

Title: Concussions, Collaboration and Communication: Safe Return to Learn and Play

Track: School Health: Administration, Coordination, and Leadership

First Choice Presentation: 60 minute workshop

Second Choice Presentation: Any Format chosen by reviewers

Topic: Policy Development

Percentage Lectured / Interactive: 70/30

Presentation Level: Intermediate

Core Beliefs Addressed:

Health and learning are directly linked and essential to the development of healthy, resilient citizens.

Academic success is an excellent indicator of the overall well-being of youth and a primary predictor of adult health outcomes.

A coordinated school health (CSH) approach is the most effective and efficient means of promoting healthy citizens. The CSH approach creates a system to support student academic achievement, eliminate gaps, and reduce redundancies across initiatives and funding streams through appropriately licensed and certified disciplines.

Schools should be safe, nurturing environments that facilitate learning for all. School climate, school connectedness and a caring, safe learning environment promote student success and teacher retention through parent and community partnerships, policies and practices.

Abstract:

Despite the increased awareness of concussions, inconsistencies continue in the comprehensive management of such injuries. Initially, the emphasis in concussion management, particularly in athletics, focused on return to play. Best practices are just now beginning to respond to the evidence indicating that a return to full-time academics before symptoms have cleared can result in prolonged recovery time. In an effort to create a coordinated approach for brain injury recognition, education and management the Nebraska Legislature passed the Concussion Awareness Act in 2011. In 2014, the act was amended and now requires school districts to have a Return to Learn Protocol. This presentation provides the framework for School Districts to implement a successful Return to Activity (Return to Learn plus Return to Play) protocol. It also demonstrates the importance of coordinated communication between medical providers and educators to ensure that a students' progression back into the classroom and onto the playing field is accomplished in a safe and consistent manner. Recommendations for staff training regarding "best" practices and emerging medical research will be presented. Lastly, lessons learned will focus on the value of maintaining open communication, managing "turf" issues, and navigating FERPA/HIPAA compliance.

Lead Presenter Disclosure: Conflict: No;

Second Presenter Disclosure: Conflict: No

Student Presentation: No

Learning Objectives:

Objective 1: Identify 3 essential policy foundations in developing effective Return to Activity Protocols. A review of state policy evolution, developing Brain Injury School Support regional teams and district and building specific protocols will be provided.

Objective 2: Identify 3 medical and academic considerations following a concussion. Physiologic changes associated with brain injury, and the concept of cognitive rest will be reviewed. A sample Return to Learn protocol and Concussion Management model will be offered

Objective 3: Identify potential pitfalls in implementing Return to Activity protocols. An example of a communication plan and associated staff trainings will be shared. Challenges in facilitating collaborative

dialogue and managing HIPAA/FERPA issues will be offered.

Summary

This presentation provides the framework for School Districts to implement a successful Return to Activity protocol. It demonstrates the importance of coordinated communication between medical providers and educators that ensures a students' progression back into the classroom and the playing field is accomplished safely and consistently. Recommendations for staff training and emerging medical research will be presented. Lessons learned will focus on the value of open communication, managing "turf" issues, and navigating FERPA/HIPAA compliance.