



Faculty of Sport and Exercise Medicine UK

Excellence in Musculoskeletal Medicine, Exercise Medicine and Team Care

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Sport Duty of Care Review FSEM UK Response

Introduction and Summary

The Faculty of Sport and Exercise Medicine (FSEM) welcomes the Sport Duty of Care Review and would like to see strong recommendations made to the UK government about ensuring that the appropriate medical care, at an appropriate level, is available for all athletes and sports participants.

The medical specialty of Sport and Exercise Medicine (SEM) has a large role to play in sport duty of care, our specialists are trained to the highest level in musculoskeletal medicine, exercise medicine and team care. Therefore, the FSEM can offer support, advice, skills, standard setting and guidelines to ensure the appropriate level of medical care across all levels of sport.

Summary of the FSEM's Response:

- **Recognising appropriate medical qualifications.** The importance of increased awareness amongst the public, and at elite sport level, of the value of qualified SEM doctors for preventing and managing illness and injury in sport and exercise. All participants should have access medical support appropriate to the activity they are undertaking.
- **Reducing risk in sport.** Every sport should be responsible for collecting appropriate injury data, at junior, recreational and elite level. This will allow informed discussion on how to mitigate risk.
- **Further investment in Sport and Exercise Medicine NHS posts.** To increase the knowledge base in the NHS and the appropriate level of care, providing optimal early treatment, to ensure a participant can continue to take part in sport and exercise.
- **A strong recommendation that National Governing Bodies use external expert advice when appointing team doctors or chief medical officers.** Better awareness of the need for appropriately trained doctors across elite sport management can be achieved through mandatory learning about medical support in all elite coach training.

- **Support and recognition of approved immediate care in sport training.** Cross recognition of pitch side care courses for doctors and allied health professionals, which meet royal medical college standards.
- **Availability of Automatic External Defibrillators (AEDs) in public places.** All places where sport takes place at all levels should have an AED close by. Clear access for ambulances and provision of appropriate medical facilities should be part of planning for organised sports events.
- **Communication of the basic principles of concussion management, *Recognise, Remove, Recover*,** across all levels of sport and education.

Supporting Participants in both Elite and Grassroots Sport

(The FSEM's response to this section covers the prevention and management of concussion and other medical issues, education and support on anti-doping, medical screening, mental health, and medical support for those with issues.)

Governance of those working in sport

The FSEM recommends that the protection of titles and an understanding of qualifications helps those organising and participating in sport and exercise to access the appropriate care for themselves or others. When looking for a Consultant in Sport and Exercise Medicine or a doctor with a qualification in SEM, the FSEM and the GMC register should be points of reference:

GMC Specialist Register and Specialist Training for SEM Doctors

The FSEM is designated by statute to set standards, oversee the higher specialist training curriculum and to examine doctors training to be consultants in Sport & Exercise Medicine. Those who have satisfied the standards are entered on the GMC Specialist Register where the public can see in which specialty they have been trained. Those doctors who are on the register are granted Fellowship of the Faculty (FSEM).

Membership (MFSEM) is awarded to those doctors who are usually in another specialty and spend some of their time working in Sport and Exercise Medicine. To gain membership a doctor is required to pass the FSEM Membership Exam.

Support for SEM Doctors at the start of their career

The FSEM has a New Consultant Representative on its Council and the Faculty supports new consultants in their first few years after taking up posts. There is also a trainee representative and a trainee group supported by the Faculty. The FSEM Council has a small group of lay representatives, who bring different experiences of receiving medical care and contribute from a different perspective.

FSEM ideal outcome for governance of those working in sport

- *Increased awareness, by the public, of the appropriate medical qualifications for working in sport and exercise would result in more of the active population seeing an appropriately trained doctor, when they have an injury or a medical problem associated with sport or exercise, which cannot be dealt with by their GP.*
- *Optimal early treatment is likely to result in fewer people stopping exercise when they have an injury. Although the number of NHS SEM consultants is slowly increasing, further investment in these posts now would be an investment in the future health of the population and potentially cut NHS spending on many conditions and chronic diseases.*
- *Similarly, those responsible for organising medical care for elite teams need to have a higher awareness of the appropriate use of suitably qualified doctors in their sport. This would be achieved by mandatory learning about medical support in all elite coach training. Employing appropriately trained SEM doctors brings with it a Professional Codeⁱ based on the GMC document Good Medical Practice where legal, ethical and moral considerations of practicing medicine in sport are laid out.*

Support of Approved Immediate Care in Sport Training

The FSEM has worked to gain cross recognition of all pitch side care courses, which met the standards of the Royal College of Surgeons of Edinburgh Faculty of Pre-Hospital Care. Courses which meet this standard will be listed on the FSEM website to assist those undertaking training and those organising sporting events to identifying appropriate training.

Appointment of team doctors and governing body medical officers.

The governing bodies of sports have a duty to ensure that the qualifications and experience of a team doctor are appropriate to the risk associated with that sport at the level at which the doctor will be working. (See quantification of risk).

When the NHS or Armed Services appoint an SEM consultant the FSEM has a role in reviewing the job description, prior to advertisement, and providing an experienced

consultant with relevant experience to sit on the interview panel. With few exceptions, this does not happen in elite sport. This can lead to inappropriately qualified and inexperienced doctors being appointed to look after elite athletes.

FSEM ideal outcome for the appointment of team doctors

- *A strong recommendation that National Governing Bodies in sport must use external expert advice when appointing team doctors or chief medical officers, if that knowledge does not exist within the organisation.*

The prevention and management of catastrophic sporting injuries

(The FSEM's response to this section covers catastrophic injury in sport, incident reviews and embedding lessons learned, defibrillators and rules on concussion)

Quantification of risk in sport

Every sport should have a duty to understand risk in their sport. Without good injury data it is impossible to comment on the risk and make sensible recommendations on rule changes. The relative risk of one sport compared with another is important, as is knowing the relative risk of other activities in lifeⁱⁱ.

In 2013 the FSEM looked at the extent of injury data collection, across a number of sports, both at elite level and at grass roots level and found that very little collection of data was taking placeⁱⁱⁱ.

FSEM ideal outcome for quantification of risk in sport

- *The FSEM recommends that every sport should have a duty to collect appropriate data for their sport at junior, recreational, and elite level.*
- *This data should be analysed by statisticians who work in quantifying occupational risk, allowing an informed discussion on how to mitigate any risks associated with the sport.*
- *It will also highlight alterations in risk when changes such as artificial playing surfaces, or rule changes are introduced.*
- *In professional sport it is a legal obligation to quantify risk to the employees and take appropriate measures to reduce the risk.*

Defibrillators

Places where sport takes place should have emergency medical equipment appropriate for the activity taking place and the known risks for the activity. Every week in the UK, 12 young people under 35 years of age die from Sudden Cardiac Arrest (SCA) due to undiagnosed cardiac conditions. Following SCA, survival rates

drop 7-10% every minute without defibrillation. In a recent position statement, the FSEM has called for more Automatic External Defibrillators to be available in public places^{iv}. Clear access for ambulances should also be part of any planning for organized sports events.

FSEM ideal outcome for emergency equipment

- *The FSEM would like to see AED machines installed in all leisure and sports centres, sports clubs and in public places where sport and physical activity is likely to occur.*

Concussion Management

The FSEM would like to see a best practice consensus in the prevention, assessment and management of concussion at all levels from elite to grass roots sport and across sport, health and education bodies. The FSEM recognises the work already done in recognising and managing concussion at an elite sport level and by various government bodies. However, a common approach, communicated via a wider campaign, would benefit the safeguarding of athletes and participants across the sporting sector.

The FSEM supports Concussion Guidelines for the Education Sector^v alongside the Sport and Recreational Alliance and the principle of *Recognise, Remove, Recover, Return*. The FSEM also supports the detailed work completed by the RFU on concussion and its online Headcase resources^{vi}.

FSEM ideal outcome for concussion management

- *A nationwide campaign to educate the public and sporting sector on the basic principles of concussion management - **Recognise, Remove, Recover***
- *Using the results from the quantification of risk in sport to inform and plan appropriately for concussion management and injury in sport. This would mitigate reporting about the risks in sport based on incomplete statistics (especially at youth level) and encourage safe practice and continued participation.*

Background to the FSEM

The FSEM works to develop the medical specialty of Sport and Exercise Medicine (SEM). The FSEM was launched in 2006, and is an intercollegiate faculty of the Royal College of Physicians of London and the Royal College of Surgeons of Edinburgh. The FSEM develops the medical specialty of Sport and Exercise Medicine (SEM), sets standards, oversees research, training, curriculum and assessment of SEM doctors.

Its strategic mission is to promote better health for the public through excellence in Musculoskeletal Medicine, Exercise Medicine and Team Care.

The Faculty promotes SEM as a cost effective approach to the prevention and management of illness and injury in sport and for the general public. SEM consultants work with national governing bodies, the private sector and the NHS to educate health professionals, streamline patient pathways, improve rehabilitation services and work with academic institutions to provide robust evaluations of initiatives. The Faculty has over 560 Members and Fellows.

References

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- ⁱ Faculty of Sport and Exercise Medicine Professional Code July 2010.
<http://www.fsem.ac.uk/media/85302/fsem-professional-code-reviewed-aug-2015.pdf>
- ⁱⁱ Catastrophic Injuries in Rugby Union an Assessment of the Risk, Dr Colin W Fuller, 12th July 2007
file:///C:/Users/bcameron/Downloads/CI_Risk_Assessment_EN.pdf
- ⁱⁱⁱ Report to FSEM Council July 2013 - Paper 5 Surveillance of Catastrophic Injuries and Fatalities in Sport Interim Report to Council, Dr Mike England (available on request).
- ^{iv} FSEM Position Statement Automated External Defibrillators in Public Places, Dr Zafar Iqbal, Prof John Somauroo, July 2015 <http://www.fsem.ac.uk/news/position-statements/a/automated-external-defibrillators-in-public-places.aspx>
- ^v Concussion Guidelines for the Education Sector, Sport and Recreational Alliance, June 2015
<http://www.fsem.ac.uk/media-resources/publications/concussion-guidelines.aspx>
- ^{vi} RFU Concussion Headcase online resource - <http://www.englandrugby.com/my-rugby/players/player-health/concussion-headcase/>

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Patron: HRH The Princess Royal

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