CONCUSSION POLICY & PROCEDURES
&
ROWAN'S LAW

ROW ONTARIO

WHAT IS A CONCUSSION?

- A concussion is a brain injury that can’t be seen on X-rays, CT or MRI scans.
- It affects the way an athlete thinks, and can cause a variety of symptoms.
- No two concussions are exactly alike

What causes a concussion?

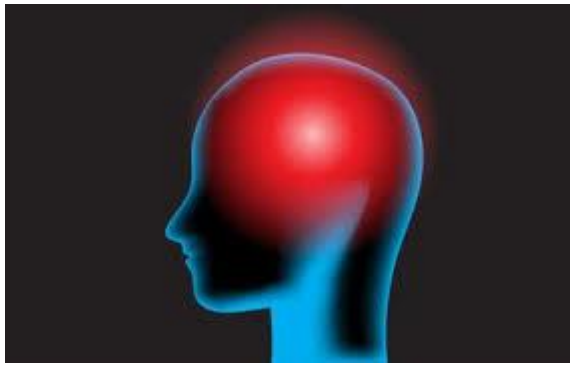
- Any blow to the head, face or neck, or somewhere else on the body that causes a sudden jarring of the head may cause a concussion.
- Direct contact to the head is **not** required to cause a concussion.

Rowing is a lower risk, however opportunities for concussions both ON and OFF the water exist.

ROWONTARIO'S PHILOSOPHY
CONCUSSION MANAGEMENT & ROWAN' LAW

- Updating our policy to reflect current research and proposed legislation.
- We will error on the side of caution to protect the long term health of our participants.
- We will follow the law, and exceed where appropriate.
- We will work to have identical protocols across the province.
- Our policies and protocols will be implemented for all ages as the health of all participants is our priority.

ROWAN'S LAW



Contains 4 requirements:

- Education
- Concussion Code of Conduct
- Removal from Sport Protocol
- Return to Sport Protocol

For Ontario - Passed March 7th 2018

No date yet for implementation – many questions remain

Once Rowan's Law is finalized and Ministry expectations are clear our policies will likely need to be updated to reflect the law.

EDUCATION & PREVENTION

- Annual training for Coaches, Umpires & other club leaders – education resources, signs and symptoms, procedures
- Education Resources available online and in hand out format when appropriate for all participants
- Coaches to educate on how to avoid concussions and awareness of situations or potential situations.

www.parachutecanada.org

CONCUSSION CODE OF CONDUCT

- Participants (and if under 18, their parent/guardian) have to confirm they have reviewed the Concussion Code of Conduct.
- Athlete key pieces are disclosure of concussion elsewhere and/or experiencing concussion symptoms
- Coaches and umpires need to provide confirmation that they have reviewed the Concussion Code of Conduct.
- Reviews and confirmation will be needed annually.
- At this point it is a separate code of conduct from our regular code of conduct – once Rowan's Law is finalized we will determine if it can be combined in one document.

REMOVAL FROM SPORT PROTOCOL

- Procedure for immediate removal for anyone suspected of having a concussion.
- Designate the person responsible to:
  a) Remove individual
  b) Inform parent (if under 18)
  c) Inform other parties as needed (i.e. organization)
  d) Ensures individual does not return to sport without following return to sport protocol.

Only Medical Doctors & Nurse Practitioners can diagnosis a concussion. ROWONTARIO's Protocols have been established with the assumption there will not be a medical doctor or nurse practitioner on site to provide medical assessment.

What are the signs and symptoms of a more severe brain or spine injury?

RED FLAGS

- Person complains of neck pain
- Deteriorating conscious state
- Increasing confusion or irritability
- Severe or increasing headache
- Repeated vomiting
- Unusual behaviour change
- Seizure or convulsion
- Double vision
- Weakness or tingling / burning in arms or legs

Image source: Parachute

What are the symptoms of concussion?

A person with a concussion might experience one or more of the following:

PHYSICAL

- Dizziness
- Nausea or vomiting
- "Pressure in the head"
- Headache
- Balance problems
- Sensitivity to light
- Neck pain
- Seizure or convulsion
- Blurred vision
- Loss of consciousness

COGNITIVE

- Sensitivity to noise
- Feeling slowed down
- Fatigue or low energy
- Difficulty remembering
- Confusion
- Drowsiness
- Difficulty concentrating
- Amnesia

Image source: Parachute

CONCUSSION RECOGNITION TOOL 5 ©

To help identify concussion in children, adolescents and adults

Supported by

RECOGNISE & REMOVE

Head impacts can be associated with serious and potentially fatal brain injuries. The Concussion Recognition Tool 5 (CRT5) is to be used for the identification of suspected concussion. It is not designed to diagnose concussion.

STEP 1: RED FLAGS — CALL AN AMBULANCE

If there is concern after an injury including whether ANY of the following signs are observed or complaints are reported then the player should be safely and immediately removed from play/game/activity. If no licensed healthcare professional is available, call an ambulance for urgent medical assessment:

- **Neck pain or tenderness**
- **Double vision**
- **Weakness or tingling/ burning in arms or legs**
- **Severe or increasing headache**
- **Seizure or convulsion**
- **Loss of consciousness**
- **Deteriorating conscious state**
- **Vomiting**
- **Increasingly restless, agitated or combative**

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Assessment for a spinal cord injury is critical.
- Do not attempt to move the player (other than required for airway support) unless trained to so do.
- Do not remove a helmet or any other equipment unless trained to do so safely.

If there are no Red Flags, identification of possible concussion should proceed to the following steps:

STEP 2: OBSERVABLE SIGNS

Visual clues that suggest possible concussion include:

- Lying motionless on the playing surface
- Slow to get up after a direct or indirect hit to the head
- Disorientation or confusion, or an inability to respond appropriately to questions
- Blank or vacant look
- Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements
- Facial injury after head trauma

STEP 3: SYMPTOMS

- Headache
- "Pressure in head"
- Balance problems
- Nausea or vomiting
- Drowsiness
- Dizziness
- Blurred vision
- Sensitivity to light
- Sensitivity to noise
- Fatigue or low energy
- "Don't feel right"
- More emotional
- More Irritable
- Sadness
- Nervous or anxious
- Neck Pain
- Difficulty concentrating
- Difficulty remembering
- Feeling slowed down
- Feeling like "in a fog"

STEP 4: MEMORY ASSESSMENT

(IN ATHLETES OLDER THAN 12 YEARS)

Failure to answer any of these questions (modified appropriately for each sport) correctly may suggest a concussion:

- "What venue are we at today?"
- "Which half is it now?"
- "Who scored last in this game?"
- "What team did you play last week/game?"
- "Did your team win the last game?"

Athletes with suspected concussion should:

- Not be left alone initially (at least for the first 1-2 hours).
- Not drink alcohol.
- Not use recreational/ prescription drugs.
- Not be sent home by themselves. They need to be with a responsible adult.
- Not drive a motor vehicle until cleared to do so by a healthcare professional.

ANY ATHLETE WITH A SUSPECTED CONCUSSION SHOULD BE IMMEDIATELY REMOVED FROM PRACTICE OR PLAY AND SHOULD NOT RETURN TO ACTIVITY UNTIL ASSESSED MEDICALLY, EVEN IF THE SYMPTOMS RESOLVE

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REMOVAL FROM SPORT PROTOCOL
Programs and Practice

If any individual suffers any kind of injury where there has been direct or indirect force to the head, neck, face or upper body, and is demonstrating or experiencing any concussion related signs or symptoms, the individual will be removed from activity immediately by their coach/instructor.

Coach is identified as the
“Most Responsible Person” to make the decision
to Remove from Sport

REMOVAL FROM SPORT PROTOCOL
Competition

Coach is responsible to:

- Remove Individual
- Inform parent if under 18
- Follow up including Return to Sport Protocol

If they witness it, Umpires & Regatta Officials have responsibility to:

- Inform Coach
- Inform Host Organization (Regatta Chair usually)
- Support Coach in Decision Making
- Support Coach if needed in communicating with host organization and parent if under 18

RETURN TO SPORT PROTOCOL

- Organization procedure is applied regardless of where or how concussion takes place.
- Includes a specific process to implement the return of an individual to sport.
- Designate the person responsible for ensuring that:
  a) All appropriate people or organizations are notified when individual is permitted to return to sport
  b) Individual does not return to training, practice or competition without following return to sport protocol.

Return-to-Sport Strategy

- Helps athletes, coaches, trainers, and medical professionals to partner in allowing the athlete to make a gradual return to sport activities.
- An initial period of 24-48 hours of rest is recommended before starting the RTSp Strategy.
- Each stage is a minimum 24 hours.
- If the athlete experiences new or worsening symptoms, they should go back to the previous stage for at least 24 hours.

SIRC Parachute

RETURN TO SPORT PROTOCOL – ROWONTARIO

STAGE 1: Symptom limited activity – Goal: A gradual reintroduction of activity

After an initial short period of rest of 24-48 hours, light cognitive and physical activity can be initiated as long as they don't worsen symptoms. A physician, preferably one with experience managing concussions, should be consulted before beginning the staged process to return.

STAGE 2: Light aerobic exercise – Goal: Increased heart rate

Activities such as walking or stationary cycling. The athlete should be supervised by someone who can help monitor for symptoms and signs. No resistance training or weight lifting. The duration and intensity of the aerobic exercise can be gradually increased over time if no symptoms or signs return during the exercise or the next day.

STAGE 3: Sport specific activities – Goal: Add movement

Activities such as light running or gentle body weight resistance exercises can begin at stage 3. There should be no body contact or other jarring motions such as high speed stops or hitting a baseball with a bat.

STAGE 4: Begin Drills without body contact – Goal: Exercise, coordination, and increased thinking

Activities such as indoor rowing and resistance training can be added to activities from previous stages.

No symptoms? The time needed to progress will vary with the severity of the concussion and with the athlete. Proceed to Stage 5 only after medical clearance.

MEDICAL CLEARANCE = ON THE WATER

STAGE 5: On water practice, once cleared by a doctor – Goal: Restore confidence and assess functional skills by coaching staff

Coaches and instructors will allow return to the water in gradually challenging conditions.

No symptoms? Proceed to Stage 6 after minimum of two on water situations without symptoms.

STAGE 6: Competition

Return to sport with normal activities

How to Implement in your Club

STEP 1: Access the Concussion Resources from the COAST library

Determine if you need to alter the policy for your club at all.

We would suggest it is not altered, with the exception of the competition aspect if you do not compete, this portion can then be removed. However recognize if you do start to compete in the future you will then need to add it in.

(Club identified Board representative should have COAST access information, connect with club President to access, failing that connect with me.)

STEP 2: Board of Directors to pass policy

Share the information gather with the Board and discuss the importance of this policy, including the upcoming legal requirements.

Determine if the Board is comfortable simply passing a motion to directly adopt the ROWONTARIO policy and commit to having the scope apply to their club or if they would like to alter the policy and scope directly to be their own policy.

How to Implement in your Club

STEP 3: Resources & Codes of Conduct Available

Decide for your programs and/or membership how educational resources and Codes of Conduct will be available, distributed and collected.

Can a sign off be incorporated in online registration? How are participants registering?

2019 will be a trial year for these items.

(Note: Rowan's Law states these items happen before registering)

Part of education is awareness is ensuring rowers (and parents of youth) understand that they will be removed and not allowed to return without medical clearance if they have a concussion.

STEP 4: Train and Support the Decision Makers

Instructors and Coaches will need to be trained on how to recognize a concussion and what to do if they witness one or a participant reveals they have one.

Identify who else in the club needs to be trained – volunteers, committee members, communication people that would deal with participant/parent concerns…

Remember I am here to support you

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