

APPENDIX G

Huron Superior Catholic District School Board

Concussion Initial Identification and Response

School administrators, teachers, coaches, school first aiders, who have been specifically trained to identify signs and symptoms of a suspected concussion, are responsible for the identification and reporting of students who demonstrate observable signs of a head injury or who report concussion symptoms. In some instances, there may not be any observable signs, or the student may not have any symptoms, but because of the nature of the impact, a concussion is suspected. This suspected concussion/concussion event must be reported for 24-hour monitoring.

A) Initial Response:

Following a significant impact to the head, face, neck, or body, that is either observed or reported, and where the individual (for example, teacher/coach) responsible for that student suspects a concussion the following immediate actions must be taken:

- Student stops participation and is prohibited from physical activity/;
- Follow standard first aid practices.

B) Initial Identification of a Suspected Concussion:

- Check for Red Flag sign(s) and/or symptom(s) (Appendix H).
- If any Red Flag sign(s) and or symptom(s) are present, follow the Red Flag Procedure (Appendix I).
- If there are no Red Flag sign(s) and or Red Flag symptom(s), and the student can be safely moved, remove the student from the activity or game. Observe and question the student to determine if other concussion sign(s) and/ or other concussion symptom(s) (Appendix H) are present.
- If any one or more sign(s) and/or symptom(s) are present, a concussion should be suspected and a full check should be completed (including the Quick Memory Function

Check - Appendix J) to provide comprehensive information to parents/guardians and medical doctors/nurse practitioners.

- If any sign(s) and/or symptom(s) worsen, or red flags emerge, call 911 and follow Red Flag Procedure.
- Consult the Tool to Identify a Suspected Concussion (Appendix K) for an example of checklist that school staff may use to identify a suspected concussion, respond to and communicate the results to parents/guardians.

Please Note:

- Signs and/or symptoms can appear immediately after the injury or may take hours or days to emerge.
- Signs and symptoms may be different for everyone.
- A student may be reluctant to report symptoms because of a fear that they will be removed from the activity, their status on a team or in a game could be jeopardized or academics could be impacted.
- It may be difficult for younger students (under the age of 10), students with special needs, or students for whom English/French is not their first language to communicate how they are feeling.
- Signs for younger students (under the age of 10) may not be as obvious as in older students.

C) Following the Initial Identification of a Suspected Concussion

The instructions and responsibilities identified within this section must be followed if other concussion sign(s) and/or other concussion symptom(s) are observed, reported, and/or the student does not answer all the Quick Memory Function Check (Appendix J) questions correctly.

School Staff Response

- Do not allow the student to return to physical activity/practice/competition that day even if the student states that they are feeling better.
- Do not leave the student alone until a parent/guardian arrives.
- Contact the student's parents/guardians (or emergency contact) to inform them:
 - of the incident;

- of the reported concussion sign(s) and symptom(s) and the results of the Quick Memory Function Check (consult Appendix K - the Tool to Identify a Suspected Concussion);
- that the student must be accompanied home by a responsible adult; and
- that the student needs an urgent medical assessment as soon as possible that same day by a medical doctor or nurse practitioner. Provide parents with a Medical Concussion Assessment Form (Appendix L).
- Monitor and document any changes in the student. If any signs/symptoms worsen, call 911.
- Consult your school board's injury report form for documentation procedures.
- Do not administer medication unless the student requires medication for other conditions (for example, insulin for a student with diabetes, inhaler for asthma).
- The student must not operate a motor vehicle.

Information for Parents/Guardians

- A tool to identify a suspected concussion (Appendix K)
- The student needs an urgent medical assessment as soon as possible that same day by a medical doctor or nurse practitioner (consult the Medical Concussion Assessment Form – Appendix L).
- The student must be accompanied home by a responsible adult;
- The student must not be left alone;
- Parents/guardians must communicate the results of the medical assessment (that is, the student has a diagnosed concussion, the student does not have a diagnosed concussion) to the school principal/designate prior to the student returning to school. Consult the Medical Concussion Assessment Form (Appendix L).

Responsibilities of the School Principal/Designate

- The school principal/designate must inform all school staff (for example, classroom teachers, physical education teachers, intramural supervisors, coaches) and volunteers

(prior to communicating with volunteers consult the school board protocol for sharing of student information) who work with the student that the student must not participate in any learning or physical activities until the parents/guardians communicates the results of the medical assessment to the school principal/designate (consult the Medical Concussion Assessment Form – Appendix L)

D) A Possible Concussion Event is Recognized but no sign(s) and/or symptom(s) are identified:

Please note that concussion sign(s) and/or symptom(s) can occur hours to days later.

If a teacher/coach recognizes that a suspected concussion event occurred (due to the jarring impact) but no concussion sign(s) and/or symptom(s) (Appendix J) were observed or reported and the student correctly answers all the Quick Memory Function Check (Appendix J), the school staff response must be followed.

School Staff Response

- Contact the student's parents/guardians (or emergency contact) to inform them of the incident and provided them with the Tool to Identify a Suspected Concussion (Appendix K) and a Medical Concussion Assessment Form (Appendix L);
- Monitor the student for delayed sign(s) and/or symptom(s). If any sign(s) and/or symptom(s) emerge (observed or reported) during the school day, inform the parents/guardians that the student needs an urgent medical assessment as soon as possible that same day.
- The student must not return to physical activity for 24 hours as signs and/or symptoms can take hours or days to emerge. If the student has not shown/reported any signs and/or symptoms following a 24 hours observation period they may resume physical activity without medical clearance.

Information/Tools for Parents/Guardians

- A Tool to Identify a Suspected Concussion (Appendix K);
- A Medical Concussion Assessment Form (Appendix L);
- The student can attend school but cannot participate in any physical activity for a minimum of 24 hours;

- The student will be monitored (at school and home) for the emergence of sign(s) and/or symptom(s) for 24 hours following the incident;
- Continued monitoring by parents/guardians (beyond 24 hours) may be necessary as signs and/or symptoms may take hours or days to emerge; and
- parents/guardians must communicate the results of the continued monitoring to principal/designate as per school board policy:
 - If any sign(s) and/or symptom(s) emerge (observed or reported), the student needs an urgent medical assessment as soon as possible that same day by a medical doctor or nurse practitioner. Consult the Medical Concussion Assessment Form (Appendix L).
 - If after 24 hours of observation sign(s) and/or symptom(s) do not emerge, the student may return to physical activity. Medical clearance is not required.

Responsibilities of the School Principal/Designate

The school principal/designate must inform all school staff (for example, classroom teachers, physical education teachers, intramural supervisors, coaches) and volunteers (prior to communicating with volunteers consult the school board protocol for sharing of student information) who work with the student of the following:

- The student is allowed to attend school.
- The student must not participate in physical activity and must be monitored by teacher(s) and parents/guardians for 24 hours for the emergence of delayed sign(s) and/or symptom(s).
- The results of the continued monitoring by school staff:
 - If any sign(s) and/or symptom(s) emerge (observed or reported), the student needs an urgent medical assessment as soon as possible that same day by a medical doctor or nurse practitioner.
 - If after 24 hours of observation sign(s) and/or symptom(s) do not emerge, the student may return to physical activity. Medical clearance is not required.