

Concussion Policy

**The information contained in this policy document should not be considered as a legal proxy or health care advice.

A concussion is an injury of the brain, and can affect memory and recall and produce other symptoms. Any impact to the head, face or neck, or body, which causes a “sudden jarring of the brain inside the skull”, may cause a concussion (e.g., heading the ball).¹

Although most individuals recover from concussions quickly and fully, some may show symptoms for a longer period. Athletes, parents, coaches, and club administrators play a critical role in learning how to identify signs and symptoms of concussion and managing and treating the condition appropriately.

The Russell Soccer Club takes the prevention of injury and concussion seriously. This policy outlines the Club’s approach for preventing and reducing concussions, educating, and managing the return to play procedure. In particular, roles and responsibilities are detailed for the Board of Directors and Club administrators, Coaches and Team Officials, and Parents and Athletes.

Reference:

¹ *Parachute Canada, Available at: <http://www.parachutecanada.org/active-and-safe/item/roles-and-responsibilities-of-coaches-and-officials>*

Roles and Responsibilities of the Club:

- Adopt the FIFA Sport Concussion Assessment Tool (SCAT) tool and a Return to Play (RTP) procedure. The FIFA SCAT is a tool to identify concussions and steps required in returning a player to activity. An RTP process incorporates 6 steps, with a minimum of 24 hours occurring before each step (although could be longer than 24 hours, especially for children). Guidance should be provided by a medical professional. The 6 steps are:
 1. No activity, complete rest. Once the athlete has no symptoms, they proceed to next step.
 2. Light aerobic exercise such as walking, no resistance training. Performing step two without symptoms allows the athlete to proceed to level three. If symptoms return, the athlete moves back one stage then continues.
 3. Sport specific training (e.g. skating in hockey, running in football), progressive addition of resistance training at steps three or four. Performing step three without symptoms allows the athlete to proceed to level four.
 4. Non-contact training drills. Performing step four without symptoms allows the athlete to proceed to level five.

5. Full contact training after medical clearance. Performing step five without symptoms allows the athlete to proceed to level six.
 6. Return to Game play.
- Track the number and severity of concussions during the season, including management and treatment course.
 - Evaluate changes in concussion awareness and action among coaches and team officials between the pre- and post-season.
 - Make parents and players aware of their role in monitoring an athlete after an injury (suspected or actual) and the Clubs Return to Play procedures.
 - Post information on concussions in central spots, if possible.
 - Host or incorporate mandatory education sessions for all team officials at the start of the season.
 - Provide information in coaches and officials team packages, electronic resources and handouts, including information on the return-to-play procedure (see attached) and a Concussion Toolkit, and the SCAT 3 (see attached). Include these prominently on the Club Website.
 - Suggest coach education modules through the Canadian Coaching Association's Traumatic Brain Injury (TBI) to help coaches (1) assess the safety of practices and games (2) recognize the symptoms of TBI and remove athletes from practice and play when appropriate (3) apply the Return To Play protocol for athletes.

References:

Ontario Soccer Association, Available at: <http://www.ontariosoccer.net/player/sports-medicine/concussions/215-concussions>

Parachute's Active and Safe Concussion Toolkit, Available at: <http://www.parachutecanada.org/active>

Play Safe Initiative, Available at: <http://www.playsafeinitiative.ca/resources>

Roles and Responsibilities of Team coaches and officials:

- Create, communicate and follow an emergency medical plan (see policy X).
- Identify properly trained designates during games and practices to help assess concussion and other injuries.

- Limit physical contact between players during practices and games (especially younger players)
- Utilize drills or techniques which reduce the risk of injury.
- Check equipment often. Make sure equipment is appropriate and is in proper working condition.
- Recognize that athletes might also choose not to report their injury or de-emphasize symptoms for a number of reasons (want to continue playing, do not want to let others down), therefore be on alert to incidents involving the player.
- Remove a concussed person from activity immediately and they should be assessed by a medical practitioner. Recognize that when concussed, their ability to assess the situation may be impaired.
- Engage in coaching training opportunities in Traumatic Brain Injury, as outlined above.
- Utilize a pre-screen for possible injury (sections of SCAT3) and follow the steps the Return-to-Play protocols (see attached).
- Inform Club administrators of any concussions and treatments.
- Obtain a copy of the athlete's health professional's confirmation of return to play

Reference:

Parachute Canada, Available at: <http://www.parachutecanada.org/active-and-safe/item/roles-and-responsibilities-of-coaches-and-officials>

Roles and Responsibilities of Parents and Athletes

- Recognize that recovering from a concussion takes time. It involves following progressive steps to Return to play.
- Recommend that the athlete seek medical assistance trained in concussions, and follow the six Return to Play steps (see attached). These steps do not correspond to days, though each step should take a minimum 24 hours between each step and this increases (e.g., double) for children and adolescents. If symptoms return during any of the stages, the individual should stop the activity and return to rest until symptoms resolve before they try any activity again. A physician should be consulted during the

process and if symptoms persist.

- Recognize that post-concussion symptoms may get worse as the athlete increases mental or physical activity, so it is important that Return to Play steps be followed.
- Recognize that athletes might also choose not to report their injury or de-emphasize symptoms for a number of reasons (want to continue playing, do not want to let others down). A concussed person should be removed from activity immediately and should be assessed by a medical practitioner
- Provide written confirmation by a medical practitioner to the Team official that the player may resume soccer activities.

Reference:

Parachute Canada, Available at: <http://www.parachutecanada.org/active-and-safe/item/>