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ATHLETIC CONCUSSION POLICY

The purpose of this policy is to provide information and standardized procedures for persons involved in the prevention, training management and return to activity decisions regarding students who incur head injuries while involved in extracurricular athletic activities1 including, but not limited to, interscholastic sports, in order to protect their health and safety as required by Massachusetts law and regulations. The requirements of the law apply to all public middle and high schools, however configured, serving grades six through high school graduation. In addition to any training required by law, the following persons shall complete one of the head injury safety training programs approved by the Massachusetts Department of Public Health (DPH) as found on its website: coaches; certified athletic trainers; trainers; volunteers; school and team physicians; school nurses; athletic directors; directors responsible for a school marching band; employees or volunteers; and students who participate in an extracurricular activity and their parents.

Upon the adoption of this policy by the School Committee, the Superintendent shall ensure that DPH receives an affirmation on school district letterhead that the district has developed policies and the School Committee has adopted a final policy in accordance with law. This affirmation shall be updated by September 30, 2013 and every two years thereafter upon review or revision of its policies.

The Superintendent shall maintain or cause to be maintained complete and accurate records of the district's compliance with the requirements of the Concussion Law, and shall maintain the following records for three years or, at a minimum, until the student graduates, unless state or federal law requires a longer retention period:

- 1. Verifications of completion of annual training and receipt of materials;
- 2. DPH Pre-participation forms and receipt of materials;
- 3. DPH Report of Head Injury Forms, or school based equivalents;
- 4. DPH Medical Clearance and Authorization Forms, or school based equivalents; and
- 5. Graduated reentry plans for return to full academic and extracurricular athletic activities.

This policy also applies to volunteers who assist with extracurricular athletic activities. Such volunteers shall not be liable for civil damages arising out of any act or omission relating to the requirements of law, unless such volunteer is willfully or intentionally negligent in his act or omission.

Most student athletes who sustain a concussion can fully recover as long as their brain has time to heal before sustaining another hit; however, relying only on an athlete's self-report of symptoms to determine injury recovery is inadequate as many high school athletes are not aware of the signs and symptoms or the severity concussive injuries pose, or they may feel pressure from coaches, parents, and/or teammates to return to play as quickly as possible. One or more of these factors will likely result in under-diagnosing the injury and a premature return to play.

¹ Extracurricular Athletic Activity means an organized school sponsored athletic activity generally occurring outside of school instructional hours under the direction of a coach, athletic director or marching band leader including, but not limited to, Alpine and Nordic skiing and snowboarding, baseball, basketball, cheer leading, cross country track, fencing, field hockey, football, golf, gymnastics, horseback riding, ice hockey, lacrosse, marching band, rifle, rugby, soccer, skating, softball, squash, swimming and diving, tennis, track (indoor and outdoor), ultimate frisbee, volleyball, water polo, and wrestling. All interscholastic athletics are deemed to be extracurricular athletic activities.

Massachusetts General Laws and Department of Public Health regulations make it imperative to accurately assess and treat student athletes when concussions are suspected.

Student athletes who receive concussions may appear to be "fine" on the outside, when in actuality they have a brain injury and are not able to return to play. Incurring a second concussion can prove to be devastating to a student athlete. Research has shown that young concussed athletes who return to play before their brain has healed are highly vulnerable to more prolonged post-concussion syndrome or, in rare cases, a catastrophic neurological injury known as Second Impact Syndrome.

The following protocol will discuss and outline what a concussion is, the mechanism of injury, signs and symptoms, management and return to play requirements, as well as information on Second Impact Syndrome and past concussion syndrome. Lastly, this policy will discuss the importance of education for our athletes, coaches and parents and other persons required by law. This protocol should be reviewed on a yearly basis with all staff to discuss the procedures to be followed to manage sports-related concussions. This protocol will also be reviewed on a yearly basis by the athletic department as well as by nursing staff. Any changes in this document will be approved by the school committee and given to athletic staff, including coaches and other school personnel in writing. An accurate synopsis of this policy shall be placed in the student and faculty handbooks.

LEGAL REFS: M.G.L. 111:222; 105 CMR 201.000

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Athletic Concussion Policy Regulation

Training Program

Before beginning any extracurricular athletic activity the following persons shall complete one of the training programs approved by the Department as found on the Department's website:

- 1. Coaches;
- 2. Certified athletic trainers;
- 3. Volunteers;
- 4. School physicians;
- 5. School nurses;
- 6. Athletic Directors;
- 7. Referees and umpires who are employees, contractors, or agents of a school;
- 8. Directors responsible for a school marching band, whether employed by a school or school district or serving in such capacity as a volunteer;
- 9. Parents of a student who participates in an extracurricular athletic activity; and
- 10. Students who participate in an extracurricular athletic activity.

The superintendent or designee shall maintain a record of persons trained in accordance with 105 CMR 201.016.

Participation Requirements for Students and Parents

- A. Education and Training
 - 1. Each year at the required pre-season meeting for every season, a school shall provide current materials to all students who plan to participate in extracurricular athletic activities and their parents in advance of the student's participation. Such materials shall be posted on the district's website and shall at minimum include a summary of the Department's rules relative to safety including but not limited to recognition of symptoms of head injury, the biology and short-term and long-term consequences of a concussion, second impact syndrome and rules for return to play after a head injury or concussion.
 - 2. The student and parent shall submit to the Athletic Director as a pre-requisite to participation in extracurricular athletic activities either (a) a certification of completion for any Department approved on-line course or (b) a signed acknowledgment as to their receipt of Department approved written material required by 105 CMR 201.008(A)(1).
 - 3. The training and education required by 105 CMR 201.008(A)(2) applies to one school year and must be repeated for every subsequent year.
- B. Documentation of Head Injury and Concussion History
 - 1. At or before the start of each sport or band season, all students who plan to participate in extracurricular athletic activities shall complete and submit to the Athletic Director a current Department Pre-participation Head Injury/Concussion Reporting Form, signed by both the student and the parent, that provides comprehensive history with up-to-date information relative to concussion history; any head, face or cervical spine injury history; and any history of co-existent concussive injuries.
 - 2. The Athletic Director shall ensure that all forms that are required by 105 CMR 201.009(A)(1) are completed and reviewed, and shall:
 - Provide each coach or band director with copies of forms from all students participating on that coach's team or band director's band;
 - Distribute copies of forms which indicate a history of head injury to the school nurse and school physician.
 - 3. If a student sustains a head injury or concussion during the season, the Department

Report of Head Injury During Sports Season Form must be completed:

- by the coach or band director, if the injury or suspected concussion occurs during a game or practice, or
- by a parent if the injury occurs outside of those settings, and forwarded to the coach or band director. The Athletic Director shall ensure that these forms are reviewed and provided to the persons specified in 105 CMR 201.012(C)(5).

Suspected Concussion Exclusion from Play

- 1. Any student, who during a practice or competition, sustains a head injury or suspected concussion, or exhibits signs and symptoms of a concussion, shall be removed from the practice or competition immediately and may not return to the practice or competition that day.
- 2. The student shall not return to play unless and until the student provides medical clearance and authorization as specified in 105 CMR 201.011.
- 3. The coach shall communicate the nature of the injury directly to the parent in person or by phone immediately after the game or practice in which a student has been removed from play for a head injury or suspected concussion. The coach also must provide this information to the parent in writing by the end of the next business day.
- 4. The coach or his/her designee shall communicate, by the end of the next business day, with the Athletic Director that the student has been removed from play for a head injury or suspected concussion.
- 5. Each student who is removed from play and subsequently diagnosed with a concussion shall have a written graduated reentry plan for return to full academic and extracurricular activities.

The plan shall be developed by the student's teachers, school nurse, parent, members of the building-based student support and assistance team or individualized education program team as appropriate and in consultation with the student's physician.

The written plan shall include but not be limited to:

- Physical and cognitive rest as appropriate;
- Graduated return to classroom studies as appropriate;
- Estimated time intervals for resumption of activities;
- Frequent assessments by the school nurse as appropriate; and
- Periodic medical assessments until full return to classroom activities and extracurricular athletic activities are authorized.

The student must be completely symptom free and medically cleared in order to begin graduated reentry to extracurricular athletic activities.

If a situation arises such that the student has been cleared to participate and the school staff notes that the student is still experiencing symptoms, that student shall be removed from play. The school has the authority to make the final determination whether a student may safely participate in a given extracurricular activity/sport. Participation is a privilege that may be permitted or withheld by the school staff based on individual circumstances. If these situations arise the school staff will communicate to the health care provider who provided the clearance, the specific symptoms and reason for concern and that the student is not symptom-free.

Medical Clearance and Authorization to Return to Play

Each student who is removed from play for a head injury or suspected concussion shall obtain and present to the Athletic Director a Department Post Sports-Related Head Injury Medical Clearance and Authorization Form prior to resuming the extracurricular athletic activity. This form must be completed

by a physician or one of the individuals as authorized by 105 CMR 201.011(A). The ultimate return to play decision is a medical decision that may involve a multidisciplinary approach, including consultation with parents, the school nurse and teachers as appropriate.

Only the following individuals may authorize a student to return to play:

- A duly licensed physician;
- A certified athletic trainer in consultation with a licensed physician;
- A duly licensed nurse practitioner in consultation with a licensed physician; or
- A neuropsychologist after the student has been examined and cleared by a licensed physician.

By September 2013, physicians, nurse practitioners and certified athletic trainers providing medical clearance for return to play shall verify that they have received Department-approved training in post traumatic head injury assessment or, in the case of certified athletic trainers, have received equivalent training as part of their licensure.

Record Maintenance

The school, consistent with any applicable state and federal law, shall maintain the following records for 3 years or at a minimum until the student graduates:

- Verifications of completion of annual training and receipt of materials;
- Department Pre-participation Head Injury/Concussion Reporting Forms;
- Department Report of Head Injury During Sports Season Forms;
- Department Post Sports-Related Head Injury Medical Clearance and Authorization Forms; and
- Graduated re-entry plans for return to full academic and extracurricular activities.

The school shall make these records available to the Department of Public Health and the Department of Elementary and Secondary Education, upon request or in connection with any inspection or program review.

Reporting

Starting school year 2011-2012, schools shall be responsible for maintaining and reporting annual statistics on a Department form or electronic format that at minimum report:

- The total number of Department Report of Head Injury During Sports Season Forms received by the school;
- The total number of students who incur head injuries and suspected concussions when engaged in any extracurricular athletic activities.