



TITLE: CONCUSSION MANAGEMENT

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1.0 OBJECTIVE

To support concussion prevention, identification and incident management.

2.0 DEFINITIONS

In this procedure,

- 2.1 **Board** means the Board of Trustees.
- 2.2 **Collaborative Team** means a group of school-based staff and the parents/guardians as well as the student. This group monitors the execution of a student's Return to School Plan after being diagnosed with a concussion.
- 2.3 **Concussion** A concussion is a traumatic brain injury that causes changes in how the brain functions, leading to cognitive, emotional/behavioural and/or physical signs and symptoms that can emerge immediately or in the hours or days after the injury. Concussions may be caused by a jarring impact to the head, face, neck or body, with an impulsive force transmitted to the head that causes the brain to move rapidly within the skull. Concussions occur with or without a loss of consciousness and cannot normally be seen on X-rays, standard CT scans or MRIs.
- 2.4 **Concussion Identification/Recognition** means the identification of concussion signs and symptoms which may or may not lead staff to suspect a concussion. In some instances, signs or symptoms may not have been reported, but because of the nature of the incident, staff may suspect a concussion which will be reported for 24-hour monitoring.
- 2.5 **Concussion Diagnosis** is the clinical result of medical assessment of a suspected concussion by a medical doctor or nurse practitioner.
- 2.6 **Curricular Activities** means classroom instruction in physical education and field trips involving physical activity.
- 2.7 **District** means the Ottawa-Carleton District School Board.
- 2.8 **Extracurricular activities** means voluntary activities that are outside the regular day school program, including intramurals.

- 2.9 **Inter-school Sports** means Board sponsored competitive programs which involve competition with outside teams.
- 2.10 **Intramurals** are extracurricular school-sponsored physical/recreation activities, which are not competitions against other outside teams/groups.
- 2.11 **High-risk Sports** means sports specified by the Ontario Physical and Health Education Association (Ophea) as having a high-risk for concussion (Appendix A: High Risk Sports - As defined by Ophea).
- 2.12 **Return to School** means a medically supervised, individualized, and a gradual strategy to support a student's return to school, after being diagnosed with a concussion, as outlined in the Return to Learning and Return to Physical Activity plans.
- 2.13 **Return to Learning** means a student's return to doing school work, including reading and writing, but does not include physical activities.
- 2.14 **Return to Physical Activity** means the student's return to participation in any physical activity that increases the student's heart rate. It includes a student's return to activities such as sports or physical education class.

3.0 RESPONSIBILITY

- 3.1 School principals will:
- a) ensure that all staff/coaches/supervisors of school activities are aware of their responsibilities in promoting awareness about concussion prevention, managing concussions, and their role in any Return to School Plan as outlined in this procedure;
 - b) annually ensure the training of staff and volunteer coaches on the recognition and management of concussions using Ophea's e-learning modules;
 - c) ensure that prior to commencement of tryouts for inter-school Board sponsored team, all participating students and their parent(s)/guardian(s) as well as involved coaches submit their confirmation of review of their respective concussion code of conduct, and one of the Ministry approved [concussion awareness resources](#);
 - d) ensure that in high risk sports at least two supervisors who are trained in the identification and management of concussion are available on site at the athletic event, including practices; and
 - e) collaborate with parents/guardians throughout the return to school process.
- 3.2 Educators will annually complete training in concussion identification and management using Ophea's e-learning modules.
- 3.3 Teachers, in addition to the training requirement in section 3.2, will:
- a) discuss safe play and rules of play with students prior to engaging in physical activity;

- b) ensure that any reported concussion signs or symptoms are communicated to parents; and
 - c) implement any educational accommodations as part of the student's Return to Learning plan.
- 3.4 Coaches/supervisors of any physical activity will:
- a) annually complete training in concussion identification and management using Ophea's e-learning modules;
 - b) uphold a culture of safety-mindedness and maintain a safe environment for all students;
 - c) discuss the rules of play, safe play, concussion prevention and management with students;
 - d) ensure that the practice schedule takes into consideration the safety and well-being of the students;
 - e) enforce the consequences for prohibited play and use the proper progression of skills in training and practices;
 - f) inform parents/guardians and students of the potential injuries or concerns associated with the activity ;
 - g) obtain signed parental permission prior to students' participation in extracurricular activities, including tryouts;
 - h) ensure the tool to recognize a concussion is readily accessible to them during all physical activities and follow it when a concussion event is recognized;
 - i) immediately remove from play any student who receives a significant impact to the head, face, neck, or elsewhere on the body, or displays red flag symptoms;
 - j) ensure completion of the Tool to Identify a Suspected Concussion when a concussion event is recognized, and follow the student's Return to School plan when concussion is suspected; and
 - k) promote communication between the student, parent/guardian and all sport organizations with which the student is registered in order to manage the student's diagnosed concussion.
- 3.5 Coaches of inter-school Board sponsored sports will, in addition to the responsibilities included in the above section, submit their confirmation of review of their [concussion code of conduct](#), and one of the Ministry approved [concussion awareness resources](#) prior to commencement of tryouts.
- 3.6 Students will:
- a) become familiar, in an age appropriate manner, with the signs and symptoms of concussion;

- b) take an increasing and age appropriate responsibility for their own safety and the safety of others, including maintaining a safe learning environment, safe play and respect for all;
 - c) follow the rules of play and accept the strict enforcement of consequences for prohibited play that is considered high-risk for causing concussion;
 - d) notify school staff, any sport organization with which they are registered, their parents/guardians and coaches of suspected or diagnosed concussions which occur at school or out of school;
 - e) not pressure injured peers to participate in any physical activity; and
 - f) when they have a diagnosed concussion, follow their Return to School plan with all the requirements included herein.
- 3.7 Prior to participation in tryouts for inter-school Board sponsored teams, students will, in addition to the responsibilities included in the above section, annually submit their confirmation of review of their respective [concussion code of conduct](#), and one of the Ministry approved [concussion awareness resources](#).
- 3.8 Parents/guardians will:
- a) Complete OCDSB 976 Inter-school Sport Consent Form prior to allowing their child(ren) to participate in tryouts;
 - b) complete the required documentation per this procedure in a timely manner;
 - c) notify the school and other sports organizations with which their child(ren) is(are) registered of any suspected or diagnosed concussions which occur at school or out of school;
 - d) stop all physical activities their child(ren) is(are) undertaking once they have a suspected concussion;
 - e) present their child(ren) to a medical doctor or nurse practitioner for a diagnosis as soon as reasonably possible on the day they received a significant impact to the head, face, neck, or elsewhere on the body and report to school the results of the medical assessment;
 - f) work in partnership with the school in support of a Return to School Plan prioritizing their child's return to learning before engaging in any physical activity; and
 - g) continue to monitor their child(ren) for returning or emerging signs and symptoms of a diagnosed concussion and notify the school and the sport organizations with which their child(ren) is(are) registered.
- 3.9 Parents/Guardians of students participating in tryouts for inter-school Board sponsored sports will, in addition to the responsibilities included in the above section, annually

submit their confirmation of review of their respective [concussion code of conduct](#), and one of the Ministry approved [concussion awareness resources](#).

4.0 PROCEDURES

- 4.1 There are specific expectations identified in PPM 158 related to participation in inter-school sports. However, concussion management, including roles and responsibilities that follow, applies to any physical activity including extra-curricular, curricular, and intramural sports, events, recess, clubs, field trips, athletics and inter-school teams, including try-outs and practices, regardless of whether it occurs at school or off site at a school-related activity.
- 4.2 Sections 4.17 onwards, including the Return to Learning and Return to Physical Activity Plans apply equally to students who sustain concussion during activities not related to school.

Concussion Prevention and Awareness

- 4.3 All students are taught about the risks of brain injuries through the specific expectations of the Ontario Health and Physical Education Curriculum and/or through learning opportunities related to Rowan's Law Day.
- 4.4 The District will provide all parents/guardians with information on the following:
- a) the definition and seriousness of concussion, possible mechanisms of injury, and second impact syndrome;
 - b) prevention of injuries from occurring at school and off-site events;
 - c) identification and management of a concussion;
 - d) the list of high risk sports and the precautionary measures required before partaking in these activities (Appendix A: High Risk Sports - As defined by Ophea
 - e) ;
 - f) the requirement to obtain a medical assessment in case of a suspected concussion;
 - g) the Return to School Plan and the requirement to obtain medical clearance prior to proceeding with the Return to Physical Activity Plan.
- 4.5 Before the start of any curricular or extracurricular physical activity, teachers, coaches/activity supervisors will meet with students to discuss the following:
- a) the rules of the activity and the importance of practicing fair and safe play;
 - b) the importance of wearing properly fitted protective equipment;
 - c) the risks for concussion associated with the activity and how to minimize those risks;

- d) the definition and causes of a concussion, signs and symptoms, and dangers of participating in an activity while experiencing the signs and symptoms of a concussion;
 - e) the student's responsibility to immediately inform the teacher and parent/guardian of any signs or symptoms of a concussion, and to remove him or herself from the activity;
 - f) the importance of ensuring a student with a suspected concussion is not left alone;
 - g) the urgent need for a medical assessment by a medical doctor or a nurse practitioner when there is a suspected concussion; and
 - h) the importance of permanently discontinuing a physical activity in order to help prevent long-term complications of a concussion.
- 4.6 Prior to commencement of tryouts for inter-school Board sponsored sports, coaches/supervisors will ensure they submit to school the confirmation of their annual review of their [concussion code of conduct](#), and one of the Ministry approved [concussion awareness resources](#).
- 4.7 Prior to participation in tryouts for inter-school Board-sponsored sports, students and their parents/guardians will complete and submit to school Appendix B: OCDSB 976 Inter-school Sport Consent Form.

Concussion Incident Management

- 4.8 Staff, including office staff and supervisors of any physical activity, will ensure the tool to identify a suspected concussion is readily available at all times and will follow it when a possible concussion event is recognized.
- 4.9 When a student is suspected of having suffered a concussion at school or during a school-organized activity, the activity supervisor will (Appendix C):
- a) stop the activity immediately;
 - b) when safe to do so, remove the student from the activity and check for red flag signs and symptoms; and
 - c) check the injured student for signs and symptoms of concussion using Appendix D: OCDSB 910 Tool to Identify a Suspected Concussion.
- 4.10 Appendix D will be completed and sent home with the student every time it is used regardless of the result.

Concussion Not Suspected

- 4.11 Where a concussion is NOT suspected after using Appendix D but a possible concussion event was recognized, the student will return to learning the same day with no physical activity, and with continued monitoring at school and home for 24 hours.

- 4.12 If after 24 hours of monitoring, no sign(s) and or symptom(s) have emerged, the parent/guardian will inform the school and the student will be permitted to resume physical activities. Medical clearance will not be required.

Red Flags Reported

- 4.13 Red flags include:
- a) neck pain or tenderness;
 - b) double vision;
 - c) weakness or tingling in arms or legs;
 - d) severe or increasing headache;
 - e) seizure or convulsion;
 - f) loss of consciousness (knocked out);
 - g) vomiting more than once;
 - h) increasingly restless, agitated or aggressive; and
 - i) getting more and more confused.
- 4.14 If the student experiences any of the above red flags, the coach/activity supervisor will:
- a) stop the activity immediately and call 911;
 - b) not move the student or remove the athletic equipment unless the student is having difficulty breathing;
 - a) stay with the student or ensure that the student is appropriately supervised until emergency medical services arrive;
 - b) contact the student's parent/guardian (or emergency contact) to inform them of the incident and advise that emergency medical services have been contacted;
 - c) monitor and document any changes in the student (i.e., physical, cognitive, emotional/behavioural);
 - d) if the student regains consciousness, encourage them to remain calm and to lie still;
 - e) not administer any medications related to the suspected concussion, unless required for other known conditions;
 - f) once the immediate medical needs of the student have been met, inform the school principal; and
 - g) complete an Ontario School Boards' Insurance Exchange [\(OSBIE\) Incident Report](#).

Concussion Suspected

- 4.15 Where concussion is suspected using Appendix D,
- a) the student will not be allowed to return to any physical activity that day even if they state that they are feeling better;
 - b) the student's parents/guardians (or emergency contact) will be contacted to inform them:
 - i. of the incident;
 - ii. of the reported concussion sign(s) and symptom(s) and the results of Appendix D;
 - iii. that the student must be accompanied home by a responsible adult; and
 - iv. that the student needs an urgent medical assessment as soon as possible that same day by a medical doctor or nurse practitioner.
 - c) designated staff will monitor and document any changes in the student;
 - d) the school office will fill out an [OSBIE Incident Report](#);
 - e) no medication will be administered to the student unless they require medication for other conditions (for example, insulin for a student with diabetes, inhaler for asthma); and
 - f) the student will not be left alone until a parent/guardian arrives and will not be allowed to operate a motor vehicle.

Medical Assessment

- 4.16 After suspecting a concussion and before resuming any physical activity, the student must be medically assessed by a doctor or nurse practitioner prior to returning to school. The parent/guardian must communicate with school the results of the medical assessment by completing Appendix E: OCDSB 908 Concussion Assessment Form prior to the student returning to school.
- 4.17 In rural or northern regions, a nurse with pre-arranged access to a medical doctor or nurse practitioner may be used to assess the suspected concussion.
- 4.18 Where the medical assessment does not result in a diagnosed concussion, the student will resume full participation in learning and physical activity with no restrictions.
- 4.19 Where a medical assessment results in a diagnosed concussion, regardless of whether the concussion was sustained in or out of school, the school will activate the Return to School Plan.

Return to School

- 4.20 A student with a diagnosed concussion requires cognitive and physical rest followed by stages of cognitive and physical activity which are best accommodated in the home environment under the supervision of the parent/guardian in consultation with the medical doctor or nurse practitioner or other licensed healthcare provider.
- 4.21 The principal will meet with the parents/guardians to:
- a) explain the roles and responsibilities in managing a diagnosed concussion (Appendix F);

- b) provide and explain the Return to School Plan, which includes:
 - i. Return to Learning (RTL) (Appendix G); and
 - ii. Return to Physical Activities (RTPA) (Appendix H).
 - c) provide them with OCDSB 909 Home Concussion Management form (Appendix I);
 - d) explain the Collaborative Team approach and their role on the team; and
 - e) ensure that an appropriate Return to School Plan is in place.
- 4.22 The school principal will form a Collaborative Team with the following responsibilities:
- a) reporting any observed changes in the student, including symptoms that may be worsening;
 - b) monitoring and coordinating support for the student's Return to School; and
 - c) adjusting accommodations as required until the student has successfully completed Step 6 of the Return to Physical Activity Plan.
- 4.23 In consultation with the Collaborative Team, when appropriate, the principal may direct further supports for the student or that an Individual Education Plan be developed for a student with a diagnosed concussion.
- 4.24 At any time during the Return to School plan, the student and/or parent/guardian must advise the school if the student experiences a return of any concussion symptoms so that the plan may be modified accordingly and where appropriate, a medical examination may be required.
- 4.25 A student cannot return to school until parents/guardians complete Appendix I: Home Concussion Management Form and return it to school where they confirm the student's successful completion of the following stages:
- a) Stage 2 of the RTL plan; and
 - b) Stage 2b of the RTPA plan; and

Return to Learning Plan

- 4.26 The District follows Ophea's Return to Learning plan (RTL) (Appendix G).
- 4.27 There are two parts to a student's RTL plan. The first part, Initial Rest to Stage 2, occurs at home and the second part, Stage 3a to 4b, occurs at school.
- 4.28 A student with a diagnosed concussion cannot begin spending time at school (Stage 3a) before 72 hours have elapsed from the concussion event.
- 4.29 At Stage 3a, the Collaborative Team will meet with the student and their parents/guardians to assess the student's individual needs and determine possible strategies and/or approaches for student learning (Appendix J).

- 4.30 The principal or designate will ensure that the teaching staff involved with the student is informed of the RTL plan and the need for possible accommodations.
- 4.31 The classroom teacher(s) will implement any educational accommodations (as deemed appropriate by the principal or designate) as a student with a diagnosed concussion returns to school.
- 4.32 At Stage 3a onwards, OCDSB 970 School Concussion Management Form (Appendix K) will be the communication tool between school and parents/guardians to manage the student's concussion.
- 4.33 The RTL Plan concludes with Stage 4b where the student returns full day to school, without adaptation of learning strategies and/or approaches.

Return to Physical Activity Plan

- 4.34 The Districts follows Ophea's Return to Physical Activity Plan (RTPA) (Appendix H).
- 4.35 There are two parts to a student's RTPA plan. The first part, Initial Rest to Stage 2, occurs at home and the second part, Stage 3 to 6, occurs at school.
- 4.36 A student can start physical activity in school (Stage 3) when they:
 - a) can tolerate light aerobic activities (completes activities permitted from Stage 2b); and
 - b) have not exhibited or reported a return of symptoms, new symptoms, or worsening symptoms.
- 4.37 At Stage 3 onwards, OCDSB 970 School Concussion Management Form (Appendix K) will be the communication tool between school and parents/guardians to manage the student's concussion throughout their RTPA plan.
- 4.38 Prior to proceeding to Stage 5, where the student can fully participate in all non-contact physical activities and in contact training/practice in contact sports, parents/guardians must obtain medical clearance and return to school a complete Appendix L: OCDSB 971 Medical Concussion Clearance Form.
- 4.39 The RTPA plan concludes with unrestricted return to and participation in contact sports and/or competitions.

5.0 REFERENCE DOCUMENTS

Education Act, 1990, Section 321

[Ministry of Education PPM 158, School Board Policies on Concussion, 2019](#)

Ophea documents related to [concussion](#)

Ministry- approved [concussion awareness resources](#)

OCDSB Policy P.137.SCO Concussion Management

OCDSB Policy P 029 SCO Field Trips, Excursion, Educ. Tours and Student Exchange

OCDSB Procedure PR.553.HS Student Accidents - Insurance and Reporting

OCDSB Procedure PR 674 SCO Field Trips - Overnight

OCDSB Procedure PR 683 SCO Field Trips - International

6.0 APPENDICES

(Please right-click on the links below to open appendices in new tabs)

Appendix A: [High Risk Sports - As defined by Ophea](#)

Appendix B: [OCDSB 976 Inter-school Sport Consent Form](#)

Appendix C: [Chart to Identify a Suspected Concussion – Steps and Responsibilities](#)

Appendix D: [OCDSB 910 Tool to Identify a Suspected Concussion](#) (electronic form)

Appendix E: [OCDSB 908 Concussion Assessment Form](#)

Appendix F: [Diagnosed Concussion - Stages and Responsibilities](#)

Appendix G: [Return to Learning \(RTL\)](#)

Appendix H: [Return to Physical Activities \(RTPA\)](#)

Appendix I: [OCDSB 909 Home Concussion Management form](#)

Appendix J: [Possible Strategies and/or Approaches for Student Learning](#)

Appendix K: [OCDSB 970 School Concussion Management Form](#)

Appendix L: [OCDSB 971 Medical Concussion Clearance Form](#)

Appendix M: [Frequently Asked Questions](#)

[Coaches/Supervisors Concussion Code of Conduct for Interschool Sports](#) [Parents/](#)

[Guardians Concussion Code of Conduct for Interschool Sports](#)

[Students Concussion Code of Conduct for Interschool Sports](#)