

Framework to support swimmers with respiratory conditions

Principles to support decisions:

- Swimmers should be supported to compete safely and to the best of their ability.
- When considering training and competing with active respiratory disease, swimmer welfare will always be the priority.
- Swimmers will learn to manage their condition with the support of their coaches.
- Decisions about training and competing, when swimmers are experiencing flares of their condition, will be made between coaches and swimmers – the coach will have the final say when the decision is made that a swimmer should not compete.

Training

- If swimmers are frequently requiring their inhaler at training, (if this is repeated flares of the respiratory condition), the swimmer and parents will be asked to review this with the medical provider discussing whether preventative therapies are sufficient. If this is not considered to be a flare of the condition, then the reasons for getting out will be explored between the parents and the swimmer.

Competition

- Competing on antibiotics / increased preventative medications – swimmers and parents should consider sharing if they are on additional medications prior to a competition to discuss whether the racing programme needs to be adjusted. This disclosure is with the aim of optimising race programme and strategy if deemed appropriate. If swimmers suffer an acute attack when racing on additional treatments this will be a factor in decision making regards further competition.
- Swimmers are expected, and will be supported, to take their inhalers and medications as directed by their medical professionals. All swimmers who are using inhalers and medications for their respiratory condition should disclose their treatment plan in line with the parent charter at the beginning of each season, with updates for any material changes to their plan. This will be kept on file with membership forms, securely on Team Unify and would only be accessible by responsible officers. If coaches and team managers feel that swimmers are using inhalers excessively either before or after a race, the swimmer will be challenged, and use will be reviewed against their disclosed treatment plan. This is with the aim of supporting swimmers to learn to use their medications responsibly, noting that excessive use could potentially be flagged at National level meets where drug testing is in place.
- Swimmers who suffer an acute attack after or during a race at competition should be supported to manage their acute attack in line with their treatment plan. Decisions about whether further racing is advisable within that session will be discussed between the swimmer and the coaches. Decisions about further racing in the session will be individualised based around the safety and welfare of the swimmer, the intensity of the scheduled races and the frequency of attacks. Any acute attack during competition will be logged on the club incident forms to explore whether there are patterns to attacks that need to be considered for future race planning.
- The parents of swimmers who have repeated acute attacks will be asked to be poolside to support their swimmer pre and post races and to help manage their attacks to support the coaches and team managers where this is in the swimmer's best interests. This will require parents to be DBS checked by their base clubs. Chaperone poolside pass costs at competition venues may be due and would be organised and settled independently by the chaperone.