

Introduction and Scope

The purpose of this documentation is to provide Oxley College staff, parents and students with guidelines on how to deal with concussion. These guidelines reflect and are informed by the ISA Concussion Protocol, the Australian Rugby Concussion Management Procedure, the Australian Government's Concussion in Sport Position Statement and the Concussion in Sport Group's International Consensus Statement.

What is a concussion?

Concussion is a traumatic brain injury induced by biomechanical forces to the head, or anywhere on the body which transmits an impulsive force to the head. It causes short-lived neurological impairment and the symptoms may evolve over the hours or days following the injury. Complications can occur, including prolonged duration of symptoms and increased susceptibility to further injury.

The Oxley College Protocol

If managed appropriately most symptoms and signs of concussion resolve. While we recognise that concussions cannot be fully prevented, education and training as well as prompt and appropriate management can better protect the health and well-being of our students, and potentially reduce the amount of learning and/or sport missed from subsequent concussions. While most children and teens with a concussion recover quickly and fully, some may have symptoms that last for days, weeks, months and even years. Concussions are not just confined to school activities. Optimal care of a concussion relies on early recognition and proactive management. This is reliant on a partnership between parents/carers, students, medical practitioners, coaches and the College.

Concussion Management

Recognising concussion can be difficult. The symptoms and signs are variable, non-specific and may be subtle. Concussions are suspected when a knock to the head or body that transmits a force to the head has occurred. Symptoms may not be initially apparent and may evolve over the hours or days following the injury. Recognising concussion is critical to ensure appropriate management and prevention of further injury. Onlookers should suspect concussion when an injury results in a knock to the head or body that transmits a force to the head. A hard knock is not required, concussion can occur from minor knocks. After a concussion, some people lose consciousness for a short time. However, most concussions do not result in a loss of consciousness.

References

- Australia, R. (2021, March 5). Concussion management. Retrieved from https://australia.rugby/: https://australia.rugby/about/codes%20and%20policies/safety%20and%20welfare/concussion%20management
- Dr Lisa Elkington, D. S. (2019, January 1). Concussion in Sport Australia. Position Statement. Retrieved from https://www.sportaus.gov.au/: https://www.sportaus.gov.au/ data/assets/pdf_file/0005/683501/February_2019_-_Concussion_Position_Statement_AC.pdf
- Independant Sporting Organisation. (2021, March 7). ISA. Retrieved from ISA-Policies: https://www.isa.nsw.edu.au/policies/
- Complete concussion management. (2021, March 9). CCMI. Retrieved from https://completeconcussions.com/:



OXLEY COLLEGE CONCUSSION MANAGEMENT PROTOCOL

- 1. This Protocol aims to address both cognitive and physical rehabilitation and is a shared responsibility of parents, player, coaches, medical practitioners and the College.
- 2. Any student diagnosed with concussion is required to have progressed through the Oxley College Return to School Protocol listed below.
- 3. A medical clearance is required prior to returning to Sport activities

Concussion should be suspected when there is:

- a direct blow to the head, face or neck
- an impact somewhere else on the body that causes the head and brain to move rapidly back and forth.

Symptoms may not be initially apparent and may evolve over the hours or days following the injury.

CONCUSSION AT OXLEY COLLEGE ACTIVITY

1. Immediate removal from activity if concussion is suspected.

Issue relevant documentation (ARU or ISA concussion card) if applicable.

The following signs may indicate a more serious injury has occurred.

- Neck pain
- Confusion or irritability
- Vomiting
- Seizure or convulsion
- Deteriorating consciousness
- Headaches
- Unusual changes in Behaviour
- Visual or hearing disturbance
- 2. Administer first aid/seek medical advice
- 3. Parents/Carers notified and referred for medical

Oxley Staff Responsibilities

Follow student injury process and complete report

Monitor injury until transfer of responsibility to parent

Parent Responsibilities

Seek medical attention and follow treatment plan

Seek medical attention and follow treatment plan

CONCUSSION OUTSIDE OF SCHOOL

It is the responsibility of
Oxley Parents or
Guardians to report to the
College via the students
Head of House, a
diagnosed or suspected
concussion that has
occurred outside of school
operations or activities as
soon as is practicable
following the incident.

On receipt of such a notification, the return to school protocol will be implemented

IMPLEMENT RETURN TO SCHOOL PROTOCOL UPON DIAGNOSES OF CONCUSSION



Return to Oxley College Protocol

The current principles of concussion management involve rest during the acute period post injury (48hrs for adolescents), followed by a gradual increase in cognitive activity then a graduated return to physical activity. Oxley College utilises the standard Return to Play strategies found in the ISA Concussion Protocol, Rugby Union Australia Concussion Procedure and the Australian Government's Concussion in Sport Australia Position Statement. The graduated return to all school activities takes a minimum of 19 days after all symptoms and signs have disappeared. Progression is dependent on remaining symptom-free throughout. If symptoms reoccur at any stage, the student drops back to the previous stage for a period of 24 hours and must be symptom-free at that stage prior to attempting the next stage again. If symptoms are persistent at any stage medical review is essential.

STAGE	OBJECTIVES	PROGRESS	RESPONSIBILITY
Stage 1 (Day 1-2)	Deliberate physical and cognitive rest for a minimum of 48hrs until post-concussion symptoms have disappeared and the student has stopped all medication required for treatment (e.g pain killers).	Min of 48 hrs rest. Last 24 hrs must be symptom free to progress to stage 2	Student and Parent/carer
Stage 2 (Day 3)	Typical at home activities, as long as they don't increase symptoms. 5-15 minutes of activities, building up cognitive load through reading and homework.	Remain symptom free progress to stage 3	Student and Parent/carer. Inform Head of house of status and improvement
Stage 3 (Day 4)	Half day school attendance with modified cognitive load, ie no tests, no sport, no music, frequent breaks. No participation in social sport at break times	Remain symptom free progress to stage 4	Student and Parent/carer and Head of House.
Stage 4 (Day 5)	Full day of school attendance with modified, ie no tests, no sport, no music, frequent breaks. No participation in social sport at break times.	Remain symptom free progress to stage 5	Student and Parent/carer and Head of House.
Stage 5 (Day 6-14)	Full day of school attendance without modifications. Introduce basic sport-specific drills which are non-contact. No strength training. No participation in social sport at break times	Remain symptom free progress to stage 6	Student and Parent/carer, Head of House and Coach informed (if applicable)
Stage 6 (Day 15-17)	More complex, higher intensity training and drills. Low strength training. No contact training or sport. No participation in social sport at break times.	Remain symptom free progress to stage 7	Student and Parent/carer, Head of House and Coach informed (if applicable)
MEDICAL REVIEW AND WRITTEN MEDICAL CLEARANCE TO HEAD OF HOUSE TO PROGRESS TO STAGE 7			
Stage 7 (Day 18)	All normal school training activities and sport occur. If symptoms occur return to stage 6.	Remain symptom free progress to stage 8	Student and Parent/carer, Head of House and Coach informed (if applicable)
Stage 8 (Day 19)	Normal game play/return to sport and all school activities.	Remain symptom free. Be aware and inform practitioner of history if repeat concussion occurs.	Student and Parent/carer, Head of House and Coach informed (if applicable)
ALL NORMAL ACTIVITIES RESUME			