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## Recent Federal Case Spotlights School's Concussion Protocol

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# Maintaining SAFE SCHOOLS

Incorporating *Inside School Safety*

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## CONCUSSION AWARENESS

### Recent federal case spotlights school's concussion protocol

By Charles J. Russo, J.D., Ed.D. and Susan Davies, Ed.D.

High school football players are nearly twice as likely to sustain a concussion as college players, according to a recent study by the Institute of Medicine and funded by the NFL. As such, it's important for schools to have concussion protocols for student-athletes injured during play.

A recent case, *Mann v. Palmerton Area School District*, 117 LRP 40825 (3d Cir. 09/21/17), highlights the importance of having school concussion management and prevention policies in place for student-athletes. After a football player in Pennsylvania demonstrated concussion-like symptoms following a hard hit during practice in November 2011, his coach took him out of practice. Returning to practice on the same day, after being hit hard again, the coach removed him, and he was eventually diagnosed with a traumatic brain injury. Although the 3d Circuit found that the coach in this case was entitled to qualified immunity because the player lacked a clearly defined constitutional right to be protected from further harm when his injury occurred in 2011, it held that such a right does exist. Therefore, it observed, "a state actor violates this right when the injured student-athlete is required to be exposed to a risk of harm by continuing to practice or compete."

School policies should address the following elements:

- **Develop policy teams.** Concussion policy-writing and -revising teams should have broad representation, including board members, parents, teachers, a school nurse, a school psychologist and/or school counselor, administrators, coaches, athletic directors, the board's attorney, a team doctor, and a high school student-athlete.

- **Boost awareness.** Include policies in faculty/staff/student handbooks, on board websites, and in agreements students and parents sign before athletes

can participate on teams. Student-athletes must learn that playing while symptomatic does not show toughness but increases their symptoms and prolongs recovery. "Playing hurt" puts athletes at increased risks of sustaining later concussions, resulting in long-term or permanent brain damage. Because athletes who return to play while still healing risk greater chances of second concussions, educators should develop a mindset of protecting injured players.

- **Focus on return-to-play guidelines.** Healthcare professionals should evaluate students demonstrating signs of concussion to determine the severity of their injuries and to offer guidance about returning to school and/or physical activities. Policies should include return-to-play rules requiring athletes to refrain from practice on the days they are injured and until professionals knowledgeable about concussions determine whether they are symptom-free and able to resume participating.

- **Acknowledge policy receipt.** Parents, athletes, and coaches should sign an agreement at the beginning of each sport season stating they will abide by these rules. Student-athletes should learn to recognize concussion signs and to report to coaches if they suspect they, or teammates, were injured. If there is any doubt, coaches should prevent athletes suspected of having sustained concussions from participating until they are evaluated.

- **Ensure in-school contact.** Boards should identify one person in each school, such as the nurse or psychologist, to serve as a concussion team leader to communicate with parents, staff, and health care providers. This liaison can coordinate meetings about students' medical and educational status, clarify how post-concussion symptoms might impact their learning and behavior, and coordinate school-based intervention efforts.

- **Allow academic adjustments.** Working with assessment teams, students who are diagnosed with concussions should have “cognitive rest” initially and opportunities to progress through gradual returns to full cognitive and academic activities. Medical evaluations are needed to determine short-term academic and environmental adjustments that typically may include shortened days, modified curriculum, excusals from nonessential assignments, postponed testing, and decreased exposure to bright lights and loud noises.

- **Adhere to ongoing monitoring.** Policies should mandate ongoing monitoring of students to track their progress inside and outside of school. Worsening symptoms typically indicate students are over-exerted and need breaks. While returning to play and activities are medical decisions, educators can help

by monitoring and watching students for worsening, or improving, symptoms.

- **Strive for annual review.** Schools should review policies annually to provide evidence they are keeping up-to-date with changes in the law and medicine related to concussion detection and management.

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