
REGULATION 5141

CONCUSSION AWARENESS

The purpose of the Concussion Awareness Policy and Regulation is to promote student health and safety and to foster healthy and safe environments in which students can learn. It is expected that this will be the joint responsibility of parents, students, school staff and the community.

Concussion Diagnosis

A concussion is a clinical diagnosis made by a medical doctor or nurse practitioner. It is critical that a student with a suspected concussion be examined by a medical professional.

Prevention strategies

Concussion prevention is important, “..... there is evidence that education about concussion leads to a reduction in the incidence of concussion and improved outcomes from concussion.....”¹

Any time a student/athlete is involved in physical activity, there is a chance of sustaining a concussion. Therefore it is important to take a preventative approach encouraging a culture of safety mindedness when students are physically active.

One approach to the prevention of any type of injury includes primary, secondary and tertiary strategies. Listed below are the three strategies for concussion injury prevention² :

- Primary – information/actions that prevent concussions from happening (e.g., rules and regulations, minimizing slips and falls by checking that classroom floor and activity environments provide for safe traction and are obstacle free):

¹ Journal of Clinical Sport Psychology, 2012, 6, 293-301; Charles H Tator, Professor of Neurosurgery, Western Hospital, Toronto, ON Can.

² Journal of Clinical Sport Psychology, 2012, 6, 293-301; Charles H Tator, Professor of Neurosurgery, Western Hospital, Toronto, ON Can.

- Secondary – expert management of a concussion that has occurred (e.g., Identification, and Management – Return to Learn and Return to Physical Activity) that is designed to prevent the worsening of a concussion:
- Tertiary – strategies help prevent long-term complications of a concussion (chronic trauma encephalopathy) by advising the participant to permanently discontinue a physical activity/sport based on evidence-based guidelines.

Identification Strategies

If a student receives a 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, and as a result may have suffered a concussion, the individual (e.g., teacher/coach) responsible for that student must take immediate action.

A concussion can only be diagnosed by a medical professional.

Communication Strategies

If you suspect a student may have a concussion, the student should stop playing the activity or sport right away. He/she should not be left alone and should be seen by a doctor as soon as possible that day. If a student is knocked out for more than a minute, call an ambulance to take him/her to the hospital immediately. Do not move him/her or remove athletic equipment like a helmet; wait for paramedics to arrive.

Anyone with a suspected concussion should not go back to play that day, even if he/she says he/she is feeling better. Problems caused by a head injury can get worse later that day or night. He/she should not return to activity until he/she has been seen by a doctor.

If an individual has a suspected concussion their parents should be contacted and advised of the potential concussion and advised that the individual should see a doctor that day.

If an individual has experienced a concussion or suspected concussion while participating in activities in the community the parent/guardian needs to advise school staff of the concussion or suspected concussion.

Concussion guidelines for Teachers/Coaches/Parents can be located at:

<http://educators.cattonline.com/>

<http://ppc.cattonline.com/resources/files/return-to-learn.pdf>

http://horizon.parachutecanada.org/wp-content/uploads/2014/10/Teachers_Concussion_Guidelines.pdf