OCR Cambridge National – Sport Science – R041 Reducing the risk of sports injuries – LO1

Factors affecting the risk of injury:

Extrinsic (risk that comes from outside of the performer)

1. Type of activity – Contact sports will present an increased injury risk.

Contact sports	Non-contact sports	
Boxing	Swimming	
Rugby	Volleyball	
Martial arts <i>i.e. karate/judo</i>	Table Tennis	
Fencing	Gymnastics	

- 2. Coaching or supervision The skills and actions of a good coach will maintain performer safety.
- Poor or incorrect coaching of techniques may cause mild/severe injuries. *i.e. a* forward roll.
- Ineffective communication skills may lead to unclear instructions or fail to highlight the risks involved. *i.e. poor instructions when coaching a rugby* tackle.
- 3. Correct application and adherence of the activity rules/regulations Rules and laws in sport are not just there to ensure fair play, they are also designed to protect participants.
- Number of players on the pitch
- Misuse of equipment
- Use of protective equipment. *i.e. shin pads*.



- 1. Physical Preparation Factors that can affect the risk of injury:



3. Environmental factors – These factors are highly variable and may change throughout the course of a match or training session.

Weather: Athletes working for a long time in very hot or very cold conditions can cause injury.

Playing surfaces and surrounding areas: All playing areas should be safe and free from hazards. Pre match checks by officials support this. Users should be inducted into how to use equipment safely.



Other participants: Often injury can occur as a result of dangerous play by others taking part. The open nature of sport can make gameplay unpredictable.

5. Equipment: Modern sports equipment is lighter and more durable enabling a better performance from participants.

Protective equipment: Compulsory items are worn by individuals for player safety and to prevent injury. i.e. gum shield.

Performance equipment: These are the items needed to play the sport. Technological advances have improved performance using new materials & latest designs. *i.e. Tennis racket & footballs.*



Clothing/footwear: This will protect and assist performance.

- 6. Safety Hazards All dangers should be fully assessed and measures put in place to limit the risk of injury.
- **Risk assessments** This is a process where hazards are identified. ٠
- **Safety checks** This is a duty of a coach/sports leader. ٠
- Emergency action plans Plans for evacuation and fire assembly points must be made clear to participants.
- 3. Psychological Factors Mental factors that encourage performers to be in the right 'frame of mind' to perform well.
- Motivation drive to do ٠ something well.
- Aggression Intention to cause harm to others.
- Arousal Level of activation of a ٠ performer.
- Anxiety Negative emotional state ٠ with feelings of worry.

4. Poor Posture – Injuries due to; Poor stance/gait, sitting position, lack of exercise, physical defect, fatigue, clothing or footwear.

5. Sports injuries relating to posture -

• Pelvic tilt: Excessive sitting causing the muscles of the pelvis to get tight.





and cool down



account for strengths and weaknesses. Injuries can be prevented by: Gender

2. Individual Variables - Training

should be set at the right level and

- Age Flexibility
- Nutrition
 - Sleep
 - Previous or reoccurring injuries

Kyphosis



OCR Cambridge National – Sport Science – R041 Reducing the risk of sports injuries – LO2

Physical benefits of a warm up:

- Warming the muscles The ligaments and tendons around the joint become more pliable.
- Increases body temperature Gentle • activity raises the body's core temperature.
- Increased flexibility Muscles and • joints are taken through a full range of motion.
- Increase in heart rate This response is stimulated • by adrenaline.
- Increased blood flow The increase in oxygenated muscles prevents fatigue related injuries.
- Increased speed of muscle contraction This • occurs due to improved elasticity of muscle fibres.

Physical benefit of a cool down:

- Reduces soreness and stiffness Stretching helps prevent the joints/muscles becoming sore and stiff.
- Stops blood pooling keeps blood circulating and slowly returns.
- **Removes lactic acid** Continuing gentle movement reduces the build up of this waste product.
- Gradually lowers the heart & breathing rate This • allows the body to transition back to resting state.
- To reduce core temperature and circulate blood and oxygen – This repays the oxygen debt within the body.
- Improves flexibility for next ٠ workout – Recovering muscles will be the most pliable and this is where gains in suppleness can be achieved.

Specific needs which a warm up/cool down must consider:

Characteristics of the group:

- Size of the group/Age of performers
- Experience levels/Fitness levels
- Medical condition or existing injuries

Psychological benefits of a warm up:

- Heighten or control arousal levels (e.g. 'get in the zone') This will settle an athletes nerves.
- Improve concentration/focus Efficiently focusing attention on task-related cues (narrowing)
- Increases motivation Helps athletes feel more energised.
- Mental rehearsal A popular method of preparation. Involves the athlete imagining themselves performing prior to competing.

Key components of a cool down:



Key components of a warm up:

Stage 1 - Pulse raiser: Involves gentle jogging, running or skipping designed to slowly increase heart rate.





Stage 2 – Mobility: Exercises to move joints through a full range of motion. *i.e.* arm swings or ankle rolls.

Stage 3 – Dynamic movements: **Related** movements that involve a change of speed and direction. *i.e. zig zag* runs.





Stage 4 – Stretching: Developmental movements in order to stretch the major joints/muscles of the body. i.e. open and close the gates.

Stage 5 – Skill rehearsal/sport specific phase: Involves specific skills to the event being completed.

i.e. a tennis player would

work on forehand,

volley movements.

backhand, service and



Suitability of the exercises

- suggested: Related to the activity
- Gradual

•

Environmental factors: Weather conditions

- Inside or outside
- Facilities available





@ PEResourcesbank



OCR Cambridge National – Sport Science – R041 Reducing the risk of sports injuries – LO3

Acute and Chronic injuries:

Acute injuries occur as a result of sudden trauma to the body. Results in immediate pain, swelling

and a loss of function. i.e. a bad tackle in football leading to knee ligament damage.



Chronic injuries occur over a period of time. These are associated with repetitive/continuous use. *i.e.* tendonitis, shin splints, tennis elbow.

How to respond to injuries and medical conditions in a sporting context:

- SALTAPS on-field assessment routine (See, Ask, Look, Touch, Active, Passive, Strength)
- R.I.C.E. (Rest, Ice, Compress, Elevate)
- Stretching and massage This therapy can increase the health of muscle and connective tissue.
- Taping, bandaging, splints, slings - Can support the injured area.



- Hot and cold treatments. i.e. heat pack, freeze • spray.
- **Emergency procedures Emergency first aid** should only be administered by trained personnel.

Emergency Action Plans (EAP) - This is a document which outlines the procedures in event

of an emergency.

- Emergency personnel. i.e. first responder, first aider, coach.
- Emergency communication. *i.e.* telephone, emergency numbers, emergency services.

Emergency equipment. i.e. first aid kits, evacuation chair.



Types, causes and treatment of common sports injuries:

Soft tissue injuries are the most common in sport and include sprains and strains of muscles, tendons and ligaments.

Contusion (bruise): An area of the body where blood vessels have been damaged under the skin/tissues. These are often caused by a fall or direct impact. Treatment - Rest, Ice, Compression, Elevation

Abrasions (Grazes and Cuts):

This is damage to the skin caused by scraping against a playing surface. Open wounds can carry an infection risk and if cuts are deep, medical attention may be required to apply stitches.

Blisters: After friction, layers of skin can become separated and form a pocket of fluid between them. Treatment: Rest, bandages.

Overuse injuries are chronic (overuse of a particular part of the body)

Tendonitis is the overuse of tendons in the body. Both golfers elbow and tennis elbow affects the tendons that attach muscles to the elbow joint. These become inflamed, sore and painful. Treatment – Rest, oral medication or surgery.

Shin Splints: Repeated overuse of the tibialis anterior resulting in tenderness and inflammation around the shin. Excess weight, inadequate footwear and poor technique can cause this. Treatment includes:

- Rest + Ice the shin to ease pain and swelling
- Take anti-inflammatory painkillers



Concussion: Trauma or injury to the brain. It is caused by a direct blow to the head. Treatment - Immediate medical attention.

Cramp: A sudden involuntary muscle contraction (over shortening) due to an imbalance of water/salt. Treatment – Stretching or massaging the affected muscle area.

Fractures: Partial or complete break of bone from sudden trauma. i.e. an awkward fall.

- Closed fracture The surrounding skin is unbroken. 1.
- Open fracture Considerable damage to the surrounding tissue. Bone will break through the skin. 2. Treatment - Immobilise and seek urgent medical services.

Injuries realted to children:

Severs disease:

This is inflammation of a growth plate in the heel.

Osgood Schlatter's disease:

Knee pain in growing children. Will subside once they stopped growing.





