MEDICAL SERVICES/REQUIREMENTS

Medical Services at Motor Sport Events

1. BACKGROUND

At every motor sport event there exists the potential for accidents which could result in injury or death to individuals, be they competitors, drivers, officials, spectators or others.

Whilst the rules, regulations and approved procedures which govern the conduct of motor sport are designed to minimise the potential for accidents and injury, it is necessary that each and every motor sport event be conducted in a manner designed to reduce risk. Insofar as minimising risk to persons in the case of injury being sustained CAMS requires each organiser to have in place not only personnel and facilities on site commensurate with the risk profile of the event but also an appropriate and considered response plan to be activated if an incident requiring a medical response occurs.

Different disciplines and events within these disciplines of motor sport present different potentials for injury to persons. The service provided by the Organiser to provide for assistance in the case of personal injury must reflect the potential risk associated with the type and status of event.

Accordingly, the requirements set by CAMS for medical services at a race meeting are generally more demanding than for those for a motorkhana; and those for a major international event are generally more demanding than those for a club event.

2. MEDICAL RESPONSE PLAN

CAMS has considered each of the various types of motor sport activity, and determined the level of medical service planning and medical response capacity which is required for each type and status of event as follows:

	Current Activity				Road Events					Off Road Events		Motorkhana	
	Motor Racing	Regularity Trials	Multi-car Speed Event Multi-car Drifting	Single-car Speed Event Single-car Drifting	Special Stage Rally	Non-Special Stage Rally	Rallysprint	Touring Road Event	Touring Assembly	Field	Stadium	Khanacross	Motorkhana
International	FIA	FIA	FIA	FIA	FIA	FIA	FIA	FIA	FIA	FIA	FIA	FIA	FIA
National Championship	A	A	A	A	A	NA	NA	NA	NA	A	A	B	B
National – other	A	A	A	A	A	A	A	*A/B	C	B	A	B	B
State Championship	A	A	B	B	B	B	B	*A/B	C	B	A	C	C
Multi-Club	A	B	B	B	B	B	B	*A/B	C	B	A	C	C
Club	A	B	C	C	B	B	B	*A/B	C	B	B	C	C

KEY TO TABLE

A A detailed event/venue specific Medical Response Plan is required. The plan must be documented in the format specified (an example is included at Attachment A)

B A pro forma Medical Response Plan/Checklist is required (see Attachment B)

C A pro forma Medical Response/Emergency Information Sheet is required (see Attachment C)

FIA Requirements for Medical Services are set by the FIA for these events

NA This type/status of event is not held

* If a closed road section is incorporated in the event, the requirement is A; otherwise it is B

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The Medical response plans and the resources required to give effect to the Plan are not considered overly onerous on organisers and reflect common sense and community standards.

The objective of the plan is to ensure that proper planning and forethought have been undertaken prior to the conduct of an event and to guide the practical response to any incident resulting in injury that may occur during an event.

3. SPECIFIC REQUIREMENTS

In addition to the requirements of the Medical Response Plan appropriate for the status of the event as outlined above, CAMS requires that various types and status of events meet specific additional requirements as follows:

3.1 Race Meetings

3.1.1 General

At every motor race meeting there must be a medical service which is able to provide at the scene of any incident within the minimum possible time, appropriately skilled personnel and equipment to assess and treat any injured or potentially injured competitor or official. Such personnel and equipment must be either in a suitable vehicle to enable them to reach the scene or so deployed that access can be gained to any scene on foot. An efficient radio communication system is essential to this response.

Following assessment and initiation of treatment at the scene, a suitable vehicle must be available to transport casualties including those on a stretcher to the circuit Medical Centre while ensuring that the level of care initiated at the track side is maintained during transport.

3.1.2 Medical Centre

A Medical Centre must be provided at every circuit. It may be a permanent or a temporary building and must be readily accessible from the track and have ready access to the public road for subsequent transport of casualties to hospital. It must be so situated to ensure security and privacy.

The Medical Centre must be so constructed that casualties on stretchers can be readily taken into and out of the centre and must contain adequate space and an appropriate clinical environment for further assessment, treatment, stabilisation, and preparation for transport. It must include climate control, adequate specialised lighting and hot water supply.

The Medical Centre must be also able to accommodate ambulatory casualties and have facilities for the assessment of fitness to compete.

3.1.3 Communications

Communication facilities must include radio communication with the track side and with Race Control. A direct telephone line for contact with the receiving hospital is necessary.

3.1.4 Personnel

3.1.4.1 Medical Officer/s

At all race meetings there shall be present at least one medical practitioner who is registered in an Australian State or Territory. He/she will be designated as the Chief Medical Officer. At race meetings of Major National status or higher there shall be at least two such medical practitioners required to be present for all races. They shall be empowered to deliver any rulings in relation to medical fitness to compete (NCR 140, 162). Where more than one medical officer is present one shall be designated as Chief Medical Officer. The Chief Medical Officer shall have full responsibility for the organisation and operation of the track medical services.

3.1.4.2 Paramedical Personnel

The services of paramedical personnel are of value in the provision of motor sport medical services. Initial track side response may be provided by an ambulance officer or similar professional particularly one having current specialised skills equivalent to "MICA Paramedic" (Victoria) training, or a Paramedic who can initiate advanced life support treatments. However, the doctor or Chief Medical Officer only may undertake medical assessment of fitness to compete.

The Chief Medical Officer must retain full responsibility for the deployment and operation of all aspects of the medical service under the authority of the Clerk of the Course. Within this framework due consultation between the doctor/s and paramedical personnel will foster harmonious working relationships.

3.1.4.3 Alternative for Club, Multi-Club or State Championship race meetings

As an alternative to 3.1.4.1 (above) in lieu of a registered medical practitioner being the Chief Medical Officer, it will be permitted to conduct a race meeting of Club, Multi-Club or State Championship status without the role of the Chief Medical Officer being filled. In such circumstances it will be requirement to have on site at all times at least two medical professionals having current specialised skills equivalent to "Mica Paramedic" (Victoria) training or who can initiate advanced life support treatments.

If this option is chosen, the provisions of Article 3.1.4.1 will not apply in respect of:

- the designation of the Chief Medical Officer;
- rulings in regard to medical fitness to compete.

Additionally, the responsibility for the organisation and operation of the event's medical services shall lie with the Clerk of Course who shall discharge this responsibility in consultation with the two paramedics on site.

Further, if this option is chosen, additional restrictions apply – see Article 3.1.9.

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3.1.5 Vehicles

3.1.5.1 Ambulances

For race meetings at which any round of a National Championship or higher status race is conducted, there must be present at all times at least one ambulance authorised to transport casualties from the circuit to hospital.

This vehicle must be legally authorised by the relevant State authority to transport sick and/or injured persons on public roads under emergency conditions.

3.1.5.2 Patient transport vehicles

For race meetings other than that identified in Article 3.1.5.1 and those which are specifically identified by CAMS from time to time, there must be present at all times at least one vehicle equipped to the standard of an ambulance.

3.1.5.3 Medical Car/s

Where medical personnel and equipment are to be conveyed to the scene of any incident in a car, the vehicle must be suitable to be driven on the track during competition and must be driven by a skilled and experienced driver.

The driver and medical personnel should remain in the vehicle at all times during practice, qualifying and racing. Where more than one such vehicle is necessary to ensure adequate response times to any scene on the circuit they should be positioned in consultation with the Clerk of Course and (where appropriate) the Chief Medical Officer.

All such vehicles must have radio communication with Race Control and with the Medical Centre.

3.1.6 Medical Equipment

At all race meetings medical equipment is required to support the level of medical, paramedical, ambulance and first aid facilities designated for the meeting.

The equipment must be adequate to deal with the range of injuries likely to be encountered and be commensurate with the skills of and be familiar to the medical or paramedical personnel using it.

Ideally all equipment should be supplied and maintained by the attending doctor or paramedical as a part of an arrangement with the race organiser. Equipment for the Medical Centre should be provided and maintained under a similar arrangement.

3.1.7 General

At a meeting no practice, qualifying or competition may commence unless the specified medical officer/s, paramedical personnel, ambulances, other vehicles and equipment are in attendance. If during a competition the required personnel or vehicles have left the circuit then practice or competition must be suspended until the required personnel and vehicles are again present.

3.1.8 Medical Response Plans

The pro forma medical response plan for races (see Attachment A) is designed to prompt consideration by organisers of the skills, resources and procedures which will be required to provide effective medical response capacity at an event and to provide an indication of how the medical response system will operate in a practical way. All race meetings are required to lodge a completed copy of the Medical Response Plan for their event prior to receiving a permit.

However, if an organiser of a race meeting plans to conduct more than one race meeting of the same status and at the same venue, they may lodge a common Medical Response Plan if the contents of that plan, following review at suitable intervals, remains unchanged during a calendar year.

3.1.9 Alternative arrangements for Club, Multi-Club or State Championship race meetings *(See Article 3.1.4.3)*

If the alternative to a CMO, as prescribed in Article 3.1.4.3 is implemented, additional restrictions will apply to the operation of the race meeting. These are:

3.1.9.1 The driver of any vehicle which is involved in an incident resulting in:

- car-to-car contact
- car-to-barrier contact
- any form of rollover

which renders the vehicle unable to continue in the session or race, will be considered to have retired from the remainder of the day's activities.

3.1.9.2 Any driver meeting the criteria in 3.1.9.1 may be permitted to continue to participate in the race meeting following the incident with the approval of the Stewards of the Meeting. Stewards will consider such permission only following the receipt of a written report from a registered medical practitioner.

3.1.9.3 A medical professional having current specialised skills equivalent to "Mica Paramedic" (Victoria) training or a Paramedic who can initiate advanced life support treatments must be stationed in a medical vehicle (see Article 3.1.5.3) located at or near the pit lane entry to the circuit.

They must be in communication with Race Control at all time.

This vehicle will only move onto the race track on the instruction from Race Control.

3.1.9.4 The medical response plan will need to be specifically noted to reflect the alternative arrangement

3.1.9.5 Competitors must be advised of the alternative arrangement in Supplementary Regulations. If this advice is given following publishing of Supplementary Regulations, the conditions of NCR 59 must be applied.

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3.1.10 Medical service for the Public at Race Meetings

At National Championship and higher status race meetings there must be provided a medical service different from and complementary to, the service organised for the track and which conforms to the civil legislation relevant to the state.

The Chief Medical Officer responsible for the trackside medical services and must approve the separate and independent medical service provided for the public.

Even if the medical service intended for the public is organised by a different body to that provided for the track, it must remain under the supervision of the Chief Medical Officer of the event. The details of the public service must be included in the Medical Response Plan for the event.

No vehicle from the public medical service may enter the competition area of the race track without authorisation from Race Control.

3.2 Road Events

For Australian Rally Championship events, the Medical Requirements are as outlined in Part 3 of the Australian Rally Championship Regulations as approved by the Australian Rally Commission (ARCom).

For Tarmac Rallies, the Medical Requirements are as outlined in the Tarmac Rally Standing Regulations as approved by ARCom.

For Touring Road Events, the Medical Requirements are at each test are either:

(a) the requirement for each sub event/special test were it to be run as a 'stand alone' event of the equivalent status or as outlined in the Touring Road Event Regulations; or

(b) the standard required for an ARC event.

At the time of printing, specific requirements for other road events are the subject of consideration by ARCom and the National Medical Committee. As an interim measure, State Councils may approve medical requirements for road events where standards have not yet been set by ARCom. In this case, requirements for specific events will be available from State Offices.

3.3 Off Road Events and Speed Events

All Off Road events and Speed Events require a Patient Transport Vehicle viz:

3.3.1 Club and Multi-Club Level Off Road Events and Speed Events

At least one vehicle must be provided. Consideration should be given to the terrain of the venue. The vehicle must have adequate space for at least one stretcher and an attendant adjacent to the stretcher; a crew (apart from the driver) of at least one first aid attendant qualified in basic life support competencies and the appropriate equipment for initial assessment and treatment of casualties and their care during transport consistent with their competencies.

3.3.2 State and National Level Off Road Events and Speed Events

3.3.2.1 At least one vehicle equipped to the standard of an ambulance with at least one stretcher, a crew of medical professionals, at least one of whom must have current specialised skills equivalent to "Mica Paramedic" (Victoria) training or a paramedic who can initiate advanced life support treatments and appropriate equipment commensurate with their competencies for initial assessment and treatment of casualties and their care during transport. This vehicle must be authorised by the relevant State authorities to transport injured persons on public roads.

3.3.2.2 Where medical personnel and equipment are to be conveyed to the scene of any incident in a car, the vehicle must be suitable to be driven on the course during competition and must be driven by a skilled and experienced driver.

3.4 Other Events

All other events, such as motorkhanas, should be the subject of a Medical Plan/Emergency Information Sheet approved by the CAMS office which issues the permit for the event. Depending on the event type and location, that plan should be in accordance with Attachment C hereto (Medical Response/Emergency Information Sheet).

4. PLANNING OF MEDICAL SERVICES AT MOTOR SPORT EVENTS

4.1 Medical Response Plans

The pro forma medical response plans provided elsewhere in this section are designed to prompt consideration by organisers of the skills, resources and procedures which will be required to provide effective medical response capacity at an event and to provide an indication of how the medical response system will operate in a practical way.

4.2 Standards

Event organisers are encouraged to meet standards higher than the minimum requirements for their particular event. In planning medical services, organisers should give consideration to the following:

- An effective medical service must be able to provide, at the scene of any incident within the minimum possible time, appropriately skilled personnel and equipment to assess and treat any injured or potentially injured person.
- A suitable vehicle (see specific requirements for some events) to enable the personnel to reach the scene. Alternatively, personnel could be so deployed that they can readily reach any scene on foot.
- A communication system is essential to successful response. This system will need to reflect the size and nature of the venue and the complexity of the medical plan.

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- A "Medical Centre" may be a suitable vehicle or a permanent or temporary building accessible from the course, and to the public road to enable transport of casualties to hospital.

5. MEDICAL EQUIPMENT

At all events medical equipment is required to support the level of medical, paramedical, ambulance and first aid personnel and facilities designated for the meeting.

The equipment must be adequate to deal with the range of injuries likely to be encountered and be commensurate with the skills of, and be familiar to, the medical or paramedical personnel using it.

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ATTACHMENT A – Model Medical Response Plan FOR FICTITIOUS 'AUSTRACK' CIRCUIT

Medical Response Plan for the Fictitious Austrack Round of the Fictitious Austrace National Championship.
[**Note:** references in *italics* are fictitious and used as an example only.]

1. PURPOSE

The purpose of the medical response plan is to ensure that appropriate medical and/or para-medical personnel with the necessary equipment can reach the scene of any incident in order to ensure that any casualties receive optimal care.

2. PERSONNEL

- The Chief Medical Officer is in charge of all medical services and is responsible to the Clerk of Course.
- A minimum of two other medical officers will be present throughout competition.
- Four paramedic ambulance officers as staff of ambulance vehicles.
- One paramedic and a driver crew in each FIV.
- A minimum of one paramedic in attendance at the Medical Centre.

3. VEHICLES

- A minimum of one First Intervention Vehicle (FIV) will be present.
- Two ambulances, one of which is authorised to transport patients under emergency conditions on public roads, are present at all times during practice and racing.
- If an ambulance leaves the circuit it will be replaced by another from *Austown Ambulance Station* within 15 minutes. A medical evacuation helicopter is on call from *Austrauma Centre* which is 20 minutes' response time.

4. DEPLOYMENT

(a) Personnel

- The Chief Medical Officer is located either in Race Control or in an FIV (in which case he maintains constant radio contact with Race Control).
- A medical officer, paramedic and driver crew each FIV.
- A medical officer and paramedic staff the Medical Centre.
- Each Ambulance has a crew of two paramedics.

(b) Vehicles

- The FIV is stationed at Pit Lane Exit with rapid access to the track.
- If a second FIV is available it is stationed at Turn 9, driver's left.

5. THE MEDICAL CENTRE

- The Medical Centre is located at Pit Lane Entry.

  It is readily accessible from the track and has dedicated all-weather road access to the public road. It has a security fence with a lockable gate. It complies with Appendix T to the NCR.

6. EQUIPMENT

The FIVs and Medical Centre are equipped to provide Advanced Trauma Life Support. Each ambulance is equipped to maintain patient care during transport.

7. COMMUNICATION

A dedicated radio channel links all medical facilities and personnel with Race Control. A direct telephone line links the Medical Centre to *Austcare General Hospital* and to the *Austrauma Centre*.

OPERATION

When an incident occurs on the track, the nearest track side official makes an assessment and manually signals if medical assistance is required.

Race Control is advised by radio or land line telephone and an FIV is either placed on standby pending further assessment or is dispatched to the scene.

In exceptional circumstances, particularly if a red flag has been displayed, an ambulance may be dispatched to the scene to provide further assistance. In any case, when a casualty is ready for transport an ambulance is dispatched to the scene to load the casualty.

The Medical Centre is kept informed of the casualty's condition during trackside management and when transport commences.

In exceptional circumstances, a casualty may be transported directly from the trackside to the *Austcare General Hospital* or to the *Austrauma Centre*, either by ambulance or by helicopter, if clinical priority so requires. This decision is made by Chief Medical Officer in consultation with the doctor/s and /or paramedics at the scene.

FIV and ambulances move from their trackside positions ONLY on instruction from Race Control.

OTHER DETAILS

- The *Austrack motor racing circuit* is 3.25km in length.
- The *Austcare General Hospital* is 20 minutes by road from the circuit.

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- The *Austrauma Centre* is 90 minutes by road, but is 20 minutes' response time by helicopter.
- The *Austevac* helicopter is based at the Austrauma Centre, and can reach the circuit in 20 minutes.
- There is an Ambulance Station at *Austown* which is 15 minutes by road from the circuit and a replacement ambulance would be dispatched if required.
- The above applies to casualties which effect the competition, eg, competitors, officials or pit crew. The *Austown* St John Brigade have been engaged to manage spectator medical needs.

ATTACHMENTS **(not included with this example)**

1. A diagram of the circuit showing the positions of all medical personnel and facilities.
2. A map of the venue showing access routes to and from the Medical Centre.
3. An organisational chart showing that the Chief Medical officer is responsible to the Clerk of the Course and that he is in charge of all medical, paramedical and ambulance facilities.

ATTACHMENT B – Pro Forma Medical Response Plan/Checklist

Available from www.cams.com.au/go/forms

ATTACHMENT C – Medical Response / Emergency Services Information Sheet

Available from www.cams.com.au/go/forms

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