



ALGONQUIN AND LAKESHORE CATHOLIC DISTRICT SCHOOL BOARD

ADMINISTRATIVE PROCEDURES

Concussion Policy:

Purpose

The Algonquin and Lakeshore Catholic District School Board is committed to providing a safe environment for all students that takes steps to reduce the risk of injury and promotes the overall well-being of all students. A concussion can have a significant cognitive and or physical impact on a student and therefore educators and school staff play a crucial role in identification, monitoring and management of a student with a concussion. Awareness and knowledge of concussion recovery and management will contribute to student's long term health and academic success.

The Concussion Administrative Procedures are to ensure the following:

Awareness:

- Strategies on the seriousness of concussion and on concussion prevention, identification and management, communicated to students, parents, school staff and administration, volunteers (coaches), local health professionals
- Connections with the curriculum are made, where appropriate and individualization of instructional approaches for students with effects from a concussion
- Information is available to organizations that use the school facilities

Prevention:

- Strategies for preventing and minimizing the risk of sustaining a concussion and other head injuries are shared with students, as age and activity appropriate

Identification:

- Staff, students and parents have an understanding of the common symptoms and signs of a concussion
- Steps to take following an initial assessment
- Medical intervention

Management for a Diagnosed Concussion:

- An individualized and gradual "Return to Learn/Return to Play" plan
- Individualized instructional approaches to respond to student need during recovery

Training:

- Strategies to provide ongoing and regular training for concussion awareness, prevention, identification and management to relevant staff, volunteers and community partners

References

Education Act and Regulations

Algonquin and Lakeshore Catholic District School Board Mission Statement

The Education Act

Ontario Ministry of Education, PPM 158, School Board Policies on Concussion

Ontario Physical Education Safety Association, Concussion Protocol

KFL&A Public Health Unit Resources

Procedures

1. **Key Terms:**

1.1 **Concussion:**

- the term for a clinical diagnosis that is made by a medical doctor or a nurse practitioner. Since concussions can only be diagnosed by a medical doctor or a nurse practitioner, educators, school staff, or volunteers cannot make the diagnosis of a concussion.
- is a brain injury that causes changes in the way in which the brain functions and that can lead to symptoms that can be physical (e.g., headache, dizziness), cognitive (e.g., difficulty in concentrating or remembering), emotional/behavioural (e.g., depression, irritability), and/or related to sleep (e.g., drowsiness, difficulty in falling asleep);
- may be caused either by a direct blow to the head, face, or neck, or by a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull;
- can occur even if there has been no loss of consciousness; most concussions occur without a loss of consciousness;
- cannot normally be seen by means of medical imaging tests, such as X-rays, standard computed tomography (CT) scans, or magnetic resonance imaging (MRI) scans;
- can lead to injuries that result in 'second impact syndrome', which is a rare condition that causes rapid and severe brain swelling and often catastrophic results, if an individual suffers a second concussion before he or she is free from symptoms sustained from the first concussion.
- Appendix 1: Common Signs and Symptoms of A Concussion

1.2 **Return to Learn/Return to Physical Activity:**

- step by step process for students with diagnosed and suspected concussions
- varies depending on the child and symptoms
- provides for medical intervention and input
- Form C-D

2. **Roles and Responsibilities:**

2.1 **Central staff:**

- Communicate and implement the Concussion Policy
- Provide training on concussion management and identification
- Maintain ongoing communication with local medical community to support administrative procedures through the Return to Learn/Return to Physical Activity process
- Adherence to PPM 158

2.2 **School Administration:**

- Responsible for implementation of concussion administrative procedures at the school level
- Responsible to ensure that all staff and volunteers are trained in the identification, monitoring and management of concussions
- Facilitate communication to appropriate staff, including coaches and intramural supervisors, regarding suspected or diagnosed concussions for a student
- Administer the Return to Learn/Return to Physical Activity process (Form C) for students suspected of or diagnosed with a concussion
- Ensure that all necessary documentation is completed and filed according to administrative procedures
- Ensure that the parent/guardian receives and returns all necessary forms/appendices (Appendix 1-2/ Forms A-D)
- Maintains an ongoing record of students suspected of and diagnosed with concussion until such time as the student graduates

2.3 **Teacher/Coach/Volunteer:**

- Restricting student activity and play immediately and beginning the process of documenting, monitoring and Return to Learn/Return to Physical Activity steps.
- Responsible for implementing the concussion administrative procedures when dealing with students with suspected concussions
- Monitoring, managing and documenting physical, cognitive, emotional and behavioural changes in a student suspected of having a concussion (Form A-C)
- Communicating with parent and administration regarding suspected concussion (Appendix 2)
- Complete board OSBIE forms for the incident that resulted in the suspected concussion
- Participating in training relating to identification, management and monitoring of concussions

2.4 **Parent/Guardian:**

- Ensure that student receives medical attention once notified of suspected concussion
- Ensure ongoing monitoring of student suspected of concussion or diagnosed with a concussion
- Completion of all Return to Learn/Return to Physical Activity steps and forms (Form C) and Documentation of Medical Examination form (Form B)
- Inform teacher/coaches/administration when a concussion (suspected/diagnosed) has occurred outside of school

3. **Procedure:**

- 3.1. Following a blow to the head, face or neck, or a blow to the body that transmits a force to the head a concussion should be suspected.
- 3.2. If consciousness is lost:
 - a. Stop the activity immediately and assume a concussion has occurred.
 - b. Initiate school emergency plan for medical injuries (i.e. Call 911). Do not move the student.
 - c. Assume there is a neck injury.
 - d. If trained in first aid, immobilize the student until medical aid arrives.
 - e. Do not remove athletic equipment unless there is difficulty breathing.
 - f. Stay with the student until medical emergency services arrive.
 - g. Monitor and document any changes in the student (i.e. Physical, cognitive, emotional and or behavioral. (Form A to be completed)
 - h. Report the injury through the board's injury documentation process.
 - i. If student regains consciousness, follow standard first aid protocols.

- 3.3 If the student is conscious:
- a. (i) Stop the activity immediately.
 - (ii) Initiate school emergency plan for medical injuries.
 - (iii) Conduct initial assessment of concussion (Form A: Tool to Identify a Suspected Concussion)
- b. If signs or symptoms of a concussion are observed (Form A: Tool to Identify a Suspected Concussion):
- A concussion should be suspected.
 - Student should not be returned to play of any type.
 - Initiate Concussion Administrative Procedures and continue to monitor the student.
 - Contact administration and parent/guardian.
 - If symptoms worsen, call 911.
 - Do not administer medication unless required for another condition (i.e. Insulin for a student with diabetes).
 - Stay with student until parent/guardian arrives to take the student to a medical examination.
- c. If signs or symptoms are **not** observed (Form A: Tool to Identify a Suspected Concussion):
- A concussion is not suspected.
 - Notify the parent/guardian regarding incident.
 - Provide parent/guardian with Form A: Tool to Identify a Suspected Concussion.
 - Inform parent/guardian that symptoms may take hours or days to emerge.
 - Inform parent/guardian that student should be monitored for 24-48 hours following the incident.
 - Inform parent/guardian that should signs/symptoms emerge, the student should be examined by a medical doctor or nurse practitioner as soon as possible that day.
- 3.4 Monitoring/Management after the initial incident:
- a. (i) Once a student has been identified as having a suspected concussion, administration is to notify all school staff and volunteers who work with the student of the suspected concussion.
 - (ii) The student is not to participate in any learning/physical activities until the results of the medical examination are communicated (Form B: Medical Documentation) and received by the school.
 - (iii) If no concussion is diagnosed, the student resumes regular activities.
 - (iv) If a concussion is diagnosed, the student follows the Return to Learn/Return to Physical Activities steps (Form C: Return to Learn/Return to Physical Activities).
 - (v) School staff are provided with Return to Learn- Suggested Accommodations (Appendix 2)
 - (vi) To support the student while progressing through the steps of Return to Learn/Return to Physical Activities.

- b. (i) A collaborative approach by the school administration, teachers, coaches, parents and medical doctor/nurse practitioner is crucial to a student's recovery.
 - (ii) Ongoing communication and support with and for the parents and students through the concussion procedure is required by school administration and staff.
 - (iii) To facilitate monitoring and management of all concussion related documentation and procedures, school administration may designate a school staff lead.
 - (iv) Ongoing communication between parents, staff and school administration is crucial to the successful monitoring, management and recovery of a student with a concussion (diagnosed/suspected).
- c. (i) The student resumes normal activities after completion of the Return to Learn/Return to Physical Activities documentation and steps.
 - (ii) Documentation is to be stored in the OSR and school office in the event of a re-injury.

Appendices

Appendix 1: Common Signs and Symptoms of A Concussion

Appendix 2: Sample Script

Forms

Form A: Tool to Identify a Suspected Concussion

Form B: Documentation of Medical Examination

Form C: Return to Learn/Return to Physical Activity Plan

Form D: Return of Symptoms

Form E: Medical Examination (Final)

Approved: May 26, 2015