Return to Learn -Concussion Monitoring

Randolph County School System Updated August 2020

What is a concussion?

Type of mild Traumatic Brain Injury caused by:

- A bump, blow, or jolt to the head -or-
- A hit to the body that causes the head and brain to move rapidly back and forth
- This sudden movement can cause the brain to move around within the brain, stretching and damaging brain cells and causing chemical changes within the brain.

http://www.cdc.gov/headsup/basics/concussion_whatis.html

Seriousness and Prevalence

- Concussions are considered "mild" brain injuries because they are generally "not life threatening."
- Effects can be serious.
- More than 3 million known cases reported in US each year.
- Most common type of mild brain injury.
- Can lead to other cognitive impairments.

Possible Symptoms

- Headaches, balance, fatigue, dizziness, difficulty sleeping, numbness/tingling
- Ringing in ears
- Blurred vision, sensitivity to lights or sounds
- Sad, angry, worried, irritable, nervousness
- Mentally "foggy," difficulty with memory and focus, confusion

Symptoms may not present right away.

Most symptoms resolve within 10 days to a few weeks, but may worsen before getting better.

Longer recovery may be necessary after repeated concussions.

Not all concussions are created equal.

Gfeller-Waller Concussion Awareness Act

Passed in 2011 by North Carolina General Assembly.

Concussion management for injuries sustained during participation in public school sports.

Clear guidelines for managing concussion injuries with middle and high school athletes.

Does NOT address: Non-sports related injuries, injuries outside the school setting, injuries to younger children, or the needs of students as they return to learning environment.

Return to Learn – HRS-E-001

Public schools must:

- Develop a plan which includes 4 main requirements
- Identify a team responsible for identifying and monitoring students who obtain a concussion
- Provide relevant staff development on concussion and district/school procedures
- Include a system of surveillance (questions about head injury) collected annually

Return to Learn Team

Each school must appoint a team responsible for identifying the return-to-learn needs of a student

Team may include: Student, parent, principal, school nurse, counselor, school psychologist, or other appropriate professional

Concussion Contact – Administration, if Nurse is off campus

Receive notification of concussion, send notification to team

Nurse / Case Manager: Contact / Follow up with parent, provide educational materials, complete nursing assessments, provide CDC information, coordinate and develop Medical and Educational Plan of Care, ensure student's needs are addressed

Return to Learn Team

**Nurses have been appointed as the lead for the Return to Learn team.

Any report of a concussion should be given to the nurse as soon as possible. If the nurse is not on campus, an appointed person will handle the information and inform the nurse of the student and concussion status.

Return to Learn Team

Teachers: Implement adjustments, participate in development of Educational plan of care, implement mods/accommodations

School Psychologist: Participate in development of Educational plan of care

Parents:Provide medical documentation to Nurse/Case Manager, participate in development of Medical/Educational plan of care, provide updates from MD, update case manager on changes in mood, behavior, or school performance as noted

Student (if appropriate)

Student Athletes

Coaches, Athletic Trainers may need to be part of the RtL team: Follow concussion notification process and return to play protocols.

Participate in Medical and Educational plans of care, as needed.

Student athletes and parents now have a mandatory concussion video to watch prior to the start of the season.

https://www.youtube.com/watch?v=is7NjpiW4NY&feature=youtu.be

Student Athletes

Going back into the game after a concussion can potentially double recovery time.

And if an athlete returns to play too early, they are 3x as likely to have another concussion or injure another part of their body.

Could lead to sitting out the season, ending the athletes career, or worse, suffering permanent brain damage.

Concussion contradiction: Take a knee and get medical help early, the concussion may be a serious injury, but if the athlete continues to play, a simple injury could turn serious.

Diagnosed with Concussion: Develop a Plan

Addressing needs

- 1. <u>Guidelines for removal</u>: Removal of a student from physical and mental activity when there is a suspicion of concussion
- 2. <u>Notification procedure</u>: Notification to educational staff for removal of learn or play

Information brought by parent or student informing staff, paperwork from MD

Upon notification, administration alerts nurse/case manager. Nurse then alerts parents, teachers, psychologist, and if necessary, coaches and athletic trainers

Nurse will inform parties, identify symptoms to look for, ask teachers for accommodations, include recommendations from MD

Diagnosed with Concussion: Develop a Plan

3. <u>Medical care plan / school accommodations</u>: The plan must include medical care plan/school accommodations specific to student's MD recommendations and symptoms

If no MD recommendations, the nurse will consult with student and parent to develop care plan based on student's symptoms

If student is still having symptoms, more supports may be implemented:

Medical plan of care – address medical symptoms

Educational plan of care – address academic or functional difficulties

Symptoms, Accommodations, Who is responsible for implementation

4. <u>Delineation of return to learn or play requirements</u>: Safe return-to-learn requirements

Provide Annual Staff Education

Each LEA must provide information and staff development on an annual basis

Training should include information on concussions and other brain injuries, with a focus on return-to-learn issues and concerns

Now included in annual list of RCSS required trainings

Collect Concussion Info Annually

Each LEA will include a question related to any head injury/concussion the student may have incurred in the past year in their annual student health history and emergency medical information update.

Resources

State Board of Education Policy HRS-E-001 Return to Learn After Concussion

http://www.nchealthyschools.org/docs/legislation/stateboard/concussion-policy.pdf

Return to Learn After Concussion – Guidelines for Implementation

http://www.nchealthyschools.org/docs/legislation/stateboard/implementation-guide.pdf

Centers for Disease Control and Prevention – What is a Concussion?

http://www.cdc.gov/headsup/basics/concussion_whatis.html

TeachAids. Crash Course: Concussion Education. (2018). Retrieved May 29, 2020, from https://www.youtube.com/watch?v=is7NjpiW4NY&feature=youtu.be