



HURON-PERTH CATHOLIC

District School Board

Concussion Management

Adopted:	April 27, 2015	Policy #:	P 2.1.19.
Revised:	February 24, 2020	Policy Category:	2.1. School Operations

BELIEF STATEMENT: (NEW)

The Huron-Perth Catholic District School Board (the Board) believes that all persons are created in the image and likeness of God and are entitled to dignity, respect, and compassionate care.

The Board believes that student well-being is foundational to learning, and that safe, healthy, and supportive school environments are essential for students to flourish academically, socially, emotionally, spiritually, and physically.

The Board believes that concussions are a significant health concern and must be addressed through awareness, prevention, timely identification, and responsible management. The Board is committed to ensuring that students who sustain a suspected or diagnosed concussion are supported through a safe and gradual return to learning and physical activity, guided by current research and provincial expectations.

The Board believes that the health care needs of students are primarily the responsibility of parents and guardians, and that effective concussion management depends on strong collaboration between families, schools, and medical professionals. Through shared responsibility and clear communication, the Board seeks to protect student safety and promote recovery in a manner that reflects our Catholic commitment to care, stewardship, and the common good.

FORMER POLICY STATEMENT:

~~The Huron-Perth Catholic District School Board is committed to helping all students succeed and lead safe, healthy and active lives. To this end, the HPCDSB supports concussion awareness, prevention identification, management tracking and training in our schools.~~

~~The Board is also committed to protecting and promoting student health and safety while in its care. To this end, in matters pertaining to significant public health issues, the board will seek direction from Huron-Perth Public Health.~~

~~The Board believes that the ongoing provision of relevant health information and health care needs of students is primarily the responsibility of the parents and guardians.~~

PROPOSED POLICY STATEMENT:

The Huron-Perth Catholic District School Board is committed to promoting student well-being and ensuring safe, healthy, and supportive learning environments. The Board recognizes that concussions are a significant health concern and is committed to concussion awareness, prevention, identification, and appropriate management in all schools and Board-sponsored activities.

The Board is committed to protecting and promoting student health and safety while in its care. In matters pertaining to significant public health issues, the Board will seek direction from Huron Perth Public Health and other relevant authorities as appropriate.

The Board believes that the ongoing provision of relevant health information and health care needs of students is primarily the responsibility of parents and guardians.

RESPONSIBILITIES: (NEW)

The Director of Education shall ensure that administrative procedures are in place to support the implementation of this policy, including requirements related to training, reporting, documentation, and safe return-to-learn and return-to-physical-activity protocols. Administrative procedures shall include requirements for a safe and graduated Return to Learn and Return to Physical This policy and the corresponding administrative procedures shall align with applicable legislation and Ministry of Education direction, including Rowan's Law (2018) and Policy/Program Memorandum 158, and the Ontario Physical Safety Standards in Education (OPHEA).

Principals are responsible for ensuring that concussion management procedures are implemented consistently within their schools and that staff are aware of their roles and responsibilities.

PROCEDURE: Moved and revised in an Administrative Procedure

~~The Concussion Policy Guidelines outline corresponding practices and strategies to implement these practices.~~

~~School principals shall administer and implement the Concussion Policy Guidelines within their Catholic schools and inform all parents/guardians of the corresponding strategies.~~

Roles and Responsibilities

Principal

~~The principal of each school shall be responsible for the adherence to the concussion protocol. In case of the principal's absence, the vice-principal or the teacher designated to be in charge shall assume this responsibility.~~

~~The Principal shall ensure that:~~

- ~~● Individuals participating in board sponsored interschool sports, including students, parents, coaches, team trainers and officials, have reviewed the approved Concussion Awareness Resources annually and track the confirmation of the review~~
- ~~● School staff participate in annual concussion training~~
- ~~● An OSBIE report be completed immediately when a student sustains a head injury~~

- ~~All staff are aware that The Tool to Identify a Suspected Concussion (Appendix B) is in the First Aid Kit if a student hits their head~~
- ~~Parents are given all forms as necessary~~
- ~~Appendix D, Documentation of Medical Examination, has been completed and received for all suspected concussions~~
- ~~If a concussion is diagnosed by a medical practitioner, parents/guardians are provided with the Concussion Management Procedures: Return to Learn and Return to Physical Activity (Appendix C) and Documentation for a Diagnosed Concussion—Return to Learn/Return to Physical Activity Plan (Appendix E)~~

Staff

The Staff/Coach shall:

- ~~Participate in annual concussion training~~
- ~~Review the Code of Conduct for individuals participating in board-sponsored interschool sports~~
- ~~Ensure an athlete suspected of incurring a concussion or injury has been removed from field of play/learning environment~~
- ~~Use Appendix B, Tool to Identify a Suspected Concussion, as a tool to help identify a suspected concussion~~
- ~~Ensure that the student does not participate~~
- ~~Be sure the student is not left alone~~
- ~~Monitor the student/athlete closely for any signs and symptoms of possible physical, mental or emotional changes (Appendix B)~~
- ~~Inform the Parent/Guardian of the suspicion of a concussion and the important need to have the head injury evaluated by a medical doctor as soon as possible~~
- ~~Inform the school office as soon as possible~~
- ~~Complete an OSBIE form—These forms are available in your school office (Appendix G).~~

If Loss of Consciousness

The staff/coach is to:

- ~~Initiate Emergency Action Plan—call 911.~~
- ~~Assume there is a possible neck injury and try to limit the movement of the student.~~
- ~~Stay with the student and monitor for signs of deterioration (signs of physical, mental or emotional changes) until Emergency Medical Services arrive.~~

Parent(s)/Guardian(s)

The Parent(s)/Guardian(s) shall:

- ~~Review the approved Concussion Awareness Resources and Code of Conduct prior to their child participating in board-sponsored interschool sports.~~
- ~~Inform the school when a student receives a head injury or concussion outside of the school day.~~
- ~~Be familiar with and follow the mandatory protocol.~~
- ~~Communicate regularly with the school to support the return of the child to school.~~

DEFINITIONS: (NEW)

Concussion is the term for a clinical diagnosis that is communicated by a physician or a nurse practitioner. School staff, board staff, or volunteers cannot make a concussion diagnosis, but must advise students who are suspected of having sustained a concussion and their parents to seek a medical assessment by a physician or a nurse practitioner. The definition of concussion

given below is adapted from the definition provided in the concussion protocol in the Ontario Physical Activity Safety Standards in Education.

A concussion:

- is a brain injury that causes changes in the way in which the brain functions and that can lead to symptoms that can be physical (e.g., headache, dizziness), cognitive (e.g., difficulty in concentrating or remembering), emotional/behavioural (e.g., depression, irritability), and/or related to sleep (e.g., drowsiness, difficulty in falling asleep)
- may be caused either by a direct blow to the head, face, or neck or by 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 by means of medical imaging tests, such as X-rays, standard computed tomography (CT) scans, or magnetic resonance imaging (MRI) scans

Research demonstrates that a concussion can have a significant impact on an individual – cognitively, physically, emotionally, and/or socially. Most individuals with a concussion get better in one to four weeks, but, for some, the healing process may take longer. It is possible for a concussion to have long-term effects. Individuals may experience symptoms that last for months or even years – symptoms such as headaches, neck pain, or vision problems. Some individuals may even experience lasting changes in their brain that lead to issues such as memory loss, difficulty concentrating, or depression. It should also be noted that if an individual suffers a second concussion before they are free from symptoms sustained from the first concussion, this may lead to “second impact syndrome”, a rare condition that causes rapid and severe brain swelling and often has catastrophic results.

REFERENCES:

- www.ophea.net
- Policy/Program Memorandum 158
- Rowan’s Law, 2018

RESOURCES, APPENDICES AND FORMS:

- Administrative Procedure 2.1.14: Concussion Management (in development).