RUGBY LEAGUE PLAYER DISPENSATION POLICY

1. Purpose

The primary objective of this policy is to ensure all players, particularly children and young people, have access to a safe, inclusive, and developmentally appropriate playing environment that supports their continued participation, progression, and well-being within the game.

This policy provides a clear framework for:

- Granting player dispensations to participate outside their standard age group (The age band a player is eligible to compete in under the Operational Rules, based on their date of birth and any applicable seasonal cut-off).
- Allowing the use of medical devices or personal protective equipment (PPE) during Rugby League activity.

Important: This policy applies only to Youth and Junior Rugby League and does not apply to Open Age competitions. This aligns with the RFL's safeguarding principles.

Dispensations are granted to support welfare, inclusion, and access. They will not be granted where the primary effect would be to create a competitive advantage.

2. Scope

Applies to all players registered with the RFL in community Rugby League clubs and competitions, covering both training and competitive play, and all genders (male, female, mixed).

3. Eligibility Criteria for Playing Outside a Standard Age Group

Dispensation may be considered and granted under one or more of the following eligibility criteria. Applications may reference more than one category where appropriate.

a. Disability

A player has a diagnosed physical or mental impairment that significantly affects their ability to safely or equitably compete with peers in their chronological age group.

b. Significant Physical Development Delay (SPDD)

The player's physical development (e.g. height, weight, coordination) is demonstrably below the typical range for their age, creating safety or confidence concerns when playing with same-age peers.

c. Chronic Physical or Mental Health Condition

A player has a clinically diagnosed chronic mental health issue or a chronic medical condition that negatively impacts their ability to train or play within their designated age group.

d. Cognitive or Educational Delay

The player is being educated in a year group below their chronological age. Playing with peers in their school year group may be more beneficial for their learning, development, and social integration.

e. Access or Pathway Restrictions

Dispensation may be granted where a player encounters significant barriers to participation due to structural, geographical, or gender-based limitations beyond the player's or club's immediate control.

Examples of valid scenarios include:

1. **Geographical Isolation** – the player lives in a remote or rural area where no team exists within their chronological age group, and reasonable travel to alternative clubs is not feasible.
2. **Club Structural Limitations** – the player's registered club does not field a team in their age group, and transitioning to another club is impractical due to transportation, safeguarding concerns, or local availability.
3. **Gender-Specific Barriers** – particularly in female or non-binary categories, where no single-gender team exists locally, or mixed-gender participation is not permitted beyond a certain age.
4. **Educational Cohort Alignment** – the player is educated in a school year below their chronological age (e.g., due to developmental delay or deferment) and would benefit socially and developmentally from playing with peers in their school year.

These scenarios require supporting evidence, as set out below. More than one scenario may apply, and all relevant evidence should be submitted

f. Individual Needs

In exceptional circumstances, a dispensation may be granted based on a holistic assessment of the player's needs. This includes considerations such as:

- Return from elite pathway or prolonged absence from the sport,
- Social or emotional development challenges,
- Unique family or living arrangements that impact participation.

The existence of an eligibility criterion does not guarantee approval of a dispensation; all applications will be assessed on the basis of evidence, safeguarding considerations, and competition integrity.

4. Supporting Evidence Requirements

For this section, references to eligibility criteria (a–f) correspond to the categories set out in Section 3 (Eligibility Criteria for Playing Outside a Standard Age Group).

Supporting Evidence	Applicable Eligibility Criteria	Approval by
Parental/guardian statement explaining the access issue and the need for dispensation	a-f	-
Club letter confirming the structural or team limitation, supporting the player's request, and noting any mitigations	a-f	-
Medical report (from GP or relevant specialist within the last 12 months) that:	a-d	RFL Medical Officer

1. identifies the child's disability, impairment, developmental delay or mental or physical chronic illness; 2. identifies any characteristics of the child's situation which are relevant to the request to play in an age group other than the child's standard age group; 3. explains how the characteristics which would place the child at a substantial disadvantage compared to his/her peers if he/she were required to play rugby league in his/her standard age group; 4. explains how playing in an age group other than his/her standard age group would neutralise or reduce the disadvantage caused by the child's disability or impairment; 5. identifies any increased or reduced risk to the child and/or his/her peers by allowing the child to play outside his/her standard age group; 6. explains why allowing the child to play outside his/her standard age group will not endanger the health and safety of the child or any other person.		
Confirmation from the League or Competition Administrator verifying the lack of available teams in the appropriate age group within a reasonable area (if appropriate)	e	-
Additional supporting documents, where applicable (e.g., detailing travel constraints, educational placement).	a-f	-
<u>Educational Cohort Alignment</u> The parent/ carer must provide: 1. the year the child is schooled in; 2. why it was deemed appropriate for the child to delay a year of education; 3. how playing in his/her standard age group would place the child at a substantial disadvantage; and 4. how playing in an age group other than his/her standard age group would neutralise or reduce disadvantage School/LEA letter confirming year, dated within the last 12 months, including name, job title, signature, and school details.		-

Medical Device and Personal Protective Equipment (PPE) evidence:	

A medical report from the player's GP or a relevant other specialist dated within the last 12 months, which: 1. identifies the child's medical condition and required medical device or PPE requirement while undertaking RL activity 2. identifies how the device is to be worn for safe use and any potential risks to undertaking RL activity with the medical device or PPE to the participant or opponent. 3. Considers any modifications or adjustments such as position, taping, strapping or padding that could be used to optimise the safety of the device or PPE to the participant or opposition, without jeopardising function.	-
A parental guardian statement accepting any potential risks to the player as identified in the medical report, and to support the player to make any reasonable modifications or adjustments to optimise player safety.	-
A club letter supporting the medical device or PPE dispensation request, and to provide support where relevant to make any reasonable modifications or adjustments to optimise player safety.	

Optional (but encouraged):
Clubs may also submit supporting video footage, player development records, or other relevant evidence that supports the application. Previous application outcomes may also be included to demonstrate validity and continuity.

5. Application Process

i. **Initial Step:**
The Parent/Carer initiates the process by arranging to discuss with the Club Welfare Officer potential dispensation options. Parent/Carer to bring supporting evidence to this meeting, which demonstrates the possible need for dispensation.

ii. **Club Review:**
The Club Welfare Officer reviews the documentation against the policy to ensure the application would meet the criteria and documentation is valid and appropriate.

iii. **Submission:**
The Club Welfare Officer submits the completed application to the RFL Dispensation Panel (the Panel) via the Dispensation Request Form, including copies of supporting evidence for appropriate distribution for consideration.

iv. **Panel Review:**
A multi-disciplinary panel, which may consist of representatives from Safeguarding, Medical, and Competitions, will assess each application within 14 working days.

v. **Decision Notification:**
Outcomes will be shared in writing with the club and recorded in the GameDay system. If approved, the dispensation will be valid for:
   a. The current season, or
   b. Until the next designated review period.

6. Review and Monitoring

- Clubs are expected to:
  - Monitor ongoing suitability and compliance,
  - Inform the RFL of any change in circumstances,

    - Maintain transparency in competition fairness.
- The RFL retains the right to amend or withdraw any dispensation at any time if the conditions under which it was granted are no longer met.
- Dispensations are subject to review before the start of each season, unless otherwise specified, or sooner if the player's circumstances change significantly.
- Applications must be resubmitted annually.

7. Safeguarding and Welfare

The welfare and safety of all players is the foremost consideration in any dispensation decision. Dispensations will not be approved if:

- They pose a safeguarding risk to the player or others,
- There is a potential risk for the safety and well-being of other participants
- They would create a competitive imbalance or are likely to be exploited for strategic or performance gain,
- They compromise the integrity of the competition.

8. Appeals Process

Applicants who wish to appeal the decision of the Panel must submit their appeal in writing to the RFL within 7 days of receiving the decision.

An appeal may only be lodged on one of the following grounds:

- New evidence is available that was not provided to, and therefore not considered by, the Panel during the initial assessment; or
- The decision is unreasonable