCT Safesport - Abuse Prevention

As per the November 28<sup>th</sup>, 2018 Vision Volleyball Club Board meeting, a Motion was unanimously passed by the members in attendance, that the club would adopt into its handbook, as written, the OVA's Person in Authority (PIA) Code of Conduct. This document is below and is noted as Appendix D.

#### Introduction

1. Coaches play a vital role in shaping the youth of tomorrow through sport. The OVA relies on them and other persons in authority to be role models and to put young athletes on a path to success. The dynamic between coach and athlete gives rise to a power imbalance and a culture of unquestioned trust that can result in abuse. As such, it is imperative that all persons in positions of authority be held to a high standard of conduct. Abuse in sport, particularly sexual abuse and the grooming behaviour that precedes it, destroys the positive impact of sport and causes untold harm to victims and those around them. Consequently the OVA has a strong obligation to establish and maintain systems that prevent abuse and respond to conduct that poses risk to OVA athletes.

#### Purpose of Code

- 2. The OVA values the safety, rights and well-being of our athletes and their families. It is the responsibility of every OVA club, coach, volunteer and staff member to participate in the effort to create a safe environment for all OVA participants.
- 3. This Person in Authority Code of Conduct is intended to protect OVA participants from abuse. It provides guidelines for conduct that are consistent with the development of healthy relationships between adult persons in authority and youth sport participants. The Code provides behaviour guideposts that identify inappropriate or concerning behaviour at an early stage to help better protect athletes and coaches.

#### Objectives

4. This Code of Conduct establishes boundaries for persons in authority and requires that those boundaries be respected and maintained. Defining and teaching appropriate boundaries reduces a young person's risk of sexual exploitation and the likelihood of being groomed. Grooming is a slow gradual and escalating process of building comfort and trust with a young person that is often very difficult to recognize. The process allows for inappropriate conduct to become normalized. It is often preceded by the grooming of an adult 'gatekeeper' (who provides access to the young person) to build confidence and comfort that the individual can be trusted with the care of the young person. Behaviour that presents risks often begins by breaking boundaries with children and adolescents. Boundary violations can occur when the adult places his/her needs above the needs of the young person and gains personally or professionally at the young person's expense.



5. The boundaries established in this Code are intended to protect athletes from grooming, inappropriate, abusive, discriminatory and harassing behaviour. By identifying behaviour that violates boundaries, the risk of abuse to athletes is reduced and expectations for the conduct of persons in authority are clearly outlined.

#### Definitions

- 6. a. "Persons in authority" (PIA) includes any person who holds a position of trust or authority over an "Athlete" pursuant to the role assigned to them by the OVA or an "OVA Decision Maker". PIAs include but are not limited to coaches, managers, trainers, officials, staff, administrators, club directors, third party service providers (i.e. strength and conditioning trainers or yoga instructors), and volunteers.
  - b. "Athlete" is any OVA member under the age of 18 years or any player on an OVA team. It includes but is not limited to a player, coach, official, volunteer, or any player attending a try-out for an OVA club prior to the player's registration with the OVA.
  - c. "OVA Decision Maker" is a person who is authorized to make a decision on behalf of the OVA or an OVA club and includes but is not limited to OVA or club staff, coaches, directors and administrators.
  - d. "Inappropriate behaviour" includes conduct by a PIA toward an athlete that involves any form of sexualized interaction or that constitutes a boundary violation or is associated with grooming behaviour.
  - e. A "Child in need of protection" is any athlete whose life, health, or emotional well-being is endangered by the act or omission of any person.

#### Application of this Code

- 7. This Code applies to conduct that may arise during the course of OVA business activities and events, including but not limited to its office environment, competitions, practices, training camps, tryouts, travel and any meetings of the OVA.
- 8. This Code also applies to the conduct of PIAs that may occur outside of the OVA's business activities events and meetings when such conduct adversely affects relationships within the OVA (and its work and sport environment) or is detrimental to the image and reputation of the OVA. Such applicability will be made by the OVA in its sole discretion.
- 9. Behaviour referred to in this Code of Conduct includes:
  - a. One-time or continuous behaviour
  - b. Conduct directed at an individual or group
  - c. Conduct that was without intent to abuse power or trust
  - d. Conduct that was without intent to harass or discriminate
- 10. This Code comes into effect on September 1, 2018. A report regarding a breach of this Code may be made at any time after the breach.
- 11. There is no time limitation on the period to report a breach of this Code as long as the parties met the definitions of a PIA and an Athlete at the time of the conduct in issue.



- 12. All PIAs must comply with this Code of Conduct including the reporting requirements.
- 13. All PIAs must treat young persons with dignity and respect.
- 14. <u>Rule of Two</u>

Any one-on-one interaction between a PIA and an individual athlete must take place within earshot and view of a second PIA. If possible one of the PIAs should be the same gender as the athlete. If a PIA is not available, another screened volunteer, parent or adult can be recruited. An exception is made for medical emergencies.

15. <u>Importance of maintaining boundaries</u> All PIAs must establish, respect and maintain appropriate boundaries with athletes.

#### Prohibited Behaviour by Persons in Authority

- 16. A PIA must not engage in inappropriate behaviour or grooming behaviour.
- 17. In assessing whether behaviour is inappropriate one should consider whether the behaviour would raise concerns in the mind of a reasonable observer. The behaviour may also be assessed by determining whose needs are being met (the athlete or the PIA) and what objective appears to be guiding the interaction.

#### 18. <u>Grooming Conduct Specifically Prohibited</u>

A PIA shall not engage in the following:

- a. Nudity or exposure of genitals in the presence of an athlete;
- b. Sexually oriented conversation or discussions about personal sexual activities;
- c. Spending time with an individual athlete outside of team activities;
- d. Excessive gift-giving to an individual athlete;
- e. Socially isolating an athlete;
- f. Restricting an athlete's privacy;
- g. Providing drugs, alcohol or tobacco to an athlete;
- h. Becoming overly-involved in an athlete's personal life;
- i. Making sexual or discriminatory jokes or comments to an athlete;
- j. Displaying material of a sexual nature in the presence of an athlete;
- k. Mocking or threatening an athlete.

#### 19. Physical Contact Specifically Prohibited

A PIA shall not engage in the following:

- a. Physical contact that does not take place in public;
- b. Physical contact that is not for benefit of the athlete (i.e. instead it meets an need of the PIA);
- c. Lingering or repeated embraces with an athlete;
- d. Having an athlete sit on the lap of a PIA or making such a request;
- e. Cuddling or prolonged physical contact with an athlete;
- f. Butt-pats, tickling wrestling horseplay with one or more athletes;
- g. Giving massages, piggyback rides or shoulder rides to an athlete;
- h. Continued physical contact that makes the athlete uncomfortable whether expressed or not;
- i. Physical contact that an athlete has specifically requested not occur.



#### 20. <u>Harassment and Discrimination Prohibited</u>

A PIA shall not engage or participate in the following:

- a. Hitting, pushing, punching, beating, biting, striking, kicking, choking, slapping or purposely injuring an athlete;
- b. Displaying offensive materials, gestures or symbols to an athlete;
- c. Negative or disparaging comments about an athlete's disability, ethnicity, religion, race, sexual orientation, gender, gender expression or gender identity;
- d. Withholding or reducing playing time to an athlete based on the athlete's disability, ethnicity, religion, race, sexual orientation, gender, gender expression or gender identity;
- e. Overlooking hazing or other activity that is humiliating, degrading, abusive or dangerous to an athlete.

#### Mandatory Communication Protocol for Persons in Authority

- 21. All persons in authority must comply with the following protocol when communicating with athletes:
  - a. Group messages, group emails or team pages are to be used as the regular method of communication between PIAs and athletes;
  - b. PIAs may only send personal texts, direct messages on social media or emails to individual athletes when necessary and only for the purpose of communicating information related to team issues and activities;
  - c. The content of all electronic communication between PIAs and athletes must be professional in tone and for the purpose of communicating information related to team issues or activities;
  - d. All communication between PIAs and athletes must be between 6 am and 12 am unless extenuating circumstances exist;
  - f. No communication concerning drugs or alcohol use (unless regarding its prohibition) is permitted between PIAs and athletes;
  - g. No sexually explicit language or sexually oriented conversation is permitted between PIAs and athletes;
  - h. PIAs are not permitted to request athletes to keep a secret for them;
  - i. PIAs may not send inappropriate or sexually explicit pictures or videos to athletes.

#### Mandatory Travel Protocol for Persons in Authority

- 22. All persons in authority must comply with the following protocol concerning transporting and traveling with athletes:
  - a. No PIA shall drive an athlete alone unless the PIA is the parent of the athlete (see Rule of two).
  - b. A PIA may not share a room with an athlete unless the PIA is that athlete's parent.
  - c. A PIA may not be alone in a hotel room with an athlete unless the PIA is that athlete's parent.

#### **Reporting Requirements**

- 23. All PIAs have a duty to report allegations or suspicions regarding inappropriate behaviour to the OVA. This can be done by email at: <u>Safesport@ontariovolleyball.org</u>.
- 24. Conduct that violates this code may be subject to the sanctions of the OVA's Discipline and Complaints Policy. The OVA will have the discretion to consult with the affected athlete and PIA and will apply a contextual analysis taking into account the purpose and objectives of the Code.



25. A person that learns of a "child in need of protection" must report to a Children's Aid Society under the Ontario Child Youth Family Services Act. This legal obligation includes a situation where a person becomes aware of the sexual abuse or exploitation of a child at the hands of a person having charge of the child. To locate your local Children's Aid Society click on: <a href="http://www.oacas.org/childrens-aid-child-protection/locate-a-childrens-aid-society/">http://www.oacas.org/childrens-aid-child-protection/locate-a-childrens-aid-society/</a>



#### Introduction

1. Vision Volleyball respects the privacy of our players. The personal information you share with us will be used to manage your membership and to communicate with you about our practice and game schedules. It will not be sold, traded or rented to any other organization. "Personal information" includes any information that can be used to identify you as an individual, including your name, address, credit card details, phone number, age, passport information, medical history and any other personally identifiable information you choose to provide to Vision Volleyball. This Privacy Policy sets out the Personal Information practices for Vision Volleyball.

We may update this Policy from time to time. You are responsible for reviewing the most current version of the Policy. This Policy was last amended on the date shown at the end of the Policy.

#### What Personal Information Do We Collect?

- 2. We collect information that is required for use when hosting tournaments, teams, and camps. This may include: name; mailing address; e-mail; telephone number(s); passports; financial details necessary in order to process various transactions and any other information you may elect to provide to us. Some of this information is collected via LeagueApp.com.
  - i. Disclosure of Information to the Ontario Volleyball Association The information you offer to LeagueApp is then collected and forwarded to the Ontario Volleyball Association. By submitting your personal information to Vision Volleyball through LeagueApp, you are agreeing to it being forwarded to the Ontario Volleyball Association for their records.

#### ii. Collection of Personal Information for Children and Adults

If you are under 18, please obtain your parent or guardian's permission before you send any personal information to Vision Volleyball or LeagueApp. If you are under the age of 13, we encourage you to use the site with your parents' supervision and oversight. We do not intend to collect personal information of children who are under the age of 13. If you are under the age of 13, you must submit the parental consent form.

#### iii. Security and Storage of Information

We take all reasonable precautions, including appropriate physical, electronic, and managerial security procedures, to ensure that your personal information is kept from loss, unauthorized access, modification, or disclosure, and to limit access to your personal information to those employees who may need it for use in accordance with our Privacy Policy. Your data may be transferred and stored on servers and storage locations including but not limited to the USA and Canada. This would be the responsibility of third-party sites that we coordinate with, such as LeagueApp.



#### iv. Duration of Storage of Personal Information

We keep your personal information as long as is reasonably necessary or as may be required by law, whichever period is longer. Should you withdraw consent for the use of your personal information, our copies of your personal information will be destroyed.

#### **Camera Policy**

3. We understand that as parents, you may wish to take pictures of the players during practices and games. By agreeing to this policy, you are agreeing to allow pictures of players to be taken for private use. Pictures may be used for publications about the team in various media and social media outlets. By signing the Consent Form, you have agreed to the use of these pictures as outlined above.

#### Access and Correction of Personal Information

4. You are able to access and correct any personal information we may have relating to you or those in your care. To do this, please contact us by e-mail at **visionvolleyball.ca** 

#### **Refusal or Withdrawal of Consent**

5. You may withdraw your consent for the use of your personal information previously obtained by us at any time. Please be advised that withdrawal of consent previously given, or refusal of consent to offer personal information, may affect the manner in which you or your player may be notified of information related to practices, games, or other events.

#### **Feedback and Complaints**

6. We welcome your inquiries or comments about our Privacy Policy. Should you have any questions, comments, concerns, or complaints please contact us at **visionvolleyball.ca** 

#### **Changes to Our Privacy Policy**

7. It may be necessary for us to review and revise our privacy policy occasionally. We reserve the right to change our privacy policy at any time. Should there be any changes that affect you or your information, you will be informed accordingly.

By signing below, you are agreeing to the conditions outlined in this Privacy Policy.

Print parent/guardian name

Signature of parent/guardian

Date



# **APPENDIX F: CONCUSSION POLICY AND PROTOCOL**

# \*NOTE\* This Policy does not constitute any medical advice and does not contain any medical diagnoses, symptom assessments or medical opinions.

Adapted in part from: Parachute. (2017). Canadian Guideline on Concussion in Sport.

#### Preamble

Pursuant to Rowan's Law (Concussion Safety), 2018, S.O. 2018, c. 1, and at the direction of the Province of Ontario, every sport organization shall establish and make available to its members (Clubs, Athletes, Coaches, Parents/Guardians, Trainers), a Concussion Policy and Protocol. The OVA has made available, as Appendix IX of its 2019/2020 Youth Competitions Manual, its Concussion Policy and Protocol. Therefore, as a member club in good standing with the Ontario Volleyball Association (OVA), and under the same Province of Ontario directive, the Vision Volleyball Club (VVC) must provide and make available to its own club members a Concussion Policy and Protocol.

One of the primary goals of the Vision Volleyball Club is to provide a safe sporting environment for all of our athletes, coaches, trainers and members. The education and awareness of concussions is an important part of being able to accomplish this goal. This Policy is one of the many tools that VVC has at its disposal to help fulfill its commitment to protect its members from harm.

#### Policy

It is the policy of the Vision Volleyball Club (VVC) to provide a safe environment that promotes the well-being of our athletes, coaches and members and takes steps to reduce the risk of injury. As such, we are committed to increasing awareness for all members to support the timely and proper management of concussions. It is extremely important to our athlete's long-term health that they be given the education and awareness to minimize the risk of concussions.

As such, no Vision Volleyball Club athlete, suspected of having a concussion, shall be allowed to return to play until such time as they have completed the appropriate Return-to-School and Return-to-Play protocols, and are 100% clear of any symptoms and signs of concussion and have been cleared by a medical professional using the appropriate medical assessment and clearance forms.

#### Purpose

This protocol covers the education, recognition, medical diagnosis, and management of athletes, players, coaches and trainers who may sustain a suspected concussion during a sport activity. It aims to ensure that athletes with a suspected concussion receive timely and appropriate care and proper management to allow them to return back to their sport safely. This protocol may not address every possible clinical scenario that can occur during sport-related activities but includes critical elements based on the latest evidence and current expert consensus.

The protocol has been broken down into 7 chronological sections to assist caregivers, athletes, coaches and trainers, clear understanding as to where an athlete is in respect to the recovery pathway.



#### Who should use this protocol?

This protocol is intended for use by all individuals who interact with athletes inside and outside the context of school and non-school based organized sports activity, including athletes, parents, coaches, officials, teachers, trainers, and licensed healthcare professionals.

For a summary of the Vision Volleyball Club Concussion and Recovery Pathway, please refer to the flowchart at the end of this document.

#### **1.0** Pre-Season Education

Despite recent increased attention focusing on concussion there is a continued need to improve concussion education and awareness. Optimizing the prevention and management of concussion depends highly on annual education of all sport stakeholders (athletes, parents, coaches, officials, teachers, trainers, licensed healthcare professionals) on current evidence-informed approaches that can prevent concussion and more serious forms of head injury and help identify and manage an athlete with a suspected concussion.

#### CONCUSSION AWARENESS RESOURCE

A concussion awareness resource prepared and reviewed annually by the Ministry or a Ministry recognized organization providing guidelines on concussion in sport. This resource provides information about concussions and the Vision Volleyball Club and the OVA will require signed acknowledgement by all Individuals that the information has been reviewed annually prior to being registered.

#### WHAT IS A CONCUSSION?

- a. Is a brain injury that causes changes in how the brain functions, leading to symptoms that can be physical (e.g., headache, dizziness), cognitive (e.g., difficulty concentrating or remembering), emotional/behavioural (e.g., depression, irritability) and/or related sleep (e.g., drowsiness, difficulty falling asleep);
- b. Any blow to the head, face or neck, or somewhere else on the body that transmits a force to the head that causes the brain to move rapidly within the skull. Examples include getting body-checked in hockey or hitting one's head on the floor in gym class;
- c. Can occur even if there has been no loss of consciousness (In fact most concussions occur without a loss of consciousness); and
- d. Cannot normally be seen on X-rays, standard CT scans or MRIs.

*NOTE: Definition adapted from, Ministry of Tourism, Culture and sport Concussion Guideline.* 

#### WHEN SHOULD I SUSPECT A CONCUSSON?

A concussion should be suspected in any athlete who sustains a significant impact to the head, face, neck or body and reports ANY symptoms or demonstrates ANY visual signs of a concussion. A concussion should also be suspected if an athlete reports ANY concussion symptoms to one of their peers, parents, teachers, or coaches or if anyone witnesses an athlete exhibiting ANY of the visual signs of concussion. Some athletes will develop symptoms immediately while others will develop delayed symptoms (beginning 24-48 hours after the injury).



#### WHAT ARE THE SYMPTOMS AND SIGNS OF A CONCUSSION?

A person does not need to be knocked out (lose consciousness) to have had a concussion. Symptoms and signs may have delayed onset and may become worse later in the day or even the next morning. Athletes should continue to be observed even after initial symptoms and signs may have appeared to return to normal. This is imperative to reduce the risk of 2<sup>nd</sup> impact syndrome. It should also be noted that 'symptoms' are generally what a concussed athlete will 'feel' and 'signs' are generally what others may see or notice.

#### **Common Symptoms include:**

- Headaches or head pressure
- Dizziness
- Nausea and vomiting
- Blurred or fuzzy vision
- Sensitivity to light or sound
- Balance problems
- Feeling tired or having no energy
- Not thinking clearly
- Feeling slowed down

#### Visual signs of a concussion may include:

- Lying motionless on the playing surface
- Facial injury after head trauma
- Balance, gait difficulties, motor incoordination, stumbling, slow labored movements
- Watery eyes

- Easily upset or angered
- Sadness
- Nervousness or anxiety
- Feeling more emotional
- Sleeping more or sleeping less
- Having a hard time falling asleep
- Difficulty working on a computer
- Difficulty reading
- Difficulty learning new information
- Slow to get up after a direct or indirect hit to the head
- Clutching Head
- Disorientation or confusion or inability to respond appropriately to questions
- Blank or vacant stare

#### WHAT IS 2ND IMPACT SYNDROME?

Second impact syndrome is serious as it occurs when an individual experiences a second or multiple subsequent concussions before the symptoms of the initial concussion have resolved. It can result in rapid and potentially fatal brain swelling.

#### WHAT SHOULD I DO IF I SUSPECT A CONCUSSON?

If any athlete is suspected of sustaining a concussion during sports they should be immediately removed from play. Any athlete who is suspected of having sustained a concussion during sports must not be allowed to return to the same game or practice.

It is important that ALL athletes with a suspected concussion undergo medical assessment by a medical professional, trained in concussion protocols as soon as possible. It is also important that ALL athletes with a suspected concussion receive written medical clearance from a medical professional before returning to sport activities.



#### WHEN CAN THE ATHLETE RETURN TO SCHOOL AND SPORTS?

It is important that all athletes diagnosed with a concussion follow a step-wise return to school and sports-related activities that includes the following Return-to-School and Return-to Sports Strategies. It is important that youth and adult student-athletes return to full-time school activities before progressing to stage 5 and 6 of the Return-to-Sport Strategy.

#### HOW CAN I HELP PREVENT CONCUSSIONS AND THEIR CONSEQUENCES?

Concussion prevention, recognition and management require athletes to follow the rules and regulations of their sport, respect their opponents, avoid head contact and report suspected concussions.

#### HOW LONG WILL IT TAKE FOR THE ATHLETE TO RECOVER?

Most athletes who sustain a concussion will make a complete recovery within 1-2 weeks while most youth athletes will recover within 1-4 weeks. Approximately 15-30% of patients will experience persistent symptoms (>2 weeks for adults; >4 weeks for youth) that may require additional medical assessment and management.

#### 2.0 Head Injury Recognition

Although the formal diagnosis of concussion should be made following a medical assessment, all sport stakeholders including athletes, parents, coaches, officials and licensed healthcare professionals are responsible for the recognition and reporting of athletes who may demonstrate visual signs of a head injury or who report concussion-related symptoms. This is particularly important because many sport and recreation venues will not have access to on-site licensed healthcare professionals.

#### A CONCUSSION SHOULD BE EXPECTED:

- In any athlete who sustains a significant impact to the head, face, neck, or body and demonstrates ANY of the visual signs of a suspected concussion or reports ANY symptoms of a suspected concussion as detailed in the *Concussion Recognition Tool 5* (CRT5 copy included).
- If a player reports ANY concussion symptoms to one of their peers, parents, teachers, or coaches or if anyone witnesses an athlete exhibiting any of the visual signs of concussion.
- If a player receives an impact, and after a CRT5 review does not show any symptoms or signs of concussion, the player may be returned to play but must be monitored. If the athlete subsequently develops symptoms or signs of concussion they must be removed from play at that point and enter the recovery pathway at Step 2 – Head Injury Recognition by medical professional.

It is important for all stakeholders, and most importantly our coaches and team staff to be able to recognize the signs of a potential concussion. As there may or may not be a loss of consciousness, there is always a temporary loss of some brain function which may result in the player being: dazed, slow to respond to questions or other stimuli, blurred vision, difficulty concentrating, dizziness, irritability, nausea, vomiting or headache. A few or all of these symptoms may occur. The coach's role is not to make a firm diagnosis, but to recognize the symptoms and signs and to recognize that the athlete is at risk, remove him/her from sport and ensure that the athlete is medically assessed.

In some cases, an athlete may demonstrate signs or symptoms of a more severe head or spine injury including convulsions, worsening headaches, vomiting or neck pain. If an athlete demonstrates any of these 'Red Flags' indicated by the Concussion Recognition Tool 5, a more severe head or spine injury should be suspected, and Emergency Medical Assessment should be pursued.

*NOTE:* Children are more sensitive to the effects of a concussion and may need to have a longer period of rest prior to returning to activity and the sport.

### **3.0 Onsite Medical Assessment**

Depending on the suspected severity of the injury, an initial assessment may be completed by emergency medical professionals or by an on-site licensed healthcare professional where available. In cases where an athlete loses consciousness or it is suspected an athlete might have a more severe head or spine injury, Emergency Medical Assessment by emergency medical professionals should take place (see 3a below). If a more severe injury is not suspected, the athlete should undergo Sideline Medical Assessment or Medical Assessment, depending on if there is a licensed healthcare professional present (see 3b below).

#### **3a. Emergency Medical Assessment**

- If an athlete is suspected of sustaining a more severe head or spine injury during a game or practice, an ambulance should be called immediately to transfer the patient to the nearest emergency department for further Medical Assessment.
- Coaches, parents, teachers, trainers and officials should not make any effort to remove equipment or move the athlete until an ambulance has arrived and the athlete should not be left alone until the ambulance arrives. After the emergency medical services staff has completed the Emergency Medical Assessment, the athlete should be transferred to the nearest hospital for Medical Assessment. In the case of youth (under 18 years of age), the athlete's parents should be contacted immediately to inform them of the athlete's injury. For athletes over 18 years of age, their emergency contact person should be contacted if one has been provided.

#### 3b. Sideline Medical Assessment

If an athlete is suspected of sustaining a concussion and there is no concern for a more serious head or spine injury, the player should be immediately removed from the field of play.

#### Scenario 1: If a licensed healthcare professional is present

The athlete should be taken to a quiet area and undergo Sideline Medical Assessment using the Concussion Recognition Tool (CRT 5). Any youth athlete who is suspected of having sustained a concussion must not return to the game or practice and must be referred for Medical Assessment.

If a youth athlete is removed from play following a significant impact and has undergone assessment by a licensed healthcare professional, but there are NO visual signs of a concussion and the athlete reports NO concussion symptoms then the athlete can be returned to play but should be monitored for delayed symptoms.



#### Scenario 2: If there is no licensed healthcare professional present

The athlete should be referred immediately for medical assessment by a medical doctor or nurse practitioner, and the athlete must not return to play until receiving medical clearance.

#### 4.0 Medical Assessment

In order to provide comprehensive evaluation of athletes with a suspected concussion, the medical assessment must rule out more serious forms of traumatic brain and spine injuries, must rule out medical and neurological conditions that can present with concussion-like symptoms, and must make the diagnosis of concussion based on findings of the clinical history and physical examination and the evidence-based use of adjunctive tests as indicated (i.e. CT scan). In addition to nurse practitioners, medical doctors1 that are qualified to evaluate patients with a suspected concussion include: pediatricians; family medicine, sports medicine, emergency department, internal medicine, and rehabilitation (physiatrists) physicians; neurologists; and neurosurgeons.

In geographic regions of Canada with limited access to medical doctors (i.e. rural or northern communities), a licensed healthcare professional (i.e. nurse) with pre-arranged access to a medical doctor or nurse practitioner can facilitate this role. The medical assessment is responsible for determining whether the athlete has been diagnosed with a concussion or not.

Athletes with a diagnosed concussion should be provided with a Medical Assessment Letter indicating a concussion has been diagnosed. Athletes that are determined to have not sustained a concussion must be provided with a Medical Assessment Letter indicating a concussion has not been diagnosed and the athlete can return to school, work and sports activities without restriction.



#### 5.0 Concussion Management

When an athlete has been diagnosed with a concussion, it is important that the athlete's parent/legal guardian is informed. All athletes diagnosed with a concussion must be provided with a standardized Medical Assessment Letter that notifies the athlete and their parents/legal guardians/spouse that they have been diagnosed with a concussion and may not return to any activities with a risk of concussion until medically cleared to do so by a medical doctor, nurse practitioner or other healthcare professional with concussion training. Because the Medical Assessment Letter contains personal health information, it is the responsibility of the athlete or their parent/legal guardian to provide this documentation to the athlete's coaches, teachers, or employers. It is also important for the athlete to provide this information to sport organization officials that are responsible for injury reporting and concussion surveillance where applicable.

Athletes diagnosed with a concussion should be provided with education about the signs and symptoms of concussion, strategies about how to manage their symptoms, the risks of returning to sport without medical clearance and recommendations regarding a gradual return to school and sport activities. Athletes diagnosed with a concussion are to be managed according to their *Return-to-School and Sport-Specific Return-to-Sport Strategy* under the supervision of a medical doctor, nurse practitioner or other healthcare professional with concussion training. Once the athlete has completed their *Return-to-School and Sport-Specific Return-to-Sport Strategy* and are deemed to be clinically recovered from their concussion, the a medical doctor, nurse practitioner or other healthcare professional with consider the athlete for a return to full sports activities and issue a *Medical Clearance Letter*.

The stepwise progressions for *Return-to-School* and *Return-to-Sport Strategies* are outlined below. As indicated in stage 1 of the *Return-to-Sport Strategy*, reintroduction of daily, school, and work activities using the *Return-to-School Strategy* must precede return to sport participation.

#### Return-to-School Strategy

The following is an outline of the *Return-to-School Strategy* that should be used to help studentathletes, parents, and teachers to collaborate in allowing the athlete to make a gradual return to school activities. Depending on the severity and type of the symptoms present student-athletes will progress through the following stages at different rates. If the student-athlete experiences new symptoms or worsening symptoms at any stage, they should go back to the previous stage. Athletes should also be encouraged to ask their school if they have a school-specific Return-to-Learn Program in place to help student-athletes make a gradual return to school.

Stage	Aim	Activity	Goal of each step	
1	Daily activities at	Typical activities during the day as long as	Gradual return to typical	
	home that do not	they do not increase symptoms (i.e.	activities	
	give the student-	reading, texting, screen time). Start at 5-15		
	athlete symptoms	minutes at a time and gradually build up.		
2	School activities	Homework, reading or other cognitive	Increase tolerance to	
		activities outside of the classroom.	cognitive work	
3	Return to school	Gradual introduction of schoolwork. May	Increase academic activities	
	part-time	need to start with a partial school day or		
		with increased breaks during the day.		
4	Return to school	Gradually progress	Return to full academic	
	full-time		activities and catch up on	
			missed school work	

McCrory et al. (2017). Consensus statement on concussion in sport – the 5<sup>th</sup> international conference on concussion in sport held in Berlin, October 2016. British Journal of Sports Medicine, 51(11), 838-847.



#### Volleyball-Specific Return-to-Sport Strategy Developed by Volleyball Canada

The following is an outline of the Return-to-Sport Strategy that should be used to help athletes, coaches, trainers, and medical professionals to partner in allowing the athlete to make a gradual return to sport activities. An initial period of 24-48 hours of rest is recommended before starting the *Volleyball-Specific Return-to-Sport Strategy*. The athlete should spend a minimum duration of 24 hours without symptom increases at each stage before progressing to the next one. If the athlete experiences new symptoms or worsening symptoms at any stage, they should go back to the previous stage. It is important that youth and adult student-athletes return to full-time school activities before progressing to stage 5 and 6 of the Volleyball-Specific Return-to-Sport Strategy. It is also important that all athletes provide their coach with a *Medical Clearance Letter* prior to returning to full contact sport activities.

Stage	Aim	Activity	Goal of each step	
1	Symptom- limiting activity	Daily activities that do not provoke symptoms.	Gradual re-introduction of work/school activities	
2	Light aerobic activity	Walking or stationary cycling at slow to medium pace. No resistance training. -Light intensity walking or stationary cycling for 15-20 minutes at sub-symptom threshold intensity -Volleyball specific warm-up and cool-down	Increase heart rate.	
3	Sport-specific exercise	Running drills. No head impact activity. -Moderate intensity jogging for 30-60 minutes at sub-symptom threshold intensity -Low to moderate impact passing, standing serves, setting, and agility drills	Add movement	
4	Non-contact training drills	Harder training drills, i.e. passing drills. May start progressive resistance training -Participation in high intensity running and drills -High intensity practice without risk of receiving hard driven spikes to the head -participation in resistance training work-outs	Exercise, coordination and increased thinking	
5	Full practice	Following medical clearance. -Participation in full practice without activity restriction and complete return-to-school.	Restore confidence and assess functional skills by coaching staff.	
6	Return-to-Sport	Normal game play.		

McCrory et al. (2017). Consensus statement on concussion in sport – the 5<sup>th</sup> international conference on concussion in sport held in Berlin, October 2016. British Journal of Sports Medicine, 51(11), 838-847.



### 6.0 Multidisciplinary Concussion Care

Most athletes who sustain a concussion while participating in sport will make a complete recovery and be able to return to full school and sport activities within 1-4 weeks of injury. However, approximately 15-30% of individuals will experience symptoms that persist beyond this time frame. If available, individuals who experience persistent post-concussion symptoms (>4 weeks for youth athletes, >2 weeks for adult athletes) may benefit from referral to a medically supervised multidisciplinary concussion clinic that has access to professionals with licensed training in traumatic brain injury that may include experts in sport medicine, neuropsychology, physiotherapy, occupational therapy, neurology, neurosurgery, and rehabilitation medicine.

Referral to a multidisciplinary clinic for assessment should be made on an individualized basis at the discretion of an athlete's medical doctor or nurse practitioner. If access to a multidisciplinary concussion clinic is not available, a referral to a medical doctor with clinical training and experience in concussion (e.g. a sport medicine physician, neurologist, or rehabilitation medicine physician) should be considered for the purposes of developing an individualized treatment plan. Depending on the clinical presentation of the individual, this treatment plan may involve a variety of health care professionals with areas of expertise that address the specific needs of the athlete based on the assessment findings.

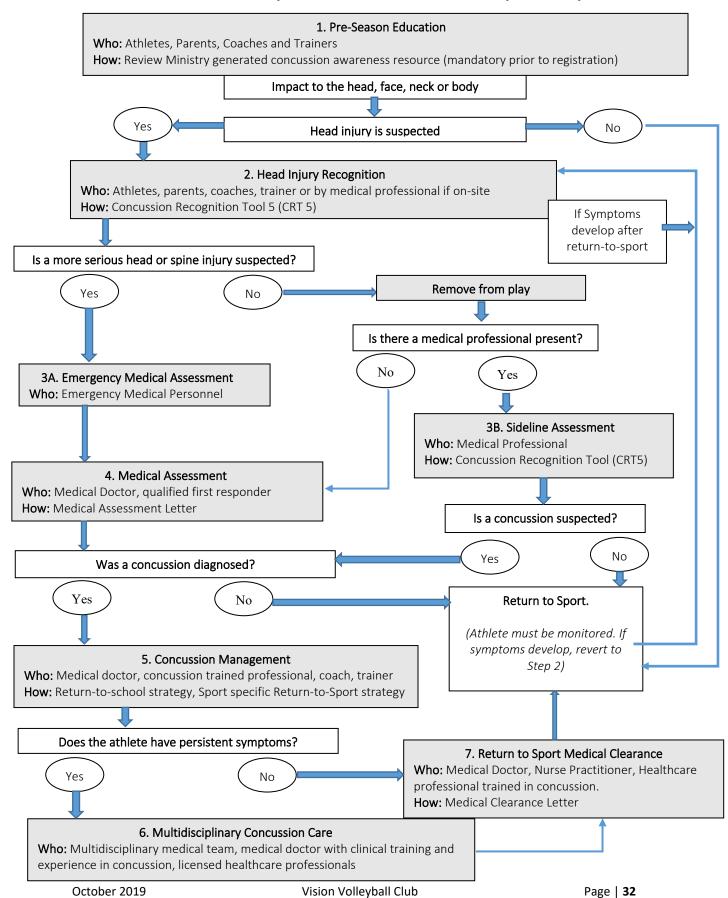
### 7.0 Return to Sport

Athletes who have been determined to have not sustained a concussion and those that have been diagnosed with a concussion and have successfully completed their *Return-to-School and [Name of Sport]-Specific Return-to-Sport Strategy* can be considered for return to full sports activities. The final decision to medically clear an athlete to return to full game activity should be based on the clinical judgment of the medical doctor or nurse practitioner taking into account the athlete's past medical history, clinical history, physical examination findings and the results of other tests and clinical consultations where indicated (i.e. neuropsychological testing, diagnostic imaging). Prior to returning to full contact practice and game play, each athlete that has been diagnosed with a concussion must provide their coach with a standardized *Medical Clearance Letter* that specifies that a medical doctor or nurse practitioner has personally evaluated the patient and has cleared the athlete to return to sports. In geographic regions of Canada with limited access to medical doctors (i.e. rural or northern communities), a licensed healthcare professional (such as a nurse) with pre-arranged access to a medical doctor or nurse practitioner can provide this documentation. A copy of the *Medical Clearance Letter* should also be submitted to sports organization officials that have injury reporting and surveillance programs where applicable.

Athletes who have been provided with a *Medical Clearance Letter* may return to full sport activities as tolerated. If the athlete experiences any new concussion-like symptoms while returning to play, they should be instructed to stop playing immediately, notify their parents, coaches, trainer or teachers, and undergo follow-up *Medical Assessment*. In the event that the athlete sustains a new suspected concussion, the **Vision Volleyball Club Concussion Protocol** should be followed as outlined here.



## Vision Volleyball Concussion and Recovery Pathway





#### **Medical Assessment Letter**

Date: \_\_\_\_\_ Athlete's Name: \_\_\_\_\_

To whom it may concern (Vision Volleyball Club),

Athletes who sustain a suspected concussion should be managed according to the Canadian Guideline on Concussion in Sport. Accordingly, I have personally completed a Medical Assessment on this patient.

# Results of Medical Assessment

- □ This patient has not been diagnosed with a concussion and can resume full participation in school, work, and sport activities without restriction.
- □ This patient has not been diagnosed with a concussion, but the assessment led to the following diagnosis and recommendations:

□ This patient has been diagnosed with a concussion.

The goal of concussion management is to allow complete recovery of the patient's concussion by promoting a safe and gradual return to school and sport activities. The patient has been instructed to avoid all recreational and organized sports or activities that could potentially place them at risk of another concussion or head injury. Starting on \_\_\_\_\_\_ (date), I would ask that the patient be allowed to participate in school and low-risk physical activities as tolerated and only at a level that does not bring on or worsen their concussion symptoms. The above patient should not return to any full contact practices or games until the patient has completed the Return-to-School and Return-to-Sport protocols and the coach has been provided with a Medical Clearance Letter provided by a medical doctor or nurse practitioner in accordance with the Canadian Guideline on Concussion in Sport.

Other comments:

Thank-you very much in advance for your understanding.

Name \_\_\_\_\_

**Designation**: M.D. / N.P. (circle appropriate)

Signature \_\_\_\_\_



### **Medical Clearance Letter**

Date: Athlete's Name:

To whom it may concern, (Vision Volleyball Club)

Athletes who are diagnosed with a concussion should be managed according to the Canadian Guideline on Concussion in Sport including the Return-to-School and Return-to-Sport Strategies, (see VVC Handbook). Accordingly, the above athlete has been medically cleared to participate in the following activities as tolerated effective the date stated above (please check all that apply):

- Symptom-limiting activity (cognitive and physical activities that don't provoke symptoms)
- □ Light aerobic activity (Walking or stationary cycling at slow to medium pace. No resistance training)
- □ Sport-specific exercise (Running or skating drills. No head impact activities)
- □ Non-contact practice (Harder training drills, e.g. passing drills. May start progressive resistance training. Including gym class activities without a risk of contact, e.g. tennis, running, swimming)
- □ Full-contact practice (Including gym class activities with risk of contact and head impact, e.g. soccer, dodgeball, basketball)
- □ Full game play

What if symptoms recur? Any athlete who has been cleared for physical activities, gym class or no-contact practice, and who has a recurrence of symptoms, should immediately remove himself or herself from the activity and inform the teacher or coach. If the symptoms subside, the athlete may continue to participate in these activities as tolerated.

Athletes who have been cleared for full contact practice or game play must be able to participate in fulltime school (or normal cognitive activity) as well as high intensity resistance and endurance exercise (including non-contact practice) without symptom recurrence. Any athlete who has been cleared for full contact practice or full game play and has a recurrence of symptoms, should immediately remove himself or herself from play, inform their teacher or coach, and undergo medical assessment by a medical doctor or nurse practitioner before returning to full-contact practice or games. Any athlete who returns to practices or games and sustains a new suspected concussion should be managed according to the Canadian Guideline on Concussion in Sport.

Other comments:

Thank-you very much in advance for your understanding.

Sincerely,

Signature/print\_\_\_\_\_ M.D. / N.P. (circle Appropriate designation)

\*\*In rural or northern regions, the Medical Clearance Letter may be completed by a nurse with prearranged access to a medical doctor or nurse practitioner. Forms completed by other licensed healthcare professionals should not otherwise be accepted.



# **Concussion Recognition Tool 5 (CRT 5)**

Headache     Burred vision     More emotional     Difficulty     Concentrating     "Pressure in head"     Sensitivity to licht     More Irritable     concentrating	<ul> <li>Sensitivity</li> <li>to noise</li> <li>Fatigue or</li> </ul>	Drowsiness     Drowsiness     Dizziness     Dizziness     Dizziness     TEP 4: MEMORY ASSESSMENT	(IN ATHLETES OLDER THAN 12 YEARS)	Failure to answer any of these questions (modified appropriately for each appropriately for each sport) correctly may       • "What venue are to day?"       • "What team did you play appropriately for each approprise for each approprise for each approprime for each approprime fo	Athletes with suspected concussion should:	<ul> <li>Not be left alone initially (at least for the first 1-2 hours).</li> </ul>	<ul> <li>Not drink alcohol.</li> <li>Not use recreational/ prescription drugs.</li> </ul>	<ul> <li>Not be sent home by themselves. They need to be with a responsible adult.</li> <li>Not drive a motor vehicle until cleared to do so by a healthcare professional.</li> </ul>	The CRT5 may be freely copied in its current form for distribution to individuals, teams, groups and organisations. Any revision and any reproduction in a digital form requires approval by the Concussion in Sport Group. It should not be altered in any way, rebranded or sold for commercial gain.		ANY ATHLETE WITH A SUSPECTED CONCUSSION SHOULD BE IMMEDIATELY REMOVED FROM PRACTICE OR PLAY AND SHOULD NOT RETURN TO ACTIVITY UNTIL ASSESSED MEDICALLY, EVEN IF THE SYMPTOMS RESOLVE	8 Concussion in Soort Group 2017
ON LOOL 5 lescents and adults		RECOGNISE & REMOVE Head impacts can be associated with serious and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRT5) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion		Ing whether ANY of the following signs are the player should be safely and immediately censed healthcare professional is available, essment: Increasing • Deterforating conscious state r convulsion • Vomiting			Do not attempt to move the player (other than required for airway support) unless trained to so do.	Do notremove a helmet or any other equipment unless trained to do so safely.	concussion should proceed to the following steps:	slude:		head trauma 017
응		l braini sion. It	NCE	ing sion	sues			•	ussion st	sion incl	or n inability ropriately look	Sport Group 2017
<b>CONCUSSION RECUGNITION TOUL 3</b> <sup>®</sup> To help identify concussion in children, adolescents and adults	Supported by	RECOGNISE & REMOVE Head impacts can be associated with serious and potentially fata 5 (DRT5) is to be used for the identification of suspected concour-	STEP 1: RED FLAGS – CALL AN AMBULANCE	an injury includir ereported then if activity. If no if c ant medical asset is Severe or i headache . Seizure or	weakness or ungung/ burning in arms or legs • Loss of consciousness		<ul> <li>In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation)</li> </ul>	<ul> <li>Assessment for a spinal cord injury is critical.</li> </ul>	If there are no Red Flags, identification of possible con STEP 2: OBSERVABLE SIGNS	Visual clues that suggest possible concussion include:	Lying motionless on Disorientation or the playing surface confusion, or an inability Slow to get up after to questions a direct or indirect Blank or vacant look	@ Concussion in So



# **APPENDIX G – INCIDENT/COMPLAINT FORM**

Please complete this form for complaints, minor infractions, major infractions, incidents (threats, fighting, property damage, verbal abuse, law enforcement summoned, etc.), breach in Vision Volleyball and/or OVA code of conduct, etc. **AFFECTED PARTY/PARTIES:** 

_ Incident Complaint			
Last Name		Gender	
Contact Email			
City	Province	Postal Code	
Coach's Name (First &	& Last) Coaches Ph	none Number	
Coach's Name (First &	Coach's Name (First & Last) Coaches Ph		
D PERSON IS A MINOR)	<u> </u>		
Last Name	Tel	Telephone Number	
City	Province	Postal Code	
ATION			
Age Division Gend	Division Gender Time of Incident (A		
ORTING THE INCIDENT / COMPLAI	NT		
Last Name	Pos	sition/Title	
Email Address			
	IncidentComplaint Last Name Contact Email City City Coach's Name (First a Coach's Name (First a City	IncidentComplaintLast NameContact EmailCity ProvinceCoach's Name (First & Last) Coaches PfCoach's Name (First & Last) Coaches PfCoaches Pf	



Please describe the incident/complaint in detail (club complaint, coach complaint, struck by falling/flying object, slip/fall, physical assault, verbal assault, property damage, financial discretions, etc.). Please use additional paper if required. Please include the names of persons being complained about for the Club to begin the discipline and complaints process. If no names are provided, the Club cannot move forward.

If you are reporting an incident, what action was taken on site (accused removed from competition site, team forfeited, coach ejected from match, coach removed from club, etc.)?

Law enforcement notified/Police report filed? \_\_\_\_Yes \_\_\_\_No

If Yes:

Name of Agency:

Property damage description and estimated value (if applicable)

#### WITNESS INFORMATION – CONFIDENTIAL

Please complete this section if you have witnesses that are willing to submit a written account of the incident and if they consent to testify at an OVA Discipline Hearing. Please attach any written witness accounts to this form.

Name (First & Last)	Address	Telephone Number	Email Address

#### **CERTIFICATION OF REPORT**

- □ I verify that the above statements and information submitted are true.
- □ I give consent to pass this information along to the Conflict Resolution Committee, Club Executive and/or Disciplinary Panel as required.
- □ I give consent to participate in a Conflict Resolution Committee Meeting, Disciplinary Hearing and/or follow up interview as required.

Name:	Date:	
Signature:		