FRANKLIN PUBLIC SCHOOL’S PROCEDURES AND PROTOCOLS ON STUDENT HEAD INJURIES AND CONCUSSIONS IN EXTRACURRICULAR ATHLETICS

UPDATED SEPTEMBER, 2017
A survey of middle and high school students has shown that 18% report having symptoms associated with a concussion after a blow to the head during extracurricular athletics, annually\(^1\). Given that there are approximately 200,000 Massachusetts students involved in athletics (MIAA), there is an estimated 36,000 student athletes a year experiencing a possible concussion. A growing body of scientific literature demonstrates the short and long-term risks of concussions. Returning a student athlete to play after a known or suspected concussion places the student at risk for long term health consequences, including serious injury or even death. The risk of substantial injury is particularly high if the athlete suffers a subsequent concussion before completely recovering from the prior one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences.

In 2010, the Massachusetts Department of Public Health’s (MDPH) issued the new regulation 105 CMR 201.000 Head Injuries and Concussions in Extracurricular Athletic Activities, mandated by Chapter 166 of the Acts of 2010, An Act Relative to Safety Regulations for School Athletes (See Appendix VII for copy of this statute). This regulation requires all public middle and high schools (serving grades 6 through high school graduation) and those non-public schools that are members of the Massachusetts Interscholastic Athletic Association (MIAA) to have policies and procedures governing the prevention and management of sport-related head injuries. The section in the regulations on School Policies (105 CMR 201.006) states that these policies will be developed by January 1, 2012 and will be reviewed and revised “as needed but at least every two years.”

These regulations and the resulting school policies are meant to prevent concussions and minimize the health consequences should a concussion occur. The regulations also emphasize a team approach, bringing together all those in the school community responsible for student athletes’ safety to understand the risks of concussions so they can respond appropriately.

This document is organized in 17 sections which addresses each of the required components identified in the regulations. Each section cites the relevant subsection of the regulations, provides an overview with clarifying comments and includes the district’s processes and practices relative to each requirement.

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\(^1\) Youth Health Survey, 2009, Massachusetts Department of Public Health.
Franklin Public School Procedures and Protocols on Sports Related Head Injuries:

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Additional materials and resources about sports-related concussion can be found in the Appendices accompanying this document and include:

Appendix I: Fact sheet on Signs and Symptoms of Concussion
Appendix II: Approved Training Materials for Sports-related Concussion:
Appendix III: Franklin Public School's athletic department registration and Pre-participation Head Injury/Concussion Reporting Form
Appendix IV: Franklin Public School's Report of Head Injury Form
Appendix V: Franklin Public School's Post Sports-Related Head Injury Medical Clearance and Authorization Form
Appendix VI: DPH Regulations 105 CMR 201.000: Head Injuries and Concussions in Extracurricular Athletic Activities
Appendix VIII: MDPH Guidance on 504 or IEP Plans for Students Returning to Academic Work
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**INTRODUCTION**

The Franklin Public Schools are committed to the safety of all our student athletes. The purpose of this policy is to educate our coaches, parents, administrators, school personnel, volunteers and student athletes on the seriousness of brain injuries and concussions.

A team of school staff consisting of our school nurse, athletic department director, certified athletic trainer, coach, and school administrator has developed these policies and procedures for The Franklin Public Schools and they have been adopted by the Franklin School Committee.

We have been informed by Massachusetts Department of Public Health (MDPH), that while these policies are not subject to MDPH review, they must be in accordance with MDPH regulations. (See Appendix VI for copy of these regulations.) Franklin Public Schools will be submitting to DPH affirmations on our school letterhead, documenting that we have complied with the regulatory requirement to develop appropriate head injury policies. We will then update and submit this affirmation by September 30, 2013 and every two years thereafter.

The Franklin Public Schools seeks to prevent concussion and provide a safe return to activity for all students after injury, particularly after a head injury. In order to effectively and consistently manage these injuries, the Athletic Department abides by the following procedures that have been developed to aid in ensuring that concussed athletes are identified, treated and referred appropriately, receive appropriate follow-up medical care during the school day, including academic assistance, and are fully recovered prior to returning to athletic activity.
SECTION 1: PERSONS RESPONSIBLE FOR IMPLEMENTATION OF SCHOOL POLICY AND PROCEDURES

Regulation:
105 CMR 201.006 (A)(1): Designation, by the superintendent or head master, principal or school leader, of the person responsible for the implementation of these policies and protocols, either the Athletic Director or other school personnel with administrative authority;

Overview:
The regulations specify that each school or school district must adopt policies concerning the prevention and management of sports-related head injuries. The superintendent must designate the person responsible for the development, implementation and revision of these policies. This person may be the Athletic Director or other administrator. As required by the regulations, these policies were developed by a team consisting of: a school administrator, school nurse, school or team physician if on staff, athletic director, licensed athletic trainer if on staff, neuropsychologist if available, guidance counselor, and teacher in consultation with any existing school health/wellness advisory committee. The regulations further specify that the regulations should be revised by September 30, 2013 and every two years thereafter.

Person Responsible:
The Franklin Public Schools have designated its Athletic Director to oversee the implementation of policies and protocols governing the prevention and management of sports-related head injuries. In addition, the Athletic Director will be responsible for:
(1) Supporting and enforcing the protocols, documentation, required training and reporting
(2) Assuring that all documentation is in place
(3) Reviewing, updating and implementing policy every two years and including updates in annual training and student and parent handbooks.
SECTION 2: ANNUAL TRAINING REQUIREMENT

Regulation:
105 CMR 201.006(A)(2): Annual training of persons specified in 105 CMR 201.007 in the prevention and recognition of sports-related head injury, and associated health risks including second impact syndrome, utilizing Department-approved training materials or program, and documentation of each person’s completion of such training.

Overview:
DPH has specified that the following persons must receive DPH-approved annual training in sports-related concussion: coaches, licensed athletic trainers, trainers, volunteers, school and team physicians, school nurses, athletic directors, marching band directors, parents of student athletes and student athletes. The Franklin Public Schools complies with the annual training requirement as indicated below.

Training Requirement:
The Commonwealth of Massachusetts requires annual safety training on sports related concussion, including second impact syndrome, for coaches, certified athletic trainers, trainers, volunteers, school nurses, school and team physicians, athletic directors, directors responsible for a school marching band whether employed by a school or school district or serving as a volunteer, parent or legal guardian of a child who participates in an extracurricular athletic activity and student who participates in an extracurricular athletic activity. At the Franklin Public Schools, school personnel are required to complete free, on-line training (either the National Federation of High Schools or the CDC’s Heads Up Concussion training) or attend a training event organized by the athletic department and approved by the Department of Public Health. For student athletes and their parents, this training can be provided in the regular pre-season meetings where written materials are also available. Attendance can be taken at such meetings and the attendance roster serves as a record of verification for participants who are trained. If parents or students are unable to attend this training, they must complete one of the approved on-line trainings and submit a certificate of completion to the athletic director to meet this participation requirement. Alternatively, parents may review DPH-approved written materials (provided by the athletic department) and sign a verification form that they have read and understood these materials.
SECTION 3: DOCUMENTATION OF PHYSICAL EXAM

Regulations:
105 CMR 201.006(A)(3): Documentation of physical examination prior to a student’s participation in extracurricular athletic activities on an annual basis, consistent with 105 CMR 200.100(B)(3) and information for students participating in multiple sports seasons that documentation of one physical examination each year is sufficient;

Overview:
Students must have an annual physical examination to assure that they are sufficiently healthy for athletic activity. Ideally, the physical examination should be done by the student’s primary care provider. The Franklin Public Schools offers free sports physicals conducted by the school physician three times per year (prior to each season) for students who do not have a primary physician or who are unable to obtain physicals due to constraints with medical insurance or financial hardship.

Physical Examination:
Every student in the Franklin Public Schools must be separately and carefully examined by a duly licensed physician, nurse practitioner or physician assistant, prior to a student’s participation in competitive athletics, on an annual basis. The completed and signed copy of the medical clearance form should be mailed, faxed or hand delivered to either the school nurse or athletic office. No student athlete will be allowed to participate in athletic activities until all forms, including annual physical examinations are signed and submitted.

- Frequency of Exam: As a matter of school policy and MIAA rules, Franklin Public Schools accepts physical examinations completed within 13 months to allow for insurance coverage that would be not be possible if examinations are within a 12 month period. This medical examination should be completed by a physician, nurse practitioner, etc. and should authorize the student athlete who participates in multiple sports seasons during the following 13 months that the student is medically cleared to do so.

- Where Forms Kept: The current annual medical examination form should be submitted to the school nurse. It should also be kept in the student’s medical record and in the athletic department office. The school nurse and/or athletic director should ensure that all student athletes that are participating in extracurricular school sports have been medically cleared annually.

- A student athlete at Franklin Public Schools cannot participate in an extracurricular sports activity if she/he has not had a physical examination within the last 13 months. Any student athlete who does not have a current physical on file with the nurse, prior to the first day of try-outs/practice, is not eligible until a new/updated physical is turned in.
SECTION 4: PRE-PARTICIPATION HEAD INJURY REPORTING FORMS, SUBMISSION AND REVIEW

Regulations:
105 CMR 201.006(A)(4): Procedure for the school to obtain and ensure review, prior to each sports season, of current information regarding and athlete’s history of head injuries and concussion using either the Department Pre-participation Health Injury/Concussion Reporting Form For Extracurricular Activities, or school based equivalent.

Overview:
Both the law and regulations require student athletes and their parents to provide an accurate history of head injury to the school prior to each athletic season. The Franklin Public School’s pre-participation form contains all of the elements required by the regulations and may be found in Appendix III.

Concussion History Form Submission and Review:
- The Massachusetts concussion law requires athletes and his or her parents to inform their coaches about prior head injuries at the beginning of each sports season. This reporting is done via the Pre-Participation Head Injury/Concussion Reporting form and should be completed by the student’s parent(s) or legal guardian(s) and the student. It must be submitted to the Franklin Public School’s Athletic Director, prior to the start of each season a student plans to participate in an extracurricular athletic activity. This form provides a comprehensive history with up-to-date information relative to concussion history. This form is designed to ensure that particular attention is paid to identifying athletes with a history of brain or spinal injuries.
- Until the pre-participation form is completed and signed by the parent/guardian and student and returned to the school prior to the start of every sports season, the student cannot participate in the extracurricular sports activity.
- All Athletes will take a baseline ImPACT Test prior to participation in any sport during their 9th and 11th grade years provided by the school district.
- History of Multiple Concussions on Pre-participation Form: The decision to allow a player who reported a history of multiple concussions on her/his pre-participation form should be made only after consultation with the student’s physician or primary care provider; the sports medicine or concussion specialist, if involved; the neuropsychologist, if involved, and the appropriate school athletic staff and the parent. Current evidence indicates that youth who have suffered one or more concussions are more likely to suffer a subsequent one. Options may include switching positions, limiting contact in practices, or changing sports altogether to minimize the risk of re-injury. The focus of The Franklin Public Schools will always be on protecting the health and safety of the student and avoiding long-term consequences that can occur from repeated concussions.
- Collection/Distribution of Pre-participation Forms: The Franklin Public Schools has the pre-participation forms available electronically at the School’s website under the Athletic Department folder at http://franklinhigh.vt-s.net. Hard copies of these forms are also available at the Athletic Department.
- The parent/student can fax, mail, or hand deliver the completed and signed pre-participation form into the Franklin Public School’s athletic department which will forward a copy to the school nurse. In addition, during the months of July and August, coordination between the athletic and school nursing departments is particularly important when the school nurse is on vacation. The pre-participation forms should be submitted to the coaches or the athletic director who will then follow-up with the school nurse when s/he returns to work in September.
SECTION 5: MEDICAL/NURSING REVIEW OF PRE-PARTICIPATION FORMS

Regulation:
105 CMR 201.006 (A)(5): Procedure for medical or nursing review of all Pre-participation Forms indicating a history of head injury

Overview:
In order to assure that students who have experienced a concussion/head injury in the past are safe to play, the school must ensure timely review of all pre-participation forms that indicate a history of head injury by either the school nurse or the school physician.

Medical Review of Pre-Participation Form
At the start of each sports season, the Athletic Director will review all pre-participation forms and forward to the school nurse those forms indicating a history of head injury. The school nurse will be responsible for:

- reviewing or having the school physician review completed pre-participation forms
- addressing any questions raised by the Athletic Director or Athletic Trainer
- communicating with the coach regarding the student’s concussion history and discussing concerns
- following up with parents and students as needed prior to the student's participation in extracurricular athletic activities.
SECTION 6: MEDICAL/NURSING REVIEW OF REPORTS OF HEAD INJURY DURING THE SEASON

Regulation:
105CMR 201.006(A)(6): Procedure for the school to obtain and ensure timely medical or nursing review of a Department Report of a head Injury During Sports Season Form, or school-based equivalent, in the event of a head injury or suspected concussion that takes place during the extracurricular activity season.

Overview:
In order to assure that students who experience concussion/head injury are safe to play, the school must ensure timely review of all report of head injury forms by either the school nurse or the school physician. The Franklin Public Schools utilizes the FPS Report of Head Injury During Sports Season form to document all reported head injuries. This includes incidents which take place during extracurricular activities as well as outside of school.

Medical/Nursing Review:
- The following procedures will be followed when an athlete receives a head injury:
  - Athlete is removed from the contest or practice.
  - The licensed athletic trainer conducts a Standardized Assessment of Concussion and completes the “Report of Head Injury During Sports Season Form”.
  - If certified athletic trainer is not available, coach completes the “Report of Head Injury During Sports Season Form”
- The licensed athletic trainer/coach will give “Report of Head Injury During Sports Season Form” to Director of Athletics.
- Director of Athletics or Athletic Trainer will notify school nurse and/or school physician (if appropriate) who will review the Report of Head Injury form.
- School nurse will contact athlete’s teachers and guidance counselor.

See Appendix IV for copy of FPS Report of Head Injury During Sports Season forms.
SECTION 7: Procedure for Reporting Head Injuries to School Nurse and/or Certified Athletic Trainer

Regulation:
105 CMR 201.006(A)(7): Procedure for reporting head injuries or suspected concussions sustained during extracurricular athletic activities to the school nurse and licensed athletic trainer, if on staff.

Overview:
Because medical evaluation and ongoing monitoring of a student’s recovery from concussion is so important for a student’s safety, The Franklin Public Schools have adopted the following procedures for assuring that head injuries or concussion sustained during play or practice are reported to the school nurse and licensed athletic trainer.

Reporting Head Injury
When a student athlete obtains a head injury during an extracurricular athletic activity, the following steps must be followed:
- Physician or licensed athletic trainer evaluates the student.
- Coach completes Report of Head Injury Form and sends copy to the athletic trainer
- The athletic trainer informs athletic director and sends a copy of the Report of Head Injury Form to the school nurse.
- School nurse notifies, guidance, and student’s teachers of injury and any modifications ordered by MD.
- Coaches assure that student athlete adheres to the protocol.
- Physician notifies school nurse of student’s progression.
- School nurse notifies all necessary staff of progression, recovery and return-to-play.
SECTION 8: REMOVING ATHLETES FROM PLAY AND MEDICAL EVALUATION

Regulation:
105 CMR 201.006(A)(8): Procedure for identifying a head injury or suspected concussion, removing an athlete from practice or competition and referring for medical evaluation.

Overview:
Because continuing athletic activity after sustaining a concussion can be dangerous, and can result in both short and long term consequences up to and including death, removing an athlete from play who has sustained a head injury or suspected concussion is crucial. Diagnosing a concussion on the sidelines is not safe or acceptable practice, nor is returning an athlete to play a few minutes after a blow to the head if symptoms appear to “resolve”. Research has demonstrated that what have previously been considered “dings” or “bell ringers” can be serious events. The law and the regulations require that players who have symptoms consistent with a suspected concussion must be removed from play, and may not return to play or practice that same day.

Although the regulations specifically assign responsibility to coaches and certified athletic trainers to remove athletes from play for head injuries or suspected concussions, the Department of Public Health expects that there will be a shared understanding of the symptoms and risks of concussion among athletes and other adults who are present during practice or competition. If there is any disagreement among responsible personnel regarding whether the student has sustained a head injury or has symptoms suggestive of a concussion, the student should be removed from play, as that is the safest option for the student. Following a concussion, communication between families, educational personnel, athletic staff and health care providers is crucial to facilitate a student’s healthy return to school and physical activity following a concussion.

Identifying Head Injury or Suspected Head Injury and Removing from Play
- In the event that a student athlete receives a head injury, or is suspected of having a head injury, the student will be removed from play and will not be returned to play or practice that day. The coach should report the head injury to the licensed athletic trainer or school nurse/physician as soon as possible, for medical assessment and management and for coordination of home instructions and follow-up care. The licensed athletic trainer or school nurse/physician will be responsible for contacting the athlete’s parents and providing follow-up instructions. If the Athlete is injured at an away event or if the licensed athletic trainer is unavailable, the coaching staff are responsible for notifying the athlete’s parents of the injury and, if warranted, call for emergency care. Coaches should seek assistance from the host site athletic trainer, coach or school nurse if at an away contest.

- If the athlete is able to be sent home (rather than directly to MD):
  a) the coach or athletic trainer will ensure that the athlete will be with a responsible adult, who is capable of monitoring the athlete and understanding the home care instructions, before allowing the athlete to go home; b) the coach or athletic trainer will continue efforts to reach the parents; c) if there is any question about the status of the athlete, or if the athlete is not able to be monitored appropriately, the athlete will be referred to the emergency department for evaluation. A coach or athletic trainer will accompany the athlete and remain with the athlete until the parents arrive and d) athletes with suspected head injuries will not be permitted to drive home.
SECTION 9: MEDICAL CLEARANCE FOR RETURN TO PLAY

Regulation:
105 CMR 201.006(A)(9) The protocol for medical clearance for return to play after a concussion that at a minimum complies with 105 CMR.201.011.
105 CMR 201.011: Each student who is removed from practice or competition for a head injury or suspected concussion, or loses consciousness, even briefly, or exhibits signs and symptoms of a concussion, shall obtain and present to the Athletic Director, unless another person is specified in school policy or procedure, a Department Post Sports-Related Head Injury Medical Clearance and Authorization Form (Medical Clearance and Authorization Form), or school-based equivalent, prior to resuming the extracurricular athletic activity. This form must be completed by a physician or one of the individuals as authorized by 105 CMR 201.011(A). The ultimate return to play decision is a medical decision that may involve a multidisciplinary approach, including consultation with parents, the school nurse and teachers as appropriate.
(A) Only the following individuals may authorize a student to return to play:
(1) A duly licensed physician;
(2) A duly licensed athletic trainer in consultation with a licensed physician;
(3) A duly licensed nurse practitioner in consultation with a licensed physician;
(4) A duly licensed neuropsychologist in coordination with the physician managing the student's recovery.
(5) A duly licensed physician's assistant under the supervision of a licensed physician
(B) Physicians, nurse practitioners, physician assistants, licensed athletic trainers and neuropsychologists providing medical clearance for return to play shall verify that they have received Department-approved training in post-traumatic head injury assessment and management or have received equivalent training as part of their licensure or continuing education.

Overview:
If an athlete is removed from play for a suspected concussion, he or she must be medically cleared and evaluated before returning to play/practice. If the student was diagnosed with a concussion, the medical clearance can only be provided after he or she has completed a graduated return to play plan indicating they are ready to resume physical activity. To provide this clearance, the Franklin Public Schools utilizes a Sports Related Head Injury Medical Clearance and Authorization form that is in compliance with MDPH requirements maybe found in Appendix V.

Students may not return to play/practice until medical clearance is obtained as documented on the Sports Related Head Injury Medical Clearance and Authorization form. For more information about graduated return to play plans, see Section 10 of this document. Of note, the athlete must be completely symptom free for twenty-four hours from the reporting of the injury before beginning a graduated return to play process.

Return to Play:
All students at Franklin Public Schools must be cleared to return to play/practice by a licensed medical professional (physician, NP in consultation with a physician, CAT in consultation with a physician or neuropsychologist in coordination with the physician managing the student's recovery, or physician’s assistant under the supervision of a licensed physician) after the graduated return to play has been completed. (See details about graduated return to play practices below under Section 10). It is recommended that this medical professional have familiarity with concussion diagnosis and management in order to determine how serious the concussion is and when it is safe for the student to return to normal activities including physical activity and school (concentration and learning activities). Sports activities include physical education class as well as sports practices, games and extracurricular athletic activities:
• The student should be completely symptom free at rest and with physical (sprints, non-contact aerobic activity) and cognitive exertion (school work) before beginning the graduated return to play process.
• Return to play should occur gradually (see below).
• Students should be monitored for symptoms and cognitive function during each stage of exertion.
• Students should only progress to the next level of exertion if they are asymptomatic at the current level.

- Medical clearance will be provided using the form found in Appendix V of these policies and also available on the Franklin Public School’s website. It is recommended that the student take this form to the medical professional at the time of exam as other forms will not be accepted. These forms must be provided to the coach or athletic trainer and will be shared with the school nurse for review with a copy kept in the student’s medical record.
- The Franklin Public School’s utilize a passing ImPACT test score as part of its return to play guidelines
- In a situation in which a student has been medically cleared but school staff have observed continuing symptoms, the school will make the final decision regarding a student’s to return to play. If this situation arises, the Franklin Public School’s staff should communicate to the physician or health care provider who provided the clearance regarding the symptoms school staff have observed to allow for reevaluation by the health care provider. It is possible that the health care provider was not aware of the student’s symptoms when the provider gave the clearance. If the athlete still has symptoms, the athlete should NOT return to play.
SECTION 10: DEVELOPMENT AND IMPLEMENTATION OF POST CONCUSSION GRADUATED REENTRY PLANS

Regulation:
105 CMR 201.006: Procedure for the development and implementation of post-concussion graduated reentry plans to school and academic activities, if indicated, by persons specified in CMR 201.010(E)(1). 105 CMR 201.010(E) Each student who is removed from practice or competition and subsequently diagnosed with a concussion shall have a written graduated reentry plan for return to full academic and extracurricular athletic activities. (1) The plan shall be developed by the student's teachers, the student's guidance counselor, school nurse, licensed athletic trainer if on staff, neuropsychologist if available or involved, parent, members of the building-based student support and assistance team or individualized education program team as appropriate and in consultation with the student's primary care provider or the physician who made the diagnosis or who is managing the student's recovery. (2) The written plan shall include instructions for students, parents and school personnel, addressing but not be limited to: (a) Physical and cognitive rest as appropriate; (b) Graduated return to extracurricular athletic activities and classroom studies as appropriate, including accommodations or modifications as needed; (c) Estimated time intervals for resumption of activities; (d) Frequency of assessments, as appropriate, by the school nurse, school physician, team physician, licensed athletic trainer if on staff, or neuropsychologist if available until full return to classroom activities and extracurricular athletic activities are authorized; and (e) A plan for communication and coordination between and among school personnel and between the school, the parent, and the student's primary care provider or the physician who made the diagnosis or who is managing the student's recovery. (3) The student diagnosed with a concussion must be completely symptom free at rest in order to begin graduated reentry to extracurricular athletic activities. The student must be symptom free at rest, during exertion and with cognitive activity in order to complete the graduated re-entry plan and be medically cleared to play under 105 CMR 201.011.

Overview:
If a student athlete has been diagnosed with a concussion, the regulations require that a graduated reentry plan, for both academics and sports, be developed and implemented. Recovery from a concussion requires rest, both physical and cognitive, in order for the brain to heal. This means that during the recovery period, it is as important for a concussed student to refrain from studying, working on a computer or playing video games, as it is for the student to refrain from participating in athletics. A graduated reentry plan, to either academics or sports, should not begin until a student is symptom free at rest. A student should be symptom free at each stage of the plan before graduating to the next phase. The Franklin Public School’s utilize a passing ImPACT test score as part of its return to play guidelines and post-concussion graduated re-entry plans.

Graduated reentry plans require a collaborative approach among health care providers, teachers, guidance counselors, the athletic staff and the athlete and her/his parent or guardian. Graduated reentry plans include gradual steps from physical and cognitive rest, gradual return to physical and academic activities, estimated time intervals for resumption of activities, frequent assessments, and a communication plan among school staff, parents, and health care providers. The injured student will recover more quickly with rest, not only from physical exertion and athletic activity, but also from the cognitive demands of academic work.

Graduated Reentry Plan:
Franklin Public Schools requires that all students returning to school and athletics after a concussion have a written plan for reentry. School staff, such as teachers, school nurses, counselors, administrators, speech-language pathologists, coaches and others should work together to develop and implement this plan in coordination with the student, their parent/guardian and the primary care provider.

Graduated return to academic plans are based on the stages of recovery framework that takes a student from rest, to gradual return to full participation in academic activities.
Stages of Recovery:

The stages of recovery are a framework designed through a collaborative effort by local health care professionals. The purpose of this framework is to create common language that will help guide students, families, school personnel and health professionals through the recuperation process. Placement in stages is based on assessment of the student’s medical condition by a licensed medical professional and accompanied by written orders.

Red Stage (Usually 2 – 4 days, but could last weeks)
1) Rest
2) Students typically do not attend school

Orange Stage
1) Rest
2) Attend school half to full days
3) Avoid school bus and heavy backpacks
4) Work with designated educational personnel regarding school accommodations
5) No tests in school
6) No sports, band, chorus, physical education or outdoor recess

Yellow Stage
1) Attend school full-time if possible
2) Students and families work with teachers regarding homework deadlines (complete as much as possible)
3) See school nurse for pain management and/or rest if needed
4) Limit one quiz/test per day (untimed testing is recommended)
5) Work in 15 minute blocks
6) No sports
7) Licensed medical professional will make decisions regarding band, chorus, physical education and outdoor recess (elementary level) based on medical assessment

Green Stage
1) Attend school full time
2) Resume normal activities
3) Resume sports once school work is back on track, student is symptom-free, and has been cleared by a licensed medical professional
Graduated return to athletic plans will begin only after a student has returned to full participation in academics and is completely symptom free at rest.

**Return to Play Schedule:**
When a student athlete is completely symptom free at rest and has the approval of a medical professional, she/he may begin a graduated return to play protocol. The return to play schedule for the student should proceed as follows and should be monitored by the athletic trainer.

Step 1: Light exercise, including walking or riding an exercise bike. No weight-lifting.
Step 2: Aerobic exercise such as running in the gym or on the field. No helmet or other equipment.
Step 3: Non-contact training drills in full equipment. Weight-training can begin.
Step 4: Full contact controlled training followed by practice or training.
Step 5: Full contact game play.

The written reentry plans will be signed by the student, their parent/guardian, the school nurse, the lead teacher/guidance counselor, athletic trainer and coach so that all parties are in agreement as to the plan for reentry. Frequent or periodic assessments by the school personnel including the nurse, athletic trainer, school physician or team physician as appropriate may be necessary until full return to classroom activities and extracurricular athletic activities are authorized by medical staff. A copy of the plan will be kept in the student’s medical record and the athletic office.
SECTION 11: PROVIDING INFORMATION, FORMS AND MATERIALS TO PARENTS AND ATHLETES

11a) ANNUAL TRAINING REQUIREMENT:

Overview:
The MDPH regulations require that parents or legal guardians and students who participate in extracurricular athletic activity, as well as a variety of school personnel, receive MDPH-approved concussion training annually. Franklin Public Schools schedules an orientation meeting for any new or incoming athletes two times a year, one in June and one in January. The district’s head injury policy and procedures relative to head injuries and concussions is discussed at that time.

- The Franklin Public Schools offers one of the following on-line trainings: the Centers for Disease Control's (CDC) Heads Up Concussion training or the National Federation of State High School Association’s (NFHS) Concussion in Sports – What You Need to Know training. Completion of one of these trainings is required prior to participation in any sport.
- The district also makes available DPH approved written training materials to meet the training requirement. The versions for parents and students are available in English or other primary language of the home. The district requires and maintains written acknowledgment/documentation of participation in any one of the on-line courses or meetings.

Annual Training Requirement:
- Parents/guardians and students who plan to participate in any athletic program at Franklin Public Schools must also take a free on-line course. Two free on-line courses are available and contain all the information required by the law. The first is available through the National Federation of High School Coaches. You will need to click the “order here” button and complete a brief information form to register. At the end of the course, you will receive a completion receipt which should be provided to the coach or athletic director as documentation. The entire course, including registration, can be completed in less than 30 minutes.
- The second on-line course is available through the Centers Disease Control at:
  www.cdc.gov/Concussion

11b) PROCEDURE FOR THE SCHOOL TO NOTIFY PARENTS WHEN AN ATHLETE HAS BEEN REMOVED FROM PLAY FOR A HEAD INJURY OR SUSPECTED CONCUSSION:

Overview:
The Department of Public Health intends that all student athletes and adults who are on the field during practice or competition will be educated with the same basic information about the signs, symptoms and risks of concussion. Communication between families, athletic staff and health care providers is crucial to facilitate a student’s prompt removal from play and referral for medical care and
full recovery following a concussion. The Franklin Public Schools recognize and emphasize the importance of coordination and communication among athletic staff, parents and medical providers.

**Procedure to Notify Parents about Athlete Removal from Play:**

- The athletic trainer, coach, school nurse and/or volunteers (EMS, sports physicians) should promptly inform the athlete’s parents or guardians about the possible concussion during the day of the injury via telephone and/or email and give them the fact sheet on concussions. Give the parents the “Report of Head Injury During Sports Season” (or school-based equivalent) and explain to them they will need to complete it and return it to the school. Inform the parents that the student will have to be medically cleared by a medical professional before returning to play and the Post-Sports-Related Head Injury Medical Clearance and Authorization Form will need to be completed and returned to the school before the student can resume play.

**11c) PROTOCOL FOR PARENTS/STUDENTS TO OBTAIN MEDICAL CLEARANCE FOR RETURN TO PLAY AND ACADEMICS AFTER A DIAGNOSED CONCUSSION:** (see also # 8 above)

**Overview:**
The annual safety training for parents/guardians and athletes who participate in any extracurricular athletic activity, as well as school policies should inform them of the school’s protocol on obtaining medical clearance for return to play. The Franklin Public Schools provide parents/guardians and athletes with information about medical clearance as follows.

The Franklin Public Schools provides this information in the following manner:

- Medical clearance materials and forms posted to school’s website;
- Training materials and forms included in student, parent and/or athletic handbook;
- Distributing this information at bi-annual meetings;

**Return to Play Protocol:**
At the Franklin Public Schools, parents and students are oriented about the protocol on obtaining medical clearance for return to play after a diagnosed concussion. In addition, our athletic handbook under the section for “Sports Concussion” includes our policies regarding sports concussion including obtaining medical clearance after a concussion. The website for the school at [http://franklinhigh.vt-s.net](http://franklinhigh.vt-s.net) under the Athletic Department tab has a page on sports concussion that also details these protocols. Finally, parents and students can always call the athletic department office at 508-541-2100 X 3040 or the school nurse office at 508-541-2100 X 3080 to get further clarification or ask questions. No student will be allowed to return to play athletic activities until the medical clearance form is signed by authorized medical professional, submitted and reviewed by the school nurse and athletic trainer.
11d) PARENT’S RESPONSIBILITY FOR COMPLETION OF THE PRE-PARTICIPATION FORM OR SCHOOL-BASED EQUIVALENT:

**Overview:**
The athletic director, coach, school nurse, athletic trainer or other designated school official are responsible for informing parents and students that pre-participation form (or school-based equivalent) needs to be completed by the student and parent/guardian and returned to the athletic director, coach, school nurse, athletic trainer or other designated school official prior to the start of each sports season a student plans to participate. The Franklin Public Schools educates students and parent/guardians about this requirement to complete the Pre-participation form and providing this form as follows:

- Medical clearance materials and forms posted to school’s website;
- Training materials and forms included in student, parent and/or athletic handbook;
- Distributing this information at bi-annual meetings;
- MDPH Pre-Participation Head Injury/Concussion Reporting Form can be located at [www.mass.gov/dph/injury](http://www.mass.gov/dph/injury) and click on “Sports-related Concussion and Head Injury”.

**Parents’ Responsibility for Pre-Participation:**
- At Franklin Public School’s bi-annual meetings, parents and students are oriented about the requirement to submit the pre-participation form or school-based equivalent, signed by both student and parent, which provides a comprehensive history with up-to-date information relative to concussion history. It is the parent’s responsibility to tell all the student’s coaches, school nurse and athletic trainer if the student has ever had a concussion via this form. In addition, our athletic handbook under the section for “Sports Concussion” includes our policies regarding sports concussion including the requirement to complete the pre-participation form by student and parent at the start of every sports season. The website for the school at [http://franklinhigh.vt-s.net](http://franklinhigh.vt-s.net) under the Athletic Department tab has a page on sports concussion that also details these protocols. Finally, parents and students can always call the athletic department office at 508-541-2100 X 3040 or the school nurse office at 508-541-2100 X 3080 to get further clarification or ask questions. These forms should be submitted to the athletic department office which copies and reviews them and then forwards them to the School Nurse Office for review. At the beginning of every sports season, no student will be allowed to participate in athletic activities until the pre-participation form is signed, submitted by parent and student and reviewed by designated staff annually.

11e) PARENT’S RESPONSIBILITY FOR COMPLETION OF THE REPORT OF A HEAD INJURY FORM, OR SCHOOL-BASED EQUIVALENT

**Overview:**
The Franklin Public Schools educates parent/guardians about the requirement to complete the Report of Head Injury During Sports Season Form as follows:

- The School Athletic Director and Athletic Department track these forms and contact parents if they have not yet been returned;
- Medical clearance materials and forms posted to school’s website;
Parent Responsibility for Head Injury Reporting:

- At Franklin Public School’s bi-annual meetings, parents and students are oriented about the requirement to submit all forms including the Report of Head Injury Form (or school-based equivalent) signed by parent if their child has a head injury related to athletic activities. In addition our athletic handbook under the section for “Sports Concussion” includes our policies regarding sports concussion including the requirement to complete and sign. The website for the school at http://franklinhigh.vt-s.net under the Athletic Department tab has a page on sports concussion that also details these protocols. Finally, parents and students can always call the athletic department office at 508-541-2100 X 3040 or the school nurse office at 508-541-2100 X 3080 to get further clarification or ask questions. These forms should be submitted to the athletic department office which copies and reviews them and then forwards them to the School Nurse Office for review. At the beginning of every sports season, no student will be allowed to participate in athletic activities until all required forms including the report of head injury form has been signed, submitted by parent and reviewed by school nursing and athletic department staff.
SECTION 12: INCLUSION OF SPORTS-RELATED HEAD INJURY POLICY IN THE STUDENT AND PARENT HANDBOOK

Regulation:

105 CMR 201.006(A)(12): Inclusion in the student and parent handbooks of information regarding the sports-related head injury policy and how to obtain the policy

Overview:
The Department of Public Health intends that all student athletes and adults who are on the field during practice or competition will be educated with the same basic information about the signs, symptoms and risks of concussion and required forms. Including this information in the student and parent handbooks will assist parents and students in becoming educated about the importance of the school’s sports-related head injury policy.

Handbook Language:

- State Concussion Law Requirements: The Commonwealth of Massachusetts Executive Office of Health and Human Services requires that all high schools subject to the Massachusetts Interscholastic Athletic Association (MIAA) rules adhere to the following law:

  Student athletes and their parents, coaches, athletic directors, school nurses, and physicians must learn about the consequences of head injuries and concussions through training programs and written materials. The law requires that athletes and their parents inform their coaches about prior head injuries at the beginning of the season. If a student athlete becomes unconscious, or is suspected of having a concussion, during a game or practice, the law now mandates taking the student out of play or practice, and requires written certification from a licensed medical professional for “return to play.”

  Parents and student-athletes who plan to participate in any sports program at the Franklin Public Schools must also take one free online course about concussions per school year. Two free online courses have been made available and contain all the information required by the law.

  The first online course option is offered through the National Federation of High School Coaches. You will need to click the “order here” button and complete a brief information form to register. At the end of the course, you will receive a completion receipt. The entire course, including registration, can be completed in less than 30 minutes: http://www.nfhslearn.com/electiveDetail.aspx?courseID=15000

  The second online course option is offered through the Centers for Disease Control and Prevention at: http://www.cdc.gov/concussion/HeadsUp/online_training.html
SECTION 13: COMMUNICATING WITH PARENTS WITH LIMITED ENGLISH PROFICIENCY

Regulation:
105 CMR 201.006(A)(13): Procedure for communicating with parents with limited English proficiency

Communicating with Parents:

Because of limited English skills, some parents may be unable to communicate with school personnel and may feel isolated from the school community. Franklin Public Schools make every attempt to communicate effectively with Parents with limited English proficiency. Franklin Public Schools, which serves a diverse population, has a website with a Yahoo Babelfish translator so that all website materials can be translated into many languages. All sports-injury related materials including the on-line training classes, the CDC fact sheets on concussions and the required forms are available at Franklin High School’s website at http://franklinhigh.vt-s.net under the Athletic Department tab. Franklin Public Schools will translate other materials as requested. In the event a student receives a concussion or is suspected of having a concussion Franklin Public School’s Athletic Director’s office should notify the parent in the appropriate language. Interpreters are available by contacting the Principal’s office.
SECTION 14: OUTREACH TO PARENTS FOR FORM AND TRAINING COMPLETION

Regulation:
105 CMR 201.006(A)(14): Procedure for outreach to parents who do not return completed forms required for students to participate in extracurricular sports and for how to handle situations where a student verifies completion of the annual training requirement but a parent has not

Outreach to Parents:
- Student Athletes at Franklin Public Schools will not be permitted to participate in extracurricular sports until both the parent and student have completed and returned the signed Pre-Participation Head Injury/Concussion Reporting Form (or school-based equivalent) for Extracurricular Activities forms before the start of every sports season. In the event the school has not received the Pre-Participation Head Injury/Concussion Reporting Form or other required forms, including documentation of an annual physical examination and documentation that both the student athlete and their parent/guardian have completed the required annual training, Franklin Public Schools will make three attempts to contact parent using the schools typical communication methods to parents (email, snail mail, telephone, etc.). The student athlete will not be allowed to play or practice until the appropriate required signed and completed forms are returned to the Athletic Department.
SECTION 15: SHARING CONCUSSION-RELATED HEALTH INFORMATION

Regulation:
105 CMR 201.006(A)(15): Procedure for sharing information concerning and athlete’s history of head injury and concussion, recuperation, reentry plan, and authorization to return to play and academic activities on a need to know basis consistent with requirements of 105 CMR 201.000 and applicable federal and state law including but not limited to the Massachusetts Student Records Regulations, 603 CMR 23.00, and the Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99.

Overview:
Generally speaking, a patient’s health information is confidential. There are multiple state and federal regulations governing sharing health information. The Franklin Public Schools has developed policies that are consistent with these regulations and school personnel are cognizant of the confidentiality of health information. For a detailed description of confidentiality, see Chapter 2 MDPH Comprehensive School Health Manual, http://www.maclearinghouse.com/SchoolHealthManualSite/schoolhealthmanual.htm.

Sharing Information:
Informal collaboration occurs on a temporary, as-needed basis for information exchange, as when the school nurse or athletic trainer informs (while adhering to protocols for confidentiality) the physical education teacher that a particular student may not participate in athletic activities because of a recent injury. There may be circumstances in which there is a need to share information in the student health record with authorized school personnel — either to enhance the educational progress of the student or protect his/her safety or well-being. For example, staff may need to be alerted to signs or symptoms of a medical problem on a need to know basis and offered a course of action. This type of disclosure should be made only to those authorized school personnel who work directly with the student in an instructive (academic or athletic), administrative, or diagnostic capacity. Finally, authorized school personnel should be instructed not to re-disclose the information.

If there is any question about the sensitivity of the information, the school nurse/athletic trainer should seek the permission of the parent/guardian and student, if appropriate, prior to disclosure to authorized school personnel. Ultimately, however, federal regulations permit information in the student health record to be seen by authorized school personnel on a need to know basis, and the

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2 Consistent with requirements of 105 CMR 201.000 and applicable federal and state law including but not limited to the Massachusetts Student Records Regulations, 603 CMR 23.00, and the Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99.

3 603 CMR 23.07(3): “Subject to 603 CMR 23.00 authorized school personnel shall have access to the student records of student to whom they are providing services, when such access is required in the performance of their official duties.” 603 CMR 23.07(4)(e): “A school may disclose information regarding a student to appropriate parties in connection with a health or safety emergency if knowledge of the information is necessary to protect the health or safety of the student or other individuals…” 603 CMR 23.07(4)(h): School health personnel and local and state health department personnel shall have access to student health records…when such access is required in the performance of official duties, without the consent of the eligible student or parent.”

4 Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99.31(a) “An educational agency or institution may disclose personally identifiable information from an education record of a student without the consent required by section 99.30 if the disclosure meets one or more of the following conditions (1)(i)(A) The disclosure is to other school officials, including teachers, within the agency or institution whom the agency or institution has determined to have legitimate educational interests….(1)(B)(3)(ii) An educational agency or institution must use reasonable methods to ensure that school officials obtain access to only those education records in which they have legitimate educational interests…”
basis for such sharing seems even more compelling when necessary to protect the well-being or safety of the student.\textsuperscript{5} See Chapter 2 Comprehensive School Health Manual (http://www.maclearinghouse.com/SchoolHealthManualSite/schoolhealthmanual.htm) for further discussion of this issue.

There may be times when a school nurse or athletic trainer has the legal obligation to disclose health or related information to protect a student’s health or safety. Public policy requires the protection of a patient’s right to privacy by medical professionals, unless there is an immediate threat or serious harm to the student or others. \textsuperscript{6}

\textsuperscript{5} Massachusetts Department of Public Health Comprehensive School Health Manual, 2007, p. 2-36
**SECTION 16 A & B: REQUIREMENTS THAT COACHES, ATHLETIC TRAINERS, TRainers AND Volunteers a) TEACH STRATEGIES THAT MINIMIZE SPORTS-RELATED HEAD INJURY AND B) PROHIBIT DANGEROUS PLAY**

*Regulation:*
105 CMR 201.006(A)(16) Instructions to coaches, licensed athletic trainers, trainers and volunteers a) to teach form, techniques, and skills and promote protective equipment use to minimize sports-related head injury; and b) to prohibit athletes from engaging in any unreasonably dangerous athletic technique

105 CMR 201.012(C)(6): The Athletic Director shall be responsible for “Ensuring that athletes are prohibited from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon…”

105 CMR 201.013(A)(6) & (7): Coaches shall be responsible for (6) Teaching techniques aimed at minimizing sports-related head injury; (7) Discouraging and prohibiting athletes from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon…”

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**Teaching Form & Techniques:**

Coaches, Athletic Directors and Athletic Trainers of Franklin Public Schools should:

- Insist that safety comes first; develop, teach, implement and enforce safety rules;
- Promote good officiating of the existing rules;
- Emphasize to athletes and parents that playing with a concussion is dangerous;
- Promote safe use of equipment *all year*; require that sports participants use the right protective equipment during all practices and games and that all equipment, particularly helmets, are properly fitted;
- Maintain and improve the surfaces of playing fields; routinely conduct hazard assessments of the playground; walk the field before each practice or game to check for divots, uneven surfaces, loose goal posts or other conditions that could affect play; Ensure that spaces and facilities for physical activity meet or exceed recommended safety standards for design, installation and maintenance.
- Check all equipment to ensure they are up to manufacturer standards of quality and care and do not exceed expiration date.
- Make sure athletes wear the right protective equipment for their activity (such as helmets, padding, shin guards, mouth protectors and eye and mouth guards). Protective equipment should fit properly, be well maintained and certified, not be expired and be worn consistently and correctly;
- Discourage others from pressuring injured athletes to play.

**Prohibiting Athletes from Dangerous Technique:**

Athletic Directors and coaches of Franklin Public Schools enforce rules prohibiting dangerous moves (e.g., “spearing” or “horse collaring”, clothes-lining or helmet to helmet contact in football, or free-

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7 This section has been taken from a variety of sources including NFHS Brochure, CDC, Heads Up Concussion in Youth Sports, Massachusetts Department of Public Health School Nurse Manual, National Athletic Trainers’ Association (NATA) and Washington Interscholastic Athletic Association (WIAA)

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falling flips or swan dives from any type of toss, partner stunt or pyramid in cheerleading). In addition, coaches ensure that student athletes learn proper checking/tackling techniques that are safe and minimize the risk of head injury. Athletic department staff encourage students to follow the rules of play and to practice good sportsmanship at all times.
SECTION 17: PENALTIES

Regulation:
105 CMR 201.006(A)(17): Penalties, including but not limited to personnel sanctions and forfeiture of games, for failure to comply with provisions of the school district’s of school’s policy

Overview:
Each school district should delineate what penalties they will have in place for failure to comply with the school or district’s policy. This should include when the games should be forfeited (players do not have current physical examinations, failure of a coach to remove a play with a suspected concussion from the game, coaches’ unwillingness to comply with any aspect of the regulations) and when other penalties will be invoked.

Penalties:
The Franklin Public Schools take the safety of student athletes seriously. All members of the school staff are expected to follow these policies and protocols to support the health and safety of student athletes. The underlying philosophy of these policies is “when in doubt, sit them out”. Failure to comply with the letter or spirit of these policies could result in progressive discipline for staff and/or forfeiture of games. If students or parents have concerns that the policies are being violated, they should contact the Athletic Director or Principal and also place their complaint in writing with a request for resolution.
Appendices for FPS Procedures and Protocols on Student Head Injuries and Concussions in Extracurricular Athletics

APPENDIX I: Fact Sheet on Signs and Symptoms of Concussion......................... p. 32
APPENDIX II: Approved Training Materials for Sports-related Concussion........ p. 33
APPENDIX III: Franklin Public School’s Athletic Department Registration and Pre-Participation Head Injury/Concussion Reporting Form........................................ p. 35
APPENDIX IV: Franklin Public School’s Report of Head Injury Form................. p. 38
APPENDIX V: Franklin Public School’s Post Sports-Related Head Injury Medical Clearance and Authorization Form................................................................. p. 40
APPENDIX VI: Massachusetts Department of Public Health Regulations 105 CMR 201.000: Head Injuries and Concussions in Extracurricular Athletic Activities... p. 42
Appendix VIII: MDPH Guidance on 504 or IEP Plans for Students Returning to Academic Work................................................................. p. 54
Appendix IX: Additional Resources................................................................. p. 56
Appendix I: Fact Sheet on Signs and Symptoms of Concussion

CDC Fact Sheet: Heads Up Concussion in Youth Sports

SYMPTOMS OF A CONCUSSION:

Signs Observed by Coaching Staff

If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs and symptoms of a concussion:

• Appears dazed or stunned
• Is confused about assignment or position
• Forgets sports play
• Is unsure of game, score, or opponent
• Moves clumsily
• Answers questions slowly
• Loses consciousness (even briefly)
• Shows behavior or personality changes
• Can't recall events prior to hit or fall
• Can't recall events after hit or fall

Symptoms Reported by Athlete

• Headache or "pressure" in head
• Nausea or vomiting
• Balance problems or dizziness
• Double or blurry vision
• Sensitivity to light
• Sensitivity to noise
• Feeling sluggish, hazy, foggy, or groggy
• Concentration or memory problems
• Confusion
• Does not "feel right"

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Appendix II: Approved Training Materials for Sports-related Concussion:

**Centers for Disease Control (CDC):**

The on-line courses can be found at:
http://www.cdc.gov/concussion/HeadsUp/online_training.html

The written materials can be found at:
Student athletes:
Parents:
Coaches:
School nurses:
http://www.cdc.gov/concussion/HeadsUp/schools.html

CDC Online video clip:
http://www.cdc.gov/ncipc/tbi/Coaches_Tool_Kit.htm#Video

This tool kit is designed for athletic staff (coaches, athletic directors, and trainers) as well as parents/guardians and school health personnel and is meant to “provide a commonsense approach to help raise awareness and

www.cdc.gov/ConcussionInYouthSports

For more detailed information on concussion and traumatic brain injury, visit:
http://www.cdc.gov/injury

CDC Fact Sheets In Spanish:

**Massachusetts Department of Public Health (MDPH) Materials:**

Recent Regulations on Head Injuries and Concussions in Extracurricular Athletic Activities

In response to recent legislation on sports-related head injuries, the Department of Public Health developed regulations that were promulgated on June 24, 2010.

Please see links below to view these regulations. There are also links to forms that schools may use for documenting a student athlete’s concussion history prior to participation in extracurricular athletic activities and during a sports season as well as forms for use by those who clear students to return to play. Additional links are provided to those training programs that have been approved by the Department to meet the requirements of the regulations.

- [105 CMR 201: Head Injuries and Concussions in Extracurricular Athletic Activities](#)
- [Pre-participation Head Injury/Concussion Reporting Form For Extracurricular Activities (PDF)](#)

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• Report of a Head Injury During Sports Season Form (PDF)  |  
• Post Sports-Related Head Injury Medical Clearance and Authorization Form (PDF)  |  

**MDPH Approved Training:**
The training programs listed below meet the requirements of the regulations. They are on line and available free of charge.

• Center for Disease Control and Prevention Heads Up Concussion in Youth Sports On-Line Training Program
• National Federation of State High School Associations Concussion in Sports – What you Need to Know

**Additional Materials from MDPH:**

• From the Commissioner (PDF)  |  
• Sports Concussion Fact Sheet (PDF)  |  
• Sports-related Head Injury Regulations Frequently Asked Questions  |  

**Other Training Resources:**
The following represents a menu of FREE and credible materials/resources for administrators, coaches, parents and student athletes:

**NATIONAL FEDERATION** – [www.nfhslearn.com](http://www.nfhslearn.com)

• National Federation of State High School Associations Concussion in Sports – What you Need to Know
• Suggested Guidelines for Management of Concussion in Sports brochure
• Concussions – NFHS Sports Medicine Handbook
APPENDIX III: Franklin Public School’s Athletic Department Registration and Pre-Participation Head Injury/Concussion Reporting Form (on following page)
In order for an athlete to be cleared for participation on any FHS team they must complete this form, provide a copy of a valid physical examination (see below), complete the medical history section (including head injury information) and pay the user fee.
PRE-PARTICIPATION HEAD INJURY/CONCUSSION REPORTING FORM
FOR EXTRACURRICULAR ACTIVITIES

Has student ever experienced a traumatic head injury (a blow to the head)?
Yes_________ No_________
If yes, when? Dates (month/year): __________________________________________

Has student ever received medical attention for a head injury? Yes_______ No_______
If yes, when? Dates (month/year): __________________________________________
If yes, please describe the circumstances:

Was student diagnosed with a concussion? Yes_______ No_______
If yes, when? Dates (month/year): __________________________________________
Duration of Symptoms (such as headache, difficulty concentrating, fatigue) for most recent concussion: ____________

OTHER MEDICAL HISTORY
ACCIDENTS: __________________________
OPERATIONS: _______________________
ALLERGIES: _______________________
OTHER: ____________________________
EPIPEN: ___Yes   ___No
INHALER: ___Yes ___No
Emergency Contact__________________ Phone #________________

I HAVE READ AND UNDERSTAND
1. The standard eligibility rules governing the Commonwealth of Massachusetts Secondary Schools,
2. Loyalty to the high school team and non-school team competition rule and Hazing Law, Chapter 536,
3. The regulations of the Franklin High School interscholastic program as outlined in the Student Handbook including but not limited to, the Alcohol/Drug Policy, MIAA rules and academic eligibility.
4. Athletes are responsible for all issued equipment. Lost or stolen equipment will be paid for by the athlete that is missing the equipment at the conclusion of the season.
5. I understand that pictures of my son/daughter may be posted on athletic websites
6. The Franklin Public Schools are not responsible for any medical or hospital charges incurred resulting from my child’s participation in athletic programs.
7. Charges will be billed to my family’s medical insurance or directly to parents/guardians by the medical service provider.
8. I do hereby consent to my child’s participation in voluntary athletic programs and do forever RELEASE, acquit, discharge, and covenant to hold harmless the Town of Franklin from any and all actions, causes of action, and claims on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which I may now or hereafter have as a parent/guardian of said minor, and also all claims or right of action for damages which said minor has or hereafter may acquire, either before or after [he/she] has reached [his/her] majority resulting from [his/her] participation in the Franklin Public Schools athletic programs.
9. I give my consent for my child to accompany the team on its out-of-town trips.
10. I also give my permission for the team physician, school nurse, E.M.T. or coach to render first aid as deemed necessary.
11. I give the coach or person in authority my consent to seek whatever medical treatment may be necessary in the event that my son/daughter is injured or requires medical care while in his/her charge and a parent/guardian cannot be reached.
12. I have read the online course regarding head injuries. It can be found at www.cdc.gov/concussion/HeadsUp/online_training.html. I am aware of the recent changes/updates to the head injury legislation.
13. I hereby give my permission for my son/daughter to participate in competitive athletics at Franklin High School. I understand that my child’s participation in athletic programs is voluntary and that my child and I are free to choose not to participate in these programs. I also understand and agree that such activity involves the potential for minor, major or catastrophic injuries, which are inherent in all contact/non-contact sports.
14. All Student Athletes will take a baseline ImPACT test in the 9th and 11th grades. FHS will use ImPACT in the return to play process.

Signature of Parent/Guardian
X_________________________
DATE_____________________

Signature of Student Athlete
X_________________________
DATE_____________________

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APPENDIX IV: Franklin Public Schools Report of Head Injury Form and School-based Equivalents (on following page)
REPORT OF HEAD INJURY DURING SPORTS SEASON

This form is to report head injuries (other than minor cuts or bruises) that occur during a sports season. It should be returned to the athletic director or staff member designated by the school and reviewed by the school nurse.

For Coaches: Please complete this form immediately after the game or practice for head injuries that result in the student being removed from play due to a possible concussion.

For Parents/Guardians: Please complete this form if your child has a head injury outside of school related extracurricular athletic activities.

Student’s Name _______________________________ Sex _______________________________
Date of Birth _______________________________ Grade _______________________________
School Sport(s) __________________________________
Home Address _______________________________ Telephone _______________________________

Date of injury: ______________________________

Did the incident take place during an extracurricular activity? _____ Yes ____ No
If so, where did the incident take place? ______________________________________________
Please describe nature and extent of injuries to student:

For Parents/Guardians:
Did the student receive medical attention? yes_____ no____
If yes, was a concussion diagnosed? yes____ no ______

I HEREBY STATE THAT TO THE BEST OF MY KNOWLEDGE, MY ANSWERS TO THE ABOVE QUESTIONS ARE COMPLETE AND CORRECT.

Please circle one: Coach or Marching Band Director Parent/Guardian
Name of Person Completing Form (please print): ________________________________

Signature _______________________________ Date _______________
APPENDIX V: Franklin Public Schools Post Sports-Related Head Injury Medical Clearance and Authorization Form (on following page)
POST SPORTS-RELATED HEAD INJURY
MEDICAL CLEARANCE AND AUTHORIZATION FORM

This medical clearance should be only be provided after a graduated return to play plan has been completed, including ImPACT test and student has been symptom free at all stages. The student must be completely symptom free at rest and during exertion prior to returning to full participation in extracurricular athletic activities.

Student’s Name________________________ Sex ______
Date of Birth __________________________ Grade_______
Date of injury: _________________________
Nature and extent of injury: _____________________________________

Symptoms (check all that apply):
• Nausea or vomiting
• Headaches
• Light/noise sensitivity
• Dizziness/balance problems
• Double/blurry vision
• Fatigue
• Feeling sluggish/in a fog
• Change in sleep patterns
• Memory problems
• Difficulty concentrating
• Irritability/emotional ups and downs
• Sad or withdrawn
• Other

Duration of Symptom(s): __________
Diagnosis: □ Concussion □ Other: _______________________

If concussion diagnosed, date student completed graduated return to play plan without recurrent symptoms: ____________________

Prior concussions (number, approximate dates):
_____________________________________________________________________________________

Name of Physician or Practitioner____________________________
□ Physician □ Certified Athletic Trainer □ Nurse Practitioner □ Neuropsychologist □ Physician Assistant
Address: _________________________________________________________
Phone number: _____________________________
Physician providing consultation/coordination (if not person completing this form): __________________________

Attestation stating "I attest that I have received clinical training in post-traumatic head injury assessment and management approved by the Department of Public Health or have received equivalent training as part of my licensure or continuing education."
Practitioner’s initials: ____________
Type of Training: □ CDC on-line clinical training □ Other MDPH approved Clinical Training □ Other (Describe)
________________________________________________________________________________________

*MDPH approved Clinical Training options can be found at: www.mass.gov/dph/sports concussion
This form is not complete without the practitioner’s verification of such training

I HEREBY AUTHORIZE THE ABOVE NAMED STUDENT FOR RETURN TO EXTRACURRICULAR ATHLETIC ACTIVITY.

Signature: __________________________ Date: __________________________

Note: This form may only be completed by: a duly licensed physician; a duly licensed athletic trainer in consultation with a licensed physician; a duly licensed nurse practitioner in consultation with a licensed physician; a duly licensed neuropsychologist in coordination with the physician managing the student’s recovery.
Appendix VI: DPH Regulations

105 CMR: DEPARTMENT OF PUBLIC HEALTH 105 CMR 201.000: HEAD INJURIES AND CONCUSSIONS IN EXTRACURRICULAR ATHLETIC ACTIVITIES

Section

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201.001: Purpose

The purpose of 105 CMR 201.000 is to provide standardized procedures for persons involved in the prevention, training, management and return to activity decisions regarding students who incur head injuries while involved in extracurricular athletic activities, including but not limited to interscholastic sports, in order to protect their health and safety.

201.002: Authority

105 CMR 201.000 is promulgated pursuant to M.G.L. c. 111, § 222.

201.003: Citation

105 CMR 201.000 shall be known and may be cited as 105 CMR 201.000: Head Injuries and Concussions in Extracurricular Athletic Activities.

201.004: Scope

The requirements of 105 CMR 201.000 shall apply to all public middle and high schools, however configured, serving grades six through high school graduation, and other schools subject to the official rules of the Massachusetts Interscholastic Athletic Association. The requirements of 105 CMR 201.000 shall apply to students who participate in any extracurricular athletic activity.

201.005: Definitions

As used in 105 CMR 201.000, unless the context clearly requires otherwise, the following words shall have the following meanings:

Athlete means a student who prepares for or participates in an extracurricular athletic activity.

Athletic Director means an individual employed by a school district or school and responsible for administering the athletic program or programs of a school. The term Athletic Director refers to the Director and Assistant Directors. For schools that do not employ an Athletic Director, the term Athletic Director refers to the individual designated to...
be responsible for administering the athletic program or programs of a school. 105 CMR: DEPARTMENT OF PUBLIC HEALTH

Centers for Disease Control and Prevention refers to one of the major agencies of the United States Department of Health and Human Services with a mission to protect the health of people and communities through health promotion, prevention of disease, injury and disability.

Certified Athletic Trainer means any person who is licensed by the Board of Registration in Allied Health Professions in accordance with M.G.L. c. 112, § 23A and 259 CMR 4.00 as a professional athletic trainer and whose practice includes schools and extracurricular athletic activities. Pursuant to M.G.L. c. 112, § 23A, the athletic trainer practices under the direction of a physician duly registered in the Commonwealth.

Coach means an employee or volunteer responsible for organizing and supervising student athletes to teach them the fundamental skills of extracurricular athletic activities. The term coach refers to both head coaches and assistant coaches.

Commissioner means the Commissioner of the Department of Public Health or his or her designee.

Concussion means a complex disturbance in brain function, due to direct or indirect trauma to the head, related to neurometabolic dysfunction, rather than structural injury.

Department means the Department of Public Health.

Diagnosed means a physician's or nurse practitioner's opinion, derived from observation, examination, and evaluation of procedures or tests of a patient, that the patient has or had a concussion.

Extracurricular Athletic Activity means an organized school sponsored athletic activity generally occurring outside of school instructional hours under the direction of a coach, athletic director or band leader including but not limited to Alpine and Nordic skiing and snowboarding, baseball, basketball, cheerleading, cross country track, fencing, field hockey, football, golf, gymnastics, horseback riding, ice hockey, lacrosse, marching band, rifle, rugby, soccer, skating, softball, squash, swimming and diving, tennis, track (indoor and outdoor), ultimate frisbee, volleyball, water polo, and wrestling. All interscholastic athletics are deemed to be extracurricular athletic activities.

Game Official means a person who officiates at an extracurricular athletic activity, such as a referee or umpire including but not limited to persons enrolled as game officials in Massachusetts Interscholastic Athletic Association.

Head Injury means direct blow to the head or indirect trauma to the head including a concussion or traumatic brain injury. Scalp or facial laceration alone is not a head injury for purposes of 105 CMR 201.000.

Massachusetts Interscholastic Athletic Association (MIAA) is a private, non-profit association organized by its member schools, public and private, to govern, coordinate and promote athletic activities in 33 or more sports for high school students.

MIAA Member Schools means all schools, whether public or private, that participate in interscholastic athletics under the auspices and rules of the Massachusetts Interscholastic Athletic Association.

Neuropsychologist means a professional who is licensed as a psychologist and certified as a health service provider by the Board of Registration of Psychologists pursuant to M.G.L. c. 112, §§ 118 through 129A with additional specialized training and expertise in the applied science of brain-behavior relationships and who has specific experience in evaluating neurocognitive, behavioral and psychological conditions and their relationship to central nervous system functioning. The neuropsychologist has specialized experience in administering and interpreting neuropsychological tests and has duties which may include, but are not limited to pre-injury measurement of the
cognitive abilities that may be disturbed by a concussion, testing within the first few days post-head injury, and periodic retesting to track resolution of the student's symptoms and improvement in cognitive functioning. The neuropsychologist may also advise school staff regarding the student's need for post injury academic accommodations.

Nurse Practitioner means a duly licensed and registered nurse authorized to practice in an expanded role as a nurse practitioner whose professional activities include performing physical examinations, diagnosing health and developmental problems, managing therapeutic regimens, and ordering therapies and tests.

Parent means the parent or guardian or foster parent of a student.

Physician means a duly licensed doctor of medicine or osteopathy.

Play means a practice or competition.

School means a single school that operates under the direct administration of a principal, head master, director or school leader appointed by a school district, or a charter school board or independent school board of trustees. School includes a public school operated by a municipal or regional school district, an education collaborative established under M.G.L. c. 40, § 4E, or a school granted a charter by the Board of Elementary and Secondary Education under M.G.L. c. 71, § 89 and 603 CMR 1.00: Charter Schools and operated by a board of trustees including Commonwealth and Horace Mann charter schools. School includes, but is not limited to, public and other schools that are members of MIAA. The term does not include associations of home-schooled students.

School-based Equivalent means a form or format that a school district or school develops in lieu of Department of Public Health forms, which at minimum include all of the information required by the most current Department form posted on the Department's website.

School District means a municipal school department or regional school district, acting through its school committee or superintendent of schools; a county agricultural school, acting through its board of trustees or superintendent director; a charter school, acting through its board of trustees or school leader; an educational collaborative; or any other public school established by statute or charter, acting through its governing board.

School Nurse means a nurse practicing in a school setting who is licensed to practice as a Registered Nurse by the Board of Registration in Nursing pursuant to M.G.L. c. 112, who is licensed to work as an educator in a school by the Department of Elementary and Secondary Education pursuant to 603 CMR 7.00: Educator Licensure and Preparation Program Approval, and who is appointed or assigned to a public school by a school committee or a board of health in accordance with M.G.L. c. 71, § 53 or employed by a superintendency district comprised of several towns in accordance with M.G.L. c. 71, §§ 53A and 53B or, who is employed, in the case of a charter or private school, by a board of trustees.

School Physician means a licensed physician practicing in a school setting including but not limited to a physician who is appointed or employed by a school committee or board of health in accordance with M.G.L. c. 71, § 53, or employed by a superintendency district comprised of several towns in accordance M.G.L. c. 71, §§ 53A, 53B or, in the case of a charter or private school, by the board of trustees. School physician includes, but is not limited to, physicians assigned to examine children who apply for health certificates in order to obtain an employment permit pursuant to M.G.L. c. 71, § 54 and team physicians. 105 CMR: DEPARTMENT OF PUBLIC HEALTH

School Health Advisory/Wellness Committee means a committee consisting of school and community members who advise a school district on its comprehensive, coordinated school health program.
Second Impact Syndrome means a potentially lethal condition that can occur when a person sustains a head injury prior to complete healing of a previous brain injury, causing dysregulation of cerebral blood flow with subsequent vascular engorgement.

Sports means extracurricular athletic activities.

Student means a person enrolled for part-time or full-time attendance in an educational program operated by a school or school district, including home schoolers.

Teacher is any person employed in a school or school district under a license listed in 603 CMR 7.00: Educator Licensure and Preparation Program Approval or person employed to teach students in a non-public school.

Team Physician means a physician assigned to an interscholastic football game played by any team representing a public secondary school in the Commonwealth pursuant to M.G.L. c. 71, § 54A.

Trainer means a person who provides students who participate in an extracurricular athletic activity with health and fitness instruction, including but not limited to the fundamental skills of performance, strength, or conditioning, but who is not licensed as a certified athletic trainer.

Traumatic Brain Injury (TBI) means a complex pathophysiological process affecting the brain, induced by traumatic biomechanical forces. TBI may be caused either by a direct blow to the head, face, neck or elsewhere on the body with an impulsive force transmitted to the head. TBI includes, but is not limited to, a concussion.

Volunteer means an adult who volunteers as a game official, coach, assistant coach, team parent, physician, nurse, or in an authoritative role to assist students who are engaged in an extracurricular athletic activity.

201.006: School Policies

(A) All school districts and schools must have policies and procedures governing the prevention and management of sports-related head injuries within the school district or school. The School Committee or Board of Trustees, consulting with the Board of Health where appropriate, shall adopt policies and procedures governing the prevention and management of sports-related head injuries within the school district or school following development of a proposal by a team consisting, at a minimum, of a school administrator, school nurse, school or team physician if on staff, athletic director, certified athletic trainer if on staff, neuropsychologist if available, guidance counselor, and teacher in consultation with any existing school health/wellness advisory committee. Policies and procedures must address sports-related head injuries occurring in extracurricular athletic activities but may be applied to all head injuries in students. Review and revision of such policies and procedures shall occur as needed but at least every two years. At a minimum, these policies shall include:

(1) Designation, by the superintendent or head master, principal or school leader, of the person responsible for the implementation of these policies and protocols, either the Athletic Director or other school personnel with administrative authority;

(2) Annual training of persons specified in 105 CMR 201.007 in the prevention and recognition of a sports-related head injury, and associated health risks including second impact syndrome utilizing Department-approved training materials or program, and documentation of each person's completion of such training;

(3) Documentation of physical examination prior to a student’s participation in extracurricular athletic activities on an annual basis, consistent with 105 CMR 200.100(B)(3) and information for students participating in multiple sports seasons that documentation of one physical examination each year is sufficient;

(4) Procedure for the school to obtain and ensure review, prior to each sports season, of current information regarding an athlete's history of head injuries and concussions using either the Department Pre-participation Head
Injury/Concussion Reporting Form For Extracurricular Activities (Pre-participation Form), or school-based equivalent;

(5) Procedure for medical or nursing review of all Pre-participation Forms indicating a history of head injury;

(6) Procedure for the school to obtain and ensure timely medical or nursing review of a Department Report of a Head Injury During Sports Season Form (Report of Head Injury Form), or school-based equivalent, in the event of a head injury or suspected concussion that takes place during the extracurricular activity season;

(7) Procedure for reporting head injuries or suspected concussions sustained during extracurricular athletic activities to the school nurse and certified athletic trainer, if on staff;

(8) Procedure for identifying a head injury or suspected concussion, removing an athlete from practice or competition, and referring for medical evaluation;

(9) The protocol for medical clearance for return to play after a concussion that at minimum complies with 105 CMR 201.011;

(10) Procedure for the development and implementation of post-concussion graduated reentry plans to school and academic activities, if indicated, by persons specified in 105 CMR 201.010(E)(1);

(11) Procedure for providing information, and necessary forms and materials, to all parents and athletes including the:

(a) annual training requirement,

(b) procedure for the school to notify parents when an athlete has been removed from play for a head injury or suspected concussion sustained during an extracurricular athletic activity,

(c) protocol for obtaining medical clearance for return to play and academics after a diagnosed concussion,

(d) parent’s responsibility for completion of the Pre-participation Form, or school-based equivalent, and

(e) parent’s responsibility for completion of the Report of a Head Injury Form, or school-based equivalent;

(12) Inclusion in the student and parent handbooks of information regarding the sports-related head injury policy and how to obtain the policy;

(13) Procedure for communicating with parents with limited English proficiency;

(14) Procedure for outreach to parents who do not return completed forms required for students to participate in extracurricular sports and for how to handle situations where a student verifies completion of the annual training requirement but a parent has not;

(15) Procedure for sharing information concerning an athlete's history of head injury and concussion, recuperation, reentry plan, and authorization to return to play and academic activities on a need to know basis consistent with requirements of 105 CMR 201.000 and applicable federal and state law including but not limited to the Massachusetts Student Records Regulations, 603 CMR 23.00, and the Federal Family Educational Rights and Privacy Act Regulations, 34 CFR Part 99.

(16) Instructions to coaches, certified athletic trainers, trainers and volunteers:

(a) to teach form, techniques, and skills and promote protective equipment use to minimize sports-related head injury; and

(b) to prohibit athletes from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, such as using a helmet or any other sports equipment as a weapon;

(17) Penalties, including but not limited to personnel sanctions and forfeiture of games, for failure to comply with provisions of the school district's or school's policy.

(B) These policies and procedures shall be made available to the Department and to the Department of Elementary and Secondary Education upon request.

(C) The school or school district shall provide the Department with an affirmation, on school or school district letterhead, that it has developed policies in accordance with 105 CMR 201.000 by January 1, 2012. This affirmation shall be updated by September 30, 2013 and every two years thereafter upon review or revision of its policies.

201.007: Training Program

(A) The following persons annually shall complete one of the head injury safety training programs approved by the Department as found on the Department's website:

(1) Coaches;

(2) Certified athletic trainers;

(3) Trainers;

(4) Volunteers;

Franklin Public School's Head Injury/Concussion Procedures and Protocols Rev. 9-2017
(5) School and team physicians;
(6) School nurses;
(7) Athletic Directors;
(8) Directors responsible for a school marching band, whether employed by a school or school district or serving in such capacity as a volunteer;
(9) Parents of a student who participates in an extracurricular athletic activity; and
(10) Students who participate in an extracurricular athletic activity.

(B) The required training applies to one school year and must be repeated for every subsequent year.

(C) Each school shall maintain a record of completion of annual training for all persons specified by 105 CMR 201.007(A) through:

(1) a certification of completion for any Department-approved on-line course; or
(2) a signed acknowledgment that the individual has read and understands Department-approved written materials required by 105 CMR 201.008(A)(1); or
(3) an attendance roster from a session using Department-approved training; or
(4) other means specified in school policies and procedures.

(D) If a school district or school offers head injury safety training to guidance counselors, physical education teachers, classroom teachers or other school personnel, the school district or school at minimum shall offer one of the current head injury safety training programs approved by the Department as specified on the Department's website.

(E) Game officials shall complete one of the training programs approved by the Department as specified on the Department's website annually and shall provide independent verification of completion of the training requirement to schools or school districts upon request.

201.008: Participation Requirements for Students and Parents

(A) Pre-participation Requirements.

(1) Each year, a school district or school shall provide current Department-approved training, written materials or a list and internet links for Department-approved on-line courses to all students who plan to participate in extracurricular athletic activities and their parents in advance of the student's participation.

(2) All students who plan to participate in extracurricular athletic activities and their parents shall satisfy the following pre-participation requirements:

(a) Each year, before the student begins practice or competition, the student and the parent shall:

—. Complete current Department-approved training regarding head injuries and concussions in extracurricular athletic activities; and

—. Provide the school with a certificate of completion for any Department-approved on-line course or a signed acknowledgement that they have read and understand Department-approved written materials, unless they have attended a school-sponsored training at which attendance is recorded or satisfied other means specified in school policies.

—. Before the start of every sports season, the student and the parent shall complete and submit a current Pre-participation Form, or school-based equivalent, signed by both, which provides a comprehensive history with up-to-date information relative to concussion history; any head, face or cervical spine injury history; and any history of co-existent concussive injuries.

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(B) Ongoing Requirements. If a student sustains a head injury or concussion during the season, but not while participating in an extracurricular athletic activity, the parent shall complete the Report of Head Injury Form, or a school-based equivalent, and submit it to the coach, school nurse or person specified in school policies and procedures.

201.009: Documentation and Review of Head Injury and Concussion History and Forms

(A) The school shall ensure that all forms or information from all forms that are required by 105 CMR 201.000 are completed and reviewed, and shall make arrangements for:

(1) Timely review of all Pre-participation and Report of Head Injury Forms, and school-based equivalents, by coaches so as to identify students who are at greater risk of repeated head injuries.
(2) Timely review of all Pre-participation Forms which indicate a history of head injury and Report of Head Injury Forms, or school-based equivalents, by:
(a) the school nurse; and
(b) the school physician if appropriate; and
(3) Timely review of accurate, updated information regarding each athlete who has reported a history of head injury or a head injury during the sports season by:
(a) The team's physician if any; and
(b) the school's certified athletic trainer if any.
(B) The school may use a student's history of head injury or concussion as a factor to determine whether to allow the student to participate in an extracurricular athletic activity or whether to allow such participation under specific conditions or modifications.

201.010: Exclusion from Play
(A) Any student, who during a practice or competition, sustains a head injury or suspected concussion, or exhibits signs and symptoms of a concussion, or loses consciousness, even briefly, shall be removed from the practice or competition immediately and may not return to the practice or competition that day.

(B) The student shall not return to practice or competition unless and until the student provides medical clearance and authorization as specified in 105 CMR 201.011.

(C) The coach shall communicate the nature of the injury directly to the parent in person or by phone immediately after the practice or competition in which a student has been removed from play for a head injury, suspected concussion, signs and symptoms of a concussion, or loss of consciousness. The coach also must provide this information to the parent in writing, whether paper or electronic format, by the end of the next business day.

(D) The coach or his or her designee shall communicate, by the end of the next business day, with the Athletic Director and school nurse that the student has been removed from practice or competition for a head injury, suspected concussion, signs and symptoms of a concussion, or loss of consciousness.

(E) Each student who is removed from practice or competition and subsequently diagnosed with a concussion shall have a written graduated reentry plan for return to full academic and extracurricular athletic activities.
(1) The plan shall be developed by the student's teachers, the student's guidance counselor, school nurse, certified athletic trainer if on staff, neuropsychologist if available or involved, parent, members of the building-based student support and assistance team or individualized education program team as appropriate and in consultation with the student's primary care provider or the physician who made the diagnosis or who is managing the student's recovery.
(2) The written plan shall include instructions for students, parents and school personnel, addressing but not be limited to:
(a) Physical and cognitive rest as appropriate;
(b) Graduated return to extracurricular athletic activities and classroom studies as appropriate, including accommodations or modifications as needed;
(c) Estimated time intervals for resumption of activities;
(d) Frequency of assessments, as appropriate, by the school nurse, school physician, team physician, certified athletic trainer if on staff, or neuropsychologist if available until full return to classroom activities and extracurricular athletic activities are authorized; and
(e) A plan for communication and coordination between and among school personnel and between the school, the parent, and the student's primary care provider or the physician who made the diagnosis or who is managing the student's recovery.
(3) The student must be completely symptom free and medically cleared as defined in 105 CMR 201.011 in order to begin graduated reentry to extracurricular athletic activities.

201.011: Medical Clearance and Authorization to Return to Play
Each student who is removed from practice or competition for a head injury or suspected concussion, or loses consciousness, even briefly, or exhibits signs and symptoms of a concussion, shall obtain and present to the Athletic Director, unless another person is specified in school policy or
procedure, a Department Post Sports-Related Head Injury Medical Clearance and Authorization Form (Medical Clearance and Authorization Form), or school-based equivalent, prior to resuming the extracurricular athletic activity. This form must be completed by a physician or one of the individuals as authorized by 105 CMR 201.011(A). The ultimate return to play decision is a medical decision that may involve a multidisciplinary approach, including consultation with parents, the school nurse and teachers as appropriate.

(A) Only the following individuals may authorize a student to return to play:
(1) A duly licensed physician;
(2) A duly licensed certified athletic trainer in consultation with a licensed physician;
(3) A duly licensed nurse practitioner in consultation with a licensed physician; or
(4) A duly licensed neuropsychologist in coordination with the physician managing the student's recovery.

(B) By September 2013, physicians, nurse practitioners, certified athletic trainers, and neuropsychologists providing medical clearance for return to play shall verify that they have received Department-approved training in post traumatic head injury assessment and management or have received equivalent training as part of their licensure or continuing education.

201.012: Responsibilities of the Athletic Director
(A) The Athletic Director shall participate in the development and biannual review of the policies and procedures required by 105 CMR 201.006 for the prevention and management of sports-related head injuries within the school district or school.

(B) The Athletic Director shall complete the annual training as required by 105 CMR 201.007.
(C) The Athletic Director, unless school policies and procedures provide otherwise, shall be responsible for:
(1) Ensuring that the training requirements for staff, parents, volunteers, coaches and students are met, recorded, and records are maintained in accord with 105 CMR 201.016;
(2) Ensuring that all students meet the physical examination requirements consistent with 105 CMR 200.000: Physical Examination of School Children prior to participation in any extracurricular athletic activity;
(3) Ensuring that all students participating in extracurricular athletic activities have completed and submitted Pre-participation Forms, or school-based equivalents, prior to participation each season;
(4) Ensuring that student Pre-participation Forms, or school-based equivalents, are reviewed according to 105 CMR 201.009(A);
(5) Ensuring that Report of Head Injury Forms, or school-based equivalents, are completed by the parent or coach and reviewed by the coach, school nurse, certified athletic trainer and school physician as specified in 105 CMR 201.009(A);
(6) Ensuring that athletes are prohibited from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon; and
(7) Reporting annual statistics to the Department in accord with 105 CMR 201.017.

201.013: Responsibilities of Coaches
(A) Coaches shall be responsible for:
(1) Completing the annual training as required by 105 CMR 201.007;
(2) Reviewing Pre-participation Forms, or school-based equivalents, so as to identify those athletes who are at greater risk for repeated head injuries;
(3) Completing a Report of Head Injury Form, or school-based equivalent, upon identification of a student with a head injury or suspected concussion that occurs during practice or competition;
(4) Receiving, unless otherwise specified in school policies and procedures, and reviewing forms that are completed by a parent which report a head injury during the sports season, but outside of an extracurricular athletic activity, so as to identify those athletes who are at greater risk for repeated head injuries;
(5) Transmitting promptly forms in 105 CMR 201.013(A)(2) and (3) to the school nurse for review and maintenance in the student's health record, unless otherwise specified in school policies and procedures;
(6) Teaching techniques aimed at minimizing sports-related head injury;
(7) Discouraging and prohibiting athletes from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete, including using a helmet or any other sports equipment as a weapon; and
(8) Identifying athletes with head injuries or suspected concussions that occur in practice or competition and removing them from play.

(B) Coaches are responsible for communicating promptly with the parent of any student removed from practice or competition as directed in 105 CMR 201.010(C) and with the Athletic Director and school nurse as directed in 105 CMR 201.010(D).

201.014: Responsibilities of the Certified Athletic Trainers

Certified athletic trainers, if on staff, shall be responsible for:

(A) Participating in the development and biannual review of the policies and procedures required by 105 CMR 201.006 for the prevention and management of sports-related head injuries within the school district or school;

(B) Completing the annual training as required by 105 CMR 201.007;

(C) Reviewing information from Pre-participation Forms, or school-based equivalents, which indicate a history of head injury and from Report of Head Injury Forms, or school-based equivalents, to identify students who are at greater risk for repeated head injuries;

(D) Identifying athletes with head injuries or suspected concussions that occur in practice or competition and removing them from play; and

(E) Participating, if available, in the graduated reentry planning and implementation for students who have been diagnosed with a concussion.

201.015: Responsibilities of the School Nurse

The School Nurse shall be responsible for:

(A) Participating in the development and biannual review of the policies and procedures required by 105 CMR 201.006 for the prevention and management of sports-related head injuries within the school district or school;

(B) Completing the annual training as required by 105 CMR 201.007;

(C) Reviewing, or arranging for the school physician to review, completed Pre-participation Forms, or school-based equivalents, that indicate a history of head injury and following up with parents as needed prior to the student's participation in extracurricular athletic activities;

(D) Reviewing, or arranging for the school physician to review, Report of Head Injury Forms, or school-based equivalents, and following up with the coach and parent as needed;

(E) Maintaining:

(1) Pre-participation Forms, or school-based equivalents; and

(2) Report of Head Injury Forms, or school-based equivalents, in the student's health record;

(F) Participating in the graduated reentry planning for students who have been diagnosed with a concussion to discuss any necessary accommodations or modifications with respect to academics, course requirements, homework, testing, scheduling and other aspects of school activities consistent with a graduated reentry plan for return to full academic and extracurricular athletic activities after a head injury and revising the health care plan as needed;

(G) Monitoring recuperating students with head injuries and collaborating with teachers to ensure that the graduated reentry plan for return to full academic and extracurricular athletic activities required by 105 CMR 201.010(E) is being followed; and

(H) Providing ongoing educational materials on head injury and concussion to teachers, staff and students.

201.016: Record Maintenance

(A) The school, consistent with any applicable state and federal law, shall maintain the following records for three years or at a minimum until the student graduates:

(1) Verifications of completion of annual training and receipt of materials;

(2) Department Pre-participation Forms, or school-based equivalents;
(3) Department Report of Head Injury Forms, or school-based equivalents;
(4) Department Medical Clearance and Authorization Forms, or school-based equivalents; and
(5) Graduated reentry plans for return to full academic and extracurricular athletic activities.
(B) The school shall make these records available to the Department and the Department of Elementary and Secondary Education, upon request or in connection with any inspection or program review.

201.017: Reporting

Starting school year 2011-2012, schools shall be responsible for maintaining and reporting annual statistics on a Department form or electronic format that at minimum report:

(A) The total number of Department Report of Head Injury Forms, or school-based equivalents, received by the school; and

(B) The total number of students who incur head injuries and suspected concussions when engaged in any extracurricular athletic activities.

REGULATORY AUTHORITY 105 CMR 201.000: M.G.L. c. 111, § 222.


[ Text of section added by 2010, 166, Sec. 1 effective July 19, 2010. See also, Section 222 added by 2010, 197, Sec. 6 effective October 28, 2010 and Section 222 added by 2010, 288, Sec. 9 effective August 10, 2010, below.]

Section 222. (a) The department shall direct the division of violence and injury prevention to develop an interscholastic athletic head injury safety training program in which all public schools and any school subject to the Massachusetts Interscholastic Athletic Association rules shall participate. Participation in the program shall be required annually of coaches, trainers and parent volunteers for any extracurricular athletic activity; physicians and nurses who are employed by a school or school district or who volunteer to assist with an extracurricular athletic activity; school athletic directors; directors responsible for a school marching band; and a parent or legal guardian of a child who participates in an extracurricular athletic activity.

9 http://www.malegislature.gov/Laws/GeneralLaws/PartI/TitleXVI/Chapter111/Section222
In developing the program, the division may use any of the materials readily available from the Centers for Disease Control and Prevention. The program shall include, but not be limited to: (1) current training in recognizing the symptoms of potentially catastrophic head injuries, concussions and injuries related to second impact syndrome; and (2) providing students that participate in any extracurricular athletic activity, including membership in a marching band, the following information annually: a summary of department rules and regulations relative to safety regulations for students participation in extracurricular athletic activities, including the medical protocol for post-concussion participation or participation in an extracurricular athletic activity; written information related to the recognition of symptoms of head injuries, the biology and the short-term and long-term consequences of a concussion.

(b) The department shall develop forms on which students shall be instructed to provide information relative to any sports head injury history at the start of each sports season. These forms shall require the signature of both the student and the parent or legal guardian thereof. Once complete, the forms shall be forwarded to all coaches prior to allowing any student to participate in an extracurricular athletic activity so as to provide coaches with up-to-date information relative to an athlete's head injury history and to enable coaches to identify students who are at greater risk for repeated head injuries.

(c) If a student participating in an extracurricular athletic activity becomes unconscious during a practice or competition, the student shall not return to the practice or competition during which the student became unconscious or participate in any extracurricular athletic activity until the student provides written authorization for such participation, from a licensed physician, licensed neuropsychologist, certified athletic trainer or other appropriately trained or licensed health care professional as determined by the department of public health, to the school's athletic director.

If a student suffers a concussion as diagnosed by a medical professional, or is suspected to have suffered a concussion while participating in an extracurricular athletic activity, the student shall not return to the practice or competition during which the student suffered, or is suspected to have suffered, a concussion and shall not participate in any extracurricular athletic activity until the
student provides written authorization for such participation, from a licensed physician, licensed neuropsychologist, certified athletic trainer or other appropriately trained or licensed health care professional as determined by the department of public health, to the school's athletic director.

(d) A coach, trainer or volunteer for an extracurricular athletic activity shall not encourage or permit a student participating in the activity to engage in any unreasonably dangerous athletic technique that unnecessarily endangers the health of a student, including using a helmet or any other sports equipment as a weapon.

(e) The superintendent of the school district or the director of a school shall maintain complete and accurate records of the district's or school's compliance with the requirements of this section. A school that fails to comply with this section, as determined by the department, shall be subject to penalties as determined by the department.

(f) Nothing in this section shall be construed to waive liability or immunity of a school district or its officers or employees. This section shall not create any liability for a course of legal action against a school district, its officers or employees.

(g) A person who volunteers to assist with an extracurricular athletic activity shall not be liable for civil damages arising out of any act or omission relating to the requirements of this section, unless such person is willfully or wantonly negligent in his act or omission.

(h) The division shall adopt regulations to carry out this section.
APPENDIX VIII: MDPH GUIDANCE ON 504 OR IEP PLANS FOR STUDENTS RETURNING TO ACADEMIC WORK

From MDPH SPORTS-RELATED HEAD INJURY REGULATIONS:
FREQUENTLY ASKED QUESTIONS #27
Revised November 7, 2011

Will a student on a graduated reentry plan also need a 504 plan or IEP for their return to academic activities? What about providing MCAS accommodations to these students?

All students recovering from a concussion will need a written graduated reentry plan, as described under DPH regulation 105 CMR 201.010. These students are entitled to receive instructional accommodations and modifications for routine classroom work (or tutoring) and for classroom assessments, as described in their reentry plan. In addition, to be eligible to receive accommodations on statewide assessments (e.g., MCAS tests), the student will also need either a 504 plan or an Individualized Education Program (IEP).

**Instructional accommodations and modifications** should be based on an individual student’s academic performance and stage of recovery and must be described either in the graduated reentry plan, current IEP, or a 504 plan. The 504 plan may be used to address section 201.010 (2) (b) of the graduated reentry plan (i.e., “instructions for the student’s graduated return to extracurricular athletic activities and classroom studies, as appropriate, including accommodations and modifications as needed”). A reference to the graduated reentry plan should be included in the student’s IEP, if appropriate, in the section titled “Additional Information.”

Note: An *accommodation* is intended to provide a student with a support that allows the student to achieve at the same level as other students.

A *modification* is a change in the expectations for a student’s performance, such as taking a reduced workload or specially-adapted classroom tests.

It may be necessary to “try out” various approaches for adapting instruction, then revise the information in the academic portion of the graduated reentry plan based on whether the accommodation or modification appears to be having the desired effect and the student is comfortable using it.

In terms of MCAS participation, the student must have either an IEP or the 504 plan to be eligible to receive test accommodations. The IEP or 504 team must evaluate the student’s current academic performance, profile, and learning preferences and make separate decisions in each subject as to how the student will participate in MCAS, including whether the student will take the standard MCAS test and, if so, which accommodations will be provided. Accommodations must be listed *separately* for routine instruction and for MCAS testing in the 504 plan.

It may be appropriate for a student with a concussion to participate in the MCAS Alternate Assessment (MCAS-Alt), instead of the standard MCAS test in a subject, even with the provision of test accommodations, because the complexity and severity of the student’s disability may make it impossible for the student to take a test of the intensity and duration of MCAS and/or to complete each test session in a single school day, as required. The MCAS-Alt is a collection of the student’s work and other information in the assessed subject collected into a portfolio by the student’s teacher over the course of the school year and submitted each year to the state in early April. The decision to designate a student for the MCAS-Alt is made by the IEP or 504 team.
The principal may determine that a student diagnosed with a concussion who is on a graduated reentry plan should not participate in MCAS testing because participation may impede the student’s recovery or endanger the student’s health. In making this determination, the principal should consult with any of the following, as appropriate: the school nurse, guidance counselor, student’s teacher(s), members of the student’s building-based support and assistance team or Individualized Education Program (IEP) Team, the physician who made the diagnosis or is managing the student’s recovery, and the child’s parent or guardian. In such cases, the student should be designated Absent Medical in the student’s test booklet, which will be reflected in reports of test results received by the parent, school, and district.

Information on participation requirements for students with disabilities in MCAS can be found on the Department’s website at www.doe.mass.edu/mcas/participation/?section=sped.
APPENDIX IX: ADDITIONAL RESOURCES

- Massachusetts Department of Public Health
  Division of Violence and Injury Prevention
  http://www.mass.gov/dph/injury
  617-624-5544

- The Brain Injury Association of America (BIAA):
  1-800-444-6443.
  http://www.biausa.org/

- Brain Injury Association of Massachusetts:
  Brain Injury Helpline: 1-800-242-0030
  http://www.biama.org/

- Sports Concussion New England
  http://www.sportsconcussion.net
  617-959-1010

- Centers for Disease Control and Prevention:
  http://www.cdc.gov/concussion/sports/index.html
  http://www.cdc.gov/concussion/sports/resources.html
  800-CDC-INFO
  (800-232-4636)

  National Center for Injury Prevention and Control (NCIPC)
  4770 Buford Hwy, NE
  MS F-63
  Atlanta, GA 30341-3717

- Massachusetts Interscholastic Athletic Association (MIAA)
  Phone (508) 541-7997
  Fax (508) 541-9888
  E-Mail miaa@miaa.net
  http://www.miaa.net/miaa/home?sid=38

- National Federation of State High School Associations