ATHLETIC CONCUSSION POLICY

PURPOSE OF POLICY & MASSACHUSETTS LAW:

The purpose of this policy is to provide information and standardized procedures for persons involved in the prevention, training management and return to activity decisions regarding students who incur head injuries while involved in extracurricular athletic activities\(^1\) including, but not limited to, interscholastic sports, in order to protect their health and safety as required by Massachusetts law and regulations.

The requirements of the law apply to all public middle and high schools, however configured, serving grades six through high school graduation.

In addition to any training required by law, the following persons shall complete one of the head injury safety training programs approved by the Massachusetts Department of Public Health (DPH) as found on its website:

* coaches;
* certified athletic trainers;
* trainers;
* volunteers;
* school and team physicians;
* school nurses;
* athletic directors;
* directors responsible for a school marching band;
* employees or volunteers
* students who participate in an extra curricular activity and their parents

Volunteers shall not be liable for civil damages arising out of any act or omission related to the requirements of law, unless such volunteer is willfully or intentionally negligent in his act or omission.

CONCUSSION:

Most student athletes who sustain a concussion can fully recover as long as their brain has time to heal before sustaining another hit; however, relying only on an athlete’s self-report of symptoms to determine injury recovery is inadequate as many high school athletes are not aware of the signs and symptoms or the severity concussive injuries pose, or they may feel pressure from coaches, parents, and/or teammates to return to play as quickly as possible. One or more of these factors will likely result in under-diagnosing the injury and a premature return to play.

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\(^1\) Extracurricular Athletic Activity means an organized school sponsored athletic activity generally occurring outside of school instructional hours under the direction of a coach, athletic director or marching band leader, but not limited to Alpine and Nordic skiing and snowboarding, baseball, basketball, cheer leading, cross country track, fencing, field hockey, football, golf, gymnastics, horseback riding, ice hockey, lacrosse, marching band, rifle, rugby, soccer, skating, softball, squash, swimming and diving, tennis, track (indoor and outdoor), ultimate Frisbee, volleyball, water polo, and wrestling. All interscholastic athletics are deemed to be extracurricular athletic activities.
Massachusetts law and Massachusetts Department of Public Health regulations make it imperative to accurately assess and treat student athletes when concussions are suspected.

Student athletes who receive concussions may appear to be “fine” on the outside, when in actuality they have a brain injury and are not able to return to play. Incurring a second concussion can prove to be devastating to a student athlete. Research has shown that young concussed athletes who return to play before the brain has healed are highly vulnerable to more prolonged post-concussion syndrome or, in rare cases, a catastrophic neurological injury known as Second Impact Syndrome

**SCHOOL PROTOCOLS:**

A School Department protocol will discuss and outline what a concussion is, the mechanism of injury, signs and symptoms, management and return to play requirements, as well as information on Second Impact Syndrome and post-concussion syndrome. Lastly, this protocol will discuss the importance of education for our athletes, coaches and parents and other persons as required by law.

This protocol will be reviewed on a yearly basis with all pertinent staff to inform them of the procedures to be followed to manage sports-related concussions. This protocol will also be reviewed on a yearly basis by the Athletic Department as well as by nursing staff.

Annually the School Department will report to the School Committee the number of concussions monitored, general outcomes and a rationale for any changes in the protocol.

**RECORD KEEPING BY DISTRICT:**

The Superintendent shall maintain or cause to be maintained complete and accurate records of the district’s compliance with the requirements of the Concussion Law, and shall maintain the following records for seven years or, at a minimum, until the student graduates, unless state or federal law requires a longer retention period:

1. Verification of completion of annual training and receipt of materials;
2. DPH Pre-participation forms and receipt of materials;
3. DPH Report of Head Injury Forms, or school based equivalents;
4. DPH Medical Clearance and Authorization Forms, or school based equivalents; and
5. Graduated reentry plans for return to full academic and extracurricular athletic activities.

Any changes in this policy will be approved by the School Committee and given to athletic staff, including coaches and other school personnel, in writing. An accurate synopsis of this policy shall be placed in student and faculty handbooks.

Upon the adoption of this policy by the Shrewsbury School Committee, the Superintendent shall ensure that DPH receives an affirmation on school district letterhead that the district has developed policies and the School Committee had adopted a final policy in accordance with law. This affirmation shall be updated by September 30, 2013 and every two years thereafter upon review or revision of its policies.