

Staunton High School Concussion/Traumatic Brain Injury Policy (Current)

The Staunton City School system desires the safe return of student-athletes to both cognitive and physical activities following an injury, but particularly after a concussion. The goals of this policy are to ensure (i) that school personnel, coaches, and volunteers are educated on concussions, (ii) that student-athletes and their parents/guardians are educated on concussions annually, (iii) that concussed student-athletes are identified and removed from play immediately, and referred appropriately, and (iv) that concussed student-athletes return to academics and physical activity only after receiving appropriate medical care and adequate time to heal, and are symptom free.

Definitions

Concussion: a type of traumatic brain injury (TBI), caused by a bump, blow, or jolt to the head (i.e. head to head contact) or blow or fall to the body (i.e. whiplash, or knocked to the ground) that causes the brain to move rapidly back and forth in the skull causing a change in the way the brain normally works (i.e. cognitive function and physical ability). A concussion can occur with or without a loss of consciousness, and proper recognition and management are essential to the immediate safety and long-term future of the injured individual.

Licensed Health Care Provider: a physician (MD), physician assistant (PA), osteopath (DO) or athletic trainer (ATC) licensed by the Virginia Board of Medicine; a neuropsychologist licensed by the Board of Psychology; or a nurse practitioner (NP) licensed by the Virginia State Board of Nursing.

Student-Athlete: a student enrolled in the Staunton City School system who participates on one or more of the school-sponsored athletic teams.

Return to Learn (RTL): student-athlete's ability to participate cognitively in all academics without academic accommodations that were brought on by the concussive injury.

Return to Play (RTP): to participate in a non-medically supervised practice, game, or athletic competition. During the return to play progression, the student-athlete follows a step-wise increase in activity that is medically directed and/or supervised over at least a five-day period.

Academic Accommodations: temporary restrictions/modifications on a student-athlete's participation in academics/cognitive exertion that support a controlled, progressive increase in cognitive activities while the student-athlete recovers from a brain injury, allowing the student-athlete to participate in classroom activities and learn without worsening symptoms and potentially delaying healing.

I. Staunton High School Concussion Management Team

- a. The Staunton High School Concussion Management Team (CMT) shall be appointed by the Superintendent of Schools and shall consist of a school administrator, an athletic administrator, a medical staff member (such as school nurse, team physician, athletic trainer, or other licensed health care provider), a coach, a parent or guardian of a student-athlete, a student athlete, and any such other person the Superintendent determines will assist the CMT in its actions.
- b. The CMT shall develop concussion education training materials for school personnel, coaches, volunteers, student-athletes, and parents or guardians of student-athletes. The CMT shall also develop concussion reporting, management, and review protocols for the school division. The CMT shall maintain a record of all incidents where a student-athlete has been suspected of sustaining a concussion.
- c. The CMT shall meet annually, or more often if deemed necessary, and shall evaluate the division's concussion education materials/presentations, policy, protocols, and concussion reporting/management.

II. Required Concussion Education for School Personnel, Coaches, and Volunteers

- a. School personnel shall receive concussion education that shall consist of signs and symptoms of a concussion, proper referral if suspicion of a concussion, academic accommodations, and protocol for "Return to Learn" in accordance with Va. Code § 22.1-271.6.
- b. Every coach, assistant coach, adult volunteer, or other person serving in a coaching or advisory role over student-athletes during games, competitions, or practices shall receive concussion education that shall consist of recognizing the signs and symptoms of sports-related concussions, strategies to reduce the risk of concussions, how to seek proper medical evaluation of and treatment for concussions, and the protocol for safe "Return to Learn" and "Return to Play."
- c. Staunton High School and the CMT shall maintain a written or electronic record of the names and dates of completion for all persons completing the school's concussion education training.
- d. Staunton High School shall ensure that no person is allowed to coach or advise a student-athlete in any practice, game, or competition who has not completed the school's concussion training within the previous twelve months.

III. Education and Materials for Student-Athletes and Parent/Guardians

- a. Prior to participating in any extracurricular physical activity, each student-athlete and the student-athlete's parent or guardian shall review concussion education training materials and/or attend a concussion education presentation developed by the CMT and

sign a statement acknowledging receipt of such information. The concussion training materials shall describe the definition of and the short-and long-term health effects of concussions.

b. The signed statements (Concussion Education Acknowledgement Form) acknowledging the receipt of concussion education shall be valid for one calendar year and will satisfy the concussion education requirements for all of a student-athlete's extracurricular physical activities in accordance with Va. Code § 22.1-275. Signed statements will be kept on file, either digitally or in print by the Athletic Department of Staunton High School.

IV. Removal from Extracurricular Physical Activities

a. A student-athlete suspected by a student-athlete's coach, athletic trainer, or team physician of sustaining a concussion or brain injury in a practice, game, or competition shall be removed from the activity immediately, evaluated and, if necessary, referred for further treatment. A student-athlete who has been removed from play, evaluated, and suspected to have sustained a concussion or brain injury shall not return to play that same day.

b. In determining whether a student-athlete removed from play is suspected of having sustained a concussion, an appropriate licensed health care provider or other properly trained individual, shall evaluate the student-athlete at the time of removal utilizing a standardized concussion sideline assessment instruments.

c. The determination of whether a student-athlete removed from play is suspected of having sustained a concussion and shall remain removed from play shall be the sole determination of the licensed health care provider or other properly trained individual conducting the concussion sideline assessment. Such determination is final and may not be overruled by another licensed health care provider or other properly trained individual, coach, assistant coach, school staff, or other person serving in a coaching or advisory role, the student-athlete, or the parent or guardian of the student-athlete for the day of the injury.

d. The coach and/or parent or guardian of a student-athlete may elect not to return the student-athlete to play, even if after the concussion sideline assessment it is determined that the student-athlete is no longer suspected of having sustained a concussion.

V. Academic Accommodations and Return to Learn

a. School personnel shall be alerted to cognitive and academic issues that may be experienced by a student who has suffered a concussion or other head injury, including (i) difficulty with concentration, organization, and long-term and short-term memory; (ii) sensitivity to bright lights and sounds; and (iii) short-term problems with speech and language, reasoning, planning, and problem solving.

b. School personnel shall accommodate the gradual return to full participation in academic activities by a student who has suffered a concussion or other head injury as appropriate, based on the recommendation of the student's licensed health care provider as to the appropriate amount of time that such student needs to be away from the classroom.

Due to cognitive activity having the potential to exacerbate and potentially prolong symptoms of a concussion, if a student has been diagnosed with a concussion, academic accommodations may be recommended.

VI. Return To Play Protocol

- a. No student-athlete shall be allowed to return to participation in extracurricular physical activities, which includes the student-athlete's practices, weightlifting/conditioning, games, or competitions, until the student-athlete presents a written medical release from the student-athlete's licensed health care provider. The written medical release shall certify that (i) the provider is aware of the current medical guidance on concussion evaluation and management; (ii) the student-athlete no longer exhibits signs, symptoms or behaviors consistent with a concussion at rest or with exertion (both physical and cognitive); (iii) the student-athlete is no longer under academic accommodations that were engaged due to the concussion, and (iv) that the student-athlete has successfully completed a "Return to Play" progression. In accordance with Va. Code § 22.1-271.5, the "Return to Play" progression shall be determined by the student-athlete's licensed health care provider but shall last a minimum of five days, not necessarily including weekend days.
- b. A student-athlete will not be allowed to begin the return to play progression until they have been symptom free for 24 hours and able to complete a full day of school with no symptoms.
- c. The coach, school nurse, and/or athletic trainer of a student-athlete may elect not to allow a student-athlete to return to extracurricular physical activities, even after the production of written medical release from the student-athlete's licensed health care provider, if the coach, school nurse, or athletic trainer observes continued signs and symptoms of a concussion. If the student-athlete's coach, school nurse, or athletic trainer makes such a decision, he/she shall attempt to communicate the observations and concerns to the student-athlete's parent or guardian and the student-athlete's licensed health care provider within one day of the decision not to allow such student-athlete to return to extracurricular physical activities.

VII. Helmet Replacement and Reconditioning

- a. To prevent and/or reduce the incidence of concussion, all helmets used in school physical activities must conform to the National Operations Committee on Standards for Athletic Equipment (NOCSAE) and be certified as conforming by the manufacturer at the time of purchase.
- b. Reconditioned helmets that have been purchased must be recertified as conforming to the NOCSAE by the reconditioner.
- c. All helmets purchased and used must have a minimum of a four star rating.

VIII. Athletic Activities Conducted by Non-School Organizations on School Property

The school division may provide this policy and the Board of Education's Guidelines for Policies on Concussions in Student-Athletes to organizations sponsoring athletic activity for student-athletes on school property. The school division does not enforce compliance with the policy or Guidelines by such organizations.

Protocol

The following protocol will be used for suspected concussions:

● **Evaluation/Communication**

- Evaluation will be performed in a controlled environment or on the field, depending on the situation, and the judgement call of the ATC or Team Physician.
- The evaluation will either be Concussion Vital Signs (CVS), Concussion Vital Signs sideline assessment tool or other approved form of a concussion evaluation.
- If athlete is diagnosed with a concussion, the ATC will inform the parent/guardian via telephone or in person.
- When the ATC speaks to the parent/guardian it will be reviewed the policy Staunton High School and the process for returning the athlete to learn and play.
- ATC will e-mail the teachers, administrator, school counselor, AD, and coach of that athlete that they have been diagnosed with a concussion and what, if any, academic accommodations are to be given. The parent can also be on this e-mail if they give the ATC an e-mail address.
- It will be expected that the athlete check-in with the AT Staff every day and fill out a "Daily Concussion Symptom Checklist" on the Concussion Vital Signs website. However, if the ATC or Doctor has instructed them to not come to school, the athlete will be expected to stay home and not come see the ATC until they return to school.

- **Return to Play and Return to Learn**

- An athlete will begin the Return to Play (RTP) once they are symptom free for 24 hours, without the help of medication, and complete a full day of school. This full day of school can be with accommodations.

- An athlete can begin Return to Learn (RTL) once they can be present in school for a full day without their symptoms worsening.

- The ATC will then progress the athlete through RTP and RTL as they remain symptom free, and communicate this to the teachers, administration, AD, coach, and parent/guardian.

- Return to Learn Progression:

- Academic accommodations will be modified and/or removed as student's condition improves.

- A student is "full return to learn" once they can complete at least 1 full school day without any academic accommodations, remain asymptomatic, and fully participate in cognitive activity.

- Return to Play Progression:

- **Stage 1:** Student-athlete may begin with 20 minutes of light cardio activity. Example: jog, stationary bike.

- **Stage 2:** Student-athlete may begin up to 25-35 minutes of jogging, agility drills, and light weight lifting.

- **Stage 3:** Student-athlete may begin up to 45-60 minutes of non-contact practice that does not exceed 75% of full exertion.

- **Stage 4:** Student-athlete may participate in up to 2 hour non-contact practice, not exceeding 85% exertion. Individualized plan will be made if team practice plan does not meet these criteria.

- **Stage 5:** Student-athlete allowed to participate in full contact practice at 100% exertion. Individualized plan will be made if team practice does not meet these criteria.

- Once the athlete is back to full school with no accommodations (RTL) and has completed the RTP with no symptoms, then they will be cleared from their concussion. If they have a baseline Concussion Vital Signs test, they will also need to be back to baseline with a re-test on Concussion Vital Signs.

- If symptoms present during the RTP, student-athlete must regress to previous step until symptom free.

- Only one stage at a time may be completed within a 24 hour period.

- **Doctor Communication/Referral**

- If it has been two weeks without an improvement and/or worsening in symptoms and the athlete has not already been to the doctor, the ATC will call the parent/guardian and refer them to the doctor for additional evaluation. Once referred, a 504 academic care plan will be created in accordance with the Board of Education.
- If athlete has already been evaluated by a doctor, the ATC will keep the doctor updated on athlete's condition, and only proceed with RTP and RTL if doctor has cleared the athlete. This clearance must be in a note e-mailed, faxed, or handed to the ATC.

- **Documentation**

- Concussion Vital Signs tests and Concussion Symptom Checklists will be stored on the Concussion Vital Signs servers and accessible by the authorized appropriate healthcare providers logging into the website.
- Healthcare notes will be documented on the EMR but also kept in the athlete's individual paper file.
- Concussion Home Care Instructions, and any other paper documentation of the concussion will be documented in the EMR but then kept in the athlete's individual paper file.
- E-mail communications will be printed and kept in the athlete's individual paper file.