



Concussion Management & Return to Play

Scope

This policy will be enforced for all Team Ontario Astros [Team O] sanctioned activities with Team O volunteers. This includes but is not limited to all Team O games, practices, training sessions, out of country trips, tournament, and volunteers of all ages while involved in Team O activities.

Policy

1. Team O is focused on ensuring the wellbeing and safety of all participants, members, and volunteers. We recognize the potential severity of a head injury and the commitment and intent behind research to manage concussions. We are committed to educating those involved with Team O, creating awareness to help prevent injuries and appropriately managing any suspected concussions and diagnosed concussions.
2. Team O's Concussion Policy is committed to the following actions regarding concussions:
 - 2.1. Committed to increasing awareness regarding what concussions are and the potential for serious complications.
 - 2.2. Enforcing procedures and training that promotes preventative actions to help reduce the number of concussions.
 - 2.3. Providing procedures that support Team O coaches, other volunteers, umpires, and athletes in ensuring quick recognition and removal of any individual with a suspected concussion from Team O activities.
 - 2.4. Ensure that following a suspected concussion there are clear steps for both the individual and Team O to follow before a return to sport occurs to ensure the focus is on the individual's long-term health.

Operational Procedures

Education and Prevention

1. All players, coaches, umpires, and parents/legal guardians are provided education on sport related concussions.
 - 1.1. All parents/legal guardians, coaches, players, umpires, and trainers will be required to complete concussion education annually prior to registering using resources provided by the Province of Ontario.
 - 1.2. Team O will provide access to appropriate concussion education resources provided by the Province of Ontario on its website (link inserted).
 - 1.3. All parents/legal guardians and athletes will sign annually, a participation agreement confirming that they have participated in pre-season concussion education and that they understand the signs and symptoms of concussion.

- 1.4. All coaches & team trainers will sign annually, a participation agreement confirming that they have participated in pre-season concussion education and that they understand the signs and symptoms of concussion.
2. During practices, games and any other sanctioned activity, coaches will remind participants of the need to take care around the diamond as well as any other training area, also ensuring everything is working properly. Ongoing reminders for participants to be aware of potential situations where head injuries could occur will help build awareness and prevention related to concussions.
3. Team O members who engage in dangerous or reckless behaviour that could potentially create a high risk for a concussion causing situation will be subject to disciplinary actions as described in the Athlete Code of Conduct.

Recognition, Removal and Referral

4. If any individual suffers any kind of injury where there is potential for there to have been direct or indirect force to the head, neck or face, and is experiencing or demonstrating any concussion related signs or symptoms, the individual will be removed from activity immediately and rest. The volunteer in charge of the program or practice [the designated person] will err on the side of caution in their decision making. Under Team O's Concussion Policy, all Team O Team Members recognize the authority of their on-site coach.
5. In competition, coaches, team trainers, umpires and athletes all have a responsibility to communicate openly and honestly about situations where direct or indirect hits to a head occur. If a situation occurs where a concussion is possible, the head coach will communicate with the athlete, team trainer (competitive teams), umpires and parents/guardian as appropriate. The coach in attendance at the competition will make the decision for their athlete if they can continue based on a direct or indirect hit to the head.
 - 5.1. A parent/guardian has the right to pull their child from an activity, without any consequence to the athlete, even if the Head Coach does not feel the athlete needs to be pulled from the activity.
6. The Directors of Team O on site at any event have a responsibility and can also make a final decision about the removal of a participant from activities.
7. At Team O hosted events (tournament), the Convenor or other Team O official on site who is responsible for the event can also make a final decision as to a participant's removal from activities.
8. Team O volunteers recognize that symptoms may not appear immediately and that concussions can occur in many different situations. In the case of a suspected concussion, the individual may not be in a condition to assess themselves or make appropriate decisions.
9. For individuals under 18, all suspected concussions or situations that occurred that potentially could result in a concussion will be reported to the guardian. The guardian should monitor the individual for delayed signs and symptoms for the next 72 hours.

10. All individuals of any age with a suspected concussion will be referred to a medical doctor (or nurse practitioner) for medical assessment and diagnosis as per the Return to Sport Procedures. Additionally, upon removal each individual, and their parent/guardian if they are under 18, will be given a handout detailing Team O's concussion procedures for removal from sport and return to sport. The Coach will also ensure they are aware of their responsibility to disclose any concussion diagnosis to any other sport organization they are registered with and/or their school.
11. If a direct force to the head results in immediate injury or "red flag" signs and symptoms of a concussion, Team O's Emergency Procedures in partnership with the facility's location specific Emergency Action Plan will immediately be followed.

(More information on signs and symptoms of a concussion as well as appropriate response needed for various signs can be found in our concussion resources provided to coaches, parents and athletes and available in Appendix A of this policy).

Reporting

12. As per Team O's Emergency Procedures, any incident resulting in injury or removal from activity will be reported on an Team O's Incident Report Form. These are to be submitted (electronic images acceptable) to Team O's Compliance Officer within 24 hours.
13. Team O's Compliance Officer, or designate, tracks all incident reports for patterns and trends as well as individual situations.
14. The coach will keep a copy and update the report to document the athlete's progression to return to sport regularly updating the Team O's Compliance Officer until the incident is closed with the receipt of medical clearance which will be added to the report and securely filed. In documenting the incident and follow up all of Team O's Privacy Policy will be followed.

Participant Disclosure

15. If an individual discloses, or a volunteer becomes aware through any means, that an individual suffered a possible concussion through other activities they will be unable to participate in Team O activities. Discovery or disclosure of a suspected concussion will be reported on an athlete disclosure form to Team O's Compliance Officer within 24 hours, following procedures for incident reporting.
16. Members of the Team O Team who fail to disclose a possible concussion as described in their Code of Conduct may be subject to discipline as described in the Athlete Code of Conduct.
17. The individual's return to Team O activities will be treated the same as individuals who incur concussions during Team O activities.

Returning to Baseball

18. If removed from baseball due to a suspected concussion the athlete may return once they have confirmed to the coach that they have undergone an assessment by a physician or nurse practitioner and have not been diagnosed as having a concussion.

19. If diagnosed with a concussion, each individual will have their own individualized and medically supervised Return to Sport plan. The plan is a graduated strategy to ensure the long-term health of the individual. Team O is committed to supporting the individual in their recovery and have provided a baseball focused suggested starting Return to Sport Plan [Appendix B]. For athletes at any level of education, we work to ensure a Return to Learn strategy be followed before Return to Sport and focus the individual on commencing their educational components first.
20. Before a participant or athlete is permitted to return to any Team O led practice or program after experiencing signs or symptoms of a concussion, or having reported a concussion, they will need to submit proof of medical clearance that permits them to return to participating in a full range of physical activities.
21. The written clearance must be provided by a medical doctor or nurse practitioner and submitted to the coach or instructor who will forward it to Team O's Compliance Officer prior to the athlete returning. The clearance will be filed with Team O's original copy of the incident report or athlete disclosure.
22. Once cleared, coaches will gradually build the activity level to help progress the individual slowly.

*Club Approved: December 2021
Review date: January 2023*

Appendix A – Signs and Symptoms of a Concussion

Pocket CONCUSSION RECOGNITION TOOL™

To help identify concussion in children, youth and adults



RECOGNIZE & REMOVE

Concussion should be suspected **if one or more** of the following visible clues, signs, symptoms or errors in memory questions are present.

1. Visible clues of suspected concussion

Any one or more of the following visual clues can indicate a possible concussion:

- Loss of consciousness or responsiveness
- Lying motionless on ground/slow to get up
- Unsteady on feet/ Balance problems or falling over/incoordination
- Grabbing/clutching of head
- Dazed, blank or vacant look
- Confused/Not aware of plays or events

2. Signs and symptoms of suspected concussion

Presence of any one or more of the following signs & symptoms may suggest a concussion:

<ul style="list-style-type: none"> - Loss of consciousness - Seizure or convulsion - Balance problems - Nausea or vomiting - Drowsiness - More emotional - Irritability - Sadness - Fatigue or low energy - Nervous or anxious - "Don't feel right" - Difficulty remembering 	<ul style="list-style-type: none"> - Headache - Dizziness - Confusion - Feeling slowed down - "Pressure in head" - Blurred vision - Sensitivity to light - Amnesia - Feeling like "in a fog" - Neck Pain - Sensitivity to noise - Difficulty concentrating
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3. Memory function

Failure to answer any of these questions 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?"

Any athlete with a suspected concussion should be IMMEDIATELY REMOVED FROM PLAY, and should not be returned to activity until they are assessed medically. Athletes with a suspected concussion should not be left alone and should not drive a motor vehicle.

It is recommended that, in all cases of suspected concussion, the player is referred to a medical professional for diagnosis and guidance as well as return to play decisions, even if the symptoms resolve.

RED FLAGS

If ANY of the following are reported then the player should be safely and immediately removed from the field. If no qualified medical professional is available, consider transporting by ambulance for urgent medical assessment:

<ul style="list-style-type: none"> - Athlete complains of neck pain - Increasing confusion or irritability - Repeated vomiting - Seizure or convulsion - Weakness or tingling/burning in arms or legs 	<ul style="list-style-type: none"> - Deteriorating conscious state - Severe or increasing headache - Unusual behaviour change - Double vision
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Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Do not attempt to move the player (other than required for airway support) unless trained to so do
- Do not remove helmet (if present) unless trained to do so.

from McCrory et. al, Consensus Statement on Concussion in Sport, Br J Sports Med 47 (S1), 2013
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Appendix B - Return to Sport Plan

A CONCUSSION is a serious event, but you can recover fully from such an injury if the brain is given enough time to rest and recuperate. Returning to normal activities, including sport participation, is a stage-wise process that requires patience, attention, and caution.

Each stage must take a **minimum of one day** but could last longer, depending on the athlete and their specific situation. If symptoms reappear at any stage, go back to the previous stage until symptom-free for at least 24 hours.

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 weightlifting. 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.

Symptoms? Return to the previous stage and only engage in activities as tolerated. If symptoms persist consult a physician.

No symptoms? Proceed to Stage 3 after 24 hours.

STAGE 3: More Diverse Cardio – 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.

Symptoms? Return to the previous stage and only engage in activities as tolerated. If symptoms persist consult a physician.

No symptoms? Proceed to Stage 4 after 24 hours.

STAGE 4: Building Cardio with Increased Cognitive Challenges Goal: Exercise, coordination, and increased thinking

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

Symptoms? Return to the previous stage and only engage in activities as tolerated. If symptoms persist consult a physician.

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.

STAGE 5: Baseball specific training, once cleared by a doctor – Goal: Restore confidence and assess functional skills by coaching staff

Coaches and instructors will allow return to the diamond in graduated drill intensity.

Symptoms? Return to the previous stage and only engage in activities as tolerated. If symptoms persist consult a physician.

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

STAGE 6: Competition

Return to sport with normal activities

*** Core of document from Parachute Canada (parachutecanada.org/concussion) Revised June 15 2017 with specific to baseball activities.*