

2025/26 SEASON

WHAT'S NEW & WHAT'S NOT

*FACE MASKS,, REMOVING PC EQUIPMENT, NON-PLAYING PERSONNEL, 40
SECONDS & BASELAYER*



FACE MASKS

- **FACE MASKS WILL BE MANDATORY FOR DEFENDERS DURING PCS**
- **IF TEAMS DON'T HAVE ENOUGH MASKS (INCLUDING IF BROKEN) - THEY DEFEND THE PC WITH PLAYER WEARING HOWEVER MANY THEY HAVE**
- **IF DEFENDING TEAM IS PLAYING WITH NO GK THEN ALL 5 PLAYER MUST WEAR A FACE MASK**
- **PLEASE USE COMMON SENSE AROUND LENGTH OF TIME FOR PC SETUP**
- **FACE MASKS (AND OTHER PC EQUIPMENT) ARE ALLOWED TO BE WORN UP TO THE 23M LINE WITHOUT PENALTY, HOWEVER THEY SHOULD BE ENCOURAGED TO REMOVE THEM SAFELY AT THE FIRST AVAILABLE OPPORTUNITY**



REMOVAL OF PC EQUIPMENT

- IT IS CONSIDERED NEGLIGENT OR RECKLESS BEHAVIOUR WHEN REMOVING PC EQUIPMENT IF IT HITS AN UMPIRE, OPPOSITION PLAYER OR SPECTATOR
- A PC SHOULD BE AWARDED AGAINST THE DEFENDING TEAM (GUIDELINES ARE WAIST HEIGHT AND ABOVE)
- ALONG WITH THE PC THE OFFENDING PLAYER SHOULD RECEIVE A PERSONAL PENALTY - MINIMUM **5 MINUTE YELLOW CARD**
- IF THE OFFENSE IS DEEMED DELIBERATE RATHER THAN NEGLIGENT THE OFFENDING PLAYER SHOULD RECEIVE A **RED CARD**



PC EQUIPMENT

IMAGES OF FACEMASKS AND GLOVES
GENERALLY USED AND ACCEPTED FOR
DEFENDING PCS



The following **knee protection** is only allowed when the part **above** the sock is of the colour of the sock or black AND when the part **under** the knee is under the socks. This part cannot be above the socks, even if that part is of the same colour of the socks.



ADDITIONAL PC ADVICE



- **NO 40 SECONDS TIMING FOR PC SETUP - CARDS SHOULD NOT BE ISSUED FOR ATTACKERS OR DEFENDERS NOT BEING READY AND A PC SHOULD **NOT** BE REVERSED**
- **TEAMS CAN RE-HUDDLE AT THE RE-AWARDS OF A PC. THIS HUDDLE SHOULD NOT BE ALLOWED TO LAST A LONG PERIOD OF TIME**
- **COMMON SENSE SHOULD BE USED WITH A PARTICULAR EMPHASIS ON SAFETY REGARDING THE USE OF FACE MASKS DURING PCS – IF TOO LONG IS BEING TAKEN, STOP THE TIME!**

DISCIPLINE

NON PLAYING PERSONNEL & SUBS

- A PERSONAL PENALTY MAY BE AWARDED TO A TEAM CAPTAIN WHO IS RESPONSIBLE FOR THE CONDUCT/BEHAVIOUR OF THEIR OWN TEAM, IF THERE IS INDISCIPLINE FROM NON PLAYING STAFF ON THE BENCH
- TEAM CAPTAINS MAY RECEIVE A **YELLOW CARD** ON BEHALF OF NON PLAYING PERSONNEL NAMED ON THE MATCH CARD (TEAM TO PLAY TIME OF SUSPENSION WITH 1 LESS PLAYER)
- IF A SUB RECEIVES A **GREEN** OR **YELLOW CARD** THAT PLAYER SERVES THE SUSPENSION AND THE TEAM MUST PLAY WITH 1 LESS PLAYER FOR THE TIME OF THE SUSPENSION (IF THE PERSON ON THE BENCH CANNOT BE IDENTIFIED THE CARD SHOULD BE ISSUED TO THE TEAM CAPTAIN).
- IF A SUB RECEIVES A **RED CARD** THAT PLAYER MUST LEAVE THE PLAYING AREA COMPLETELY AND THEIR TEAM MUST PLAY THE REMAINDER OF THE GAME WITH ONLY 10 PLAYERS ON THE PITCH AT ANY ONE TIME
- IF A TEAM OFFICIAL (COACH/MANAGER/PHYSIO) RECEIVES A **RED CARD**
 - THAT PERSON MUST LEAVE THE PLAYING AREA COMPLETELY
 - THE TEAM CAPTAIN DOES **NOT** HAVE TO REMOVE THEMSELVES FROM THE PITCH AND MAY CONTINUE TO TAKE PART IN THE GAME
 - THE TEAM STILL PLAYS WITH 11 PLAYERS

DISCIPLINE

MANAGEMENT OF SUSPENDED PLAYERS

This relates to matches within Ulster that do not have a Technical Table present

- **Green Card** (minimum 2 minutes) - suspended players should be sent to the area between to 2 team dugouts/benches and to the side their team is positioned
- **Yellow Card** (minimum 5 minutes) - suspended players should be sent to their own team dugout/bench
- **Red Card** - suspended player should be sent out of the ground and not be allowed to stand outside the fenced playing area

NOTE : players returning from **Green** or **Yellow** suspensions should be brought back on to the pitch at the next available opportunity (stoppage of play for sidelines, free hits, long corners) after the time of the suspension has been served. Players can NOT be brought back on during the playing of a Penalty Corner.

BASELAYERS



- **UH HAVE ADVISED THAT UMPIRES ARE NOT EXPECTED TO ENFORCE TEAMS MATCH THEIR BASELAYERS TO PLAYING KIT**
- **IF THERE IS AN ISSUE WITH BASELAYERS UH ADVISE UMPIRES SPEAK TO THE TEAM CAPTAIN WHO SHOULD ATTEMPT TO RESOLVE IT THERE AND THEN**
- **IF ISSUE IS NOT RESOLVED IT SHOULD BE NOTED ON THE MATCH CARD. ANY REPEAT OFFENSES WILL BE MONITORED BY UH AND DEALT WITH DIRECTLY WITH THE CLUB.**
- **LINK TO JOMA BASELAYERS FOR ANYONE WHO WISH TO BUY MATCHING COLOURS TO UMPIRING SHIRTS**
[HTTPS://WWW.KITLOCKER.COM/JOMA#SEARCH:QUERY=JOMA+BASELAYERS&ATTRIB%5BCONTENT_TYPE%5D%5B0%5D=PRODUCT&FIRST=0](https://www.kitlocker.com/joma#search:query=joma+baselayers&attrib%5Bcontent_type%5D%5B0%5D=product&first=0)

Concussion

This should be used in conjunction with the Hockey Ireland Guidance document that is available for download from the Umpires Portal

Pocket CONCUSSION RECOGNITION TOOL™

To help identify concussion in children, youth and adults



RECOGNIZE & REMOVE

Concussion should be suspected if **one or more** of the following visible clues, signs, symptoms or errors in memory questions are present.

1. Visible clues of suspected concussion

Any one or more of the following visual clues can indicate a possible concussion:

- Loss of consciousness or responsiveness
- Lying motionless on ground / Slow to get up
- Unsteady on feet / Balance problems or falling over / Incoordination
- Grabbing / Clutching of head
- Dazed, blank or vacant look
- Confused / Not aware of plays or events

2. Signs and symptoms of suspected concussion

Presence of any one or more of the following signs & symptoms may suggest a concussion:

- Loss of consciousness
- Seizure or convulsion
- Balance problems
- Nausea or vomiting
- Drowsiness
- More emotional
- Irritability
- Sadness
- Fatigue or low energy
- Nervous or anxious
- "Don't feel right"
- Difficulty remembering
- Headache
- Dizziness
- Confusion
- Feeling slowed down
- "Pressure in head"
- Blurred vision
- Sensitivity to light
- Amnesia
- Feeling like "in a fog"
- Neck pain
- Sensitivity to noise
- Difficulty concentrating

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3. Memory function

Failure to answer any of these questions correctly may suggest a concussion.

"What venue are we at today?"
"Which half is it now?"
"Who scored last in this game?"
"What team did you play last week / game?"
"Did your team win the last game?"

Any athlete with a suspected concussion should be **IMMEDIATELY REMOVED FROM PLAY**, and should not be returned to activity until they are assessed medically. Athletes with a suspected concussion should not be left alone and should not drive a motor vehicle.

It is recommended that, in all cases of suspected concussion, the player is referred to a medical professional for diagnosis and guidance as well as return to play decisions, even if the symptoms resolve.

RED FLAGS

If **ANY** of the following are reported then the player should be safely and immediately removed from the field. If no qualified medical professional is available, consider transporting by ambulance for urgent medical assessment:

- Athlete complains of neck pain
- Increasing confusion or irritability
- Repeated vomiting
- Seizure or convulsion
- Weakness or tingling / burning in arms or legs
- Deteriorating conscious state
- Severe or increasing headache
- Unusual behaviour change
- Double vision

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Do not attempt to move the player (other than required for airway support) unless trained to do so.
- Do not remove helmet (if present) unless trained to do so.

from McCrory et al, Consensus Statement on Concussion in Sport, Br J Sports Med 47 (5), 2013

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SIGNS OF A CONCUSSION



Loss of consciousness



Disorientation



Incoherent speech



Confusion



Memory loss



Dazed or vacant stare

SYMPTOMS OF A CONCUSSION



Headache or dizziness



Difficulty concentrating



Sensitivity to light



ringing in the ears



Fatigue



Vomiting