

Concussions

Name _____

Date _____

Return-to-learn school guide For teachers and administrators

Every student's recovery from concussion is different. The five progressive stages are meant to give the school and medical provider general guidance to assisting the student's gradual return. The stages are not to be viewed as absolute for every student to progress through if their symptoms do not warrant it. What is important is to strike a balance between providing the student with the necessary supports for symptom relief while progressing to their normal school schedule. Students with faster recoveries may skip a stage or two.

Stage	Description	Activity level	Criteria to move to next stage
0	No return; at home	<ul style="list-style-type: none"> Day 1: maintain low-level cognitive and physical activity. No prolonged concentration. Cognitive readiness challenge: as symptoms improve, try reading or math challenge tasks for 10 to 30 minutes; assess for symptom increase 	Move to stage 1 if: <ul style="list-style-type: none"> Student can sustain concentration for 30 minutes before significant symptom exacerbation, and Symptoms reduce or disappear with cognitive rest breaks, allowing return to activity
1	Return to school, partial day (1 to 3 hours)	<ul style="list-style-type: none"> Attend 1 to 3 classes, intersperse rest breaks No tests or homework Minimal expectations for productivity 	Move to stage 2 if: <ul style="list-style-type: none"> Symptoms status improving Tolerates 4 to 5 hours of activity-rest cycles, and 2 to 3 cognitive rest breaks built into school day
2	Full day, maximal supports (required throughout the day)	<ul style="list-style-type: none"> Attend most classes, with 2 to 3 rest breaks (20 to 30 minutes), no tests Minimal homework, less than 60 minutes Minimal-to-moderate expectations for productivity Light aerobic exercise in gym if no worsening symptoms 	Move to stage 3 if: <ul style="list-style-type: none"> Symptom number and severity improving, and Needs 1 to 2 cognitive rest breaks built into school day
3	Return to full day, moderate supports (provided in response to symptoms during day)	<ul style="list-style-type: none"> Attend all classes with 1 to 2 cognitive rest breaks (20 to 30 minutes); begin quizzes Moderate homework, 60 to 90 minutes Moderate expectations for productivity Design schedule for make-up homework Gym class as indicated by your health care provider 	Move to stage 4 if: <ul style="list-style-type: none"> Continued symptom improvement, and Needs no more than 1 cognitive rest break per day
4	Return to full day, minimal supports (monitor final recovery)	<ul style="list-style-type: none"> Attend all classes with up to 1 rest break (20 to 30 minutes); begin modified tests (breaks, extra time) 90+ minutes for homework Ease into band and choir Moderate to maximum for expectations for productivity Gym class as indicated by your health care provider 	Move to stage 5 if: <ul style="list-style-type: none"> No active symptoms, and No exertional effects across the full school day
5	Full return, no supports needed	<ul style="list-style-type: none"> Full class schedule, no rest breaks Maximum expectations for productivity Full band, choir and gym participation Begin to address make-up work 	N/A

CONCUSSION/CLOSED HEAD INJURY SCHOOL SUPPORT STRATEGIES

Help strategies for educators

- Maintain sensitivity & understanding for students dealing with this “hidden” injury
- Reassure students/parents that having this injury will not result in failure
- Notify the concussion management team of a student's diagnosis—in case this group is unaware of the problem
- Accept academic accommodations provided through proper channels (physician, principal, guidance counselors, school nurse, other teachers, etc.)
- Keep documentation of students' progress/compliance

Difficulty with attention and concentration

- Allow for breaks of rest in quiet area
- Write out short & specific instructions
- Provide front row seat with proper lighting & quiet room
- Lessen workload into small portions of an assignment
- Encourage communication with parents & educators

Difficulties with noise or light

- Consider dimming lights in classroom; allowing hat or sunglasses
- Avoid lunch cafeteria, school assemblies/rallies
- Decrease computer use

Difficulties with emotions or behavior

- Avoid putting student “on the spot” in front of peers
- Allow for rest breaks if student gets overloaded
- Seek help before emotions worsen
- Monitor peer relationships

Difficulty with memory and comprehension

- Teacher-generated notes or record class
- Provide visual learning aides
- Mnemonic devices, repetition and rehearsal
- Multiple-choice or open-book tests
- Use fact sheets

SPECIFIC RESPONSIBILITIES OF SCHOOL PERSONNEL

School administrators

- Develop, review and enforce concussion management policy with school staff and coaches
- Oversee emergency care and communication plans for students who sustain concussion at school or in sport
- Oversee plans to meet concussed students' needs in conjunction with all members of the concussion management team
- Maintain open communication with parents and students
- If needed, obtain FERPA release for communication with students' medical physicians

Guidance counselors and teachers

- Provide plan of academic accommodation to all teachers
- Communicate with student and parents daily
- Assist students in the return-to-learn process through daily evaluation and observation
- Implement “help strategies” when needed—based on presence of post-concussive symptoms

Athletic team

- Develop, oversee and enforce concussion return-to-sport protocol
- Help educate athletes and parents regarding concussion
- Remove any athlete exhibiting signs/symptoms of concussion
- Communicate with team physician, parents and school concussion management team about students' return-to-sport progress

If you have any questions, please call (920) 272-3300.

Notes:

Provider _____

Phone Number _____

