



PROCEDURE

HS-010

STUDENT CONCUSSION AND HEAD INJURY	
Superintendent Responsible: Superintendent of Human Resources	Initial Effective Date: 2019/06/24
Last Updated: 2023/06/09	Next Review Date: 2026/06/09

Purpose:

To set out the process for preventing and minimizing the risk of sustaining concussions (and other brain injuries) in schools and at off-site events and to outline the process for initial concussion assessment strategies, steps to take following an initial assessment and safe removal of student from activity.

Guiding Principles:

The Grand Erie District School Board (Grand Erie) recognizes concussions as a serious injury which requires appropriate follow-up measures to reduce risk of potential additional injury. Concussion awareness, prevention, identification and management are a priority. The implementation of the Student Concussion and Head Injury Policy is another important step in creating healthier schools in Grand Erie.

The “ Student Concussion and Head Injury Resource Package” contains general concussion information, strategies for preventing and minimizing the risk of sustaining concussions (and other head injuries) in schools and at off-site school events. Included within the package is information on the safe removal of an injured student from activity, initial concussion – assessment strategies (use of common symptoms and signs of a concussion) and steps to take following an initial assessment. This package also includes information and the materials necessary for the management of a diagnosed concussion.

1.0 Information

- 1.1. A concussion as outlined below is adapted from the definition provided in the concussion protocol in the (Ontario Physical Activity Safety Standards in Education (OPASSE)).
 - Is a traumatic brain injury that causes changes in how the brain functions, leading to signs and symptoms that can emerge immediately or in the hours or days after the injury. It is possible for symptoms to take up to 7 days to appear
 - Signs and symptoms can be physical (e.g., headache, dizziness), cognitive (e.g., difficulty concentrating or remembering), emotional/behavioural (e.g., depression, irritability) and/or related to sleep (e.g., drowsiness, difficulty falling asleep)
 - May be caused by a significant impact to the head, face, neck or body, with an impulsive force transmitted to the head, that causes the brain to move rapidly and hit the walls of the skull (for a visual description of how a concussion occurs, consult [How a concussion occurs](#))
 - Can occur even if there has been no loss of consciousness, in fact most concussions occur without a loss of consciousness
 - Cannot normally be seen on X-rays, standard CT scans or MRIs
 - Is typically expected to result in symptoms lasting 1- 4 weeks in children and youth (18 years or under), but in some cases symptoms may be prolonged

1.2. A concussion diagnosis

Medical doctors and nurse practitioners are the only healthcare professionals in Canada with licensed training and expertise to diagnose a concussion; therefore, all students with suspected concussions should undergo evaluation by one of these professionals.

1.3. Second Impact Syndrome

Research suggests that students who suffer a second concussion before they are symptom free from the first concussion are susceptible to a prolonged period of recovery, and possibly Second Impact Syndrome – a rare condition that causes rapid and severe brain swelling and often catastrophic results, including death.

1.4. Collaborative Team Approach

Concussion prevention and management requires the cooperation of all partners in the school community. To ensure the safety of students while they enjoy the many benefits of being active, parent(s)/caregiver(s), students, volunteers, all employees, and Grand Erie must understand and fulfill their responsibilities. It is critical to a student's recovery that the Return to Learn/Return to Physical Activity Plan be developed through a collaborative team approach led by the Administrator(s). This team should include the concussed student, their parent(s)/caregiver(s), school employee(s) and volunteers who work with the student, and the medical practitioner. Ongoing communication and monitoring by all members of the team are essential for the successful recovery of the student.

2.0 Signs and Symptoms of a Concussion

The first step to managing a concussion is being able to recognize common signs and symptoms. A concussion may be caused by a significant impact to the head, face, neck or body, with an impulsive force transmitted to the head. It is important to observe for one or more of the signs or symptoms of a concussion which may take hours or days to appear. Refer to the Student Concussion and Head Injury resource package for a list of common signs and symptoms.

3.0 Roles and Responsibilities**3.1. Appropriate Administrator(s)/Supervisor(s) will:**

- Perform an annual review to ensure guidelines align with current best practice recommendations and, at a minimum, OPASSE guidelines
- Ensure concussion education is made available to all school personnel and volunteers
- Implement concussion awareness and education strategies for students and their parent(s)/caregiver(s)
- Provide support to schools and employees to ensure enforcement of Return to Learn and Return to Physical Activity guidelines and the Student Concussion and Head Injury Policy
- Ensure that Grand Erie employees, including volunteer coaches, involved in physical activity education and supervision (includes but not limited to: recess supervision, curricular, interschool, and intramural physical activity, before and after school care), are trained to recognize signs and symptoms of a suspected concussion and what immediate action to take

- Ensure that information on the Student Concussion and Head Injury is available to the school community, including organizations that use the school facilities, such as community sports organizations and licensed child-care providers operating in Grand Erie
- Ensure each elementary and secondary school implements the *Concussion Management – Home Preparation for Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E1) and the *School Concussion Management – Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E-2)

3.2. **Administrator(s) will:**

- Implement the Student Concussion and Head Injury Procedure.
- Ensure all employees, volunteers, parent(s)/caregiver(s), and students are aware of the Student Concussion and Head Injury processes and understand their roles and responsibilities
- Ensure the Student Concussion and Head Injury Procedure is followed by all school employees (including occasional employees/support employees, recess supervisors), parent(s)/caregiver(s), students, and volunteers
- Arrange for concussion in-servicing for employees and coaching volunteers, and repeat as necessary
- Notify parent(s)/caregiver(s):
 - For a suspected concussion: *Tool to identify a Suspected Concussion* (Appendix C) and the *Documentation of Monitoring/Documentation of Medical Assessment Form* (Appendix D2)
 - For a diagnosed concussion: *Concussion Management – Home Preparation for Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E1) and the *School Concussion Management – Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E2)
 - Ensure safety guidelines are being followed
 - Work as closely as possible with students, parent(s)/caregiver(s), employees, volunteers, and health professionals to support concussed students with their recovery and academic success
 - Maintain up to date emergency contact and telephone numbers
 - Encourage parental/caregiver cooperation in reporting all non-school related concussions
 - Ensure concussion information is readily available to all school employees and volunteers
 - Ensure that all incidents have been reported, recorded and filed as necessary:
 - The Ontario School Boards' Insurance Exchange (OSBIE) incident report
 - Critical Injury Report
 - Coordinate a student conference to determine the individualized RTL Plan and to identify the RTL learning strategies and/or approaches required by the student based on the post concussions symptoms. See Appendix B for Return to Learn Strategies/Approaches
 - Once concussion is diagnosed, appoint primary employee to act as the student's school contact to ensure adequate communication and coordination of their needs
 - Approve any adjustments to the student's schedule as required
 - Alert appropriate employees about students with a suspected or diagnosed concussion
 - Prior to student return to school, ensure the completion and collection of the following documentation:
 - Documentation of Monitoring/Documentation of Medical Assessment Form

- (Appendix D2); and Concussion Management – Home Preparation for Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan (Appendix E1)
- Ensure the completion of the *School Concussion Management – Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E2)
- Ensure the completion and collection of the *Documentation for Medical Clearance* (Appendix F) prior to the student moving on to full participation in non-contact physical activities and full contact practices (RTPA Stage 5)
- File above documents (Appendix D2, E1, E2 and F) in student's OSR and provide copy to appropriate school employee(s)

3.3. **School Employees (Includes Administrator, teaching employees, support employees, coaches, volunteers, team trainers, officials, etc.) will:**

- Understand and follow the Student Concussion and Head Injury Procedure
- Attend and complete concussion training (this includes the online modules)
- Ensure age-appropriate concussion education, including prevention, is included for all students participating in activities that could result in a concussion. Have students and their parent(s)/caregiver(s) complete the *Player Code of Conduct* (Appendix G)
- Be able to recognize signs, symptoms and respond appropriately in the event of a concussion see the *Tool to Identify a Suspected Concussion* (Appendix C)
- For all coach/team trainers ensure completion of Coach/Teach Trainer Code of Conduct (Appendix I)
- Follow current safety guidelines related to concussions and implement risk management and injury prevention strategies
- Make sure that occasional teaching employees are updated on concussed student's condition

3.4. **Parent(s)/Caregiver(s) will**

- Review with their child the concussion information that is distributed through the school (e.g., *Concussion Information for Parents and Students* (Appendix A))
- Reinforce concussion prevention strategies with their child, for example the *Player Code of Conduct* (Appendix G)
- Understand and follow parent(s)/caregiver(s) roles and responsibilities in this policy
- Complete the Parent/Caregiver Code of Conduct (Appendix H)
- In the event of a suspected concussion, ensure their child is assessed as soon as possible by physician/nurse practitioner, preferably on the same day
- Cooperate with school to facilitate the *Concussion Management – Home Preparation for Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E1) and the *School Concussion Management – Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E2)
- Follow physician/nurse practitioner recommendations to promote recovery
- Be responsible for the completion of all required documentation
- Support their child's progress using the *Concussion Management - Home Preparation for Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E1) and the *School Concussion Management – Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E2)
- Collaborate with school to manage their child's suspected or diagnosed concussions appropriately
- Report non-school related concussion to Administrator(s) and complete Documentation of Monitoring/Documentation of Medical Assessment Form (Appendix D2)

3.5. Students will:

- Learn about concussions, including prevention strategies, signs and symptoms, concussion management and student roles and responsibilities, throughout applicable curriculum
- Immediately inform school employees of suspected or diagnosed concussions occurring during or outside of school
- Inform school employees if they experience any concussion related symptoms (immediate, delayed or reoccurring)
- Remain on school premises until parent(s)/caregiver(s) arrives if concussion is suspected
- Communicate concerns and challenges during recovery process with appropriate school employees, parent(s)/caregiver(s), and health care providers
- Complete the *Player Code of Conduct* (Appendix G)
- Follow concussion management strategies as per medical doctor/nurse practitioner direction and the *Concussion Management - Home Preparation for Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E1) and the *School Concussion Management – Return to Learn (RTL) and Return to Physical Activity (RTPA) Plan* (Appendix E2)

Reference(s):

- Student Concussion and Head Injury Policy (HS-10)
- Student Concussion and Head Injury Resource Package
- Ministry of Education School Board Policies on Concussion (PPM 158)
- Ontario Physical Activity Safety Standards in Education