





INTRODUCTION TO SPORTS REHABILITATION



Introduction and aims

- ❑ Role of the **sport rehabilitator** as a **member** of the sport injury care team
- ❑ Promote individual and organizational **professionalism** within the field of sport rehabilitation



- ❑ Provide a framework for **ethical conduct** of sport rehabilitators and related professionals
- ❑ Describe **legal parameters** that must be considered by those in sport rehabilitation and related field.



**Young footballers and senior
golfers alike are prone to
injury, as are Olympic
performers and “weekend
warriors” because injury does
not discriminate**



The variety of sport medicine team members who work with athletes

- ❖ Sport rehabilitator
- ❖ Exercise physiologist
- ❖ PHYSIOTHERAPIST
- ❖ Nutritionist
- ❖ Osteopath
- ❖ Kinesiologist
- ❖ Massage therapist
- ❖ Sport educators
- ❖ Sport scientists
- ❖ Physical educator
- ❖ Biomechanist
- ❖ Medicals and surgeons



What is a Sports Rehabilitator?

- A Sports Rehabilitator is an individual who has graduated from a degree-level Sport Rehabilitation course.

In U.K Sports Rehabilitators are governed by their association, [The British Association of Sports Rehabilitators and Trainers \(BASRaT\)](#).



What is a Sports Rehabilitator?

“ A Graduate Sport Rehabilitator is a graduate level autonomous healthcare practitioner specializing in musculoskeletal management, exercise based rehabilitation and fitness”



What is a Sports Rehabilitator?

In order to maintain their membership and insurance a Sports Rehabilitator must complete a set amount of Continued Professional Development (CPD) - attendance at courses and seminars etc, over every two year period.

In USA

- A similar type of sport healthcare provider in the United States of America is useful here as a comparison.

ATC ?





ATC (Certified Athletic Trainer)

- The Certified Athletic Trainer is a highly educated and skilled professional specializing in athletic health care.
- Certified athletic trainers have, at minimum, a bachelor's degree, usually in athletic training, health, physical education or exercise science.



- Certified athletic trainers have fulfilled the requirements for certification established by the National Athletic Trainers' Association Board of Certification, Inc. (NATABOC).physical education or exercise science



The role of the sport rehabilitator

- ❖ Sport Rehabilitators work in the field of sports medicine and have been specifically trained to deal with injuries through every stage, from the initial onset through to late stage, return to sport rehabilitation.
- ❖ Management of sport injury is a team activity, and the sport rehabilitator plays a key role.



Techniques in Sports Rehabilitation

- In Sports Rehabilitations we look at the body as a whole when assessing an injury. Assessment usually includes postural and biomechanical assessment, detailed history, muscle strength and flexibility testing as well as special tests for the injured area.



Techniques in Sports Rehabilitation

- Sports Massage
- Electrotherapy (Ultrasound/Interferential/TENS)
- Taping (Strapping)
- Muscle stretching techniques
- Muscle strengthening
- Core stability training
- Proprioception training
- Return to sport/activity training



What is the Difference Between a Physical Therapist & Sports Rehabilitator?



Injuries require a three-step process

- i. Pain relief and inflammation reduction,
- ii. Treatment,
- iii. Rehabilitation.



- An athlete must take the rehabilitation process one step further.
- Sports rehabilitation involves the restoration of function and advanced athletic skills.
- A physical therapist performs the initial rehabilitation process.
- A sports rehabilitation specialist helps you regain your athletic skills.



- Physical therapist helps regain the skills necessary for basic daily activities, whereas a sports rehabilitation specialist helps regain skills necessary for recreation and athletic competition.
- The rehabilitation specialist assumes that an athlete had an advanced level of fitness before he/she was injured.



Knowledge, ability and wisdom



- **Knowledge** is the learning and understanding of facts that form the basis for practice.
- **Ability** is the application of knowledge.
- **Wisdom** considers both the available knowledge and ability, mixing them in the right proportion to elicit the best result within a given set of present circumstances.



Ethical considerations

Ethics refers to a set of concepts, principles and laws that inform people's moral responsibility to behave with politeness.



The Code of Ethics of the British Association of Sport Rehabilitators and Trainers.

- **PRINCIPLE 1: Members shall accept responsibility for their scope of practice**
 - 1.1 Members shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity or services
 - 1.2 Members shall provide only those services of assessment, analysis and management for which they are qualified and by pertinent legal regulatory process.
 - 1.3 Members have a professional responsibility to maintain and manage accurate medical records



- ✓ PRINCIPLE 2: Members shall comply with the laws and regulations governing the practice of musculoskeletal management in sport and related occupational settings.
- ✓ PRINCIPLE 3: Members shall respect the rights, welfare and dignity of all individuals



- **PRINCIPLE 4:** Members shall maintain and promote high standards in the provision of services
- **PRINCIPLE 5:** Members shall not engage in any form of conduct that constitutes a conflict of interest or that adversely reflects on the profession



Ethical considerations

- There are a number of circumstances that occur in sport that can damage the typical application of ethics; areas where difficulties arise include:
 1. Decisions about return to sport activity with a persisting injury.
 2. Pharmaceutical therapies to assist participation



Ethical considerations

3. Participation of children, especially in high-risk sport.
4. Sharing of confidential athlete medical information amongst practitioners, or between practitioners and public representatives, such as the press.
5. Ergogenic aids, such as anabolic steroids



Legal considerations

- Sport rehabilitators and other practitioners of sport injury care are subject to lawsuits brought by athletes and their representatives (e.g. parents, carers).
- Two ways to avoid the risk of court case
 1. Consistently following an appropriate code of ethics
 2. Continually educating yourself via CPD.

The top of the slide features a yellow background with a white curved line. In the center, there are black silhouettes of two tennis players in action, one on the left and one on the right, with a large yellow tennis ball in the middle. The text 'Legal considerations' is written in a dark brown font below the silhouettes.

Legal considerations

Risk of exposure to legal liability related to health care in sport usually occurs in four main areas, the first three of which are related to one another (Kane and White 2009):

1. Pre-participation physical examination.
2. Determination of an athlete's ability to participate.
3. Evaluation and care of significant injuries on the pitch or court.
4. Disclosure of personal medical record information.



Legal considerations examples of negligence

Some examples of negligence that can lead to injury litigation in sport.

FACILITY SAFETY

- Poor condition of the surface of the pitch, court, track, etc. (e.g. holes, uneven surfaces)
- Unsafe equipment (e.g. exposed sharp edges, broken or rusted parts)
- Unsafe practices (e.g. reduced visibility if lights are not used when training held at night)



WARNING OF (OR UNNECESSARY) RISK OR DANGER

- Failure to disclose potential injury consequences of playing and of not playing using safe techniques
- Failure to intervene when players do not use safe techniques
- Mismatched players (e.g. adult players participating together with young players)



PROTECTIVE EQUIPMENT

- Failure to provide proper protective equipment
- Failure to require use of protective equipment
- Improper fit of protective equipment



DOCUMENTATION OF INJURY

- Failure to maintain injury records
- Failure to maintain treatment and rehabilitation records
- Failure to maintain confidentiality of records
- Falsifying or altering medical records



Legal considerations examples of negligence

APPROPRIATE CARE

- Failure to follow proper care protocols
- Failure to refer injured player to healthcare professional of greater experience or higher qualification
- Failure to remove injured player from participation



SIX COMMON MISTAKES SPORT HEALTHCARE PROVIDERS

1. Not establishing baseline (i.e. “normal” uninjured) data with respect to a patient/athlete.
2. Accidentally verbally breaching a patient’s privacy.
3. Not knowing rules and regulations related to confidentiality of patient information and medical records.



4. Making decisions based on experience and instincts rather than seeking appropriate authoritative advice.
5. Not educating a patient/athlete about a therapeutic modality intervention.
6. Underestimating the amount of documentation required with catastrophic injury events.



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