



COMOX VALLEY RAIDERS: CONCUSSION POLICY

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RAIDERS CONCUSSION PROTOCOL & POLICY

When it comes to youth football and concussions, safety is of utmost importance to the Comox Valley Raiders. It is important to note that:

- A concussion is a brain injury.
- All concussions should be regarded as potentially serious.
- Almost all concussions recover completely with correct management.
- Incorrect management of a concussion can lead to extended recovery time.
- Concussions are not only limited to physical symptoms; athletes must also be mindful of mental and emotional symptoms.

Here are some key guidelines and policies related to youth football and concussions:

1. **Immediate Removal from Play:** Anyone with suspected concussion following an injury must be immediately removed from game or practice and receive a prompt assessment by a medical doctor or nurse practitioner.
2. **Medical Evaluation:** Concussions are managed by licensed health care professionals working within their scope of practice and expertise.
3. **Return to Play:** Concussions are managed by a limited period of rest followed by avoiding physical and brain activities that make concussion symptoms worse, and once concussion related symptoms have resolved, there is a gradual return to school, work and sports-related activities. Generally, a rest & no contact period of 2 weeks is needed for proper recovery, however you should follow the advice of your health care provider. Returning to school or work must take priority over returning to playing football or cheer.

Concussion symptoms must have completely resolved and medical clearance completed by a medical doctor or nurse practitioner must be received before resuming full contact practice or game play. The recurrence of concussion symptoms subsequent to the return to full contact practice or game play requires removal from training or playing and reassessment. Follow up with a medical practitioner is required and the recovery procedure is started over again.

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SUSPECTED CONCUSSION: A STEP-BY-STEP PROCESS

1. Athlete is to report the incident to team first aid and ***Suspected Concussion Report*** is started.
2. First aid reports to Team Manager & Head Coach.
3. Athlete is removed from game/practice and must seek medical attention within 24 hours.
4. Team manager emails concussion policy/procedure including ***Concussion Follow-Up Form*** to athlete's family contact.
5. Family contact completed and returns ***Concussion Follow-Up Form*** to Team Manager within 48 hours.
6. Team manager forwards to Club First Aid Coordinator, President and/or Secretary for filing.
7. Athlete must follow ***CV Raiders Concussion Protocol*** prior to returning to play.
8. Only after the recovery period has passed and clearance from a medical professional is given, may the athlete return to play. The player must provide a clearance letter or note from their medical provider providing clearance to play. It is important that the medical professional also provide the player with a suggested ***Return to Play*** guideline that is shared with the team first aid/head coach and manager.



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SUSPECTED CONCUSSION REPORT

The follow form is to be completed on site when injury occurs

Date of incident: _____

Player name: _____

Player Division: _____

Location: _____ Time of injury: _____

How did the injury occur:

Immediate Symptoms: _____

Name of First aid who completed on site assessment: _____

Player has been instructed to follow up with a professional medical assessment:

Yes_____ No_____

If there is concern after the injury including any of the following signs are observed or complaints are reported, and there is no medical professional on site, call an ambulance for urgent medical assessment.

Red Flag Symptoms require you to call an ambulance:

- severe neck pain and tenderness
- severe or increasing headache
- deteriorating conscious state
- double vision
- vomiting
- weakness/tingling/burning in arms or legs
- loss of consciousness
- increasingly restless, agitated, combative



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SUSPECTED CONCUSSION FOLLOW-UP

This form is to be completed by player family contact

Date of incident: _____

Player name: _____

Player Division: _____

Where did injury occur (game/practice): _____

How did injury occur (to players recollection):

Immediate symptoms: _____

Symptoms after 24 hours: Check all that apply

- | | |
|--|---|
| <input type="checkbox"/> headache | <input type="checkbox"/> more emotional |
| <input type="checkbox"/> pressure in head | <input type="checkbox"/> more irritable |
| <input type="checkbox"/> balance problems | <input type="checkbox"/> sadness |
| <input type="checkbox"/> nausea or vomiting | <input type="checkbox"/> nervous or anxious |
| <input type="checkbox"/> drowsiness | <input type="checkbox"/> neck pain |
| <input type="checkbox"/> dizziness | <input type="checkbox"/> difficulty concentrating |
| <input type="checkbox"/> blurred vision | <input type="checkbox"/> difficulty remembering |
| <input type="checkbox"/> sensitivity to light | <input type="checkbox"/> feeling slowed down |
| <input type="checkbox"/> sensitivity to noise | <input type="checkbox"/> feeling in a fog |
| <input type="checkbox"/> fatigue or low energy | |
| <input type="checkbox"/> "Don't feel right" | |

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RETURN TO SPORT STRATEGY

A concussion is a serious injury, but you can recover fully if your brain is given enough time to rest and recuperate.

Returning to normal activities, including sport participation, is a step-wise process that requires patience, attention, and caution.

In the Return-to-Sport Strategy:

- ▶ Each stage is at least 24 hours.
- ▶ Move on to the next stage when activities are tolerated without new or worsening symptoms.
- ▶ If any symptoms worsen, stop and go back to the previous stage for at least 24 hours.
- ▶ If symptoms return after medical clearance, follow up with a doctor for re-assessment.

Stage 1: Symptom-limiting activities

After an initial short period of rest of 24 to 48 hours, light cognitive and physical activity can begin, as long as these don't worsen symptoms. You can start with daily activities like moving around the house, simple chores, and gradually introducing school and work activities at home.

Stage 2: Light aerobic activity

Light exercise such as walking or stationary cycling, for 10 to 15 minutes. The duration and intensity of the aerobic exercise can be gradually increased over time if symptoms don't worsen and no new symptoms appear during the exercise or in the hours that follow. No resistance training or other heavy lifting.

Stage 3: Individual sport-specific exercise with no contact

Activities such as skating, running, or throwing can begin for 20 to 30 minutes. There should be no body contact or other jarring motions, such as high-speed stops or hitting a ball with a bat. No resistance training.

Stage 4: Begin training drills with no contact

Add in more challenging drills like passing drills. There should be no impact activities (no checking, no heading the ball, etc.). Start to add in progressive resistance training.

Stage 5: Full contact practice following clearance by a doctor.

Stage 6: Return to Sport

Full game play or competition.



Parachute is Canada's leading national charity dedicated to injury prevention.



For concussion info on the go, download the app





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EMERGENCY ACTION PLAN – BILL MOORE PARK

Address:

2361 Kilpatrick Ave. Courtenay, BC V9N 7Z3

GPS: 49.676002, -124.991222

Directions: Bill Moore Memorial Park entrance is located at 2361 Kilpatrick Street (cross street 23rd St.)

The football field is located behind the main building. Public bathrooms are located on the bottom level, right hand side of the building.

Emergency personnel: Level 1 First Aid

First Responder: _____

Tel. # _____

Medical Facilities:

Ambulance transports go to:
North Island Hospital Comox Valley
101 Lerwick Rd. Courtenay, BC V9N 0B9
(Main Switchboard - tel. (250) 331-5900)

Emergency Equipment:

Full first Aid kit located in the scoreboard tower on the west side of the field. First responders are trained in CPR. Naloxone on site. **There is NO AED on site.**



Roles of First Responders:

1. Immediate care of the injured or ill athlete or bystander
2. Activation of emergency medical system (EMS)
 - a) 911 call (provide name, address, telephone number, number of individuals injured, condition of injured, first aid treatment, specific direction, other information as requested)
 - b) Notify club president: Joanne Lewis (613) 967-6130
3. Emergency equipment retrieval
4. Direction of EMS to scene
 - a) Open locked gate – (secured with padlock, key located in the Concession/Canteen) and swing gate - see map for location
 - b) Designate individual to flag down EMS and direct to scene.
 - c) Scene control: limit scene to first aid providers and move bystanders away from area.