

2020

Saskatchewan High Schools Athletic Association Concussion Protocol

WHEN IN DOUBT, SIT THEM OUT!



"The purpose of the SHSAA is to foster educational opportunities for all students through interschool sport."

Approved by SHSAA Executive Council
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Acknowledgement

Saskatchewan High Schools Athletic Association (SHSAA) has developed the following policy through the guidance and assistance of the [Sport Medicine & Science Council of Saskatchewan](#). Thank you to Scott Julé and Rhonda Shishkin for their continued cooperation with SHSAA.

Introduction

Education and providing information about concussion in sport continues to be an area of emphasis for all groups that are involved in delivering sport to today’s youth. The creation of a concussion management protocol for the SHSAA was initiated in 2013. The policy is continually reviewed and takes into consideration the information from the most recent International Consensus Statement on Concussion in Sport (Berlin 2016) and the Canadian Guideline on Concussion in Sport (July 2017). SHSAA, along with many other organizations involved in youth sport, is committed to making a concussion awareness policy for all individuals who are involved in student-athlete sport.

Concussion is a brain injury and is defined from the Consensus Statement 2016 as a complex pathophysiological process affecting the brain, induced by biomechanical forces. Practically it is a brain injury that causes a disruption of normal brain function leading to symptoms that can be physical, cognitive, emotional/behavioural and/or related to sleep.

A concussion should be suspected following a significant impact to the head, face, neck, or body and through demonstration or reporting of any of the visual signs or symptoms associated with concussion (see [Concussion Recognition Tool 5](#)).

Objectives of the SHSAA Concussion Protocol

The goal of this policy, and included protocols, is to act as a tool to prevent, recognize, diagnose, and properly manage concussion of student athletes in our educational athletic programming. It aims to ensure that student athletes with a suspected concussion receive timely and appropriate care and proper management to allow them to return to their academic studies and sport in a safe manner. This protocol may not address every possible clinical scenario that can occur during sport-related activities but includes critical elements based on the latest evidence and current expert consensus.

The protocol is intended for use by all individuals who interact with student athletes in their school and non-school based organized sports activity, including student athletes, parents, coaches, officials, teachers, trainers, and licensed healthcare professionals.

Prevention

Prevention is the first objective in concussion management. Through education and awareness, the goal is to create an environment that will minimize concussion incidence and complications.

Pre-Season Education

Pre-season concussion education for all stakeholders will include information on:

- The definition of a concussion
- Possible mechanisms of injury (i.e. how a concussion might occur)
- Common signs and symptoms
- Steps that can be taken to prevent concussions and other injuries from occurring in sport
- What to do when an athlete suffers a suspected concussion or more serious head injury
- What measures should be taken to ensure proper medical assessment, Return to School and Return to Sport strategies
- Return to Play medical clearance requirements

1. Coaches

Schools are responsible for ensuring that all coaches (and other pertinent team personnel, i.e. trainers) complete concussion awareness training. When completing the coach information for all team registrations, schools are to indicate the concussion awareness training that the coach has completed:

- a. [Making Headway Concussion eLearning Series](#)
 - i. Starting in September 2019, this is the SHSAA recommended concussion awareness training. Individuals can choose Making Headway in Sport or Making Headway in Football
 - ii. The course is available through the [National Coaches Certification Program \(NCCP\) Locker](#) which is maintained by [Coaches Association of Canada \(CAC\)](#).
 - iii. Upon completion of the course it will be listed on the coaching transcript of the individual completing the course.

- b. Concussion in Sports - What You Need to Know
 - i. This course was previously available at schoolcoach.ca and continues to be available at nfhslearn.com
 - 1. Upon completion of the course the coach is provided with a printable certificate that indicates the course completion number

Coaches (Teachers) should have the following items available to them

- a. [Concussion in Schools: Know your role \(Athletic Directors, Coaches, Teachers, and Other Supervisors\)](#)
- b. [Concussion Guide for Coaches and Trainers](#)
- c. [Concussion Guide for Teachers](#)

Coaches (Teachers) should be familiar with the [Return to School Strategy](#) and [Return to Sport Strategy](#).

2. Parents

Education of parents is to be provided at a pre-season parent meeting conducted by the coach and/or faculty responsible for school sponsored sport. Parents should know what a concussion is and how to recognize one in their child. Education should also include what parents should expect if their child is diagnosed with a concussion.

[The Pre-Season Concussion Education Sheet](#) must be provided to parents during the pre-season meeting and a signed copy of the document must be returned to the coach (school) indicating that the student athlete and their parent or legal guardian have reviewed the information related to concussion. Additional resources for parents can be found through [Parachute Canada](#).

3. Students

In addition to the pre-season education provided for parents; student athletes must also be included in the pre-season education conducted by the coach and/or faculty responsible for school sponsored sport. An additional resource for coaches to use with their student athletes is [Concussion for Students](#) from nfhslearn.com.

Education for student athletes is crucial if they are to self-report, respect their opponent, and play safe.

Protective Equipment

- 1. SHSAA football coaches must observe the safety precautions and recommendations outlined in the football activity policy section of the SHSAA annual handbook.

Head Injury Recognition

Although the formal diagnosis of concussion should be made following a medical assessment, all sport stakeholders including student athletes, parents, teachers, coaches, teachers, officials, and licensed healthcare professionals are responsible for the recognition and reporting of student athletes who may demonstrate visual signs of a head injury or who report concussion-related symptoms. This is particularly important because many sport and recreation venues will not have access to on-site licensed healthcare professionals.

A concussion should be suspected:

- in any student athlete who sustains a significant impact to the head, face, neck, or body and demonstrates *ANY* of the visual signs of a suspected concussion or reports *ANY* symptoms of a suspected concussion as detailed in the [Concussion Recognition Tool 5](#).
- if a student athlete reports *ANY* concussion symptoms to one of their peers, parents, teachers, or coaches or if anyone witnesses an athlete exhibiting any of the visual signs of concussion.

In some cases, a student athlete may demonstrate signs or symptoms of a more severe head or spine injury including convulsions, worsening headaches, vomiting or neck pain. If a student athlete demonstrates any of the 'Red Flags' indicated by the [Concussion Recognition Tool 5](#), a more severe head or spine injury should be suspected, and Emergency Medical Assessment should be followed.

Management

If a student athlete is suspected of suffering a concussion/spinal action during a game or practice, the activity should be stopped. Any student athlete with a suspected concussion/spinal injury must be assessed using an Emergency Action Plan utilized at the host venue. The [Sport Medicine & Science Council of Saskatchewan](#) concussion action plan ([Concussion Action Flow Chart](#)) should provide the manner by which to manage a suspected concussion/spinal injury.

Onsite

1. Recognition of red flags which could include (neck pain or tenderness, double vision, weakness or tingling/burning in arms or legs, severe or increasing headache, seizure or convulsions, loss of consciousness, deteriorating conscious state, vomiting, increasingly restless, agitation or combativeness)
 - a. If no licensed health care professional available: stop the game, do not move the athlete, call an ambulance for urgent medical assessment
 - b. If licensed health care professional available: that individual should take control of the situation and begin assessment

2. If deemed safe to do so (no concern for a more serious head or spine injury), the student athlete should be removed from the field of play to undergo further assessment.
 - a. If licensed health care professional available:
 - i. Sideline Medical Assessment using the [Sport Concussion Assessment Tool 5 \(SCAT5\)](#). The SCAT5 is a clinical tool that should only be used by a licensed healthcare professional that has experience using this tool. It is important to note that the results of SCAT5 testing can be normal in the setting of acute concussion. As such, this tool can be used by licensed healthcare professionals to document initial neurological status but should not be used to make sideline return to sport decisions in student athletes. Any student athlete who is suspected of having sustained a concussion must not return to the game or practice and must be referred for Medical Assessment.
 - ii. If a student athlete is removed from play following a significant impact and has undergone assessment by a licensed healthcare professional, but there are NO visual signs of a concussion and the athlete reports NO concussion symptoms then the student athlete can be returned to play but should be monitored for delayed symptoms.
 - b. No licensed health care professional present:
 - i. Using the [Concussion Recognition Tool 5](#), a sideline assessment of the student athlete needs to be completed by the coach or other team personnel that has been assigned these duties as outlined in the Pre-Season Education. With any sign or symptom, a concussion is suspected, and the athlete is removed from the event.
 1. The student athlete should be referred for medical assessment by a medical doctor, nurse practitioner, or in those situations where geographical considerations limit access to a medical doctor or nurse practitioner, referral to a primary health care professional with specific training and experience in the assessment and management of sport related concussion.
 2. ***The student athlete must not return to play until receiving medical clearance.***
 3. The student athlete should be instructed to follow cognitive and physical rest protocols of the [Return to School Strategy](#).

Assessment, Diagnoses, and Return to Strategies

1. Student athletes suspected of a concussion, and their parents or legal guardians, will be provided with the [Concussion Guide for Athletes](#), [Concussion Guide for Parents & Caregivers](#), [Return to School Strategy](#), and [Return to Sport Strategy](#).

2. A [Concussion Incident Report](#) needs to be completed. In the situation where no licensed health care professional is present to do so, the coach must complete the form to be provided to the parent or legal guardian along with the [Medical Assessment Letter](#) and [Medical Clearance Letter](#). These should be provided to a medical doctor, nurse practitioner, or in those situations where geographical considerations limit access to a medical doctor or nurse practitioner, a primary care health care professional with specific training and experience in the assessment and management of sports-related concussion.
3. All student athletes diagnosed with a concussion must be provided with a standardized [Medical Assessment Letter](#) that notifies the athlete and their parents/legal guardians/spouse that they have been diagnosed with a concussion and may not return to any activities with a risk of concussion until medically cleared to do so by a medical doctor, nurse practitioner, or in those situations where geographical considerations limit access to a medical doctor or nurse practitioner, a primary care health care professional with specific training and experience in the assessment and management of sports-related concussion. Because the [Medical Assessment Letter](#) contains personal health information, it is the responsibility of the student athlete or their parent/legal guardian to provide this documentation to the student athlete's coaches, teachers, or employers. It is also important for the student athlete to provide this information to sport organization officials that are responsible for injury reporting and concussion surveillance where applicable.
4. Student athletes diagnosed with a concussion should be provided with education by the coach or other team personnel who have been assigned these duties as outlined in the Pre-Season Education, about the signs and symptoms of concussion, strategies about how to manage their symptoms, the risks of returning to sport without medical clearance and recommendations regarding a gradual return to school and sport activities. Student athletes diagnosed with a concussion are to be managed according to the [Return to School Strategy](#) and [Return to Sport Strategy](#) under the supervision of a medical doctor, nurse practitioner, or in those situations where geographical considerations limit access to a medical doctor or nurse practitioner, a primary care health care professional with specific training and experience in the assessment and management of sports-related concussion. Specific return to sport strategies are available through [Parchute.ca](#). When available, student athletes should be encouraged to work with the team athletic therapist or physiotherapist to optimize progression through their [Return to Sport Strategy](#). Once the athlete has completed their [Return to School Strategy](#) and [Return to Sport Strategy](#) and are deemed to be clinically recovered from their concussion, a medical doctor or nurse practitioner can consider the student athlete for a return to full sport activity and issue a [Medical Clearance Letter](#) which is to be submitted to the coach and kept in the student's personal file at the school.

5. The stepwise progressions for [Return to School Strategy](#) and [Return to Sport Strategies](#) are outlined in the documents. As indicated in stage 1 of the [Return to Sport Strategy](#), reintroduction of daily, school, and work activities using the [Return to School Strategy](#) must precede return to sport participation.