



CONCUSSION MANAGEMENT POLICY

Concussion is a growing health concern, particularly with those involved in physical contact sports. It involves an injury to the brain that results in the temporary loss of normal function. Concussion results from a direct trauma to the head, such as from falling, getting hit or being in an accident.

Peninsula Grammar is committed to providing an environment that deals promptly and appropriately with all concussion incidents, or suspected concussion incidents, both in the short term and long term. It is our policy that:

- Appropriate first aid equipment/kit will be made available at all training and sporting events;
- First aid trained personnel will be in attendance at all training and sporting events;
- Our staff are trained to recognise signs of concussion and are able to respond promptly and appropriately;
- We establish procedures for responding to and supporting any instance of concussion on school grounds;
- We establish procedures for responding to and supporting any instance of concussion during the course of a school event, including sporting events; and
- We provide support and resources for staff, parents and students on concussion where appropriate to assist in recovery.

Recognition of Concussion

The Concussion Recognition Tool 5 (Appendix 1) should be used to help recognise concussion. A copy of the Concussion Recognition Tool 5 is available in all First Aid Kits.

It is important to note however that brief evaluation tools are not designed to formally diagnose concussion and cannot replace a comprehensive medical assessment.

Where a suspected concussion occurs onsite **immediate** contact should be made with the School Health Centre to assist in the response. If suspected concussion occurs after School Hours, or School Health are unavailable, an ambulance should be called for urgent medical assessment.

RED FLAGS – Call an ambulance

If there is concern after a head injury, including whether ANY of the following signs are observed or complaints are reported, first aid should be administered AND an ambulance should be called for urgent medical assessment:

- Neck pain or tenderness
- Double vision
- Weakness or tingling/burning in arms or legs
- Severe or increasing headache
- Seizure or convulsion
- Loss of consciousness
- Deteriorating conscious state
- Vomiting
- Increasingly restless, agitated or combative.

Where a person is unconscious they must only be moved by qualified health professionals, trained in spinal immobilisation techniques. In the event that no qualified health professional is on site an ambulance must be called.

OBSERVABLE SIGNS – Take appropriate action

If there are NO RED FLAGS but signs and symptoms that suggest concussion, as listed in the Concussion Recognition Tool 5 (see Appendix):

- The student should immediately be removed from any play/sport and not engage in further activity;
- The school must advise the parent/carer to collect the student and recommend a medical assessment, even if the symptoms resolve.

Contact with Parents/Guardians

Where, following use of the Concussion Recognition Tool 5 is used to assist with the identification of a suspected concussion, parents and carers must be contacted and the following actions taken:



- If concussion IS suspected:
 - o The School will contact the parent/carer and ask them to collect the student from school (unless Ambulance transport is required) and recommend a medical assessment, even if the symptoms resolve.
- If concussion ISN'T suspected:
 - o The parent or carer must be contacted and informed of the injury and that the Concussion Recognition Tool 5 has been used to assist with the identification of a suspected concussion.
 - o If, after being informed of this process the parent or carer wish to collect the student from School, they may do so.

Parents/Guardians will be provided with a copy of the Royal Children Hospital Head Injury Factsheet in instances of suspected or confirmed concussions, however, directed by School Health staff that the review of the factsheet does not constitute Medical Advice, and that they should refer to their treating doctor for further instruction.

Return to School

Where concussion is suspected or confirmed a student must not be allowed to return to school before having medical clearance. In every case, the decision regarding the return to school should be made by a medical doctor.

Following confirmed concussion incidents, the School will make all reasonable adjustments as guided by a student's medical doctor, including:

- Return to learning; and
- Modifying school programs to include more regular breaks, rests and increased time to complete tasks.

Return to Sport

Where concussion is confirmed a student will not be permitted to return to any sporting activity (including Physical Education classes) until such time as:

- Medical clearance has been provided, specifying that they are physically fit to do so; and
- A minimum of 14 days has passed since the confirmed concussion.

The 14 day exclusion period is mandatory and students will not be allowed to return to sport (including Physical Education classes) even with medical clearance, during this time.

Internal Communication

Staff, Student and Parents are required to advise School Health as soon as practicable when a student suffers a concussion .

Following advice of a concussion School Health will notify all relevant staff, including, but not limited to, The Director of Sport, Heads of Year, Classroom Teacher/s (including Physical Education Teachers), Mentor and Head of House, that the student has a confirmed concussion and must not participate in any sporting activities until such time as they advise otherwise.

Following the 14 day period and receipt of Medical Clearance, School Health will then notify the same staff group of the students ability to resume sporting activities.

Advice of return to sporting activities (including Physical Education classes) is only to be communicated by School Health.

Staff, Volunteers & Third Party Concussions

Where a suspected concussion relates to Staff, Volunteers & any Third Party (e.g. visiting students) the same process identified above regarding recognition of concussion should be followed.

Staff, Volunteers & any Third Party must inform the School in the event a concussion is suspected or sustained outside of the workplace.

Medical clearance must be obtained for any suspected or confirmed concussion before returning to work, regardless of where the incident took place (inside or outside of the workplace). Where adjustments are required



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for a staff members return to work they must discuss this with a member of the School Executive prior to their return.

Incident Reporting

In any instance where there is a suspected or confirmed concussion an Incident Report is required to be lodged.

Concussion Report

Due to the risks associated with repeated concussion the School Health Centre maintains a Concussion Register which details all suspected or confirmed concussion.

Parents are required to report all Concussions that occur outside of school hours to ensure the School holds all relevant medical information. Parents are requested annually through Operoo to advise the School Health Centre in the event of any suspected or confirmed concussions.

Employee Responsibilities

All Peninsula Grammar staff are to ensure that they have the knowledge and skills to identify and respond to a suspected concussion by familiarising themselves with this policy.

Implementation

This policy is implemented through a combination of:

- Staff training and supervision;
- Effective incident notification procedures;
- Effective communication procedures with the student's parents/carers; and
- Effective School Health monitoring procedures and record keeping.

Review

This policy is to be reviewed, approved and endorsed annually.

Last review June 2022.

Next review to be undertaken before June 2023.



APPENDIX 1 – CONCUSSION RECOGNITION TOOL 5

CONCUSSION RECOGNITION TOOL 5 ©

To help identify concussion in children, adolescents and adults



RECOGNISE & REMOVE

Head impacts can be associated with serious and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRT5) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion.

STEP 1: RED FLAGS – CALL AN AMBULANCE

If there is concern after an injury including whether ANY of the following signs are observed or complaints are reported then the player should be safely and immediately removed from play/game/activity. If no licensed healthcare professional is available, call an ambulance for urgent medical assessment:

- Neck pain or tenderness
- Severe or increasing headache
- Deteriorating conscious state
- Double vision
- Weakness or tingling/burning in arms or legs
- Seizure or convulsion
- Vomiting
- Loss of consciousness
- Increasingly restless, agitated or combative

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Do not attempt to move the player (other than required for airway support) unless trained to do so.
- Do not remove a helmet or any other equipment unless trained to do so safely.
- Assessment for a spinal cord injury is critical.

If there are no Red Flags, identification of possible concussion should proceed to the following steps:

STEP 2: OBSERVABLE SIGNS

Visual clues that suggest possible concussion include:

- Lying motionless on the playing surface
- Disorientation or confusion, or an inability to respond appropriately to questions
- Slow to get up after a direct or indirect hit to the head
- Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements
- Blank or vacant look
- Facial injury after head trauma

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STEP 3: SYMPTOMS

- Headache
- "Pressure in head"
- Balance problems
- Nausea or vomiting
- Drowsiness
- Dizziness
- Blurred vision
- Sensitivity to light
- Sensitivity to noise
- Fatigue or low energy
- "Don't feel right"
- More emotional
- More irritable
- Sadness
- Nervous or anxious
- Neck Pain
- Difficulty concentrating
- Difficulty remembering
- Feeling slowed down
- Feeling like "in a fog"

STEP 4: MEMORY ASSESSMENT

(IN ATHLETES OLDER THAN 12 YEARS)

- Failure to answer any of these questions (modified appropriately for each sport) correctly may suggest a concussion:
- "What venue are we at today?"
 - "Which half is it now?"
 - "Who scored last in this game?"
 - "What team did you play last week/game?"
 - "Did your team win the last game?"

Athletes with suspected concussion should:

- Not be left alone initially (at least for the first 1-2 hours).
- Not drink alcohol.
- Not use recreational/ prescription drugs.
- Not be sent home by themselves. They need to be with a responsible adult.
- Not drive a motor vehicle until cleared to do so by a healthcare professional.

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ANY ATHLETE WITH A SUSPECTED CONCUSSION SHOULD BE IMMEDIATELY REMOVED FROM PRACTICE OR PLAY AND SHOULD NOT RETURN TO ACTIVITY UNTIL ASSESSED MEDICALLY, EVEN IF THE SYMPTOMS RESOLVE

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