

Regulation: JLC-R

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JLC

JLC-E-1

STUDENT HEALTH SERVICES AND REQUIREMENTS

Return to School / Return to Sport

The Division acknowledges the serious nature of a concussion and how physical activity and cognitive activity during the recovery period may impact the student.

When a staff member, volunteer, or administrator becomes aware of a student who has suffered a head injury with observed symptoms of a concussion, the parents/guardians shall receive an Advisory Notice of Head Injury (Exhibit JLC-E-1) and Medical Assessment Letter. Parents should have a medical practitioner examine the student and determine if they have experienced a concussion. The medical practitioner will complete and sign the Medical Assessment Letter or provide a doctor's note which will be returned to the school by the parent.

If the student has not been diagnosed with a concussion they can resume full participation in school and sport activities without restriction.

In the absence of the Medical Assessment Letter or a doctor's note, school staff will exercise caution and will follow the "Return to School/Return to Sport" protocol. This may include limiting or removing recess, active gym time, school sport events, etc. until a doctor's note is produced clearing the student for full school activity involvement.

Should the medical assessment show a positive diagnosis for a concussion then the school, in accordance with the medical practitioner, shall implement the <u>Return to School/Return to Sport</u> process. This process will serve to assist the student with a gradual return to full school involvement.

The principal shall inform all teachers who work with the student of the injury and provide the teachers with the Return to School/Return to Sport process and Return to School Support Strategies. The principal in cooperation with the teachers, school volunteers and parents/guardians shall monitor the student's symptoms and guide the process until the student reaches the level of full school re-engagement.

It is important that all individuals with a suspected concussion undergo medical assessment by a medical doctor or nurse practitioner as soon as possible. It is also important that all athletes with a suspected concussion receive written medical clearance from a medical doctor or nurse practitioner before returning to sport activities.

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Return to School / Return to Sport - Stages

Return to School Strategy

Depending on the severity and type of symptoms present, student-athletes will progress through the following stages at different rates. If the student-athlete experiences new symptoms or worsening symptoms at any stage, they should go back to the previous stage.

Stage	Aim	Activity	Goal of each step
1	Daily activities at home	Typical activities during the day as	Gradual return to typical activities.
	that do not give the	long as they do not increase	
	student-athlete	symptoms (i.e. reading, texting	
	symptoms	screen time). Start at 5-15 minutes	
		at a time and gradually build up.	
2	School Activities	Homework, reading or other	Increase tolerance to cognitive
		cognitive activities outside the	work.
		classroom.	
3	Return to school part-	Gradual introduction of schoolwork.	Increase academic activities.
	time	May need to start with a partial	
		school day or with increased	
		breaks during the day.	
4	Return to school full-	Gradually progress.	Return to full academic activities
	time		and catch up on missed school
			work.

Return to Sport Strategy

Activities should be tailored to create a sport-specific strategy that helps the athlete return to their respective sport.

An initial period of 24-48 hours of rest is recommended before starting their Return to Sport Strategy. If the athlete experiences new symptoms or worsening symptoms at any stage, they should go back to the previous stage. It is important that athletes return to full-time school activities before progressing to stage 5 and 6 of the Return to Sport Strategy. It is also important that all athletes provide their school with a Medical Clearance Letter prior to returning to full contact sport activities.

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Stage	Aim	Activity	Goal of each step
1	Symptom-limiting	Daily activities that do not provoke	Gradual re-introduction of
	activity	symptoms.	work/school activities.
2	Light aerobic activities	Walking or stationary cycling at slow to medium pace. No resistance training.	Increase heart rate.
3	Sport-specific exercise	Running or skating drills. No head impact activities.	Add movement.
4	Non-contact training drills	Harder training drills, e.g. passing drills. May start progressive resistance training.	Exercise, coordination and increased thinking.
5	Full contact practice	Following medical clearance and complete return to school	Restore confidence and assess functional skills by coaching staff.
6	Return to sport	Normal game play.	

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