

3250	Student Concussion Management Policy
Approval Date:	October, 2019
Category:	General School Administration
Governance Accountability:	Board of Directors, Leadership
Audience:	Employees, Students, Families, Board of Directors

Objective: To provide for the education of a student experiencing a concussion while promoting safety, healing and academic engagement.

A **concussion** is defined as a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move rapidly back and forth.

Signs and symptoms of a concussion tend to fall in four categories: physical, cognitive, emotional, and sleep related. They may be noticed right away or days later. They can be exacerbated by mental and/or physical exertion. The categories and sign/symptoms are listed in the table below:

Physical	Cognitive	Emotional	Sleep-Related
Headache/Pressure	Feel in a “Fog”	Inappropriate emotions	Fatigue
Blurred Vision	Feel “slowed down”	Personality changes	Excess Sleep
Dizziness	Difficulty remembering	Nervousness/Anxiety	Trouble falling asleep
Poor Balance	Difficulty concentrating/Easily distracted	Feeling more “emotional”	Drowsiness
ringing in Ears	Slowed Speech	Irritability	Sleeping less than normal
Seeing “Stars”	Easily confused	Sadness	
Vacant Stare		Lack of motivation	
Nausea and Vomiting			
Numbness/Tingling			
Sensitivity to Light or Noise			
Disorientation			
Neck Pain			

In 80% of individuals diagnosed with a concussion, symptoms will subside in 1-3 weeks post-concussion, with the remaining 20% exhibiting symptoms over a more moderate or long term basis. Strict adherence to medical care recommendations is imperative to the recovery process.

Pine Lake Preparatory uses the multi-disciplinary approach to care for students with diagnosed concussions. This team may include student, parent(s), teacher(s), counselor, school nurse, administrator, office staff, coach, psychologist, athletic trainer, first responder, and others deemed necessary.

1) If Suspected Head Injury Occurs at School or School Sponsored Event:

- a) Any Pine Lake Preparatory employee who suspects a student has suffered a concussion or other head injury shall immediately remove the student from any activities that may result in further risk of head injury (physical education, recess, athletic practice/competition, etc.)

In some instances, the student should not be moved. Life-threatening signs of a possible head, neck, and/or back injuries are listed below. If any are observed, 911 and the school nurse should be called.

Life Threatening Signs of Head, Neck, and Back Injuries include:

- *Change in consciousness*
- *Severe pain or pressure in the head, neck, or back*
- *Tingling or loss of sensation in the hands, fingers, feet, or toes*
- *Partial or complete loss of movement of any body part*
- *Unusual bumps or depressions on the head or over the spine*
- *Blood or other fluids in the ears or nose*
- *Heavy external bleeding of the head, neck, or back*
- *Seizures*
- *Impaired breathing as a result of injury*
- *Any other noted life-threatening sign or symptom*

- b) If safe to move, the child should be brought to the closest office, wellness room, or appropriate/safe location. (If any question of back, neck, or any life threatening injury, do not move student – call 911 and the school nurse).

- *Concussion Signs and Symptoms Checklist (CDC)* will be completed. Initial assessment will be by the staff member that was with student when injury occurred. 15 minute, 30 minute, prior to leaving assessments will be completed by School Nurse (if accessible), First Responder, or Office Personnel.
- Parent must be notified for all possible concussions (Nurse, First Responder or Office). Document on form that parent was notified.
- If parent picks student up - *Concussion Signs and Symptoms Checklist* and *Fact Sheet for Parents* should be given to parent. If checklist sent with parent, make copy for School Nurse to keep on file. If a concussion is suspected, the parent or guardian must pick the student up from the school or event.
- If no concussion is suspected and the student returns to class –*Concussion Signs and Symptoms Checklist* should be put in Nurses Box and *Fact Sheet for Parents* given to student to take home. When parent is contacted, let parent know to look for the *Fact Sheet for Parents*.
- School Nurse, First Responder, or Office should make sure teacher(s) for the remainder of the day and Concussion Contact person/school building designee are aware.

- School Nurse/school building designee will follow up with student and parent within 72 hours of injury. The nurse may use the Post-Concussion Symptom Checklist when appropriate or clinically indicated.

2) Protocols for helping a student with a diagnosed concussion:

- a) If a student has a diagnosed concussion and is experiencing difficulties due to the concussion, then all stakeholders in the student's education process must be notified (teachers, coaches, administrators, etc.) by the Concussion Contact person and development of an Educational and/or Medical Care Plan would occur. Please note, a concussion diagnosis must be made by the treating physician.
 - Whoever receives the initial notification of a student's diagnosed concussion should inform the designated Concussion Contact person.
 - Concussion Contact person will notify teacher(s), school nurse (Case Manager), principal, coach, etc. via email, face to face, or telephone call.
 - If physician has asked for accommodations, a team meeting should be initiated and coordinated by the Concussion Contact person and Case Manager. The Individual Healthcare Plan and Educational Care Plan will be based on guidance from the physician.
 - Individual HealthCare Plan: A document outlining the accommodations and modifications a student may need to address medical symptoms while recovering from a concussion. This plan will be led by the School Nurse (Case Manager).
 - Educational Care Plan: A document outlining the supports a student may need to address academic, emotional, and behavioral difficulties while recovering from a concussion. This plan will be led by the Concussion Contact.

These plans should be reviewed periodically by the team (after medical provider visits or a minimum of every 21 days) until the student is medically cleared.

If and when the five (5) month mark with this impairment is reached, the team will meet with updated medical provider information to discuss possible referral for Section 504 eligibility.

- b) School Nurses will offer annual training and provide information on concussions and other brain injuries, with a focus on Return to Learn issues and concerns, to all teachers and other school personnel. It is the responsibility of the principal to ensure all necessary staff receives this training.
- c) The following question has been added to the Annual Student Health Questionnaire to be completed by families online yearly: *"Head injury of any kind (concussion) in the past year?"* If the update indicates a previously unknown head injury, the school nurse (case manager) will contact parent and determine if return to learn procedures should be initiated.