

Southampton County Schools Policy on Concussions in Student-Athletes

In accordance with 22.1-27.5 of the Code of Virginia and guidelines adopted by the Virginia Board of Education, Southampton County Schools has developed policies and procedures regarding the identification and handling of suspected concussions in student-athletes.

Policy

Southampton County Schools will ensure that student-athletes who sustain concussions are properly diagnosed, given adequate time to heal, and are comprehensively supported until they are symptom free.

A. Definitions(s)

A **concussion** is a brain injury that is characterized by an onset of impairment of cognitive and/or physical functioning, and is caused by a blow to the head, face or neck, or a blow to the body that causes a sudden jarring of the head (i.e., a helmet to the head, being knocked to the ground). A concussion can occur with or without a loss of consciousness, and proper management is essential to the immediate safety and long-term future of the injured individual. A concussion can be difficult to diagnose, and failing to recognize the signs and symptoms in a timely fashion can have dire consequences.

Most athletes who experience a concussion can recover completely as long as they do not return to play prematurely. The effects of repeated concussions can be cumulative, and after a concussion, there is a period in which the brain is particularly vulnerable to further injury. If an athlete sustains a second concussion during this period, the risk of permanent brain injury increases significantly and the consequences of a seemingly mild second concussion can be very severe, and even result in death (i.e., "second impact syndrome").

Appropriate licensed health care provider means a physician, physician assistant, osteopath or athletic trainer licensed by the Virginia Board of Medicine; a neuropsychologist licensed by the Board of Psychology; or a nurse practitioner licensed by the Virginia State Board of Nursing.

Return to play means participate in a non-medically supervised practice or athletic competition.

B. Procedures

In order to participate in any extracurricular athletic activity, each student-athlete and the student-athlete's parent or guardian shall review, on an annual basis (every 12 months), information on concussions provided by the school division. After having reviewed materials describing the short and long-term health effects of concussions, each student-athlete and the student-athlete's parent or guardian shall sign a statement acknowledging receipt, review, and understanding of such information.

On an annual basis each student-athlete will submit a sports physical as required by the Virginia High School League and will participate in the Impact Concussion Management Neurocognitive Testing Program prior to participation in any varsity or junior varsity sports activity. In the event of a possible concussion, the student-athlete will retake the Impact Neurocognitive Test and data will be shared with a medical professional.

A student-athlete suspected by that student-athlete's coach, athletic trainer, or team physician of sustaining a concussion or brain injury in a practice or game shall be removed from the activity at that time. A student-athlete who has been removed from play, evaluated, and suspected to have a concussion or brain injury shall not return to play that same day nor until evaluated by an appropriate licensed health care provider as determined by the Board of Education and in receipt of written clearance to return to play from such licensed health care provider. The licensed health care provider evaluating student-athletes suspected of having a concussion or brain injury may be a volunteer.

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Appropriate licensed health care providers or properly trained individuals evaluating student athletes at the time of injury will utilize a standardized concussion sideline assessment instrument (e.g., SCAT II, SAC and BESS). Sideline Concussion Assessment Tool (SCAT-II), the Standardized Assessment of Concussion (SAC) and the Balance Error Scoring System (BESS) are examples of sideline concussion assessment tools that test cognitive function and postural stability.

Parents or guardians of a student-athlete suspected of a concussion will be informed of the possible concussion and will be given additional information on concussions and the need for appropriate medical care.

The school will maintain a system of tracking and identification of student concussions. This data will be compiled and maintained by the School Nurse with information on concussions and medical clearance noted on individual student physical forms for easy reference by coaches.

A concussion policy team that includes, at a minimum, a school administrator, athletic administrator, appropriate licensed health care provider, coach, parent, and student shall refine and review local concussion management policies on an annual basis.

C. Signs and Symptoms of Symptoms of Concussions

Coaches will be trained to watch for the following signs of possible concussions:

- Appears dazed or stunned
- Is confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness
- Shows behavior or personality changes
- Can't recall events prior to hit
- Can't recall events after hit

Students will be taught concussions symptoms that should be immediately reported: Headache

- Nausea
- Balance problems or dizziness
- Double or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish
- Feeling foggy or groggy
- Concentration or memory problems
- Confusion

D. Protocol for return to play

1. No member of a school athletic team shall participate in any athletic event or practice the same day he or she is injured and: exhibits signs, symptoms or behaviors attributable to a concussion; or has been diagnosed with a concussion.
2. No member of a school athletic team shall return to participate in an athletic event or training on the days after he/she experience a concussion unless all of the following conditions have been met: the student no longer exhibits signs, symptoms or behaviors consistent with a concussion, at rest or with exertion; the student is asymptomatic during, or following periods of supervised exercise that is gradually intensifying;

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and the student receives a written medical release from a licensed health care provider. After medical release is given, the athlete will participate in practice and remain Symptom free prior to gradual return to full sports participation.

E. Helmet replacement and reconditions policies and procedures

1. Helmets must be National Operating Committee on Standards for Athletic Equipment (NOCSAE) certified by the manufacturer at the time of purchase.
2. Reconditioned helmets must be NOCSAE recertified by the reconditioner.

F. Training required for personnel and volunteers

1. All school staff, coaches, athletic trainers, team physicians, and volunteers will receive current training annually on:
 - How to recognize the signs and symptoms of a concussion;
 - Strategies to reduce the risk of concussions;
 - How to seek proper medical treatment for a person suspected of having a concussion; and when the athlete may safely return to the event or training.
2. The concussion policy management team shall ensure training is current and consistent with best practice protocols.
3. School divisions shall maintain a tracking system to document compliance with annual training requirement.
4. Annual training on concussion management shall use a reputable program.

Community Involvement

Southampton County Schools will make every effort to provide materials and training opportunities related to concussion management to organizations sponsoring athletic activity for student-athletes on school property. Southampton County Schools are not required to enforce compliance with such policies.