

## Create a supportive and concussion aware school culture

### Example: Bill Crothers Secondary School



When the doors of [Bill Crothers Secondary School](#) – a unique publicly-funded sport-focused high school in York Region – opened in September 2007, the teachers and administrators recognized that a lot of students were experiencing concussions.

There are approximately 1,500 students at Bill Crothers S.S. and as part of their application to the school, all must demonstrate a connection to sport. Youth play on sports teams at school as well as outside school, and so they have a much higher incidence of concussion. More than 100 students are medically diagnosed with concussions each year, and the number being reported is growing.

In 2007, not all students would report their concussions because there was no formal process or protocol in place. Then-principal Becky Green, and head of Guidance and Career education, Pauline King-Taylor, looked at each other and said, “How are we going to handle all these concussions?” So they started a committee to develop their own local school concussion protocol.

Becky Green is now a superintendent in the York Region District School Board (YRDSB),

as well as a passionate concussion champion. As Bill Crothers S.S. Principal at the time, Becky involved the school with a research study led by Dr. James Carson, to examine how teachers and administrators could accommodate school reintegration and learning so kids could participate without aggravating their symptoms. The committee recognized that students recovering from concussion faced physical, cognitive and emotional challenges – these were not well-understood or visible, but students needed to be supported and accommodated.

The committee created a concussion protocol, based on research guidelines and best practice. The Bill Crothers S.S. “Green Folder” established team communication regarding student progression, accommodations required and collaborative communication to support students in crisis (whether they needed to wear sunglasses in class or not look at a computer screen, etc.).

The Bill Crothers S.S. concussion protocol was so impressive and successful that it was later adapted into a board-wide protocol for all YRDSB schools to follow.



## What is the Green Folder?

The Green Folder incorporates a package of documents and a series of steps (see below) to help youth return-to-school after a concussion.

### Green Folder documents:

#### **"Recognizing and monitoring symptoms during concussion recovery"**

- Resource for students and parents to self-monitor a concussion. Lists and explains physical, cognitive and emotional symptoms.

#### **"Student tracking for concussion management protocol"**

- Medical professional signs to say that a concussion has been diagnosed; parent signs to say they understand their child is on concussion management protocol; eventually medical professional signs to say the student is no longer experiencing concussion symptoms.

#### **"Return-to-learn protocol"**

- Explains the stages of recovery and what to do at each stage and when to return-to-school. Medical signature to return-to-school.

#### **"Return-to-physical activity protocol"**

- Lists and explains the stages of concussion and when to do what. Medical signature to return to physical activity without restriction.

#### **"Guidelines for students during the concussion management protocol of concussion recovery"**

- Chart explaining what to do at each stage for students, parents and teachers.

#### **"Summary of in-school accommodations for students recovering from concussion"**

- Lists checkboxes for accommodations the student may require in their environment, physical activity, instruction, assessment and evaluation.

### Green Folder process:

**Step 1:** Upon return-to-school, the student goes to the guidance office to report that they have a concussion (or the parent calls the school).

**Step 2:** The student's guidance counsellor sends out an email to all of the student's teachers and coach to say the student is following the concussion protocol, which means no testing and the need to set reasonable goals and deadlines based on the student's stage of recovery.

**Step 3:** Becomes a conversation between the student, parent(s) and teacher(s) about what they can do. The goal is to get students back to full academic workload, including assignments and tests, without aggravating their symptoms. Students often fall behind, but the key is that teachers understand this, are flexible about deadlines, and once the student is ready, teachers are accommodating by giving the student time to catch up. Teachers have to exercise professional judgment and collaborate with the team.

**Step 4:** Medical sign-off for return-to-school and return-to-play. The student needs a doctor to sign the medical forms in the Green Folder to say the student is ready to return-to-school and sport.



## What has changed since the Green Folder protocol started?

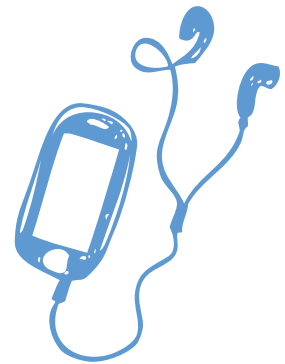
"Before the protocol, kids just tried to struggle through and they couldn't advocate for themselves," says King-Taylor. "Teachers and parents didn't have the knowledge. The mentality was 'tough it out' and get through it."

"Sometimes parents wouldn't even call the school to report their child's concussion. They would tell their kid to take a couple of days off then get back to school for fear of falling behind." Even with the protocol in place, Bill Crothers S.S. staff still deal with very anxious parents who worry about their child missing school and they need to convince them to keep them home. "We have kids coming into the guidance office who have headaches, don't feel well and just want to put their heads down on the table. Then we have to call the parents to come and get them," says King-Taylor. Students can't return-to-school until they are at Stage 4 of the protocol and can do 20 minutes of homework on their own without aggravating their symptoms.

Understanding the signs and symptoms of concussion is a new and evolving area of knowledge for students, parents, teachers and coaches. Gaps in any area of the team can lead to aggravation of symptoms. Initial rest and then appropriate activity progression leads to optimal recovery patterns.

## Returning to school

When kids do come back to school, it may only be for half days initially before starting back fulltime. Concussed kids can go into the guidance office for a break at school because it's quiet. "I have a student right now who spends her photography class in guidance because the class is noisy and aggravates her symptoms," says King-Taylor. The student is currently excused from that class, but eventually she will have to go back and work with the teacher to figure out what she missed. "The teacher will have to re-work some things, maybe remove some assignments and make something else worth more. There are all sorts of ways that teachers can use their professional judgement to ensure the curriculum expectations of a course are met," says King-Taylor.



### Example

A specific example in History might be substituting a writing assignment with a photo essay. This reduces the cognitive load as well as time in front of a screen and keyboard.

Another substitution for this could also be an oral test instead of a written test. The oral test is not a regurgitation of knowledge, rather an exploration of the understanding of the concept from the student's perspective.

**Daraius Bharucha**

Head, Department of History



## Accommodating students when they return

Bill Crothers S.S. students often spend their weeknights at practice and their weekends at tournaments, so teachers and administrators always had to be more flexible and accommodating with students getting their school work done. Because they were already accommodating for sport, when they realized they also needed to accommodate for concussion, they were already open to the idea.

"Media makes people more aware of concussion but in terms of really dealing with it, how would a math teacher accommodate? Or a history teacher? With our departments, we have all the other teachers who you can ask 'Have you ever dealt with a concussed student in your class?' The majority of them are saying yes. Whereas in other schools, it may not be the same frequency so they really have to think about, 'How would I accommodate? Or what would I do?' Whereas here, it's 'Oh yeah, well this is what I've done. I've changed this assignment to do this or that.'"

"If you know that the student can't look at a screen or do research, you just have to think outside the box and think 'How can I still have the student work on this but in a way that isn't going to aggravate the symptoms?'" says King-Taylor.

"You really have to know what aggravates or what they shouldn't be doing. The key base knowledge is really important. I always give the simple example of, you can't read the book but you can listen to the book – get it on audiobooks so you can still participate in class."

## What is the ultimate goal of the Green Folder program?

The ultimate goal is to support students as they manage their concussion, without falling behind or having to extend their time in school.

"It's still a work in progress. We're not done. We're still trying to make things better. Even in the way that we might handle a certain case, I think we're getting a bit better with each case we handle," says King-Taylor.

$$y = mx + b$$

### Example

Accommodations that we have used in Mathematics (after student is cleared for testing):

1. Small, quiet setting, with limited lighting.
2. Chunking of tests – same content, but the test may be broken up into 2 or 3 parts and written over 2-3 days (at times, we even break it up by content to minimize the amount of strain – for example: graphing on one day ... solving on another ... word problems on another)
3. Free to take breaks while writing the tests.
4. If there is a unit with lots of formulas, we allow them a sheet of formulas.
5. Extended timelines for tests/assignments.

### Bill Cheung

Head, Department of Mathematics