

Title: Head Injuries

Effective Date: 6/13/18

References: R277-614; UCA 26-53-101

Purpose

Ignite Entrepreneurship Academy recognizes that head injuries and concussion may occur during the normal activities of a school day, but are more likely to occur during participation in physical education classes, recesses, and athletic programs. This Head Injury Policy of IEA, in accordance with UCA 26-53-101 and Utah State Board of Education Rule R277-614, requires all physical education teachers, program support staff, and general education teachers to complete annual training on the recognition and management of head injuries and concussions.

Training shall include details on the signs and symptoms of head injuries and the implementation of reasonable precautionary measures to ensure that concussed students are identified, treated and referred appropriately, receive follow-up medical care during the school day, and are fully recovered prior to returning to activity. IEA seeks to provide a safe return to activity for all students following any injury, but particularly after a head injury and/or concussion.

Policy

1. Teachers, staff, and all other individuals designated by the Director shall attend a yearly in-service meeting for training on the procedures for recognizing and managing physical education-related and athletic program-related head injuries and concussions and on this policy and its procedures;
2. Teachers and staff will become familiar with the signs and symptoms of concussions described below;
3. Teachers and staff will immediately remove a student from a physical education class, sporting event, or athletic program if he/she exhibits signs, symptoms, or behaviors consistent with a concussion (as described below).
4. A teacher or staff member who first notices the signs or symptoms of a concussion or who has information that a student may have sustained a head injury will immediately complete an incident report on any head injury or suspected head injury occurring during the school day or at a school event and will attempt to notify a parent or legal guardian as soon as is reasonably possible after a suspected head injury has occurred.
5. IEA's Administration or an agent of the Administration will ensure that a parent or guardian of a student who has sustained a head injury during the school day or at a school event, or who has exhibited signs of a concussion during the school day or at a school event, has been notified and that a medical evaluation has been received by IEA before a student is allowed to return to play.
6. IEA's Administration or its agent will allow a student who is symptomatic but stable to be transported by his/her parent/s or guardian/s. IEA will advise such parents or guardians to contact the student's primary care provider or to seek care at the nearest emergency

department on the day of the injury.

7. IEA's Administration or its agent will immediately implement the protocols of a medical emergency (as described below) if a student loses consciousness attendant to a head injury or if a student exhibits symptoms of a concussion and is not stable.
8. IEA's Administration or its agent will refer a student to an Emergency Department for evaluation if there is any question about the status of the student, or if the student cannot be monitored appropriately. An agent of IEA will accompany the student and remain with the student until a parent arrives.
9. Teachers and staff will not allow a student who has exhibited signs, symptoms, or behaviors consistent with a concussion to return to play until cleared by an appropriate health care professional and until the student's parent or guardian has signed this Head Injury Policy.
10. IEA will use discretionary procedures outlined as follows when considering a student's return to activity:
 - a. While current Utah law designates that a student may be returned to play by "an appropriate health care provider," the IEA Administration has a right to designate the credentials of the providers from whom they will accept clearance. The Administration, at its discretion, will carefully consider this designation in each individual case in consultation with any or all of the following: the physical education staff, teachers, parents, other healthcare professionals and consultants, and IEA's liability carrier.
 - b. Regardless of clearance by a healthcare provider, IEA will not allow any student who continues to demonstrate concussive symptoms to return to play in physical education classes or athletic programs.

Date originally approved: 6/12/18

Ignite Entrepreneurship Academy Head Injury Form

Recognition of Concussion

A concussion is 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 a player or student in an activity is not knocked out or does not lose consciousness.

Common signs and symptoms of sports-related concussion (observed by others):

- Student appears dazed or stunned
- Confusion
- Forgets plays
- 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 the contest, game, or practice and shall not return to play until cleared by an appropriate health care professional and until his/her parent or guardian has signed this *Head Injury Form*.

Management and Referral Guidelines for All Staff:

1. The following situations indicate a *Medical Emergency*:
 - a. Any student with a witnessed loss of consciousness (LOC) of any duration should be spine

- boarded and transported immediately to nearest emergency department via emergency vehicle;
- 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. A student who exhibits any of the following symptoms should be transported immediately to the nearest emergency department via emergency vehicle:
 1. Deterioration of neurological function
 2. Decreasing level of consciousness
 3. Decrease or irregularity in respirations
 4. Any signs or symptoms of associated injuries, spine or skull fracture, or bleeding
 5. Mental status changes: lethargy, difficulty maintaining arousal, confusion or agitation
 6. Seizure activity
2. A parent or guardian may transport a student, who is symptomatic but stable. The parent or guardian should be advised to contact the student's primary care provider or to seek care at the nearest emergency department on the day of the injury.

Guidelines and Procedures for Teachers and Staff Supervising Athletic Classes and Athletic Events

Recognizing concussions:

- a. All educators and agents of the school should become familiar with the signs and symptoms of concussion that are described above;
- b. Educators and agents of school shall have appropriate training about recognizing and responding to traumatic head injuries, consistent with the employees' responsibilities for supervising students and athletes.

Removal from activity:

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 an athletic class or athletic program and shall not return to play until cleared by an appropriate health care professional and by a parent or guardian's signature on the *Head Injury Form*.

Referring the athlete/student for medical evaluation:

1. IEA's Administration or the agent of school is responsible for notifying the student's parent(s) of the injury. The teacher or staff member immediately aware of the injury or of a student exhibiting concussive symptoms shall also serve as the "agent" by completing the *Incident Form* and contacting parents accordingly.
 - a. Contact the parent(s) to inform a parent of the injury. Depending on the injury, either an emergency vehicle will transport or parent(s) or guardian(s) will pick the student up at the school or event for transport.
 - b. A medical evaluation is required before returning to play.
2. In the event that a student's parent(s) or guardian(s) cannot be reached, and the student is able to be sent home (rather than directly to medical treatment):
 - a. The school agent should insure 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;
- b. The school agent should continue efforts to reach a parent;
- c. 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 school agent should accompany the student and remain with the student until a parent arrives.

Return to Play (RTP) Procedures After Concussion

1. Return to activity and play is a medical decision. The student must meet all of the following criteria in order to progress to activity:
 - a. Asymptomatic at rest and with exertion (including mental exertion in school); AND
 - b. Have written clearance from the student's primary care provider or concussion specialist (student must be cleared for progression to activity by a physician other than an Emergency Room physician, if diagnosed with a concussion).
2. Once the above criteria are met, the student will be progressed back to full activity following the step-wise process detailed below. (A school agent must closely supervise this progression).
3. Progression is individualized and will be **determined on a case-by-case basis**. Factors that may affect the rate of progression include: previous history of concussion, duration and type of symptoms, age of the student, and sport/activity in which the student participates. An athlete/student with a prior history of concussion, one who has had an extended duration of symptoms, or one who is participating in a collision or contact sport may be progressed more slowly.
4. Stepwise progression as described below:
 - a. Complete cognitive rest. This may include staying home from school or limiting school hours (and studying) for several days. Activities requiring concentration and attention may worsen symptoms and delay recovery.
 - b. Return to school full-time.
 - c. Light exercise. This step cannot begin until the student is no longer having concussion symptoms and is cleared by a physician for further activity. At this point the athlete may begin walking or riding an exercise bike. No weight lifting.
 - d. Running in the gym or on the field. No helmet or other equipment.
 - e. Non-contact training drills in full equipment. Weight training can begin.
 - f. Full contact practice or training.
 - g. Play in game. Must be cleared by physician before returning to play.
 - h. The student should spend 1 to 2 days at each step before advancing to the next. If post-concussion symptoms occur at any step, the student must stop the activity and the treating physician must be contacted.
 - i. Depending upon the specific type and severity of the symptoms, the student may be told to rest for 24 hours and then resume activity at a level one step below where he or she was at when the symptoms occurred. This resumption of activity could be considerably simplified for a student injured during recess compared to a student injured at a game or formal practice.

Assertion of IEA's Discretionary Right and Obligation:

While current Utah law designates that a student may be returned to play by "an appropriate health

care provider,” the IEA Administration has a right to designate the credentials of the providers from whom they will accept clearance. The IEA Administration at its discretion will carefully consider this designation in each individual case in consultation with any or all of the following: the physical education staff, teachers, parents, other healthcare professionals and consultants, and IEA’s liability carrier.

Regardless of clearance by a healthcare provider, IEA will not allow any student who continues to demonstrate concussive symptoms to return to play in physical education classes or athletic programs.

Mandatory Signature of Parent/Guardian before Student’s Return to Play:

By signing below, I am indicating that I have read IEA’s *Head Injury Policy* and *Head Injury Form*, that I have provided the school with the appropriate medical clearance for my child to be returned to play, and that I also hereby assert that my child no longer demonstrates concussive symptoms and is, in my opinion, ready to return to to play.

Parent or Guardian (printed) _____
 Signature of Parent or Guardian _____
 Student’s Name _____
 Date _____

Mandatory Signature of IEA Administration or Agent before Student’s Return to Play:

As a IEA Administrator or Administrator’s Agent, I indicate that IEA, in consultation with the appropriate Administrative, staff, and faculty members, as well as other health professionals and consultants and/or IEA’s liability carrier (at the discretion of the IEA Administration) has approved the credentials of the medical provider/s from whom IEA has received clearance for a return to play for _____.

Even with this medical clearance and its approval, however, IEA will immediately suspend this clearance if the student named above begins or continues to demonstrate concussive symptoms in physical education classes, athletic programs, or in the general education classroom.

Administrator (printed) _____
 Signature of Administrator _____
 Date _____