CONCUSSION PROTOCOL

Background

The Division believes it has a responsibility to provide a safe and healthy learning environment for students.

Guidelines

1. Division employees will work cooperatively with medical experts and health authorities to promote student health and safety.

2. A concussion is a head injury caused by the brain being shaken around inside the skull after a direct blow to the head, or a sudden jerking of the head or neck when the body is hit. A concussion can occur even if there has been no loss of consciousness.

3. A concussion is a brain injury that causes change in the way the brain functions and can have a significant impact on a student – cognitively, physically, emotionally and socially.

4. Schools must know how to recognize concussions and work with staff and parents/guardians to manage suspected concussions and help students return safely to school and play after experiencing a concussion.

Procedures

5. The Division will convey the seriousness of concussions to staff, students, parents/guardians and other stakeholders.

6. Prevention will be at the fore of concussion awareness.

   6.1 Students participating in extracurricular athletics and other activities will follow safety guidelines.

   6.2 Teachers and coaches are expected to follow safety guidelines and work with student to reduce the risk of serious injury, including concussions.

   6.3 Supervision must be provided in any activity that has a risk of concussion to provide vigilant oversight of the activity.

8. It is the responsibility of the coaches, officials, parents/guardians and student athletes to adhere to the minimum required standards for safety of equipment.

9. If an employee has reason to believe that a student is exhibiting signs and symptoms of a concussion, then the employee must report to the principal who will begin the concussion protocol (Appendix 1 – Signs and Symptoms of a Concussion).

9.1 Concussions can only be diagnosed by a medical doctor.

9.2 To return to a sport or activity after a concussion, the student must be re-examined and permitted to participate by a medical doctor.

9.3 After permission has been granted to return to a sport or activity, the concussion protocol (Appendix 2 – Return to Learn/Play Protocol) must be followed.

10. Training will be provided for coaches and school personnel who are in contact with students who participate in activities that may have athletic injuries including concussions.

11. Teachers and/or coaches are responsible for student safety and for educating students/players about concussions.

11.1 The teacher supervisor/coach will be required to remove from play, any athlete who exhibits signs or symptoms of concussion. The athlete will not be permitted to return until he/she has received written medical permission to participate from a doctor.

11.2 The teacher supervisor/coach or principal must summon an ambulance if a student appears to be seriously injured and cannot be moved.

12. The Principal is responsible to ensure that appropriate concussion protocols are followed, including the development of the plan for a student with a confirmed concussion.

12.1 The Principal will inform staff of a student with a confirmed concussion.

13. Students are responsible for abiding by the rules and regulations of the sport or activity and to abide by the principles of fair and safe play.

13.1 Students are required to report any blow to the head, face or neck and any symptoms that they might be experiencing to the teachers/coaches.

13.2 Students, who have witnessed a peer receiving a blow to the head, face or neck or observed a peer who may be exhibiting symptoms associated with a concussion will report this to the supervising teacher or coach.
14. Each student who has been diagnosed with a concussion will have an individualized return to learn/play plan developed in consultation with the school team and the parent/guardian.

14.1 The return to learn/play plan will include individual recommendations to be implemented immediately as part of the recovery process.

14.2 Accommodations may need to be varied as necessary.

15. Parents are to put the health and safety of the child first.

15.1 Parents/guardians will be required to read and sign an Authorization to Participate in Competitive Sports form before their child attends a try out, a practice or a competitive sports activity (Form 260-1: Authorization to Participate in Educational Excursions or Competitive Sports).

15.2 Parents/guardians are responsible for cooperating with school personnel when they are informed of a possible concussion to their child.

15.3 Parents/guardians are responsible for acting on information provided by the teacher supervisor/coach and for monitoring their child after a suspected concussion.

Reference: Section 18, 20, 45, 60, 61, School Act
          Emergency Medical Aid Act
          Alberta Health Services: Concussion/Mild Traumatic Brain Injury
CONCUSSION PROTOCOL
Signs and Symptoms of a Concussion

When an employee or coach has reason to believe that a student is exhibiting signs and symptoms of a concussion, it may be reported to the principal. The principal will discuss the student’s suspected concussion and contact the parents.

The following are signs and symptoms of a concussion.

Student Complaints:
- Headache
- Feels dazed
- Sees stars or flashing lights
- Sees double or blurry
- Loss of vision
- Dizziness
- Feels “dinged or stunned”
- Ringing in the ears
- Sleepiness
- Stomach ache/pain/nausea

Thinking Problems:
- Does not know time, date, place, period of game, opposing team, score of game
- Cannot remember things that happened before or after the injury
- General confusion
- Knocked out

Other Problems:
- Poor coordination or balance
- Blank stare/glassy eyed
- Slow to answer questions
- Poor concentration
- Strange or inappropriate emotions
- Vomiting
- Slurred speech
- Easily distracted
- Not playing as well

A recommendation to have the student consult a physician must be made if a concussion is suspected. Return to physical activity can only occur after clearance in writing from a doctor. The written notice must be given and approved by the principal. Once a student has been approved to return to learn and/or play, the following Guidelines must be followed. Each step must take a minimum of one day. The student must be symptom free in order to move to the next step in the guidelines specified below. If at any time a symptom returns, the student must be symptom free for 24 hours before returning to step 1 of the guidelines. The parent/guardian and/or student shall not short cut the concussion protocol.

**Return to Play Guidelines** (after physician approval):
1. Light aerobic exercise
2. Sport specific exercises (i.e. running, throwing) with no jarring motion for 20-30 minutes.
3. On court/field/ice activities such as ball drills, shooting drills and NO Contact drills.
4. Begin drills with body contact.
5. Game play
6. If symptoms persist, the student must consult a physician.
CONCUSSION PROTOCOL
Learn/Play Protocol

When a student has been diagnosed with a concussion and is undergoing treatment, an individualized academic program must be developed. Academic accommodations help in reducing cognitive and brain stimulus minimizing post-concussion symptoms. Accommodations will vary by student and subject area. The following recommendations should be part of an individualized recovery plan.

**Attendance:** No school or part time attendance may be required.

**Breaks:** Students should be allowed to take breaks to control symptoms. This may require leaving the classroom for a quieter location.

**Workload Reduction:** The student may need a reduced workload such as no homework, a smaller workload, longer time to complete an assignment, a prorated workload, or being allowed to catch up on missed work. A rest time may need to be included during classroom work.

**Extra Time:** Students may require extra time to complete work and do tests.

**Testing:** Memory and attention difficulty may make testing difficult. No tests, extra time, open book or oral tests may be required. A separate, quiet room may benefit the student.

**School Environment:** Visual and auditory stimulus may have an effect on a student who had a concussion. Loud and noisy rooms or hallways may be of concern. Audible learning may be required (discussion not text). Halogen lights, computer screens and Smart Board projectors and other electronic devices may exacerbate symptoms and require the student to wear sunglasses in the school/classroom, or in some cases, not be a part of a learning environment. Pre-printed notes for class material will assist learning.

**Physical Exertion:** No physical activity/PE/sports/recess may be required.

**Additional Recommendations:** Additional recommendations may be required depending on the individual student needs.