



WISCONSIN SCHOOL TALK

A Safety and Health Bulletin for K-12 Schools From
Gallagher National Risk Control

For more information, please
contact:

Nancy Moon

Phone: 262.792.2240

Email: Nancy_Moon@ajg.com

The Gallagher Way.
Since 1927.

Concussion Fact Sheet for School Professionals

What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow or jolt to the head. Concussions can also occur when a fall or blow to the body causes the head and brain to move rapidly back and forth. Even what seems to be a mild bump to the head can be serious.

Children and adolescents are among those at greatest risk for concussion. The potential for a concussion is greatest during activities where collisions can occur, such as during physical education (PE) class, playground time or school-based sports activities. However, concussions can happen anytime a student's head comes into contact with a hard object, such as a floor, desk, or another student's head or body. Proper recognition and response to concussion can prevent further injury and help with recovery.

The facts:

1. All concussions are serious.
2. Most concussions occur without loss of consciousness.
3. Recognition and proper response to concussions when they first occur can help prevent further injury or even death.

Children and teens with a concussion should **never** return to sports or recreation activities on the same day the injury occurred. They should delay returning to their activities until they are evaluated by a healthcare professional experienced with concussions, who says they are symptom-free and that it's **OK** to return to play. This means, until permitted, not returning to:

- PE class
- Sports practices or games
- Physical activity at recess

What are the signs and symptoms of a concussion?

The signs and symptoms of concussion can show up right after an injury, or may not appear or be noticed until hours or days after the injury. Be alert for any of the following signs or symptoms. Also, watch for changes in how the student is acting or feeling.



Gallagher

Insurance | Risk Management | Consulting



How can I recognize a concussion?

Teachers and school counselors may be the first to notice changes in their students. The signs and symptoms can take time to appear, and can become evident during concentration and learning activities in the classroom.

Send a student to the school nurse or another health professional if you notice or suspect that a student has:

- 1. Any kind of forceful blow to the head or body that results in rapid movement of the head**
- 2. Any change in the student's behavior, thinking or physical functioning (see the signs and symptoms of concussion)**

Symptoms reported by students:

Emotional

- Irritable
- Sad
- More emotional than usual
- Nervous

Thinking/remembering

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling slowed down
- Feeling sluggish, hazy, foggy or groggy

Sleep

- Drowsy
- Sleeps less than usual
- Sleeps more than usual
- Has trouble falling asleep (only ask about sleep symptoms if the injury occurred on a prior day)

Physical

- Headache or pressure in head
- Nausea or vomiting
- Balance problems or dizziness
- Fatigue or feeling tired
- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not "feel right"

Signs observed by school staff:

- Appears dazed or stunned
- Is confused about events
- Answers questions slowly
- Repeats questions
- Can't recall events prior to the hit, bump or fall
- Can't recall events after the hit, bump or fall
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Forgets class schedule or assignments

What do I need to know about my students returning to school after a concussion?

Supporting a student recovering from a concussion requires a collaborative approach between school professionals, healthcare providers and parents, as they may need accommodations during recovery. If symptoms persist, a 504 meeting may be called. Section 504 plans are implemented when students have a disability (temporary or permanent) that affects their performance in any manner. Services and accommodations for students may include speech-language therapy, environmental adaptations, curriculum modifications and behavioral strategies.

Students may need to limit activities while they are recovering from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer or playing video games, may cause concussion symptoms (such as headache or tiredness) to reappear or get worse.

Check out the CDC's Heads Up fact sheet, "Returning to School." For more information, visit www.CDC.GOV/Concussion.



Gallagher

Insurance | Risk Management | Consulting

Danger signs

Be alert for symptoms that worsen over time. A student should be seen in an emergency department right away if they have:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or inability to be awakened
- A headache that gets worse and does not go away
- Weakness, numbness or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

After a concussion:

Students returning to school after a concussion may need to implement the following behavior modifications.

- Take rest breaks as needed.
- Spend fewer hours at school.
- Be given more time to take tests or complete assignments.
- Receive help with schoolwork.
- Reduce time spent on the computer, reading or writing.

School professionals should watch for the following behaviors when students return to school after a concussion.

- Increased problems paying attention or concentrating
- Increased problems remembering or learning new information
- Longer time needed to complete tasks or assignments
- Difficulty organizing tasks
- Inappropriate or impulsive behavior during class
- Greater irritability
- Less able to cope with stress or is more emotional

It is normal for students to feel frustrated, sad and even angry because they cannot return to recreation or sports right away, or cannot keep up with schoolwork. A student may also feel isolated from peers and social networks. Talk with the student about these issues, and offer support and encouragement. As the student's symptoms decrease, the extra help or support can be removed gradually.

Source: CDC's Heads Up program, created through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE)

The Gallagher Way.
Since 1927.



Gallagher

Insurance | Risk Management | Consulting

Gallagher provides risk services consultation that is tailored to our clients' particular loss history, industry risk factors, and insurance program structure. Our services, summaries and recommendations can include claim advocacy, evaluation of loss frequency and severity, loss prevention strategy, sufficiency of self-insured retentions, risk transfer options, identification of risk exposures, and insurance coverage for particular claims. Our work can also include collaboration with carriers, our client's legal counsel, loss prevention or actuarial consultants. We emphasize that any of the above risk services, risk management opinions, and advice provided directly to clients or to clients' third-party vendors, is both confidential and intended for our clients' use and not for distribution. We also only offer the advice from an insurance/risk management perspective and it is NOT legal advice or intended to supplant the advice or services provided to clients from legal counsel and advisors. We recommend that our clients seek advice from legal counsel and third-party professionals to become fully apprised of all legal and financial implications to their businesses.

© 2021 Arthur J. Gallagher & Co. | GGB39321