

# HOCKEY CANADA

## High Performance 1: Coach Workbook — Make Hockey Safe

Version 1.1, 2021





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## INTRODUCTION

## YOUR COACH WORKBOOK

Welcome to the Make Hockey Safe as part of your High Performance 1 training!

This workbook is for you to use during your training. The workbook contains all the tasks your Learning Facilitator will assign during the Make Hockey Safe component, as well as material that will help you complete those tasks.

The workbook is organized in terms of the 2 modules of the Make Hockey Safe component:



The workbook presents some or all of the following information for each module:

- Follow-along: The text of the slides your Learning Facilitator presents. This helps you follow along at the time and also serves as a reminder of the clinic's content that you can refer to later.
- **Tasks**: The tasks you complete during the clinic. These are in the Follow-along parts of the workbook right where your Learning Facilitator assigns them.
- More information: Supplementary information such as examples that will help you complete your tasks.
- Hockey Canada resources: Links to Hockey Canada resources on the module's topic.
- **Tools**: Forms and resources such as templates you can use in your own coaching.

## MAKE HOCKEY SAFE

## **S**AFETY AND RISK MANAGEMENT

In this section:

- Follow-along
  - <u>Task #1</u>
- Hockey Canada resources
- Tools

## Follow-along...

## Definition

Risk management is the process by which an organization or team identifies, assesses, controls, and minimizes the risk of bodily injury or financial loss arising from its activities.

## Why risk management?

Coaches assume both risks and responsibilities when they coach.

Players and parents expect:

- A safe environment
- A fun environment
- Overall due diligence

We meet these expectations by making risk management a priority.

Governments expect due diligence and responsible coaching.

### Key terms

**Negligence** relates to a failure to meet the standards of behaviour that the law expects and refers to behaviour or action that falls below a "reasonable" standard of care.

A coach's conduct is negligent when all four of the following conditions occur:

- 1 A duty of care exists (such as that which exists between a coach and a participant)
- 2 That duty imposes a standard of care that is not met by the coach
- 3 A participant, or other person, experiences harm
- 4 The failure to meet the standard can be shown to have caused or substantially contributed to the harm.

**Standard of care** is the level of attention and care a person should reasonably provide to another person under the circumstances. The law does not expect a coach to be perfect in their behavior, only that the coach be reasonable and act as other reasonable coaches would act in the same circumstances.

To determine what the standard of care is in any given circumstance involves looking to four sources:

- Written standards these are government regulations, equipment standards, rules for a particular sport or facility, rules and policies from a sport governing body, coaching standards and codes of conduct, and other internal risk management policies and procedures.
- Unwritten standards these are norms or conventions in a sport, an organization, or a facility that might not be written down, but are nonetheless known, accepted, and followed.

My notes...

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- Case law these are court decisions about similar situations. Where the circumstances are the same or similar, judges must apply legal principles in the same or similar ways. Earlier decisions of the court are a guide, or precedent, for future decisions where the facts are similar.
- Common sense this means simply doing what feels right, or avoiding doing what feels wrong. Common sense is the sum of a person's knowledge and experience. Trusting one's common sense is a good practice.

**Due diligence** is the care that a reasonable person exercises to avoid harm to other persons or their property. As a coach, you owe due diligence to all other stakeholders in the game, including parents, players, and the organization itself.

Liability refers to the responsibility for consequences of negligent conduct.

Responsibility may lie with the coach who was negligent, or with another person or entity entirely.

For example, an insurance policy transfers the financial liability for negligence to an insurance company. A valid waiver of liability agreement might eliminate liability entirely. An injured participant may be partially responsible for his or her injuries and thus may share liability with the negligent coach. And a sport organization may be vicariously liable for the negligent actions of its coach, whether he or she is an employee or a volunteer.

## Identifying risks

Risk management for Hockey Canada and for you as a coach means 1) reviewing your team activities to identify and understand the risks being generated and 2) determining ways to minimize them:

- What can go wrong?
- How likely is it to go wrong, and what are the consequences if it does go wrong?
- How you can stop the situation from going wrong or reduce the consequences if it does go wrong?

The common ingredient in all team activities is common sense.

## Steps in risk management

Hockey will always have a certain level of risk, but how we manage and control risk can help reduce the impact of risks in the hockey environment.

There are 5 steps to follow to manage risks effectively in the hockey environment:

- Step 1: Identify the activities your team will be participating in both at the rink and away from the rink (on-ice and off-ice).
- Step 2: Identify the risks connected with each activity (e.g., game, dressing room, arena parking lot, travel).
- Step 3: Assess the relative significance of all on-ice and off-ice risks. What risks do we as a team need to control?

- Step 4: Eliminate or minimize identified risks.
- Step 5: Provide protection, including insurance, against unavoidable risks.

### Risk areas in hockey

There are many risk areas in the hockey environment and they can be grouped into four broad categories:

- 1 **Facilities**. This includes the dressing room, ice surface, hotels, meeting rooms, and other venues where sport and activity occur.
- 2 **Equipment**. This can include the on-ice and off-ice equipment used by athletes, players' equipment, and equipment used by the team coaches.
- 3 **Program**. Physical risks are an inherent part of hockey; some are desirable and thus reasonable, and others are not.
- 4 **People**. This is the human element, and it includes participants, staff, volunteers, directors, and spectators, all of whom can be unpredictable in their behavior and can make mistakes in carrying out their duties.

### Your personal risk management plan

- Obtain your own insurance 1) if you are paid for your coaching services and your employer's liability insurance policy doesn't cover you or 2) if you are a volunteer coach. You are insured as long as you are registered by your member, not by a private league.
- Be familiar with and adhere to applicable standards, both written and unwritten, as well as internal policies and rules governing the facility, the sport, and your program.
- Monitor your participants' fitness and skill levels, emphasizing strong skill development, and teach new skills in a progressive fashion suitable to their age and skills.
- Never leave young participants unsupervised.
- Working with your team Safety Peron or Trainer, keep adequate first aid supplies on hand; ideally you, as well as your Safety Person or Trainer, would be trained in first aid.
- Develop an Emergency Action Plan for the facility or site where you regularly hold practices or competitions.
- Carry with you, at all times, emergency contact numbers and participants' medical profiles.
- Inspect facilities and equipment before every practice and competition; take steps to ensure deficiencies are corrected immediately, or adjust your activities accordingly to avoid the risk.
- Trust your common sense and intuition!
- Actively pursue your own training, professional development, and coaching certification.

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### **Related resources**

Learn about the warning signs for Sudden Arrhythmia Death Syndromes: <u>https://www.sads.ca/resources/information-for-coaches-educators/</u>

## Team Safety Person or Trainer

Hockey Canada requires that all teams have a Safety Person or Trainer who has completed the Hockey Canada Safety Program (HTCP in Ontario). It is also recommended this person be certified in first aid and CPR as part of their overall knowledge base.

The Safety Person or Trainer plays a leadership role in the implementation of risk management.

Having a Safety Person or Trainer means that you have a person with a proactive, preventive approach to safety who is also prepared to react if accidents, injuries, or medical emergencies occur.

The Safety Person or Trainer has many responsibilities on the team including:

- Managing risk with your team
- Checking player equipment regularly
- Promoting proper stretching and conditioning
- Recognizing life-threatening injuries
- Recognizing injuries requiring removal from action
- Referring players to a medical professional when required
- Coordinating the safe return to play
- Promoting healthy lifestyles
- Facilitating communication with players, parents, and coaches
- Acting as a Safety Person for both teams and injured game officials when necessary
- Assisting the coach in creating an Emergency Action Plan for your team

## **Emergency Action Plan**

- An Emergency Action Plan (EAP) is a plan for responding to emergency situations. It is designed by the coach with their Safety Person or Trainer.
- The idea behind the plan is that it will help the coach, the Safety Person or Trainer, and other volunteers to respond in a professional and clearheaded way if an emergency occurs.
- An EAP must be in place before your first session with your team.
- An EAP must be prepared for a facility (arena or off-ice training site) where your team practises or plays games. Remember every facility is different!
- Don't forget to include an Emergency Action Plan for any road trips, including the hotel and bus.

## Key personnel

**The Charge Person** – Generally your Safety Person or Trainer will take the role of the Charge Person. The Charge Person's broad responsibilities include:

- Initially taking control and assessing the situation
- Evaluating the injury and situation
- Initiating the EAP with a predetermined signal to your Call Person If an ambulance or medical care is required.

**The Call Person** – Ideally, the Call Person is at all games and practices but has no bench responsibilities. The Call Person is responsible for...

- Making the telephone call when emergency help is required
- Knowing the location of all emergency telephones or pay phones in the facility being used
- Having a list of all emergency telephone numbers in the city or town in which your team is playing and knowing if 911 is available in the area
- Knowing the best route to the arena facility and ice surface your team is using

**The Control Person** - The Control Person is responsible for retrieving the automated external defibrillator (AED) or first aid kit if asked to do so, as well as for controlling the crowd and other participants to ensure that the EAP is executed effectively. The Control Person is also responsible for ....

- Seeking out highly trained medical personnel in the arena facility if an injury is serious and cannot wait for emergency assistance to arrive
- Ensuring that the quickest and best route to the ice surface is clear and accessible for the ambulance
- Meeting the ambulance at the arena entrance and directing its crew to the injured person

## Concussions

- Concussions are brain injuries caused by the brain moving inside the skull.
- The movement changes how brain cells function, leading to symptoms that can be physical (headaches, dizziness), cognitive (problems remembering or concentrating), or emotional (feeling depressed).
- A concussion can result from any impact to the head, face, or neck or from a blow to the body that causes the head to jolt suddenly.
- Children are more sensitive than adults to the effects of a concussion and need a longer recovery period before returning to activity.
- It is important for coaches to become familiar with responsible prevention of, recognition of, and response to concussions.
- Follow your organization's and Hockey Canada's steps for removal from play and return to play.
- Review the <u>Hockey Canada Concussion Card</u> (see page 16) with your Safety Person or Trainer.

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Check out the information on concussions listed on page 12.

## Hockey Canada's policy on concussions

Anyone with a concussion or suspected concussion must stop all activity immediately and be referred to a physician as soon as possible. Coaches, the Safety Person or Trainer, and parents/guardians are not to pressure the player to return to play until the player has completed the six-step return-to-play strategy and is medically cleared by a physician.

For the full policy, see <u>https://cdn.hockeycanada.ca/hockey-canada/Hockey-</u> <u>Programs/Safety/Concussion/Downloads/hockey-canada-concussion-policy-</u> <u>e.pdf</u>.

## Task #1

Follow these 2 steps:

1 Read the selection below:

| Scenario | You are coaching a U18 team and the team will be travelling<br>by bus from your home facility to a tournament outside your<br>province for three days. Most of the parents have decided not<br>to attend the event because of the cost, but 4 sets of parents<br>have agreed to attend as chaperones.   |
|----------|---|
|          | At the hotel, there will be two players per room. The<br>chaperones' hotel rooms (4 sets of parents) will be spread out<br>among the players' rooms to allow them to help supervise the<br>team. Coaches' hotel rooms will also be among players'<br>rooms. All meals will be eaten as a team, and there is a<br>meeting room at the hotel for team meetings when required. |

- 2 Then use the table below to answer these questions on risk management:
  - Identify 5 things that could go wrong.
  - For each of the 5,
    - Indicate the chances it could go wrong.
    - Describe 2 or 3 actions you can take to stop it from going wrong or minimize the consequences if it does go wrong.

| What could go wrong? | What are the chances? |        | nces? | What actions could stop it from going wrong or minimize the consequences if it does go wrong? |              |
|----------------------|-----------------------|--------|-------|---|--------------|
|                      | Low                   | Medium | High  | Before leaving  | At the hotel |
| #1                   |                       |        |       |   |              |
| #2                   |                       |        |       |   |              |
| #3                   |                       |        |       |   |              |
| #4                   |                       |        |       |   |              |
| #5                   |                       |        |       |   |              |

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## **Hockey Canada resources**

## Concussions

Concussion Recognition Tool 5: <u>https://cdn.hockeycanada.ca/hockey-</u> <u>canada/Hockey-Programs/Safety/Concussion/Downloads/2017-clean-</u> <u>concussion-tool-5.jpg</u>

Facts and prevention: <u>https://www.hockeycanada.ca/en-ca/hockey-programs/safety/concussions/facts-and-prevention</u>

Hockey Canada Concussion Toolbox: <u>https://www.hockeycanada.ca/en-ca/hockey-programs/safety/concussions/concussion-toolbox</u>

Hockey Canada policy: <u>https://cdn.hockeycanada.ca/hockey-canada/Hockey-</u> Programs/Safety/Concussion/Downloads/hockey-canada-concussion-policy-e.pdf

Links and downloads: <u>https://www.hockeycanada.ca/en-ca/hockey-programs/safety/concussions/links-and-downloads</u>

## **Emergency Action Plan**

Coach's role: <u>https://www.hockeycanada.ca/en-ca/hockey-</u> programs/safety/essentials/emergency-action-plans/coaches-managers

EAP template: <u>https://cdn.hockeycanada.ca/hockey-canada/Hockey-</u> Programs/Safety/Safety-Program/Downloads/eap\_organization\_form\_e.pdf

Facility checklist: <u>https://cdn.hockeycanada.ca/hockey-canada/Hockey-</u> Programs/Safety/Safety-Program/Downloads/arena\_safety\_checklist\_e.pdf

Injury report forms: <u>https://www.hockeycanada.ca/en-ca/hockey-programs/safety/essentials/downloads</u>

## Hazing

Hockey Canada statement regarding Regulation A.15 (hazing): https://cdn.hockeycanada.ca/hockey-canada/Hockey-Programs/Safety/Downloads/2020/2020-21-safety-hazing-bulletin-e.pdf

## Insurance

An information guide to Hockey Canada's risk management and national insurance programs: <u>https://cdn.hockeycanada.ca/hockey-canada/Hockey-Programs/Safety/Insurance/Downloads/safety\_teamwork\_e.pdf</u>

Q and A about Hockey Canada's insurance program: <u>https://cdn.hockeycanada.ca/hockey-canada/Hockey-</u> <u>Programs/Safety/Insurance/Downloads/insurance\_q\_and\_a\_e.pdf</u>

## Safety Person

Responsibilities: <u>https://cdn.hockeycanada.ca/hockey-canada/Hockey-</u> <u>Programs/Safety/Safety-</u> <u>Program/Downloads/safety\_persons\_responsibilities\_e.pdf</u>

## Tools

- Emergency Action Plan
- Hockey Canada Concussion Card

## **Emergency Action Plan**

|                                   | SAFETY REQUIRES TEAMWORK<br>AN EMERGENCY ACTION PLAN FOR HOCKEY  |   |  |  |
|-----------------------------------|--|---|--|--|
| The                               | coach, manager and safety person should in<br>ensure they have the volunteers rec<br>Equipment Locations |   |  |  |
| Please locate and identify area o | n map:   | Legend<br>Phone P<br>Exits E<br>First aid FA<br>AED AED | Arena/Facility Name:<br>Address:<br>Telephone Number:<br>Emergency Telephone Numbers |  |
|                                   |  |   | Emergency:<br>Ambulance:<br>Fire Dept:<br>Hospital:<br>Police:<br>General:           |  |

#### Safety Person / Charge Person

- Initially takes control of the situation.
- Instructs player to lay still and bystanders, such as other players, not to move player.
- Do not move the athlete.
- Assess injury status of player, decide if an ambulance/medical care is required.
- If the injury is serious and warrants immediate attention that you are not qualified to provide, make your predetermined signal to your call person, control person and your pre-determined first aid/medical person.

## Roles

#### Call Person

- Makes call when emergency assistance required (tests their cell phone in the facility to ensure it will work).
- Know location of alternate phones in the facility being played in. Have change or a phone card if necessary.
- Ideally at all games and practices and not involved on the bench.
- Has a list of emergency phone numbers in the area of the facility.
- Has a diagram displaying specific directions and best route to the arena facility.

#### **Control Person**

- Pre-determine the location of the AED and other emergency equipment in the facility.
- Retrieving the AED and/or first aid kit and bringing to the injured player if requested.
- Seek highly-trained medical personnel in the facility if requested by the Charge Person.
- Ensure teammates, other participants and spectators are not in the way of the charge person.
- Advise opponents, on-ice officials, arena staff and parents of the steps being taken.
- Ensure the quickest and best route for the ambulance crew to the ice surface is clear and accessible.
- Meet the ambulance on its arrival and direct EMS to the injured player.

## **IMPORTANT REMINDERS**

The game official continues to assume the role of being in charge of the overall environment.

It is important for officials to note that if the safety person makes the signal for assistance that there may be a number of pre-determined people who will respond and will require access to the ice.

Once the ambulance is called, the officials should send both teams to their dressing rooms.

See flow chart on reverse



## Hockey Canada Concussion Card

## Hockey Canada Concussion Card

CONCUSSION EDUCATION AND AWARENESS PROGRAM

#### **Concussion in Sport**

All players who are suspected of having a concussion must be seen by a physician as soon as possible. A concussion is a brain injury.

A concussion most often occurs without loss of consciousness. However, a concussion may involve loss of consciousness.

#### **How Concussions Happen**

Any impact to the head, face or neck or a blow to the body which causes a sudden jolting of the head and results in the brain moving inside the skull may cause a concussion.

#### **Common Symptoms and Signs of a Concussion**

Symptoms and signs may have a delayed onset (may be worse later that day or even the next morning), so players should continue to be observed even after the initial symptoms and signs have returned to normal.

\*A player may show any one or more of these symptoms or signs.

#### Symptoms

- Headache
- Dizziness
- Feeling dazed
- Seeing stars
- · Sensitivity to light
- · Ringing in ears
- Tiredness
- Nausea, vomiting
- Irritability
- · Unusual emotions, personality change, and inappropriate behaviour

Vacant stare

- Sleep disturbance
- · Confusion, disorientation

For a complete list of symptoms and signs, visit parachute.ca

#### RED FLAGS - If any of the following are observed or complaints reported following an injury, the player should be removed from play safely and immediately and your Emergency Action Plan initiated. Immediate assessment by a physician is required.

- · Neck pain or tenderness
- · Severe or increasing headache
- Vomiting · Deteriorating conscious state
- Double vision
- · Seizure or convulsion
- · Loss of consciousness
- · Increasingly restless, agitated or combative
- · Weakness or tingling/burning in arms or legs

#### **Concussion – Key Steps**

- · Recognize and remove the player from the current game or practice.
- · Do not leave the player alone, monitor symptoms and signs.
- · Do not administer medication.
- · Inform the coach, parent or guardian about the injury.
- The player should be evaluated by a medical doctor as soon as possible.
- The player must not return to play in that game or practice, and must follow the 6-step return to play strategy and receive medical clearance by a physician.

## 6-Step Return to Play

The return to play strategy is gradual, and begins after a doctor has given the player clearance to return to activity. If any symptoms/signs return during this process, the player must be re-evaluated by a physician. No return to play if any symptoms or signs persist. Remember, symptoms may return later that day or the next, not necessarily when exercising!

IMPORTANT - CONSULT WITH THE TREATING PHYSICIAN ON RETURN TO LEARN PROTOCOLS. PLAYERS SHOULD HAVE THE ABILITY TO RETURN TO SCHOOL FULL TIME PRIOR TO PROCEEDING THROUGH STEPS 5 AND 6 OF THE RETURN TO PLAY STRATEGY.

IMPORTANT - FOLLOWING A CONCUSSION AND PRIOR TO STEP 1 A BRIEF PERIOD OF PHYSICAL AND MENTAL REST IS RECOMMENDED.

- STEP 1 Light activities of daily living which do not aggravate symptoms or make symptoms worse. Once tolerating step 1 without symptoms and signs, proceed to step 2 as directed by your physician.
- STEP 2 Light aerobic exercise, such as walking or stationary cycling. Monitor for symptoms and signs. No resistance training or weight lifting.
- STEP 3 Sport specific activities and training (e.g. skating).
- STEP 4 Drills without body contact. May add light resistance training and progress to heavier weights.

The time needed to progress from non-contact to contact exercise will vary with the severity of the concussion and the player. Go to step 5 after medical clearance (reassessment and written note).

- STEP 5 Begin drills with body contact.
- STEP 6 Game play. (The earliest a concussed athlete should return to play is one week.)

Note: Players should proceed through the return to play steps only when they do not experience symptoms or signs and the physician has given clearance. Each step should be a minimum of one day (but could last longer depending on the player and the situation). If symptoms or signs return, the player should return to step 2 and be re-evaluated by a physician.

IMPORTANT - Young players will require a more conservative treatment. Return to play guidelines should be guided by the treating physician.

#### **Prevention Tips**

#### Players

- · Make sure your helmet fits snugly and that the strap is fastened
- · Get a custom fitted mouthquard
- Respect other players

#### Person/Referee · Eliminate all checks to the head · Eliminate all hits from behind

Coach/Trainer/Safety

- · Recognize symptoms and signs of concussion
- · Inform and educate players about the risks of concussion



**Education** Tips HOCKEY CANADA CONCUSSION RESOURCES hockeycanada.ca/concussion

> PARACHUTE CANADA parachute.ca

Revised July 2020. Item #55711

#### · No hits to the head No hits from behind Strong skill development

#### Signs · Poor balance or coordination · Slow or slurred speech · Poor concentration

· Delayed responses to questions

· Decreased playing ability

## SOCIAL MEDIA

In this section:

Follow-along

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## Follow-along...

## **Coaches: Best practices**

- Be proactive
  - Educate players and team staff
- Set guidelines
  - Make team decisions, get player input and ideas (creates buy-in and accountability)
- Look for red flags
  - Do you sense friction? When are phones a distraction?
- Create a safe space
  - Establish open dialog and an environment where players feel safe and comfortable sharing concerns

Coaches: Team policy Considerations when creating your policy...

- WHO: Who does your policy apply to? Define any differences between players and staff.
- WHAT: Encourage the entire team to define what is included ("the rules").
- WHERE: What spaces are sensitive? Where should social media be offlimits?
- WHEN: Have a plan for when something negative occurs. What are the consequences?
- WHY: Be clear and specific about the purpose and expectations of the team and association.

# Remember: Know where you are – tournaments or events may have their own rules.

## Players: Best practices

- Good photo and well-written bio
- Correct spelling and grammar
- Value in the visual (incorporate photo and video)
- Balance of personal and professional life
- Balance of original and curated content
- Engage with fans, stakeholders, sponsors, team, and teammates
- Stay positive and respectful

## Players: Risk vs. reward

| Risk   | Reward   |
|--|--|
| × Tarnish reputation   | ✓ Grow fanbase                                 |
| Embarrass yourself (+ team,<br>league, country, sponsor, family) | <ul> <li>Build professional network</li> </ul> |
| Cause friction/distraction within your team                      | ✓ Attract sponsorships                         |
| ✗ Be fined, charged  | ✓ Promote causes                               |
| Set suspended, expelled  | ✓ Amplify team/league initiatives              |
| ✗ Lose sponsorship, scholarship                                  | ✓ Engage with fans                             |
| Not be recruited, drafted, selected for a team                   | ✓ Have a voice                                 |

## Players: Social media 101

| Do   | Don't   |
|--|---|
| <ul> <li>Clean up your accounts</li> </ul>   | Disclose personal info about<br>yourself or others                                |
| <ul> <li>Adjust your settings (privacy, passwords)</li> </ul>                                | Post when angry, upset, tired, or intoxicated                                     |
| ✓ Log out and lock phone   | <ul> <li>Engage in controversial, heated discussions (feed the trolls)</li> </ul> |
| <ul> <li>If your account gets hacked:<br/>report it, let people know</li> </ul>              | Make offensive or discriminatory remarks  |
| <ul> <li>Be aware of and abide by<br/>team/tournament rules</li> </ul>                       | <ul> <li>Post content with references to<br/>drugs, alcohol, money</li> </ul>     |
| <ul> <li>Create an online presence that is<br/>an authentic reflection of who you</li> </ul> | Mention companies/brands that<br>conflict with sponsors                           |
| are  | Engage in cyberbullying   |



Visit coach.ca, the resource and information hub for coaches in Canada. Check your coaching transcript in the Locker, access valuable eLearning coaching modules, and get practical coaching tips that you can use today from the Coaching Association of Canada.

