



OBHA Concussion Policy/ROWAN'S LAW

Revised Dec. 2019

PREFACE:

Rowan's Law (Concussion Safety), makes Ontario a national leader in concussion management and prevention by establishing mandatory requirements that call for:

- Annual review of concussion awareness resources that help prevent, identify and manage concussions, which athletes, coaches, educators and parents would be required to review before registering in a sport.
- Removal-from-sport and return-to-sport protocols, to ensure that an athlete is immediately removed from sport if they are suspected of having sustained a concussion and giving them the time required to heal properly
- A concussion code of conduct that would set out rules of behaviour to minimize concussions while playing sport.

In honour of Rowan Stringer, the 17-year-old rugby player whose death resulted from sustaining multiple concussions, the legislation establishes the last Wednesday in September as "Rowan's Law Day".

Ontario is the first jurisdiction in Canada to pass concussion safety legislation, setting a precedent for sport legislation across the country. The Ontario government worked closely with key medical experts, athletes, coaches and sport leaders – most notably the members of the Rowan's Law Advisory Committee – in establishing this first-of-its-kind legislation.

Starting with the 2020 season, participants will be required to review the issued Concussion Awareness Resources, sign the **acknowledgment form and submit it to their respective local ball hockey organization.**

The Ontario Ball Hockey Association (OBHA) strives to ensure that the health and well-being of all participants is paramount. Concussions and post concussion syndrome can and do have a significant impact on an individual's health and well being. If a concussion is not immediately identified and proper practices implemented it can result in chronic, permanent brain injury.

Evidence does exist that shows that individual who suffer a subsequent concussion before being symptom free from the first concussion can be susceptible to Second Impact Syndrome – a condition that causes rapid and severe brain swelling with potential critical results.

Awareness of the signs and symptoms of concussion are very important, understanding the management of a concussion is one of the essential elements to successfully returning an injured individual to normal activities without further complications. A concussion is a clinical diagnosis that is made by a doctor or nurse practitioner, however it is essential that all participants know and understand the signs and symptoms of a concussion as the individual who has been concussed made be disoriented, confused and experiencing short term memory loss, and not be aware of the injury.

The OBHA will be focused and increasing awareness amongst our participants in order to provide timely assessments and practices.

OBHA Concussion Code of Conduct for Athletes and Parents/Guardians (for athletes under 18 years of age)

I will help to prevent concussions by:

- Wearing the proper equipment for the sport of ball hockey in the appropriate manner.
- Developing my skills and strength so that I can participate to the best of my ability.
- Respecting the playing rules of the Ontario Ball Hockey Association
- Respecting the warm-up and practice procedures during training.
- Committing to fair play and respect for all, including other athletes, coaches, trainers and officials.

I will care for my health and safety by taking concussions seriously and I understand that:

- A concussion is a brain injury that can have both short – and long-term effects.
- A blow to my head, neck, face or a blow to my body that causes the brain to move around inside the skull may cause a concussion.
- I do not need to lose consciousness to have had a concussion.
- I have a commitment to concussion recognition and reporting, including self-reporting of possible concussion to a designated person when I feel I may be concussed or think another individual may have sustained a concussion. If I think I might have a concussion I must stop participating in further training, practice or competition IMMEDIATELY, or tell the designated person if I think another athlete has a concussion.
- Continuing to participate in further training, practice or competition with a possible concussion increases my risk of more severe, longer lasting symptom, and increases my risk of other injuries.

I will not hide concussion symptoms. I will speak up for myself and others:

- I will not hide my symptoms. I will tell a coach, official, team trainer, parent or another adult that I trust if I experience ANY symptoms of concussion.
- If someone else tells me about concussion symptoms, or I see signs they might have a concussion, I will tell a coach, official, team trainer, parent or another adult that I trust so they can help.
- I understand that if I have a suspected concussion, I will be removed from ball hockey and will not be able to return to train, practice or competition until I undergo a medical assessment by a medical doctor or nurse practitioner and have been medically cleared to return to training, practice or competition.
- I have a commitment to sharing any pertinent information regarding incidents of removal from sport with the athlete's school and any other sport organization with which the athlete has registered. This means: If I am diagnosed with a concussion, I understand that letting all of my other coaches and teachers know about my injury will help them to support me while I recover.

I will take the time I need to recover, because it is important for my health:

- I understand my commitment to supporting the return-to-sport process and I will follow the Ontario Ball Hockey Association's Return-to-Sport Protocol.
- I understand I will have to be medically cleared by a medical doctor or nurse practitioner before returning to training, practice or competition and that I must provide the designated person with a signed medical clearance letter from my doctor or nurse practitioner before I can return.
- I will respect my coaches, team trainers, parents, health-care professionals and medical doctors/nurse practitioners, regarding my health and safety.

Additionally, my commitment to the Ontario Ball Hockey Association's Concussion Code of Conduct, and Rowan's Law (Concussion Safety) that states that prior to registration with any sport organization all individuals must review the applicable concussion awareness resources found at www.ontario.ca/concussions

The below links can also be used to access these materials:

[Ages 10 and Under Concussion Awareness Resource](#)

[Ages 11-14 Concussion Awareness Resource](#)

[Ages 15 and Up Concussion Awareness Resource](#)

I understand that I must review one of the resources once a year and confirm that I have completed the review every time I register with a sport organization.

I understand that to participate in ball hockey I must sign and submit to the league the OBHA Rowan's Law/Concussion Code of Conduct and Concussion Resource Acknowledgement Form.

DEFINITION:

A concussion:

- is a brain injury that causes changes in how the brain functions, leading to symptoms that can be physical (e.g., headache, dizziness), cognitive (e.g., difficulty concentrating or remembering), emotional/behavioural (e.g., depression, irritability) and/or related to sleep (e.g., drowsiness, difficulty falling asleep);
- May be caused either by a direct blow to the head, face, neck or a blow to the body that transmits a force to the head that causes the brain to move rapidly within the skull;
- can occur even if there is no loss of consciousness (most concussions occur without loss of consciousness)
- concussions are not usually detected by use of x-rays, MRI, or CT scans

COMMON SIGNS AND SYMPTOMS OF CONCUSSION:

A concussion should be suspected in a situation in which an individual is struck, or strikes their head, face, neck or their body in a manner that transmits a force to the head. Forceful body contact can result in body stopping suddenly but the soft tissue in the brain continues to move forward colliding with the skull bone causing concussions. Participants should be aware of the following signs and symptoms in order to assess potential for a concussion following any such contact:

Possible Signs Observed:

Physical

- vomiting
- slurred speech
- slowed reaction time
- poor coordination or balance
- blank stare/glassy-eyed/dazed or vacant look
- decreased playing ability
- loss of consciousness or lack of responsiveness
- lying motionless on the ground or slow to get up
- amnesia
- seizure or convulsion
- grabbing or clutching of head

Cognitive

- difficulty concentrating
- easily distracted
- general confusion cannot remember things that happened before and after the injury
- does not know time, date, place, class, type of activity in which he/she was participating
- slowed reaction time (following direction or answering questions)

Emotional behaviour

- Strange and inappropriate emotions (laughing, crying or easily angered)

Additional Information:

- Signs/symptoms can appear immediately, or may appear within hours or days of the injury.
- The signs/symptoms may be different for everyone.
- ***An individual may be reluctant to report symptoms because of a fear that they will be removed from the activity, or their status on a team or in a game could be jeopardized.***
- It may be difficult for younger children (under the age of 10) and those with special needs or where English/French is not their first language to communicate how they are feeling.
- Signs for younger children (under the age of 10) may not be as obvious as in older children/adults.

Possible Symptoms Reported

A symptom is something the participant will feel/report.

Physical

- headache
- pressure in head
- neck pain
- feeling off/not right
- ringing in the ears
- seeing double or blurry/loss of vision
- seeing stars, flashing lights
- pain at physical site of injury
- nausea/stomach ache/pain
- balance problems or dizziness
- fatigue or feeling tired
- sensitivity to light or noise

Cognitive

- difficulty concentrating or remembering
- slowed down, fatigue or low energy
- dazed or in a fog

Emotional/Behavioural

- irritable, sad, more emotional than usual
- nervous, anxious, depressed

Sleep Disturbance

- Drowsiness
- Sleeping more/less
- Difficulty falling asleep/Insomnia

Removal from Sport Protocol:

If an individual believes that, following a blow to the head, face or neck, or a blow to the body that transmits a force to the head, a participant may have suffered a concussion, the individual needs to take immediate action.

If the participant is:

- Unconscious
- Suffering from neck pain or tenderness
- Double Vision
- Weakness or tingling/burning in arms or legs
- Severe or increasing headache
- Seizure or convulsion
- Deteriorating conscious state
- Vomiting
- Increasingly restless, agitated or combative
- **Initiate emergency action plan and call 911 for an AMBULANCE.**
- If necessary contact next of kin to inform them of the injury and that the individual is being transported to the hospital.
- Stay with the individual until EMS arrive
- Monitor and document any physical, emotional, and /or cognitive changes
- Assume there is also a possible head and /or neck injury and **only if trained** immobilize the individual before EMS arrives. **If untrained do not attempt to help the individual unless a critical situation occurs**
- Do not remove athletic equipment(e.g. helmets, etc) unless there is an impairment to breathing
- **As a result of the loss of consciousness, medical clearance must be provide in order for the participate to resume activity at any level within the association .**

If the participant is Conscious and not suffering from any of the above signs or symptoms:

- Remove the participant from the activity immediately
- If any of the signs are observed related to symptoms, the individual is to **treated as having a concussion**
- Individuals should not be left alone
- Monitor and document any physical , emotional and / or cognitive changes
- ***If in doubt ...sit them out!*** ROWAN'S LAW SAYS: HIT, STOP, SIT
- Guardian or family member should advise coaching staff of the participant condition before return to play
- If no signs are evident, participant may resume play, it is advisable to inform a family member of the incident in order to ensure monitoring for any late symptoms

Responsibility of Coach, Administrator and/or Supervisor

If a participant has been identified as having a suspected concussion, it is the responsibility of coach, administrator and/or supervisor of that activity to notify all affected parties including the participant, a parent/guardian (when appropriate) as well as other coaches, administrators and/or Supervisors of the suspected concussion. At this point the individual should not participate in any physical activity until he/she has been cleared to do so by a medical doctor or nurse practitioner.

MEDICAL EXAMINATION:

Following examination by a **medical doctor or nurse practitioner** and prior to the individual returning to physical activity, the coach, administrator and/or supervisor must be provided with medical clearance to do so.

If **No Concussion** is **diagnosed**: the participant may return to physical activities or

If a **Concussion** is **diagnosed**: the medically supervised recover plan is essential, participant will only be able to return to the activity with full medical clearance.

Return to Sport Protocol: *Think Canada - Six Step Process Post Concussion:*

MEDICAL CLEARANCE BY A MEDICAL DOCTOR OR NURSE PRACTITIONER IS REQUIRED BEFORE ATHLETE RETURNS TO PLAY

Think First Canada has provided a six (6) step process to evaluate readiness before an athlete can return to play. These measures are provided as a learning tool to assist an individual in understanding the level of activity during rehabilitation. The steps are as follows and should only be undertaken with medical approval:

Step 1: No activity, only complete rest.

Limit school, work and tasks requiring concentration. Refrain from physical activity until symptoms are gone. Once symptoms are gone, a physician, preferably one with experience managing concussions, should be consulted before beginning a step wise return to play process.

Step 2: Light aerobic exercise.

These activities include: walking or stationary cycling. The player should be supervised by someone who can help monitor for symptoms and signs. No resistance training or weight lifting. 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.

If Symptoms become evident? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? Proceed to Step 3 the next day.

Step 3: Sport specific activities.

Activities such as stationary passing, stick handling or shooting can begin at step 3. There should be no body contact or other jarring motions such as high speed stops.

Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? Proceed to Step 4 the next day.

Step 4: Begin drills without body contact.

Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? The time needed to progress from non-contact exercise will vary with the severity of the concussion and with the player. *Proceed to Step 5 only after medical clearance.*

Step 5: Begin drills with body contact.

Symptoms? Return to rest until symptoms have resolved. If symptoms persist, consult a physician.

No symptoms? Proceed to Step 6 the next day.

Step 6: Game play.