

## **Head Injury Policy**

This protocol outlines procedures for staff to follow in managing concussions, and outlines school policy as it pertains to return-to-play issues following a concussion. Renaissance Academy seeks to provide a safe return to activity for all students following any injury. In order to effectively and consistently manage concussive injuries, procedures have been developed to aid in ensuring that concussed students are identified, treated and referred appropriately, receive appropriate follow up medical care during the school day and are fully recovered prior to returning to activity. Physical Education specialists, administrative and office staff shall review this protocol annually.

Any changes or modifications will be reviewed and given to the aforementioned school employees in writing. All appropriate staff shall attend a yearly training meeting in which procedures for managing concussions are discussed. As per rule R277-614 Renaissance will notice parents of the school's policy and post a copy of the policy at the schoolhouse.

### **RECOGNITION**

A concussion is a type of traumatic brain injury that interferes with normal function of the brain. It occurs when the brain is rocked back and forth or twisted inside the skull as a result of a blow to the head or body. What may appear to be only a mild jolt or blow to the head or body can result in a concussion. A concussion can occur even if the person doesn't lose consciousness. The Executive Director is responsible to ensure that employees and agents of the school have training about recognizing and responding to concussions, consistent with their responsibilities.

The following signs and symptoms of concussion injuries are outlined in the National Federation of State High School Associations "Suggested Guidelines for Management of Concussion in Sports":

#### **Common Signs (observed by others)**

- Student appears dazed or stunned
- Confusion
- Forgets rules
- Unsure about game, score, opponent
- Moves clumsily (altered coordination)
- Balance problems
- Personality change
- Responds slowly to questions
- Forgets events prior to hit
- Forgets events after the hit
- Loss of consciousness (any duration)

#### **Symptoms (reported by student)**

- Headache
- Fatigue
- Nausea or vomiting
- Double vision, blurry vision
- Sensitive to light or noise
- Feels sluggish

- Feels “foggy”
- Problems concentrating
- Problems remembering

These signs and symptoms, following a witnessed or suspected blow to the head or body, are indicative of probable concussion. Any student who exhibits signs, symptoms, or behaviors consistent with a concussion (such as loss of consciousness, headache, dizziness, confusion, or balance problems) shall be immediately removed from their activity and may not return to school until cleared by an appropriate health care professional.

Employees and agents are not expected to be able to diagnose a concussion or traumatic head injury. That is the role of a qualified health care professional. However, employees/agents must be aware of the signs, symptoms, and behaviors of a possible concussion or traumatic head injury, and implement the appropriate protocol as outlined in this policy.

## **REMOVAL**

1. The following situations indicate a medical emergency and require 911 assistance:
  - a. Any student with a witnessed loss of consciousness (LOC) of any duration should be stabilized and be under constant adult supervision until emergency medical response arrives.
  - b. Any student who has symptoms of a concussion, and who is not stable (i.e condition is worsening), is to be transported immediately to the nearest emergency department via emergency vehicle.
  - c. Deterioration of neurological function
  - d. Decreasing level of consciousness
  - e. Decrease or irregularity in respirations
  - f. Any signs or symptoms of associated injuries, spine or skull fracture, or bleeding
  - g. Mental status changes: lethargy, difficulty maintaining alertness, confusion or agitation
  - h. Seizure activity
2. A student who is symptomatic but stable, may be transported by their parents. The parents should be advised to contact the student’s primary care provider, or seek care at the nearest emergency department, on the day of the injury.

## **NOTIFICATION AND TRANSPORTATION**

1. Agents of Renaissance are responsible for notifying the student’s parent(s) of the injury. Injuries incurred during school hours must be reported to the front office immediately. The front office staff will act as the point of contact with the student’s parents. If the injury occurs outside of school hours, the school sponsor of the student’s event shall be responsible for the communication with the student’s parent(s).
2. Depending on the injury, either an emergency vehicle will transport the student to the emergency room or the student’s parent(s) will pick the student for transport (see Management and Referral Guidelines above).
3. In the event that a student’s parent(s) cannot be reached, and the student is able to

be sent home (rather than directly to MD). The Renaissance agent should ensure that the student will be with a responsible individual, who is capable of monitoring the student and understanding the home care instructions, before allowing the student to go home.

4. The Renaissance agent should continue efforts to reach a parent.
5. If there is any question about the status of the student, or if the student cannot be monitored appropriately, the student should be referred to an Emergency Department for evaluation. A Renaissance agent should accompany the student and remain with the student until a parent arrives.
6. The Renaissance agent shall provide for supervision of other students for whom he or she is responsible when accompanying the injured student.
7. If the injury occurs at a formal athletic event, Renaissance agents should seek assistance from the host site certified athletic trainer (ATC) or team physician, if available.

## **RETURN TO ACTIVITY**

1. Returning to activity is a medical decision. The transition to full activity at school may begin when the student has written clearance from their primary care provider or concussion specialist.
2. The medical clearance must include a stepwise plan for the student's return to full school/activity participation. Post concussion recovery is case specific and is influenced by factors such as previous history of concussion, duration and type of symptoms, age of the student, and type of activity under consideration.
3. A physician directed stepwise progression may include:
  - a. Complete cognitive rest-no school attendance
  - b. Part-time attendance
  - c. Modified hours (later start or early finish)
  - d. Prohibition of physical activity
4. Based on the physician's plan, Renaissance should employ academic modifications that support the student's recovery. These may include, but are not limited to:
  - a. Short term academic adjustments (less than three weeks duration)
    - i. Prioritization of assignments
    - ii. Abbreviated assignments
    - iii. Reduction of aggravators or exposure to them
    - iv. Cognitive breaks during the school day
    - v. Avoiding major projects, assignments
    - vi. Postponing assessments
    - vii. Providing extended deadlines for assignments
  - b. Academic accommodations (beyond three weeks)
    - i. Extended academic adjustments, as needed
    - ii. Implementation of a 504 plan, in applicable
    - iii. Evaluation for special education services