



Concussion and Return to Play Policy

Frankston Rovers Junior Football Club

PURPOSE

This Policy demonstrates the strong commitment of the Frankston Rovers Juniors Football Club in protecting and caring for our injured players. To provide clear instructions on how to prepare and respond to a player who has a concussion and how to return to play safely.

POLICY STATEMENT

FRJFC Trainers are qualified to recognise, monitor, manage and document any serious head injuries and suspected concussion. The effects of concussion evolve or change over time. Whilst in most cases, symptoms improve, in some cases effects can worsen in the few hours after the initial injury.

All Trainers use sideline assessment tools during training and games which are not to replace medical assessment and should never be used as a stand-alone tool for the management of concussion.

“when in doubt, sit them out”.

NOTE: A player does not have to lose consciousness to have a concussion

SCOPE

This policy should be read in conjunction with the First Aid and Emergency Management Policy.

Frankston Rovers Junior Football Club will have a qualified First Aider at every match and training session. All coaching teams have a duty of care to our young players.

All trainers and coaches complete annual online Concussion module: [AFL First Aider: Concussion & Injury Management in Community Football \(androgogic.com.au\)](https://androgogic.com.au)

Team managers will seek help from the Emergency Response coordinator when a first aider is unavailable for a teams match or training session.

Players suspected of sustaining a concussion must be removed from training or play and monitored by a qualified trainer using AFL approved assessment tools (see appendix list below) and if **any Red Flags signs or symptoms** or worsening effects appear the player will be withdrawn from the game and be referred and assessed by a medical doctor as soon as possible after the injury.

CONCUSSION PROCEDURE

1. **Recognise** a suspected concussion
2. **Remove** the player from the game to monitor signs and symptoms
3. **Refer** the player to a medical doctor for assessment

1. RECOGNISE

The teams trainers/club ERC recognise concussion injuries by looking, asking and listening. Even where they may not have seen exactly what happened: the possibility of a concussion should be kept in mind.

If a player is unconscious: » DRSABCD »

Danger (stop Game, clear players to coaches box)

Response (Talk and Touch)

Send for 000, First Aid kit, and Defib

Check **Airway** (Look in mouth and if mouthguard is obstructing airway: Roll into recovery to clear, then tilt head back to open airway)

Breathing (Monitor Breathing 10 seconds) 2 or more breaths

CPR (30x2x 1/3) while qualified Trainer or ERC to use **Defibrillator**.

NOTE: Care must be taken with the player's neck, which may have also been injured in the collision. Do not remove glasses or helmet. If vomiting or seizure occurs do not move time the seizure and move into recovery position when seizure or vomiting ceases protecting airway.

2. REMOVE THE PLAYER

If conscious player: Trainer on field assesses the injured player

Red Flag Signs and Symptoms: *call 000*

- Loss of consciousness
- Seizure or convulsions
- Deteriorating conscious state
- Vomiting
- Double vision
- Complaints of weakness or tingling/burning in the arms or legs
- Neck pain
- Severe or increasing headache
- Increasing restlessness, agitation or combative behaviour

Suspected concussion signs and symptoms: *See a doctor as soon as practical, player must not return to play or training until cleared by a doctor.*

- Loss of responsiveness
- Motor incoordination
- Confused/disorientation
- Impaired memory
- Looking/feeling dazed, blank or vacant
- Player don't feel right, more emotional– sad, nervous or anxious, feel slow, confused or like in a fog, Sensitivity to light or noise

3. REFER

Trainer will monitor players developing signs and symptoms using 'Sideline assessment tools' for any head injuries, and any **orange signs and symptoms** present will recommend player to be assessed by a medical doctor as soon as possible after the injury:

- Match Day Head Injury Assessment Tool and Referral Form (*13+ years of age*) (2 pages)
[Match-Day-Head-Injury-13-and-older.pdf \(play.afl\)](#)



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<https://www.frankstonrovers.com.au>
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- Match Day Head Injury Assessment Tool and Referral Form (*12 years of age and under*) (3 pages) [Match-Day-Head-Injury-12-and-under_0.pdf \(play.afl\)](#)
- Concussion Recognition Tool 6 (CRT6) [The Concussion Recognition Tool 6 \(CRT6\) \(play.afl\)](#)
- HeadCheck app [Home | HeadCheck Concussion App](#)



APPENDIX 1 Players u12 and Under:

MATCH DAY HEAD INJURY ASSESSMENT & REFERRAL FORM | AGES 12 & UNDER



SIDELINE FORM <small>(to be completed by the examiner (first aider/trainer) on the day of the suspected concussion)</small>	
PLAYER NAME	CLUB
DETAILS OF INCIDENT	
DATE	
OCCURRED AT: <input type="checkbox"/> MATCH <input type="checkbox"/> TRAINING <input type="checkbox"/> OTHER	
BRIEF DESCRIPTION	
IDENTIFICATION OF RED FLAGS <small>(tick all those that apply)</small>	FEATURES OF A SUSPECTED CONCUSSION <small>(tick all those that apply)</small>
Loss of consciousness <input type="checkbox"/> Seizure or convulsions <input type="checkbox"/> Deterioration of conscious state <input type="checkbox"/> Persistent or increasing vomiting <input type="checkbox"/> Double vision <input type="checkbox"/> Severe or increasing headache <input type="checkbox"/> Increasing restlessness, agitation, or combative behaviour <input type="checkbox"/> Neck pain <input type="checkbox"/> Weakness or tingling/burning in the arms or legs <input type="checkbox"/> ACTION: If any one of the boxes above is ticked, an ambulance should be called for immediate transportation to hospital.	Loss of responsiveness <input type="checkbox"/> Motor incoordination (losing balance, staggering, etc) <input type="checkbox"/> Confused/disorientation (not aware of plays or events) <input type="checkbox"/> Impaired memory (unable to recall events before or after the injury) <input type="checkbox"/> Looking/feeling dazed, blank or vacant <input type="checkbox"/> Player reporting symptoms: a. don't feel right <input type="checkbox"/> b. more emotional than usual - sad, nervous or anxious <input type="checkbox"/> c. Feel slowed down, confused or 'feel like in a fog' <input type="checkbox"/> d. Sensitivity to light or noise <input type="checkbox"/> The player is not their normal self, or there is any other concern that they are not quite right <input type="checkbox"/> Other (please list): _____ ACTION: For any suspected concussion, the player needs to see a doctor as soon as practical for assessment, including confirmation of the diagnosis. The player must not return to play or full contact training until they have been cleared by a doctor.
EXAMINER NAME	ROLE AT CLUB
EXAMINER SIGNATURE	DATE

MATCH DAY HEAD INJURY PARENT OR GUARDIAN REPORT | AGES 12 & UNDER



SYMPTOM EVALUATION	0	1	2	3
	NOT AT ALL/NEVER	A LITTLE/RARELY	SOMEWHAT/SOMETIMES	A LOT/OFTEN
has headaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
feels dizzy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has a feeling that the room is spinning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
feels faint	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has blurred vision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has double vision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
experiences nausea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
gets tired a lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
gets tired easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has trouble sustaining attention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
is distracted easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has difficulty concentrating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has problems remembering what he/she is told	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has difficulty following directions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
tends to daydream	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
gets confused	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
is forgetful	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has difficulty completing tasks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has poor problem-solving skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has problems learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
has a sore neck	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do the symptoms get worse with physical activity? YES NO
 Do the symptoms get worse with trying to think? YES NO

OVERALL RATING FOR PARENT/TEACHER/COACH/CARER TO ANSWER
On a scale of 0 to 100% (where 100% is normal), how would you rate the child now?
If not 100%, in what way does the child seem different? _____

MATCH DAY HEAD INJURY CHILD REPORT | AGES 12 & UNDER



PLAYER FORM <small>(to be completed on the day of the suspected concussion)</small>										
PLAYER NAME	CLUB		AGE							
How many concussions has your child had in the past?										
When was the most recent concussion?										
How long was the recovery (time to being cleared to play) for the most recent concussion? <small>(approximate number of weeks)</small>										
Ask the child to rate their symptoms based on how they are feeling now, with "1" representing the symptom is "a little" and "3" representing that the symptom is "a lot"										
SYMPTOM EVALUATION	0	1	2	3						
	NOT AT ALL/NEVER	A LITTLE/RARELY	SOMEWHAT/SOMETIMES	A LOT/OFTEN						
I have headaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I feel dizzy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I feel like the room is spinning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I feel like I'm going to faint	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
Things are blurry when I look at them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I see double	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I feel sick to my stomach	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I get tired a lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I get tired easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I have trouble paying attention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I get distracted easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I have a hard time concentrating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I have problems remembering what people tell me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I have problems following directions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I daydream too much	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I get confused	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I forget things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I have problems finishing things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
I have trouble figuring things out	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
It's hard for me to learn new things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
My neck hurts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						
Do the symptoms get worse with physical activity? <input type="checkbox"/> YES <input type="checkbox"/> NO										
Do the symptoms get worse with trying to think? <input type="checkbox"/> YES <input type="checkbox"/> NO										
OVERALL RATING FOR CHILD TO ANSWER										
On a scale of 0 to 100% (where 100% is normal), how would you rate the child now?	1	2	3	4	5	6	7	8	9	10
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If not 100%, in what way do you feel different? _____										

APPENDIX 2 PLAYERS 13 AND ABOVE:

MATCH DAY HEAD INJURY ASSESSMENT & REFERRAL FORM | AGES 13 & ABOVE



SIDELINE FORM (to be completed by the examiner (first aider/trainer) on the day of the suspected concussion)

PLAYER NAME	CLUB
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DETAILS OF INCIDENT

DATE

OCURRED AT: MATCH TRAINING OTHER

BRIEF DESCRIPTION

1 IDENTIFICATION OF RED FLAGS
(tick all those that apply)

- Loss of consciousness
- Seizure or convulsions
- Deterioration of conscious state
- Persistent or increasing vomiting
- Double vision
- Severe or increasing headache
- Increasing restlessness, agitation, or combative behaviour
- Neck pain
- Weakness or tingling/burning in the arms or legs

ACTION: If any one of the boxes above is ticked, an ambulance should be called for immediate transportation to hospital.

2 FEATURES OF A SUSPECTED CONCUSSION
(tick all those that apply)

- Loss of responsiveness
- Motor incoordination (losing balance, staggering, etc)
- Confused/disorientation (not aware of plays or events)
- Impaired memory (unable to recall events before or after the injury)
- Looking/feeling dazed, blank or vacant

Player reporting symptoms:

- a. 'don't feel right'
- b. more emotional than usual - sad, nervous or anxious
- c. 'feel slowed down', confused or 'feel like in a fog'
- d. Sensitivity to light or noise

The player is not their normal self, or there is any other concern that they are not quite right

Other (please list):

ACTION: For any suspected concussion, the player needs to see a doctor as soon as practical for assessment, including confirmation of the diagnosis. The player must not return to play or full contact training until they have been cleared by a doctor.

EXAMINER NAME	ROLE AT CLUB
EXAMINER SIGNATURE	DATE

MATCH DAY HEAD INJURY ASSESSMENT & REFERRAL FORM | AGES 13 & ABOVE



PLAYER FORM (to be completed on the day of the suspected concussion)

PLAYER NAME	CLUB	AGE
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How many concussions have you had in the past?

When was the most recent concussion?

How long was the recovery (time to being cleared to play) for the most recent concussion? (approximate number of weeks)

SCORE YOURSELF ON THE FOLLOWING SYMPTOMS, BASED ON HOW YOU FEEL RIGHT NOW.

	NONE		MILD		MODERATE		SEVERE	
	0	1	2	3	4	5	6	
Headache	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
'Pressure in head'	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Neck Pain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Nausea or vomiting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Dizziness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Blurred vision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Balance problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sensitivity to light	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sensitivity to noise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Feeling slowed down	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Feeling like 'in a fog'	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
'Don't feel right'	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Difficulty concentrating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Difficulty remembering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Fatigue or low energy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Confusion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Drowsiness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Trouble falling asleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
More emotional	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Irritability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Sadness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Nervous or Anxious	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

PLAYER SIGNATURE	DATE
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(Please take a copy of both the sideline and player form with you to your visit to the doctor)

ROLES AND RESPONSIBILITIES

Trainers/ERC

1. Provide comfort, to player and family/carer and education of the leagues return to play procedure after a suspected concussion (FRJFC has list of local doctors and emergency departments on the club room notice board)
2. Give parent/ carer- stages of Return to play and Medical Clearance
3. Email completed side line injury assessment forms for GP he Stages of Graded return to play.

For Teams with a medical Doctor as Trainer: Assessment Tool 6th Edition (SCAT6) completed assessment of at least 10 minutes in change room (or quiet environment with another club official) with parent/guardian present. If diagnosis of concussion is confirmed then the player must not be returned to play or training on the day.

In cases where the doctor has conducted a thorough sideline assessment and is satisfied that the player does not have a concussion, then the doctor can clear the player to return to play.



As the *features of concussion may be delayed or evolve over several hours* there is uncertainty about the diagnosis after an initial assessment, the player must undergo repeat SCAT6 assessment after the match.

The ERC

Follow up with trainer and manager and coaching teams for confirmed concussion return to play procedure and make a phone call to the parents on behalf of the club in the week following the match to follow up on the injury.

APPENDIX 3 RETURN TO PLAY FACT SHEET

FIGURE 3. STAGES OF GRADED RETURN TO PLAY

STAGE 1: RELATIVE REST 1		
ACTIVITY Relative rest Gentle day-to-day activities - as guided by symptoms. Minimise screen time (TV, computer/homework/work, phone/social media and gaming)	DURATION 1-2 days	CRITERIA TO PROGRESS Nothing specific - should progress after 1-2 days
STAGE 2: RECOVERY 2		
ACTIVITY i. Daily activities that do not provoke symptoms Increase day-to-day activities - as guided by symptoms. Include short walks. Limit screen time (TV, computer/homework/work, phone/social media and gaming) - duration depends on symptoms No team training drills. No resistance training.	DURATION Minimum 1 day	CRITERIA TO PROGRESS Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
ii. Light aerobic exercise Start light activity e.g., walking, jogging or cycling at a slow to medium pace. Aim for about 50-60% maximum heart rate (can carry a conversation when exercising) No team training drills. No resistance training.	DURATION Minimum 1 day	CRITERIA TO PROGRESS Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
iii. Moderate aerobic exercise Start moderate aerobic exercise e.g., walking, jogging or cycling at a medium pace. Aim for about 60-80% maximum heart rate. May continue with moderate aerobic exercise over a number of days/ sessions if still has symptoms related to concussion. No team training drills. No resistance training.	DURATION Minimum 2 days	CRITERIA TO PROGRESS Progress if concussion-related symptoms resolved or not worsened from their previous level (either during activity or by the next day)
iv. High intensity aerobic exercise Start high-intensity aerobic exercise (e.g. running or cycling at high intensity) Up to maximum heart rate. No team training drills. Can commence gentle resistance training (50-75% of usual loads)	DURATION Minimum 2 days	CRITERIA TO PROGRESS Progress if a) Complete recovery of all concussion-related symptoms and signs at rest and with high intensity training; b) Have returned to school or work (without any need for medications);
STAGE 3: GRADED LOADING PROGRAM 3		
ACTIVITY i. Non-contact training Return to full team training sessions - <u>non-contact activities only</u> Minimum of 2-3 training sessions with no consecutive days of football training (to allow for rest and recovery)	DURATION Minimum 7 days	CRITERIA TO PROGRESS Progress if remaining completely free of any concussion-related symptoms*
ii. Limited contact training Full team training allowed - able to participate in drills with incidental and/or controlled contact (including tackling). <u>No consecutive days of training (i.e. must have 'non-contact activity' days in between training sessions)</u>	DURATION Minimum of 7 days to progress through graded contact training	CRITERIA TO PROGRESS Progress if: a) Remaining completely free of any concussion-related symptoms* b) Player is confident to return to full contact training c) Player has medical clearance to return to full contact training
iii. Full contact training		CRITERIA TO PROGRESS Progress if: a) Remaining completely free of any concussion-related symptoms* b) Player is confident to return to play
STAGE 4: UNRESTRICTED RETURN TO PLAY 4		

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



APPENDIX 4 MEDICAL CLEARANCE

MEDICAL CLEARANCE FORM

RETURN TO PLAY CLEARANCE FORM



PLAYER DETAILS

PLAYER NAME	
PLAYER DOB	
CLUB	

The player (or parent / guardian on behalf of their child) must complete the declaration and take the form to a medical doctor to receive medical clearance before returning to full contact training or playing Australian Football.

The player (or parent / guardian on behalf of their child) must return the completed and signed form to their club, who may retain a copy and provide it to the league if requested.

PLAYER DECLARATION

I (or my child if applicable) sustained a concussion on / /

I (or my child if applicable) have successfully returned to school/study/work (if applicable) without any issues.

I (or my child if applicable) have progressed through all of the stages of the AFL Concussion Management Protocol (i.e. 1. Relative Rest, 2. Recovery and 3. Graded Loading Program) and have had no symptoms since entering the Graded Loading Program.

PLAYER SIGNATURE	DATE
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(or parent / guardian if Player 18 or under)

MEDICAL PRACTITIONER CERTIFICATION

I assessed (player) on / /

Based on the information provided to me, and my clinical assessment, I can confirm that the player has recovered from their concussion (including full resolution of concussion-related symptoms and signs, return to work/study) and has completed a graded loading program without any recurrence of symptoms or signs.

I understand that the earliest that a player can return to play (following successful completion of a graded loading program and with medical clearance) is on the 21st day after a concussion, where the day of concussion is designated day "0".

I understand that a more conservative approach and specialist review may be required in the following:

- A second concussion within the same season (or three concussions within the previous 12 months),
- An apparent lower or reducing threshold for concussion (whereby the player appears to sustain a concussion or increasing symptoms with reduced force of head impact),
- Failure to progress through their return-to-play program due to a recurrence or persistence of symptoms, or
- Self-reported concerns with brain function.

In my opinion, the player is now medically fit to return to full contact training. If they complete full contact training without any issues or concussion symptoms, they can return to playing Australian Football.

SIGNATURE	DATE
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RETURN TO PLAY PROTOCOLS

FRJFC adheres to the AFL guidelines and enforce a mandatory **minimum 21-day return to play** if a player is diagnosed with concussion and players must obtain a **written medical clearance** from a Medical Practitioner return to *training and playing*.

The four stages for return to play following concussion:

- (1) a **brief period of relative rest** (24-48 hours) a child to miss a day or two of school.
- (2) a **period of recovery** (light physical and cognitive activity)
- (3) a **graded loading program** (with medical clearance required for return to full contact training)
 1. Player must obtain a written medical clearance from a Medical Practitioner (i.e. General Practitioner, Sports Doctor, Neurologist) to return to training and playing. The medical clearance must state that the player has been cleared from a concussion injury.
 2. Player must only recommence 'usual contact' training when symptom free and physically able to complete full training sessions.
 3. Players with symptoms persisting for more than 5 days (post the concussion) seek specialist opinion
- (4) **Unrestricted return to play.**

SUSTAINING A CONCUSSION OUTSIDE OF FOOTBALL

If a Player sustains a diagnosed concussion outside of AFLSE matches or training, the Return to Training and Playing Guidelines for players following a Concussion, as above and a medical clearance.

REDUCTION OF CONCUSSION AND HEAD IMPACTS

Pre-Season: seek club volunteers within teams for Trainers with first Aid qualifications and parent helpers to complete trainer first aider short meeting prior to season commencing. Coaches are provided with tackling techniques to reduce head injuries links.

Tackling technique and practical training drills to reduce Head Neck injuries:

- [AFLW_6298_PTP_GroundBall_FA.pdf \(mailchimp.com\)](#)
- [AFLW_6298_PTP_Receiving_Tackling_FA.pdf \(mailchimp.com\)](#)
- [AFLW_6298_PTP_Aerial_Contest_FA.pdf \(mailchimp.com\)](#)
- [AFLW_6298_PTP_Tackling_FA.pdf \(mailchimp.com\)](#)

Registration: Families and Players consideration of education, protective equipment, training and games of strictly no mouthguard no play policy.



Training and Games:

A qualified Trainer/ First Aider, Emergency Response Coordinator, or by other volunteers with medical or allied health qualifications and experience will be on present and access to first aid kits and stretchers each game and training.

ERC: Industry currency and information via the following resources and current research is implemented and educated on best reduction practices:

- Monitoring industry updates for policy updates
- Ongoing monitoring and stocktake of club First Aid supplies
- Educate and promote all club members of best practice, laws and league requirements.
- Complete training matrix for volunteers completion of First Aid qualifications and Concussion Management Concussion Management Guidelines module.
- Follow AFL Community Concussion Guidelines during home games for multiple injuries and care for injured players

MANAGEMENT OF MORE COMPLICATED CASES

A player with symptoms lasting 4 weeks or due to **recurrence of symptoms must not return** to play should seek review with a doctor with expertise in the management of concussion.

A player with 2 or more concussions in the same season, or 3 concussions within 12 months will be monitored by the Emergency Response coordinator and discussed with the families of level of risk.

REFERENCES

The Management of Sport-Related Concussion in Australian Football (as amended from time to time) is adopted as part of the National Community Football Policy Handbook.

Southeast Junior Competition Bi Laws 2024; If a player has suffered a concussion or is suspected of having a concussion, they must be medically assessed as soon as possible after the injury and must NOT be allowed to return to play in the same game/practice session.

An accredited first aider at every game and the basic rules of first aid should be used when dealing with any player who is unconscious or injured. The Leagues respectively will refer to **the AFL National Policy**. The player should not return until such time as a doctor's certificate has been obtained indicating they are fit to play. This process is to be managed at Club level and is to be enforced within each team manager and the Trainers and or Emergency Response Co Or Concussion in sport - AIS and Aust Gov website and resources Head Injury Assessment Form - for trainers Pocket Concussion Tool Concussion Guidelines for Players Royal Children's Hospital - return to sport after concussion head injury

Royal Children's Hospital - Head Injury Fact Sheet EFL - medical centres (concussion & injuries)
Concussion Guidelines for Parents Concussion Guidelines for Coaches Concussion Presentation Video : Concussion in children

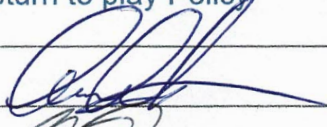



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'No Mouthguard, No Play' The Australian Dental Association and Sports Medicine Australia have a Mouthguard Policy for sports clubs to implement a 'no mouthguard, no play' policy. Sports Mouthguards | teeth.org.au

Australian Institute of Sport (AIS) Concussion and Brain Health Position Statement 2024 *"Any athlete under the age of 19 should complete the more conservative Graded Return to Sport Framework (GRTSF) for community and youth. This requires those under 19 years of age and those without a dedicated HCP to guide recovery, to be symptom free for 14 days (at rest) before return to contact training, and not return to competitive contact sport until a minimum of 21 days from the time of concussion. The temporary exacerbation of mild symptoms with exercise is acceptable, as long as the symptoms quickly resolve at the completion of exercise, and as long as the exercise-related symptoms have completely resolved, before resumption of contact training."*

"To be clear, that is not 14 days from the time of concussion. It is 14 days from when the athlete becomes symptom-free. The day of the concussive incident is deemed day 0 of the GRTSF."

Concussion and Return to play Policy		Approval Date:	30/1/2025
		Review Date:	30/1/2026
		Version No:	1.1
President:	Sign: 	Name:	Aaron Gale
Vice-President:	Sign: 	Name:	Natasha Degrassi



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