



## CONCUSSION POLICY FOR GALT CURLING CLUB

The purpose of this Concussion Policy is to outline a framework that defines the systems in which to be followed when a participant, or any other individual, falls while on the ice surface. This Policy is not a substitute for our responsibility and accountability to exercise good judgment and obtain guidance from medical professionals.

### Preamble

1. This Policy is based on the 5th Consensus Statement on Concussion in Sport that was released in April 2017. This Policy interprets the information contained in the report that was prepared by the 2017 Concussion in Sport Group (CISG), a group of sport concussion medical practitioners and experts, and adapts concussion assessment and management tools.
2. This Policy is intended to be compliant with Ontario's Rowan's Law (Concussion Safety), 2018. If any provision of the policy is in conflict with Rowan's Law, the legislation shall take precedence.
3. The CISG suggested 11 'R's of Sport-Related Concussion ("SRC") management to provide a logical flow of concussion management. This Policy is similarly arranged. The 11 R's in this Policy are: Recognize, Remove, Re-Evaluate, Rest, Rehabilitation, Refer, Recover, Return to Sport, Reconsider, Residual Effects, and Risk Reduction.
4. A concussion is a clinical diagnosis that can only be made by a qualified and licensed physician.

### Definitions

5. The following terms have these meanings in this Policy:
  - a. "Designated Person" – an individual or individuals identified by the Galt Curling Club, an employee, directors and officers, or league convenor, and who shall have the responsibilities as described in this Policy including, but not limited to, as it relates to the removal from sport and return to sport protocols described herein.
  - b. "Participant" – Coaches, athletes, volunteers, officials, event coordinators, league convenors and other Registered Individuals

- c. “Registered Individuals” – All individuals employed by, or engaged in activities with the Galt Curling Club, including but not limited to, employees, volunteers, administrators, committee members and directors and officers.
- d. “Suspected Concussion” – means the recognition that a Participant appears to have either experienced an injury or impact that may result in a concussion or who is exhibiting unusual behaviour that may be the result of concussion.
- e. “Sport-Related Concussion (“SRC”) – A sport-related concussion is a traumatic brain injury induced by biomechanical forces. Several common features that may be used to define the nature of a SRC may include:
  - i. Caused either by a direct blow to the head, face, neck or elsewhere on the body with an impulsive force transmitted to the head.
  - ii. Typically results in the rapid onset of short-lived impairment of neurological function that resolves spontaneously. However, in some cases, signs and symptoms evolve over a number of minutes to hours.
  - iii. May result in neuropathological changes, but the acute clinical signs and symptoms largely reflect a functional disturbance rather than a structural injury and, as such, no abnormality may be visibly apparent
  - iv. Results in a range of clinical signs and symptoms that may or may not involve loss of consciousness. Resolution of the clinical and cognitive features typically follows a sequential course. However, in some cases symptoms may be prolonged.

## **Purpose and Application**

- 6. The Galt Curling Club is committed to ensuring the safety of Participants in its activities. The Galt Curling Club recognizes the increased awareness of concussions and their long-term effects and believes that prevention of concussions is paramount to protecting the health and safety of Participants.
- 7. Despite a Participant’s best efforts to prevent concussions, the risk may not be completely eliminated and concussions may still occur. This Policy describes the common signs and symptoms of a concussion and how to identify them, the protocol to be followed in the event of a possible concussion, and a Return to Sport protocol should a concussion be diagnosed. Awareness of the signs and symptoms of concussion and knowledge of how to properly manage a concussion is critical to recovery and helping to ensure the individual is not returning to physical activities too soon, risking further complication.
- 8. This Policy applies exclusively to all activities and events for which The Galt Curling Club is the governing or sanctioning body including, but not limited to, competitions, practices, leagues and any other use of the ice surface.

## Registration

9. When a participant under the age of 26 years old registers with The Galt Curling Club, the participant must provide written or electronic confirmation that they have reviewed concussion awareness resources within the past 12 months. The Ontario Government has produced age-appropriate concussion resources located here:
  - a. [Ages 10 and under](#)
  - b. [Ages 11-14](#)
  - c. [Ages 15+](#)
10. Participants under the age of 26 years old must also sign the Concussion Code of Conduct (Appendix A).
11. For participants younger than 18 years old, the participant's parent or guardian must provide confirmation that they have also reviewed the concussion resources and signed the Concussion Code of Conduct.
12. In addition to the age-specific requirements listed above and set out in compliance with the Ontario government, The Galt Curling Club will require all members of the Galt Curling Club to provide written or electronic confirmation that they have reviewed concussion awareness resources, including this policy, within the past 12 months.

## Recognizing Concussions

13. Severe signs of a Concussion include:
  - a. Neck pain or tenderness
  - b. Double vision
  - c. Weakness or tingling / burning in arms or legs
  - d. Severe or increasing headache
  - e. Seizure or convulsion
  - f. Loss of consciousness
  - g. Deteriorating conscious state
  - h. Vomiting more than once
  - i. Increasingly restless, agitated, or combative
  - j. Increased confusion
14. The following observable signs may indicate a possible concussion:
  - a. Lying motionless on the playing surface
  - b. Slow to get up after a direct or indirect hit to the head
  - c. Disorientation or confusion / inability to respond appropriately to questions
  - d. Blank or vacant look
  - e. Balance or gait difficulties, absence of regular motor coordination, stumbling, slow laboured movements
  - f. Facial injury after head trauma
15. A concussion may result in the following symptoms:

- a. Headache or “pressure in head”
- b. Balance problems or dizziness
- c. Nausea or vomiting
- d. Drowsiness, fatigue, or low energy
- e. Blurred vision
- f. Sensitivity to light or noise
- g. More emotional or irritable
- h. “Don’t feel right”
- i. Sadness, nervousness, or anxiousness
- j. Neck pain
- k. Difficulty remembering or concentrating
- l. Feeling slowed down or “in a fog”

16. Failure to correctly answer any of these memory questions may suggest a concussion:

- a. Where are you?
- b. What day is it?
- c. What event are you participating in?

### **Removal from Sport Protocol**

17. In the event of a Suspected Concussion (regardless of whether the concussion or suspected concussion was obtained while curling or during the activity or event) where there are observable signs of a concussion, symptoms of a concussion, or a failure to correctly answer memory questions, the Participant must be immediately removed from training, practice or competition by the person who is the Designated Person at an event, an on-site Galt Curling Club staff member and/or the coach of the athlete.

18. After removal from participation, the following actions should be taken:

- a. The Designated Person(s) who removed the Participant must call 911, if in their opinion doing so is necessary (e.g. if there is an emergency and any severe signs or symptoms appear).
- b. The Galt Curling Club must make and keep a record of the removal (Appendix B);
- c. The Designated Person must inform the Participant’s parent or guardian of the suspected concussion if the Participant is younger than 18 years old, and the Designated Person must also inform the parent or guardian that the Participant is required to undergo a medical assessment by a physician or nurse practitioner before the Participant will be permitted to return to training, practice or competition; and
- d. The Designated Person will remind the Participant, and the Participant’s parent or guardian as applicable, of the The Galt Curling Club’s Return-to-Sport protocol as described in this Policy (Appendix C).

19. A Participant who has been removed from participation due to a suspected concussion must not return to participation until the Participant has been assessed medically by a physician or a nurse practitioner, even if the symptoms of the concussion resolve.

20. Participants who have a Suspected Concussion and who are removed from participation should:
  - a. Be isolated in a dark room or area and stimulus should be reduced
  - b. Be monitored
  - c. Have any cognitive, emotional, or physical changes documented
  - d. Not be left alone (at least for the first 1-2 hours)
  - e. Not drink alcohol
  - f. Not use recreational/prescription drugs
  - g. Not be sent home by themselves
  - h. Not drive a motor vehicle until cleared to do so by a medical professional Medical Evaluation
  
21. A Participant with a Suspected Concussion should be evaluated by a licensed physician or nurse practitioner who should conduct a comprehensive neurological assessment of the Participant and determine the Participant's clinical status and the potential need for neuroimaging scans.

## **Return to Play**

22. The Participant who has been removed from play, can not return to training, practice or competition until the participant, or if the participant is under 18 years of age, the participant's parent or guardian provides confirmation to the designated person or Galt Curling Club's office that the participant:
  - a. Has undergone a medical assessment by a physician or nurse practitioner and has not been diagnosed as having a concussion, and
  - b. Has been medically cleared to return to training, practice or competition by the physician or nurse practitioner
  
23. If the Participant has been diagnosed with having a concussion:
  - a. The Participant must proceed through the graduated return-to-sport steps.
  - b. The Participant's Return-to-Sport strategy should be guided and approved by a physician with regular consultations throughout the process. The Galt Curling Club's recommended Return-to-Play protocol can be found in Appendix C.
  - c. An athlete, or the athlete's parent or guardian – if under 18 years of age, must share the medical advice or recommendations they receive with the Designated Person (s) before being permitted to return to training, practice or competition through the graduated Return-to-Sport steps, if any.
  - d. The Designated Person must inform the participant or, if the participant is under 18 years of age, the athlete's parent or guardian, of the importance of disclosing the diagnosis to other sport organization(s) with which the participant is registered or the school the participant attends.
  - e. The Participant, or the Participant's parents or guardians, if under 18 years old, must disclose if the Participant has been diagnosed with a Concussion during an activity/school/sport outside of curling activities, and communicate such diagnosis to the Designated Person.
  
24. The Participant, or the participant's parent or guardian, if under 18 years old, must provide the The Galt Curling Club with a medical clearance form, signed by a physician, following Stage 5 and before proceeding to Stage 6 (See Table 1 within Return-to-Sport protocol).

## **Risk Reduction and Prevention**

25. The Galt Curling Club mandates the use of well-fitting, properly worn helmets (either CSA-approved or designed specifically for the sport of curling are recommended) for all participants under the age of 12. Please note that most bicycle-specific helmets are not CSA-approved.
26. The Galt Curling Club strongly recommends that anyone in a Learn to Curl Program (age 12 or older) and anyone who is vulnerable (related to experience, medical, prior concussions, etc) wear protective headgear on ice, as recommended by Curling Canada.  
<https://www.curling.ca/about-curling/safety-first/helmet-use-recommendations/>
27. The Galt Curling Club recognizes that knowing a Participant's SRC history can aid in the development of concussion management and the Return to Sport strategy. The clinical history should also include information about all previous head, face, or cervical spine injuries. The Galt Curling Club encourages Participants to make coaches and other stakeholders aware of their individual histories.

## **Non-Compliance**

28. Failure to abide by any of the guidelines and/or protocols contained within this policy may result in disciplinary action upon review by the Galt Curling Club Board of Directors or the assigned committee, and will be in accordance with any/all of The Galt Curling Club's discipline-related policies current at the time of the infraction.

## **Liability**

29. The Galt Curling Club shall not be liable for any Participant or other individual's use or interpretation of this Policy. Further, none of The Galt Curling Club's members, officers, employees, agents, representatives and other individuals involved in any way in the administration of this Policy shall be liable to any other individual in any way, in relation to any lawful acts or omissions committed in the honest application, administration, and/or enforcement of this Policy.

# GALT CURLING CLUB CONCUSSION POLICY (Appendix A)

The following section of the Galt Curling Club's concussion policy must be signed and understood by all participants of the Galt Curling Club, including members. For Participants who are younger than 18 years old, a parent/guardian must sign and understand this section.

## **I will help prevent concussions by:**

1. Wearing the proper equipment for my sport and wearing it correctly.
2. Developing my skills and strength so that I can participate to the best of my ability.
3. Respecting the rules of my sport or activity.
4. Demonstrating my commitment to fair play and respect for all (respecting other athletes, coaches, team trainers and officials).

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

5. A concussion is a brain injury that can have both short-term and long-term effects.
6. A blow to my head, face or neck, or a blow to the body that causes the brain to move around inside the skull may cause a concussion.
7. I don't need to lose consciousness to have had a concussion.
8. I have a commitment to concussion recognition and reporting, including self reporting of possible concussion and reporting to a Designated Person when I suspect that another individual may have sustained a concussion. (Meaning: If I think I might have a concussion I should stop participating in further training, practice or competition **immediately**, and I will tell an adult if I think another participant has a concussion).
9. Continuing to participate in further training, practice or competition with a possible concussion increases my risk of more severe, longer lasting symptoms, and increases my risk of other injuries.

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

10. I will not hide my symptoms. I will tell a coach, official, club employee, parent or another adult I trust if I experience any symptoms of concussion.
11. If someone else tells me about concussion symptoms, or I see signs they might have a concussion, I will tell a coach, official, club employee, parent or another adult I trust so they can help.
12. I understand that if I have a suspected concussion, I will be removed from sport and that I will not be able to return to training, 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.
13. I have a commitment to sharing any pertinent information regarding incidents of removal from sport with my school and any other sport organization with which I have registered. (Meaning: 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 support me while I recover).

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

14. I understand my commitment to supporting the return-to-sport process and I will follow my sport organization's Return-to-Sport Protocol.

- 15. I understand I will have to be medically cleared by a medical doctor or nurse practitioner before returning to training, practice or competition.
- 16. I will respect my coaches, team trainers, parents, health-care professionals, and medical doctors and nurse practitioners, regarding my health and safety.

**By signing here, I acknowledge that I have fully reviewed and committed to this Concussion Policy.**

\_\_\_\_\_  
Name of Participant (print)

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Name of Parent or Guardian (print)

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date Signed



# GALT CURLING CLUB CONCUSSION POLICY (Appendix B)

## ACCIDENT/INJURY REPORT FORM

Date of Report: \_\_\_/\_\_\_/\_\_\_\_\_ (MM/DD/YYYY)

### PARTICIPANT INFORMATION (Injured Person)

LAST NAME:	FIRST NAME:
STREET ADDRESS:	CITY:
POSTAL CODE:	PHONE NUMBER:
EMAIL:	AGE:
SEX: MALE: ___ FEMALE: ___ UNDISCLOSED: ___	DATE OF BIRTH:
KNOWN MEDICAL CONDITIONS AND/OR ALLERGIES:	

### INCIDENT INFORMATION

Date and Time of Incident:	___/___/_____ (MM/DD/YYYY)	___:___ AM/PM
How did the injury happen?		
What is the nature of the injuries?		
Was First Aid offered/accepted?		
After treatment, the injured person was (*Participant cannot return to play if a concussion is suspected)		

Sent Home	Sent to Hospital/Clinic	Returned to Activity*
-----------	-------------------------	-----------------------

**DESIGNATED PERSON INFORMATION**

LAST NAME:	FIRST NAME:
STREET ADDRESS:	CITY:
POSTAL CODE:	PHONE NUMBER:
EMAIL:	AGE:
ROLE (Coach, employee, board member, Bystander, parent, etc.)	

**WITNESS INFORMATION**

**(Someone who observed the incident and is not the designated person)**

LAST NAME:	FIRST NAME:
STREET ADDRESS:	CITY:
POSTAL CODE:	PHONE NUMBER:
EMAIL:	AGE:

**OTHER COMMENTS OR REMARKS**

# GALT CURLING CLUB CONCUSSION POLICY (Appendix C)

## Return-To-Sport Protocol (As Per The Ontario Curling Association & Curling Canada)

The Participant's Return-to-Sport strategy should be guided and approved by a physician with regular consultations throughout the process.

### Rest and Rehabilitation

1. Participants with a diagnosed Sport Related Concussion (SRC) should rest during the acute phase (24-48 hours) but can gradually and progressively become more active so long as activity does not worsen the Participant's symptoms. Participants should avoid vigorous exertion.
2. Participants must consider the diverse symptoms and problems that are associated with SRCs. Rehabilitation programs that involve controlled parameters below the threshold of peak performance should be considered.

### Refer

3. Participants who display persistent post-concussion symptoms (i.e. symptoms beyond the expected timeline for recovery – 10-14 days for adults and 4 weeks for children) should be referred to physicians with experience handling SRCs.

### Recovery and Return to Sport

4. SRCs have large adverse effects on cognitive functioning and balance during the first 24- 72 hours after injury. For most Participants, these cognitive defects, balance and symptoms improve rapidly during the first two weeks after injury. An important predictor of slower recovery from an SRC is the severity of the Participant's initial symptoms following the first few days after the injury.
5. The table below represents a recommended graduated return to sport for most Participants, in particular, for those that did not experience high severity of initial symptoms after the following the first few days after the injury.

Stage	Aim	Activity	Stage Goal
1	Symptom-limited activity	Daily activities that do not provoke symptoms	Gradual reintroduction of work/school activities
2	Light aerobic exercise	Walking or stationary cycling at slow to medium pace. No resistance training. - Light intensity walking or stationary cycling for 15-20 minutes at sub-symptom threshold	Increase heart rate

		intensity	
3	Sport-specific exercise	Running drills. No head impact activities <ul style="list-style-type: none"> <li>- Low intensity participation like throwing rocks.</li> <li>- The environment should be managed so as to ensure the participant is at minimum Add movement risk of falling or colliding with other participants.</li> <li>- The participant may also attempt basic balance drills.</li> </ul>	Add movement
4	Non-contact training drills	Increase intensity, difficulty and duration of training drills. May start progressive resistance training	Exercise, coordination and increased thinking
5	Full practice	Following medical clearance, participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6	Return to sport	Normal participation	

Table 1 - Return To Sport Strategy - Curling Canada

- 6. An initial period of 24-48 hours of both physical rest and cognitive rest is recommended before beginning the Return to Sport strategy.
- 7. There should be at least 24 hours (or longer) for each step. If symptoms reoccur or worsen, the Participant should go back to the previous step.
- 8. Resistance training should only be added in the later stages (Stage 3 or Stage 4).
- 9. If symptoms persist, the Participant should return to see a physician.
- 10. The Participant must provide The Galt Curling Club with a medical clearance form, signed by a physician, following Stage 5 and before proceeding to Stage 6.

**Reconsider**

- 11. The 2017 Concussion in Sport Group (CISG) considered whether certain populations (children, adolescents, and elite athletes) should have SRCs managed differently.

12. It was determined that all Participants, regardless of competition level, should be managed using the same SRC management principles.
13. Adolescents (13 to 18 years old) and children (5 to 12 years old) should be managed differently. SRC symptoms in children persist for up to four weeks. More research was recommended for how these groups should be managed differently, but the CISG recommended that children and adolescents should first follow a Return to School strategy before they take part in a Return to Sport strategy. A Return to School strategy is described below.

Stage	Aim	Activity	Stage Goal
1	Daily activities at home that do not give the child symptoms	Typical activities of the child during the day as long as they do not increase symptoms (e.g., reading, texting, screen time). Start with 5–15 min at a time and gradually build up	Gradual return to typical activities
2	School Activities	Homework, reading or other cognitive activities outside of the classroom	Increase tolerance to cognitive work
3	Return to school part-time	Gradual introduction of schoolwork. May need to start with a partial school day or with increased breaks during the day	Increase academic activities
4	Return to school full time	Gradually progress school activities until a full day can be tolerated	Return to full academic activities and catch up on missed work

Table 2 - Return To School Policy - CurlION

### Residual Effects

14. Participants should be alert for potential long-term problems such as cognitive impairment and depression. The potential for developing chronic traumatic encephalopathy (CTE) should also be a consideration, although the CISG stated that “a cause-and-effect relationship has not yet been demonstrated between CTE and SRCs or exposure to contact sports. As such, the notion that repeated concussion or subconcussive impacts cause CTE remains unknown.”