

• APPENDIX J • CONCUSSION SAFETY PROTOCOL

Appendix J – Concussion Safety Protocol

As of October 2019

AJ1.0 BILL 193, ROWAN'S LAW (CONCUSSION SAFETY), 2018

- AJ1.1 Bill 193, an Act to enact Rowan's Law (Concussion Safety) received Royal Assent on March 7, 2018 in the Legislative Assembly of Ontario. A copy of Bill 193 is provided as Attachment "A".
- AJ1.2 The Act imposes various requirements on sport organizations, which are defined as persons or entities that carry out, for profit or otherwise, a prescribed activity in connection with an amateur competitive sport and that satisfy such other criteria as may be prescribed.

AJ2.0 REQUIREMENTS OF BILL 193

- AJ2.1 A sports organization must not register an individual who is under the prescribed age in a sports activity unless the individual confirms that they have reviewed the concussion awareness resources approved by the Minister of Tourism, Culture, and Sport. The regulations may provide for other circumstances where a sport organization must require individuals to confirm that they have reviewed the resources. For individuals under 18 years of age, the parent or legal guardian of the individual must also confirm that they have reviewed the resources. Individuals who act as a team official or in other prescribed positions for a sport organization must also confirm that they have reviewed the resources.
- AJ2.2 A sports organization must establish a concussion code of conduct. Similar to the rules described above, various individuals must confirm that they have reviewed a sports organization's concussion code of conduct.
- AJ2.3 A sports organization must establish a removal-from-sport protocol for athletes who are suspected of having sustained a concussion. The protocol must, among other things, establish a specific process to implement the immediate removal of an athlete and must designate persons who are responsible for ensuring the removal of the athlete and ensuring that they do not return to training, practice or competition, except in accordance with the sport' organization's return-to-sport protocol.
- AJ2.4 A sports organization is required to establish a return-to-sport protocol with respect to athletes who have sustained a concussion or are suspected of having sustained a concussion. The protocol must, among other things, establish a specific process to implement the return of an athlete to training, practice or competition and must

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designate persons who are responsible for ensuring that an athlete does not return until permitted to do so in accordance with the protocol.

AJ3.0 DEFINITIONS

AJ3.1 "concussion awareness resources" means the information or materials approved by the Minister of Tourism, Culture, and Sport respecting concussion prevention, detection and management.

AJ4.0 REGISTRATION OF INDIVIDUALS AND TEAM OFFICIALS (as per AJ2.1)

- AJ4.1 Registered teams in the F.B.A.O., shall not register an individual who is under 18 years of age in the sport of broomball unless the individual gives the F.B.A.O. confirmation that they have, within 12 months before registration reviewed concussion awareness resources and the F.B.A.O.'s concussion code of conduct [AJ5.0].
- AJ4.2 For individuals under 18 years of age, the parent or legal guardian of the individual must also give the F.B.A.O. confirmation that they have reviewed concussion awareness resources and the F.B.A.O.'s concussion code of conduct [AJ5.0].
- AJ4.3 Registered teams in the F.B.A.O., shall not register an individual to serve as a team official in the sport of broomball unless the individual gives the F.B.A.O. confirmation that they have reviewed the concussion awareness resources and the F.B.A.O.'s concussion code of conduct at the prescribed times and in accordance with the prescribed requirements.
- AJ4.4 The Concussion Awareness Confirmation Form to be signed and provided from the individual player, parent or legal guardian, and a team official, will be available on the F.B.A.O. website. A sample copy of the Concussion Awareness Confirmation Form (Option 1 and Option 2) are provided as Attachment "B" for reference, and may be updated from time to time for clarity.
- AJ4.5 The Concussion Awareness Confirmation Forms must be submitted to the Region, through individual teams and/or leagues where the individual player and/or team official is registered; and in turn the Region will provide a copy of the Form to the F.B.A.O.

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AJ5.0 CONCUSSION CODE OF CONDUCT (as per AJ2.2)

- AJ5.1 The F.B.A.O.'s concussion code of conduct will be used to protect a player's health and remove all doubt with respect to the proper process that team officials and members must follow.
- AJ5.2 A player suspected of a concussion must stop play immediately; whether this happens on or off the ice, or during in a game, or practice. The team official(s) must remove the player from any participation immediately.
- AJ5.3 The three-page "Concussion Response Tool" (C.R.T.) can be used to assist in the assessment of the individual, and assists in providing a record for medical responders, as well as insurance submissions. A copy of the blank C.R.T. is provided as Attachment "C" for reference.
- AJ5.4 Prior to being allowed to return to the ice the player must get evaluated by registered medical professional. The registered medical professional's diagnosis will determine the next step(s). The player will not be allowed to return to play until he/she has a note by a registered medical professional.
- AJ5.5 If the player is cleared to return to the ice, the team official(s) will closely monitor the player to ensure there are no new symptoms.
- AJ5.6 Should the player be diagnosed with a concussion he/she SHALL follow the removal-from-sport protocol and as outlined in the concussion awareness resources approved by the Minister of Tourism, Culture, and Sport.
- AJ5.7 Players that are diagnosed with a concussion SHALL follow the return-to-sport protocol that is outlined below and in the concussion awareness resources approved by the Minister of Tourism, Culture, and Sport.
- AJ5.8 Any members/players found to have been in violation of this Concussion Code of Conduct will be immediately suspended until the information has been reviewed by the applicable Region and F.B.A.O.; and a disciplinary hearing has taken place to determine any further action.

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AJ5.9 It is recommended that a baseline test be completed prior to playing sports such that when a player is suspected of a concussion or has been diagnosed with a concussion that they are able to.

AJ6.0 REMOVAL-FROM-SPORT PROTOCOL (as per AJ2.3)

- AJ6.1 The protocol must, among other things, establish a specific process to implement the immediate removal of an athlete and must designate persons who are responsible for ensuring the removal of the athlete and ensuring that they do not return to training, practice or competition, except in accordance with the sport' organization's return-to-sport protocol.
- AJ6.2 Head injuries can be associated with serious and potentially fatal brain injuries.
- AJ6.3 <u>STEP 1: RED FLAGS</u> If there is concern after an injury including whether ANY of the following signs are observed or complaints are reported then the player should be safely and immediately removed from play/game/activity. If no registered medical professional is available, then call "911" for an ambulance for urgent medical assessment:
 - 1) neck pain or tenderness,
 - 2) severe or increasing headache,
 - 3) deteriorating conscious state,
 - 4) double vision,
 - 5) seizure or convulsion,
 - 6) vomiting,
 - 7) weakness or tingling/burning in arms or legs,
 - 8) loss of consciousness, and/or
 - 9) increasingly restless, agitated or combative.

AJ6.4 REMEMBER

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Assessment for a spinal cord injury is critical.
- Do not attempt to move the player (other than required for airway support) unless trained to do so safely.
- Do not remove helmet or any other equipment unless trained to do so safely.
- If there are no RED FLAGS, identification of possible concussion should proceed to the following steps.

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- AJ6.5 <u>STEP 2: OBSERVATION SIGNS</u> Visual clues that suggest possible concussion include:
 - 1) lying motionless on the playing surface,
 - 2) slow to get up after a direct or indirect hit to the head,
 - 3) disorientation or confusion, or an inability to respond appropriately to questions,
 - 4) blank or vacant look,
 - 5) balance, gait difficulties, motor in coordination, stumbling, slow laboring movements, and/or
 - 6) facial injury after head trauma.
- AJ6.6 <u>STEP 3: SYMPTOMS</u> Symptoms that include:
 - 1) headache,
 - 2) "pressure in head",
 - 3) balance problems,
 - 4) nausea or vomiting,
 - 5) drowsiness,
 - 6) dizziness,
 - 7) blurred vision,
 - 8) sensitivity to light,
 - 9) sensitivity to noise,
 - 10) fatigue or low energy,
 - 11) "don't feel right",
 - 12) more emotional,
 - 13) more irritable,
 - 14) sadness,
 - 15) nervous or anxious,
 - 16) neck pain,
 - 17) difficulty concentrating,
 - 18) difficulty remembering,
 - 19) feeling slowed down, and/or
 - 20) feeling like "in the fog".
- AJ6.7 <u>STEP 4: MEMORY ASSESSMENT</u> (athletes older than 12 years) Failure to answer any of these questions (modified appropriately for each age group and/or advancement in the sport) correctly may suggest a concussion:
 - 1) Which venue (arena) are we at today?
 - 2) Which period of the game is it now?
 - 3) Which team scored the last goal?

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- 4) What team did you play in the last game?
- 5) Did your team win the last game?
- AJ6.8 Athletes with suspected concussion should:
 - 1) NOT be left alone initially (at least for the first 1-2 hours),
 - 2) NOT drink alcohol,
 - NOT use recreational/prescription drugs,
 - 4) NOT be sent home by themselves they need to be with a responsible adult, and
 - 5) NOT drive a motor vehicle until cleared to do so by a registered medical professional.
- AJ6.9 Medical examination Following an examination by a registered medical professional and prior to the individual returning to physical activity, a team official must be informed of the results. If NO concussion is diagnosed, then the player may return to physical activities. If a concussion is diagnosed, then the medically supervised gradual return-to-sport is put in place.

AJ7.0 RETURN-TO-SPORT PROTOCOL (as per AJ2.4)

- AJ7.1 A player with a diagnosed concussion follows a medically supervised and gradual Return-To-Sport Physical Activity (R2P) plan. It is critical to recovery that the individualized R2P plan be developed through a collaborative team approach that includes the concussed player, their parents/legal guardians, their team official(s), and a registered medical professional. Ongoing communication and monitoring by all members of this team will be essential to successful recovery.
- AJ7.2 R2P STEP 1 Limit cognitive activities which provoke symptoms (e.g., activities requiring mental concentration such as reading, television, video games, texting, emailing), and physical (e.g., activities requiring physical exertion) rest until the symptoms begin to show improvement (minimum 24 to 48 hours). This is determined by the registered medical professional in consultation with the concussed individual and parents/legal guardians. The most important treatment for concussion is rest. A youth does not attend school during R2P STEP 1. In order to proceed to R2P STEP 2, the concussed player or parent/legal guardian must report back to their team official(s) that the player is symptom free.

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- AJ7.3 R2P STEP 2 The activities are limited to individual light aerobic exercise only (e.g., walking or stationary cycling). The restrictions are no resistance/weight training, no competition (including practices, scrimmages), no participation with equipment or with other participants, no drills, and no body contact. In order to proceed to R2P STEP 3, the concussed player or parent/legal guardian must report back to their team official(s) that the player is symptom free.
- AJ7.4 <u>R2P STEP 3</u> The activities are limited to individual sport specific exercise only (e.g., running, shooting). The restrictions are no resistance/weight training, no competition (including practices, scrimmages), no body contact, no head impact activities, or other jarring motions (e.g., high speed stops, hitting a baseball with a bat, shooting a broomball with broom).
- AJ7.5 <u>R2P STEP 4</u> The activities are limited to where there is no body contact (e.g., dance, badminton, volleyball), light resistance/weight training, non-contact practices and non-contact sport specific drills (e.g., ball drills, shooting drills). The restrictions are no activities that involve body contact, head impact, or other jarring motions (e.g., high speed stops, hitting a baseball with a bat, shooting a broomball with broom).

<u>NOTE – Medical Clearance</u>: In order for a concussed individual to move from R2P Step 4 to R2P Step 5 the individual must provide written documentation from a registered medical professional to their team official(s). The documentation must indicate that the individual is symptom-free and able to return to full participation in physical activity before the individual can proceed to R2P-Step 5.

- AJ7.6 R2P STEP 5 The activities include full participation in regular physical activities in non-contact sports. The restrictions are no competition (e.g., games, meets, events), that involve body contact.
- AJ7.7 <u>R2P STEP 6 [Contact Sports Only]</u> The activities include full participation in all physical activities, including contact sports. There are no restrictions.

Additional Information:

- Physical activities can cause concussion symptoms to reappear.
- The STEPS are not days each step must take a minimum of 24 hours and the length of time needed to complete each step will vary based on the severity of the concussion.
- The concussed individual should be regularly monitored for the return of any

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signs and/or symptoms of concussion. If signs and/or symptoms return, consult with a registered medical professional.

AJ8.0 UPDATES TO APPENDIX J – CONCUSSION SAFETY PROTOCOL

AJ8.1 Updates to this Concussion Safety Protocol will be provided on a regular basis, since Bill 193 just received Royal Assent in March of 2018. New concussion awareness resources approved by the Minister of Tourism, Culture, and Sport, along with input from other sports, will be provided.

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ATTACHMENT "A"

Legislative Assembly of Ontario



Assemblée législative de l'Ontario

2ND SESSION, 41st LEGISLATURE, ONTARIO 67 ELIZABETH II, 2018

Bill 193

(Chapter 1 of the Statutes of Ontario, 2018)

An Act to enact Rowan's Law (Concussion Safety), 2018 and to amend the Education Act

The Hon. D. Vernile
Minister of Tourism, Culture and Sport

1st Reading December

December 14, 2017

2nd Reading

February 21, 2018

3rd Reading

March 6, 2018

Royal Assent

March 7, 2018





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EXPLANATORY NOTE

This Explanatory Note was written as a reader's aid to Bill 193 and does not form part of the law.

Bill 193 has been enacted as Chapter 1 of the Statutes of Ontario, 2018.

The Bill enacts Rowan's Law (Concussion Safety), 2018. The Act imposes various requirements on sport organizations, which are defined as persons or entities that carry out, for profit or otherwise, a prescribed activity in connection with an amateur competitive sport and that satisfy such other criteria as may be prescribed. Here are highlights of those requirements:

- 1. A sport organization must not register an individual who is under the prescribed age in a sports activity unless the individual confirms that they have reviewed the concussion awareness resources approved by the Minister of Tourism, Culture and Sport. The regulations may provide for other circumstances where a sport organization must require individuals to confirm that they have reviewed the resources. For individuals under 18 years of age or such other prescribed age, the parent or guardian of the individual must also confirm that they have reviewed the resources. Individuals who serve as a coach or in other prescribed positions for a sport organization must also confirm that they have reviewed the resources.
- A sport organization must establish a concussion code of conduct. Similar to the rules described above, various individuals must confirm that they have reviewed a sport organization's concussion code of conduct.
- 3. A sport organization must establish a removal-from-sport protocol for athletes who are suspected of having sustained a concussion. The protocol must, among other things, establish a specific process to implement the immediate removal of an athlete and must designate persons who are responsible for ensuring the removal of the athlete and ensuring that they do not return to training, practice or competition, except in accordance with the sport organization's return-to-sport protocol.
- 4. A sport organization is required to establish a return-to-sport protocol that applies with respect to athletes who have sustained a concussion or are suspected of having sustained a concussion. The protocol must, among other things, establish a specific process to implement the return of an athlete to training, practice or competition and must designate persons who are responsible for ensuring that an athlete does not return until permitted to do so in accordance with the protocol.

The Act also proclaims the last Wednesday in September as Rowan's Law Day. The Minister may, however, declare that Rowan's Law Day is on another day for any particular year.

The Act requires the Minister to prepare and publish reports on the progress made in implementing all or some of the recommendations set out in the report of the Rowan's Law Advisory Committee. Deadlines for the first and subsequent reports are specified.

The Act permits the Lieutenant Governor in Council to make regulations under the Act, including regulations that exempt persons or entities from any provision of the Act or regulations. In addition, the regulations may apply differently to different sport organizations and to different sports or classes of sports.

The Bill also amends the *Education Act*. Part XIII.1 of the Act is renamed "Pupil Health" and a new section is added to it. The new section authorizes the Minister to establish and require boards to comply with policies and guidelines respecting concussions in pupils. The Minister is also given authority to make regulations prescribing requirements respecting concussions in pupils of private schools and to require private schools to comply with the requirements. The policies, guidelines or regulations must be consistent with *Rowan's Law (Concussion Safety)*, 2018

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Bill 193 2018

An Act to enact Rowan's Law (Concussion Safety), 2018 and to amend the Education Act

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

Definitions

1 In this Act,

- "concussion awareness resources" means the information or materials approved by the Minister respecting concussion prevention, detection and management; ("ressources de sensibilisation aux commotions cérébrales")
- "Minister" means the Minister of Tourism, Culture and Sport or such other member of the Executive Council as may be assigned the administration of this Act under the Executive Council Act; ("ministre")
- "prescribed" means prescribed by the regulations; ("prescrit")
- "sport organization" means a person or entity that carries out, for profit or otherwise, a prescribed activity in connection with an amateur competitive sport and that satisfies such other criteria as may be prescribed. ("organisation sportive")

Concussion awareness resources

2 (1) A sport organization shall not register an individual who is under the prescribed age in a sports activity unless the individual gives the sport organization confirmation that they have, within 12 months before the registration or within such other period as may be prescribed, reviewed the concussion awareness resources.

Requirement, other prescribed circumstances

(2) A sport organization shall, in the prescribed circumstances and in accordance with the prescribed requirements, require an individual who is under the prescribed age to give the sport organization confirmation that they have reviewed the concussion awareness resources.

Requirement, individuals under 18

(3) If the individual referred to in subsection (1) or (2) is under 18 years of age or such other age as may be prescribed, the individual's parent or guardian must also give the sport organization confirmation that they have reviewed the concussion awareness resources.

Requirement, coaches, etc.

(4) A sport organization shall not permit an individual to serve as a coach for the sport organization or to serve in any other prescribed position, such as an official, in respect of the sport organization unless the individual gives the sport organization confirmation that they have reviewed the concussion awareness resources at the prescribed times and in accordance with the prescribed requirements.

Additional resources, etc., from sport organization

(5) Nothing in this section prevents a sport organization from offering additional resources or information relating to concussions to any individuals.

Materials to be publicly available

(6) The Government of Ontario shall ensure that the concussion awareness resources are made available to the public.

Concussion code of conduct

3 (1) A sport organization shall establish a concussion code of conduct that satisfies the requirements set out in the regulations.

Requirement on registration

(2) A sport organization shall not register an individual who is under the prescribed age in a sports activity unless the individual gives the sport organization confirmation that they have, within 12 months before the registration or within such other period as may be prescribed, reviewed the sport organization's concussion code of conduct.

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Requirement, other prescribed circumstances

(3) A sport organization shall, in the prescribed circumstances and in accordance with the prescribed requirements, require an individual who is under the prescribed age to give the sport organization confirmation that they have reviewed the sport organization's concussion code of conduct.

Requirement, individuals under 18

(4) If the individual referred to in subsection (2) or (3) is under 18 years of age or such other age as may be prescribed, the individual's parent or guardian must also give the sport organization confirmation that they have reviewed the sport organization's concussion code of conduct.

Requirement, coaches, etc.

(5) A sport organization shall not permit an individual to serve as a coach for the sport organization or to serve in any other prescribed position, such as an official, in respect of the sport organization unless the individual gives the sport organization confirmation that they have reviewed the sport organization's concussion code of conduct at the prescribed times and in accordance with the prescribed requirements.

Code of conduct to be made available

(6) A sport organization shall, in accordance with the regulations, ensure that its concussion code of conduct is made available to individuals referred to in subsections (2) to (5) and to other persons as may be prescribed.

Protocols

Removal-from-sport protocol

- 4 (1) Every sport organization shall establish a removal-from-sport protocol for its athletes that,
 - (a) establishes, in accordance with such requirements as may be prescribed, a specific process to implement the immediate removal of an athlete who is suspected of having sustained a concussion;
 - (b) designates persons who are responsible for ensuring that,
 - (i) an athlete is immediately removed from further training, practice or competition if the athlete is suspected of having sustained a concussion,
 - (ii) if the athlete is under 18 years of age or such other age as may be prescribed, the parent or guardian is informed of the removal,
 - (iii) such persons or entities as may be prescribed are informed of the removal, and
 - (iv) once removed, the athlete is not permitted to return to training, practice or competition, except in accordance with the sport organization's return-to-sport protocol;
 - (c) sets out the responsibilities of other prescribed persons if they suspect that an athlete has sustained a concussion during training, practice or competition; and
 - (d) satisfies such other requirements as may be prescribed.

Return-to-sport protocol

- (2) Every sport organization shall establish a return-to-sport protocol for its athletes that,
 - (a) applies in circumstances where the sport organization becomes aware that one of its athletes has sustained a concussion or is suspected of having sustained a concussion, regardless of whether or not the concussion was sustained or is suspected of having been sustained during a sport activity associated with the sport organization;
 - (b) establishes, in accordance with such requirements as may be prescribed, a specific process to implement the return of an athlete to training, practice or competition after the athlete has sustained a concussion or is suspected of having sustained a concussion;
 - (c) designates persons who are responsible for ensuring that,
 - (i) an athlete who has sustained a concussion or is suspected of having sustained a concussion does not return to training, practice or competition until permitted to do so in accordance with the return-to-sport protocol, and
 - (ii) such persons or entities as may be prescribed are informed that an athlete is permitted to return to training, practice or competition;
 - (d) sets out the responsibilities of other prescribed persons; and
 - (e) satisfies such other requirements as may be prescribed.

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Protocols to be made available

(3) A sport organization shall, in accordance with the regulations, ensure that its removal-from-sport protocol and return-to-sport protocol are made available to the prescribed persons.

Rowan's Law Day

5 (1) Subject to subsection (2), the last Wednesday in September in each year is proclaimed as Rowan's Law Day.

Minister may declare a different day

(2) For any particular year, the Minister may declare that Rowan's Law Day is on any day of the year other than the day referred to in subsection (1).

Progress reports re recommendations

6 (1) The Minister shall prepare reports about the progress made in implementing all or some of the recommendations set out in "Creating Rowan's Law: Report of the Rowan's Law Advisory Committee", dated September 2017, which is available on a Government of Ontario website.

Public access to reports

(2) The Minister shall publish the reports required under this section on a Government of Ontario website.

First report

(3) A first report shall be published on the day this section comes into force.

Subsequent reports

(4) Subsequent reports shall be published every year after the day this section comes into force, until such time as the Minister prepares a final progress report.

Regulations

- 7 (1) The Lieutenant Governor in Council may make regulations providing for any matters which, in the opinion of the Lieutenant Governor in Council, are necessary or advisable for the purposes of this Act, including,
 - (a) prescribing or otherwise providing for anything that is required or permitted under this Act to be prescribed or otherwise provided for in the regulations, including governing anything required or permitted to be done in accordance with the regulations;
 - (b) governing the manner in which an individual gives confirmation to a sport organization for the purposes of sections 2 and 3;
 - (c) governing concussion codes of conduct required under section 3, including,
 - specifying circumstances in which a sport organization's concussion code of conduct applies or does not apply, and
 - (ii) prescribing rules for determining whether a sport organization's concussion code of conduct applies in specified circumstances;
 - (d) governing removal-from-sport protocols and return-to-sport protocols, including,
 - (i) specifying circumstances in which a sport organization's removal-from-sport protocol or return-to-sport protocol applies or does not apply, and
 - (ii) prescribing rules for determining whether a sport organization's removal-from-sport protocol or return-to-sport protocol applies in specified circumstances;
 - (e) governing how the requirements in this Act or the regulations apply in respect of two or more sport organizations that carry out similar or related activities in connection with the same amateur competitive sport;
 - (f) exempting any person or entity or class of persons or entities from any provision of this Act or the regulations, subject to such conditions or restrictions as may be prescribed;
 - (g) defining any word or expression used in this Act that is not already defined and further defining any word or expression used in this Act that is already defined in this Act;
 - (h) providing for such transitional matters as the Lieutenant Governor in Council considers necessary or advisable in connection with the implementation of this Act or the regulations.

Classes of sport organizations

(2) A regulation may create different classes of sport organizations and may impose different requirements, conditions or restrictions on, or relating to, each class.

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Classes of sports

(3) A regulation may apply differently to different sports or classes of sports.

Education Act

8 (1) The heading to Part XIII.1 of the Education Act is repealed and the following substituted:

PART XIII.1 PUPIL HEALTH

(2) The Act is amended by adding the following heading immediately before section 317:

NUTRITIONAL STANDARDS

(3) Part XIII.1 of the Act is amended by adding the following section:

CONCUSSIONS

Minister's policies and guidelines re concussions

321 (1) The Minister may establish and require boards to comply with policies and guidelines respecting concussions in pupils.

Regulations, private schools

(2) The Minister may make regulations prescribing requirements respecting concussions in pupils of private schools and requiring private schools to comply with the prescribed requirements.

Consistency with Rowan's Law (Concussion Safety), 2018

(3) Any policies and guidelines established under subsection (1) and any regulations made under subsection (2) shall be consistent with Rowan's Law (Concussion Safety), 2018.

Commencement

- 9 (1) Subject to subsection (2), this Act comes into force on the day it receives Royal Assent.
- (2) Sections 1, 2, 3, 4, 6, 7 and 8 come into force on a day to be named by proclamation of the Lieutenant Governor.

Short title

10 The short title of this Act is Rowan's Law (Concussion Safety), 2018.

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ATTACHMENT "B" - Option 1

FEDERATION OF BROOMBALL ASSOCIATIONS OF ONTARIO

Concussion Awareness Confirmation Form

The undersigned individual who is under 18 years of age, and their Parent(s)/Guardian(s), along with Team Official(s), hereby confirm to the F.B.A.O. that they have reviewed Concussion Awareness resources approved by the Minster of Tourism, Culture, and Sport, along with the F.B.A.O.'s Concussion Code of Conduct in Appendix J – Concussion Safety Protocol of the F.B.A.O. Constitution and By-Laws within 12 months before Team and Player Registration.

 This information is collected solely for officials, and will not be released to an 	the use of the F.B.A.O. and its affiliated teams ny outside organization or person.	and team
Season Information:		
Region:	Season:	
Team Name:		
Category:		
Player Information:		
Player's Name:		
Birthday (d/m/y):/	Gender: Male Female	
Address:		
Town/City:	Postal Code:	
Phone:	Email:	
Concussion Awareness Confirmation Acknow	<u>rledgment:</u>	
Player:		
Note: all players, no matter their age, must print/sign their name to acknowledge their		
understanding of concussion protocols.	Circohum of Diagon	Data
	Signature of Player	Date
Parent/Guardian:		
Name of Parent/Guardian	Signature of Parent/Guardian	Date
Team Official:		
Name of Team Official	Signature of Team Official	Date
Name of Regional Rep. Received By:	Date:	

Original Copy – F.B.A.O. • 1 Copy for Team Official • 1 Copy for Region • 1 Copy for League

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ATTACHMENT "B" - Option 2

CONCISSION ANAMARIES CONFIGURATION FORM The energies of inclusion the new mode, 21 years of 4g and the "pression of the new mode of the configuration of th			ATTACHMENT "B" - Option a
Federation of Bronchish short reflect in the CONUSCON ANA ARCERISES CONCREMATION FORM CONUSCON ANA ARCERISES CONCREMATION FORM approved by the control control of the control control control of the control control of the control control of the control	urees	lale	DATE MIM/DD/YY
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CONCLISSION AUARRESS CONFIGURATION FORM The underlighted including two are under 28 year of age, and thine Perceptificational and programment of fronting the factor of fronting. And the second of th	ey have reviewed Conc ne F.B.A.O. Constitution	Gender □ Male □ Female □ Co-Ed	Signature
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	The und approve		PLAYEF 1

Appendix J – Concussion Safety Protocol

As of October 2019

ATTACHMENT "C"

T: TIME C //GUARDIAN: THE C			
/GUARDIAN:	CHILD'S NAME:	AGE	
	NAME OF PERSON MONITORING CHILD AT SCENE:	HILD AT SCENE:	
wnat nappened: Blow to the head This to the body			
AT THE S	SCENE OF THE INCIDENT	ENT	
STEP 1: DETERMINE IF THIS IS A MEDICAL	EMERGENCY	RED FLAG SYMPTOMS	
A) FOLLOW BASIC FIRST AID		CALL 911 if the child	
□ Danger		shows any of these Red Flag Symptoms at any time:	
Response Airway		You see:	
Breathing		Kepeated vomiting Seizure or convulsion	
☐ Circulation		☐ Deteriorating or loss of consciousness	
B) IF THERE IS SERIOUS INJURY <u>OR</u> ANY OF THE RED FLAGS:	RED FLAGS:	The child complains of:	
· Call 911		Neck pain	
• Do not move the child		Weakness or tingling/burning in the arms	At
 Stay with the injured child and monitor them until Emergency Services arrives Do not remove child's helmet unless you are trained to do so 	Services arrives	or legs	ta
STEP 2: REMOVE THE CHILD FROM PLAY OR ACTIVITY	JR ACTIVITY	The child is showing:	chm
If the injury is NOT an emergency, remove the child from play and do not let them return to play that day. The child needs to be seen by a doctor as soon as possible. While the child is waiting to be taken to a doctor, follow instructions in Step 3 (next page).	and do not let them return to possible. While the child is t page).	Unusual behaviour	ent "
1 of 3 – Updated July 2017		BC INJURY research and	<u>C"</u>

Appendix J – Concussion Safety Protocol

As of October 2019

Balance problems									
Double or fuzzy vision	ousness ss on ground	oblems ated movement or clutching head	☐ Dazed, blar☐ Confusion	nk, or vacant		omments:			
□ Double or fuzzy vision □ Difficulty concentrating Comments: □ Sick □ Numbness in arms or legs □ Arms or drowsy To TEST MEMORY Tired or drowsy Istions correctly may suggest a concussion. Repeat periodically and tick response. Time Correct Ime Im	<u>S</u>	J.							
TO TEST MEMORY Stions correctly may suggest a concussion. Repeat periodically and tick response. Time Correct Incorrect Time Time Correct Time Correct Incorrect Time Correct Incorrect Time Time Correct Incorrect Time Correct Incorrect Incorrect Incorrect Correct Incorrect Incorrect Inc	ache	fuzzy vision right	Difficulty o	concentrating s in arms or l rowsy		comments:			
Time Correct Incorrect Time Correct Incorrect Time	ASK THESE QUESTIONS TO TEST MILLE to answer any of these questions correctly	EMORY may suggest a con	cussion. Repeat	periodically	and tick resp	ponse.			
Innch? Innch?<	12 years old	T.		Incorrect	Time			Correct	Incorrect
Correct Incorrect Time Correct Time Correct Tim	re are we now?								
Time Correct Incorrect Time Correct Time Time Correct Time Time Correct Time Correct Time Correct Time Corre	before or after lunch?								
Time Correct Incorrect Time Correct Time Tim	t did you have last lesson/class?						T		
Time Correct Incorrect Time Correct Incorrect — — — — — — — — — — — — — — — — — — — — — — — — — — — — — —	it is your teacher's name?								
	ears old and over	Ţ		Incorrect	Time			Correct	Incorrect
	it venue are you at today?								
	ch half is it now?								
	scored last in this game?								
	t team did you play last week/game?								
	your team win the last game?								
STEP 4: REFER TO PARENT/GUARDIAN	TEP 4: REFER TO PARENT/GUA	RDIAN							

Appendix J – Concussion Safety Protocol

As of October 2019

ru child alone. Keep them in a calm environment. Do not let your child drive or return to act ru child any medication unless directed by a doctor. There is evidence that some medical al risks associated with brain injuries. FOR SIGNS AND SYMPTOMS ws one of the following symptoms, seek medical attention as soon as possible. membering membering miner new information Sleeping more than usual			
re child any medication unless directed by a doctor. There is evidence that some medical al risks associated with brain injuries. FOR SIGNS AND SYMPTOMS ws one of the following symptoms, seek medical attention as soon as possible. membering entrate Cown Cown	Do not leave your child alone. Keep them in a	calm environment. Do not let your child drive or return to a	ictivities.
FOR SIGNS AND SYMPTOMS ws one of the following symptoms, seek medical attention as soon as possible. membering	Do not give your child any medication unle increase potential risks associated with brain i	ss directed by a doctor. There is evidence that some med injuries.	ications can worsen concussion symptoms and could
membering Emotional and Mood	MONITOR FOR SIGNS AND SY	MPTOMS	RED FLAG SYMPTOMS
membering Emotional and Mood active Color and	If your child shows one of the following sympt	oms, seek medical attention as soon as possible.	CALL 911 if the child
aenfy down entrate Sad entrate Nervous or anxious subber new information Sad Sleeping more than usual Sleeping more than usual Sleeping more than usual Sleeping more than usual Sleeping less un important part of the recovery process. Sleeping less un important part of the recovery process. Sleeping less un important seek medical attention.	Thinking and Remembering	Emotional and Mood	shows any of these Red Flag
Sad entrate Sad entrate Nervous or anxious Nervous or anxious Sleep Sleeping more than usual Sleeping more than usual Sleeping more than usual Sleeping less than usual Sleeping more than usual Sleeping less than usual Sleeping less than usual Sleeping less than usual Sleeping less than usual Sleeping less than usual I shaving a hard time falling asleep Having a hard time falling and unusual behaviour seek medical attention.	Not thinking clearly	Easily upset or angered	symptoms at any time.
Nervous or anxious Nervous or anxious	☐ Feeling slowed down	□ Sad	You see:
Sleep Isleeping more than usual Isleeping more than usual Isleeping more than usual Isleeping less than usual Image Isleeping less than usual Image Isleeping less than usual Image	☐ Unable to concentrate	☐ Nervous or anxious	T Repeated vomiting
Sleeping more than usual Sleeping more than usual Sleeping less than usual State or several hours or even days following a concussion storms caused by a head injury can get worse later that day or night. Your child's symptoms are getting worse or they develop new medical attention as soon as possible. IGHT IGHT IGHT IGHT IGHT IGHT IGHT IGHT INDICATED INFORMATION INDICATED	Unable to remember new information	☐ More emotional	doising of a six is a S
wision witing mitting mitting mas Having a hard time falling asleep Sleeping less than usual	physical	Sleep	
miting having a hard time falling asleep having a hard time falling asleep having a hard time falling asleep having no energy TO MONITOR AND RECORD INFORMATION toms caused by a head injury can get worse later that day or night. Your child's symptoms are getting worse or they develop new medical attention as soon as possible. IGHT ncussion should not be left on their own during the first night. night they should be checked regularly—but not woken. A parent should sleep in the same et he child if you have concerns about their breathing, colour, or how they are sleeping. If it it in the interminally then let them sleep. Sleep is an important part of the recovery process. hild best. If they are showing any unusual behaviour seek medical attention.	☐ Headache	☐ Sleeping more than usual	Deteriorating or loss of consciousness
sh or noise TO MONITOR AND RECORD INFORMATION To make the delayed for several hours or even days following a concussion To make the first 24 hours. If your child's symptoms are getting worse or they develop new medical attention as soon as possible. IGHT IGHT ICHT IN THE STATE OF THE STATE	☐ Fuzzy or blurry vision	☐ Sleeping less than usual	The child complains of:
the ornoise having no energy: TO MONITOR AND RECORD INFORMATION TO MONITOR AND RECORD INFORMATION TO MONITOR AND RECORD INFORMATION Atoms caused by a head injury can get worse later that day or night. Your child should medical attention as soon as possible. IGHT I	Nausea and vomiting	Having a hard time falling asleep	ried Xred
than so energy: TO MONITOR AND RECORD INFORMATION The first 24 hours. If your child's symptoms are getting worse or they develop new medical attention as soon as possible. IGHT IGHT IGHT IGHT IN THE STAND THE FOR THE FORT THE FORT THE FORT THE SAME A PARENT SHOULD SHO	Dizziness		
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toms can be delayed for several hours or even days following a concussion ms caused by a head injury can get worse later that day or night. Your child's should in the first 24 hours. If your child's symptoms are getting worse or they develop new medical attention as soon as possible. IGHT IGHT IGHT IGHT IGHT IGHT IGHT INDIPITION IN		RECORD INFORMATION	Severe of increasing headache
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night they should be checked regularly—but not woken. A parent should sleep in the same e the child if you have concerns about their breathing, colour, or how they are sleeping. If i 911. In normally then let them sleep. Sleep is an important part of the recovery process. inild best. If they are showing any unusual behaviour seek medical attention.		n their own during the first night.	
ing normally then let them sleep. Sleep is an important part of the recovery process. .hild best. If they are showing any unusual behaviour seek medical attention.	Throughout the night they should be checked hours. Only wake the child if you have concert Symptoms call 911.	regularly—but not woken. A parent should sleep in the sar ns about their breathing, colour, or how they are sleeping. I	ne room as the child and check on them every two f they are slow to wake or show any of the Red Flag
hild best. If they are showing any unusual behaviour seek medical attention.	If they are sleeping normally then let them sle	ep. Sleep is an important part of the recovery process.	
	You know your child best. If they are showing	any unusual behaviour seek medical attention.	
	3 of 3 – Updated July 2017		For more information on concussions and resources, visit www.cattonline.com