



Concussion Policy/Guidelines

Skipton Football Netball Club

Skipton Football Netball Club has adopted the AFL's 'Management of Sport-Related Concussion in Australian Football' guidelines as their protocol in the management of concussions (and suspected concussions) in all competitive sport and training/play at Skipton Football Netball Club (this includes football and netball). These guidelines may be found at the following website (detailed below) as well as on the Skipton Football Netball Club webpage (also detailed below).

<https://play.afl/concussion/resources/management-sport-related-concussion-australian-football#article-0>

<https://www.skiptonfnc.com.au> (in the 'About Us – Policies' section)

Some key points to note are:

- At Skipton Football Netball Club, the head trainer (or most senior trainer on the day) will be responsible for the management of all concussion and suspected concussions on the days of training and games.
- As per the AFL's 'Management of Sport-Related Concussion in Australian Football' guidelines, any player who has suffered a concussion or is suspected of having a concussion must be medically assessed as soon as possible after the injury and must NOT be allowed to return to play in the same match or training session.
- **Following the head trainer's indicating a suspected concussion/concussion, it is then the full responsibility of the junior or senior coordinator (football or netball, depending on the code) to ensure that**
 1. **the player, parents/carers (if appropriate), coach, team manager and football/netball director understand that the player must see a medical practitioner as soon as possible (within 24 hours, but preferably on the same day), and**
 2. **the player, parents/carers (if appropriate), coach, team manager, and football/netball director are aware of the player's return to play plan. This must be communicated in writing to all involved parties (preferably email), and a medical certificate provided prior to return to play.**
- If a player has a concussion or suspected concussion which occurs outside of the Skipton Football Netball Club's training or playing arena, it is the responsibility of the player and/or parents/carers to inform the Skipton Football Netball Club. Once the Skipton Football Netball Club is aware, the standard suspected concussion/concussion protocol above (in bold) will be followed accordingly.
- The earliest that the player may return to play (once they have completed a graded loading program and have obtained medical clearance) is on the 21st day following the diagnosed concussion. This means that a player who is concussed in a match on a Saturday will miss at least the next two Saturday matches and will only be able to return to play on the third Saturday (i.e. the 21st day after the concussion was sustained) if they have recovered according to the protocols and have been medically cleared to return to play. In many cases, recovery will be slower than the minimum 21 days.

- The following pages have
 - an overview of Concussion Management in Football (which also applies to Netball), and
 - a graded return to play guideline that is useful in concussion rehabilitation.

Skipton Football Netball Club will continue to inform our community about concussion and the protocols following concussion through educational talks, social media outlets, and conversations to ensure the safety of all our club members, playing and non-playing.

CONCUSSION MANAGEMENT IN AUSTRALIAN FOOTBALL



1. RECOGNISE AND REMOVE:

If a player displays concussion signs and/or reports symptoms after experiencing head trauma, the player should immediately be removed from the match or training session for assessment. The assessment should use the AFL-approved concussion management app HeadCheck, the Concussion Recognition Tool (CRT5) or an equivalent assessment tool.

COMMON SYMPTOMS

include headache, dizziness or balance problems, feeling dinged or dazed, feeling like in a "fog" or slowed down, having trouble concentrating or remembering, or not feeling "quite right".

COMMON SIGNS

include loss of responsiveness, lying motionless on the ground, unsteady on feet, dazed or blank look, confused or difficulty remembering, or the player is not their normal self.



2. REFER:

If there are any "red flags" e.g. confusion or incoherence, neck pain, double-vision, weakness or tingling/burning in the arms or legs, loss of consciousness, worsening headache or vomiting, an ambulance should be called and the player referred to hospital immediately.
Otherwise, the player should be referred to a medical doctor for assessment (at venue, local GP or hospital emergency department).



3. REVIEW:

The player (or parent) should provide the HeadCheck assessment to the medical doctor and as much information as possible to help the doctor to assess the player.
The doctor will review the player to confirm the diagnosis and decide on the best plan for management in the days after injury (including time off from driving, work, or school).



4. RETURN:

The player and Club should follow the advice provided by the medical doctor supported by the AFL Concussion return to play guidelines. The three phases of return are brief rest, recovery and a graded loading program. Players should not enter the loading program until they have fully recovered from their concussion. The minimum time to return to play is 12 days, but most cases will require longer with recovery varying by person and injury.
A conservative approach is particularly important in: children and adolescents, players with history of concussion, where there is a recurrence of symptoms or where there is any uncertainty about recovery.
Any concussed player must not be allowed to return to competitive contact sport (including full contact training sessions) before having a medical clearance.

For more details refer to "The Management of Sport-Related Concussion in Australian Football".
HeadCheck was developed in collaboration with the Murdoch Children's Research Institute and a panel of sport-related concussion experts led by Professor Vicki Anderson.



**DOWNLOAD THE AFL-APPROVED
HEADCHECK APP TODAY**





STAGES OF GRADED RETURN TO PLAY

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STAGE 1: RELATIVE REST

ACTIVITY	DURATION	CRITERIA TO PROGRESS
Relative rest Gentle day-to-day activities - as guided by symptoms. Minimise screen time (TV, computer/homework/work, phone/social media and gaming)	1-2 days	Nothing specific - should progress after 1-2 days

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STAGE 2: RECOVERY

ACTIVITY	DURATION	CRITERIA TO PROGRESS
i. Daily activities that do not provoke symptoms Increase day-to-day activities - as guided by symptoms. Include short walks. Limit screen time (TV, computer/homework/work, phone/social media and gaming) -duration depends on symptoms No team training drills. No resistance training.	Minimum 1 day	Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
ii. Light aerobic exercise Start light activity e.g., walking, jogging or cycling at a slow to medium pace. Aim for about 50-60% maximum heart rate (can carry a conversation when exercising) No team training drills. No resistance training.	Minimum 1 day	Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
iii. Moderate aerobic exercise Start moderate aerobic exercise e.g., walking, jogging or cycling at a medium pace. Aim for about 60-80% maximum heart rate. May continue with moderate aerobic exercise over a number of days/sessions if still has symptoms related to concussion. No team training drills. No resistance training.	Minimum 2 days	Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
iv. High intensity aerobic exercise Start high-intensity aerobic exercise (e.g. running or cycling at high intensity) Up to maximum heart rate. No team training drills. Can commence gentle resistance training (50-75% of usual loads)	Minimum 2 days	Progress if a) Complete recovery of all concussion-related symptoms and signs at rest and with high intensity training; b) Have returned to school or work (without any need for modifications);

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STAGE 3: GRADED LOADING PROGRAM

ACTIVITY	DURATION	CRITERIA TO PROGRESS
i. Non-contact training Return to full team training sessions - <u>non-contact activities only</u> Minimum of 2-3 training sessions with no consecutive days of football training (to allow for rest and recovery)	Minimum 7 days	Progress if remaining completely free of any concussion-related symptoms*
ii. Limited contact training Full team training allowed -able to participate in drills with incidental and/or controlled contact (including tackling) <u>No consecutive days of training (i.e. must have 'non-contact activity' days in between training sessions)</u>	Minimum of 7 days to progress through graded contact training	Progress if: a) Remaining completely free of any concussion-related symptoms* b) Player is confident to return to full contact training c) Player has medical clearance to return to full contact training
iii. Full contact training		Progress if: a) Remaining completely free of any concussion-related symptoms* b) Player is confident to return to play

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STAGE 4: UNRESTRICTED RETURN TO PLAY

*If concussion-related symptoms reappear at any time in stage 3 (Graded loading program) then the player should go back to the previous symptom-free step in stage 2 (Recovery) and seek medical review from a doctor.