
**MANAGEMENT OF CONCUSSIONS AND OTHER HEAD INJURIES IN SCHOOL
SPONSORED EXTRA-CURRICULAR ACTIVITIES**

The Bangor School Committee recognizes that concussions and other head injuries are potentially serious and may result in significant brain damage and/or death if not recognized and managed properly. The School Committee adopts this policy to promote the safety of students participating in school-sponsored extra-curricular activities, including but not limited to interscholastic sports. Due to the evolving treatment and management of concussions, this policy shall be reviewed yearly.

TRAINING

School-sponsored athletic activities that pose a risk of concussion or other head injury are identified as collision and contact sports. The following Bangor School Department sports classify as collision and contact sports according to the American Academy of Pediatrics (AAP): basketball, diving, field hockey, football, ice hockey, and soccer. All athletes participating in collision and contact sports shall undergo baseline ImPACT testing in grades 6, 8, 10 and 12. All high school athletes shall be tested and middle school athletes participating in collision, contact, and limited contact sports shall be tested. Limited contact sports offered by the Bangor School Department, as defined by AAP, include: baseball, cheerleading, high jump, pole vault, and softball. A list of these activities will be distributed to school administrators and coaches. ImPACT testing shall be repeated upon request from a physician and during the “Return to Play” progression.

All athletic coaches, including volunteer coaches, must undergo training in the identification and management of concussive and other head injuries prior to assuming their coaching responsibilities. The training must be consistent with such protocols as may be identified or developed by the Maine Department of Education (DOE) and include instruction in the use of such forms as the DOE may develop or require.

Coaches shall be required to undergo refresher training every two years or when protocols and/or forms have been revised.

STUDENT AND PARENT INFORMATION

Annually, at the beginning of each school year, students and parents of students who will be participating in school-sponsored athletic activities will be provided information regarding:

- A. The risk of concussion and other head injuries and the dangers associated with continuing to participate when a concussion or other head injury is suspected;
- B. The signs and symptoms of concussion and other head injuries; and
- C. The school department’s protocols for 1) removal from the activity when a student is suspected of having sustained a concussion or other head injury, 2) evaluation, 3) return to participation in the activity, and 4) “return to play” and the “6 Day Progression” required for players on the interscholastic sports teams as identified as collision and contact or limited contact sports listed above.

The student and his/her parent(s) must sign a statement acknowledging that they have received and read this information before the student will be allowed to participate in any school-sponsored athletic activity.



MANAGEMENT OF CONCUSSIVE AND OTHER HEAD INJURIES

It is the responsibility of the coach of the activity to act in accordance with this policy when the coach recognizes that a student may be exhibiting signs, symptoms and behaviors associated with a concussion or other head injury.

Any student suspected of having sustained a concussion or other head injury during a school-sponsored athletic activity including but not limited to competition, practice or scrimmage, must be removed from the activity immediately. The student and his/her parent(s) will be informed of the need for an evaluation for brain injury before the student will be allowed to return to the activity.

No student will be permitted to return to the activity or to participate in any other school-sponsored athletic activity on the day of the suspected concussion.

Any student who is suspected of having sustained a concussion or other head injury shall not be eligible for further participation in school-sponsored athletic activities until he/she has been evaluated and received written medical clearance to do so from a licensed health care provider who is qualified and trained in concussion management and, for those participating on an interscholastic athletic team in collision and contact or limited contact sports identified above, he/she has successfully completed the 6 Day "Return to Play" Progression.

Coaches and other school personnel shall comply with the student's health care provider's recommendations in regard to gradual return to participation. No student will be permitted to return to full participation (competition) until cleared to do so. More than one evaluation by the student's health care provider may be necessary before the student is cleared for full participation.

If at any time during the return to play program signs or symptoms of a concussion are observed, the student must be removed from the activity and referred to his/her health care provider for re-evaluation.

COGNITIVE CONSIDERATIONS

School personnel should be alert to cognitive and academic issues that may be experienced by students who have suffered a concussion or other head injury, including but not limited to difficulty with concentration, organization, long-and-short term memory and sensitivity to bright lights and sounds. Processes established under Section 504 provide an opportunity for school personnel to consider the need for accommodations to enable a student suffering from the symptoms of concussion or head injury to access his or her education. A 504 plan may not be appropriate for every concussion.

CONCUSSION MANAGEMENT TEAM

The Superintendent will appoint a concussion management team including a school administrator to be responsible, under the administrative supervision of the Superintendent, to make recommendations related to implementation of this policy. The concussion management team will include the Athletic Director and school nurse and may include one or more principals or assistant principals, the school physician, the school athletic trainer and such other school personnel or consultants as the Superintendent deems appropriate.

ADOPTED: October 23, 2012
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