Concussion Policy

2023-2026



Help for non-English speakers

If you need help to understand the information in this policy please contact Hampton Park Secondary College on 03 8795 9400.

Statement

Hampton Park Secondary College is committed to the safety and well-being of our students, staff, and all members of the school community. Concussions are common injuries, particularly in activities such as sports, and it is essential to manage them effectively to protect the health and academic progress of our students.

Purpose

To explain to parents/carers, students and staff the processes for recognising, managing, and supporting individuals who have suffered a concussion while attending or participating in school-related activities.

Definitions

Concussion

A <u>concussion</u> is a type of traumatic <u>brain</u> injury that is caused by a blow to the head or body, a fall, or another injury that jars or shakes the <u>brain</u> inside the skull. Although there may be cuts or <u>bruises</u> on the head or face, there may be no other visible signs of a <u>brain</u> injury.

Concussion Information - Important Points

- A concussion is a brain injury
- Concussion causes a disturbance in brain function
- Children and adolescents are more susceptible to concussion, take longer to recover, have more significant memory and mental processing deficits
- Concussion usually follows a head collision, however, can occur with a collision to other parts of the body e.g. shoulder or neck.
- Symptoms can come on at any time, but usually within 24-48 hours after a collision
- Concussion can occur without a person being knocked-out, or losing consciousness
- If a person is knocked out, they have a concussion
- Most concussions recover with physical and mental rest
- Concussion that is ignored or is not recognised can be fatal

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- All concussions should be taken seriously
- Children and adolescents must be treated more conservatively than adults
- All players with a potential head injury or concussion must be removed from the field immediately
- Return to play/training on the same day is not permitted for any suspected head injury/concussion

Concussion is categorised in 4 ways:

- 1. Thinking and remembering: Not thinking clearly, feeling slowed down, not being able to concentrate, not being able to remember new information
- 2. Physical: <u>Nausea and vomiting</u> ,<u>headache</u>, fuzzy or blurry <u>vision</u>, <u>dizziness</u> , sensitivity to light or noise, balance problems, feeling tired or having no energy
- 3. Emotional and mood: Easily upset or angered, sad, nervous or anxious, more emotional than usual
- 4. <u>Sleep:</u> Sleeping more than usual, sleeping less than usual, having a hard time falling asleep

Policy

The management of concussion involves the following steps, and each step *must* be followed and completed before moving onto the next step. These are mainly for contact sports however they can be used for all other types of head injury.

- 1. On the day of injury: Recognise, Remove, Report and Refer
- 2. On the days following: Rest, Recover, Record, Return

Recognition and Reporting of Concussions

A suspected head injury or concussion must be acknowledged if a student has *any* of the following symptoms, or fails to answer any of the orientation or memory questions after a head or body collision

Signs (what may be seen)	Symptoms (players may report)	Memory (questions to ask)
Dazed, blank or vacant look	Headache/pressure in head	"What venue are you at today?"
Lying motionless on the ground/slow to get up	dizziness	"Which half is it now?"
Unsteady on feet/balance problems or falling over/uncoordinated	Mental clouding, confusion, or feeling slowed down	"Who scored last in this game?"
Loss of consciousness or unresponsiveness	Visual problems	What team did you play last week/game?"
Confused/not aware of plays or events	Nausea or vomiting	"Did your team win the last game?"
Grabbing/clutching head	Fatigue	
Seizures (fits)	Drowsiness/feeling like 'in a fog'/difficulty concentrating	
More emotional/irritable than normal for that person	Sensitivity to light or noise	



Recognising Concussions

All staff members, including teachers, coaches, and support personnel, should be trained to recognise the signs and symptoms of a concussion. These may include but are not limited to headache, confusion, dizziness, nausea, balance problems, sensitivity to light and noise, and changes in mood or behaviour.

Reporting Concussions

Any staff member, student, or parent/carer who suspects a concussion in a student must report it immediately to the school nurse, school administration, coach or student learning leader.

Initial Response

Remove from Activity

- Any student suspected of having a concussion will be immediately removed from the activity or class in which the injury occurred. Their safety is the primary concern.
- Any student with signs or symptoms of a suspected head injury or concussion **must** be removed from the field immediately or stopped from participating in what they are doing.
- The player must not take further part in any game/training (including other sports) on this day.
- Any player with a suspected head injury or concussion may also have a neck injury. If this is the case a person with First Aid Training (preferably with spinal training) must manage the situation, keep the student form moving and support the player's neck until paramedics arrive
- Once a player has been removed from training or playing field with signs or symptoms of a suspected head injury or concussion, NO PERSON (e.g. physio, coach, trainer, or doctor) can order the player back onto the field.

Record and Evaluate

- If on site, the school nurse, trained staff member, or a healthcare professional will evaluate the student for signs of concussion and assess the severity of the injury.
- If offsite, trained medical personnel provided by gala day and coach to conduct SCAT test.
- SCAT test results and relevant paperwork then communicated to family and documented via compass.

Refer for Medical Treatment

All players with a suspected head injury or concussion must be referred to a medical doctor or an emergency department within 72 hours of injury.

If there are any serious concerns about the player or warning signs ("red flags") of significant head injury, the player must be taken to the nearest emergency department or 000 is to be called for ambulance transport.

Red flags include:

• Deteriorating conscious state

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- Increasing confusion or irritability
- Behaving unusually or a change in their normal behaviour

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- Seizures or convulsions
- Double Vision
- Slurred speech
- Continuing unsteadiness on their feet
- Weakness or tingling/burning in arms or legs
- Severe or increasing headache
- Repeated vomiting (i.e. more than once)
- Severe or unusual neck pain

This applies to students being assessed in The Health Centre on school premises.

Parent/Guardian Notification

If a student is diagnosed with a concussion, the school will notify the student's parent/carer, informing them of the situation, providing guidance on concussion management, and recommending they seek appropriate medical attention.

Academic Accommodations

Academic Support

Students diagnosed with a concussion may experience cognitive impairments that hinder their ability to engage in regular classroom activities. The school will provide academic accommodations, including extended time for assignments, modified homework, and reduced screen time as appropriate.

Return to Learn

The school will work with the student, parents, and medical professionals to establish a Return to Learn plan, which outlines the gradual reintegration of the student into their academic activities.

The medic will document the head knock/concussion (and all injuries) from game-day on First Aid Treatment Provided by a Game Day Medic document and forwarded to the school nurse. The school nurse reviews this and liaises with coaches, staff and caregivers. If a player 'forgets' to turn up for his review (which is possible with a concussion), the nurse will locate the student and take them to the Doctors Clinic or if the player is absent the nurse will follow up with the caregivers. The Nurse will review once the student is back at school.

Return to Play

Medical Clearance

Before a student is allowed to return to any physical activity, including physical education classes and sports, they must receive written medical clearance from a healthcare professional experienced in concussion management. It is imperative that this clearance be provided to the school nurse before the student is allowed to partake in any physical activity.

In rugby, players who sustain a head knock and suspected concussion are ineligible to play their next game for 19 days (VRSU Concussion guidelines)

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Rest & Gradual Reintegration

- Students will follow a gradual return-to-play protocol, starting with light aerobic activity and progressing as tolerated. This process will be closely monitored by the school's athletic department, healthcare professionals, and school administration.
- Rest is crucial to recover from a concussion: The student must COMPLETELY rest for a minimum of 24 hours after injury
- The aim of this complete rest is to reduce the signs and symptoms to a level where all medications have stopped (i.e. analgesia such as Paracetamol for headaches)
- Rest for school students means the following no screen time, including television, gaming, computers, phones etc.; no study/homework/tutor; no reading; reducing the level of physical and mental activity to a level that symptoms can settle; complete physical and cognitive rest may mean missing a day or so at school (this should be discussed with the School Nurse); limit any tasks that require prolonged focus, memory or concentration; students must rest (physical and cognitive) for a minimum of 24 hours.

Education and Awareness

Education

Hampton Park Secondary College will provide ongoing education to staff, students, and parents about concussion awareness, prevention, and management.

Documentation

All concussion incidents, evaluations, and return-to-play protocols will be documented and maintained by the school for reference and compliance purposes via compass in collaboration with the school nurse.

Policy review and approval

Policy Last Reviewed	Nov 2023
Approved by	Principal
Next Reviewal Date	Nov 2026

