



Concussion Policy (2025-2026)

[The Commonwealth of Massachusetts' Executive Office of Health and Human Services requires](#)

that all public middle and high schools subject to the Massachusetts Interscholastic Athletic Association (MIAA) rules adhere to the state law entitled HEAD INJURIES AND CONCUSSIONS IN EXTRACURRICULAR ATHLETIC ACTIVITIES (105 CMR 201.000)

The purpose of this policy is to provide information and 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 on behalf of Hilltown Cooperative Public Charter School, including, but not limited to, interscholastic sports and other, non-interscholastic athletic programs, in order to protect their health and safety as required by Massachusetts law and regulations.

Student-athletes who sustain a concussion can fully recover as long as their brain has time to heal before sustaining another hit; however, relying only on an athlete's self-report of symptoms to determine injury recovery is inadequate as many athletes are not aware of the signs and symptoms or the severity concussive injuries pose, or they may feel pressure from coaches, parents/guardians, and/or teammates to return to play as quickly as possible.

One or more of these factors will likely result in under-diagnosing the injury and a premature return to play. Massachusetts General Laws and Massachusetts Department of Health ("DPH") regulations make it imperative to accurately assess and treat student-athletes when concussions are suspected.

Student-athletes who receive concussions may appear to be "fine" on the outside, when in actuality they have a brain injury and are not able to return to play. Incurring a second concussion can prove to be devastating to a student athlete. Research has shown that young

athletes who sustain concussions and return to play before their brain has healed are highly vulnerable to more prolonged post-concussion syndromes or, in rare cases, a catastrophic neurological injury known as Second Impact Syndrome.

The requirements of the law and related regulations (G.L. c. 111, § 222; 105 CMR 201.000) apply to all public middle and high schools, however configured, serving grades six through high school graduation. Notwithstanding the grade limitations of the law, Hilltown Cooperative Public Charter School shall apply this Policy to all students who participate in extracurricular athletic activities. In addition to any training required by law, the following persons shall complete one of the required head injury safety training options detailed below:

- Coaches
- Physical education teacher
- Volunteers who assist with extracurricular athletic activities
- School Nurses
- Students who participate in an extracurricular athletic activity and their parents

This requirement may be met by:

- Completing an online training program approved by the Massachusetts Department of Public Health (DPH), as found on its website and as updated from time to time (<https://www.mass.gov/service-details/concussion-trainings>)

The Coach shall be responsible for collecting and maintaining records evidencing HCCPS's compliance with this policy. The Coach will keep all certificates, signed acknowledgements and training session rosters for three years.

The School Nurse shall be responsible for maintaining and reporting annual statistics on a DPH form or electronic format that, at a minimum, reports:

- 1) the total number of Report of Head injury Forms received by the school; and
- 2) the total number of students who incur head injuries and suspected concussions when engaged in any extracurricular athletic activities.

Upon the adoption of this policy by the Board of Trustees, the Head of School or designee shall ensure that DPH receives an affirmation on school letterhead that Hilltown Cooperative Charter School has developed policies and the Board of Trustees has adopted a final policy in accordance with law. This affirmation shall be updated every two years.

What is a Concussion?

A concussion is defined as a transient alteration in brain function without structural damage, but with other potentially serious long-term ramifications. In the event of a concussion, the brain sustains damage at a microscopic level in which cells and cell membranes are torn and stretched. The damage to these cells also disrupts the brain at a chemical level, as well as causing restricted blood flow to the damaged areas of the brain, thereby disrupting brain function. A concussion, therefore, is a disruption in how the brain works; it is not a structural injury. Concussions are difficult to diagnose because the damage cannot be seen. A MRI or CT

Scan cannot diagnose a concussion, but they can help rule out a more serious brain injury to a student athlete. Because concussions are difficult to detect, student athletes must obtain medical approval before returning to athletics following a concussion.

Mechanism of Injury:

A concussion is caused by a bump, blow or jolt to the head or body. Any force that causes the brain to bounce around or twist within the skull can cause a concussion. A bump, blow or jolt to the head or body can be caused by either indirect or direct trauma. The two direct mechanisms of injury are coup-type and contrecoup-type. Coup-type injury is when the head is stationary and struck by a moving object such as another player's helmet, a ball, or sport implement, causing brain injury at the location of impact. Contrecoup-type injury occurs when the head is moving and makes contact with an immovable or slowly moving object as a result of deceleration, causing brain injury away from the sight of impact. Indirect forces are transmitted through the spine and jaw or blows to the thorax that whip the head while the neck muscles are relaxed. Understanding the way in which an injury occurred is vital in understanding and having a watchful eye for athletes who may exhibit symptoms of a concussion so these student athletes can receive the appropriate care.athletics following a concussion.

Signs and Symptoms:

Signs (what you see):

- Confusion
- Forgets plays
- Unsure about game, score, opponent
- Altered coordination
- Balance problems
- Personality change
- Slow response to questions
- Forgets events prior to injury (retrograde amnesia)
- Forgets events after injury (anterograde amnesia)
- Loss of consciousness (any duration)

Symptoms (reported by athlete):

- Headache
- Fatigue
- Nausea or vomiting
- Double vision/ blurry vision
- Sensitivity to light (photophobia)
- Sensitivity to noise (tinnitus)
- Feels sluggish
- Feels foggy
- Problems concentrating
- Problems remembering

- Trouble with sleeping/ excess sleep
- Dizziness
- Sadness
- Seeing stars
- Vacant stare/ glassy eyed
- Nervousness
- Irritability
- Inappropriate emotions

If any of the above signs or symptoms are observed after a suspected blow to the head, jaw, spine or body, they may be indicative of a concussion and the student athlete must be removed from play immediately and not allowed to return until cleared by an appropriate allied health professional.

Management and Referral Guidelines:

1. When an athlete loses consciousness for any reason, the Coach will start the EAP (Emergency Action Plan) by activating EMS; check ABC's (airway, breathing, circulation); stabilize the cervical spine; and transport the injured athlete to the appropriate hospital via ambulance.

2. Any athlete who is removed from the competition or event and begins to develop signs and symptoms of a worsening brain injury will be transported to the hospital immediately in accordance with the EAP.

3. Any athlete who is symptomatic but stable is allowed to go home with his/her parent(s)/guardian(s) following the head injury.

a. If the head injury occurs at practice, parent(s)/guardian(s) will immediately be notified and must come and pick up the student athlete and talk to the Coach in person.

b. If the injury occurs at a game or event, the student athlete may go home with the parent/guardian(s) after talking with the Coach

c. Parent(s)/guardian(s) will receive important information regarding signs and symptoms of deteriorating brain injury/function prompting immediate referral to a local emergency room as well as return to play requirements. Parent(s)/ guardian(s), as well as student athletes, must read and sign the Post Sports-Related Head Injury Medical Clearance and Authorization Form and bring it back to the Nurse before starting with the return to play protocol.

Graduated Reentry Plans:

Each student athlete who is removed from practice or competition and subsequently diagnosed with a concussion or head injury shall have a written graduated reentry plan for return to full academic activities and extracurricular athletic activities. Along with a doctor's note detailing the necessary school based accommodations needed. The student athlete must be medically

cleared as required by the policy in order to begin graduated reentry to extracurricular athletic activities.

[Returning to School After a Concussion](#)

School Nurse Responsibilities:

- Complete the required annual training
- Participate in the annual review of this Policy
- Review information from Pre-participation forms and Report of Head Injury forms
- Maintain the following forms in the health record: Pre-participation forms, Report of Head Injury Forms and Medical Clearance and Authorization form
- Participate in the graduated reentry plan for student athletes who have been diagnosed with a concussion or head injury to discuss any necessary accommodations or modifications with respect to academics and other aspects of school and revise the health care plan as needed
- Monitor recuperating student athletes with head injuries and collaborate with teachers, staff and student athletes to ensure that the graduated reentry plan for return to full academic and extracurricular athletic activities is being followed
- Provide ongoing educational materials on head injury and concussions to teachers, staff and student athletes

School Responsibilities:

1. Review and, if necessary, revise the concussion policy every 2 years.
2. Once the school is informed of the student's concussion, a contact or "point person" should be identified (teacher).
3. Assign a point person to work with the student on organizing work assignments, making up work and giving extra time for assignments and tests/quizzes.
4. Assist teachers in following the recovery stage for students.
5. Convene meeting and develop a rehabilitative plan.
6. Decrease workload if symptoms appear.

PE teacher/School Coach Responsibilities:

1. Provide parents, athletes and volunteers with educational training and concussion materials yearly.
2. Ensure that all educational training programs are completed and recorded.
3. Ensure that all students meet the physical exam requirements consistent with 105 CMR 200.000 prior to participation in any extracurricular athletic activity
4. Ensure that all students participating in extracurricular athletic activity have completed and submitted their pre-participation forms
5. Ensure that athletes are prohibited from engaging in any unreasonably dangerous athletic technique that endangers the health or safety of an athlete.
6. Ensure that all head injury forms are completed by parent/guardian(s) or coaches and reviewed by the coach and the school nurse.

Parent/Guardian Responsibilities:

1. Complete and return concussion history form to the coach.
2. Inform school if a student sustains a concussion outside of school hours. Complete new concussion history form following new injury.
3. If a student suffers a concussion outside of school, complete head injury form and return it to the school nurse.
4. Complete a training provided by the school on concussions.
5. Watch for changes in your child that may indicate that your child does have a concussion or that your child's concussion may be worsening and report them to your child's medical provider.
6. Encourage your child to follow concussion protocol.
7. Enforce restrictions on rest, electronics and screen time.
8. Reinforce recovery plan.
9. Request a contact person from the school with whom you may communicate about your child's progress and academic needs.
10. Observe and monitor your child for any physical or emotional changes.
11. Request to extend make up time for work if necessary.
12. Recognize that your child will be excluded from participation in any extracurricular athletic event if all forms are not completed and on file with the coach.

Student and Student Athlete Responsibilities:

- Return required concussion history form prior to participation in athletics. Participate in all concussion training and education and return a certificate of completion to the athletic department prior to participation in athletics.
- Report all symptoms to the coach and/ or school nurse.
- Follow recovery plan.
- Rest as needed
- Minimize screen time and electronics for the first 48 hours.
- Don't carry books or backpacks that are too heavy.
- Tell your teachers if you are having difficulty with your classwork.
- Return to sports only when cleared by physician
- Report any symptoms to the coach and/or school nurse and parent(s)/guardian(s) if any occur after return to play.

When it comes to concussions, everyone needs to be aware of the potential dangers and remember that a concussion is a brain injury. Whenever anyone has a doubt about a student athlete with a concussion, SIT THEM OUT and have them see the appropriate health care provider!

- [Pre-participation form](#)
- [Medical clearance and authorization form](#)
- [Report of head injury form](#)
- [Returning to School After Concussion: Guidelines for Massachusetts Schools](#)