



Title: **IDENTIFICATION AND MANAGEMENT OF ACUTE AND EARLY CONCUSSIONS (Interim)**

Adopted: May 9, 2016

Revised: September 2020, February 2021

Authorization: Ontario Ministry of Education PPM 158

POLICY

It is the policy of the Bloorview School Authority that awareness, training, prevention, identification and response to concussions or possible concussions is a serious concern and will be treated as such in all school related activities.

BACKGROUND

1. *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.

2. 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);

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- 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.
3. A Concussion affects the way a person may think and remember things and can cause a variety of symptoms and signs. One does NOT need to lose consciousness to have a concussion.
 4. It should also be noted that injuries that result from a concussion may lead to “second impact syndrome”, which is a rare condition that causes rapid and severe brain swelling and often catastrophic results, if an individual suffers a second concussion before he or she is free from symptoms sustained from the first concussion.
 5. 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.
 6. In some cases, a concussion has long-term persistent 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.
 7. The Ministry of Education expects all school boards in Ontario to develop and maintain a policy on concussions including strategies to develop awareness of the seriousness of concussions; strategies for the prevention and identification of concussions; management procedures for diagnosed concussions; and training for board and school staff
 8. The Ontario Physical and Health Education Association has released a concussion protocol as part of the Ontario Physical Education Safety Guidelines (available at <http://safety.ophea.net>). The protocol, which is based on current research, evidence and knowledge, contains information on concussion prevention, symptoms and signs of a concussion, initial response procedures for a suspected concussion, and management procedures for a diagnosed concussion, including a plan to help a student return to learning and to physical activity.
 9. The Ministry of Education considers the concussion protocol outlined by the Ontario Physical Education Association to be the minimum standard for procedures related to concussions.
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GUIDING PRINCIPLES

10. The Bloorview School Authority is committed to promoting awareness of safety and recognizing that the health and safety of students are essential preconditions for effective learning. All partners in education, administrators, educators, school staff, students, parents and school volunteers, have important roles to play in promoting student health and safety and in fostering and maintaining healthy and safe environments in which students can learn.
11. Anytime a student 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.
12. Knowledge of how to properly manage a diagnosed concussion is critical in a student's recovery and is essential in helping to prevent the student from returning to learning or physical activities too soon and risking further complications. Ultimately, this awareness and knowledge could help contribute to the student's long-term health and academic success.
13. The Bloorview School Authority staff will take direction from Medical personnel regarding individualized response to a concussion and return to normal activities.
14. The Bloorview School Authority has developed a support document for concussion related brain injuries.

PROCEDURES

Awareness

15. On an annual basis, during one of the first "All Staff" meetings at the beginning of each school year in September, an awareness session will be provided for Bloorview School Authority staff, on the seriousness of concussions.
 16. To establish consistency of concussion awareness, the government of Ontario developed set of [Concussion Awareness Resources](#) will be used in the awareness sessions.
 17. Where relevant, student learning about concussions will be connected to the curriculum. To further support awareness among students, recognition will be given to the annual concussion awareness day ([Rowan's Law Day](#)) which occurs on the last Wednesday in September.
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Training

18. Annual concussion training for relevant school staff about the policy itself and the content of the approved Concussion Awareness Resources will be provided. If practical, the training will coincide with the last Wednesday in September (Rowan's Law Day). The training on concussions should also be provided for new school staff to access training throughout the school year.

Prevention

19. 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.
20. The Bloorview School Authority support document on concussions includes strategies for **preventing and minimizing the risk of sustaining concussions.**

Identification

21. Staffs should refer to the BSA support document when seeking information regarding the identification of suspected concussions.

If a Suspected Concussion is Identified

22. Immediately and safely remove the student who is suspected of having sustained a concussion from an activity, regardless of whether the concussion was sustained or is suspected to have been sustained at school or elsewhere;
 23. Call CODE BLUE and Emergency Medical Services if there is an emergency or if a student has any serious signs and/or symptoms;
 24. Inform the student and the student's parents, if the student is under 18 years of age, that removal from the activity was necessary due to a suspected concussion;
 25. Advise the student who is suspected of having sustained a concussion and the student's parents, if the student is under 18 years of age, that the student should undergo a medical assessment by a physician or nurse practitioner;
 26. Share information about the school's process for supporting a student with a suspected concussion, and the school's Return to School plan.
 27. A student who is suspected of having sustained a concussion, or the student's parents, if the student is under 18 years of age, should be encouraged to provide confirmation that the student has undergone a medical assessment by a physician or nurse practitioner to support the student's return to learning;
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28. A student who is suspected of having sustained a concussion, or the student's parents, if the student is under 18 years of age, must provide confirmation that the student has undergone a medical assessment by a physician or nurse practitioner and has not been diagnosed with a concussion, along with confirmation that the student has been medically cleared, before the student can return to full participation in physical activity.
29. For a complete list of signs and/or symptoms of a concussion, please refer to the Bloorview School Authority support document.

Return to School Plan

30. A Return to School Plan for students who have been diagnosed with a concussion, regardless of whether the concussion was sustained at school or elsewhere must be completed.
 31. The Return to School Plan must support both the student's return to learning and their return to physical activity.
 32. The return-to-learning process is designed to meet the particular needs of the student, so there is no preset plan of strategies and/or approaches to assist with the return-to-learning activities.
 33. Students are expected to follow graduated steps in order to return to learning and to physical activity;
 34. The return plan requires that the student and the student's parents, if the student is under 18 years of age, be informed of the importance of sharing with the school any medical advice or recommendations received in relation to the student's concussion diagnosis and their return to learning and physical activity;
 35. The return plan requires require that the student and the student's parents, if the student is under 18 years of age, be informed of the importance of disclosing the concussion diagnosis to any relevant organizations with which the student is involved or registered (e.g., sport organizations);
 36. The return plan requires that the student or the student's parents, if the student is under 18 years of age, provide confirmation of medical clearance by a physician or nurse practitioner as a prerequisite for the student's return to full participation in physical activity
 37. If a student who is recovering from a concussion is experiencing long-term difficulties that begin to affect their learning, the school staff should follow established processes for identifying and documenting instructional approaches and resources that may be required for responding to the student's ongoing learning needs (e.g., individualized classroom accommodations).
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SCHOOL BOARD REPORTING

Tracking

38. In accordance with relevant privacy legislation, the school staff will document and track a student's progress, from removal from an activity due to a suspected concussion, to the return, through graduated steps, to learning and to physical activity.

 39. The Bloorview School Authority recognizes the sensitive nature of personal health information and will collect, use, and disclose only the relevant diagnostic information needed to fulfil the requirements of this policy and to disclose it only to the parties identified in this policy.

 40. The Bloorview School Authority staff will limit the collection, use, access, and disclosure of personal and health information to that which is reasonably necessary to carry out the school board's concussion identification procedures and Return to School Plan. Personal and health information collected must be retained, disclosed, and disposed of in accordance with the personal information retention policy.
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