

CONCUSSION POLICY

Concussion is a brain injury resulting in a disturbance of brain function. It affects the way a person thinks, feels and remembers things. Concussion can affect an individual in a variety of ways, including:

- Physical
- Cognitive
- Emotional
- Sleep
- Fatigue

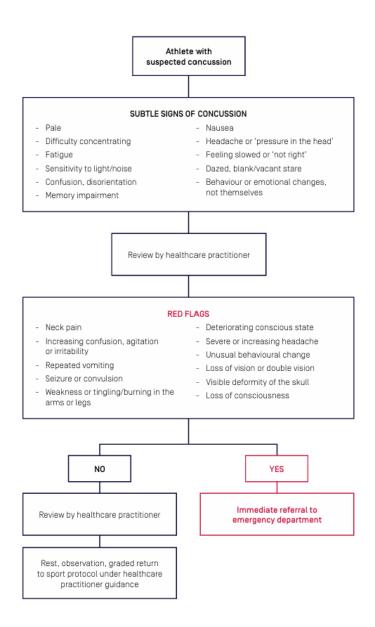
A concussion occurs through a collision with another person or object where biomechanical forces to the head, or anywhere on the body transmit an impulsive force to the head/brain. In most cases, this results in transient neurological impairment. It should be noted that concussion can also occur with relatively minor 'knocks'

The risk of complications from concussion is increased if a player is permitted to return to sport before they have fully recovered. It is important that athletes do not return to contact activities or competition, until they have fully recovered. The graded return to sport framework (GRTSF) for community and youth assists athletes/coach/parents/teachers with concussion management through the recovery process and time frames for a safe return to sport/learn.

The return to sport protocol for community and youth sport includes.

- > Introduction of light exercise after an initial 24-48 hours of relative rest.
- > Several checkpoints to be cleared prior to progression.
- > Gradual reintroduction of learning and work activities. As with physical activity, cognitive stimulation such as using screens, reading, undertaking learning activities should be gradually introduced after 48 hours.
- > At least 14 days symptom free (at rest) before return to contact/collision training. The temporary exacerbation of mild symptoms with exercise is acceptable, if the symptoms quickly resolve at the completion of exercise, and if the exercise-related symptoms have completely resolved before resumption of contact training.
- > A minimum period of 21 days until the resumption of competitive contact/collision sport.
- > Consideration of all symptom domains (physical, cognitive, emotional, fatigue, sleep) throughout the recovery process.
- > Return to learn and work activities should take priority over return to sport. That is, while graduated return to learn/work activities and sport activities can occur simultaneously, the athlete should not return to full contact sport activities until they have successfully completed fully return to learn/work activities.

Sometimes concussion is not detected or suspected at the time of injury. The athlete may present two or three days later at home, or at school, with subtle changes in behaviour. It is important that teachers, coaches, parents, school mates and teammates understand the subtle symptoms and signs that can suggest someone has suffered concussion.







IMPORTANT: If an injured player cannot continue to play immediately (within approximately 15 seconds) or if a player receives treatment, or any assistance from the players own coach, substitutes, excluded players and/or accompanying delegation members, that player must be substituted and they are not permitted to return for the remainder of the game.

Clearance to return to training and game play.

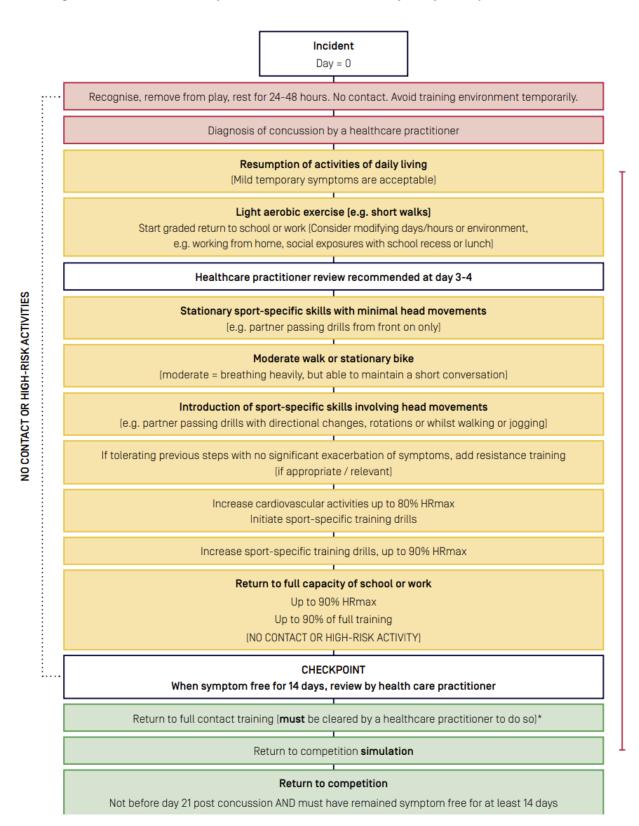
The below chart shows the steps required to be followed when there is a diagnosis of a concussion.

Concussion in Sport Australia

Return to Sport Protocol for children 18 years of age and under

Diagnosis of concussion No return to sport Deliberate physical and cognitive rest [24-48 hours] If there is any significant and sustained Graduated return to Light aerobic activity deterioration in concussion symptoms, learning activities [until symptom-free] further rest from specific trigger activity Basic sport-specific drills which are Recurrence of concussion symptoms non-contact - no head impact (24 hours) More complex sport-specific drills which are non-contact - no head impact - may Recurrence of concussion symptoms add resistance training (24 hours) Children should not return to contact/collision activities before 14 days from complete resolution of all concussion symptoms Medical review before return to If not medically cleared, any further activity full contact training to be determined by medical practitioner Recurrence of concussion symptoms Return to full contact training (24 hours) COMPLETE FORMAL MEDICAL REVIEW Recurrence of concussion symptoms Return to sport COMPLETE FORMAL MEDICAL REVIEW

Figure 3: Graded return to sport framework for community and youth sport



Clearence to play after multiple concussions

Concussions are a minimum of two concussions within a three-month period, or a minimum of 3 concussions with a 12-month period. It is recommended that a player be 28 days symptom free before returning to any contact training and a minimum of 6 weeks from the time of the most recent concussion and obtains written consent from a health care provider with expertise in concussion before they are permitted to return to play.

A 'concussion officer' is a single point of contact and manages the coordination of matters related to concussion. A 'concussion officer' is not a concussion expert and is not expected to diagnose concussion. The 'concussion officer' ensures that anyone diagnosed with concussion follows the organisation's agreed concussion protocol. Their job is to be the recipient of information in relation to concussion and to ensure that the concussion protocol is enacted. This needs to be effectively socialised and communicated to all stakeholders, to ensure it is adapted successfully.

HeadCheck App – It is recommended that all Coaches, Team Managers and stadium supervisors download the app to assist with the initial assessment of a concussions and steps to take.

All suspected concussions incidents must be reported to Nunawading Basketball within 3 days of the incident occurring. Coaches, team managers or club members can email childsafety@nunawadingbasketball.com.au