

IPCH

CLASSIFICATION

MANUAL 2025

PCH Classification Committee
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PART A:

International

Standards for

Classification of

Powerchair

Hockey

Chapter 1: Purpose of Classification and scope of the Classification Manual

1. Adoption

- 1.1 These Classification Rules and Regulations are referred to throughout this document as the 'Classification Rules'. They have been prepared by the International Powerchair hockey (IPCH) and World Abilitysport to implement the requirements of the 2015 IPC Athlete Classification Code and International Standards including the Review of the classification code 2024.
- 1.2 The original Classification Manual was adopted by IPCH during the Sport Assembly 2016 held on 18 July 2016 in De Rijp (NED).
- 1.3 The Classification Manual refers to a number of Appendices. These Appendices form an integral part of the Classification Rules.
- 1.4 The Classification Manual forms part of the IPCH Rules and Regulations.
- 1.5 The Classification Manual is supplemented by a number of forms that have been prepared to assist Athlete Evaluation. These forms are available from IPCH and can be amended by IPCH from time to time.

2. The purpose of Classification

- 2.1 The purpose of Classification is to enable athletes with Eligible Impairments to participate in competitive sport with a pathway to sporting excellence.
- 2.2 Classification establishes a unique framework that promotes fair and meaningful competition by minimising the impact of athletes' impairments on the outcome of competition so that the outcome is determined by factors other than impairment..
- 2.3 To achieve its purpose, Classification performs two critical functions:
 - a) define who is eligible to compete in Para sport and consequently who has the opportunity to reach the goal of becoming a Paralympic Athlete; and
 - b) group Athletes into Sport Classes which aim to ensure that the impact of Impairment is minimized, and sporting excellence determines which Athlete or team is ultimately victorious.
- 2.4 Classification systems are not designed to group athletes into classes based on their sport performance. Rather, the unit of Classification is an athlete's impairment, and impairments are classified based on the extent to which they impact an athlete's ability to perform the fundamental activities in their specific sport. An athlete who improves their sport performance will become more competitive within their allocated Sport Class, but improved performance does not of itself provide a basis for changing an athlete's Sport Class.

3. Application of the IPCH Classification Manual

- 3.1 Para sport Classification systems are designed to provide a framework to allow for competitive (rather than participatory) sport for persons with disabilities.
- 3.2 These Classification Rules apply to all IPCH Classification Personnel, Athletes and Athlete Support Personnel (incl. National Federation's representatives) who are registered and/or licensed with IPCH, and/or participate in any Evaluation session,

Event or Competition organized, authorized or sanctioned by IPCH. More specifically the IPCH Classification Manual will apply to

- a) IPCH World Championships
- b) IPCH Regional Championships (as part of the direct qualification pathway to participate in the World Championships)
- c) IPCH Qualification Tournament (as part of the direct qualification pathway to participate in the Regional Championships)
- d) any Competition where Observation Assessment may take place as part of a Classification process
- e) any other event or competition sanctioned or recognised by IPCH.

All the above mentioned competitions will be referred to as IPCH sanctioned or recognized competitions in this document.

National federations of Powerchair Hockey should apply the principles of this Classification Manual in national competitions to ensure consistency in athlete evaluation and promote a fair and coherent classification system aligned with international standards. International classification results must be recognized and applied within national leagues, ensuring that an athlete's classification status remains consistent across both national and international events.

However, National federations can deviate from the IPCH classification system to meet their particular circumstances. Such adaptations may include adjustments to the size of the classification panel or allowing less impaired athletes to participate at the national level. It must be clearly highlighted that athletes who fall outside the international eligibility criteria, unless their situation changes, have no pathway to international sanctioned competition. These distinctions must be transparent to preserve fairness and clarity across all levels of the sport.

- 3.3 These Classification Rules must be read and applied in conjunction with all other applicable rules of IPCH, including but not limited to the sport technical rules of IPCH. In the event of any conflict between these Classification Rules and any other rules, the Classification Rules shall take precedence.
- 3.4 IPCH will only permit an Athlete to compete in an International Competition if that Athlete has been allocated a Sport Class and designated with a Sport Class Status in accordance with these Classification Rules.
- 3.5 IPCH will offer Athletes the opportunity to be assigned a Sport Class and designated with a Sport Class Status based on these Classification Rules at Recognized Competitions (or other locations specified by IPCH). IPCH will notify Athletes, National Bodies, and National Paralympic Committees in advance regarding the details of such Recognized Competitions (or other specified locations).

4. Interpretation and Relationship to IPC Classification Code

- 4.1 References to an 'Article' mean an Article of these Classification Rules, references to

an 'Appendix' mean an Appendix to these Classification Rules, and Capitalized terms used in these Classification Rules have the meaning given to them in the Glossary to these Classification Rules.

- 4.2 References to a 'sport' in these Classification Rules refer to the sport Powerchair Hockey (PCH).
- 4.3 The Appendices to these Classification Rules are part of these Classification Rules both of which may be amended, supplemented, and/or replaced by the IPCH from time to time.
- 4.4 Headings used in these Classification Rules are used for convenience only and have no meaning that is separate from the Article or Articles to which they refer.
- 4.5 These Classification Rules are to be applied and interpreted as an independent text but in a manner that is consistent with the 2015 IPC Athlete Classification Code and the accompanying International Standards including the classification code Review of 2023

Chapter 2: Roles and Responsibilities & Classification Personnel

5. Roles and Responsibilities

IPCH

5.1 The roles and responsibilities of IPCH include to:

- a) increase awareness of the purpose, principles, and scientific rationale behind Classification;
- b) develop, implement, and regularly review and publish Classification rules in Compliance with the IPC Classification Code and the International Standards;
- c) require that their National Federations and other members are in Compliance with the Classification Code and the International Standards (to the extent possible),
- d) develop and deliver (where appropriate with the involvement of Athletes) Classification education and awareness programmes for National Federations, Athletes, Athlete Support Personnel, and Classifiers which must, at a minimum, explain the International Federation's Classification rules and explain that those rules must comply with the Classification Code and the International Standards;
- e) promote, initiate, and/or review Classification Research;
- f) develop, implement, and maintain a clear Classifier recruitment, training, and development pathway;
- g) cooperate fully, honestly, and in good faith with World Abilitysport and (if applicable) IPC in connection with any investigations conducted in relation to potential Intentional Misrepresentation or Compliance matters; and
- h) ensure that their National Federations are subject to obligations in the IPCH Classification rules to:
 - provide IPCH with all relevant Diagnostic Information required to enable IPCH Classifiers to assess the existence of an Underlying Health Condition and Eligible Impairment for an Athlete,
 - ensure that all such information is complete, accurate, authentic, and relevant,
 - provide that IPCH is informed of any changes to that information; and
 - ensure that Athletes comply with the responsibilities applicable to them in relation to Evaluation Sessions (including taking reasonable steps to ensure their attendance at such sessions).

NPCs and PCH National Federations/Organizations

5.2 The roles and responsibilities of NPCs and of the National PCH Federations/Organizations include to:

- a) support their Athletes and Athlete Support Personnel to become aware of their roles and responsibilities under this Classification Code and the Classification rules of IPCH, prior to the Athlete submitting Diagnostic Information and/or attending an Evaluation Session;
- b) disseminate Classification information and education resources to their National Federations, Athletes, and Athlete Support Personnel;
- c) increase awareness of the purpose, principles, and scientific rationale behind Classification amongst relevant stakeholders in their respective nations;
- d) promote the development of a national Classification strategy, including in relation to national Classification systems and national classifiers;
- e) act as a liaison to the IPCH on behalf of its National Federations, Athletes, and Athlete Support Personnel; and
- f) cooperate fully, honestly, and in good faith with the IPCH, World Abilitysport and IPC (if applicable) in connection with any investigations conducted in relation to potential Intentional Misrepresentation or Compliance matters.

Classification Personnel

5.3 The roles and responsibilities of Classification Personnel include to:

- a) have a complete working knowledge of all applicable policies, rules and processes established by these Classification Rules.
- b) abide by the IPCH Code of Conduct and any other regulations
- c) use their influence to foster a positive and collaborative Classification attitude and communication.
- d) assist in the development, management, and implementation of Classification Systems, including participation in education and research; and
- e) cooperate with any investigations concerning violation of these Classification Rules.

Athlete Responsibilities

5.4 It is the personal responsibility of Athletes, Athlete Support Personnel, and Classification Personnel to familiarize themselves with all the requirements of these Classification Rules.

5.5 The roles and responsibilities of Athletes include to:

- a) be knowledgeable of and comply with all applicable regulations, policies, rules, and processes established by the IPCH Classification Manual and adopted pursuant to the Classification Code and the International Standards;

- b) participate in, and cooperate fully, honestly, and in good faith with any Classification process and/or related procedure;
- c) ensure that the IPCH is provided (through their National Federation) with all relevant Diagnostic Information required to enable it to assess the existence of an Underlying Health Condition and Eligible Impairment, and to ensure that all such information is complete, accurate, authentic, and relevant, and that IPCH is informed of any changes to that information in due time;
- d) give their best efforts during an Evaluation Session and comply with all reasonable instructions given to them by a Classification Panel;
- e) cooperate fully, honestly, and in good faith with any investigations concerning potential Intentional Misrepresentation; and
- f) support and facilitate Classification education and research, and the development and implementation of Classification systems.

Athlete Support Personnel

5.6 The roles and responsibilities of Athlete Support Personnel include to:

- a) be knowledgeable of and comply with all applicable regulations, policies, rules, and processes established by the IPCH Classification Manual and adopted pursuant to the Classification Code and the International Standards;
- b) use their influence on Athlete values and behavior to foster a positive and collaborative attitude regarding the Classification process and those involved in the Classification of Athletes (e.g. Classifiers)
- c) where applicable, participate in, and cooperate fully, honestly, and in good faith with any Classification process and/or related procedure;
- d) cooperate fully, honestly, and in good faith with any investigations concerning potential Intentional Misrepresentation; and
- e) facilitate and encourage Athletes to participate in Classification education and research, and the development and implementation of Classification systems.

Other participants

The roles and responsibilities of other participants include to:

- a) be knowledgeable of and comply with all applicable regulations, policies, rules, and processes adopted pursuant to the Classification Code and the International Standards; and
- b) cooperate fully, honestly, and in good faith with any investigations concerning potential Intentional Misrepresentation

6. Roles of Classification Personnel

- 6.1 Classification personnel are fundamental to the effective implementation of the IPCH Classification Rules and process
- 6.2 IPCH will appoint a number of classification personnel, each of whom will have a key role in the organization, implementation and administration of classification for PCH.
- 6.3 All licensed IPCH Classifiers are listed in the IPCH Classifier Register which is Updated after every Classifier Course and Classification Session. All IPCH Classifiers can be members of the IPCH Classification Committee.

Head of Classification

- 6.4 IPCH must appoint a Head of Classification. The Head of Classification is a person responsible for the direction, administration, coordination, and implementation of Classification matters for Powerchair Hockey.
- 6.5 If IPCH is unable to appoint a Head of Classification for a period of time, IPCH may temporarily appoint a person or persons to perform the role of Head of Classification on an interim basis.
- 6.6 IPCH may appoint more than one person to share the role and duties of the Head of Classification.
- 6.7 The Head of Classification must, as a minimum, be responsible for performing and/or overseeing the following activities:
 - a) recruiting and appointing Classifiers in collaboration with the IPCH Classification Officer;
 - b) organising and conducting Classifier education, training, Certification, Re-Certification, and development;
 - c) managing, maintaining, and updating a database to track Classifier activity, Certification, and Re-Certification;
 - d) identifying Classification Research needs and being aware of, supporting and, where appropriate, providing input in relation to the Classification Research on which the Classification systems are based;
 - e) ensuring that the Classification rules and implementation comply with the Classification Code and International Standards;
 - f) collecting feedback and inputting on Classification-related issues that affect the IPCH rules, for example, Classification rules and Game rules;
 - g) monitoring and evaluating the status of Classification within the sport on a regular basis (this may include, for example, the Head of Classification attending (or instructing other Classification Personnel to attend) IPCH sanctioned or recognized competitions where no Classification is due to take place, in order to monitor and evaluate the outcomes of the IPCH Classification systems);
 - h) informing Classifiers of any changes to the Classification rules;

- i) managing, maintaining, and updating the IPCH Classification Master List to ensure that the Classification records are accurate
- j) engaging with the IPCH relevant bodies and committees on Classification matters; and
- k) communicating with all relevant external parties (including World Abilitysport and the IPC) in relation to Classification matters.

6.8 The Head of Classification must comply with the following requirements:

- a) have a thorough understanding of all the relevant sport specific rules (including the Classification Manual), and of the IPC Classification Code and International Standards
- b) have a thorough understanding of the IPCH Code of Conduct for Officials and Classification Personnel (including confidentiality undertakings), and with a specific knowledge on the management of potential, perceived and/or actual conflicts of interest;
- c) have an appropriate level of English
- d) have effective interpersonal and teamwork skills; and
- e) have effective decision-making skills

6.9 The Head of Classification may delegate specific responsibilities and/or transfer specific tasks to designated Classifiers, or other persons authorized by IPCH.

6.10 The Head of Classification may also be appointed as a Classifier and/or Chief Classifier.

Chief Classifier

6.11 A Chief Classifier is a Classifier appointed by the IPCH to direct, administer, coordinate, and implement Classification matters for a specific Classification opportunity according to the Classification Rules.

6.12 In that context, a Chief Classifier may be required to do the following among other things:

- a) identify Athletes who require Classification at a specific Classification opportunity, whether In-Competition or Out-ofCompetition.
- b) supervise Classifiers and Trainee Classifiers to ensure that the IPCH Classification rules are properly applied and to monitor their level of competencies and proficiencies.
- c) manage Protests in consultation with IPCH.
- d) liaise with the relevant organisers (IPCH Technical Delegate and LOC) to ensure that all travel, accommodation, and other logistics are arranged so that Classifiers may carry out their duties at the Classification opportunity;

- e) communicate with and educate Athletes and Athlete Support Personnel regarding the Classification process;
- f) provide a clear explanation of all stages of the Classification process to Classifiers, Athletes and Athlete Support Personnel, including the following matters:
 - any findings made by a UHC Assessor, Classification Panel, Protest Panel, or Appeal Body;
 - the procedures of the Evaluation Session (including eligibility requirements and Minimum Impairment Criteria), Protest procedures, and the procedure following any designation or tracking code being assigned to an Athlete; and
 - matters concerning Intentional Misrepresentation, including the behaviours that may constitute that offence, and how potential violations will be investigated and prosecuted;
- g) manage the IPCH Master List during a particular Classification opportunity;
- h) analyse and review the Classification processes during a Classification opportunity and recommend improvements to the Head of Classification; and
- i) report all relevant issues at a particular Classification opportunity to the Head of Classification.

6.13 The Chief Classifier must comply with the following requirements:

- a) possess a valid IPCH Classifier Certificate/Licence
- b) have a thorough understanding of all the relevant sport specific rules (including the Classification Manual), and of the IPC Classification Code and International Standards
- c) have a thorough understanding of the IPCH Code of Conduct for Officials and Classification Personnel (including confidentiality undertakings), with a specific knowledge on the management of potential, perceived and/or actual conflicts of interest;
- d) have an appropriate level of English
- e) have effective interpersonal and teamwork skills; and
- f) have effective decision-making skills

6.14 The Chief Classifier may delegate specific responsibilities and/or transfer specific tasks to other appropriately qualified Classifiers, or other appropriately qualified IPCH officers or representatives, and/or appropriately qualified persons in the local organizing committee of a Competition.

6.15 The Chief Classifier cannot be appointed to act as a Classifier at that same Classification opportunity. In order to ensure that the Chief Classifier is able to carry out their responsibilities, it is recommended that a Chief Classifier be

appointed in addition to the Classification Panel(s). This is particularly the case where there are two or more Classification Panels at a Classification opportunity.

- 6.16 A Chief Classifier might, however, be appointed to act as a Classifier at the same Classification opportunity in the event of operational difficulties (for example, Classifier illness, cancellations or travel delays, budget related issues).
- 6.17 A Chief classifier at the end of the classification opportunity must provide a written report in regards of the classification session, results and of the overall organization to the Head of Classification and to IPCH Classification Officer.

Classifiers

- 6.18 A Classifier is a person authorized as an official and certified by the IPCH to evaluate Athletes as a member of a Classification Panel.
- 6.19 In that context, a Classifier may be required to do the following among other things:
 - a) serve as a member of an IPCH Classification Panel
 - b) participate as a member of a Protest Panel (if required)
 - c) attend classifiers' meetings during classification opportunities
 - d) respect the IPCH Code of Conduct for Officials and Classification Personnel (including confidentiality undertakings)
 - e) assist in training and educational classification activities
 - f) participate in meetings and correspondence related to classification, both during and outside competitions and classification events
 - g) serve in the PCH Classification process, including at the national level
- 6.20 All Classifiers must apply the assessment methods established by the IPCH Classification rules properly and consistently.
- 6.21 For the avoidance of doubt, subject to the rules of each National Federation or PCH Organization, there is nothing to prevent Classifiers from also becoming National Classifiers and conducting classification at the national level.

Trainee Classifiers

- 6.22 A Trainee Classifier is a person who is in the process of formal training to become a Classifier. IPCH may also use the designation Trainee Classifier to identify a Classifier who is participating in a component of Classification that is currently the subject of a limitation on the Classifier's Certification and in respect of which the Classifier is undertaking additional training with a view to removing that limitation.
- 6.23 A Trainee Classifier may be required to do the following among other things:
 - a) actively participate in the IPCH Classifiers Course and/or other training opportunities;

- b) observe classification sessions to learn and develop the necessary competencies and skills to achieve certification
- c) attend all relevant classification meetings during classification opportunities
- d) respect the IPCH Code of Conduct for Officials and Classification Personnel (including confidentiality undertakings)
- e) assist in the PCH Classification process, including at the national level.

6.24 A Trainee Classifier cannot be appointed as a member of a Classification Panel. IPCH may appoint Trainee Classifiers to participate in some or all components of Classification provided that such participation is under the supervision of a Classification Panel.

UHC Assessor

6.25 IPCH must appoint an Underlying Health Condition Assessor designated to verify that the athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition based of the review of the Diagnostic Information provided by the Athlete's National Federation or PCH Organisation.

6.26 The UHC Assessor can be

- a) a person or persons who represent and/or work on behalf of the IPCH, including staff, Classifiers, and/or external experts; and/or
- b) an internal or external body appointed by IPCH

6.27 All members of the UHC Assessor must sign confidentiality undertakings.

Other classification Personnel

6.28 IPCH may appoint other Classification Personnel beyond those listed above, including specific roles to manage Classification activities or development (including but not limited to Classification Research, Education, or administration).

National Classifiers

6.29 A National Classifier is a person authorised by a National Federation to conduct some or all aspects of classification at a national level. Unless also Certified as a Classifier by IPCH, a National Classifier cannot under any circumstances conduct international level Classification

7. Classifier Competencies, Training and Certification

Classifiers Competencies

7.1 A Classifier will be authorized to act as a Classifier if that Classifier has been certified by IPCH as having the relevant Classifier Competencies.

7.2 IPCH must provide training and education to Classifiers to ensure Classifiers obtain and/or maintain Classifier Competencies.

7.3 The Classifier Competencies must include that a Classifier has:

- a thorough understanding of the Classification Rules.
- an understanding of the sport for which they seek certification to act as a Classifier, including an understanding of the technical rules of the sport.
- an understanding of the IPC Code and the International Standards for Classification.
- a professional qualification(s), level of experience, skills and/or competencies to act as a Classifier for IPCH. These include that IPCH Classifiers must either:
 - be a certified health professional in a field relevant to the Eligible Impairment category which IPCH at its sole discretion deems acceptable, such as a physician or physiotherapist for Athletes with a Physical Impairment or
 - have an extensive coaching or other relevant background in the sport PCH; or
 - have a recognized and reputable academic qualification which encompasses a requisite level of anatomical, biomechanical and sport-specific expertise, which IPCH at its sole discretion deems to be acceptable.

7.4 The Classifier competencies to be a **Medical Classifier** competencies must also include:

- a medical qualification as a doctor, with experience of Underlying Health Conditions that may lead to Eligible Impairments catered for by the sport in question; or
- a physiotherapy qualification or other related disciplines with experience of individuals with the clinical manifestations of the Eligible Impairments catered for by the sport in question.

7.5 The Classifier competencies to be a **Technical Classifier** must also include that the Classifier has:

- at least a basic knowledge of the ways in which an Athlete's Eligible Impairment(s) can affect their ability to execute specific tasks and activities fundamental to the sport;
- an extensive PCH background; and
- a minimum of 4 years' coaching or playing experience on the international level or other relevant qualification in Para sport training, physical education,

sport sciences, biomechanics, kinesiology, or other reputable academic qualification with a working knowledge of powerchair hockey

7.6 In addition to the Classifier competencies, a **Chief Classifier** must have the following additional minimum competencies:

- a) a minimum number of 2 years' experience as a Classifier in the relevant sport;
- b) knowledge and experience of each stage of the Classification process;
- c) effective communication skills in English, including the ability to provide a clear explanation of all stages of the Classification process to Classifiers, Athletes and Athlete Support Personnel;
- d) the mentorship skills to provide training or mentoring to Classifiers;
- e) effective management skills; and
- f) effective organisation skills

7.7 In addition to the Classifier competencies, the **Head of Classification** must have the following additional minimum competencies:

- a) a minimum number of 4 years' experience as a Classifier in a Para sport. However, if more than one person is appointed as the Head of Classification, only one such person must meet this requirement;
- b) knowledge and experience of each stage of the Classification process;
- c) effective communication skills in English, including the ability to provide a clear explanation of all stages of the Classification process to Classifiers, Athletes and Athlete Support Personnel;
- d) the mentorship skills to provide training or mentoring to Classifiers;
- e) effective management skills; and
- f) effective organisation skills
- g) demonstrable leadership skills in matters related to Classification, for example: administration and management of Classification; rules, policy, and procedure development or revision; Classification Research; Classification education and training; and Classifier mentorship; and
- h) experience and continuing participation in training and Certification of Classifiers, for example, teaching and supervising/mentoring instructors at workshops and other similar activities.

UHC Assessor Competencies

7.8 The UHC Assessor Competencies must include

- a) a thorough understanding of
 - all the relevant sport and its applicable rules including the Classification Rules.
 - the IPC Code and the International Standards for Classification.
 - the IPCH Code of Conduct for Officials and Classifiers with a specific knowledge about management of potential, perceived and/or actual conflicts of interest
- b) Relevant qualifications to conduct the assessment of the Diagnostic Information (including the review of the medical documents and interpreting diagnostic tests)
- c) Expertise in the relevant Health Conditions and their impact on physical abilities
- d) ability to evaluate complex medical information;
- e) ability to identify the medical documentation required to verify the Underlying Health Condition(s) that may lead to an Eligible Impairment, and other information relevant for conducting the Classification process;
- f) ability to assess and communicate the need to seek the opinion of another UHC Assessor, for example, when additional expertise is required; and
- g) the relevant skills to provide written reports about the outcomes of the UHC Assessment

Recruitment and retention of Classification Personnel

7.9 To ensure the required quality and quantity of Classification Personnel, IPCH must have strategies addressing how the International Federation will:

- a) identify prospective Trainee Classifiers;
- b) appoint its Classification Personnel (including how Classifiers will be appointed to individual Classification Panels, and how the Head of Classification and Chief Classifiers will be appointed to their respective roles);
- c) retain existing Classification Personnel and encourage them to remain active;
- d) manage Classifier wellbeing, including protecting Classifiers from abuse, harassment, and bullying; and
- e) re-engage inactive Classification Personnel

Classification Personnel training and development

7.10 IPCH must provide appropriate training and education to ensure that the Classification Personnel can

- a) obtain and/or maintain the competencies required of them by the International Federation;
- b) achieve and/or maintain Certification; and
- c) otherwise develop and enhance their skills and experience in Classification so that any limitations placed on their Certification can be removed and/or they may progress to more senior Classification Personnel roles.

7.11 IPCH should also look to support National Federations, PCH organizations and National Paralympic Committees in training and developing National Classifiers. In particular:

- a) create materials used to train and educate Classifiers and Trainee Classifiers available to National Federations, PCH organizations and National Paralympic Committees for the purpose of training National Classifiers
- b) cooperate and support a pathway to enable National Classifiers to become international Classifiers
- c) make available to National Federations a schedule of Classifier and Trainee Classifier education sessions with sufficient notice and frequency to enable National Federations to identify and apply for Trainee Classifiers to attend such education sessions

Classifiers Certification:

7.12 Classifier Certification is the process by which IPCH assesses and confirms that a Classifier has met the required competencies

7.13 This process is explained in the Annex n. 8 and includes:

- a) a process for the certification of Trainee Classifiers;
- b) quality assessment for the period of certification;
- c) a process for handling substandard performance, including options for remediation and/or withdrawal of certification;
- d) a process for Re-certification of Classifiers.

7.14 IPCH specifies Entry-Level Criteria applicable to persons who wish to become Trainee Classifiers. IPCH will provide Entry-Level Education to Trainee Classifiers.

7.15 IPCH provides Continuing Education to Classifiers for the purposes of Certification and Recertification.

7.16 IPCH may provide that a Classifier is subject to certain limitations, including (but not limited to):

- a) a limitation on the type of Eligible Impairments that the Classifier is Certified to assess;
- b) a limitation on the stages of Classification and/or assessments within an Evaluation Session that the Classifier is Certified to conduct;
- c) a limitation on whether the Classifier is Certified as a Medical Classifier or a Technical Classifier; and

- d) a limitation on the time period for which the Certification is valid, subject to any future Recertification
- e) that a Classifier may lose Classifier Certification if IPCH is not satisfied that the Classifier possesses the required Classifier Competencies; and/or
- f) that a Classifier may regain Classifier Certification if IPCH is satisfied that the Classifier possesses the required Classifier Competencies.
- g) that Classifier Certification is subject to review within a specific time frame by reference to the Classifier Competencies.

8. *Conflicts of interest and Code of Conduct*

Identifying and managing conflicts of interest

- 8.1 A conflict of interest is any situation where a personal interest could, or could appear to, prevent an individual from making a decision only in the athletes' and classifications' best interests.
- 8.2 Classifiers shall have no undisclosed direct or indirect interest in or any relationship with any outside organization or person that might affect, or be reasonably misunderstood by others to be affecting his/her objectivity, judgement, or conduct in carrying out the duties and responsibilities that he or she has in conjunction with the IPCH activities. This also applies to spouses, family members, businesses, or organizations to which Members of the IPCH and of World Abilitysport may belong
- 8.3 In the following non-exhaustive list of examples, the circumstances in which a conflict of interest could arise and which persons should avoid being involved in or create the appearance of, are:
 - personal and/or material involvement (salary, shareholding, services, loans or any other benefit) with sponsors, suppliers, vendors, contractors;
 - using association with the IPCH/World Abilitysport for private gain or preferential treatment:
 - impeding the IPCH/World Abilitysport's efficiency, or economy, or service
 - loss of independence, or impartiality;
 - adversely affecting public confidence in the integrity or reputation of IPCH/World Abilitysport;
 - endangering life, health or safety.
- 8.4 It is the personal responsibility of each Classifier to avoid any case of conflict of interest. Faced with a situation of a potential conflict of interest, the person concerned must refrain from expressing an opinion, from making, or participating in making, a decision or accepting any form of benefit whatsoever. However, if the person wishes to continue to act or if the person is uncertain as to the steps to take, the person must inform the IPCH.
- 8.5 IPCH shall assess all disclosed information to determine whether an actual, perceived, or potential conflict of interest exists and, if so, take one or more of the following actions:

- Limit or modify the Classification Personnel's role or assignment
- Exclude the individual from specific evaluation sessions or competitions.
- Reassign duties to ensure independence.
- Require additional oversight during Classification activities.

IPCH shall retain sole discretion in making such determinations.

8.6 In order to manage actual, perceived, or potential conflicts of interest, it is not permitted for the following persons to (i) commence practical training to become a Classifier (i.e., they cannot participate in any Evaluation Sessions e.g., as a Trainee Classifier); (ii) receive or keep their Certification as a Classifier; or (iii) act as a Head of Classification:

- an international athlete who is currently competing in any Para sport, or who has retired from the same Para sport less than four years ago;
- a national team coach or national team assistant coach involved in the same Para sport, or who has retired from the same Para sport less than four years ago; or
- other Athlete Support Personnel in the same Para sport with direct involvement with the national team or international athletes, or who have retired from such involvement in the same Para sport less than two years ago (including but not limited to a team physiotherapist, medical doctor, psychologist, massage therapist).

Classification Personnel Code of Conduct

8.7 The integrity of Classification in IPCH depends on the conduct of Classification Personnel. IPCH has therefore adopted a set of professional conduct standards referred to as the IPCH Code of Conduct'.

8.8 All Classification Personnel must comply with the IPCH Code of Conduct.

8.9 Classifiers as all other officials must perform their duties courteously, competently, consistently, and objectively for all athletes regardless of team or national origin.

8.10 Classifiers and officials must declare any potential conflicts of interest.

8.11 Classifiers and officials must not abuse their positions or capacity to obtain advantage or benefits.

8.12 Classifiers and officials must respect athletes and coaches and be sure that there is a courteous attitude during the classification process and during doping control tests. They must maintain confidentiality of athlete information and respect the dignity of the athletes

8.13 Classifiers must comply with the Classification Code and International Standards, and the IPCH Classification rules;

8.14 Classifiers must comply with the IPCH Code of Conduct;

8.15 Classifiers must act as neutral evaluators throughout all stages of the

Classification process;

- 8.16 Classifiers must have high regard for the dignity of all Athletes;
- 8.17 Classifiers must have high regard for the physical and mental welfare of all Athletes;
- 8.18 Classifiers must respect all Athletes and Athlete Support Personnel and strive to uphold a courteous environment during the Classification process;
- 8.19 Classifiers must ensure that they are fit to perform the role and physical duties reasonably expected of Classification Personnel, and notify the IPCH if this ceases to be the case;
- 8.20 Classifiers must maintain excellent hygiene and sanitation during the Classification process;
- 8.21 Classifiers must not abuse their position to obtain advantage or benefit for themselves or third parties;
- 8.22 Classifiers must maintain confidentiality of Athlete information in accordance with the Classification Code; and
- 8.23 Classifiers must comply with the International Federation's safeguarding rules
- 8.24 Any person who believes that any Classification Personnel may have acted in a manner that contravenes the IPCH Code of Conduct must report this to IPCH.
- 8.25 If IPCH receives such a report it will investigate the report and, if appropriate, take disciplinary measures.
- 8.26 IPCH has discretion to determine whether or not a Classifier has an actual, perceived and/or potential conflict of interest.

Chapter 3: Classification

Part One: Introduction

9. Fundamental principles

UHC Assessment	Stage 1: an assessment to verify that the Athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition, based on a review of Diagnostic Information provided by the Athlete's National Federation or PCH organisation (UHC Assessment)
Evaluation Session	Stage 2: an assessment to verify <ul style="list-style-type: none">that the Athlete has an Eligible Impairment catered for by the sport that is consistent with one or more Underlying Health Conditions reported in the UHC Assessment, andthat there are no inconsistencies with such reported Underlying Health Condition(s) (Eligible Impairment Assessment)
	Stage 3: an assessment as to whether the Athlete's Eligible Impairment meets the applicable Minimum Impairment Criteria for that Eligible Impairment within the relevant sport (MIC Assessment)
	Stage 4: the allocation to the Athlete of: <ul style="list-style-type: none">a Sport Class based on an assessment of the extent to which the Athlete's Eligible Impairment(s) impact(s) their ability to execute the specific tasks and activities fundamental to the sport (Sport Class Assessment); anda Sport Class Status to indicate whether and when the Athlete may be required to undergo Classification in the future (Sport Class Status Allocation)

- 9.1 IPCH has specified in this Classification Manual the process, assessment criteria and methodology whereby Athletes will be allocated a Sport Class and designated a Sport Class Status. This process is referred to as Athlete Classification.
- 9.2 Athlete Classification encompasses a number of steps and these Classification Rules therefore include provisions regarding:
 - a) an assessment of whether or not an Athlete has an Underlying Health

Condition resulting in an Eligible Impairment for the sport PCH;

- b) an assessment of whether an Athlete complies with Minimum Impairment Criteria for the sport PCH; and
- c) the allocation of a Sport Class (and designation of a Sport Class Status) depending on the extent to which an Athlete is able to execute the specific tasks and activities fundamental to the sport PCH.

Order of stages of Classification

- 9.3 The UHC Assessment must always be performed first. Subject to that, the assessments themselves may be carried out in any order and/or combined, as specified by the International Federation. However, the decision-making process must still follow the four stages sequentially in the order set out above.

Part Two: Bodies responsible for classifying Athletes

10. UHC Assessor

10.1 IPCH is responsible for conducting UHC Assessments according to the provisions in Article 6.25.

11. Classification Panel

11.1 A Classification Panel is a group of Classifiers appointed by IPCH to conduct some or all of the components of Athlete Classification.

11.2 A Classification Panel is responsible for conducting a Classification Session. As part of the Classification Session the Classification Panel must:

- a) assess whether an Athlete complies with Minimum Impairment Criteria for the sport.
- b) assess the extent to which an Athlete is able to execute the specific tasks and activities fundamental to the sport.
- c) conduct (if required) Observation in Competition.

11.3 Except as provided in Article 11.4:

- a) Each Classification Panel must consist of a minimum of two Classifiers.
- b) At least one member of the Classification Panel must be of a different nationality to the Athlete being assessed; and
- c) It is recommended that members of the Classification Panel be of different nationalities to each other.¹

11.4 In exceptional circumstances², IPCH may authorise a Classification Panel to consist of a sole Classifier and/or Classifiers who are each of the same nationality as the Athlete being assessed, provided that:

- a) any Sport Class issued to the Athlete must be accompanied by the Sport Class Status 'Review at the Next Available Opportunity (R-NAO)', with all resulting consequences; and
- b) any sole Classifier must be certified to conduct all of the assessments within the Evaluation Session.

11.5 IPCH must ensure that all members of the Classification Panel sign appropriate confidentiality undertakings.

¹ These provisions are intended to help manage potential conflicts of interest, whether perceived or actual.

² 'Exceptional circumstances' may arise if there are genuine and unavoidable operational difficulties at a Competition (such as travel delays, Classifier illness, or conflicts of interest) that result in an insufficient number of Classifiers being available to constitute Classification Panels with two or more persons, or of different nationalities to the Athlete being assessed.

Part Three: Eligible Impairments

12. Eligible Impairment

12.1 Any Athlete wishing to compete in powerchair hockey must have an Eligible Impairment and that Eligible Impairment must be Permanent.

12.2 There are currently seven Eligible Impairments in the Paralympic Movement (five 'Physical Impairments', 'Vision Impairment', and 'Intellectual Impairment'). IPCH select the following 5 physical impairment as the ones eligible for powerchair hockey

- **Impaired Muscle Power:** Athletes with Impaired Muscle Power have a reduced (or no) ability to contract their muscles to generate force that is consistent with an Underlying Health Condition affecting the structure and function of the central or peripheral nervous system or the muscles (including the muscle origin and muscle insertion).
- **Impaired Passive Range of Movement:** Athletes with Impaired Passive Range of Movement have a reduced ability for a joint to be passively moved that is consistent with an Underlying Health Condition affecting a structure of bones, joints, connective tissue, or soft tissues.
- **Limb Deficiency and/or Limb Length Difference:** Athletes with Limb Deficiency or Limb Length Difference have a total or partial absence of a limb or anatomically irregular limb dimensions that are consistent with an Underlying Health Condition resulting from trauma, illness, or congenital causes affecting the bones and/or joints.
This Eligible Impairment can be further divided into the following sub-categories:
 - (a) limb deficiency;
 - (b) leg length difference; and/or
 - (c) arm length difference.
- **Short Stature :** Athletes with Short Stature have reduced total body length (including head, trunk, and legs) as a result of congenitally or developmentally reduced length of the bones of the upper and lower limbs (and may also have reduced trunk length) that is consistent with an Underlying Health Condition. Athletes will not be considered to have Short Stature if their reduced total body length is the result of Limb Deficiency or Limb Length Difference only.
- **Coordination ³Impairments** Athletes with a Coordination Impairment have one or more of the following three movement disorders that (i) adversely affects the ability to voluntarily produce a full range of skilled movement fluidly, rapidly, and accurately; and (ii) is consistent with an Underlying Health Condition affecting the structure and function of the central nervous system:

³ Coordination is the ability to voluntarily produce skilled movement fluidly, rapidly, and accurately (Connick et al., 2015; Runciman & Derman, 2018)

- (a) **Hypertonia/Spasticity**: an increase in muscle tension that may be velocity-dependent and/or a reduced ability of a muscle to stretch.
- (b) **Motor Ataxia**: limited precision in direction and velocity of voluntary movement.
- (c) **Dyskinesia (athetosis, dystonia, chorea)**: involuntary movements that interfere with voluntary movements

13. Non Eligible Impairment

- 13.1 Any impairment that is not listed as an Eligible Impairment in Article 6 is a 'Non-Eligible Impairment'
- 13.2 Examples of Non-Eligible Impairments include, but are not limited to, the following:
 - a) pain;
 - b) hearing impairment;
 - c) low muscle tone;
 - d) hypermobility of joints;
 - e) joint instability, such as unstable shoulder joint or recurrent dislocation of a joint;
 - f) impaired muscle endurance or stiffness;
 - g) impaired motor reflex functions;
 - h) impaired cardiovascular functions;
 - i) impaired respiratory functions;
 - j) impaired metabolic functions;
 - k) tics and mannerisms, motor stereotypies, and motor perseverations;
 - l) vestibular impairment;
 - m) impairments in muscle metabolism resulting in fatigue; and
 - n) impairments stemming from psychological and/or psychosomatic causes
- 13.3 An Athlete who has both an Eligible Impairment and a Non-Eligible Impairment may be evaluated by a Classification Panel on the bases of their Eligible Impairment, provided that their Non-Eligible Impairment does not affect the Classification Panel's ability to conduct an Evaluation Session (including Observation Assessment) and allocate a Sport Class.⁴
- 13.4 A number of Health Conditions do not lead to an Eligible Impairment and are not Underlying Health Conditions. An Athlete who has a Health Condition (including, but not limited to, one of the Health Conditions listed above) but who does not have an Underlying Health Condition will not be eligible to compete in powerchair hockey.
- 13.5 Health Conditions that primarily
 - a) cause pain.
 - b) cause fatigue.
 - c) cause joint hypermobility or hypotonia;

⁴ For example, an Athlete with osteoarthritis might have Impaired Passive Range of Movement (an Eligible Impairment) and pain (a Non-Eligible Impairment). If the presence of pain restricts a Classification Panel's ability to conduct an Evaluation Session the Athlete might not be allocated a Sport Class, notwithstanding that the Athlete has an Eligible Impairment.

- d) are psychological or psychosomatic in nature do not lead to an Eligible Impairment.

Examples of Health Conditions that primarily cause pain include myofascial pain- dysfunction syndrome, fibromyalgia or complex regional pain syndrome.

An example of a Health Condition that primarily causes fatigue is chronic fatigue syndrome.

An example of a Health Condition that primarily causes hypermobility or hypotonia is Ehlers- Danlos syndrome.

Examples of Health Conditions that are primarily psychological or psychosomatic in nature include conversion disorders or post-traumatic stress disorder.

14. Rationale for Eligible Impairments

- 14.1 Eligible Impairments do not include all impairment types. Instead, they are limited to those that have historically been part of the IPCH movement and adhere to the criteria listed in the following articles.
- 14.2 The list of Eligible Impairments may only be expanded with the approval of the IPCH Sport Congress , after consideration of the following criteria:
 - a) the impairment must be based on those listed in the International Classification of Functioning, Disability and Health (known more commonly as ICF, published by the World Health Organization), as updated from time to time;
 - b) the impairment must be consistent with one or more verifiable Health Conditions that are listed in the International Classification of Diseases (known more commonly as ICD, i.e. the World Health Organization diagnostic tool that is used to classify and monitor diseases and disorders);
 - c) there is scientific evidence to indicate that the impairment can lead to an activity limitation in one or more Para sports;
 - d) the impairment can be measured accurately and reliably;
 - e) the impairment must be permanent; and capable of remaining consistent following Classification.
 - f) the application for including the impairment on the list of Eligible Impairments must be supported by an international organisation acting as a representative of people with the impairment;
 - g) there must be sufficient interest for competition opportunities from people with the impairment;
 - h) the sport-specific Classification system for the impairment must be

based on multidisciplinary Classification Research

- i) the sport specific Classification system must be based on impairment type and the degree to which that impairment impacts the athlete's ability to execute the specific tasks and activities fundamental to the relevant sport; and
- j) the methods for establishing and measuring the impairment type and the Classification process must be compliant with the Classification Code.

Part Four : The Classification Process

15. Stage 1: UHC Assessment

Diagnostic Information

- 15.1 In order to begin the Classification process, an Athlete must provide their National Federation or PCH Organisation with all relevant Diagnostic Information required to enable IPCH to assess the existence of an Underlying Health Condition and Eligible Impairment.
- 15.2 The Athlete's National Federation or PCH Organisation is responsible for providing the Diagnostic Information to IPCH, and for ensuring that all Diagnostic Information provided by the Athlete is complete, accurate, authentic, and relevant
- 15.3 The relevant National Body must submit a Medical Diagnostics Form to IPCH, upon completing the registration of an Athlete. The Medical Diagnostics Form (MDF) must be completed in English and dated and signed by a certified health care professional, and must be issued within the 12 months prior to submission.
- 15.4 IPCH (including the UHC Assessor) may request from the Athlete's National Federation or PCH Organisation any additional information that it deems necessary to carry out the Classification process, including Diagnostic Information.
- 15.5 Additional diagnostic Information must be provided in its original format (i.e. the original document or a copy thereof) along with an English translation (if the original format is in another language), unless IPCH specifies otherwise.

Conducting the UHC Assessment

- 15.6 The UHC Assessor will conduct the UHC Assessment to verify that the Athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition.
- 15.7 The UHC Assessor will conduct the UHC Assessment based only on the Diagnostic Information provided by the Athlete's National Federation or PCH Organisation
- 15.8 If the UHC Assessor consists of more than one member:
 - a) the individual members of the UHC Assessor must initially review the Athlete's Diagnostic Information independently of each other; and
 - b) If the members are unable to reach a unanimous decision, the UHC Assessor must make its decision by majority.
- 15.9 The process by which an UHC Assessor is formed and considers Diagnostic Information is as follows
 - c) IPCH will notify the relevant National Body that Diagnostic Information must be provided on behalf of the Athlete. The Head of Classification will explain what Diagnostic Information is required, and the purposes

for which it is required.

- d) IPCH will set timelines for the production of Diagnostic Information.
- e) IPCH together with the Head of Classification will appoint an UHC Assessor.
- f) Wherever possible all references to the individual Athlete and the source(s) of the Diagnostic Information should be withheld from the UHC Assessor. Each member of the UHC Assessor will review the Diagnostic Information and decide whether such information establishes the existence of an Eligible Impairment

15.10 If the UHC Assessor is satisfied that the Athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition:

- a) the UHC Assessor must notify IPCH of the outcome of its assessment in writing;
- b) IPCH must provide the Diagnostic Information and the UHC Assessor's written outcome to the Classification Panel and should then proceed with scheduling an Evaluation Session;
- c) unless the Athlete already has a relevant Sport Class and Sport Class Status, the Athlete will automatically be allocated the designation 'New (N)'; and
- d) an Athlete with the designation 'New (N)' must attend an Evaluation Session prior to competing at a Covered Competition, unless IPCH specifies otherwise.

15.11 If the UHC Assessor is not satisfied that the Athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition the UHC Assessor must notify IPCH of the outcome of its assessment and provide a written explanation for the decision.

15.12 IPCH must

- a) provide a copy of the UHC Assessor's written explanation to the Athlete's National Federation or PCH organisation;
- b) designate the Athlete as 'Not Eligible – Underlying Health Condition (Re-evaluation)' with the resulting consequences specified in the following articles and
- c) arrange for a second UHC Assessor to repeat the UHC Assessment as soon as reasonably practicable in accordance with Article 10.14.

15.13 If a second UHC Assessor is required pursuant to Article 10.14

- a) The second UHC Assessor may comprise one or more members. Any member of the first UHC Assessor cannot serve as a member of the second UHC Assessor;
- b) The second UHC Assessor must review all of the Diagnostic

Information provided by the Athlete's National Body. Before reaching a final decision, the second UHC Assessor must also review the written explanation of the first UHC Assessor

- 15.14 If the second UHC Assessor is satisfied that the Athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition, Article 10.12 applies.
- 15.15 If the second UHC Assessor is not satisfied that the Athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition:
 - a) The second UHC Assessor must notify IPCH of the outcome and provide a written explanation for the decision
 - b) IPCH must provide a copy of the second UHC Assessor's written explanation to the Athlete's National Body as soon as reasonably practicable
 - c) The Athlete must be designated as 'Not Eligible – Underlying Health Condition', and the consequences listed in the following articles will continue to apply.
- 15.16 IPCH may delegate one or more of the functions described above to a Classification Panel.

Designation of 'Not Eligible – Underlying Health Condition' (NE - UHC)

- 15.17 An Athlete designated as 'Not Eligible – Underlying Health Condition (Re-evaluation)' or 'Not Eligible – Underlying Health Condition' (NE-UHC):
 - a) is not eligible to compete in IPCH sanctioned or recognized competitions in that sport; and
 - b) must disclose such designation if undergoing further Classification (whether in that sport or in another sport). Such designation may be automatically recognised by other International Federations in their respective sports, in their absolute discretion
- 15.18 The designation of an Athlete as 'Not Eligible – Underlying Health Condition (Re-evaluation)' or 'Not Eligible – Underlying Health Condition' is not subject to review or Protest but may beAppealed in accordance with Part 3.
- 15.19 IPCH must include all Athletes designated as 'Not Eligible – Underlying Health Condition (Re-evaluation)' or 'Not Eligible – Underlying Health Condition' on its Classification Master List. This requirement applies regardless of whether the Athlete is currently active on the international level.

16. Stage 2: Eligible Impairment Assessment

Conducting the Eligible Impairment Assessment

16.1 The Eligible Impairment Assessment is conducted to verify that

- a) the Athlete has one of the Eligible Impairment for powerchair hockey and that the impairment is consistent with one or more Underlying Health Conditions reported in the UHC Assessment, and
- b) there are no inconsistencies with such reported Underlying Health Condition(s)

16.2 As a preliminary step the Classification Panel reviews the documentation relating to the UHC Assessment, namely the Athlete's Diagnostic Information and the written outcome of the UHC Assessor.

16.3 The Eligible Impairment Assessment can take place in person, except in all situations when the assessment can be conducted based on evaluation of the Diagnostic Information provided as part of the UHC Assessment.

16.4 The means by which IPCH determines that an individual Athlete has an Eligible Impairment is at the sole discretion of IPCH. IPCH may consider that an Athlete's Eligible Impairment is sufficiently obvious and therefore not require evidence that demonstrates the Athlete's Eligible Impairment.

16.5 If in the course of determining if an Athlete has an Eligible Impairment IPCH becomes aware that the Athlete has a Health Condition, and believes that the impact of that Health Condition may be that it is unsafe for that Athlete to compete or there is a risk to the health of the Athlete (or other Athletes) if that Athlete competes, it may designate the Athlete as Classification Not Completed (CNC) in accordance with Article 10 of these Classification Rules. In such instances IPCH will explain the bases of its designation to the relevant National Body.

16.6 When conducting the Eligible Impairment Assessment, if the Classification Panel considers that there are any inconsistencies with the Underlying Health Condition(s) reported in the UHC Assessment, the Classification Panel will:

- a) designate the Athlete as 'Classification Not Completed (CNC)';
- b) prepare a written explanation identifying the inconsistencies and noting any additional information that is required, a copy of which must be provided to IPCH and the Athlete's National Body
- c) if it considers it appropriate, specify a deadline by which such additional information must be provided by the Athlete's National Body; such information must be provided in its original format (i.e. the original document or a copy thereof) along with an English translation (if the original format is in another language), unless IPCH specifies otherwise; and;
- d) if the additional information is not provided by the specified deadline or does not otherwise satisfy the Classification Panel, or if the

Classification Panel does not require any additional information, refer the matter back to the UHC Assessor (which, if possible, should be the same UHC Assessor as before) for reconsideration along with the written explanation and any additional information provided.

16.7 The Eligible Impairment Assessment will continue (either by the same or a new Classification Panel) only once that Classification Panel is satisfied by the additional information provided and/or the UHC Assessor completes the reassessment.

16.8 Upon completion of the Eligible Impairment Assessment:

- If the Classification Panel is satisfied that (i) the Athlete has an Eligible Impairment catered for by international powerchair hockey that is consistent with one or more Underlying Health Conditions reported in the UHC Assessment, and (ii) there are no inconsistencies with such reported Underlying Health Condition(s), it will proceed to the MIC Assessment.
- If the Classification Panel is not satisfied as in Article 14.5.1, the Athlete must be designated as 'Not Eligible – Eligible Impairment (Re-evaluation)', with the resulting consequences specified in the dedicated article.
- When designating an Athlete as 'Not Eligible – Eligible Impairment (Re-evaluation)' or 'Not Eligible – Eligible Impairment', the Classification Panel must record the Eligible Impairment(s) for which the Athlete was assessed, for example, 'Not Eligible – Eligible Impairment' for Impaired Muscle Power and Impaired Passive Range of Movement

16.9 The Classification Panel must notify IPCH of the outcome of the Eligible Impairment Assessment and provide a written explanation for the decision. IPCH must provide a copy of the Classification Panel's written explanation to the Athlete's National Body.

16.10 If the Athlete is designated as 'Not Eligible - Eligible Impairment (Re-evaluation)', the Athlete is entitled to undergo a second Eligible Impairment Assessment by a second Classification Panel as soon as reasonably practicable:

- Any member of the first Classification Panel cannot serve as a member of the second Classification Panel.
- Before reaching a final decision, the second Classification Panel must also review the written explanation of the first Classification Panel.
- If the second Classification Panel is satisfied that (i) the Athlete has an Eligible Impairment catered for by the sport that is consistent with one or more Underlying Health Conditions reported in the UHC Assessment, and (ii) there are no inconsistencies with such reported Underlying Health Condition(s), it will proceed to the MIC Assessment.
- If the second Classification Panel is not satisfied as in Article 14.7.3, the Athlete must be designated as 'Not Eligible – Eligible Impairment', and

the consequences explained below will continue to apply.

Designation of 'Not Eligible – Eligible Impairment' (NE - EI)

16.11 An Athlete designated as 'Not Eligible – Eligible Impairment (Re-evaluation)' or 'Not Eligible – Eligible Impairment' (NE-EI):

- a) is not eligible to compete in IPCH sanctioned or recognized competitions based on such Eligible Impairment(s) in that sport; and
- b) must disclose such designation if undergoing further Classification (whether in that sport or in another sport). Such designation may be automatically recognised by other International Federations in their respective sports, in their absolute discretion⁵

16.12 The designation of an Athlete as 'Not Eligible – Eligible Impairment (Re-evaluation)" or 'Not Eligible – Eligible Impairment' is not subject to review or Protest but may beAppealed in accordance with Part III of Chapter 3.

16.13 IPCH must include all Athletes designated as 'Not Eligible – Eligible Impairment (Re-evaluation)' or 'Not Eligible – Eligible Impairment 'on its Classification Master List. This requirement applies regardless of whether the Athlete is currently active on the international level.

17. Stage 3: MIC Assessment

17.1 An Athlete who wishes to compete in a sport must have an Eligible Impairment that complies with the relevant Minimum Impairment Criteria for that sport.

17.2 MIC Assessment must be conducted for the purposes to assess whether an Athlete's Eligible Impairment meets the applicable Minimum Impairment Criteria for that Eligible Impairment within powerchair hockey.

17.3 IPCH has set Minimum Impairment Criteria to ensure that an Athlete's Eligible Impairment affects the extent to which an Athlete is able to execute the specific tasks and activities fundamental to the sport.

17.4 Chapter 3 of the IPCH Classification Manual specifies the Minimum Impairment Criteria applicable for PCH and the process by which an Athlete's compliance with Minimum Impairment Criteria is to be assessed by a Classification Panel as part of an Evaluation Session.

17.5 The MIC Assessment must be determined based solely on an evaluation of the Athlete's Eligible Impairment (i.e. impairment-based testing and/or other clinically recognised testing) and not based on an assessment of tasks or activities performed in the sport, nor any other aspect of the Athlete's sport performance

⁵ If an Athlete who has been designated 'Not Eligible – Eligible Impairment IPCH sanctioned or recognized competitions 'Not Eligible - Eligible Impairment' subsequently (i) competes or attempts to compete in Covered Competitions, or (ii) undergoes or attempts to undergo further Classification (including in respect of another sport), in each case without disclosing such designation, they may be investigated in respect of potential Intentional Misrepresentation

17.6 The MIC Assessment must take place in person.

17.7 A Classification Panel must assess whether or not an Athlete complies with Minimum Impairment Criteria as part of an Evaluation Session. Prior to participating in an Evaluation Session, an Athlete must first satisfy the IPCH that they have an Eligible Impairment as well as an Eligible Underlying Health Condition.

17.8 Minimum Impairment Criteria must not consider the extent to which the use of Adaptive Equipment⁶ might affect how the Athlete is able to execute the specific tasks and activities fundamental to the sport.

17.9 Upon completion of the MIC Assessment:

- If the Classification Panel is satisfied that the Athlete's Eligible Impairment meets the applicable Minimum Impairment Criteria, it will proceed to the Sport Class Assessment.
- If the Classification Panel is not satisfied that the Athlete's Eligible Impairment meets the applicable Minimum Impairment Criteria, the Athlete will be designated as 'Not Eligible – Minimum Impairment Criteria (Re-evaluation)', with the resulting consequences specified in the dedicated article.. .

17.10 The Classification Panel must notify IPCH of the outcome of the MIC Assessment and provide a written explanation for the decision. IPCH must provide a copy of the Classification Panel's written explanation to the Athlete's National Body.

17.11 If an Athlete is designated as 'Not Eligible – Minimum Impairment Criteria (Reevaluation)', the Athlete is entitled to undergo a second MIC Assessment by a second Classification Panel as soon as reasonably practicable:

- Any member of the first Classification Panel cannot serve as a member of the second Classification Panel.
- Before reaching a final decision, the second Classification Panel must also review the written explanation of the first Classification Panel
- If the second Classification Panel is satisfied that the Athlete's Eligible Impairment meets the applicable Minimum Impairment Criteria, it will proceed to the Sport Class Assessment.

17.12 If the second Classification Panel is not satisfied that the Athlete's Eligible Impairment meets the applicable Minimum Impairment Criteria, the Athlete will be designated as 'Not Eligible – Minimum Impairment Criteria', and the consequences in dedicated article will continue to apply.

⁶ The role of Adaptive Equipment in defining Minimum Impairment Criteria is different to the role of Adaptive Equipment in the allocation of a Sport Class

Designation of 'Not Eligible – Minimum Impairment Criteria' (NE - MIC)

17.13 An Athlete designated as 'Not Eligible – Minimum Impairment Criteria (Re-evaluation)' or 'Not Eligible – Minimum Impairment Criteria' (NE-MIC):

- is not eligible to compete in IPCH sanctioned or recognized competitions based on the same Eligible Impairment(s) in powerchair hockey; and
- must disclose such designation if undergoing further Classification (whether in the same or in another sport)⁷

17.14 However, the Athlete may be eligible to compete in IPCH sanctioned or recognized competitions:

- in the same sport based on a different Eligible Impairment if: (i) the sport caters for that Eligible Impairment; and (ii) the Athlete meets the sport's Minimum Impairment Criteria for that Eligible Impairment; and/or
- in a different sport based on the same Eligible Impairment(s) if: (i) the other sport caters for the Eligible Impairment(s); and (ii) the Athlete meets the other sport's Minimum Impairment Criteria for the Eligible Impairment(s)

17.15 The designation of an Athlete as 'Not Eligible – Minimum Impairment Criteria (Re-evaluation)' or 'Not Eligible – Minimum Impairment Criteria' is not subject to review or Protest but may beAppealed in accordance with Chapter 4

17.16 IPCH must include all Athletes designated as 'Not Eligible – Minimum Impairment Criteria (Re-evaluation)' or 'Not Eligible – Minimum Impairment Criteria' on its Classification Master List. This requirement applies regardless of whether the Athlete is currently active on the international level.

18. Stage 4a: Sport Class Allocation

Sport Class

18.1 If an Athlete has been assessed to have an Eligible Impairment that meets the powerchair hockey Minimum Impairment Criteria, the Athlete must be allocated a Sport Class, (subject to the provisions in the IPCH Classification Manual concerning Failure to Attend Athlete Evaluation and Suspension of Athlete Evaluation).

18.2 A Sport Class is a category defined by the IPCH Classification Manual , in which Athletes are grouped by reference to the impact of an Eligible Impairment on their ability to execute the specific tasks and activities fundamental to a sport.

⁷ If an Athlete who has been designated "Not Eligible – Minimum Impairment Criteria" subsequently (i) competes or attempts to compete in Covered Competitions based on such Eligible Impairment(s) in that sport, or (ii) undergoes or attempts to undergo further Classification (including in respect of another sport), in each case without disclosing such designation, they may be investigated in respect of potential Intentional Misrepresentation

Conducting the Sport Class Assessment

- 18.3 The Sport Class Assessment will be conducted for the purposes of assessing the extent to which the Athlete's Eligible Impairment(s) impact(s) their ability to execute the specific tasks and activities fundamental to the sport of powerchair hockey.
- 18.4 The allocation of a Sport Class must be based solely on an evaluation by a Classification Panel of the extent to which the Athlete's Eligible Impairment affects the specific tasks and activities fundamental to sport.
- 18.5 The Classification Panel must therefore distinguish factors such as fitness level and/or technical proficiency in order to ensure that these do not affect the Sport Class allocated. For this purpose, it may be helpful for the Classification Panel to consider an Athlete's training history and age.
- 18.6 The Classification Panel must conduct all parts of the Sport Class Assessment, with the exception of the Observation Assessment, in a controlled non-competitive environment, meaning an environment that allows for repeated observation of key tasks and activities.
- 18.7 The Sport Class Assessment must take place in person.
- 18.8 Part B of these Classification Rules specify the assessment methodology and assessment criteria for the allocation of a Sport Class and the designation of Sport Class Status.
- 18.9 An Athlete who does not have an Eligible Impairment or does not comply with the Minimum Impairment Criteria for a sport must be allocated Sport Class Not Eligible (NE-UHC, NE-EI or NE-MIC) with the provisions of Article 11 and 12 of these Classification Rules
- 18.10 Following the completion of the initial stages of the Sport Class Assessment, the Classification Panel will either:
 - a) allocate the Athlete a provisional Sport Class that is subject to confirmation at an Observation Assessment using the tracking code 'OA' for 'Observation Assessment'; or
 - b) allocate the Athlete a final Sport Class, in which case the Athlete must also be allocated a Sport Class Status.

Use of Adaptive Equipment

- 18.11 Adaptive Equipment means any implement, apparatus, and/or technical aid adapted to the special needs of an Athlete to reduce the impact of their impairment and that is allowed according to the sport rules, - refractive or optical correction (such as eyeglasses or corrective lenses) are not considered to be Adaptive Equipment.
- 18.12 When conducting the Sport Class Assessment, the Classification Panel must evaluate the Athlete when they are using the Adaptive Equipment that they will use in competition (if any). The use of Adaptive Equipment permitted by the rules of IPCH (whether mandatory or optional) is an integral component of the Athlete's ability to execute the specific tasks and activities required by the

sport. Therefore, the Sport Class Assessment must take into account the optimal use of such equipment (such as strapping) during competition, whether an Athlete chooses to use it or not.

18.13 IPCH, whether through the Classification Panel or otherwise, may assess whether any Adaptive Equipment proposed to be used by the Athlete in competition complies with the sport's Classification and/or other rules on the use of Adaptive Equipment. If the Athlete's equipment does not comply with such rules, the Athlete will not be permitted to use that equipment as part of the Sport Class Assessment, and the Classification Panel will not take use of that equipment into consideration when making its determination as to the Athlete's Sport Class.

18.14 If an Athlete's choice to use (or not use) Adaptive Equipment could affect their allocated Sport Class, IPCH must record this information and ensure that:

- a) the Athlete uses the same Adaptive Equipment (if they were allocated a Sport Class on the bases that they would use such Adaptive Equipment), **or**
- b) the Athlete does not use any or certain Adaptive Equipment (if they were allocated a Sport Class on the bases that they would not use such Adaptive Equipment).

Observation Assessment

18.15 The purpose of an Observation Assessment is to observe and evaluate the Athlete in a competitive environment in order to ensure that what is observed in competition is consistent with what was observed in the previous stages of Classification.

18.16 A Classification Panel may require that an Athlete undertake Observation Assessment before it allocates a final Sport Class and designates a Sport Class Status to that Athlete.

18.17 If a Classification Panel requires an Athlete to complete Observation Assessment, the Athlete will be entered in the Competition with the Sport Class allocated by the Classification Panel after the conclusion of the initial components of the Evaluation Session.

18.18 An Athlete who is required to complete Observation Assessment will be designated with Tracking Code: Observation Assessment (OA). This replaces the Athlete's Sport Class Status for the duration of the Observation Assessment.

18.19 Observation Assessment must be conducted during the preliminary rounds of the competition - whenever possible the Observation Assessment should not take place at the final of an event.

18.20 Observation Assessment must take place during First Appearance. In this regard:

- a) First Appearance is the first time an Athlete competes in a Covered Competition in a specific Sport Class.

- b) First Appearance within a Sport Class applies to participation in all Competition/Events within the same Sport Class.
- c) As for Team Sports, also in Powerchair Hockey an Athlete is allowed to make First Appearance only during the preliminary rounds of a Covered Competition.

18.21 Except in exceptional circumstances, the same Classification Panel that conducted the preceding stages of the Athlete's Evaluation Session must also conduct the Observation Assessment.

18.22 The Observation Assessment must be conducted in person at the Covered Competition where the Athlete competes in their provisional Sport Class for the first time (First Appearance). The Athlete may compete at First Appearance with their provisional Sport Class.

18.23 The methods by which Observation in Competition Assessment may be undertaken, and the matters to be observed, are set out in Part B

18.24 Following an Observation Assessment, the Classification Panel may:

- a) allocate the Athlete a final Sport Class and Sport Class Status; or
- b) require the Athlete to redo any prior stages of the Evaluation Session and/or undergo a further Observation Assessment.

18.25 The Classification Panel cannot, based on the results of the Observation Assessment alone, allocate the Athlete a Sport Class that is different from the one provisionally allocated in accordance with Article 18.10.

18.26 If an Athlete with a provisional Sport Class is ultimately allocated a different final Sport Class:

- a) For competitions with preliminary rounds, such change must be implemented immediately, and the Athlete may not participate further in the competition or in any other Covered Competition until the change has been implemented; and
- b) For competitions that do not have preliminary rounds, such change must be implemented either immediately (in which case the Athlete may not participate further in the competition or in any other Covered Competition until the change has been implemented) or immediately after the end of the relevant competition.

18.27 Athletes may only compete in the Sport Class(es) allocated to them.

19. *Stage 4b: Sport Class Status Allocation*

19.1 A Sport Class Status indicates whether and when an Athlete will be required to undergo Classification in the future and if the Athlete's Sport Class may be subject to protest.

19.2 The available Sport Class Statuses are as follows:

- a) Confirmed (C);
- b) Review at the Next Available Opportunity (R-NAO);
- c) Review with a Fixed Review Date (R-FRD);

d) Expired (E).

19.3 An Athlete is allocated **Sport Class Status New (N)** by IPCH prior to attending the Athlete's first classification session. An Athlete with Sport Class Status New must attend a classification session prior to competing at any international sanctioned IPCH Competition, unless IPCH specifies otherwise.

Sport Class Status Confirmed (C)

19.4 A Classification Panel may allocate an Athlete the Sport Class Status 'Confirmed (C)' if it is satisfied that the Athlete's Sport Class is unlikely to change given the nature of the Athlete's Eligible Impairment and the extent to which the Athlete's Eligible Impairment(s) impact(s) their ability to execute the specific tasks and activities fundamental to the sport.

19.5 An Athlete with Sport Class Status Confirmed (C) is not required to undergo any further Athlete Classification (save pursuant to the provisions in these Classification Rules concerning Protests, Medical Review and changes to Sport Class criteria).

19.6 A Classification Panel that consists of only one Classifier or where the majority of the classifiers are of the same nationality as the Athlete, cannot designate an Athlete with Sport Class Status Confirmed (C) but must designate the Athlete with Sport Class Status Review at the next available opportunity (R-NAO).

Sport Class Status Review at the next available opportunity (R-NAO)

19.7 An Athlete will automatically be allocated the Sport Class Status 'Review at the Next Available Opportunity (R-NAO)' where:

- their Classification Panel consisted of a sole Classifier;
- the majority of the classifiers in their Classification Panel were of the same nationality as the Athlete (2:3)
- the International Federation has accepted a Medical Review request
- a National Federation Protest has been accepted or an International Federation Protest has been made

19.8 A Classification Panel may also decide to allocate an Athlete the Sport Class Status 'Review at the Next Available Opportunity (R-NAO)' if

- the Athlete is 'borderline' (i.e. they narrowly meet the Minimum Impairment Criteria or they are on the boundary of two Sport Classes); and/or
- the Classification Panel believes that a further Evaluation Session will be required at the Next Available Opportunity within the current calendar year and/or season.⁸

⁸ A further Evaluation Session might be required for a number of reasons, including where the Athlete has only recently started competing in Covered Competitions, has one or more fluctuating and/or progressive or regressive impairment(s), and/or has not reached full musculoskeletal or sports

- 19.9 IPCH may also change an Athlete's Sport Class Status to 'Review at the Next Available Opportunity (R-NAO)' where it has identified that changes to its Classification Manual may affect the Athlete's (in)eligibility, Sport Class, and/or Sport Class Status
- 19.10 An Athlete with Sport Class Status Review (R-NAO) must complete Athlete Classification prior to competing at any subsequent International Competition, unless IPCH specifies otherwise.

Sport Class Status Review with a Fixed Review Date (R-FRD)

- 19.11 A Classification Panel may allocate an Athlete the Sport Class Status 'Review with a Fixed Review Date (R-FRD)' where it believes that a further Evaluation Session will be required, but not within the current calendar year and/or season. The Classification Panel must set a date (no earlier than the end of the current calendar year or season, as applicable) after which the Athlete must attend a new Evaluation Session at the Next Available Opportunity (the Fixed Review Date)
- 19.12 IPCH may also change an Athlete's Sport Class Status to 'Review with a Fixed Review Date (RFRD)' where it has identified that changes to its Classification Manual may affect the Athlete's (in)eligibility, Sport Class and/or Sport Class Status. In such circumstances, IPCH must set an appropriate Fixed Review Date.
- 19.13 An athlete may compete in IPCH sanctioned or recognized competitions up until the Fixed Review Date, but thereafter must complete an Evaluation Session prior to competing at any further IPCH sanctioned or recognized competitions.
- 19.14 An Athlete who has been allocated Sport Class Status Review with a Fixed Review Date (R-FRD) does not have any priority in participating in a Classification Session prior to the relevant Fixed Review Date save pursuant to a Medical Review Request and/or Protest. IPCH may offer these athletes a possibility to participate in a Classification Session prior to the Fixed Review Date if practically possible.
- 19.15 The Fixed Review Date will typically be no more than four years after the Athlete's previous Evaluation Session took place.
- 19.16 A Classification Panel that consists of only one Classifier or where the majority of the classifiers are of the same nationality as the Athlete, cannot designate an Athlete with Sport Class Status Review with Fixed Review Date (R-FRD) but must designate the Athlete with Sport Class Status Review at the next available opportunity (R-NAO).

Sport Class Status Expired (E)

- 19.17 An Athlete will automatically be allocated the Sport Class Status 'Expired (E)' when they retire from international Powerchair Hockey. The notification of the retirement from international powerchair hockey should be filed by the athlete

or their NPC/PCH Organization.

- 19.18 IPCH may also decide to use the Sport Class Status 'Expired (E)' where the Athlete does not complete an Evaluation Session or participate in an officially sanctioned IPCH competition within 6 years.
- 19.19 The maximum period of time for which the Sport Class Status 'Review at the Next Available Opportunity (R-NAO)' will remain valid is 2 years after this period the status will be moved to Expired (E).
- 19.20 The maximum period of time for which the Sport Class Status 'Review with a Fixed Review Date (R-FRD)' will remain valid after the Fixed Review Date has passed is 2 years after this period the status will be moved to Expired (E).
- 19.21 If an Athlete has been allocated the Sport Class Status 'Expired (E)', the Athlete cannot compete at any sanctioned Competition unless and until they complete a new Evaluation Session and are allocated a Sport Class and Sport Class Status (no matter what the status was before).

20. General provisions applicable to all Evaluation Sessions

- 20.1 IPCH must ensure that all persons participating in Evaluation Sessions are bound by their Classification Manual and applicable Code of Conduct.
- 20.2 IPCH must provide National Federations/PCH organisations with reasonable notice of Classification opportunities, including the location and dates.
- 20.3 IPCH must provide the Classification Panel with any information that becomes available to them that might be relevant to the Classification Panel conducting an Evaluation Session.
- 20.4 IPCH must retain copies of any forms, reports, or other written records from UHC Assessors and Classification Panels, which may be provided by IPCH to future UHC Assessors and Classification Panels that evaluate the Athlete. The retention of such documentation is subject to the International Standard for Classification Data Protection.

21. Attendance at Evaluation Sessions

- 21.1 In addition to the Athlete and the members of the Classification Panel, the following individuals may attend Evaluation Sessions:
 - a) the Athlete's accompanying National Representative and (if required) interpreter (in case of underage athletes the presence of an accompanying National Representative is required)
 - b) Trainee Classifiers and any other authorised persons involved in the training of such Trainee Classifiers, as determined by IPCH (or the Chief Classifier, acting on behalf of the IPCH)⁹;

⁹ When determining the number of Trainee Classifiers/trainers participating in an Evaluation Session IPCH shall consider also to be respectful of Athletes.

- c) IPC Technical Delegate(s) of the Covered Competition where the evaluation sessions happens;
- d) Observers appointed by the IPC/World Abilitysport as part of the IPC's monitoring of Compliance with the Classification Code and the International Standards; and
- e) any person from whom the Classification Panel seeks medical, clinical, technical, and/or scientific advice for classification research purposes.

21.2 The Athlete and the members of the Classification Panel must attend Evaluation Sessions in person.

22. Responsibilities of National Federations/PCH organizations and Athletes in relation to Evaluation Sessions

22.1 The Athlete's National Federation/PCH organization is responsible for ensuring that the Athlete complies with the responsibilities applicable to them in relation to Evaluation Sessions.

22.2 Athletes may be accompanied during the Evaluation Session by a maximum of:

- a) one National Representative whose role is to support the Athlete and facilitate their Classification process (Athletes who are Minors or lack legal capacity in accordance with the laws applicable in their country of residence must be accompanied by such a National Representative); and
- b) if required, one interpreter (to be arranged and paid for by the Athlete's National Federation or PCH organisation, and who will be deemed a National Representative).

22.3 An Athlete may be accompanied during an Evaluation Session by a Personal Assistant (PA) where this is necessary to ensure the Athlete's safety, mobility, or physical assistance needs during the Classification process. A Personal Assistant is not considered a National Representative unless they also formally hold that role.

- a) The PA's function is strictly limited to providing physical assistance to the Athlete, including but not limited to transfers from the powerchair to the examination bench or bed, positioning support, and general physical assistance required during the Evaluation Session.
- b) The PA shall be present in the Evaluation Room only when their assistance is required. When their presence is not necessary, and unless expressly authorized for specific reasons, the Personal Assistant shall be required to leave the Evaluation Room and return only when requested by the Classification Panel or when the Athlete requires physical assistance.
- c) The PA must be part of the accredited team delegation of the competition and as such has undersigned the code of conduct.

22.4 An Athlete must give their best efforts during an Evaluation Session and must comply with all reasonable instructions given to them by a Classification Panel.

22.5 Unless expressly provided otherwise by IPCH, the Athlete must

- attend the Evaluation Session with any sports attire and Adaptive Equipment permitted under the International Federation's rules that they intend to use in any Covered Competition; and
- disclose their intended use of such attire and Adaptive Equipment to the Classification Panel.

22.6 Medication, medical devices/implants, and procedures:

- an Athlete must disclose to the Classification Panel the use of any medication and/or medical device/implant (including any hearing aids and/or refractive or optical correction such as eyeglasses or corrective lenses) and any medical procedure that may affect the Classification Panel's ability to conduct an Evaluation Session¹⁰; and
- an Athlete must attend the Evaluation Session with all disclosed medical devices/implants; and if required by IPCH or the Classification Panel, with any or all disclosed medication(s) and/or related medical prescription(s).

23. Responsibilities of the Classification Panel in relation to Evaluation Sessions

23.1 Classification Panels are responsible for conducting Evaluation Sessions.

23.2 Except as provided in Article 14.7, or in other exceptional circumstances, the same Classification Panel must conduct all of the stages of an Evaluation Session in relation to an Athlete.

23.3 The Classification Panel must conduct Evaluation Sessions in English.

23.4 The Classification Panel must inform the Athlete of the names and roles of all persons attending the Evaluation Session.

23.5 When conducting an Evaluation Session, the Classification Panel may only consider the information provided to it by the relevant Athlete, National Federation, or IPCH, and any additional information obtained under Article 28 below.

23.6 The Classification Panel must record their assessments at each stage of Classification in writing, in such format as required by IPCH, and provide a copy of such records to IPCH.

¹⁰ For the avoidance of doubt, the Athlete's obligation to disclose their use of any medication, medical device/implant, and medical procedure under this Article is entirely separate to their obligations under any applicable anti-doping rules, including but not limited to in respect of therapeutic use exemptions and disclosures on a doping control form. Any such disclosure by an Athlete to the Classification Panel in no way equates to a disclosure or application for the purposes of such separate anti-doping rules, and vice versa

24. Consideration of prior Evaluation Sessions

24.1 If the Classification Panel is evaluating an Athlete who has previously undergone one or more Evaluation Sessions:

- a) before reaching a final decision, the Classification Panel must review the applicable forms, reports, or other records from previous Classification Panel(s); and
- b) In relation to the Evaluation Session, the Classification Panel must not consult with any of the members of previous Classification Panels regarding their prior evaluation of the Athlete. For the avoidance of doubt, the Classification Panel may seek expert assistance in accordance with Article 28, including from any persons who provided equivalent assistance to previous Classification Panels¹¹.

24.2 When conducting an Evaluation Session, the Classification Panel may only consider the information provided to it by the relevant Athlete, National Federation, or IPCH, and any additional information obtained under Article 26 below.

24.3 The Classification Panel must record their assessments at each stage of Classification in writing, in such format as required by IPCH, and provide a copy of such records to IPCH.

25. Requirement to redo prior stages of the Evaluation Session

25.1 The Classification Panel may at any time require the Athlete to redo any prior stages of the Evaluation Session if it considers it necessary to do so.

26. Classification Panel requests for additional information or expertise

26.1 At any stage the Classification Panel may request that an Athlete's National Federation or PCH organisation provide any additional information (including Diagnostic Information) that the Classification Panel believes is necessary for it to complete the Evaluation Session. If the Athlete's National Federation /PCH organisation provides such information within the timeframe specified by the Classification Panel, the Evaluation Session may continue. If the Athlete's National Federation or PCH Organisation is unable or fails to provide such information within the timeframe specified by the Classification Panel, the Classification Panel may suspend the Evaluation Session in accordance with Article 27

¹¹ For the avoidance of doubt, subject to Article 40 regarding the composition of a Protest Panel, a Classification Panel may consist of Classifiers who conducted previous Evaluation Sessions of the Athlete. In those circumstances, such Classifiers should not discuss their previous evaluation of the Athlete with the new Classification Panel (beyond reviewing the documentation referred to in Article 22.1 a))

26.2 At any stage the Classification Panel may, with the agreement of IPCH, seek the assistance of such other medical, clinical, technical, and/or scientific experts as it considers necessary for it to complete the Evaluation Session.

27. Suspension or termination of an Evaluation Session

27.1 A Classification Panel, in consultation with IPCH (or the Chief Classifier, acting on behalf of IPCH), may suspend an Evaluation Session if it is unable to complete the Evaluation Session for any reason, including in one or more of the following circumstances:

- a) failure on the part of the Athlete to comply with any part of the applicable Classification rules including the Code of Conduct;
- b) failure on the part of the Athlete or the Athlete's National Federation or PCH organisation to provide any information that is reasonably required by the Classification Panel;
- c) the Classification Panel believes that any use (or non-use) of any medication or medical device/implant or any medical procedure disclosed by the Athlete may interfere with the Classification of the Athlete;
- d) the Athlete has a Health Condition or impairment that limits or prevents them from complying with the requests of the Classification Panel during an Evaluation Session, which the Classification Panel considers will affect its ability to conduct an Evaluation Session in accordance with the applicable Classification rules;
- e) the Athlete is unable to communicate effectively with the Classification Panel, even in the presence of an interpreter;
- f) in the reasonable opinion of the Classification Panel, the Athlete is physically or mentally unable to comply with the instructions of the Classification Panel;
- g) the Classification Panel believes that the Athlete is not giving their best efforts, or the Athlete refuses to comply with any reasonable instructions given by the Classification Panel;
- h) the Athlete or their accompanying National Representative or interpreter (or any other person associated with the Athlete or the Athlete's National Federation/PCH organisation) is found to be photographing or recording the Evaluation Session;
- i) there are more people attending the Evaluation Session than permitted under the applicable Classification rules, or the identity of someone attending is not clear;
- j) the Classification Panel believes that the Athlete's Eligible Impairment is inconsistent (i.e., is subject to significant fluctuation) such that it is unable to complete the Evaluation Session and allocate the Athlete with an appropriate Sport Class; and/or

- k) the Athlete's representation of their abilities is inconsistent with other information available to the Classification Panel.
- 27.2 If an Evaluation Session is suspended by a Classification Panel, the Classification Panel must designate the Athlete as 'Classification Not Completed (CNC)'. Subject to Article 14.6, the following steps must be taken
 - a) the Classification Panel must prepare a written explanation explaining why the 'Classification Not Completed (CNC)' designation has been applied (including, where applicable, identifying any observed inconsistencies in the Athlete's representation of their abilities), and if applicable, specifying the details of any remedial action that is required for the Evaluation Session to be resumed, a copy of which must be provided to IPCH and the Athlete's National Federation or PCH organisation;
 - b) the Classification Panel must separately record (in any format required by IPCH) any concerns regarding potential Intentional Misrepresentation, if applicable; and
 - c) if an Athlete completes any specified remedial action to the satisfaction of IPCH (or the Chief Classifier, acting on behalf of IPCH), an Evaluation Session will be rescheduled as soon as reasonably practicable.
- 27.3 If an Evaluation Session is suspended by a Classification Panel and cannot (for any reason) be resumed and completed at the same Classification opportunity by the same Classification Panel, the Evaluation Session must be terminated and the Athlete will remain designated as 'Classification Not Completed (CNC)'.
- 27.4 IPCH can decide to apply other disciplinary decisions in respect of conduct by Athletes and other persons that results in the suspension or termination of an Evaluation Session (but which does not, of itself, constitute Intentional Misrepresentation).

28. Failure to attend an Evaluation Session

- 28.1 An Athlete is personally responsible for attending all stages of their Evaluation Session(s). Without limiting the Athlete's personal responsibility, an Athlete's National Federation or PCH organisation must take reasonable steps to ensure that the Athlete attends their Evaluation Session(s).
- 28.2 If an Athlete fails to attend an Evaluation Session as required, the Classification Panel will report the failure to IPCH as soon as reasonably practicable.
- 28.3 If the Athlete is able to provide IPCH with a reasonable explanation for their failure to attend the Evaluation Session, IPCH may reschedule the Evaluation Session to a revised date and time at the same Classification opportunity.
- 28.4 If the Athlete is unable to provide IPCH with a reasonable explanation for their failure to attend the Evaluation Session, the Athlete will be designated as 'Classification Not Completed (CNC)'
- 28.5 IPCH is under no obligation to provide unlimited opportunities for an Athlete to

attend an Evaluation Session.

29. Designation of 'Classification Not Completed (CNC)'

- 29.1 An Athlete designated as 'Classification Not Completed (CNC)' may not compete in IPCH sanctioned or recognized competitions until they complete an Evaluation Session (except for purposes of completing an Observation Assessment as part of such Evaluation Session).
- 29.2 A designation of 'Classification Not Completed (CNC)' is not subject to review or Protest or Appeal.
- 29.3 If an Athlete has been designated as 'Classification Not Completed (CNC)' on three or more consecutive occasions IPCH might decide to suspend the player and inhibit them to undergo any further Evaluation Sessions for a specified period of time or to pursue other disciplinary actions.

30. Location of Evaluation Sessions

- 30.1 Evaluation Sessions may take place at any time or place specified by the International Federation in its Classification rules, with the exception of Observation Assessments, which must take place at a Covered Competition.
- 30.2 All Evaluations Sessions must be conducted in a manner that complies with the Classification Code and the International Standards. In particular, the venue at which the Evaluation Session takes place must be properly equipped to conduct all necessary aspects of the Evaluation Session.
- 30.3 If the allocation of a Sport Class might require an Observation Assessment, IPCH may still allow for part(s) of the Evaluation Session to take place Out-of-Competition, the relevant National Federations/PCH organisations shall be aware that a Classification Panel may conclude that it is unable to allocate a final Sport Class without an Observation Assessment (in which case the Athlete must be designated 'Classification Not Completed (CNC)' and required to undergo a further Evaluation Session at a later date).

31. Photographs and audio-visual technology

- 31.1 The Classification Panel may make, create, and/or use photographs and/or audio-visual technology, including but not limited to during any Observation Assessment. Copies of any such materials must be provided to the Athlete or their National Federation/PCH organisation on request. Such materials must be dealt with in accordance with the International Standard for Classification Data Protection.
- 31.2 Subject to Article 31.1, no photography or audio or video recording of the Evaluation Session is permitted. For the avoidance of doubt, this prohibition applies to all persons attending the Evaluation Session.

Part Five : Notification and Publication

32. *Notification of Classification outcome*

32.1 IPCH must notify the outcome of Classification to the Athlete concerned and/or their National Federation/PCH organisation as soon as reasonably practicable after completion of Classification.

32.2 In the context of a Competition, a Chief Classifier must notify all relevant IPCH technical delegates and IPCH Jury (responsible for informing Competition Office) of the Sport Class (including any provisional Sport Class) and Sport Class Status allocated to each Athlete. If Observation Assessment takes place, further notification must be provided as soon as reasonably practicable following completion of the Observation Assessment.

32.3 IPCH must make available the following information to participants at the venue for a Covered Competition:

- a) any provisional Sport Class (that is subject to confirmation at an Observation Assessment) allocated to an Athlete entered in the Covered Competition, as soon as reasonably practicable after it is allocated; and
- b) the final Sport Class and Sport Class Status allocated to each Athlete entered in the Covered Competition, as soon as reasonably practicable after completion of their Classification.

33. *Classification Master List*

33.1 IPCH must maintain, publish, and keep up-to-date a 'Classification Master List', which must include (at a minimum) the following information regarding each Athlete; and any participants currently suspended by IPCH for Intentional Misrepresentation:

- a) name;
- b) gender;
- c) year of birth;
- d) nationality;
- e) Sport Class and Sport Class Status;
- f) any designations (including 'New (N)', 'Not Eligible – Underlying Health Condition', 'Not Eligible – Eligible Impairment', 'Not Eligible – Minimum Impairment Criteria', and 'Classification Not Completed (CNC)'), any 're-evaluation' status attached to a designation, and tracking codes (such as 'OA' for Observation Assessment); and
- g) any current designation for Intentional Misrepresentation ('IM'), together with the duration and commencement date of the period of ineligibility.

- 33.2 Publication must be accomplished at a minimum by placing the required information on a publicly-available website.
- 33.3 IPCH must update their Classification Master Lists as soon as reasonably practicable following any change to the information.
- 33.4 Classification Master Lists must be dealt with in accordance with the International Standard for Classification Data Protection.

Part Six: Change in Circumstances

34. Medical Review

34.1 A change in the nature or degree of an Athlete's Eligible Impairment might mean that a reassessment is required to ensure that the outcome of the Athlete's previous Classification remains correct (for example, to ensure that an Athlete remains eligible or that the Sport Class allocated to an Athlete remains correct, or to reassess an Athlete previously found to be not eligible). This is known as a 'Medical Review'.

34.2 A Medical Review request would be appropriate where the effect of surgery, a new medication or device, or some other medical procedure has resulted in changes to an Athlete's ability to execute the specific tasks and activities relevant to a sport. A request may also be appropriate where an Athlete has a new Underlying Health Condition

34.3 A Medical Review request must be made by a National Federation/PCH organisation on behalf of an Athlete, through the IPCH Medical Review Form

34.4 A Medical Review request must:

- a) explain in detail why the request is being made (including how and to what extent the Athlete's Eligible Impairment has changed, and
- b) whether and why it is believed that the outcome of the Athlete's previous Classification is no longer correct; and
- c) be accompanied by all relevant supporting documentation, including updated Diagnostic Information. Ordinarily, any Medical Review request will need to be accompanied by detailed medical records
- d) payment proof of the 100€ Medical Review Request non refundable fee.¹²

34.5 IPCH may request from the Athlete's National Federation/PCH organisation any additional information that it deems necessary to assess the Medical Review request, including Diagnostic Information.

34.6 A Medical Review request will be accepted where IPCH determines that the National Federation/PCH organisation has complied with Articles 34.3 and 34.4, and the IPCH is satisfied that there is a change in the nature or degree of an Athlete's Eligible Impairment(s) that may impact the Athlete's ability to perform the specific tasks and activities fundamental to the sport in a manner that is clearly distinguishable from changes attributable to age, levels of training, fitness, and technical proficiency. If this test is not met, the Medical Review request will be dismissed.

34.7 IPCH must decide whether to accept a Medical Review request as soon as reasonably practicable following receipt of a complete request.

34.8 If the Medical Review request is accepted by IPCH, where applicable the

¹² World Abilitysport and IPCH commits to provide relative invoice

Athlete's Sport Class Status must be changed to 'Review at the Next Available Opportunity (R-NAO)' with immediate effect.

- 34.9 If the Medical Review request is dismissed by IPCH, IPCH must notify the Athlete's National Federation/PCH organisation of the decision and provide a written explanation setting out the basis upon which the Medical Review request is dismissed. The decision of IPCH is not subject to review or Protest or Appeal.
- 34.10 If an Athlete or other participant becomes aware of changes in their/the Athlete's circumstances that would require a Medical Review but fails to draw those changes to the attention of IPCH the Athlete and/or other participants may be investigated in respect of potential Intentional Misrepresentation.

Chapter 4:

Protest and

Appeals

Part One : Definitions

35. Definitions

35.1 A 'Protest' is a challenge filed against the Sport Class allocated to an Athlete

35.2 An 'Appeal' is a challenge to any aspect of a Classification process on the grounds that:

- there was a breach of the International Federation's rules during the Classification process; and
- that breach could reasonably have caused the Athlete to be incorrectly designated as 'Not Eligible – Underlying Health Condition', 'Not Eligible – Eligible Impairment', 'Not Eligible – Minimum Impairment Criteria', or allocated an incorrect Sport Class and/or Sport Class Status.

Part Two : Protest

36. Scope of Protests

36.1 A Protest may only be made in respect of the Sport Class allocated to an Athlete.

36.2 A Protest cannot be made in respect of

- an Athlete's Sport Class Status
- any designation of 'Not Eligible – Underlying Health Condition', 'Not Eligible – Eligible Impairment' or 'Not Eligible – Minimum Impairment Criteria' (as in those cases the Athlete already receives an automatic second assessment)
- any designation of 'Classification Not Completed (CNC)', or
- any other matter where Protests are expressly excluded under the IPC Classification Code or under the World Abilitysport and IPCH rules.

37. Parties permitted to make a Protest

37.1 A Protest may only be made by one of the following bodies:

- a National Federation/PCH organisation
- IPCH.

37.2 For the avoidance of doubt, an Athlete cannot make a Protest themselves. A Protest may only be made on behalf of the Athlete by one of the bodies listed above.

38. National Protest

- 38.1 A National Federation/PCH organisation may only make a Protest in respect of an Athlete under its jurisdiction. In particular, it cannot make a Protest in respect of a Sport Class allocated to an Athlete from another National Federation/PCH organisation.
- 38.2 A National Federation/PCH organisation can raise any such concerns about the Sport Class allocated to such Athletes with IPCH, so that IPCH can consider if it wishes to make an IPCH Protest¹³.
- 38.3 A National Protest may be made where there is a reasonable basis to believe that the Athlete may have been allocated an incorrect Sport Class.
- 38.4 National Protests will be upheld where the IPCH determines that the National Federation/PCH organisation has complied with the requirements of Article 38.8 and IPCH is satisfied that there is a reasonable basis to believe that the Athlete may have been allocated an incorrect Sport Class. If this test is not met, the National Protest will be dismissed.
- 38.5 A National Protest must be submitted in connection with an Evaluation Session.
 - a) If the outcome of Athlete Classification is published during a Competition a National Protest must be submitted within one (1) hour of that outcome being published.
 - b) If the outcome of Athlete Classification is published following Observation in Competition a National Protest must be submitted within fifteen (15) minutes of that outcome being published.
- 38.6 If an Athlete is allocated a provisional Sport Class that is subject to confirmation at an Observation Assessment, the National Federation may:
 - a) make a Protest both prior to and following the Observation Assessment, in which case the Protest made following the Observation Assessment cannot relate to any aspect of the Evaluation Session that preceded the Observation Assessment; or
 - b) make a Protest only prior to the Observation Assessment, or only following the Observation Assessment (in which case the Protest may relate to both the aspects of the Evaluation Session that preceded the Observation Assessment and the Observation Assessment itself).
- 38.7 If a Protest is made before First Appearance takes place the Athlete must not be permitted to compete until the Protest has been resolved.
- 38.8 To submit a Protest, a National Federation/PCH organisation must:
 - a) complete the IPCH Classification Protest form which must at a minimum require the name of the protested Athlete; the details of the

¹³ This approach is intended to strike a balance between the rights of the various stakeholders (International Federations, National Federations, Athletes, and others), and forms part of a number of carefully balanced mechanisms in the Classification Code and International Standards that provide appropriate tools aimed at ensuring that Athletes are allocated the correct Sport Class

protested decision; a detailed explanation of the basis for the belief that the Athlete may have been allocated an incorrect Sport Class, including (where applicable) (i) reference to any specific rule(s) alleged to have been breached or misapplied, and (ii) any supporting evidence for that belief;

- b) submit the completed Protest form by the deadline set by IPCH to the relevant bodies indicated by the IPCH;
- c) pay the non refundable IPCH Classification Protest fee €100¹⁴.

38.9 Upon receipt of the Protest form, IPCH must conduct a review of the Protest in accordance with Article 36.4.

38.10 If a Chief Classifier was a member of the Classification Panel whose decision is being protested, that Chief Classifier cannot have any involvement in the IPCH review of the Protest

38.11 IPCH must notify the National Federation/PCH organisation of the outcome of the Protest as soon as reasonably practicable, and (if the Protest is dismissed) must also provide a written explanation for the dismissal.

39. *IPCH Protests*

39.1 IPCH Protests may be made where IPCH considers that the Athlete may have been allocated an incorrect Sport Class.

39.2 If a National Federation/PCH organisation (or any other third party) has concerns that an Athlete from another National Federation/PCH organisation has been allocated an incorrect Sport Class, it can raise such concerns with IPCH so that IPCH can consider if it wishes to make a protest.

39.3 IPCH may make a Protest at any time

39.4 IPCH must:

- a) notify the relevant National Federation of the Protest as soon as reasonably practicable;
- b) and provide a written explanation as to why the Protest has been made.

40. *Protest Panel and Procedures*

40.1 If a National Protest is accepted or if an IPCH Protest is made:

- a) the protested Athlete's Sport Class must remain unchanged pending the outcome of the Protest, and their Sport Class Status must immediately be changed to 'Review at the Next Available Opportunity (R-NAO)', unless that is already their Sport Class Status;
- b) if an Athlete is required to undergo Observation Assessment and a

¹⁴ World Abilitysport and IPCH commits to provide relative invoice

National Protest is accepted before the Athlete's First Appearance, the Athlete cannot compete at that Competition until the National Protest has been resolved;

- c) IPCH must appoint a Protest Panel in accordance with Article 38.2 to conduct a new Evaluation Session as soon as reasonably practicable, and notify all relevant parties of the time and date that the new Evaluation Session will be conducted; and
- d) if the Protest was made In-Competition, the new Evaluation Session should be conducted at that Competition if reasonably practicable.

40.2 IPCH must appoint a Protest Panel in a manner consistent with the provisions for appointing a Classification Panel in Article 11.

40.3 A Protest Panel must not include any Classifier who:

- a) was a member of the Classification Panel that made the protested decision;
- b) in the case of a National Protest, was involved in the IPCH's review of that Protest;
- c) in the case of an IPCH Protest, was involved in the IPCH's decision to make such a Protest; or
- d) was involved in any assessment or evaluation of the protested Athlete for Classification purposes (whether at the national or international level) within a period of 12 months prior to the date of the protested decision, except where both the National Federation/PCH organisation and IPCH agree to this.

40.4 The Protest Panel must conduct the new Evaluation Session in accordance with this Classification Manual. Before reaching a final decision, the Protest Panel must review the protested decision and any document submitted as part of the Protest.

40.5 All relevant parties must be notified of the Protest Panel's final decision as soon as reasonably practicable

40.6 The decision of a Protest Panel is final, and not subject to further Protest by the National Federation/PCH Organisation or IPCH. However, the decision of a Protest Panel may be appealed by the National Federation/PCH Organisation if the requirements in Articles 41 and 42 are satisfied.

40.7 If IPCH makes a Protest after the expiry of the deadline for National Protests to be made under the IPCH's rules, the decision of a Protest Panel in relation to the Protest is not final and may be subject to further Protest by the National Federation/PCH organisation or IPCH. In these circumstances, the decision of a Protest Panel will be treated as if it were a decision of a first instance Classification Panel. The decision of a Protest Panel may also beAppealed by the National Federation/PCH Organisation if the requirements in Article 42 are satisfied.

40.8 If a Protest Panel designates an Athlete as 'Not Eligible – Eligible Impairment' or 'Not Eligible – Minimum Impairment Criteria' the Athlete will be entitled to undergo a further Eligible Impairment Assessment or a further MIC Assessment (as applicable) by a new Classification Panel. In such circumstances the decision of the Protest Panel will be treated as if it were a decision of a first instance Classification Panel and '(Re-evaluation)' will be added to the Athlete's designation.

Circumstances where a Protest Panel is not available

40.9 If a Protest is made In-Competition but there is no opportunity for the Protest to be resolved at that Competition:

- a) the protested Athlete must be permitted to compete in that Competition with the Sport Class that is the subject of the Protest (subject to any other eligibility criteria for that Competition), pending resolution of the Protest; and
- b) all reasonable steps must be taken to ensure that the Protest is resolved as soon as reasonably practicable after that Competition¹⁵.

¹⁵ This Article reflects the reality that it might not be possible to resolve a Protest made In-Competition at that same Competition. For example, this might happen where there are a limited number of Classifiers or Evaluation Session slots available, or the Classifiers who are available are precluded from participating in a Protest Panel due to a conflict of interest.

Part Three : Appeals

41. Scope of Appeals

41.1 An Appeal will be upheld if a National Federation/PCH Organisation establishes that:

- a) there was a breach of IPCH's rules during the Classification process; and
- b) that breach could reasonably have caused the Athlete to be incorrectly designated as 'Not Eligible – Underlying Health Condition', 'Not Eligible – Eligible Impairment', 'Not Eligible – Minimum Impairment Criteria', or allocated an incorrect Sport Class and/or Sport Class Status.

41.2 The limited scope of review available to the Appeal Body is a fundamental aspect of an Appeal. The allocation of a Sport Class and Sport Class Status or designation as not eligible is a specialist sport decision and must be made by persons who are authorised and certified by IPCH to do so. Those decisions must not be changed except by other persons who are similarly authorised and certified. In particular, the right to submit an Appeal must not be seen as an opportunity to simply dispute the opinion of the relevant experts. The Appeal Body will only review the process by which the decisions have been arrived at to ensure that such process has been conducted in accordance with the IPCH's rules.

42. Making an Appeals

42.1 An Appeal cannot be submitted whilst a Protest is ongoing. However, for the avoidance of doubt, in order to submit an Appeal it is not necessary for the National Federation/PCH Organisation to have first made a Protest.

42.2 An Appeal may only be submitted by a National Federation/PCH organisation in respect of an Athlete under its jurisdiction. For the avoidance of doubt, an Athlete cannot submit an Appeal themselves; rather, an Appeal may only be submitted on behalf of the Athlete by their National Federation

42.3 An Appeal must be submitted within 21 days following the publication of the results at the end of the classification or on the IPCH Website.

42.4 To make a non refundable appeal a fee of €250 will need to be paid.

43. Appeal Body

43.1 IPCH and World Abilitysport will designate an Appeal Body to hear and determine Appeals.

43.2 The parties to an Appeal must be provided with, at a minimum, a fair hearing (whether conducted orally or in writing) within a reasonable time by an Appeal Body.

- 43.3 The Appeal Body shall be Operationally Independent from IPCH and is comprised of a pool of at least three members, each of whom must have the appropriate skills and experience to hear such Appeals
- 43.4 An Appeal will be heard by a panel of either one or three members of the Appeal Body (where three members are appointed, one member will act as chair of the hearing panel). Members of the Appeal Body may not sit on a particular hearing panel if: (i) they are currently a Classifier for IPCH, they have had any prior involvement with the matter or any facts arising in the proceedings; and/or their impartiality or independence could otherwise be reasonably questioned.
- 43.5 As last resource, if deemed necessary by World Abilitysport, the appeal can be presented to the BAC (Board of Appeal of Classification) established by the IPC as a specialist dispute resolution body to hear and determine Appeals.

44. *Appeal decision*

- 44.1 The Appeal Body must either affirm or set aside the decision under Appeal. The Appeal Body does not have the power to modify, alter, or otherwise change any Athlete Classification, Sport Class, and/or Sport Class Status decision (for example by allocating an Athlete a new Sport Class and/or Sport Class Status).
- 44.2 The Appeal Body must issue a written reasoned decision within the timeframe set by IPCH/World Abilitysport after the hearing. The written decision must set out the reasons for the Appeal Body's decision and the actions that are required as a result. If the decision appealed against is set aside, the written decision must also specify the breach committed and how that breach could reasonably have caused the Athlete to be incorrectly designated as 'Not Eligible – Underlying Health Condition', 'Not Eligible – Eligible Impairment', 'Not Eligible – Minimum Impairment Criteria', or allocated an incorrect Sport Class and/or Sport Class Status.
- 44.3 The decision of the Appeal Body must be provided to the appellant and the respondent.
- 44.4 The decision of the Appeal Body is final and not subject to any further appeal or challenge.

Chapter 5: Intentional Misrepresentation

45. *Intentional Misrepresentation*

45.1 The following constitutes Intentional Misrepresentation:

- a) a Participant, at any time, whether by act or omission, intentionally misleads or attempts to mislead IPCH or any of its representatives (such as Classification Personnel) in relation to any aspect of Classification; or
- b) a Participant, at any time, whether by act or omission, engages in any type of intentional complicity in respect of any violation or attempted violation of a) or a period of ineligibility imposed on another participant pursuant to the IPC International Standard for Intentional Misrepresentation. (see Appendix 11)

45.2 Examples of Intentional Misrepresentation falling under 45.1 a) include (without limitation) a Participant:

- a) submitting forged medical documentation attesting to the existence, nature, and/or degree of an Underlying Health Condition or Eligible Impairment that the Athlete does not have;
- b) deliberately underperforming during an Evaluation Session;
- c) deliberately tiring themselves out (in the case of Athletes) or deliberately tiring the Athlete out (in the case of other Participants) prior to an Evaluation Session, with the intention of misleading the Classification Panel;
- d) intentionally undergoing an Evaluation Session without the sports attire or Adaptive Equipment that the Athlete intends to use in competition and/or intentionally failing to disclose the intended use of such sports attire and Adaptive Equipment to the Classification Panel;
- e) intentionally failing to disclose the Athlete's use of any medication and/or medical device/implant (including any hearing aids) and/or any medical procedure to the Classification Panel;
- f) otherwise misrepresenting the Athlete's skills, abilities, and/or the existence, nature, and/or degree of the Athlete's impairment before, during, or after an Evaluation Session;
- g) disrupting an Evaluation Session, or refusing to cooperate with a Classification Panel during an Evaluation Session, with the intention of misleading the Classification Panel;
- h) not providing accurate information as to the Athlete's identity or having another person attend an Evaluation Session in the Athlete's place; and/or
- i) deliberately failing to notify IPCH of any relevant Classification-related information, including that the Athlete has previously undergone Classification (for example, on an earlier occasion, or in the context of another Para sport) and/or that there has been a change in the nature

or degree of the Athlete's Eligible Impairment that may necessitate a Medical Review.

45.3 Examples of Intentional Misrepresentation falling under 45.1 b) include (without limitation) a Participant:

- a) where a participant induces, instructs, facilitates, assists, encourages, aids, abets, or conspires with another participant to commit, or attempt to commit, Intentional Misrepresentation;
- b) where, having discovered that a participant has committed or intends to commit Intentional Misrepresentation, they conceal or cover up the offence, or any information that would assist IPCH in the investigation or prosecution of that offence;
- c) where a participant induces, instructs, facilitates, assists, encourages, aids, abets, or conspires with another participant for that other participants to violate, or attempt to violate, any period of ineligibility imposed on them and/or
- d) where, having discovered that another participant has violated or intends to violate any period of ineligibility imposed on them they conceal or cover up the offence, or any information that would assist an International Federation in the investigation or prosecution of that offence.

45.4 For the avoidance of doubt:

- a) A participant does not need to know that their conduct will constitute a violation of Article 45.1 for their conduct to be intentional.
- b) A participant can commit Intentional Misrepresentation irrespective of any designation, Sport Class, and/or Sport Class Status allocated to an Athlete;

45.5 Intentional Misrepresentation presents a major threat to the integrity of Classification and Para sport. It is a very serious offence because it constitutes an attempt to:

- a) mislead an International Federation (and/or its representatives) in relation to any aspect of Classification; and/or
- b) achieve an unfair advantage that undermines fair and meaningful competition.

Consequently, potential incidents of Intentional Misrepresentation must be properly investigated, and if evidence indicates that Intentional Misrepresentation has occurred, disciplinary action must be taken.

45.6 IPCH has outlined procedures regarding the identification, investigation, and prosecution of alleged Intentional Misrepresentation following the IPC International Standard for Intentional Misrepresentation. (Annex 11)

45.7 In respect of any allegation relating to Intentional Misrepresentation a hearing will be convened by IPCH to determine whether the Athlete or Athlete Support

Personnel has committed Intentional Misrepresentation.

45.8 The consequences to be applied to an Athlete or Athlete Support Personnel who is found to have been guilty of Intentional Misrepresentation and/or complicity involving Intentional Misrepresentation will be one or more of the following:

- a) disqualification from all events at the Competition at which the Intentional Misrepresentation occurred, and any subsequent Competitions at which the Athlete competed;
- b) being allocated with Sport Class Not Eligible (NE) and designated a Review with Fixed Review Date (R-FRD) Sport Class Status for a specified period of time ranging from 1 to 4 years;
- c) suspension from participation in Competitions in all sport for a specified period of time ranging from 1 to 4 years; and
- d) publication of their names and suspension period.

45.9 The period of ineligibility / suspension can be extended up to a lifetime ban if the violation is serious or involves aggravating factors. It can also be reduced, but not to less than 12 months, if there are mitigating factors.

45.10 Any Athlete who is found to have been guilty of Intentional Misrepresentation and/or complicity involving Intentional Misrepresentation for a second time will be allocated Sport Class Not Eligible with Fixed Review Date Status for a period of time double of what they would have gotten the first time (without mitigations).

45.11 Any Athlete Support Personnel who is found to have been guilty of Intentional Misrepresentation and/or complicity involving Intentional Misrepresentation for a second time will be suspended from participation in any Competition for a period of time double of what they would have gotten the first time (without mitigations).

45.12 Any Athlete who is found to have been guilty of Intentional Misrepresentation and/or complicity involving Intentional Misrepresentation for a third time will be allocated Sport Class Not Eligible with Fixed Review Date Status for life.

45.13 Any Athlete Support Personnel who is found to have been guilty of Intentional Misrepresentation and/or complicity involving Intentional Misrepresentation for a third time will be suspended from participation in any Competition for life.

45.14 If another International Sports Federation brings disciplinary proceedings against an Athlete or Athlete Support Personnel in respect of Intentional Misrepresentation which results in consequences being imposed on that Athlete or Athlete Support Personnel, those consequences will be recognized, respected, and enforced by IPCH.

45.15 Any consequences to be applied to teams, which include an Athlete or Athlete Support Personnel who is found to have been guilty of Intentional Misrepresentation and/or complicity involving Intentional Misrepresentation, will be at the discretion of IPCH.

45.16 Any disciplinary action taken by IPCH pursuant these Classification Rules must be resolved in accordance with the applicable Board of Appeal of Classification Bylaws.

Chapter 6: Changes to Classification Systems

46. *Changes to Classification Systems*

- 46.1 Before making any substantive changes to the Classification system and/or Classification processes, IPCH must carry out an appropriate assessment of what impact any changes will have on Athletes, National Federations/PCH Organisations, and NPCs, including consideration of the sport's competition cycle, and the qualification periods for major competitions.
- 46.2 IPCH commits to provide to National Federations/PCH Organisations appropriate notice of the anticipated changes, along with a rationale for the changes, an explanation of which Athletes or groups of Athletes (if any) may need to be reassessed, the proposed timelines for implementation, and (if applicable) any proposed transition rules; as well as opportunities to submit feedback before such changes are adopted;
- 46.3 National Federations/PCH Organisations must ensure that Athletes under their jurisdiction are notified about such changes, and invited to provide feedback. In addition they
- 46.4 If IPCH makes changes to its Classification rules that may affect the (in)eligibility, Sport Class, and/or Sport Class Status of Athletes (for example, changes to the Minimum Impairment Criteria, or to its assessment methodology), IPCH must:
 - a) Take reasonable steps to identify such Athletes and notify them (through their National Federation/PCH Organisation) that they are entitled to be reassessed; and
 - b) where applicable, change each such Athlete's Sport Class Status to 'Review at the Next Available Opportunity (R-NAO)' or 'Review with a Fixed Review Date (R-FRD)', as deemed appropriate by IPCH.
- 46.5 If a National Federation considers that changes to IPCH's Classification rules may affect the Classification of any Athlete under its jurisdiction who was previously found to be not eligible, it must notify IPCH accordingly.

Chapter 7: Data, Best Practices and Classification Research

47. Data

47.1 IPCH may only process classification data for purposes relating to the Classification Code and International Standards and Classification, including (without limitation) UHC Assessments, Eligible Impairment Assessments, MIC Assessments, Sport Class Assessments, Evaluation Sessions, conducting disciplinary procedures, resolving Protests and Appeals, using or sharing Classification-related intelligence, and for education and awareness.

47.2 IPCH should only collect Classification Data reasonably required to achieve the above purposes, and must take steps to delete, destroy, or anonymise Classification Data once it is no longer required for such purposes.

47.3 IPCH must apply reasonable efforts to ensure Classification Data is:

- a) accurate, complete, and up-to-date;
- b) Processed fairly and lawfully, and in a manner that is clear to the relevant individual, such as through the use of written or oral notices;
- c) Processed for specified and legitimate purposes related to Classification, and not further processed for unrelated or incompatible purposes unless those purposes are expressly permitted by law; and
- d) adequate, relevant, and limited to what the Classification Organisation reasonably requires to meet obligations under the Classification Code and to conduct Classification.

47.4 IPCH may only process Classification Data with the consent of the Athlete to whom that Classification Data relates.

47.5 If an Athlete cannot provide consent (for example because the Athlete is a minor) the legal representative, guardian or other designated representative of that Athlete must give consent on their behalf.

48. Classification Research

48.1 IPCH may request that an Athlete provide it with Personal Information for Research Purposes.

48.2 The use by IPCH of Personal Information for Research Purposes must be consistent with these Classification Rules and all applicable ethical use requirements.

48.3 Personal Information that has been provided by an Athlete to IPCH solely and exclusively for Research Purposes must not be used for any other purpose.

48.4 IPCH may only use Classification Data for Research Purposes with the express consent of the relevant Athlete. If IPCH wishes to publish any Personal Information provided by an Athlete for Research Purposes, it must obtain consent to do so from that Athlete prior to any publication. This restriction does not apply if the publication is anonymized so that it does not identify any Athlete(s) who consented to the use of their Personal Information.

49. *Notification to Athletes*

49.1 IPCH must notify an Athlete who provides Classification Data as to:

- a) that fact that IPCH is collecting the Classification Data; and
- b) the purpose for the collection of the Classification Data; and
- c) the duration that the Classification Data will be retained.

50. *Classification Data Security*

50.1 IPCH must protect Classification Data by applying appropriate security safeguards, including physical, organizational, technical and other measures to prevent the loss, theft or unauthorized access, destruction, use, modification or disclosure of Classification Data; and take reasonable steps to ensure that any other party provided with Classification Data uses that Classification Data in a manner consistent with these Classification Rules.

51. *Disclosures of Classification Data*

51.1 IPCH must not disclose Classification Data to other Classification Organizations except where such disclosure is related to Classification conducted by another Classification Organization and/or the disclosure is consistent with applicable National Laws.

51.2 IPCH may disclose Classification Data to other parties only if such disclosure is in accordance with these Classification Rules and permitted by National Laws.

52. *Retaining Classification Data*

52.1 IPCH must ensure that Classification Data is only retained for as long as it is needed for the purpose it was collected. If Classification Data is no longer necessary for Classification purposes, it must be deleted, destroyed, or permanently anonymized.

52.2 IPCH must implement policies and procedures that ensure that Classifiers and Classification Personnel retain Classification Data for only as long as is necessary in order for them to carry out their Classification duties in relation to an Athlete.

53. *Access Rights to Classification Data*

53.1 Athletes may request from IPCH:

- a) confirmation of whether or not that IPCH Processes Classification Data relating to them personally and a description of the Classification Data that is held.
- b) a copy of the Classification Data held by IPCH; and/or

c) correction or deletion of the Classification Data held by IPCH.

53.2 A request may be made by an Athlete or a National Body or a National Paralympic Committee on an Athlete's behalf and must be complied with within a reasonable period of time.

PART B:

IPCH

Classification

System

Chapter 1: Mission and Philosophy

1 General Provisions

- 1.1 World Abilitysport coordinates the International PowerChair Hockey committee (IPCH) and through that the Powerchair Hockey movement worldwide.
- 1.2 Powerchair Hockey is addressed to people with severe physical disabilities as an attractive, competitive, fair and well-organized team sport, including sport on elite level. It is a mixed sport without age limits.
- 1.3 Classification is necessary to establish eligibility to compete in this sport and to group together in a transparent, regular and fair way those athletes who have eligible physical impairments that are approximately equal in the functional potential in playing Powerchair Hockey, hence ensuring that teams can compete in an equal and fair way.
- 1.4 The classification procedure is aimed to ensure a fair and equal competition, where the outcomes of the games are as much as possible related to training, personal abilities and talent rather than to the impact of impairments.
- 1.5 The classification system is, as far as possible, based on the motoric and functional abilities required for Powerchair Hockey and is applicable to athletes with eligible physical impairments as defined by the International Paralympic Committee (IPC)/World Abilitysport and as stated in Part B Chapter 2.
- 1.6 Classification is an ongoing process whereby all athletes are under regular observation by classifiers to ensure consistency and fairness for all athletes.
- 1.7 The classification process in Powerchair Hockey is under the responsibility of the IPCH Technical and Classification Officer and the IPCH Classification committee for recommending policies, guidelines, and procedures with respect to the IPC/World Ability Sport Classification Code.
- 1.8 IPCH Classifiers are always acting according to the IPCH/World Ability Sport Code of Conducts and Code of Ethics.
- 1.9 IPCH Classifiers must sign a Code of Conduct that apply not only for or during the competition they can be appointed for, but also further.
- 1.10 Classification has to be specific enough to achieve standardization, but yet general enough in other areas to permit flexibility in team composition and ensuring, therefore, the attractiveness of the competitions.
- 1.11 The IPCH Classification Committee shall ensure that classification rules are independent of gender, nationality, race, religion, economic status, political opinions or any other social conditions or statuses.

Chapter 2: PCH Eligible impairments & underlying Health Conditions

2 Eligible Impairments in PCH

Eligible Impairment	Examples of Health Conditions
<p>Impaired Muscle Power</p> <p>Athletes with Impaired Muscle Power have an Underlying Health Condition affecting the structure and physiology of (1) the central or peripheral nervous system or (2) the muscles (including the muscle origin and muscle insertion) that reduces or eliminates their ability to generate force to contract the muscles in order to move a joint.</p>	<p><i>Examples of an Underlying Health Condition that can lead to Impaired Muscle Power include:</i></p> <p>spinal cord injury (complete or incomplete, tetra- or paraplegia or paraparesis), muscular dystrophy, post- polio syndrome and spina bifida.</p>
<p>Limb Deficiency / Limb Length Difference</p> <p>Athletes with Limb Deficiency or Limb Length Difference have an Underlying Health Condition resulting from trauma, illness, or congenital causes affecting the bones or joints which leads to (1) a total or partial absence of a limb or (2) anatomically irregular dimensions.</p>	<p><i>Examples of an Underlying Health Condition that can lead to Limb Deficiency/Limb Length imp. include:</i></p> <p>traumatic amputation, illness (for example amputation due to bone cancer) or congenital limb deficiency (for example dysmelia).</p>
<p>Short Stature</p> <p>Athletes with Short Stature have an Underlying Health Condition resulting in reduced length of the bones of the upper limbs, lower limbs, and/or trunk which in turn leads to restricted standing height not as a result of limb deficiency.</p>	<p><i>Examples of an Underlying Health Condition that can lead to Short Stature include:</i></p> <p>achondroplasia, growth hormone dysfunction, and osteogenesis imperfecta.</p>
<p>Hypertonia/Spasticity</p> <p>Athletes with Hypertonia/Spasticity have an Underlying Health Condition causing structural damage to the central nervous system resulting in an increase in muscle tension by increasing angular velocity and a reduced ability of a muscle to stretch.</p>	<p><i>Examples of an Underlying Health Condition that can lead to Hypertonia include:</i></p> <p>Cerebral palsy, traumatic brain injury and stroke.</p>

<p>Ataxia</p> <p>Athletes with Ataxia have an Underlying Health Condition causing structural damage to the central nervous system resulting in an impairment in direction and velocity of voluntary movement.</p>	<p><i>Examples of an Underlying Health Condition that can lead to Ataxia include:</i></p> <p>cerebral palsy, traumatic brain injury, stroke and multiple sclerosis.</p>
<p>Dyskinesia (athetosis, dystonia, chorea).</p> <p>Athletes with Dyskinesia have an Underlying Health Condition causing structural damage to the central nervous system resulting in continual involuntary movements that interfere with the velocity and accuracy/direction of voluntary movements.</p>	<p><i>Examples of an Underlying Health Condition that can lead to Dyskinesia include:</i></p> <p>cerebral palsy, traumatic brain injury and stroke.</p>
<p>Impaired Passive Range of Movement</p> <p>Athletes with Impaired Passive Range of Movement have an Underlying Health Condition affecting a structure of bones, joints, connective tissue, or soft tissues resulting in a restriction or lack of passive movement in one or more joints.</p>	<p><i>Examples of an Underlying Health Condition that can lead to Impaired Passive Range of Movement include:</i></p> <p>arthrogryposis and contracture resulting from chronic joint immobilization or trauma affecting a joint.</p>

All impairments which are not one of the 7 above mentioned eligible impairments, will be considered as non-eligible impairments.

3 Non-Eligible Impairment for PCH

3.1 Examples of Non-Eligible Impairments include, but are not limited to the following:

- a) Pain.
- b) Hearing impairment.
- c) Low muscle tone.
- d) Hypermobility of joints.
- e) Joint instability, such as unstable shoulder joint, recurrent dislocation of a joint.
- f) Impaired muscle endurance.
- g) Impaired motor reflex functions.

- h) Impaired cardiovascular functions.
- i) Impaired respiratory functions.
- j) Impaired metabolic functions;
- k) Tics and mannerisms, stereotypes, and motor perseveration,
- l) vestibular impairment;
- m) impairment in muscle metabolism resulting in fatigue; and
- n) impairment stemming from psychological and/or psychosomatic causes.

An Athlete who has both an Eligible Impairment and a Non-Eligible Impairment may be evaluated by a Classification Panel on the basis of their Eligible Impairment, provided that their Non-Eligible Impairment does not affect the Classification Panel's ability to conduct an Evaluation Session (including Observation Assessment) and allocate a Sport Class.

For example, an Athlete with osteoarthritis might have Impaired Passive Range of Movement (an Eligible Impairment) and pain (a Non-Eligible Impairment). If the presence of pain restricts a Classification Panel's ability to conduct an Evaluation Session the Athlete might not be allocated a Sport Class, notwithstanding that the Athlete has an Eligible Impairment.

4 Health Conditions that are not Underlying Health Conditions in PCH

- 4.1 A number of Health Conditions do not lead to an Eligible Impairment and are not eligible Underlying Health Conditions.
- 4.2 An Athlete who has a Health Condition but who does not have an eligible Underlying Health Condition will not be eligible to compete in Para sport.
- 4.3 Health Conditions that primarily
 - a) cause pain.
 - b) primarily cause fatigue.
 - c) primarily cause joint hypermobility or hypotonia;
 - d) are primarily psychological or psychosomatic in nature and do not lead to an Eligible Impairment.

Examples of Health Conditions that primarily cause pain include myofascial pain-dysfunction syndrome, fibromyalgia or complex regional pain syndrome.

An example of a Health Condition that primarily causes fatigue is chronic fatigue syndrome.

An example of a Health Condition that primarily causes hypermobility or

hypotonia is Ehlers- Danlos syndrome.

Examples of Health Conditions that are primarily psychological or psychosomatic in nature include conversion disorders or post-traumatic stress disorder.

Chapter 3: PCH Minimum Impairment Criteria (MIC)

5 Classification formula PCH and classification profiles

Classification Formula PCH:

Sport Class = Arm profile (Ap) + Trunk profile (Tp)

(Arm profile is the profile of the playing arm).

Possible Arm profiles: Ap 1.0, 1.5, 2.0, 2.5, 3.0, 3.5 and 4.0

Possible Trunk profiles: Tp 0, Tp 0.5 and Tp 1.0

6 Minimum Impairment Criteria (MIC) in general

Maximum score of sum Arm profile + Trunk profile may NOT exceed score 4.5 for all Athletes independent of impairment type: score 4.5 (= class 4.5) is the highest possible score to be eligible for PCH.

Ap 4.0 + Tp 0.5 is an eligible (4.5 class) athlete.

The athlete with the 5.0 profile (Ap 4.0 + Tp 1.0), will be a PCH 5.0 NE (Not Eligible) athlete.

7 Minimum Impairment Criteria (MIC) specific for each impairment type

See Schemes for the maximum Arm profile (4.0) and for the maximum Trunk profile (1.0)

Arm Profile (Ap)	Impairment Muscle Power	Impairment: Range of Motion	Impairment Limb Deficiency/Limb Length Difference	Impairment Short Stature	Impairment Coordination
	Instrument: MRC	Instrument: measuring degrees	Instrument: measuring length & assessment impact L- deficiency on hitting, handling and reaching	Instrument: measuring length & ROM in degrees	Instrument: RMT (repetitive movement tests) joints, ASAS (Australian spasticity assessment scale)
Ap 4.0	MRC 4/5 4 movement couples indicate 4	5 movement couples indicate 4.0	4 movement couples indicate Ap 4	5 mov. couples indicate 4.0 Arm length > 45 (man), > 41 (fem)	RMT: impairment fingers, wrist Indication: ASAS: no catch or catch 1
Ap 3.5	Mov. couple aa/ra = 3 Other	5 movement couples indicate	In between Ap 3 and Ap 4	5 movement couples ROM 3.5 ór:	RMT: impairment fingers,

	couples indicate > 3.0	ROM in between 3.0 and 4.0	Complete hand amputation (and/or stick fixated on forearm)	Arm length ≤ 45/41	wrist, elbow, shoulder. Indication: ASAS 2 catch biceps ór triceps
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Arm Profile 4.0

Strength Impairment:

Ap 4.0 means general profile of the playing arm of MRC 4 or MRC 5.

Range of Movement (ROM) Impairment:

Ap 4.0 means 'shoulder-cone' 45 degrees anteflexion and abduction, 30 degree retroflexion all with normal strength and ROM falls into the 76% - 100% range of normal ROM of Elbow and Wrist/Hand.

Short Stature:

Ap 4.0 means 'shoulder-cone' 45 degrees anteflexion and abduction, 30 degrees retroflexion all with normal strength and ROM 76% - 100% of normal Elbow and Wrist/Hand.

Range of Motion

Ap 4.0 Men: Arm-length exceeds 45 cm and ROM 76% - 100% range.

Ap 4.0 Women: Arm length exceeds 41 cm and ROM 76% - 100% range.

Limb Deficiency/Limb Length Difference:

Ap 4.0 means no amputation playing arm or an amputation of the playing arm which does have minimal impact on the sport specific activities Hitting, Ball-control and Reaching.

Additional:

In case of lower limb amputation only, the sum of Arm profile and Trunk profile cannot exceed 4.5, which means that the Tp can be maximal 0.5 when the Ap is 4.0.

Coordination Impairment:

Ap 4.0 means an (playing) Arm without coordination limitations or an Arm with Coordination impairment (only) in Fingers and Wrist with maximum 'catch' 1.

All of the above Arm profiles will lead to non eligible athletes, when their Trunk score is 1.0:

Ap 4.0 + Tp 1.0 = 5.0 = NE

A athlete can have the Trunk profile 1.0, but only in combination with the Arm profile max.

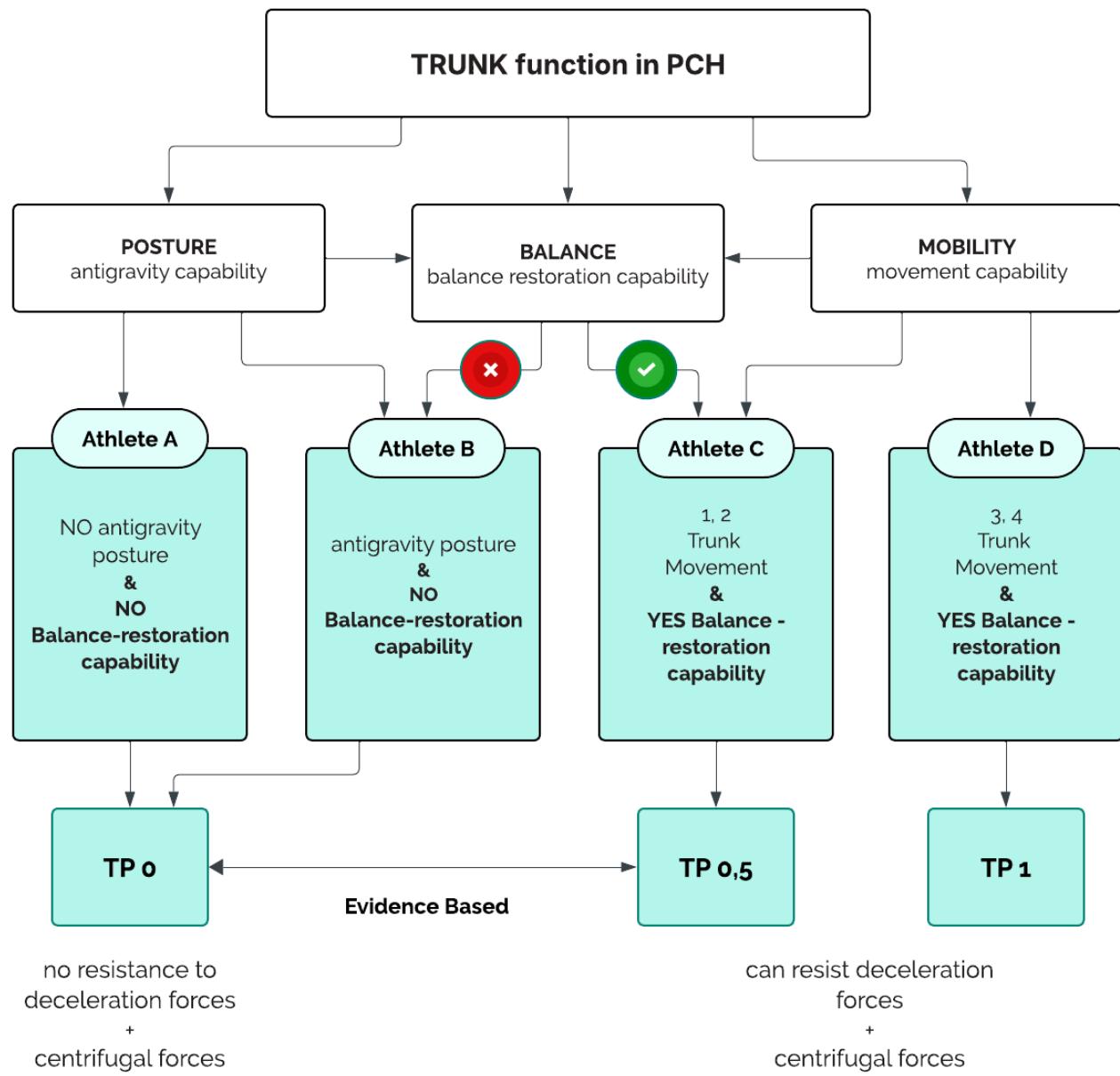
3.5: Ap 3.5 + Tp 1.0 = 4.5

Trunk profile 1.0:

3 or 4 active Trunk movements (from 4 possible Trunk movements).

Explanation: see Appendix 3 (assessment methodology) and 4 (assessment criteria).

Trunk function in PCH: Relation between 4 Athlete-types and 3 Trunk profiles



Chapter 4: Assessment Methodology PCH

8 PCH Classification Process

- 8.1 In the Pre-classification session, the Eligibility of the PCH Athlete is assessed in advance by using the Medical Diagnostic Form (See 'Medical Diagnostic Form' in part C. Annex 1). This document can be downloaded from the IPCH website or can be requested from the IPCH Technical and Classification Officer at any time.
- 8.2 Before each Classification Session the document has to be submitted by the National Federation/PCH Organization to IPCH, correctly filled in (typed) and 6 weeks before the athlete undergoes evaluation.
- 8.3 The Athlete should have an Eligible Impairment and Underlying Health Condition.
- 8.4 If the Athlete doesn't present an Eligible Impairment and Underlying Health Condition the designation NE will be allocated with Status C. If possible, it should also be indicated that the Athlete fulfils the MIC (Minimum Impairment Criteria) in order to be able to participate in the PCH Competition.
- 8.5 The Athlete who comes out of the Pre-Classification Session as an Eligible Athlete can go through the actual PCH Classification after signing the Consent Form: (see 'Classification Consent Form' part C. Annex2).
- 8.6 The classification evaluation contains three steps
 - a) Interview + Physical Assessment,
 - b) Technical Assessment
 - c) Observational Assessment (Observational Assessment, indicated by Tracking Code: OA).
- 8.7 Physical Assessment and Technical Assessment are done in a non-competitive environment.
- 8.8 The PCH Classification Form will be used (see 'Classification Form' part C. Annex3) during these Assessments.
- 8.9 The PCH classification process is detailed in the following Scheme.

1. Pre Classification Session

Eligibility Assessment for PCH
(underlying health condition leads to) permanent eligible impairment

YES

NO

2A. Classification: Physical Assessment

MIC Assessment - Minimum Impairment Criteria for PCH
Assess impairment by using impairment-specific tests

PLAYING ARM

- MRC 0, 1, 2, 3, 4 or 5 > Ap 1.0, 1.5, 2.0, 2.5, 3.0, 3.5, 4.0
- Other tests > preliminary Ap-score

TRUNK

- trunk function 0, 1, 2, 3 or 4 PCH Trunk movements
- preliminary Tp: Tp 0, 0.5 or 1.0

2B. Classification: Technical Assessment

Assess impact impairment on sport specific activities PCH
(1) Hitting, (2) Ball/Stick control, (3) Reach

- Ap and Tp Technical Assess. decisive over Ap/Tp Physical Assess.
- Define **Entry sportclass**

Class 1,0 - 1,5

Ap+Tp = 1.0, 1.5

1.0 can
be(come) 0.5

Class 2,0 - 2,5

Ap+Tp = 2,0 - 2,5

Class 3,0 - 3,5

Ap+Tp = 3,0 - 3,5

Class 4,0 - 4,5

Ap+Tp = 4,0 - 4,5

**Class NE
non eligible**

Ap 4,0+ Tp 1,0

2C. Classification: Observational Assessment

Define **Final sportclass** 0.5, 1.0, 1.5, 2.0, 2.5, 3.0, 3.5, 4.0, 4.5

9 Physical Assessment

In the Physical Assessment the Arm profile (Ap) and Trunk profile (Tp) will be assessed.

Impairment specific Tests will be used:

	Arm Profile Test	Trunk Profile Test
Muscle Power	MRC scaling	TIC Test
Range of Movement	Range of Motion Assessment	TIC Test
Limb Deficiency/Limb Length Difference	Length measurement (+ impact assessment)	TIC Test
Short Stature	ROM testing and length measurement	TIC Test
Coordination Impairment (Ataxia, Hypertonia, Spasticity, Dyskinesia)	Coordination Tests/ASAS	TIC Test

For the Trunk Assessment the (modified) TIC, Trunk Impairment Classification, will be used.

10 Assessment Arm profile

A) Impaired Muscle Power

Athletes with Impaired Muscle Power will be tested using the MRC (Medical Research Council) test by MMT (Manual Muscle testing).

The Test will be performed on the playing arm: not the drive/Joystick arm/hand (with the exception of the tests to differentiate between 0.5 and 1.0).

All the test of the muscles/strength joint movements will be performed as described on the PCH Classification Form.

Assessment of the strength of the muscle groups of the arm will be done by asking the athlete to repeat each movement. This has to be done to include the component of endurance, while the fatigue of muscles is an inclusive aspect of Muscular Dystrophies / neuromuscular diseases and doing the manual muscle testing in this way will result in a more realistic strength score.

Grade	Description
0	Complete lack of voluntary muscle contraction. The examiner is unable to feel or see any muscle contraction.
1	Faint or "flicker" muscle contraction without any movement of the limb. The examiner can see or palpate some contractile activity of the muscle/s or may be able to see or feel the tendon "pop up" or tense as the Athlete tries to perform the contraction.
2-	Gravity-eliminated ¹⁶ movement that is less than full range of motion.
2	Very weak muscle contraction with movement through the complete range of motion in a position that eliminates or minimizes the force of gravity. This position is often described as the horizontal plane of motion.
2+	In gravity minimized position, it completes the full available range and holds the end position against mild resistance; or against gravity, completes up to half of the full range of motion.
3-	Against gravity, more than half but less than full range of motion. When asked to repeat the movement for 10 times the athlete cannot maintain this quality of movement and they cannot accomplish the 10 time repetitions.
3	Muscles can complete a full range of motion against only the resistance of

¹⁶ **Note:** During testing, the aim is to obtain an accurate assessment in a gravity-eliminated position, using the available means. This approach is necessary because positioning the athlete in a supine or side-lying position is often difficult or impractical. (see Kendall FP, Kendall McCreary E, Geise Provance P, McIntyre Rodgers M and Romani WA. Muscles Testing and Function with Posture and Pain)

	<p>gravity.</p> <p>If a tested muscle can move through the full range against gravity but additional resistance, however mild, causes the motion to break, the muscle is assigned a grade of 3.</p> <p>When asked to repeat the movement for 10 times the athlete can maintain the quality of movement and execute correctly all the repetitions.</p>
3+	<p>Completes full range of motion against gravity, and holds end position against mild resistance.</p> <p>When asked to repeat the movement for 10 times the athlete can maintain this quality of movement also with mild resistance applied.</p>
4	<p>Able to complete the full range of motion against gravity and can tolerate strong resistance without breaking the test position. The Grade 4 muscle clearly breaks with maximal resistance.</p> <p>Resistance shall be applied proximally to the joint.</p>
5	<p>Able to complete full range of motion and maintain end point range position against maximal resistance. The examiner cannot break the Athlete's hold position.</p> <p>Resistance shall be applied distally to the joint.</p>

When testing MRC grades 4 or 5, resistance can be applied either during an isometric contraction (without movement - maintaining the position) or during a concentric contraction (throughout the full range of motion).

B) Impaired range of motion/Short Stature

'PROM: Passive Range of Motion' involves placing a body part through its various directional motions, all without the activation of the athletes' muscles, so that the movement is performed entirely by an external source.

Measure the PROM in shoulder, elbow, wrist, fingers of the playing arm, in degrees, with a goniometer.

Joint movements which need to be measured are stated in the 'Classification Form'

For Athletes with Osteogenesis Imperfecta/Achondroplasia or similar Health Conditions, the length of the playing arm will also be measured.

C) Impairment Limb deficiency/Amputation/Limb Length Difference

Length Measurement. Describe eventually the anatomical malformation.

Measurement of loss of limb/limb deficiency should be taken in centimeters and a tape measure should be used to conduct the assessment.

Is the hand stick fixed to fore-arm?

Is the hand stick fixed to the upper-arm?

Two important stick placements to define the Arm profile.

Loss of limb/limb deficiency should be highlighted to indicate where the limb loss is present. Figures of measurement should be accounted for from the distal point of the stump to the next marked measuring point on the body. The relevant parts of all limbs must be measured

The diagram (below) shows the measurement points for limb measurement. Measurement should take place from the distal point of the limb extremity to the measuring point above. All measurements are to be made in centimeters.

Note 1:

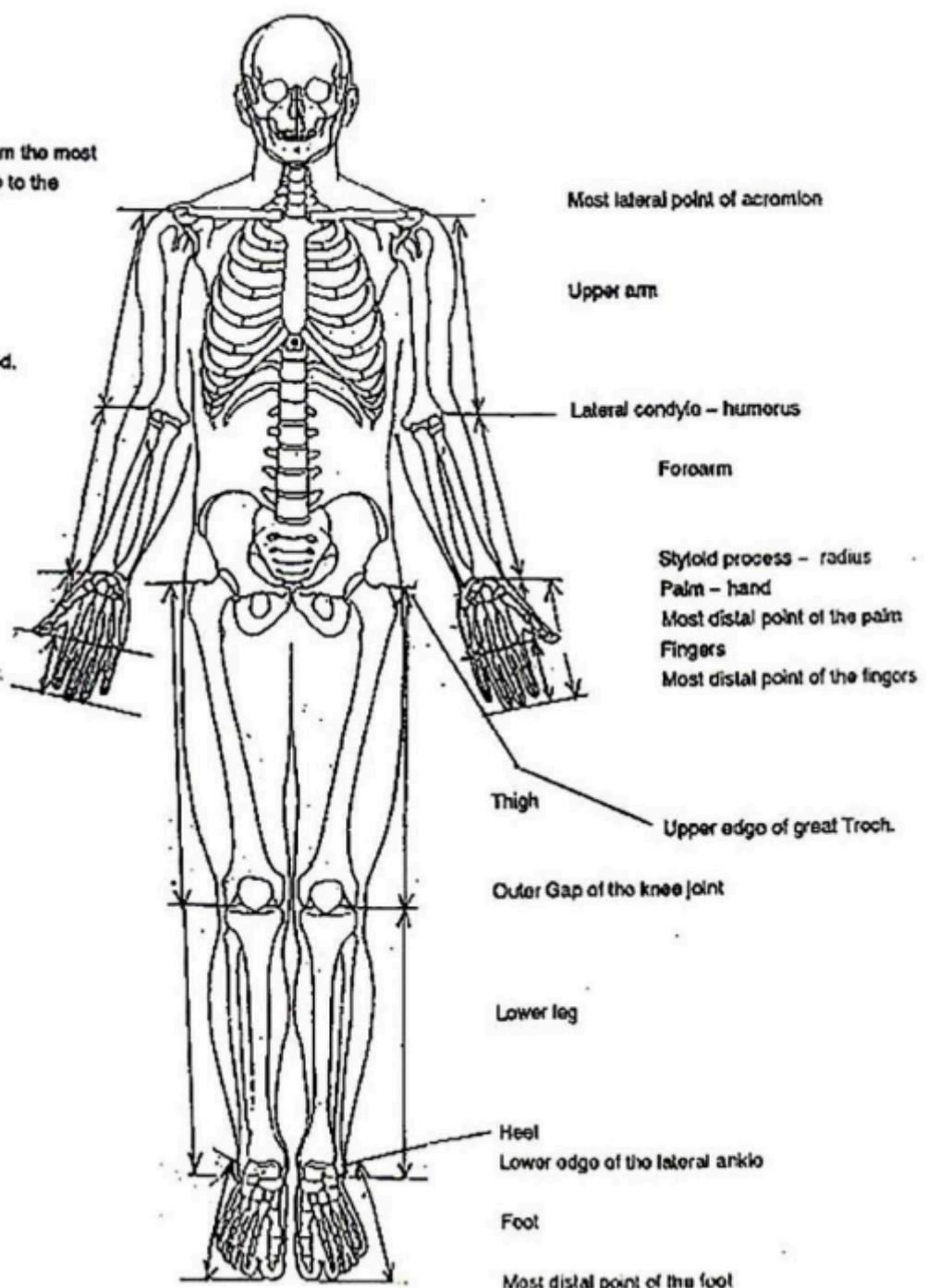
The measuring must be done from the most distal point of the amputated limb to the next anatomical point above

Note 2:

The relevant part of the other arm or leg must also be measured.

Example:

If a person has a right side below knee amputation, the stump will be measured from the most distal point of the stump to the outer gap of the knee joint. Additionally the left lower leg must be measured from the lower edge of the lateral ankle to the outer gap of the knee joint. From the figures of the two measurements, it can be worked out what part of the lower leg is remaining [1/4, 1/3, 1/2, 2/3, 3/4]



D) Impairment Coordination (Hypertonia, Spasticity, Ataxia, Dyskinesia)

Coordination tests (Repetitive Movement Tests) of shoulder, elbow, wrist and fingers of the playing arm (see Scheme below).

The athlete will be instructed to do quick alternating movements to detect type, location and severity of the coordination impairment. Observe speed, range and accuracy of the movements.

1. First

The passive ROM (PROM) of the shoulder, elbow, forearm, wrist and fingers of the athlete will be determined by a classifier prior to the repetitive movements. The repetitive movements will be tested in ROM as described or maximal PROM of the athlete if the PROM is limited.

2. Secondly

The athlete will be asked to perform the movement slowly to determine whether the athlete is able to perform the movement.

3. Thirdly

The athlete is asked to perform the repetitive movements as fast as possible during 10 seconds with the part of the playing arm within the previously determined ROM of the fingers, wrist, forearm, elbow and shoulder.

Table: Description of the repetitive movements

Level	Starting position	Targets	Movement
Fingers	Forearm and back of hand supported full length on table, elbow 90° flexion, palm facing up.	Begin=full finger extension. End=full finger flexion.	Finger flexion to full fist or maximum PROM if less. One side at a time.
Wrist	Forearm resting on table, palm facing down, wrist and hand over the edge of the table.	Begin=90° wrist flexion. End=90° wrist extension.	Wrist extension 10 90° or maximum PROM if less. One side at a time.
Forearm	Forearm and back of hand supported full length on table, elbow 90° flexion, forearm in maximum supination, palm facing up, fingers in extension.	Begin=table. End=table.	Pronation until palm on table. One side at a time.
Elbow	Forearm resting on table hand palm facing up with 45° angle between upper arm and	Begin=table. End=classifier's hands at 135°.	Elbow flexion to 135° or maximum PROM if less. One side at a time.

	table.		
Shoulder	Shoulder elevation 45°, elbow extended, hand palm facing down resting on table.	Begin=table. End=classifier's hands at 135°.	Anterior flexion from start position to 135° or maximum PROM if less. One side at a time.

The ASAS (Australian Spasticity Assessment Scale) will be used to detect eventual 'catches' in biceps and/or triceps, forearm and wrist.

In the context of the ASAS test, a "catch" refers to a sudden, involuntary increase in muscle resistance that is felt by the examiner when a joint is moved passively and rapidly through its available range of motion. A catch is the examiner's tactile detection of an abnormal, sudden resistance during rapid passive movement (RPM), and its timing within the range of motion is central to grading the severity of spasticity.

More precisely:

- A catch is the moment during rapid passive movement (RPM) at which the examiner first perceives an abnormal, velocity-dependent resistance caused by spastic muscle activation.
- It is typically experienced as a brief "stop," "jerk," or "clasp-knife-like" phenomenon rather than a smooth, uniform resistance.
- The catch reflects upper motor neuron involvement, where muscle tone increases abnormally in response to the speed of stretch.

ASAS scores

0	No 'catch' on 'rapid passive movement' (RPM).
1	Catch occurs on RPM followed by release: there is no resistance to RPM throughout rest of range
2	Catch occurs in the second half of available range (after halfway point) during RPM and is followed by resistance throughout the remaining range.
3	Catch occurs in the first half of available range (up to and including halfway point) during RPM and is followed by resistance throughout the remaining range.
4	When attempting RPM, the body part appears fixed but moves on slow passive movement.

Besides the Physical Assessment, the Technical Assessment is (very) necessary in order to be able to define the Entry Sports Class.

11 Assessment Trunk Profile

The Trunk Impairment Tests from Altmann¹⁷ are used in the Trunk assessment of PCH athletes.

These tests are clearly described and can be executed by the athletes very easily, are non-demanding and can be done in limited time.

For PCH only 4 Trunk tests out of the original Altmann's TIC 10 tests battery are used. No muscle testing is performed in the Trunk Assessment, only execution of Trunk movements. The aim is to define the possibility to counter the decreasing and rotational forces of the powerchair, and the reaching capabilities of the athlete.

Descriptions of the Trunk Tests TIC are available in part C: Annexes.

- Trunk test 1: sitting straight, unsupported
- Trunk test 3: forward /rearward flexion.
- Trunk test 4: rotation.
- Trunk test 5: lateral flexion to stick-side

Trunk Tests will be performed preferably on the bench / bed to eliminate the compensations and have the chance to fully evaluate the trunk functionality of the athlete. In specific circumstances - at the sole discretion of the IPCH Classification Panel - it might be possible to perform the tests also from the powerchair. In any case the classifiers can ask the athlete to be tested with and without adaptive equipment.

Trunk test 1: will in itself not differentiate between Trunk-profile 0 (zero: fail test 1) and Trunk- profile 0.5, because antigravity posture alone is not enough to counter the decreasing and centrifugal forces of the Powerchair which means: athletes who cannot counter the decreasing and rotational forces of the Powerchair, will still be assessed with the Trunk profile 0.

Trunk tests 3, 4 and 5 will discriminate between Trunk profile 0.5 and 1.0.

From Test 3 both the Trunk flexion and the Trunk extension will be taken into consideration. Although trunk extension, behind the vertical, is not possible because of the backrest, it will give the classifier knowledge about the strength of the trunk flexion muscles.

From test 5 only the lateral flexion to the stick-side will be assessed: (pure) lateral flexion to the Joystick-side cannot be done due to the armrest with Joystick on it.

Which means that there are 4 effective trunk movements to assess in PCH:

1. Trunk Flexion forward + Trunk Extension (assessed as one)
2. Trunk Rotation to the Left side,
3. Trunk Rotation to the Right side,
4. Trunk Lateral Flexion to the stick side.

The criteria for Tp 0, Tp 0.5 and Tp 1.0 will be described in Chapter 5 .

¹⁷ *Altmann V, 2015, Impact of trunk impairment on activity limitation with the focus on Wheelchair rugby, Dissertation KU Leuven 2015

12 Technical Assessment

The Technical Assessment will be an evaluation of the relation between the Impairment and the Sport Specific Activities that determine proficiency in PCH. It is an Assessment of the impact of the Impairment on these Sport Specific Activities.

Activities that determine Proficiency in PCH

Three core determinants which determine the proficiency in PCH are:

- a) Ball/stick control,
- b) Hitting Power
- c) Reach.

Ball /stick control

Ball /stick-control refers to the capability and control of the arm/ hand operating the ball/stick combination.

This capability and control can be limited by strength, range of motion, limb deficiency or coordination, influencing the accuracy in ball-handling (receiving the ball and forehand to backhand maneuvers and reverse).

Although ball/stick-control can be seen both in the horizontal plane as in the vertical plane, it is most obvious in the horizontal plane/on the ground.

Hitting power:

Is the result of the athlete's ability to lift the stick and while doing that being able to make "explosive" movements with the stick.

This can be described as the vertical 'Volume of Action': the way the stick is used in the vertical plane.

Reach

This third determinant of PCH performance is especially related to the Trunk and can be described as the 'Horizontal Volume of Action'.

Definition 'Horizontal Volume of Action': The limit to which an athlete can move his stick blade voluntarily in any horizontal direction (stick side, frontal side, opposite side and rear side) and with control return the stick blade to the stick side of the powerchair.

When a athlete does not have Trunk movements, the result will be a limited 'Horizontal Volume of Action', a limited covered space around the powerchair which will limit the Reaching possibilities

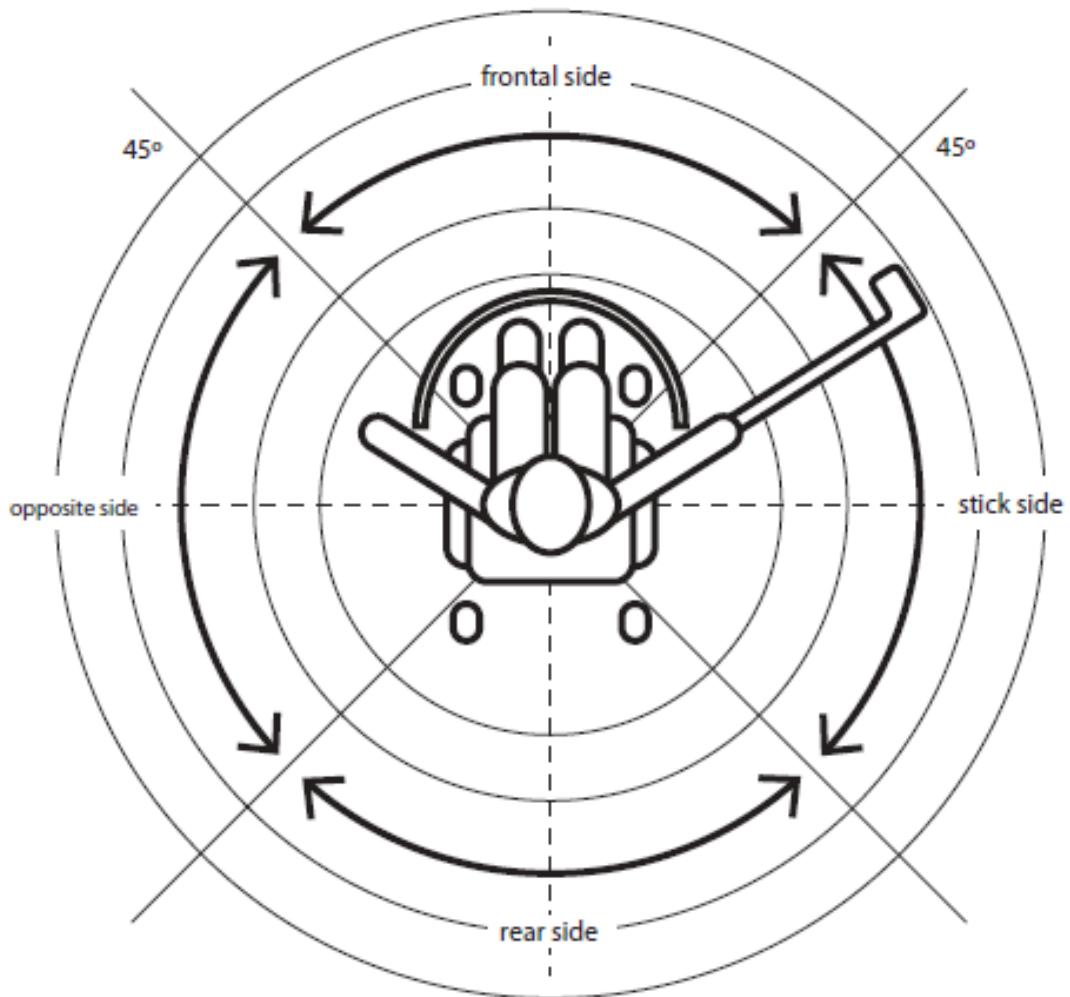
(see the drawings with Horizontal and Vertical 'Volume of Action' to define the different sides of the powerchair and Reaching circles).

IPCH Classification Form

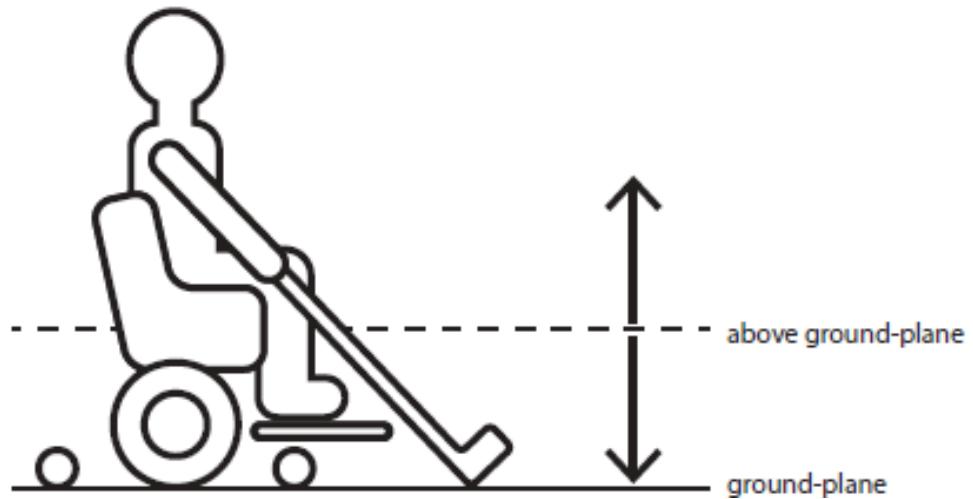
kvb | januari 2016



Horizontal 'Volume of Action'



Vertical 'Volume of Action'



With the Arm profile 4.0, but without Trunk movements, the athlete will be able to cover a certain space around the powerchair but limited to the smaller 'circles' (see drawing 'Volume of Action').

The forward flexion, rotation and lateral flexion of the Trunk will increase the 'Horizontal Volume of Action' and by that the reaching possibilities and proficiency in PCH.

The athlete will now be able to also cover the outside circles around the powerchair.

13 Assessment of the Impact of the Impairment on the activities in PCH

The allocation of a Sport Class must be based on an evaluation of the extent with which the Impairment affects the specific tasks and activities fundamental to PCH.

This evaluation will first take place in a controlled non-competitive environment, which allows the repeated observation of key tasks and activities.

The Technical Assessment contains three types of Tests.

Classifiers can require the athlete to perform the test both with and without adaptive equipment.

These three types of Tests will assess the impact of the impairment on the PCH sport-specific activities:

- a) Ball/stick control,
- b) Hitting Power
- c) Reach.

Before the Technical Assessment starts, the Classification Panel decides which tests the Athlete should perform based on the result of the Physical Assessment.

In these Tests the above described term 'Volume of Action' will be used.

The Horizontal 'Volume of Action' includes all four horizontal directions:

- a) Stick-side,
- b) Front side,
- c) Opposite-side,
- d) Rear-side and

the smaller or larger Reaching-circles into these sides: these will play a role in Test 3 (Reach).

The 'Vertical Volume of Action' of a Powerchair-Hockey athlete describes the way the stick is used in the vertical space:

- a) only used in the ground-plane,
- b) only used in the ground-plane and in the vertical space till seat height, or
- c) used without compensations/passive movements in all regions of the vertical space.

See drawing "Horizontal and Vertical Volume of Action".

Observe/analyze the quality of the movement of Arms and Trunk and do not score only the result (in terms of quantity) of the tests.

TEST 1. BALL/STICK CONTROL

Pushing the ball and performing a slalom with the ball around cones and around one cone. Repeat the Test as many times as needed to have a clear idea about Ball /stick-control.

Test goal:

This test will assess the impact of the Arm/hand Impairment on PCH sport specific activity 1: "Ball/stick-control".

Define the ability to control the ball with the stick- blade using (quick) forehand and backhand maneuvers: the goal is to define and check the Arm-profile.

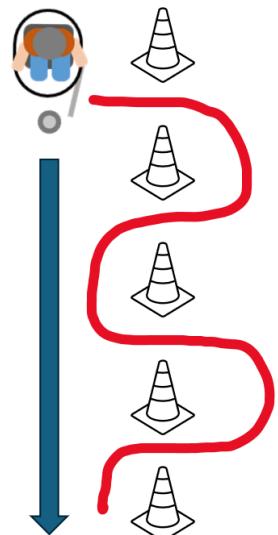
Test Instruction:

5 cones of 55cm height and 30cm diameter in a lane with 1,20-meter distance from each other.

The athlete drives straight next to the cones and does the slaloms with the ball between the cones.

First slowly, then faster and faster.

Do the test also from standstill maneuvering the ball around one cone.



Test observation:

Assess the impact of the Arm/Hand Impairment on the execution of the sport specific activity "Ball/stick-control".

Look for endo/exo-rotation problems/limitations of the shoulder.

Evaluate the flexion in the elbow and the anteflexion/abduction of the arm. Look for pronation/supination problems/ limitations of the elbow.

Look for stick-handling problems/limitations. Look for strength- or coordination problems/limitations. Do differentiate between skill and impairment/motoric ability/activity limitation.

→ Skill-factor: an athlete with MRC 4/5 on the playing arm and no other Impairments is, theoretically, able to execute the ball-slalom, but when he is untrained, he will maybe not show this "Ball/stick-control" in the slalom because of lack of skills instead of lack of abilities. Classifiers do look at how the test is executed and not how well the test is performed.

TEST 2: HITTING POWER

Hitting a moving ball as hard as possible with the Powerchair in 4 positions:

- a) forward facing (evaluation anteflexion),
- b) sideward facing (evaluating adduction),
- c) other side facing (evaluating abduction)
- d) diagonal backward facing (evaluating retroflexion).

Test goal:

Define the anteflexion, adduction, abduction and retroflexion capability and 'Vertical Volume of Action'.

This test will assess the impact of the Impairment on PCH sport specific activity 2: "Hitting".

The goal is to define and check the Arm-profile.

Test Instruction:

The classifier places the ball on the floor (smooth and ground surface).

The classifier launches the ball towards the athlete. The athlete is asked to hit the ball as hard as they can.

Assess all forehand hitting, sideward hitting, backhand hitting and rearward hitting.

Perform as many repetitions as needed.

If in doubt about the role of fatigue/the endurance aspect, repeat in fast pace 10 (ten) times hitting and look for difference in power/explosivity at last trials.

Ask the Athlete to perform the task with and without the use of rotation of the powerchair. (Rotation of the powerchair will help the athlete, by centrifugal force, to lift the stick higher enabling him to hit the ball with more force).

Test observation:

Assess the impact of the Impairment on the execution of the sport specific activity "Hitting":

- look for the 'Vertical Volume of Action' which is responsible for Hitting power/explosiveness.

Be aware of the 'equipment-use': the rotation of the powerchair will help the athlete to perform the task at a higher level, but 'equipment' is not taken into account when classifying PCH athletes. Classifiers only score the motoric capability to perform the task.

Using the stick blade in the ground-plane only, or using the stick-blade on ground-plane and (low) vertical volume of the "Vertical Volume" (without compensations) refers to the quality of the Hitting-movement.

When only used in ground-plane, the hits will be softer/not explosive.

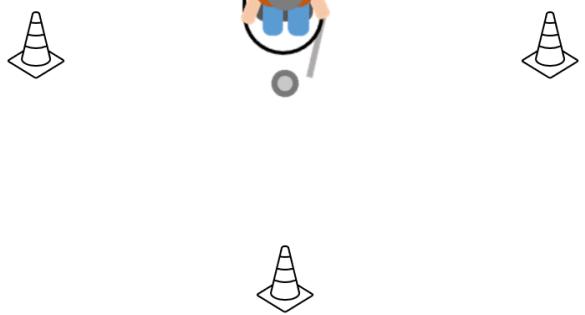
When the stick blade can be used above ground-plane, the hits will be harder/more explosive.

In ground-plane, hitting will often be "pushing", while with more available muscle power, the stick can be lifted higher and brought to the ball with force: the result will be that more speed is given to the ball and/or the movement can be executed faster.

The results of Test 2 "Hitting" will be decisive in the case of a doubt between the Arm profiles.

TEST 3. REACH

The athlete will be asked to touch the bases and tops of cones (55 cm height and 30 cm diameter) with the stick blade, standing still with the powerchair in between three cones: one placed on the Stick side (border between Stick side and Rear side), one placed on the Frontal side (mid Frontal side), and one placed on the Opposite side (border between Opposite side and Rear side), to measure the "Horizontal and Vertical Volume of Action".



Test goal:

This test will assess the impact of the Impairment on the PCH sport specific activity 3: "Reach".

Define the ability to move the Trunk in different planes of motion:

- a) forward,
- b) rotation left/right and
- c) lateral flexion to stick side.

The goal is to check and assess the Trunk-profile.

With a better Trunk Profile the 'Horizontal' Volume of Action' can be enlarged creating better Reaching possibilities/performance.

The athlete remains seated and stationary in their powerchair.

Three cones are positioned: one in front of the athlete, one on the left side, and one on the right side. The athlete is instructed to touch both the bases and the tops of the cones with the stick blade. The cones are placed at distances that require the athlete to perform maximal movements:

- maximal forward lean,
- maximal trunk rotation to the left,
- maximal trunk rotation to the right, and
- maximal lateral flexion to the stick side.

Because of individual differences in arm length and stick type, the exact distance of the cones may vary between athletes.

Classifiers must observe **active trunk movements**. Leaning against chair parts or adaptive equipment is not allowed during this phase of the test; such supports should be removed if possible in order to obtain a clear picture of the athlete's active reaching capacity. To further prevent passive support, the athlete is asked to place the non-playing arm diagonally across the front of the trunk.

The test may be repeated as often as necessary until the classifiers have a reliable understanding of the athlete's trunk movement and active reaching possibilities.

After this, the test is repeated **with** the athlete allowed to use/lean on chair parts and/or adaptive equipment, in order to evaluate the difference in performance.

Test observation:

Assess the impact of the impairment on the execution of the sport specific activity "Reach".

Look for active (not passive) forward flexion, rotation and lateral flexion of the trunk.

Concerning the use of armrest and/or adaptive equipment on the powerchair: trunk movements must be active movements. Classifiers do not classify passive movements/use of equipment.

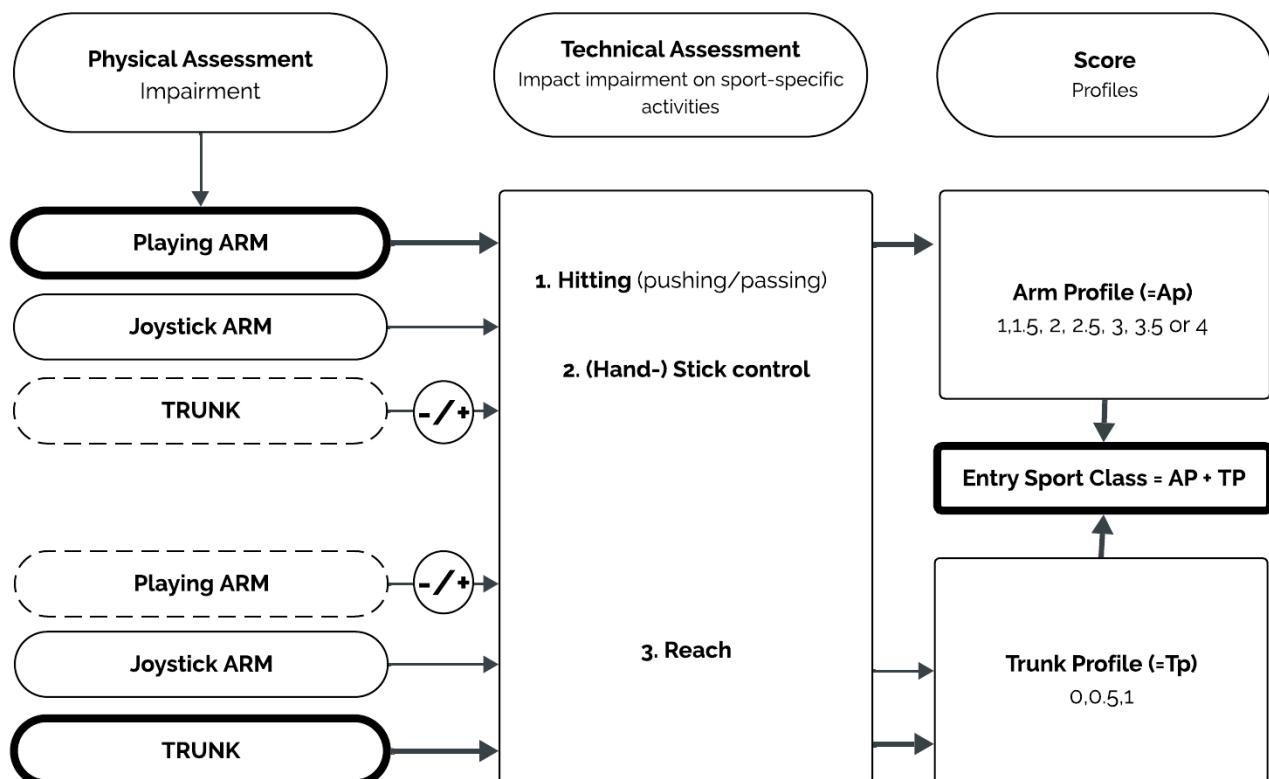
In general look for the quality of the trunk movements: quickly executed versus slowly/time consuming.

14 PCH Classification Process Detail

The PCH "Classification Process Detail" Scheme does show the relation between the Physical Assessment, Technical Assessment and the Arm- and Trunk score profiles.

Also the impact of the Arm- and Trunk Impairment on the Sport Specific Activities:

- a) Ball/stick control,
- b) Hitting Power
- c) Reach.



The **+/− symbols** indicate that trunk or arm impairments may either limit or enhance reach and functional execution depending on control and stability.

15 Observational Assessment

Observation starts already with the observation of the execution of the Sport Specific Activities in the Technical Assessment: as described for each of the three-sport specific PCH Tests in the paragraphs 'Test Observation'.

After the Physical and Technical Assessment, the Entry Sport Class will be defined.

During competition, Observation of the Athletes with Tracking code OA (Observation Assessment) continues:

- Classifiers look for the confirmation of their decision concerning the Sport Entry Class with the goal to define the final Sport Class.
- The IPCH Observation Form shall be used for this purpose.
- Classifiers constantly analyze both Arm profile and Trunk profile during the Game.
- Classifiers have the completed Classification Form of the specific athlete available as the basis for the Observation and use the specific Observation Form.

Classifiers observe/analyze:

- a) Shoulder movements: anteflexion, retroflexion, adduction, abduction, endo-rotation, exo-rotation and the strength with which these movements are done.
- b) Elbow movements: Flexion, Extension, Pronation, Supination)
- c) Wrist / Hand movements: Flexion, Extension, Radial Deviation, Ulnar Deviation, Grip: Finger flexion and Thumb opposition
- d) Trunk movements of the Athlete.

All with the aim to confirm the decisions made in the Physical and Technical assessment concerning the Arm joint movements/"movement couples" and Trunk movements as documented on the Classification Form.

Classifiers analyze the above-mentioned joint movements and Trunk movements when looking at the PCH Sport Specific Activities which are:

- a) Ball/stick control,
- b) Hitting Power
- c) Reach.

Classifiers analyze the above-mentioned joint movement couples/Trunk movements in the sport specific activities during full effort of the Athlete.

Classifiers must report notes about the observations on the classification form to enhance transparency of classification and allow better benchmarking.

16 Assessment criteria for the allocation of a Sport Class in PCH

A) Physical Assessment Criteria Arm profiles

4/5 Movement couples

4 kinematic "movement couples" can be recognized in the arm.

Those movement couples work closely together in executing the sport specific activities in PCH.

There are 2 movement couples in the shoulder, 1 in the elbow and 1 in the wrist/hand.

- a) Shoulder: Anteflexion/Abduction – Retroflexion/Adduction (aa/ra)
- b) Shoulder: Exo rotation – Endo rotation (s-e/e)
- c) Elbow: Flexion – Extension (e-f/e)
- d) Wrist: Flexion – Extension (w-f/e)

The pronation and supination of the forearm is the fifth movement couple, but the supination is also done by the biceps which is already considered in the elbow flexion (third couple) and the pronation is also done by the wrist flexor (m. flexor carpi radialis) which is considered already in the wrist flexion (fourth couple).

For that reason, when assessing an athlete with muscle power impairment, the MRC of the pronation and supination is not scored in assessing the arm.

When assessing the ROM (as primary impairment of the athlete) it is, for sure, necessary to assess this fifth movement couple/the pronation and supination scores while limitation of these movements have impact on the proper execution of the sport specific activities.

For the same reason as described for pronation and supination, the wrist radial and ulnar deviation is assessed in the playing arm of athletes with ROM impairment (like athletes with Osteogenesis Imperfecta), but not MRC measured in athletes with a muscle power impairment: the radial and ulnar deviation strength is already part of the before assessed strength of the wrist flexion and wrist extension.

Sub-Ap scores

Those 4 (muscle power impairment) or 5 (ROM impairment) movement couples give 4 or 5 sub-Ap scores, to be filled in the 4/5 boxes on the IPCH Classification Form.

Specification for Athletes with Muscle Power impairment:

Rule 1: Unopposed muscle activity

Active movement in a joint can only be possible when the agonist and antagonist are both working.

When the agonist is MRC 2 or 3, but the antagonist is MRC 1, this is called “unopposed movement”.

In this case the athlete can make just one movement in that joint (examples: elbow flexion but no active elbow extension or wrist flexion but no wrist extension) and the athlete has to rely on the gravity, compensation movements and/or chair movements to bring the arm segment back into position to make the next move.

- When the athlete has ‘opposed’ muscle groups to work with this means that both agonist and antagonist have at least MRC 2.
- With opposed muscle groups working, the VOA (Volume of Action) will increase and the movements will be much more efficient, independent from gravity, compensation movements and/or chair maneuvering to reposition the arm segment.

Scoring:

- When movement couple MRC scores are equal the Classifier shall fill the Classification form with that score in the designated boxes.
Example: movement couple one: aa/ra: scores MRC 2/2. Put in box: (sub-Ap score) '2'
- When one of the MRC strength scores from the movement couple is 1, then always give the (sub-Ap score) '1'.
Example: Example: scores 3/1: is scored as (sub-Ap score) '1'
- When the difference in MRC is 1 in a movement couple, for example 3/2, then take the lowest score: (sub-Ap score) '2' in this example.
- Rationale: the efficiency of an opposed movement cannot be higher than the “weakest link”.
- When the difference in MRC is 2 in a movement couple, for example 4/2, then take the average score: (sub-Ap score) '3' in this example. This will seldom occur as the movement with MRC 2 defines the total movement, the opposite movement will seldom be strong (MRC 4).

In order to define the final Ap score in the Physical Assessment consider the result of the 4 sub-Ap scores.

Rule 2: First movement couple leads

The shoulder anteflexion/abduction (called 'scaption' when the arm is elevated diagonally) is crucial for the effective use of all (other) more distal arm movements.

Absence or weakness of power in this/these movement(s) will cause severe activity limitation in executing the sport specific activities by limiting the VOA (Volume of Action) and reducing the efficiency of these sport specific activities.

Even when the other sub-Ap scores are scored higher, the shoulder anteflexion/abduction-retroflexion/adduction (aa/ra) strength- score will determine the maximal final Ap for the athletes with impaired muscle power.

- When the first movement couple aa/ra is 1: the athlete will receive as maximal final Ap 1.5. In this case the upper arm is only passively hanging in the shoulder joint or can only move till 45 degrees, not higher.
- When the first movement couple aa/ra is 2: the athlete will receive the maximal final Ap 2.5. In this case the upper arm cannot be placed in full available range anteflexion /abduction (scored as MRC 2) and the strength of the Deltoid muscle is scored as MRC 2. (Lower than 2.5 is still possible: a movement couple score 2,1,1,2 can be given the 1.5 score).
- When the first movement couple aa/ra is 3: the athlete will receive the maximal final Ap 3.5. In this case the upper arm does only have the strength of MRC 3 in the anteflexion/abduction and/or comparable weakness in the adduction/retroflexion movements (clavicular pectoralis/sternal pectoralis, latissimus), and the arm can never be scored higher than final Ap score 3.5 even when the other sub-Ap scores, more distally, are higher.

Rule 3: Serratus

What is the difference between Ap 1.0 and 1.5? Between Ap 2.0 and 2.5? And between Ap 3.0 and 3.5 for those athletes with impaired muscle power?

The Serratus score in combination with the total of the 4 movement couple scores will be decisive to determine between the lower and higher Arm profile scores.

The Serratus anterior muscle is often impaired when an athlete has a neuro-muscular disease, the Serratus can be impaired also in the case of athletes with severe kyphoscoliosis. Weakness of the Serratus will limit the protraction/abduction and upward rotation of the scapula, which is a necessary motion of the scapula to raise the arm (anteflexion/abduction).

'Winging' (also called 'scapula alata') of the scapula can often be seen during the assessment: the medial border of the scapula, on the back of the trunk, moves away from the rib cage. That scapula weakness, causing limitation in arm elevation, not only leads to limited arm reach, limiting the horizontal Volume Of Action (VOA), but also creates an unstable shoulder while the upper arm (humerus) does not have a 'fixed' base from which it can initiate powerful movements.

This will be reflected in weaker/ less efficient arm movements during the Technical assessment/Observational assessment in the stick. handling/pushing/hitting; also 'the fight for the ball' will be lost more easily due to that unstable shoulder.

For this reason, the Serratus strength is very important for the (effective) arm movements of the PCH athlete. With this in mind it is easier to distinguish between 2 and 2.5, 3.0 and 3.5.

For study on the Serratus:

'Daniels & Worthingham' - Muscle Testing, in order to be able to differentiate between the Serratus scores.

<https://www.youtube.com/watch?v=-tlcuAKTr1Y>

<https://www.youtube.com/watch?v=e8T7wlSqzxo>.

Final Ap 1.0 or 1.5:

The Serratus score cannot exceed the shoulder anteflexion score. Therefore, for athletes with an Ap 1.0/1.5 profile, the Serratus will also be scored as MRC 1—matching the anteflexion/abduction score—and will not be used to distinguish between a final Ap score of 1.0 or 1.5.

The sub-Ap scores, taken together, determine whether an athlete receives a final Ap score of 1.0 or 1.5.

For example:

- An athlete with sub-Ap scores of '1-1-1-2' would still be classified as Ap 1.0, as the wrist movement (movement couple 4) remains so limited that a final score of 1.0 is justified.
- In contrast, an athlete with scores of '1-1-1-3' may demonstrate a noticeably better and faster horizontal VOA (Volume of Action) during the Technical Assessment. In such cases, the overall function is sufficient to assign a final Ap score of 1.5.
- Similarly, a profile of '1-1-2-2' will also result in a 1.5 classification.

While it is not scientifically precise, classifiers may find it helpful, in some cases, to consider the average of the four sub-scores as a rough indicator—for example: $1+1+2+2 = 6$; $6 \div 4 = 1.5$. However, it is important to remember that the *weighting* of the different movement couples—based on how they impact sport-specific activities—is far more relevant than a purely mathematical average. Classification should always prioritize functional impact over numerical calculation.

Final Ap 2.0 or 2.5:

When the aa/ra score (first movement couple) is '2' and the Serratus score is 0 or 1, the athlete will receive a maximum classification of Ap 2.0, not Ap 2.5.

A non-functioning Serratus results in a significantly unstable shoulder joint, which restricts the ability to lift the upper arm beyond 60 degrees. This severely compromises:

1. Reaching capability,
2. Horizontal Volume of Action (VOA), and
3. The power and efficiency of more distal arm movements.

Example:

An athlete with a movement couple profile of '2-2-3-4' and a Serratus score of 0 or 1 would be classified as Ap 2.0, despite higher scores in the distal joints (elbow MRC 3, wrist MRC 4). The lack of Serratus function critically limits overall upper limb performance, justifying the lower classification.

Final 3.0 or 3.5:

When the aa/ra score (first movement couple) is '3' and the Serratus score is '2', the athlete will receive a maximum Ap 3.0 classification, not Ap 3.5.

A Deltoid muscle graded MRC 3 allows the athlete to lift the arm against gravity within the available range (though unable to resist external force, as tested repeatedly in the scaption position). However, a weak Serratus (MRC 2) may hinder the ability to fully elevate the arm, as the Serratus is essential for the final phase of arm elevation.

This does not imply that the arm score is below 3. As long as the Deltoid consistently tests at MRC 3 in the scaption position, the first movement couple will still be scored as 3. However, the presence of a Serratus score of 2 limits the possibility of reaching the 3.5 profile.

A Serratus scored as 2 still represents functional weakness and results in the same limitations previously mentioned:

1. An unstable shoulder,
2. Reduced efficiency and power of arm movements,
3. Inability to effectively counteract the reaction forces generated during movement.

Example: An athlete with a Deltoid MRC 3 and a movement couple profile of '3-4-4-4', combined with a Serratus score of 2, would be classified as Ap 3.0, despite higher distal arm scores.

If the Serratus is scored as 3, the same athlete—with a Deltoid MRC 3 and a first movement couple of 3—may be eligible for an Ap 3.5 profile, depending on the other sub-Ap scores.

In cases of athletes with Strength Impairment, where the Deltoid is graded MRC 4 but the first movement couple is scored as 3 due to adduction/retroflexion being limited to MRC 3, the final Ap score may still be 3.5 instead of 3.0, depending on the functional outcome of the full movement assessment. In such situations, the Technical Assessment should guide the final decision.

Specification for Athletes with ROM impairment:

Assessment Approach: For athletes with ROM impairments, sub-Ap scores should reflect the average of the values observed in each movement couple.

Example 1 – Movement Couple 1 (aa/ra):

Active Anteflexion (aa): Degrees 25-50% (2)

Retroflexion (ra): Degrees 51-75% (3)

Sub-Ap Score: $(2 + 3) \div 2 = 2.5$

Example 2 – Movement Couple 2 (s-e/e):

Supination: Degrees 0-25% (1)

Elbow Extension: Degrees 51-75% (3)

Sub-Ap Score: $(1 + 3) \div 2 = 2$

Final Ap Score Determination:

For ROM-impaired athletes, the final Ap score is calculated by averaging the five sub-Ap scores—including the pro-/supination movement couple. Remember that classification should always prioritize functional impact over numerical calculation.

Example:

An athlete with the profile '3-3-4-4-4' will have an average of $(3 + 3 + 4 + 4 + 4) \div 5 = 3.6$, rounded to Ap 3.5.

Specification for Athletes with Limb deficiency/Amputation/Limb Length Difference

The first movement couple (shoulder anteflexion/abduction) remains especially important, as it reflects shoulder strength and function, which are crucial for generating hitting power.

It is essential to assess the functional impact of the residual limb length on the three sport-specific activities in Powerchair Hockey: Hitting, Ball Handling and Reaching.

Final Ap Score Determination

The Technical Assessment should be the decisive factor in determining the final Arm Profile (Ap) score.

Classifiers must avoid letting the athlete's skill level or training influence the decision—classification is based solely on underlying physical impairment, not on acquired ability or practice.

Current classification practice:

- Complete Hand amputation / handstick fixated to forearm: Ap 3.5
- Through elbow amputation / handstick fixated to upper arm: Ap 3.0

Specification for Athletes with Short Stature¹⁸

To ensure an objective and consistent approach when classifying athletes with short stature, the following three-step process should be followed:

Step 1: Evaluate Range of Motion (ROM)

Begin with a full assessment of the athlete's Range of Motion (ROM) to establish a preliminary Arm Profile (Ap). This initial evaluation serves as the baseline for further analysis.

Step 2: Measure Total Arm Length

Men Athletes

Based on data from 545 men without disability, the shortest observed normal arm length (including fist) was 56 cm, composed of:

- Upper arm: 27 cm
- Forearm: 21 cm
- Mid-fist: 8 cm
- Total: 56 cm

Classification Criteria for Men:

- Criterion 1 (Moderate Reduction):
If total arm length is 45 cm or less (20% shorter than the norm), the arm is considered impaired. Apply a 0.5-point deduction from the preliminary Ap.
- Criterion 2 (Severe Reduction):
If total arm length is 34 cm or less (40% shorter), apply a 1.0-point deduction from the preliminary Ap.

Female Athletes

Based on data from 502 women men without disability, the shortest normal arm length (including fist) was 51 cm, composed of:

- Upper arm: 25 cm
- Forearm: 19 cm
- Mid-fist: 7 cm
- Total: 51 cm

Classification Criteria for Women:

- Criterion 1 (Moderate Reduction):
If total arm length is 41 cm or less (20% shorter than the norm), apply a

¹⁸ Canda, A. (2009). Stature Estimation from Body Segment Length in Young Adults – Application to People with Physical Disabilities. *Journal of Physiological Anthropology*.

0.5-point deduction from the preliminary Ap.

- Criterion 2 (Severe Reduction):
If total arm length is 31 cm or less (40% shorter), apply a 1.0-point deduction from the preliminary Ap.

Step 3: Assess Grip Strength

Use the Medical Research Council (MRC) scale to evaluate grip strength.

Most athletes with short stature will present with MRC grade 4.

If grip strength is reduced to MRC grade 3, this must be taken into account when determining the final Ap score.

B) Technical Assessment Arm Profile

Following the Physical Assessment, classifiers will have established a baseline Ap score based on objective muscle testing and range of motion. However, the evaluation continues with the Technical Assessment, where the athlete's motor execution of sport-specific activities is observed and analyzed.

The Technical Assessment serves to verify whether the observed execution of tasks aligns with the previously determined Physical Assessment outcomes. It may confirm or, in specific justified cases, adjust the Ap score.

Important: Analyze the Arm Profile independently of Trunk function.

While trunk activity may enhance arm performance, it is considered separately in the Trunk Profile (Tp) score and should not influence the Ap score.

Test 1. Hitting Power

Arm Profile 1

- Most athletes use a T-stick; however, some may still use a Handstick.
- When using a Handstick, the action is often more of a pushing motion than a true hitting motion.
- There is no vertical Volume of Action (VOA) generated by the arm itself.
- Any observed elevation of the stick blade is usually the result of trunk movement or powerchair rotation, not active arm movement.

Arm Profile 2

- The vertical VOA using the Handstick is generally limited to below seat height.
- Hitting actions are still primarily pushing movements.

- Some athletes attempt to increase height using leverage techniques (e.g., resting the arm on a leg or chair component). These compensatory strategies are not considered in evaluating hitting power, as they do not result from active muscle function.

Arm Profile 3

- There is a noticeable vertical VOA, extending above seat height, allowing for actual hitting movements.
- However, due to strength limitations (e.g., MRC 3), the hitting power is reduced and lacks explosiveness.
- Movements are often generated by the forearm, with limited contribution from the shoulder or entire arm.

Arm Profile 4

- The athlete can use the stick blade throughout the full vertical space.
- Strength is not functionally limited, enabling explosive hitting power.
- Movements are typically initiated from the shoulder, involving the entire arm, unlike Ap 3 where movements are more elbow-initiated.

Test 2. Ball Handling / Stick-control

Arm Profile 1

- Transitions from forehand to backhand and vice versa (essential during slalom with the ball) are performed with the arm hanging from the shoulder, without active lifting of the hand and stick.
- Due to the absence of vertical Volume of Action (VOA), these transitions are executed slowly and are time-consuming.

Arm Profile 2

- Active elbow flexion is observed, allowing the player to lift the hand with the stick.
- This position enables a combination of shoulder endo/exo (internal/external) rotation with forearm pro-/supination, improving control.
- Transitions between forehand and backhand are smoother and quicker compared to Profile 1.

Arm Profile 3

- Transitions are executed with lifting of the upper arm and elbow, providing enhanced control of the stick blade.
- Allows for quicker and more fluid transitions during slalom, especially when driving at higher speeds.

Arm Profile 4

- No limitations observed.
- Forehand and backhand transitions are executed quickly and efficiently, with full flexion of the elbow and anteflexion/abduction of the shoulder.
- No restrictions in shoulder, elbow, or wrist movements.

Summary:

Powerchair Hockey Classification includes half-point profiles for both the Trunk (Tp) and Arm (Ap).

Arm Profile Determination

For strength-impaired athletes, the following 4 movement couples are assessed:

1. Shoulder anteflexion/abduction – retroflexion/adduction
2. Shoulder external rotation – internal rotation
3. Elbow flexion – extension
4. Wrist flexion – extension

For ROM-impaired athletes, a 5th movement couple is added:

5. Forearm pronation – supination

These 4 or 5 movement couples yield sub-Ap scores, which together define the final Ap score during the Physical Assessment.

Rules for Scoring Athletes with Impaired Muscle Power

- Rule 1:
If a movement in a couple is unopposed, the sub-Ap score for that couple is '1'.
- Rule 2:
The first movement couple is decisive:
 - Score of 1 → maximal final Ap 1.5
 - Score of 2 → maximal final Ap 2.5
 - Score of 3 → maximal final Ap 3.5
- Rule 3:
The Serratus anterior muscle is critical in determining profiles between:
 - 2.0 and 2.5:
 - Serratus MRC 0/1 → final Ap is max. 2.0
 - Serratus MRC 2 → final Ap can be 2.5, depending on other sub-Ap scores
 - 3.0 and 3.5:
 - Deltoid MRC 3 + Serratus MRC 2 → max Ap 3.0
 - Deltoid MRC 3 + Serratus MRC 3 → Ap can be 3.5, based on overall

profile

Rules for Scoring ROM-Impaired Athletes

For athletes with a Range of Motion Impairment, the average of the 5 sub-Ap scores determines the final Ap score.

Always exclude the impact of skill or training—classification is based on impairment, not performance

Arm Profile	Muscle Power	Range of Motion	Limb deficiency/ Amputation/Limb Length Difference	Short Stature	Coordination
	Instrument: MRC	Instrument: measuring degrees	Instrument: - measuring length & - assessment impact l-deficiency on hitting, handling and reaching	Instrument: measuring length & ROM in degrees	Instrument: RMT (repetitive movement tests) joints, ASAS (Austr. spasticity assessment scale)
Ap 4.0	MRC 4/5 4 movement couples indicate 4	ROM 76%-100% 5 movement couples indicate 4.0	No impact on Ball Handling & Hitting	Arm length > 45 cm (man), > 41 (fem)	RMT: impairment fingers, wrist Indication: No catch or ASAS 1 catch
Ap 3.5	Mov. couple aa/ra = 3 Other couples indicate > 3.0	5 movement couples indicate ROM inbetween 3.0 and 4.0	In-between Ap 3.0 and Ap 4.0 Amputation: complete hand	Arm length ≤ 45/41 and ROM 3.5 ó:	RMT: impairment fingers, wrist, elbow, shoulder Indication: ASAS 2 biceps ór triceps
Ap 3.0	MRC 3 Mov. couple aa/ra = 3 All couples indicate 3.0 unless Serratus max. 2	ROM 51%-75% 5 movement couples indicate 3.0	Impact on Ball Handling Amputation: forearm (through the elbow).	Arm length ≤ 45/41 or 4.0 – 1.0 (34/31 cm) and ROM 3.5	RMT: impairment fingers, wrist, elbow, shoulder Indication: ASAS 2 catch biceps ánd triceps
Ap 2.5	Mov. couple aa/ra = 2 All couples indicate > 2.0, Serratus 2	5 movement couples indicate ROM inbetween 2.0 and 3.0	In-between Ap 2.0 and Ap 3.0	Arm length ≤ 45/41 or 3.5 – 1.0 (34/31) and ROM 3.0	RMT: imp. fingers, wrist, elbow, shoulder Indication: ASAS 3 biceps ór triceps

Ap 2.0	MRC 2 Mov. couple aa/ra = 2 All couples indicate 2.0 ó Serr. 0/1	ROM 26%-50% 5 movement couples indicate 2.0	Impact on Ball Handling & Hitting	Arm Length 1.0 (34/31), or 2.5 - 0.5 (45/41 cm) and ROM 3.0	RMT: impairment fingers, wrist, elbow, shoulder Indication: ASAS 3 catch biceps and triceps
Ap 1.5	Mov. couple aa/ra = 1 other couples indicate 1.5	5 movement couples indicate ROM inbetween 1.0 and 2.0	In-between Ap 1.0 and Ap 2.0	Arm length and ROM 2.5 - 1.0 (34/31) or 2.0 - 0.5 (45/41)	RMT: imp. fingers, wrist, elbow, shoulder Indication: ASAS 4 biceps ór triceps
Ap 1.0	MRC 0/1 Mov. couple aa/ra = 1 Other couples indicate 1 (óne can be 2)	ROM 0%-25% 5 movement couples indicate 1.0	Athlete uses T-stick based on not available mot. funct.	Arm length and ROM 2.0 - 1.0 or 1.5 - 0.5	RMT: impairment fingers, wrist, elbow, shoulder Indication: ASAS 4 catch biceps and triceps

05. - 1.0 Distinction

Athletes classified with an Arm Profile (Ap) of 1.0, **independently from the impairment the athlete is tested for**, may undergo further differentiation into either a 0.5 or 1.0 class profile. In most cases, only athletes without any trunk or head function will qualify for the 0.5 class, although this is not an absolute rule.

This differentiation is detailed in art 18.

C) Physical Assessment Criteria Trunk profiles

Normally the trunk performs six primary movements:

- 1) Forward flexion (from a vertical position)
- 2) Backward extension (from a vertical position)
- 3) Rotation to the left side
- 4) Rotation to the right side
- 5) Lateral flexion to the left side
- 6) Lateral flexion to the right side

Due to the structural and functional demands of Powerchair Hockey, only four trunk movements are considered relevant for assessment:

- 1) Forward Flexion (FF)
- 2) Rotation to the Left (RL)
- 3) Rotation to the Right (RR)
- 4) Lateral Flexion to the Stick Side (LF-ss)

Important Notes:

- Trunk flexion forward and Trunk Extension - Backward extension are assessed together.
- Lateral flexion to the joystick side is also excluded because the arm is generally supported by the armrest to operate the joystick. As a result, lateral flexion in that direction is mechanically limited and functionally irrelevant.
- Movements to the joystick side typically involve a combination of forward flexion and rotation, with passive leaning—not isolated lateral flexion.

The primary instrument for assessment is the TIC – Trunk Impairment Classification system, with PCH-specific adaptations for movement thresholds and scoring. The original 45° cut-off for FF in the TIC has been adjusted to 30° for PCH.

Movement	Threshold	Interpretation
Forward Flexion (FF)	$\geq 30^\circ$	Succeed if 30° or more; fail if $< 30^\circ$
Rotation Left (RL)	$\geq 30^\circ$	Succeed if 30° or more; fail if $< 30^\circ$
Rotation Right (RR)	$\geq 30^\circ$	Succeed if 30° or more; fail if $< 30^\circ$
Lateral Flexion (LF-ss)	Approx. 15° (sternal notch aligns verticall y with ASIS)	Succeed if met; fail if not

This change was based on research findings showing that 30° forward flexion already significantly improves the player's functional reaching capacity.

Clarification on Lateral Flexion (LF-ss)

A trunk length of 40 cm (measured from L5 to the sternal notch) corresponds to a 15° lateral flexion when the sternal notch aligns vertically with the ASIS.

Although Kapanji's anatomical data supports using 30° as a benchmark for trunk movements involving thoracic rotation, the 15° criteria (from Altmann) is preferred for classification purposes due to practicality and consistency across athletes.

This benchmark makes the 1.0 trunk score more accessible when LF-ss and two other movements meet criteria.

Tp 0.0 (No Effective Trunk Function)

- Zero active trunk movements meet the criteria listed above.
- If any movement is present, it remains below the threshold: $<30^\circ$ for FF, RL, RR; $<15^\circ$ for LF-SS.
- The player lacks sufficient trunk control to resist the rotational or deceleration forces of the powerchair during gameplay.

Tp 0.5 (Limited Trunk Function)

One or two active trunk movements (out of the four) meet or exceed the specified criteria.

Tp 1.0 (Functional Trunk Control)

Three or all four active trunk movements meet or exceed the criteria.

D) Technical Assessment Criteria Trunk profiles

Instrument Used: *T/Css* (Trunk Impairment Classification – sport-specific).
Athletes are assessed in their own powerchair, reflecting realistic in-game conditions.

Preferred Movement Sequence in PCH

1. Forward Flexion (FF)

Aligns with visual direction and forward driving.

Easier to perform due to:

- Head-trunk alignment.
- Muscle patterning in common diagnoses (e.g., SCI, polio).
- Ability to assist with the joystick arm.

2. Rotations (RL, RR)

Easier than lateral flexion because trunk mass remains within the vertical axis.

Less gravitational resistance on return.

3. Lateral Flexion to Stick Side (LF-SS)

Most demanding movement.

Moves trunk mass out of the vertical column—requires significant side muscle strength.

Often avoided unless rotation is not possible or time-critical.

Assessment Criteria for Trunk Movements

Criterium FF:

30 degrees: athlete may use strength Joystick-arm on armrest (because this is the realistic sport specific situation). The 30 criterium can be 30 degrees anywhere in the range of zero (vertical trunk position) to 90 degrees forward. The stick-arm is placed forward.

Criterium Rl: 30 degrees: rotation in powerchair to the left side with stick in hand and trunk away from the backrest/not contacting the backrest. When the strength of the legs is used for the Trunk rotation, this is allowed while this is the actual realistic sport specific situation.

Criterium Rr: 30 degrees: rotation in powerchair to the right side with stick in hand and trunk away from the backrest/not contacting the backrest. When the strength of the legs is used for the Trunk rotation, this is allowed while this is the actual realistic sport specific situation.

Criterium Lf-ss: 15 degrees = sternal notch at least above the ASIS and actively come back. Player reaches sideways to the stickside without 'hanging' with the side of the trunk on the armrest. Joystick-arm with hand still on Joystick.

Look for the quality of the return movement when the athlete is doing 5 times the specific movement (FF, Rl, Rr and Lf-ss).

Preferred sequence Trunk movements

The preferred sequence of the Trunk movement repertoire of the PCH player is:

First the FF: while this movement is in line with

- a) the look/visual direction (no head rotation needed),
- b) forward driving with powerchair,
- c) muscle innervation (when SCI, spina bifida, polio),
- d) use of Joystick arm/hand to support the FF movement in the return movement
- e) actions which are needed not in front of the powerchair but more to the side, will first be done by rotating the powerchair after which action again FF is the most appropriate movement for reaching.

Second the rotations:

the 60 % weight (of the total body mass) of the trunk + head stays in the vertical column when rotating on the vertical rotation axis, which is easier compared with movements where the trunk comes out of this vertical column with the result that the 85 gravity does play a role and anti-gravity muscle action is needed for the return movement.

Only third:

Lf-ss, which is the most difficult movement to make especially for the athlete with strength impairment: the trunk plus head (60% of total body weight) comes out of the vertical column which means that the gravity is working on the trunk making the return movement only possible when sufficient trunk muscle power on the side is available. The player will, if possible, first rotate the chair, after which the needed action is FF. Only when this is not possible or there is no time to rotate the chair, the lateral action will be chosen.

Common Assessment Pitfall: Scoliosis Compensation

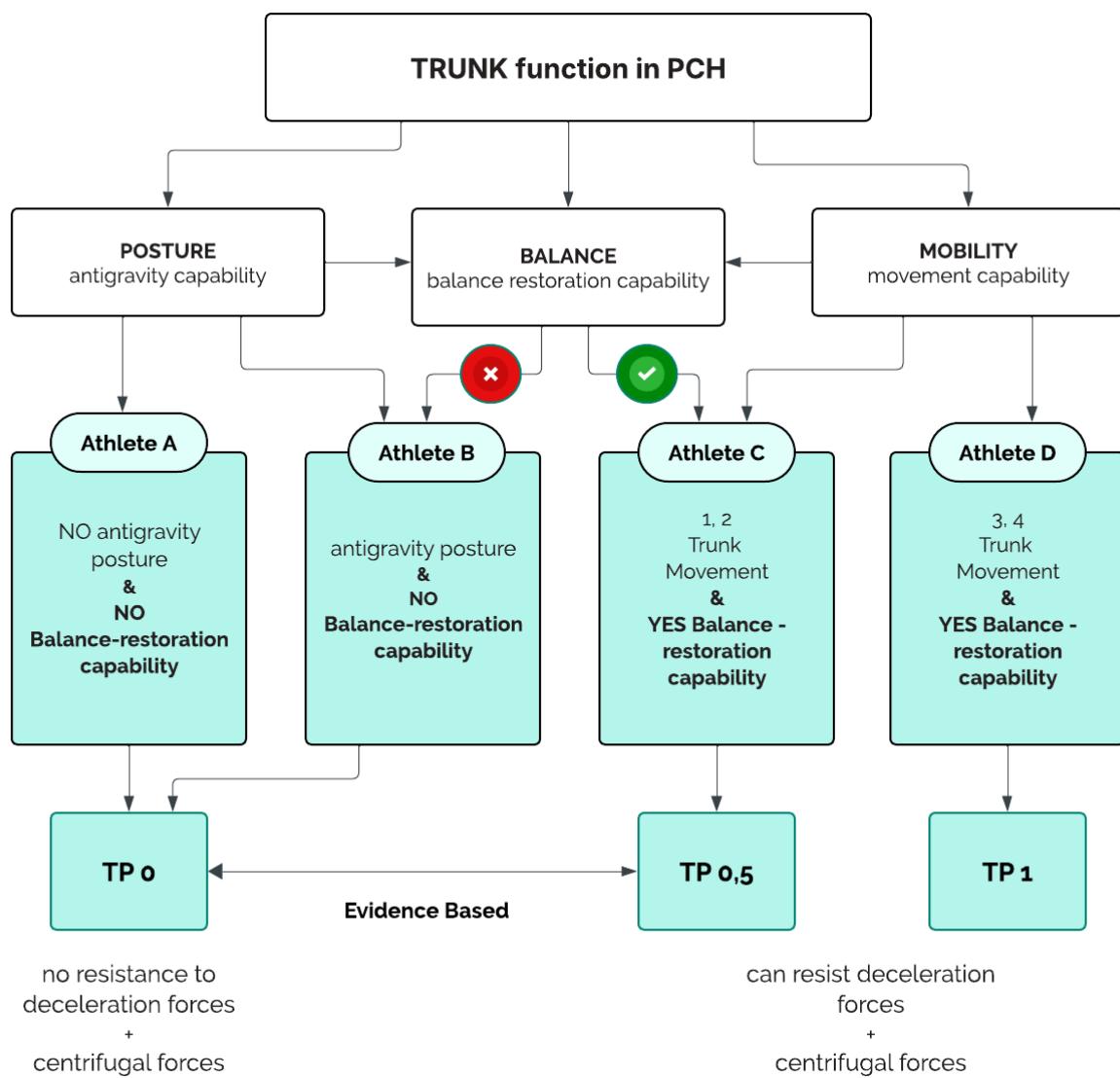
Athletes with severe scoliosis may show visually impressive compensatory movements.

However, they often lack true active rotation and lateral flexion to at least one side. These athletes typically do not meet criteria for two or more of the trunk movements. Therefore, they should receive Tp 0.0 or Tp 0.5, not Tp 1.0.

Physical Assessment (PA) vs. Technical Assessment (TA)

In cases of discrepancy between PA and TA outcomes:

- The TA result is decisive.
- TA reflects sport-specific performance under realistic conditions.
- The athlete must perform all movements with full effort, independent of skill level, training, or equipment used.



Kinematic analysis Trunk

Kees van Breukelen, MSC

I. A. Kapandji - The Physiology Of The Joints, Volume 3 The Trunk and the Vertebral Column.
2nd edition Philadelphia PA, Churchill Livingstone; 1984

	Flexion*	Extension*	Rotation 1s*	Lateral flex 1s*
T1	2.5	1.5	4	2
T2	2.5 / 5	1.5 / 3	4 / 8	2 / 4
T3	2.5 / 7.5	1.5 / 4.5	4 / 12	2 / 6
T4	2.5 / 10	1.5 / 6	4 / 16	2 / 8
T5	2.5 / 12.5	1.5 / 7.5	4 / 20	2 / 10
T6	3 / 15.5	2 / 9.5	4 / 24	2 / 12
T7	3 / 18.5	2 / 11.5	4 / 28	2 / 14
T8	3 / 21.5	2 / 13.5	3 / 31	2 / 16
T9	3 / 24.5	2 / 15.5	2 / 33	2 / 18
T10	6 / 30.5	4 / 19.5	1 / 34	2 / 20
T11	7 / 37.5	5 / 24.5	1 / 35	5 / 25
T12	7 / 44.5	5 / 29.5	1 / 36	4 / 29
Thor.	45	30	35	30
L1	7	5	1	8
L2	8 / 15	5 / 10	1 / 2	6 / 14
L3	9 / 24	6 / 16	1 / 3	8 / 22
L4	9 / 33	6 / 22	1 / 4	6 / 28
L5	12 / 45	8 / 30	2 / 6	3 / 31
Lumbar	45	30	5	30
Total	90	60	40	60

scores in degrees

17 Allocation of a Sport Class in PCH

Once both the Physical Assessment (PA) and Technical Assessment (TA) for the Arm Profile and Trunk Profile have been completed using the established criteria, the athlete's Entry-Sport Class can be determined.

Arm and Trunk Profiles

Athletes can be assigned seven different Arm Profiles (Ap) = 1.0, 1.5, 2.0, 2.5, 3.0, 3.5, 4.0
Athletes can be assigned three different Trunk Profiles (Tp) = 0, 0.5, 1.0

The Entry-Sport Class is the sum of the Arm Profile and Trunk Profile (Ap + Tp = Sport Class).

These profiles combine to form nine possible Eligible Sport Classes, as follows:

0.5, 1.0, 1.5, 2.0, 2.5, 3.0, 3.5, 4.0, 4.5

05. - 1.0 Distinction

Athletes classified with an Arm Profile (Ap) of 1.0 may undergo further differentiation into

either a 0.5 or 1.0 class profile. In most cases, only athletes without any trunk or head function will qualify for the 0.5 class, although this is not an absolute rule.

This differentiation is detailed in the art. 18.

Non-Eligible Profile Combination

An athlete with: Arm Profile (Ap) = 4.0 + Trunk Profile (Tp) = 1.0 results in a total score of 5.0, which exceeds the maximum eligible class. This athlete is assigned Class 5.0 NE (Not Eligible) for Powerchair Hockey.

Benchmarking as a Tool in Functional Classification

In cases where classification decisions are not straightforward—particularly when evaluating athletes with coordination impairments (e.g., cerebral palsy) or athletes with complex or mixed impairments—and where standard scoring does not clearly indicate the appropriate class, classifiers can apply the principle of benchmarking to support consistent and evidence-based decision-making..

Benchmarking is a functional comparison method used to evaluate an athlete's performance and motor behavior by referencing the observed capabilities of athletes with well-established and clearly defined classification profiles. It allows classifiers to anchor their decisions in real-world functional performance rather than relying solely on numerical or clinical test outcomes.

When classification outcomes are uncertain, follow these steps:

1. Select Appropriate Reference Profiles

Identify athletes within the classification system who have stable, well-understood class profiles. These reference profiles should represent a typical and consistent presentation of the relevant impairment type(s).

2. Compare Motor Behavior and Functional Output

Assess the athlete's performance in areas such as:

- Control, speed, and quality of movement
- Stability and coordination during technical tasks
- Efficiency and range of movement
- Capacity to perform repeated actions under fatigue
- Responsiveness during dynamic and game-like conditions

3. Evaluate Relative Performance

Ask the key question: *Does the athlete demonstrate a comparable level of functional*

ability to the benchmark athlete(s), or do they significantly underperform or outperform them?

4. Draw Conclusions Based on Functional Fit

If the athlete's performance closely aligns with the benchmark, the same class may be appropriate.

If the athlete outperforms the reference profile, they likely require a classification in a less impaired class.

If the athlete underperforms, a classification in a more impaired class may be more accurate.

5. Best Practices for Classifiers

- Benchmarking should be used in combination with objective scoring, not as a replacement.
- Use video documentation, observational assessments, and standardized test scenarios to support your comparisons.
- Ensure that all benchmarking comparisons are well-documented in the classification form, including the rationale for conclusions drawn.
- Avoid relying on anecdotal examples—use multiple, consistent reference points to ensure validity and fairness.

18 0.5 - 1.0 Distinction

Head rotation determines the athlete's field of vision, which—alongside arm/finger function—affects reaction time in gameplay. Accurate measurement of head movement is crucial for fair classification.

Only athletes classified with an Arm Profile (Ap) of 1.0, independently from the impairment the athlete is tested for, may undergo further differentiation into either a 0.5 or 1.0 class profile.

Step 1: PHC Measurement (Head Rotation Tool)

Tool: A goniometer or a lightweight plastic tool marked at 20° (can be made from 0.5 mm colored plastic) as an alternative.

Instructions:

1. Stand behind the athlete (use a chair if needed for a better top-down view).
2. Place the PHC tool flat on top of the athlete's head.
3. Align the pivot point with the line between the shoulders.
4. Ask the athlete to face forward; align the center of the tool with the nose.
5. Without moving the tool, ask the athlete to rotate their head to one side without leaning on the headrest or on any other support.
6. Observe whether the nose crosses the 20° mark on the tool.
7. Repeat for the other side.

Interpretation:

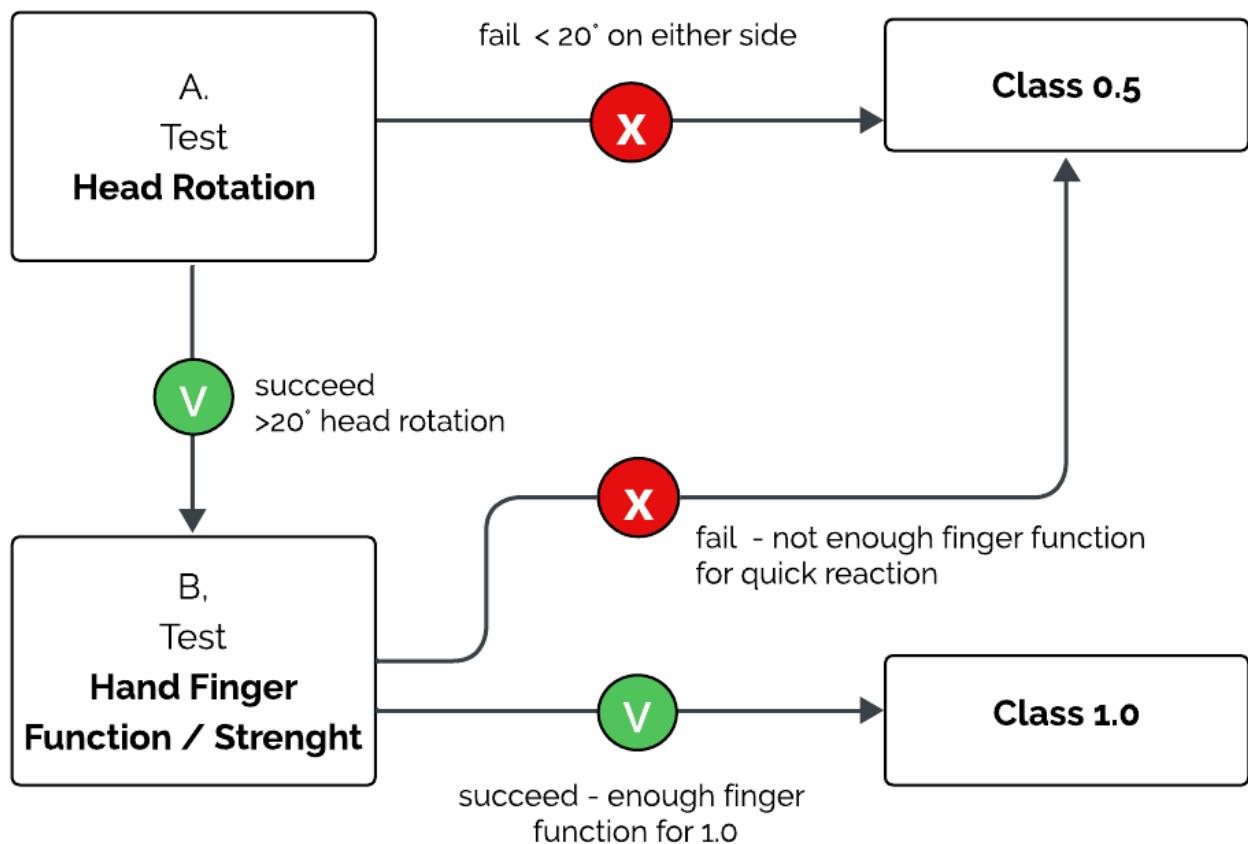
- If the nose does not pass 20° on either side, assign the athlete to Class 0.5.

- If the nose exceeds 20° on at least one side, continue with hand/finger testing.

Step 2: Hand/Finger Function Test

Refer to the additional classification form and flowchart (2021 version):

- Sufficient function → Class 1.0
- Insufficient function → Class 0.5



19 Assessment Criteria in Observational Assessment

The classification of the arm function is based on observable activities that reflect the athlete's range, control, strength, coordination, and effectiveness in performing sport-specific tasks. These activities help determine the level of functional limitation and justify the assigned Arm Profile (Ap) score.

The following descriptions outline key characteristics of the four main Arm Profiles: 1.0, 2.0, 3.0, and 4.0.

Where an athlete exhibits features from two adjacent profiles, an intermediate value may be applied: 1.5, 2.5, or 3.5.

Note:

Trunk function (Tp) may support and enhance arm performance, particularly in terms of balance, reach, and stability. However, classification of the Arm Profile must be assessed independently of any trunk contribution. Consider the arm's activity limitation as if no trunk function were present.

Arm profile 1.0	
<p>Significant activity limitation due to:</p> <ul style="list-style-type: none"> • Loss of muscle power (see below) • Loss of range of movement < 25% • Limb length deficiency causing the athlete to use a T-stick. • Coordination impairment in shoulder, elbow, wrist, and fingers / Indication: ASAS 4 biceps/triceps 	<p>General:</p> <p>A. VOA Horizontal: Limited to: Arm is 'hanging' vertically with extended elbow and can maximum move till 45 degrees. Pro-supination is possible. Flexion or extension elbow/wrist possible: 'unopposed movement couple(s)'.</p> <p>B. VOA Vertical: none</p>
<p>Impaired Muscle Power: No functionality (MRC 0/1) in shoulder anteflexion, abduction/retroflexion, adduction, so no movement in shoulder or maximal elevation/abduction movement till 45 degrees.</p> <p>There can be muscle activity with maximal value MRC 3 in shoulder endo or exorotation, elbow flexion or extension or wrist flexion or extension, but there cannot be antagonistic muscle activity with muscle grade 2 or 3 in those joints: so only 3/1 or 2/1.</p> <p>Shoulder endo/exo rotation 2/2, Elbow flexion/extension 2/2, Wrist flexion/extension 2/2 usually means 1.5 when in combination (when first movement couple is scored as 1).</p>	<p>Sport specific:</p> <p>A. Ball/stick control:</p> <ul style="list-style-type: none"> - <u>Receiving & controlling</u> limited to receiving ball and transition backhand to forehand slow/ time consuming or even not possible and only seen in combination with Tp 0.5/1.0 + rotation chair. - <u>Stickside handling</u>: limited to only stick-side handling and only a small covered area. - <u>Opposite side handling</u>: none <p>B. Pushing / Hitting: limited due to no vertical VOA</p> <ul style="list-style-type: none"> - <u>Forehand</u>: Pushing instead of Hitting, slowly executed and only in one direction possible due to unopposed movement(s). - <u>Backhand</u>: limited to see Forehand

Arm profile 2.0

In relation to a 1.0 arm the 2.0 arm will have either:

- Stronger shoulder joint (MRC 2) enabling them to, actively, move the upper arm.
- ROM: 25-50% in third and fourth movement couple
- A longer limb length (compared with Ap 1) reducing strongly both ball handling and Hitting.
- Coordination impairment: RMT: imp. fingers, wrist, elbow, shoulder. Indication: ASAS 3 catch biceps and triceps

General:

A. VOA Horizontal:

Arm: Upper arm movement with weak/limited excursion: describing 'cone' with shoulder as top cone. 'Opposed movement couples' present, although weak or restricted.

B. VOA Vertical:

up to seat height possible: mostly done by chair rotation in combination with Trunk movement

Sport specific:

A. Ball/stick control:

- Receiving & controlling: limited to combination of endo/exo rotation shoulder with pro/supination elbow: easier ball-control, but still slowly executed due to weakness or with severe restrictions due to ROM impairment.
- Stickside handling: limited to only stick-side handling
- Opposite side handling: none unless done by Trunk rotation/chair rotation

B. Pushing / Hitting:

limited due to no vertical VOA

- Forehand: Pushing not limited to one direction, which means both Forehand and Backhand are possible. Still Pushing instead of Hitting.
- Backhand: see Forehand

Arm profile 3.0

An athlete with a 3.0 arm will commonly have:

- In the case of muscle power impairment, stronger shoulder girdle (max MRC 3). The elbow joint can have some imbalance but can be close to normal strength. The same for the wrist/hand/fingers.
- It should be noted that at this arm value there are athletes that demonstrate minimal activity limitation in the wrist/hand but still shoulder girdle limitation that reduces their potential to utilize their arm/hand in all positions in space (for example by reduced ROM) or do that with less quality (because of that MRC 3).
- ROM: 51-75% in third and fourth movement couple
- A limb length deficit reducing the Ballhandling, but not the Hitting: through elbow amputation with stick fixated to upper arm.
- Coordination impairment: found with repetitive movement tests and indication ASAS Catch 2 in biceps/triceps.

General:

A. VOA Horizontal:

Arm: lifting upper arm possible, but movements preferably with forearm (elbow kept low) when strength impairment or limitation(s) in movement couple(s) when ROM impairment

B. VOA Vertical:

higher than seat height but still limited explosive or limited in ROM

Sport specific:

A. Ball/stick control:

- Receiving & controlling: preference forearm movements. Combination of lifting upper arm + flexion/extension elbow gives easier control, quicker forehand/backhand movements, quicker slalom.
- Stickside handling: possible to outer circles.
- Opposite side handling: yes, but without Trunk rotation limited mostly to inner circles.

B. Pushing / Hitting:

limited due to no vertical VOA

- Forehand: Hitting instead of Pushing but with limitation in shoulder movement couple(s), so with restricted power or ROM.
- Backhand: see Forehand

Arm profile 4.0

<p>At this point moving into the highest point arm capacity, one would expect the following presentations:</p> <ul style="list-style-type: none"> • Full proximal strength shoulder/elbow/wrist. • ROM 76-100% in third and fourth movement couple • Limb length deficit with no restrictions to Receiving/Controlling and Hitting: complete hand amputation with stick fixated to forearm means Ap 3.5 • Coordination impairment: impairment fingers/wrist possible but with no/minimal impact on sport specific activities. No catch or catch 1 found. 	<p>General:</p> <p>A. VOA Horizontal: Arm: shoulder movements not restricted. Complete arm movements without limitation in movement couples</p> <p>B. VOA Vertical: no limitations.</p> <p>Sport specific:</p> <p>A. Ball/stick control:</p> <ul style="list-style-type: none"> - <u>Receiving & controlling</u>: no restriction in receiving / ball control. Quick, efficient receiving/controlling and slalom without limitations - <u>Stickside handling</u>: no limitations. - <u>Opposite side handling</u>: no limitations, but depending on Trunk capacity. <p>B. Pushing / Hitting: limited due to no vertical VOA</p> <ul style="list-style-type: none"> - <u>Forehand</u>: maximal vertical VOA: hard/not limited Hitting possible. Stick blade can be used in the entire vertical space and while the strength or ROM is not limited, the 'Hitting Power' is not limited and can / will be explosive. The movements will be often initiated from the shoulder moving the entire arm and not, like in profile 3, from the elbow. - <u>Backhand</u>: no limitations.
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20 Use of Class points on the Field of Play

All players participate using their assigned sport class, regardless of the equipment used (i.e., T-stick or Handstick).

Each team (5 players on the field) must respect the maximum cumulative point limit as stated in the IPCH Game Rules. This rule ensures functional balance and fairness among teams during competition.

PART C:

Annexes

Annex 1 : IPCH Medical Diagnostic Form



MEDICAL DIAGNOSTIC FORM

To be eligible for International Powerchair Hockey an athlete must have an underlying medical diagnosis (Health Condition) that results in a Permanent and Eligible Impairment.

The measurement of impairment conducted during the classification process must correspond to the diagnosis indicated below. Completed forms and relevant Medical Diagnostic Information must be submitted to IPCH - World Abilitysport or uploaded to the athlete's SMS profile upon registration of the athlete to the WA-SMS. IPCH / Worldability sport holds the right to request further information, if additional information is required. The athlete will not be able to undergo classification, until such time as the requested information is provided. **Please fill in the form electronically.**

Athlete's information:

Surname:			
Name:			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth:	dd/mm/yyyy
NPC/ NF/ Designated Organisation:			SDMS ID:

Medical Information - to be completed in English by a registered Medical Doctor, M.D.

Athlete's Medical Diagnosis (Health Condition)	
Include description of the body parts affected and limitations:	

Primary impairment/s arising from the Medical Diagnosis (Health Condition):	<input type="checkbox"/> Impaired muscle power <input type="checkbox"/> Impaired passive range of motion <input type="checkbox"/> Ataxia <input type="checkbox"/> Athetosis <input type="checkbox"/> Hypertonia <input type="checkbox"/> Leg length difference <input type="checkbox"/> Limb deficiency/loss <input type="checkbox"/> Short stature (height: _____ cm)
Medical condition is:	<input type="checkbox"/> Permanent <input type="checkbox"/> Stable <input type="checkbox"/> Progressing <input type="checkbox"/> Fluctuating
Year of onset: (yyyy)	<input type="checkbox"/> Congenital birth

Diagnostic evidence to be attached:

Evidence to support the above diagnosis MUST be attached in **English** for ALL athletes:

- Medical Diagnostic Report and Physical Examination results (for example ASIA scale for Athletes with Spinal Cord Injury, Ashworth Scale for Athletes with Cerebral Palsy, X-rays for Athletes with dysmelia, photo for Athletes with amputation)
- Report (s) from additional diagnostic testing (for example, EMG, MRI, CT, X-ray).

Treatment History:
Regular Medication – List dosage and reason:



Presence of additional medical conditions/ diagnoses:

<input type="checkbox"/> Vision Impairment	<input type="checkbox"/> Impaired respiratory function	<input type="checkbox"/> Joint Hypermobility instability
<input type="checkbox"/> Impaired metabolic function	<input type="checkbox"/> Intellectual Impairment	<input type="checkbox"/> Impaired muscle endurance
<input type="checkbox"/> Hearing Impairment	<input type="checkbox"/> Psychological diagnoses	<input type="checkbox"/> Pain
<input type="checkbox"/> Impaired cardiovascular functions (e.g. Chronic fatigue)		
<input type="checkbox"/> Other - <i>Describe</i>		

I confirm that the above information is accurate.

Doctors name:

Medical Specialty:

Registration Number:

Address:

City:

Country:

Phone:

E-mail:

Signature:

Date:

Annex 2 : IPCH Consent Form



INTERNATIONAL POWERCHAIR HOCKEY
Sport Section of the World Abilitysport
www.powerchairhockey.org
office@powerchairhockey.org



Classification Consent Form

I, undersigned, (name and surname) _____

(nation) _____ date of birth _____

will undergo the classification process, following the
IPCH Classification Articles as written below.

Signature Athlete: _____ Date : _____

In case the athlete has the age <18 signature of parent / guardian:

Name and Surname of the guardian _____

Date : _____ Signature _____

This agreement includes:

- The willingness to undergo a complete Classification Process, including all components as required by the IPCH and to take part co-operating fully with the classifiers and give maximal effort during all tests.
- Acknowledgement that classifiers are not held liable for any pain or suffering experienced during the evaluation.
- Agreement to allow photographs and/or videotaping for educational purposes.

Classifiers will test the playing arm: it is not allowed to change the playing arm during the competition

Misconduct during Evaluation:

- Failure to attend an Evaluation session.
- A Classification Panel, in consultation with the Chief Classifier, may suspend an Evaluation Session if it cannot allocate a Sport Class to the Athlete: (1) failure on the part of the Athlete, (2) a failure to provide any medical information, (3) use (or non-use) of any medication, (4) a Health Condition that may limit or prohibit an Evaluation Session, (5) unable to communicate effectively, (6) refuses or is unable to comply with any reasonable instructions, (7) the Athlete's representation of his or her abilities is inconsistent.
- If an Evaluation Session is suspended by a Classification Panel, the Classification Panel may designate the Athlete as Classification Not Completed (CNC).

Intentional Misrepresentation:

- It is a disciplinary offence for an Athlete to intentionally misrepresent his or her skills and/or abilities and/or the degree or nature of Eligible Impairment during Athlete Evaluation and/or at any other point after the allocation of a Sport Class.
- Consequences: (1) disqualification from all events, (2) being allocated with Sport Class Not Eligible (NE) and designated a Review with Fixed Review Date (FRD) Sport Class Status for a specified period of time ranging from 1 to 4 years, (3) Misrepresentation on more than one occasion will be allocated Sport Class Not Eligible with Fixed Review Date Status for a period of time from four years to life.

Annex 3 : IPCH Classification Form

IPCH Classification Form



Name (last)			Country		
Name (first)			Team	Nr	
Date of birth			Experience since		
Diagnosis			Onset disability		
Prior PCH class			Playing (arm)	Left / Right	T-stick
Playing Arm (Impact) Impairment Measure					
A) Physical Assessment					
Joint	Score	Score			
	MRC/degrees	sub Ap scores from movement couples			
Shoulder					
anteflexion/abd 180					
retroflexion 60 / add					
serratus mrc					
exorotation 90					
endorotation 70					
Elbow					
flexion 150					
extension 180					
supination 86					
pronation 86					
Wrist/Hand					
flexion 80					
extension 70					
radial dev. 20					
ulnar dev. 30					
fingerflexion					
thumb opp.					
4 Mov. couples 5 Mov. couples					
MRC	ROM				
Examples: 3/1=1*	3/1=2				
3/2=2	3/2=2.5				
4/2=3	4/2=3				
* 'unopposed' movement					
Final Ap score Phys. Ass.=					
Arm profile	Strength MRC	ROM Degrees	AMP. Length &	COÖRD. Joint	
Ap 4	4/5	75%-100%		F,W + ASAS 1	
Ap 3	3	50%-75%	Impact on	F,W,E,S + ASAS 2 b/tr	
Ap 2	2	25%-50%	Hitting	F,W,E,S + ASAS 3 b/tr	
Ap 1	0/1	0%-25%	Handling	F,W,E,S + ASAS 4 b/tr	
B) Technical Assessment					
Score					
• Test 1: Hitting (pushing/passing)					
• Test 2: Ball-handling Stick-control					
Final Ap score TA					
Trunk (Impact) Impairment Measure					
A) Physical Assessment					
<input type="checkbox"/> Athlete Trunk type A,B = 0 <input type="checkbox"/> Athlete Trunk type C = 0.5 <input type="checkbox"/> Athlete Trunk type D = 1.0					
B) Technical Assessment					
• Test 3: Reaching:					
Athlete Trunk type: <input type="checkbox"/> A / <input type="checkbox"/> B / <input type="checkbox"/> C / <input type="checkbox"/> D					
Impairment joystick arm limits reaching? <input type="checkbox"/> Yes/No					
Final Tp score (after PA + TA)					
Additional Information Examined in playing chair? <input type="checkbox"/> Yes/No Headstrap <input type="checkbox"/> Cheststrap <input type="checkbox"/> Belly Binder <input type="checkbox"/> Hip/pelvic belt <input type="checkbox"/> Knee strap <input type="checkbox"/> Foot strap <input type="checkbox"/> Spinal deformity Contractures Surgery Spasticity Ability to stand Ability to ambulate					
Ap <input type="checkbox"/> + Tp <input type="checkbox"/> = Class <input type="checkbox"/> Status <input type="checkbox"/>					
T-stick (0.5 or 1.0) Class <input type="checkbox"/> Status <input type="checkbox"/>					
Classification Details					
date class status					
Entry sportclass + Athlete notified of decision <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Final sportclass determined <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Tournament Location / date <input type="checkbox"/>					
Classifiers <input type="checkbox"/>					
Volume Of Action					
draw stick draw stickprint 					

Annex 4 : IPCH Classification Form - Distinction 0,5 - 1,0 Athletes

Performance 0.5 / 1.0 PCH athletes



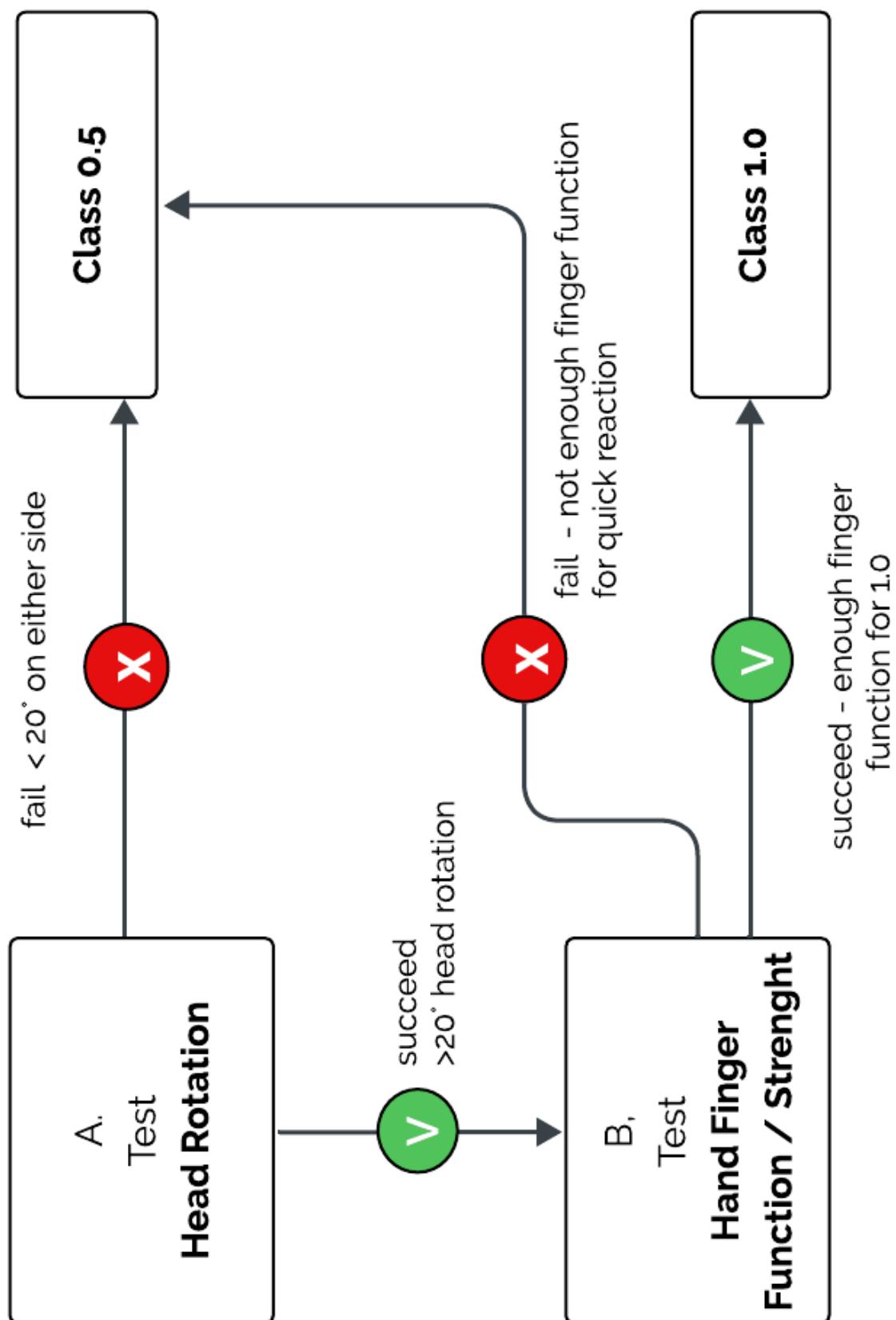
Name (last)		Country	
Name (first)		Team	
Date of birth		Experience since	
Diagnosis		Onset disability	
Prior PCH class		Joystick arm/hand	Left / Right

Performance Indicators	Performance Conditions	Performance Goal
Head-rotation & Trunk-rotation	Field of Vision	Reaction speed
Finger/Hand-strength & Finger/Hand-coördination	Joystick-control	
0.5 1. Severely restricted Head-rotation limiting FoV, no Trunk-rotation 2. Adapted Joystick-control / Mini-Joystick, because of severely restricted finger/hand function		
1.0 1. Head- or Trunk-rotation present and/or 2. No Joystick adaptation because some finger/hand function available		

0.5 - 1.0 Differentiation		
	Physical Assessment	Equipment Assessment
Indicator 1 Head rotation	<input type="checkbox"/> (only) eyes rotate to side: 0.5 indicator (small head movement allowed for 0.5)	<input type="checkbox"/> head/neck support lateral: 0.5 indicator <input type="checkbox"/> head/neck support only at rear: 1.0 indicator
Indicator 2 Finger/Hand strength & Finger/Hand coördination	<input type="checkbox"/> one-handed control: 1.0 indicator <input type="checkbox"/> two-handed control: 0.5 indicator <ul style="list-style-type: none"> • Elbow flex/ext MRC 3: L <input type="checkbox"/> R <input type="checkbox"/> 1.0 indicator MRC 2: L <input type="checkbox"/> R <input type="checkbox"/> MRC 1: L <input type="checkbox"/> R <input type="checkbox"/> 0.5 indicator <ul style="list-style-type: none"> • Wrist flex/ext MRC 3: L <input type="checkbox"/> R <input type="checkbox"/> 1.0 indicator MRC 2: L <input type="checkbox"/> R <input type="checkbox"/> MRC 1: L <input type="checkbox"/> R <input type="checkbox"/> 0.5 indicator <i>Test: lifting hand from Joy-stick plateau:</i> <input type="checkbox"/> yes: 1.0 indicator <input type="checkbox"/> no: 0.5 indicator <ul style="list-style-type: none"> • Finger flex/ext MRC 3: L <input type="checkbox"/> R <input type="checkbox"/> 1.0 indicator MRC 2: L <input type="checkbox"/> R <input type="checkbox"/> MRC 1: L <input type="checkbox"/> R <input type="checkbox"/> 0.5 indicator <ul style="list-style-type: none"> • Pincer grip + strength: Pincer gauge: gram <i>Test: holding + moving vertical pencil:</i> slow/quick/with resistance	<input type="checkbox"/> normal Joy-stick: 1.0 indicator <input type="checkbox"/> adapted Joy-stick: 0.5 indicator <input type="checkbox"/> mini Joy-stick: 0.5 indicator <input type="checkbox"/> wind-protector: 0.5 indicator
		Remarks:

IPCH
2026

Annex 5 : Flowchart 0.5 / 1.0 Distinction



Annex 6 : TIC - Trunk Impairment Classification: original TIC test description

TRUNK TEST NO. 1 - SITTING STRAIGHT

Test description

Athlete sitting unsupported.

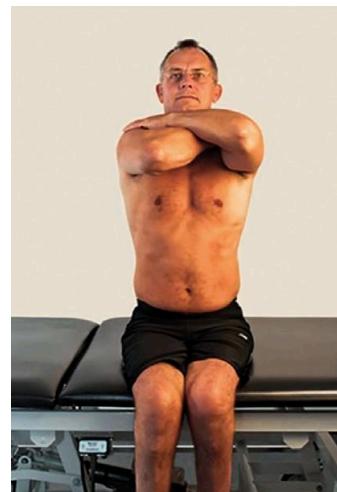
Athlete sitting in the powerchair not supported by backrest or sitting on plinth with legs hanging over edge of plinth with the feet unsupported.

The athlete crosses the arms in front of his chest, to prevent support for sitting balance from the arms. Bring athlete into upright position with hand on sternal bone and hand on back and slowly let go of support.

Evaluation

Observe sitting position after removing support from classifier's hands: straight /upright or kyphotic?

Observe stomach: flat or "quad belly".



Score: Succeeds

Sits straight / upright, without marked kyphosis and with flat belly.



Score: Fails

Sits with marked kyphosis or with quad belly.

TRUNK TEST NO. 3 TRUNK FLEXION / EXTENSION

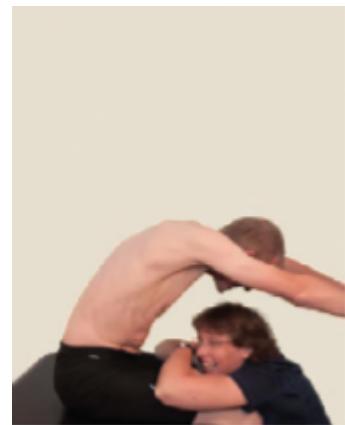
Test description

Athlete sitting on plinth, legs hanging over the edge of the plinth with the feet unsupported. Bending forward with trunk towards lap and arms outstretched in maximum shoulder flexion.

(If the athlete has triceps weakness, the classifier supports the forearms, to keep the elbows extended).

Ask athlete to assume straight / upright position and maintain arm position in maximum shoulder flexion.

The classifier fixates both legs to the plinth at the proximal 1 / 3 of the thighs, close to the hips. The feet should be unsupported. Athlete extends trunk past upright and flexes forward to assume upright position again.

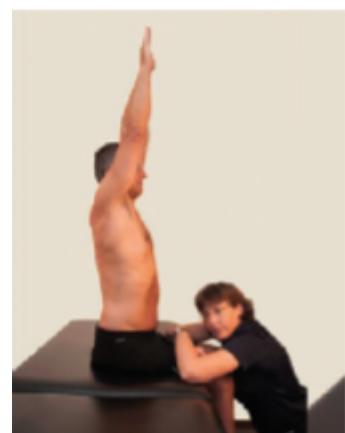


Evaluation

Observe movement, standing lateral to the athlete.

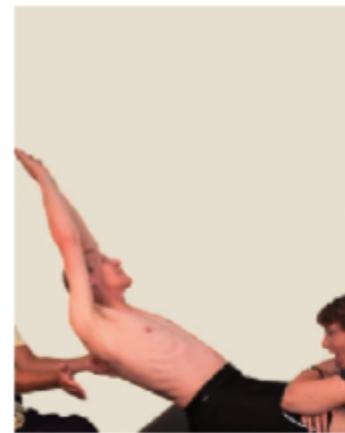
Score: Succeeds

Athlete performs trunk flexion to at least 45° line between pelvis and C7 and vertical and maintains position. Athlete performs at least 30° trunk extension and maintains position. Resumes straight position without support of arms.



Score: Fails

Athlete does not perform flexion to 45° degrees and extension to 30° or (2) compensates by kyphosis / lordosis or (3) cannot resume straight position without support or compensation.



TRUNK TEST NO. 4 Rotation

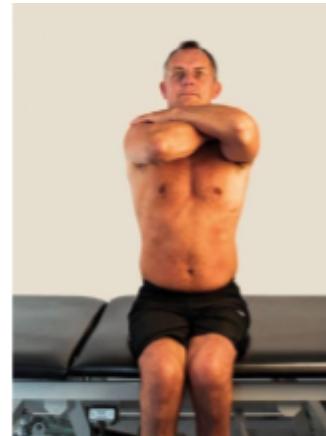
Test description

Athlete sitting on plinth, legs hanging over the edge of the plinth with the feet unsupported.

Arms crossed in front in 0° shoulder flexion.

Ask for maximum rotation to both sides.

The classifier fixates both legs to the plinth at the proximal 1 / 3 of the thighs, close to the hips. The feet should be unsupported.



Evaluation

Observe from the front, back and lateral from the athlete.



Score : Succeeds

Athlete stays in upright position in sagittal plane.

Rotates 45° or more to both sides, measured in straight line between both shoulders and line between ASIS on both sides.



Score : Fails

Athlete does not rotate or rotates less than 45 °, or athlete cannot maintain upright position in sagittal plane while rotating (e.g. assumes kyphotic posture).

Or athlete can perform test to one side, but not to the other.

TRUNK TEST NO. 5 TRUNK LATERAL FLEXION

Test description

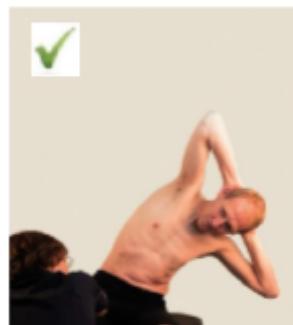
Athlete sitting on plinth, legs hanging over the edge of the plinth with the feet unsupported. Arms in horizontal (90°) abduction in the shoulders, maximum elbow flexion and hands on the back of the head.

Ask for maximal lateral flexion to both sides and hold this maximum position for two seconds, before returning to the upright position.

One classifier fixates both legs firmly to the plinth at the proximal 1 / 3 of the thighs, close to the hips to prevent the athlete from shifting weight to one leg. The feet should be unsupported.

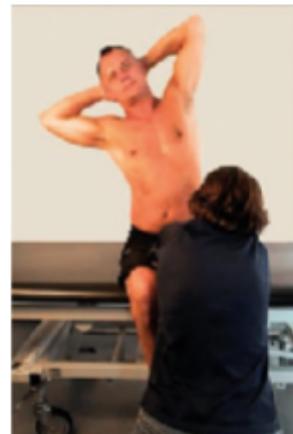
The athlete is not allowed to abduct the legs.

The other classifier palpates the ASIS (anterior superior iliac spine).



Evaluation

Observe movement quality and range from front and back of athlete.



Score : Succeeds

Athlete stays in upright position in sagittal plane and performs lateral flexion at least with suprasternal notch in vertical line above the ASIS to both sides. And can hold this position for two seconds before resuming the upright position.

Score : Fails

Athlete cannot perform lateral flexion to the level where the suprasternal notch is in a vertical line above the ASIS.

Or athlete cannot maintain straight position in sagittal plane while performing lateral flexion (e.g. Kyphotic posture).

Or performs lateral flexion without holding the position in the end range but falls to the side. Or athlete can perform test to one side, but not to the other.

Annex 7 : How to request and organize a Classification Session

1. Scope

Official Classification Sessions are organized by IPCH to evaluate athletes' eligibility and classification. These sessions may take place during:

- IPCH officially sanctioned competitions;
- IPCH official events, including Official Friendly Matches;
- IPCH Development Events;
- non-sanctioned IPCH events, upon request.

All classification activities, including Physical Assessment, Technical Assessment, In-Competition Observation, and any Protest Classification, must follow the procedures outlined in the IPCH Classification Manual.

Note: Even in non-sanctioned or non-covered competitions, all classification steps must be carried out in the presence of a match played according to IPCH rules and regulations, ensuring that In-Competition Observation and all assessment components can be properly conducted.

2. Request and Approval

1. Requests must be submitted to classification@powerchairhockey.org (with office@powerchairhockey.org in copy) **at least six (6) months prior** to the proposed event date.
2. Upon approval of the competition/event and the related Classification Session, IPCH will notify the **IPCH Head of Classification** at least **four (4) months** prior to the event.
3. The IPCH Head of Classification advises the **IPCH Executive Committee** regarding:
 - a. the appointment of an **IPCH Chief Classifier**, and
 - b. the number of **Classification Panels** required.

Note: The number of Classifiers and Classification Panels appointed will be determined by the Head of Classification or by the Classification Officer within the Sport Executive Committee. The decision depends on: the size and number of athletes to be classified, and the framework and structure of the competition or tournament for which the panel is requested.

4. Appointed Classifiers will receive formal confirmation **at least three (3) months** prior to the event.

3. Pre-Event Requirements

At least **six (6) weeks before** the event, the IPCH SEC Classification Officer or the IPCH Technical Delegate will receive from the Organizing Committee, and share with the Chief Classifier and/or Head of Classification:

- all logistical and operational information, including the competition schedule, classification rooms and equipment, accommodation and transportation for Classifiers, and administrative support;

- the list of athletes attending the event.

Note: The Organizing Committee provides the full list of athletes present at the event to allow the **Head of Classification** or **Chief Classifier** to identify which athletes require classification.

The National Federation must submit to IPCH (classification@powerchairhockey.org) at least **six (6) weeks before** the event:

- athletes' **Medical Diagnostic Forms**;
- any requests for **Medical Review**;
- all other relevant athlete documentation.

4. Classification Scheduling

At least **two (2) weeks before** the event:

- a) The IPCH Chief Classifier will propose a detailed classification timetable, including:
 - scheduled sessions,
 - potential **Protest Classifications**, and
 - **In-Competition Observation**,

for approval by the IPCH SEC or the appointed IPCH Technical Delegate.

Classifiers generally arrive the day before the start of Classification Educational Sessions, or if no sessions are planned, before the classification process begins.

On arrival, the Chief Classifier chairs a preparatory meeting with all Classifiers.

5. Conducting Classification

5.1 During the Classification Process

Immediately after classification, the Chief Classifier convenes a meeting with the panel, in coordination with the Technical Delegate, to:

- review and finalize classification results,
- prepare any **Protest Classification** (including panel composition), and
- plan **In-Competition Observation**.

5.2 Communication of Results

Classification results are communicated to athletes, Team Managers, and the Organizing Committee according to the IPCH Classification Manual.

After In-Competition Observation, the Chief Classifier and Technical Delegate prepare the Final Classification Report, which is submitted to the IPCH Head of Classification and IPCH.

6. Responsibilities of the organizers

For Classification Sessions - including those happening in non-sanctioned IPCH events

- the requesting National Organization is responsible for:

- travel, local transportation, and accommodation (including meals) for IPCH-appointed Classifiers;
- all other costs related to logistics and organization (e.g., venue rental, administrative materials, stationery).
- Per diems of Classifiers

7. Practical Requirements for Hosting a Classification Session

7.1 Physical Assessment Room

- Must ensure **visual and auditory privacy** in compliance with privacy laws.
- Minimum room size: **20 m²**.
- Equipment for each Classification Panel:
 - 1 wide examination table, mechanically or electronically height-adjustable,
 - 1 table,
 - 3 chairs,
 - assessment tools (goniometer, tape measure, etc.),
 - administrative materials (paper, pens, IT/ICT equipment if required).

Availability of 1 hoist is recommended.

Notes:

- Physical Assessment involves sensitive one-on-one evaluations of each athlete.
- To ensure privacy and maintain the integrity of the assessment, **each Classification Panel must have its own dedicated Physical Assessment room and equipment.**
- Sharing Physical Assessment rooms between panels is **not permitted**.

7.2 Technical Assessment Area

- A sports hall or a room with a flat, even floor.
- Equipment for each panel:
 - 1 table,
 - 3 chairs,
 - 10 cones (55 cm height, 30 cm base),
 - tape for marking lines,
 - match balls,
 - administrative materials (paper, pens, IT/ICT equipment if required).

- **Optional:** video recording equipment.

Notes:

- Technical Assessment evaluates athletes' sport-specific skills, mobility, and functional abilities in a field or court environment.
- These assessments do not require privacy, and the same Technical Assessment area can be shared among multiple Classification Panels, either concurrently or in rotation.
- This allows efficient use of space and resources while maintaining fairness and accuracy of the technical evaluations.

Annex 8 : IPCH Classifier Training and Certification

Eligibility and Entry requirements:

Candidates seeking IPCH Classifier certification must demonstrate the following qualifications and attributes:

- A valid medical qualification as a physician, physiotherapist, or equivalent certification;
- A sufficient level of anatomical, biomechanical, and sport-specific knowledge relevant to Powerchair Hockey;
- Sufficient command of the English language (spoken and written);
- A demonstrated interest in Paralympic sport and/or Powerchair Hockey;
- Completion of the IPC Academy online course "Introduction to Para Sport";

A formal recommendation from the relevant National Paralympic Committee (NPC) or National Federation (NF) is appreciated but not mandatory.

Candidates must not have any conflict of interest, such as being a member of any National Team or Delegation.

The costs of participation in all training, travel, and certification activities are the responsibility of the candidate and/or their NPC/NF.

IPCH Classifier Pathway

STEP 1 – IPCH CLASSIFIER SEMINAR

Content and Delivery

The seminar includes:

- Theoretical sessions on classification principles, steps, rules, and procedures;
- Practical sessions on impairment assessment and evaluation techniques;
- Video-based or real life simulations of classification situations;
- Assessment through completion of a competency transcript.

Learning Outcomes

Upon completing, participants will:

- Understand the role, responsibilities, and ethical obligations of classifiers;
- Comprehend and apply the conceptual basis of classification;
- Conduct relevant medical and functional assessments for athletes with Physical Impairments;
- Identify and apply the Minimum Impairment Criteria (MIC) as defined in the regulations;
- Perform observation assessments in sport-specific contexts;
- Communicate classification outcomes accurately, clearly, and sensitively;
- Recognize and manage risks and ethical issues in classification;
- Complete all required classification documentation in accordance with the procedures.

Program Outcome

Successful participants will receive a Certificate of Completion and the licence as **National Classifiers**.

Participants who do not yet meet the experience requirements to serve as National Classifiers may be designated as IPCH Trainee Classifiers.

STEP 1B – IPCH TRAINEE CLASSIFIER STATUS

The Trainee Classifier role is designed to support individuals who have successfully completed the IPCH Classifier Seminar but may:

- Lack sufficient practical experience in Powerchair Hockey;
- Be new to classification processes;

Trainee Classifiers are recognized by IPCH as having completed training and are encouraged to gain hands-on experience by:

- Observing and assisting in national or regional classification activities in collaboration with NPCs/NFs;
- Familiarizing themselves with Powerchair Hockey gameplay and sport-specific classification procedures;
- Participating in IPCH-supervised events as Trainees under mentorship.

Trainees do not yet hold a full IPCH Classifier license. However, IPCH acknowledges their learning stage and may invite them to further seminars, supervised tournaments, or additional learning opportunities where they can demonstrate progress toward full certification.

Upon successful demonstration of adequate sport knowledge, assessment competency, and practical experience, Trainees may be licensed as: **National Classifiers**, or **Junior International Classifiers**, following Step 2 of the IPCH Pathway.

Trainee Classifiers are entitled to reimbursement of their travel expenses when invited to attend IPCH-sanctioned events. Per diem allowances apply only to fully licensed (National or International) Classifiers.

STEP 2 – IPCH INTERNATIONAL CLASSIFIER

Participant Profile

Candidates must have:

- Successfully completed Step 1
- No conflict of interest;
- Demonstrated English proficiency;
- Experience as a National or Trainee Classifier.

Teaching Methods

- Observation of classification assessments by Senior Classifiers;
- Conducting classification assessments under supervision;
- Observation of technical and in-competition assessments;
- Participation in all relevant classifier duties (team meetings, protest handling, education sessions);

- Mentoring and evaluation via a competency transcript.

Learning Outcomes

Upon completion, participants will:

- Demonstrate advanced knowledge of classification procedures and principles;
- Conduct valid and reliable medical and functional assessments;
- Rapidly locate and interpret MIC and related regulations;
- Perform on-court observation assessments to a high standard;
- Communicate outcomes clearly and professionally;
- Identify and manage risks in the classification process;
- Complete classification documentation to IPCH standards.

Program Outcome

Participants will receive an **IPCH International Classifier Certificate** of Competency and become eligible for appointment as a **Junior IPCH International Classifier** at sanctioned competitions.

Retaining the IPCH Classifier Certification

To retain IPCH International Classifier certification, Classifiers must:

- Participate in at least one IPCH-sanctioned international classification session every four (4) years;
- Participate in annual update workshops, virtual sessions, or equivalent educational activities;
- Conduct national-level classifications each year.

Recertification After Inactivity

Inactive Classifiers must apply for recertification as follows:

Senior International Classifiers (Level 2):

- May have a period of inactivity of up to three (3) years;
- Must complete an update session with a Senior Classifier before recertification.

Junior International Classifiers (Level 1):

- May have a period of inactivity of up to two (2) years;
- Must complete an update session and supervised classification assessed through the competency transcript.

Extended Inactivity:

Classifiers inactive for longer periods must repeat both Step 1 and Step 2 of the IPCH Pathway.

Recertification requests must be submitted in writing to
classification@powerchairhockey.org

Classifier Roles And Progression

Trainee Classifier

- Recognized as having successfully completed **Step 1 – IPCH Classifier Seminar**;
- Gains **practical experience** nationally or under supervision at training events or competitions;
- May be invited to **additional training opportunities** or **international competitions** for further development;
- Works under the guidance of **National** or **Senior International Classifiers** to become familiar with the sport and the classification process;
- Receives **travel reimbursement** if appointed by IPCH but is **not entitled to per diem**;
- Progresses to **National Classifier** or **Junior International Classifier** status upon meeting IPCH-defined competency requirements.

National Classifier

- Has successfully completed **Step 1 – IPCH Classifier Seminar** and demonstrated sufficient **national-level experience**;
- Conducts **athlete evaluation and classification** at national and regional competitions under the authority of the National Federation (NF) or National Paralympic Committee (NPC);
- Applies **IPCH Classification Rules**, including the **Minimum Impairment Criteria (MIC)**, to ensure consistent and fair assessment;
- Collaborates with **IPCH** to maintain consistency and quality in classification practice at the national level;
- May serve as a **mentor or supervisor** for Trainee Classifiers gaining experience;
- May be **appointed by IPCH** to attend and participate in **IPCH-sanctioned international competitions** as a member of a full classification panel to progress their licence;
- Is entitled to both **travel reimbursement** and **per diem** when appointed for an IPCH-sanctioned competition.

Junior International Classifier

- Certified after completing the full **IPCH Classifier Training Pathway** and participating in at least one **international classification panel**;
- Duties may include:
 - Serving on **classification or protest panels** at IPCH-sanctioned competitions or events;
 - Attending **classification meetings** and contributing to decision-making discussions;
 - Assisting in **training and educational activities** under supervision;
- Works collaboratively with Senior Classifiers to uphold IPCH standards and promote continuous learning.

Senior International Classifier

- Acts in a **leadership and mentoring capacity** under the supervision of the **Chief Classifier**;
- Duties may include:
 - Leading **classifier workshops**, providing mentorship, and evaluating Junior and Trainee Classifiers;
 - Supervising classification activities at international competitions;
 - Supporting the **development and review of classification regulations and sport profiles**;
 - Participating in **research, analysis, and procedural refinement** to enhance the classification system;
- Demonstrates the highest level of technical, ethical, and professional competency within the IPCH classification structure.

Recruitment And Retention Of Classification Personnel

To ensure the sustainability of classification operations, IPCH will:

- a) Identify and recruit prospective trainee classifiers from diverse professional and sporting backgrounds;
- b) Define transparent appointment processes for all classifier roles;
- c) Support collaboration between IPCH and NFs/NPCs to integrate Trainees into national systems;
- d) Provide ongoing professional development opportunities;
- e) Promote classifier wellbeing and safeguard against abuse or harassment;
- f) Re-engage inactive classifiers through structured re-entry pathways.

Training And Development

IPCH commits to the continuous education of all classification personnel by:

- Providing access to training programs and resources to maintain competencies;
- Supporting NPCs and NFs in the education of National and Trainee Classifiers;
- Sharing training schedules and materials in advance;
- Establishing clear pathways from Trainee to National and International Classifier status.

Certification And Re-Certification

Certification confirms that a classifier meets the competency requirements established by IPCH. Certification may include limitations such as:

- Type of eligible impairment assessed;
- Classification stages authorized;
- Role-specific certification (Medical or Technical Classifier);
- Validity period.

Re-certification ensures ongoing compliance with IPCH standards. Certification may be revoked if:

- The classifier no longer meets competency requirements;
- The classifier breaches the IPCH Classifier Code of Conduct.

Re-certification may be granted once the classifier demonstrates that all required competencies have been regained.

Annex 9 : IPCH Classification Protest Form



INTERNATIONAL POWERCHAIR HOCKEY
Sport Section of the World Abilitysport
www.powerchairhockey.org
office@powerchairhockey.org



Classification Protest Form

Protest against classification decision concerning:

Name of Athlete:	
Nation:	
Date of Classification:	
Protested decision:	

Reason for the protest:

Please use backside if needed

Number and dates of documents attached to support the protest:		
Name of National Member Organisation of World Abilitysport:		
Name:		Signature:

<i>To be filled in by the Chief Classifier</i>		
Received Fee:		
Receiving Date: <i>(of fee and documents)</i>		
Chief Classifier Name:		Signature :

Annex 10 : Medical Review Request Form



INTERNATIONAL POWERCHAIR HOCKEY
Sport Section of the World Abilitysport
www.powerchairhockey.org
office@powerchairhockey.org



MEDICAL REVIEW

General Information:

Medical Review applies to situations in which athletes with Sport Class Status **Confirmed (C)** or **Fixed Review Date (FRD)** and either:

- Received interventions, which may change their impairment profile (for example strength, range of movement or hypertonia). Examples of such interventions include, but are not limited to:
 - Change of amputation level
 - Botox (Botulinum Toxin) injections to reduce hypertonia and increase active range of movement
 - Tendon releases
 - Harrington rods or joint fixations to assist in posture/stability

OR

- Have an impairment that is progressive and has deteriorated to an extent that the athlete most likely does not fit his/her current Sport Class Profile any more

OR

- Have a new additional eligible health condition that has resulted in a permanent change to the athlete's degree of impairment to an extent that the athlete most likely does not fit his/her current Sport Class Profile any more

With the **Medical Review Request**, the National Member Organisation (NMO) or National Paralympic Committee (NPC) must provide evidence that a change in the athlete's impairment has occurred after the last international Athlete Evaluation. The change in impairment must be demonstrated by medical documentation. Any included medical documentation must be in English or be accompanied by a verified English translation.

Following the change in condition, the athlete is responsible for informing his/her NMO/NPC. It is the responsibility of the NMO/NPC to complete this form and submit it to the IPCH Head of Classification.

This form must be received **at least 12 weeks before the competition** where the athlete, if the medical review is accepted, will undergo re-evaluation. Medical Review Request must be accompanied by the payment of **€100,00 non-refundable fee**.

If the medical review is accepted the athlete's sport class will be changed to **Review (R)** with immediate effect, thus allowing the athlete to undergo classification again.

Please note that re-evaluation does not guarantee that the Sport Class of an athlete will change.

Failure to notify the IPCH, within 6 months of an intervention that results in an improvement of an athlete's impairment profile may be considered a case of intentional misrepresentation, following the IPCH Classification Rules.



INTERNATIONAL POWERCHAIR HOCKEY
Sport Section of the World Abilitysport
www.powerchairhockey.org
office@powerchairhockey.org



NMO/ NPC Details:		
NMO/NPC Name:		
NMO/NPC Contact Name:		
NMO/NPC Contact Email:		
Athlete Details		
Surname:		
Name(s):		
Date of birth: (dd/mm/yyyy)		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Current SportClass		Sport Class status
Intervention details (if applicable)		
Date of intervention:		
Location of intervention:		
Person responsible for intervention:		
Description of intervention		
Reason for intervention and expected outcomes		

**INTERNATIONAL POWERCHAIR HOCKEY**

Sport Section of the World Abilitysport

www.powerchairhockey.orgoffice@powerchairhockey.org

Description of change in degree of impairment (<i>progressive conditions and additional new health conditions</i>)	
Date of onset:	
Description of change in impairment:	

List of Supporting Documentation	
<input type="checkbox"/> Medical Report <input type="checkbox"/> X-ray <input type="checkbox"/> CT Scan <input type="checkbox"/> MRI <input type="checkbox"/> EMG / Nerve Conduction Studies	<input type="checkbox"/> Other (please list)

Contact Person (<i>in case further information is required</i>)	
Name and Surname	
Profession/role	
Phone	
Email	

NMO/ NPC Verification (<i>mandatory</i>)	
I verify my support of this application for this athlete's Medical Review	
Name and Surname	
Position	
Signature	

Annex 11 : Misrepresentation

Misrepresentation is a serious threat to the integrity of Classification and Para sport. According to the IPC Classification Code, **Intentional Misrepresentation** is a **major offence** because it involves:

- Trying to **mislead** the International Federation (or its representatives) in any part of the classification process, and/or
- Trying to **gain an unfair advantage**, which affects the fairness of competition.

Any suspected cases must be properly **investigated**, and if there is proof, **disciplinary action** must follow.

Important Note: *These investigations are separate from the normal classification process. The purpose of the rules in the IPC International Standard is not to check or change an athlete's sport class, but to prevent and penalize intentional misrepresentation as a disciplinary issue.*

Examples of Intentional Misrepresentation (Articles 45.1 & 45.2)

Here are some examples of what may count as Intentional Misrepresentation:

- Submitting **fake or forged medical documents** about an impairment that doesn't exist.
- **Deliberately underperforming** during a classification evaluation.
- **Tiring oneself or the athlete** before the evaluation to influence the result.
- **Hiding or not using adaptive equipment** (or sports attire) that is normally used during competition.
- **Not disclosing medications**, medical devices, or procedures relevant to classification.
- **Lying about abilities or impairments** before, during, or after evaluation.
- **Interrupting or refusing to cooperate** during the evaluation, in order to mislead the classifiers.
- **Using someone else to attend** an evaluation in place of the actual athlete.
- **Failing to inform IPCH** about prior classifications or any changes in the athlete's impairment.

Examples (Article 45.3): Helping or Hiding Misrepresentation

Other serious offences include:

- **Helping, encouraging, or planning** misrepresentation with someone else.
- **Hiding** someone else's offence, or **withholding information** that could help the investigation.
- Helping someone **break a suspension** for misrepresentation or covering up such an attempt.

Important Clarifications (Article 45.4):

A participant does not need to know that their conduct will constitute a violation of Article 45.1 for their conduct to be considered intentional.

A participant can commit Intentional Misrepresentation irrespective of any designation, Sport Class, and/or Sport Class Status allocated to an Athlete.

Responsibilities to Report and Cooperate:

All participants and national federations/PCH organizations must:

- **Report** to IPCH/World Abilitysport any actions or suspicions that could relate to misrepresentation.
- **Cooperate** fully and honestly with IPCH, World Abilitysport, or IPC investigations, including sharing documents and answering questions.
- **Support** any disciplinary actions, if required.
- **Not interfere** with investigations or hearings.

Investigations:

If there are reasonable grounds to suspect misrepresentation, IPCH and/or World Abilitysport must start an investigation promptly.

No explanation is required for launching an investigation.

The person under investigation cannot appeal the start of the process.

In general the International Federation linked to the person being investigated is responsible for the process. If there's a conflict (e.g., the person is part of multiple federations), the IPC will decide which body should handle it.

The aim of the investigation is to:

1. Determine whether the person **has a case to answer** for intentional misrepresentation
2. Identify **any others who may be involved**.

Investigations must be fair and impartial and based on all available evidence, including any proof that shows the person did not commit misrepresentation.

In most cases, IPCH or World Abilitysport will **inform the person being investigated** and give them a chance to submit a written statement. They can also **request cooperation** from individuals, federations or PCH organizations as needed.

In rare cases, the IPCH or World Abilitysport might decide not to inform the participants during the investigation. This could happen, for example, if there's a risk of information leaking or if the investigation needs to be done quickly due to time constraints. Even if the participant is not given a chance to submit a written statement during the investigation, they will still have the opportunity to do so later—after receiving a formal Notice of Charge

If, during an investigation, it is found that **other people might also be involved in misrepresentation**, the investigation can be expanded to include them.

Alternatively, separate investigations can be started for each of them. *For example: if there's a suspicion that one team member cheated, the investigation can be extended to include other team members or anyone else connected to the team. Or, separate investigations can be carried out for each person involved.*

Proceedings:

If IPCH or World Abilitysport believes that a participant may have committed Intentional Misrepresentation, it must begin disciplinary proceedings, unless there are exceptional circumstances—which must be shared with and approved by the IPC.

These proceedings will follow the rules and procedures of IPCH/World Abilitysport.

The case must be reviewed by the IPCH / World Abilitysport first-level disciplinary body.

This body must be independent from the rest of the federation's operations and include at least three qualified members who understand misrepresentation cases.

The hearing panel can include either one or three of these members. If three are chosen, one will act as the chair.

A person cannot be on the hearing panel if:

- a) They are currently serving as a Classifier
- b) They were involved in the case before
- c) Their impartiality could reasonably be questioned

Disciplinary proceedings may not be commenced against any participant for Intentional Misrepresentation unless such disciplinary proceedings are commenced within either: (a) ten years from the date that the Intentional Misrepresentation allegedly occurred; or (b) two years after the discovery of such alleged Intentional Misrepresentation by IPCH/World Abilitysport, whichever is later.

Notice of Charge:

When IPCH or World Abilitysport decide to bring disciplinary proceedings against a participant for Intentional Misrepresentation, a Notice of Charge must be sent to the participant. This notice must also be sent to: the participant's National Federation or PCH Organization and the IPC.

The Notice must include:

- a) the **allegations**: a clear explanation of the facts and any supporting information related to the charge and
- b) the proposed **sanctions**: what penalties or consequences should apply if the charge is confirmed.

The participant must be informed that they have the right to:

- Admit the charge and accept the proposed sanctions.
- Admit the charge but dispute or mitigate the sanctions. In this case, a disciplinary panel will decide on the sanction if the parties don't agree.
- Dispute the charge entirely. In this case, both the charge and the sanctions (if the charge is confirmed) will be reviewed and decided by the disciplinary panel.

The participant must be given at least 14 days (from the date they receive the notice) to send a response.

IPCH and World Abilitysport can later provide additional facts or evidence, but the participant must be given a fair chance to respond to the new information.

After the Notice of Charge is sent, IPCH and World Abilitysport may publicly share the name of the participant, and the nature of the alleged misconduct.

Resolution of charges without a hearing

Once a Notice of Charge is sent, the following situations may occur:

- a) If the participant admits the charge and accepts the sanctions specified in the Notice of Charge (or accepts other sanctions proposed by IPCH/World Abilitysport) no hearing will be scheduled.
- b) If the participant fails to respond by the deadline specified in the Notice of Charge this can be considered as
 - a waiver of the participant's right to have the charge and/or sanctions determined by the first instance body,
 - an admission of the charge,
 - acceptance of the sanctions specified in the Notice of Charge

In all these cases, a hearing before the first instance body will not be required and IPCH/World Abilitysport will proceed to issue a decision in the case.

Withdrawing the Charge

At any time before a final decision is made, IPCH/World Abilitysport may withdraw the charge for good reason.

If this happens:

- The participant, their National Federation/PCH Organization, and the IPC must be informed.
- The reason for the withdrawal must be explained.
- This withdrawal will not be published.

If the IPCH/World Abilitysport withdraws the charge, the IPC has the right to request the full case file (including English translations if needed) within 15 days of receiving the withdrawal decision and appeal the withdrawal within 21 days of receiving the full file.

Hearing:

If the participant disagrees with the charge and/or the proposed sanctions, they must explain why in their written response to the Notice of Charge (a short

summary is enough).

If the participant wants a hearing, they must send a written request to the IPCH/World Abilitysport. This request must be received **within 14 days of receiving the Notice of Charge** (unless a longer deadline is given in the Notice or agreed by).

IPCH/World Abilitysport can also decide, on its own, to send the case to the hearing panel at any time.

The case will then be heard by the IPCH/World Abilitysport first instance body, following the rules for hearings that includes that the hearing panel has the authority to:

- Decide what evidence can be used, how important it is, and whether it matters — including statements from witnesses or experts.
- Use any reliable method to determine the facts.
- If someone (or one of their witnesses) refuses to attend the hearing or answer questions, the panel may assume that their answers would go against them.
- The person or group making a claim must prove it (burden of proof).
- To decide if something is proven, the panel will use the "balance of probabilities" — this means something is more likely to be true than not.

Confidentiality

All cases of alleged Intentional Misrepresentation must remain confidential, including documents, evidence, and decisions. No one involved (parties, witnesses, experts, etc.) may publicly discuss the specific details of the case. However, the IPCH / World Abilitysport may respond publicly if the participant or their team makes public comments first.

The IPCH / World Abilitysport may share information privately with specific people or organizations (like the IPC or other federations) if needed for investigation, legal duties, or to protect the sport's integrity—always respecting data protection laws.

Sanctions

Any participant found guilty of Intentional Misrepresentation will face the penalties listed below.

Disqualification of Results

If a participant is found to have committed Intentional Misrepresentation during or in connection with a Competition, that automatically leads to disqualification of the individual results obtained by the participants in that Competition with all resulting consequences, including forfeiture of any medals, points, and prizes.

Any other competitive individual results of the participants obtained from the date the Intentional Misrepresentation occurred may be disqualified (in whole or part) with all resulting consequences, including forfeiture of any medals, points, and prizes.

Factors that might be relevant in deciding whether to disqualify any such results

include, for example, whether the results were likely to have been affected by the Intentional Misrepresentation, and the seriousness of the Intentional Misrepresentation.

Period of Ineligibility / suspension

A default **period of ineligibility of four years**, which may be:

- increased depending on the seriousness of the violation and the nature of any aggravating circumstances up to a period of ineligibility of a lifetime; and/or
- reduced depending on the seriousness of the violation and the nature of any mitigating circumstances, except that the resulting period of ineligibility imposed must not be less than 12 months

The period of ineligibility that will be imposed on a participant who is found to have committed Intentional Misrepresentation:

- for a second time, will be twice the period of ineligibility that would otherwise be applicable to the second violation; and
- for a third or subsequent time, will be a lifetime period of ineligibility

Aggravating Circumstances

Examples of aggravating circumstances that could bring to an extension of the suspension period include but are not limited to:

- the age and experience of the participant, and in particular their experience in relation to the Classification process;
- a lack of remorse on the part of the participant.
- a finding that the participants received or expected to receive a significant benefit as a result of their Intentional Misrepresentation
- a finding that the Intentional Misrepresentation affected or had the potential to affect the outcome of a Covered Competition;
- a finding that the participants committed Intentional Misrepresentation on multiple occasions and/or over an extended period of time;
- a finding that the Intentional Misrepresentation was part of a wider scheme involving other participants; and/or
- a finding that the participants engaged in deceptive or obstructive conduct to avoid the detection or adjudication of Intentional Misrepresentation.

Mitigating Circumstances

Mitigating circumstances may include, but are not limited to:

- the youth or inexperience of the participant, especially in relation to the Classification process;
- the participant's good disciplinary record;
- genuine remorse on the part of the participant; and/or
- a finding that the Intentional Misrepresentation was not committed with an intent to influence the outcome of a Covered Competition.

For the avoidance of doubt, mitigating circumstances do not include any voluntary admissions made or the provision of any Substantial Assistance, see following articles.

Start of Ineligibility

The ban usually starts from the date of the decision, unless otherwise decided. The ban must be enforced by all World Abilitysport and IPC Members and Recognised International Federations (RIFs).

Financial Consequences

IPCH may provide for proportionate recovery of costs or financial sanctions on account of Intentional Misrepresentation. Financial sanctions may only be imposed where the principle of proportionality is satisfied. No recovery of costs or financial sanction may be considered a basis for reducing the ineligibility or other sanction which would otherwise be applicable.

Other sanctions

IPCH / World Abilitysport (in an agreed case) or the first instance body (in a contested case) may apply if appropriate and fair, based on the case, additional penalties.

Possible reductions or suspensions to the period of ineligibility

If a participant voluntarily admits the commission of Intentional Misrepresentation before being notified and that admission is the only reliable evidence of the Intentional Misrepresentation at the time of admission the period of ineligibility may be reduced, by a maximum of one half of the period of ineligibility otherwise applicable (i.e., after any adjustment based on aggravating or mitigating factors).

If a Participant voluntarily admits the commission of Intentional Misrepresentation within a reasonable period of time after being notified the period of ineligibility may be reduced by a maximum of a quarter of the period of ineligibility otherwise applicable (i.e., after any adjustment based on aggravating or mitigating factors).

Substantial Assistance

A participant who is found guilty of Intentional Misrepresentation may have part of their ban suspended if they help the IPCH / World Abilitysport build a case against someone else.

Conditions:

- This is up to the IPCH / World Abilitysport
- The participant, their National Federation/PCH Organization, and (where applicable) the IPC must be informed immediately.
- The decision can be appealed by the Participant or IPC within 21 days

What counts as Substantial Assistance?

To qualify, the Participant must:

- Fully disclose in writing or in a recorded interview everything they know

about someone else's Intentional Misrepresentation.

- Cooperate fully in any related case, including testifying if needed.
- Provide credible and important information that leads to a new case.

Note: The help may involve a different Para sport.

How much of the ban can be suspended?

Up to 75% of the adjusted ban (after considering aggravating or mitigating factors and voluntary admissions). If the original ban is lifetime, at least 8 years must still be served.

Additional points:

A participant can request to give information under a "Without Prejudice Agreement" (meaning it can't be used against them if no deal is reached).

If the participant stops cooperating, the original full ban must be reinstated.

Status during ineligibility

While a participant is serving their ban, they cannot take part in any way in:

- Classification
- Any Competition, event, program, or activity (except approved education programs) organized or recognized by IPC, IPCH, World Abilitysport or Regional International Federation (RIF) or their members,
- Any club or member linked to these Federations or RIFs,
- Any Para sport league or high-level Para sport organization.
Any elite or national-level Para sports activities that are funded by a government agency.

In addition to the prohibition on participating in Classification and all Competitions covered by this Article, ineligible participants are not permitted to participate in a training camp, exhibition, or practice organised by their National Federation.

The term "activity" also includes, for example, administrative activities, such as serving as an official, director, officer, employee, or volunteer of their National Federation.

Ineligibility imposed by one International Federation or RIF will also be recognised by all other International Federations and RIFs.

A Participant serving a period of ineligibility is prohibited from coaching or serving as an Athlete Support Person in any other capacity at any time during the period of ineligibility. Any performance standard accomplished during a period of ineligibility will not be recognised for any purpose.

A Participant will remain subject to all relevant anti-doping requirements throughout any period of ineligibility.

As an exception an Athlete may return to train with a team or to use the facilities of a National Federation or any organisation listed above during the shorter of: (i) the last two months of their period of ineligibility; or (ii) the last one-quarter of the period of ineligibility imposed.

If a participant breaks their ban:

- Any results they achieved during the banned period will be canceled.
- They will get an extra ban added, equal to the original length (this can be adjusted based on the situation and the participant's fault).
- IPCH/World Abilitysport will quickly inform the participant, their National Federation/PCH Organization, and the IPC about this decision.
- The participant or the IPC can appeal this decision to the designated appeal body within 21 days.

Consequences for teams and National Federations

Any consequences to be applied to teams of which a Participant who is found to have committed Intentional Misrepresentation is a member will be at the discretion of IPCH

Any consequences to be applied to a National Federation to which a Participant who is found to have committed Intentional Misrepresentation is affiliated will be at the discretion of IPCH.

Decisions:

The first instance body must give a written decision explaining:

- whether the participant committed Intentional Misrepresentation, the facts supporting this, and which rules were broken.
- the sanctions they are imposing.

IPCH/World Abilitysport will share this decision with the participant, their National Federation/PCH Organization, and the IPC (if applicable).

If the participant is involved in other Para sports, IPCH/World Abilitysport will also send the decision to the other relevant International Federations or RIFs (even if the decision is appealed).

In the circumstance where no hearing is held IPCH/World Abilitysport will issue a written decision like the one above. This decision will act like a final decision from the first instance body. Alternatively, IPCH/World Abilitysport may send the case back to the first instance body to decide the sanctions.

Appeals:

IPC, IPCH/World Abilitysport, and the participant can appeal the first instance body's decision to the designated appeal body within 21 days of receiving that decision.

If the IPC was not involved in the first instance proceedings, it has 15 days to request the full case file (with English translations if needed) and then 21 days from receiving the file to file an appeal.

The appeal must provide a fair hearing (oral or written) within a reasonable time.

The appeal body must be Independent, composed of at least three members

with the right skills and experience, and none of them can have been on the first instance body.

Appeals are heard by a panel of one or three members (if three, one is the chair). Members can't sit on a case if they are current classifiers, were involved in the case before, or if their impartiality might be questioned.

Public Disclosure:

Within 20 days after a final appellate decision (or if the appeal is waived, or the case is resolved early), IPCH/World Abilitysport must:

- Publicly announce the outcome, including the participant's name, the type of Intentional Misrepresentation, and the penalties imposed.
- Update its Classification Master List with the participant's Intentional Misrepresentation status, including how long and when their period of ineligibility starts.

Note: If public disclosure would break any laws, the federation won't be considered non-compliant for not disclosing.

IPCH/World Abilitysport may also choose to publish the full written decision (with any necessary redactions) and comment publicly on the case.

If, after a hearing or appeal, the participant is found not to have committed Intentional Misrepresentation: the fact that an appeal happened may be publicly disclosed, but the decision and details cannot be made public without the participant's consent.

IPCH/World Abilitysport will try to get consent, and if given, will publish the decision fully or partially as approved.

Public disclosure is not required if the participant was a minor when the decision was made. Any public disclosure involving a minor must be proportionate to the situation.

Annex 12 : Glossary

Adaptive Equipment: means any implement, apparatus, and/or technical aid adapted to the special needs of an Athlete to reduce the impact of their impairment(s) and that is permitted by the International Federation's rules, except that refractive or optical correction (such as eyeglasses or corrective lenses) are not considered to be Adaptive Equipment.

Appeal: is a challenge to any aspect of a Classification process on the grounds that there was a breach of the International Federation's rules during the Classification process; and that breach could reasonably have caused the Athlete to be incorrectly designated as 'Not Eligible – Underlying Health Condition', 'Not Eligible – Eligible Impairment', 'Not Eligible – Minimum Impairment Criteria', or allocated an incorrect Sport Class and/or Sport Class Status.

Appeal Body: means a body designated by an International Federation for hearing and determining Appeals.

Athlete: means any athlete who has participated in any way in the Classification process, who has taken any step to engage in that process (for example by providing Diagnostic Information to their National Federation for the purposes of undergoing Classification), and/or who has entered or participated in any Covered Competition.

Athlete Support Person: means any coach, trainer, manager, agent, team staff, official, medical, paramedical personnel, parent, or any other person working with, treating, and/or assisting an Athlete.

BAC - Board of Appeal of Classification: means the body established by the IPC to hear and determine classification appeals.

Chief Classifier: means a Classifier appointed by an International Federation to direct, administer, co-ordinate, and implement Classification matters for a specific Classification opportunity according to the Classification rules of that International Federation.

Classification: means (i) the determination of which athletes are eligible to compete in Para sport; and (ii) the grouping of eligible athletes into Sport Classes based on the extent to which their impairment(s) impact(s) their ability to execute the specific tasks and activities fundamental to the relevant sport.

Classification Master List: An official list that each International Federation must maintain, publish, and keep up to date. It includes key information about every classified athlete and any individual currently suspended for Intentional Misrepresentation. The Master List contains the athlete's name, gender, year of birth, nationality, sport class and sport class status, as well as any relevant designations such as "New (N)", "Not Eligible", or "Classification Not Completed (CNC)". It also includes re-evaluation status, tracking codes like "OA" for Observation Assessment, and any current Intentional Misrepresentation (IM) designation with the start date and duration of ineligibility. The Master List ensures clarity and transparency in the classification process.

Classification Panel: means a specified number of Classifiers, appointed by an International Federation to conduct Evaluation Sessions and determine an Athlete's Sport Class and Sport Class Status in accordance with the Classification rules of that International Federation.

Classification Personnel: means Persons acting with the authority of a Classification organisation in relation to Classification, for example Classifiers and administrative officers.

Classification Personnel Code of Conduct: means the behavioural and ethical standards for Classification Personnel specified by an International Federation.

Classification Research: means any systematic scientific evaluation, analysis, or investigation, which aims to enhance or understand a Para sport classification system or systems.

Classifier: means a person authorised as an official and certified by an International Federation to evaluate Athletes as a member of a Classification Panel.

Competition: means a series of individual events conducted together under one ruling body. Compliance means the implementation of rules, regulations, policies, and processes that adhere to the text, spirit, and intent of the Classification Code and International Standards.

Diagnostic Information: means medical records and/or any other documentation that enables the International Federation to assess the existence or otherwise of an Underlying Health Condition or Eligible Impairment.

Dyskinesia (athetosis, dystonia, chorea): involuntary movements that interfere with voluntary movements.

Eligible Impairment: means an impairment that is Permanent and that falls within one of the categories recognised by the Paralympic Movement and approved by the General Assembly, as listed in Article 8.

Eligible Impairment Assessment: the process conducted by qualified classifiers to verify that an Athlete has an impairment eligible for the sport, consistent with the Underlying Health Conditions (UHC) reported.

Evaluation Session: means stages 2, 3 and 4 of the Classification process, i.e., the Eligible Impairment Assessment, MIC Assessment, and allocation of Sport Class and Sport Class Status.

First Appearance: refers to the first official competition in which an Athlete participates under a provisional Sport Class as assigned during the classification process.

Fixed Review Date: a Sport Class Status that a Classification Panel may assign to an Athlete when it determines that a further Evaluation Session is necessary, but

not within the current calendar year or season.

General Assembly: is the general meeting of the IPC members, represented by their respective delegates. Governing Board means the body described in Part VI of the Constitution.

Health Condition: means a disease (acute or chronic), disorder, injury, or trauma.

Hypertonia: an increase in muscle tension that may be velocity-dependent and/or a reduced ability of a muscle to stretch .

Impaired Muscle Power: reduced (or no) ability to contract their muscles to generate force that is consistent with an Underlying Health Condition affecting the structure and function of the central or peripheral nervous system or the muscles (including the muscle origin and muscle insertion)..

Impaired Passive Range of Movement: reduced ability for a joint to be passively moved that is consistent with an Underlying Health Condition affecting a structure of bones, joints, connective tissue, or soft tissues.

In-Competition: means the period commencing from the day on which the International Federation offers Classification opportunities in relation to a Competition in which the Athlete is scheduled to compete through to the day such Competition ends.

Intentional Misrepresentation: a serious violation occurring when a Participant deliberately misleads or attempts to mislead an International Federation or its representatives (such as Classification Personnel) regarding any aspect of the classification process, whether by action or omission. It also includes knowingly assisting or being complicit in such conduct or in violations related to another Participant's ineligibility for Intentional Misrepresentation.

International Standard: means a document adopted by the IPC to supplement the Classification Code, as amended from time to time.

IPC: means the International Paralympic Committee

Limb Deficiency and/or Limb Length Difference: a total or partial absence of a limb or anatomically irregular limb dimensions that are consistent with an Underlying Health Condition resulting from trauma, illness, or congenital causes affecting the bones and/or joints.

Medical Review: the process initiated when there is a change in the nature or degree of an Athlete's Eligible Impairment that may affect their classification status. It is conducted to determine whether the Athlete remains eligible, whether the previously allocated Sport Class is still accurate, or whether an Athlete previously found not eligible should be reassessed. The review ensures that the classification outcome remains valid in light of the Athlete's current medical condition.

MIC Assessment: the assessment as to whether the Athlete's Eligible Impairment

meets the applicable Minimum Impairment Criteria for that Eligible Impairment within the relevant sport

Minimum Impairment Criteria: means the minimum level of impairment resulting from an Eligible Impairment that is required in order for an Athlete to be eligible to participate in a Para sport, as determined by the International Federation in its Classification rules.

Minor: means a natural Person who has not reached the age of eighteen years.

Motor Ataxia: limited precision in direction and velocity of voluntary movement

National Federation: means a national member of an International Federation (including NPCs when acting in their role as a national federation in a sport for which the IPC currently acts as the international federation).

National Federation Protest: means a Protest made by a National Federation.

National Paralympic Committee (NPC): means a national organisation recognised by the IPC in accordance with the Constitution.

National Representative: means any person who is an office-holder or member of staff of, or who otherwise represents and/or works on behalf of a National Federation.

Next Available Opportunity: means the next available opportunity at which the Athlete can attend a new Evaluation Session, as determined by the International Federation.

Non-Eligible Impairment: Any impairment that is not listed as an Eligible Impairment.

Observation Assessment: means the observation of an Athlete in Competition by a Classification Panel as part of the Sport Class Assessment so that the Classification Panel can complete its determination regarding the extent to which an Athlete's Eligible Impairment(s) impact(s) their ability to execute the specific tasks and activities fundamental to the sport.

Operational Independence (or Operationally Independent): means that (a) board members, staff members, commission members, consultants, and officials of the International Federation, as well as any Person involved in the investigation and pre adjudication of the matter, cannot be appointed as members and/or clerks (to the extent that such clerk is involved in the deliberation process and/or drafting of any decision) of the relevant body, and (b) the relevant body must be in a position to conduct the hearing and decision-making process without interference from the International Federation or any third party. The objective is to ensure that members of the relevant body, or individuals otherwise involved in the decision of the relevant body, are not involved in the investigation of, or decisions to proceed with, the case.

Out-of-Competition: means any period that is not In-Competition.

Para athlete: means any athlete competing in a Para sport.

Participant: means: (i) Athletes; (ii) Athlete Support Personnel; (iii) National Representatives; and (iv) any other persons under the jurisdiction of an International Federation who participate in any aspect of Classification.

Permanent: means an impairment that is unlikely to be resolved, meaning that the principal effects are lifelong.

Person: means natural persons, corporate bodies, and unincorporated bodies (whether or not having separate legal personality), and also includes the legal personal representatives, successors, and permitted assigns of such person, as the context so requires. For the avoidance of doubt, the term Person does not include the IPC.

Physical Impairment: means the Eligible Impairments listed (i) Impaired Muscle Power; (ii) Impaired Passive Range of Movement; (iii) Limb Deficiency and/or Limb Length Difference; (iv) Short Stature; and (v) Coordination Impairments arising from one or more of the following: (a) Hypertonia/Spasticity; (b) Motor Ataxia; and/or (c) Dyskinesia (athetosis, dystonia, chorea).

Protest: is a challenge filed against the Sport Class allocated to an Athlete.

Protest Panel: means a Classification Panel appointed by the International Federation to conduct an Evaluation Session as a result of a Protest.

Recognised International Federation (RIF): has the meaning given to that term in Article 20.1 of the IPC Constitution: 'The IPC recognises the importance of creating a Paralympic family network of recognised international federations that are not eligible to become IPC Members but contribute to the development of the Paralympic Movement. Accordingly, the Governing Board may, in its absolute discretion, grant the status of 'Recognised International Federation' (RIF) to an international federation that is not part of the Paralympic Games Sport Programme and so is not eligible to become an IPC Member as an International Federation, but still contributes to the development of the Paralympic Movement. For the avoidance of doubt, RIFs are not IPC Members'. RIF Regulations means the regulations of the IPC setting out the procedure for the granting and removal of RIF status, as amended from time to time.

Short Stature: reduced total body length (including head, trunk, and legs) as a result of congenitally or developmentally reduced length of the bones of the upper and lower limbs (and may also have reduced trunk length) that is consistent with an Underlying Health Condition

Spasticity: an increase in muscle tension that may be velocity-dependent and/or a reduced ability of a muscle to stretch.

Sport Class: means a category for competition defined by each International Federation in their Classification rules, in which Athletes are categorised by reference to the extent to which their Eligible Impairment(s) impact(s) their ability to execute the specific tasks and activities fundamental to the sport.

Sport Class Assessment: the allocation to the Athlete of: (i) a Sport Class based on an assessment of the extent to which the Athlete's Eligible Impairment(s) impact(s) their ability to execute the specific tasks and activities fundamental to the sport.

Sport Class Status: means a status applied to a Sport Class to indicate whether and when an Athlete may be required to undergo Classification in the future.

Team Sport: means a sport in which the substitution of players is permitted during a competition.

Trainee Classifier: means a person who is in the process of formal training to become a Classifier for that International Federation.

UHC Assessment: an assessment to verify that the Athlete has (or has had) at least one medically and/or clinically diagnosed Underlying Health Condition, based on a review of Diagnostic Information provided by the Athlete's National Federation

UHC Assessor: means any person or body responsible for conducting UHC Assessments

Underlying Health Condition: means a verifiable Health Condition that may lead to an Eligible Impairment catered for by the relevant sport.

World Championships: means the highest-level international Competition(s) or event(s) owned or sanctioned by an International Federation or RIF.