



## Concussion Policy and Procedure

There is heightened concern around concussions that young people are getting from a multitude of sports; peoples' understandings and diagnosis of it, the short and longer term effects and ultimately, the young person's return to learning (and sport). Significant medical research has been done around this and there is now enough evidence to implement a Best Practice Model. Coaches and parents are at the forefront of this and ACC have produced resources so they can be aware of the physical, clinical, memory recognitions and particularly the red flags that require immediate hospitalisation.

Primarily there needs to be a focus on the student's short and long term learning capacity; associated with this is a need to ensure their 'return to sport' is carefully managed.

Red Flag symptoms that should receive immediate medical treatment include:

- Neck Pain • Increasing confusion • Repeated vomiting • Seizures or convulsions • Double vision • Weakness or Tingling/Burning in arms or legs • Decreasing levels of consciousness
- Bad or worsening Headaches • Unusual behaviour changes

Other potential symptoms include:

- Feeling slowed down • Drowsiness • "Pressure in head" • More emotional • Irritability\* • Sensitivity to light/noise • Sadness • Amnesia • Fatigue or low energy • Feeling like "in a fog" • Balance problems
- Confusion
- "Don't feel right" • Difficulty remembering/concentrating • Anxiety/Nervousness

See the full list of Sign and Symptoms here: <https://www.rugbysmart.co.nz/injuries/concussion/signs-and-symptoms/>

The "graduated return to play" model outlined below is prepared and endorsed by ACC and will be followed by all College Sport Wellington member schools. Any player demonstrating any of the symptoms that could possibly be related to concussion must be stood down from all sport until as a MINIMUM they have fulfilled the mandatory 23 day stand down prescribed below including the graduated rehabilitation and then must have a medical certificate to support their return to play.

The stages below are the minimum expectations for those under 19 and critical to this are Stages 1 & 6 and that it's a graduated return to play over 23 days.

### Graduated Return to Play – Rehabilitation Stages

During this stand down period players must complete the Graduated Return to Learn (GRTL) and the Return to Play (GRTP) program. These programs are based on international best practice with the goal of helping players recover and get back to school and sport.

As a concussion is a brain injury the ability of the player to think and process information will also be affected. The athlete may need to miss a few days of school after a concussion. An athlete should not go back to sports until they are back to school without symptoms getting significantly worse and no longer needing any changes in their schedule.

The Graduate Return to Learn programme can be found here:  
<https://www.rugbysmart.co.nz/injuries/concussion/return/>

<b>1. Medical assessment</b> within 48 hours of suspected concussion	
<b>2. Rest / No Activity</b> Complete mental and physical rest. No screens.	Days 1- 2
<b>3. Light aerobic exercise</b> Symptom Guided low to moderate intensity activities such as walking or stationary cycling	Next 14 days
<b>4. Sport-specific exercise</b> Running drills or ball handling activities. NO impact activities.	Next 2 days
<b>5. Non-contact training drills</b> Progression to more complete training: passing, catching, may start doing weight training	Next 2 days
<b>6. Following medical clearance full contact practice</b> Student may participate in normal training activities, including contact training.	Next 2 days
<b>7. After 24 hours return to play</b> Player rehabilitated	<b>Day 23</b>

**Note:** At any stage in this return to play, athletes need to remain symptom free before going to the next step. Should they develop symptoms during this process, they need to rest again until they have been symptom free for 48 hours, before returning to the level where they did not have symptoms.