

Concussion Management Plan Responsibilities - School Principal/Designate

Once the parent/guardian has informed the school principal/designate of the results of the Medical Assessment, the school principal/designate must:

- inform all school staff (for example, classroom teachers, physical education teachers, intramural supervisors, coaches) and volunteers who work with the student of the results;
- communicate (for example, in-person meeting, phone conference, video conference, email) with parents/guardians, and where appropriate with the student;
 - to explain the stages of Initial Rest to Stage 2 of the **Concussion Return to School Plan for Return to Learning (RTL)** and the stages of Initial Rest to Stage 2b of the **Concussion Return to School Plan for Return to Physical Activity (RTPA)** that occur at home.
 - to provide and explain the purpose of the **Home Concussion Management Form (Return to School Plan)** (to document the student's progress through the stages of RTL and RTPA).
 - the student must complete the RTL – Stage 2 and RTPA – Stage 2b prior to returning to school; and
 - completion must be documented and returned to the school using a Home Concussion Management Form (Return to School Plan).
- to provide information about concussion recovery:
 - Most students who sustain a concussion while participating in sport/physical activities will make a complete recovery and be able to return to full school and sport/physical activities within 1-4 weeks of injury.

- Approximately 15-30% of individuals will experience symptoms that persist beyond this time frame.
- Individuals who experience persistent post-concussion symptoms (> 4 weeks for youth athletes) may benefit from referral to a medically supervised multidisciplinary concussion clinic that has access to professionals with licensed training in traumatic brain injury that may include experts in sport medicine, neuropsychology, physiotherapy, occupational therapy, neurology, neurosurgery, and rehabilitation medicine.
- Ensure all documentation is filed as per school board policy. For example:
 - A [Tool to Identify a Suspected Concussion](#)
 - A [Medical Concussion Assessment Form](#)
 - A [Home Concussion Management Form \(Return to School Plan\)](#)
 - A [School Concussion Management Form \(Return to School Plan\)](#)
 - A [Medical Concussion Clearance Form](#)
 - [Collaborative Team's learning strategies and adaptations](#) for student recovery (Explain the Collaborative Team Approach and their role on the team when the student returns to school)

For associated general procedures for when the student is at home, consult the [Sample Home Concussion Management Form \(Return to School Plan\)](#).

When the Student Returns to School

A [School Concussion Management Form \(Return to School Plan\)](#) is provided for school administrators and school collaborative teams to use in the management of a student's return to school and return to physical activity following a diagnosed concussion. It does not replace medical advice. While the RTL and RTPA stages are inter-related they are not interdependent. A student's progress through the stages of RTL is independent from their progression through the RTPA stages. Different students will progress at different rates.

A student who has no symptoms when they return to school, must progress through all the RTL and RTPA stages with each stage a minimum of 24 hours.

During all stages of RTL and during Stages 1-4 of RTPA:

- if symptoms re-appear, or new symptoms appear the student returns to previous stage for a minimum of 24 hours and only participates in activities that can be tolerated.
- if symptoms worsen over time, student must return to medical doctor or nurse practitioner.

During Stages 5-6 of RTPA, if symptoms re-appear or new symptoms appear, the student must return to medical doctor or nurse practitioner to have the Medical Clearance reassessed.

For associated General Procedures consult the [Sample School Concussion Management Form \(Return to School Plan\)](#).