Administrative Procedure 319

Concussion Identification and Management

Background

Research demonstrates that a concussion can have a significant impact on a student – cognitively, physically, emotionally and socially. Furthermore, activities that require concentration can cause a student's concussion symptoms to reappear or worsen. Without identification and proper management, a concussion can result in permanent brain damage and, in rare occasions, even death. A person who suffers a second concussion before he or she is symptom-free from the first concussion is 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.

Definitions

A *Concussion*:

- is a brain injury that causes changes in how the brain functions, leading to symptoms that 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 either by a direct blow to the head, face or neck, or 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 (in fact, most concussions occur without a loss of consciousness)
- cannot normally be seen on X-rays, standard CT scans or MRIs

Concussion is the term for a clinical diagnosis that is made by a medical doctor or a nurse practitioner. Because medical doctors or nurse practitioners are the only health professionals able to diagnose concussions, educators, school staff and volunteers cannot make the diagnosis of concussion. In the best interest of the student, it is critical that a medical doctor or nurse practitioner examine a student with a suspected concussion. Without medical documentation the student's participation in learning or physical activities will be restricted. This decision resides with the principal.

Procedures

1. Principal will:
    1.1 Facilitate attendance and/or completion of concussion in-servicing/training for staff and coaching volunteers, and repeat as necessary
    1.2 Ensure that all incidents are recorded, reported and filed, using Form 315-1-Student Accident Report, with the Associate Superintendent, Business and Finance as required by Administrative Procedure 315 – Illness/Injury at School

1.3 Prior to student return to school/activity after a suspected concussion, ensure completion and collection of the following documentation:

1.3.1 Form 319-1-No Observed Signs or Symptoms - Documentation of Concussion Monitoring/Medical Examination signed by a medical doctor or nurse practitioner

1.3.2 In the event of a diagnosed concussion, Form 319-2- Observed Signs or Symptoms – Documentation of Concussion Monitoring/Medical Examination, must be completed and Appendix G - Return to Learn/Return to Physical Activity Plan, is followed. A final note signed by a medical doctor/nurse practitioner must be presented before the student participates fully in physical activity/play

1.4 File the above documents in the student's file and provide copy to appropriate school staff

1.5 Alert appropriate staff about students with a suspected or diagnosed concussion and work as closely as possible with students, parents/guardians, staff, volunteers, and health professionals to support concussed students with their recovery and academic success

1.6 Attempt to obtain parental/guardian cooperation in reporting all non-school-related concussions

2. School Staff will:

2.1 Prior to student's participation in school, physical education, off-site activities, or intramural programs ensure the following documentation has been adequately administered:

2.1.1 Physical Activity Letter to Parents/Guardians, found in the BGRD school registration package for new and returning students

2.2 Prior to student's participating in interschool athletics, ensure the following documentation has been adequately administered and signed by parents where required, for each athletic season:

2.2.1 Permission and Acknowledgement of Risk – interschool athletics (part of online permission forms)

2.3 Provide concussion educational materials to students and athletes

2.4 Be able to recognize signs, symptoms and respond appropriately in the event of a suspected concussion;

2.5 Be familiar with the resources:

2.5.1 Appendix A - Concussion Recognition Tool

2.5.2 Appendix B - Concussion Guidelines for Teachers

2.5.3 Appendix C - Concussion Guidelines for Coaches/Trainers

2.6 Be able to use Appendix A - Concussion Recognition Tool

2.7 If a student suffers a blow that transmits a force to the head, fill out either Form 319-1 or Form 319-2,and send home to parents. The form used must be returned to the

school signed by the parent/guardian prior to a student re-engaging in physical activity

2.8 When a student concussion has occurred, in conjunction with the school principal, implement and track the documentation for a diagnosed concussion, Appendix G

2.9 Make available the following resources to parents and students as educational and treatment information as required:

2.9.1 Appendix A - Concussion Recognition Tool

2.9.2 Appendix C - Concussion Guidelines for Athletes

2.9.3 Appendix E - Concussion Guidelines for Parents/Caregivers

2.9.4 Appendix F - Parent Guide to Dealing with Concussions

2.10 Ensure the appropriate content from this Administrative Procedure for Concussion is included in teacher lesson plans and that the appropriate forms are carried on field trips and athletic events

2.11 Make sure that occasional teaching staff is updated on concussed student's condition

3. Parents/Guardians will:

3.1 Reinforce concussion prevention strategies with their child (e.g. following rules of fair play, playground safety rules, wearing properly fitted helmets, using equipment safely)

3.2 Understand and follow parents/guardian roles and responsibilities in the Administrative Procedure for Concussion Identification and Management

3.3 In the event of a suspected concussion, ensure child is assessed as soon as possible by medical doctor/nurse practitioner

3.4 Be responsible for the completion of all required documentation

3.5 Collaborate with school to manage suspected or diagnosed concussions appropriately

3.6 Follow medical doctor/nurse practitioner recommendations to promote recovery

3.7 Cooperate with school to facilitate concussion diagnosis and treatment and support their child's progress through the documentation for diagnosed concussion Form 319-1, Form 319-2, Appendix G

3.8 Report non-school related concussion to principal

4. Students will:

4.1 Learn about concussions, including prevention strategies, signs and symptoms, concussion management and student roles and responsibilities, throughout applicable curriculum, coaches modules and safety lessons connected to personal safety and injury prevention

4.2 Immediately inform school staff of suspected or diagnosed concussions occurring during or outside of school

4.3 Inform school staff if they experience any concussion related symptoms (immediate, delayed or reoccurring)

4.4 Remain on school premises until parent/guardian arrives if concussion is suspected

4.5 Follow concussion management strategies as per medical doctor/nurse practitioner direction and Appendix G

4.6 Communicate concerns and challenges during recovery process with school staff, parents/guardians, and health care providers

Reference: Section 22, 39, 43, 60, 61, 77, 78, 113 School Act
Section 16 Government Accountability Act
Guide to Education ECS to Grade 12
Policy and Requirements for School Board Planning and Reporting
parachutecanada.org
Administrative Procedure 315 – Student Illness/Injury at School

Forms: Form 315-1 - Student Accident Report Form
Form 319-1 - No Observed Signs/Symptoms-Concussion Management
Form 319-2 - Possible Observed Signs/Symptoms-Concussion Management