

• APPENDIX J • CONCUSSION SAFETY PROTOCOL

Appendix J – Concussion Safety Protocol

As of October 2023

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 who 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 STEP 1: RED FLAGS 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 STEP 2: OBSERVATION SIGNS 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?
 - 4) What team did you play in the last game?

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- 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,
 - 3) 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.
- 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

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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 <u>R2P STEP 5</u> 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 signs and/or symptoms of concussion. If signs and/or symptoms return, consult with a registered medical professional.

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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 De

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 		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	rledgment:	
Player: Note: all players, no matter their age, must		
print/sign their name to acknowledge their		
understanding of concussion protocols.	Signature of Player	Date
	olgitata of thay of	Date
Parent/Guardian:		Date
Parent/Guardian:		Date
Parent/Guardian: Name of Parent/Guardian	Signature of Parent/Guardian	Date
Name of Parent/Guardian		
Name of Parent/Guardian		
Name of Parent/Guardian Team Official:	Signature of Parent/Guardian Signature of Team Official	Date
Name of Parent/Guardian Team Official: Name of Team Official	Signature of Parent/Guardian Signature of Team Official	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

Trees	iale	DATE MM/DD/YY		
ission Awareness resou	ganization or person. <u>Legend</u> M - Male / F - Female	PARENT/GUARDIAN Signature	NCCP#	Date:
y have reviewed Concu	Gender Gender Male Female Co-Ed	PLAYER Signature		
. That the	d will not be rele	>		
F.B.A.(Rec	BIRTH DATE		
ORM ORM	icials, a	M BIRTI		
Ontario ION F	sters L			ived by
sociations of (CONFIRMAT Annealist) hereby	its affiliated teams and team officials, a $\frac{\text{Category}}{\text{Lintermediate}} = \text{Masters} \; \square \text{Co-Ed}$ Junior: $\square \text{U20} \; \square \text{U112} \; \square \text{U122}$	PHONE NUMBER (xxx) xxx-xxxx		Sentative Reco
Federation of Broomball Associations of Ontario CUSSION AWARENESS CONFIRMATION For Lardian(s), hereby confirm Construction Code of Conduction Construction Code of Conduction Constructions	O. and its affiliated teams and team officials, ar Category □ Elite □ Intermediate □ Masters □ Co-Ed Junior: □ U20 □ U16 □ U14 □ U12	Postal Code		Name of Regional Representative Received by:
Federation of Broomball Associations of Ontario CONCUSSION AWARENESS CONFIRMATION FORM (18)(Guardian(s), along with Team Official(s), hereby confirm to the	use of the F.B.A.C	City		Name o
Federation of Broomball Associations of Ontario CONCUSSION AWARENESS CONFIRMATION FORM i 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 out along with Team Official(s), hereby confirm to the F.B.A.O., that they have reviewed Concussion Awareness resources	before Team and Player Registration. This information is collected solely for the use of the F.B.A.O. and its affiliated teams and team officials, and will not be released to any outside organization or person. Legrend Category Gender Legrend Team: Season: Adult: Lelite Lintermediate L	ADDRESS Street Address		3 - Region 4 - League
under 18 years	This information is coll Team Information Sea	GENDER M/F		2 - Team Official
The undersigned individuals who are under 18 years of	nd Player Registration. Team: League:	FULL NAME Last	S	Original - F.B.A.O. 2 - 1
re undersigned	efore Team ar	PLAYERS FIRST 1 1 2 4 4 6 6 6 10 11 11 11 11 11 11 11 11 11 11 11 11	15 17 18 19 20 20 ACCORD ACCOR	COPIES: Orig

Appendix J – Concussion Safety Protocol

As of October 2023

ATTACHMENT "C"

DATE OF INCIDENT: NAME OF PARENT/GUARDIAN: What happened?			
/GUARDIAN:	CHILD'S NAME:	AGE:	
☐ Blow to the head	NAME OF PERSON MONITORING CHILD AT SCENE:	HILD AT SCENE:	
	ody		
AT THE	SCENE OF THE INCIDENT	ENT	
STEP 1: DETERMINE IF THIS IS A MEDICAL	IL 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		Repeated vomiting Seizure or convulsion	
Circulation		Deteriorating or loss of consciousness	
B) IF THERE IS SERIOUS INJURY <u>OR</u> ANY OF THE RED FLAGS:	E 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 	icy Services arrives so	or legs	tac
STEP 2: REMOVE THE CHILD FROM PLAY OR ACTIVITY	OR 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).	ay and do not let them return to as possible. While the child is next page).	Unusual behaviour	ent "
1 of 3 – Updated July 2017		BC INJURY research and conceptions to the search and conception to the sea	<u>C"</u>

Appendix J – Concussion Safety Protocol

As of October 2023

Loss of consciousness Bal								
pung	Balance problems Uncoordinated movement Grabbing or clutching head	☐ Dazed, bla	Dazed, blank, or vacant look Confusion		Comments:			
B) RECORD WHAT THE CHILD IS	SAYING							
☐ Headache ☐ Dou ☐ Sick ☐ Confused ☐ Don	Double or fuzzy vision Sick Don't feel right	Difficulty concer	Difficulty concentrating Numbness in arms or legs Tired or drowsy		Comments:			
C) ASK THESE QUESTIONS TO TEST MEMORY Failure to answer any of these questions correctly may suggest a concussion. Repeat periodically and tick response.	EST MEMORY correctly may suggest a cor	ncussion. Repeat	periodically a	nd tick resp	ionse.			
5 to 12 years old		Time Correct	Incorrect	Time	Correct Incorrect	Time	Correct	Incorrect
Where are we now?								
Is it before or after lunch?								
What did you have last lesson/class?								
What is your teacher's name?								
13 years old and over	T	Time Correct	Incorrect	Time	Correct Incorrect	Time	Correct II	Incorrect
What venue are you at today?								
Which half is it now?								
Who scored last in this game?								
What team did you play last week/game?								
Did your team win the last game?								
STEP 4: REFER TO PARENT/0	GUARDIAN							

Appendix J – Concussion Safety Protocol

As of October 2023

ruc child alone. Keep them in a calm environment. Do not let your child drive or return to a cal ruc 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 Emotional and Mood own Sad Nervous or anxious	Do not leave your child alone. Keep them in a calm		
reckild any medication unless directed by a doctor. There is evidence that some medical risks associated with brain injuries. FOR SIGNS AND SYMPTOMS ws one of the following symptoms, seek medical attention as soon as possible. membering		environment. Do not let your child drive or return to a	ctivities.
FOR SIGNS AND SYMPTOMS ws one of the following symptoms, seek medical attention as soon as possible. membering membering membering mentate Easily upset or angered	Do not give your child any medication unless d ii increase potential risks associated with brain injurié	rected by a doctor. There is evidence that some medies.	cations can worsen concussion symptoms and could
membering Emotional and Mood		TOMS	FLAG
membering Emotional and Mood asary down entrate □ Sad down □ Sad □ Nervous or anxious □ Sleep □ Sleeping more than usual wision □ Sleeping less than usual □ Having a hard time falling asleep □ Having a hard time falling a sleep in the same of the child if you have concerns about their breathing, colour, or how they are sleeping. If and normally then let them sleep. Sleep is an important part of the recovery process. Inilial best. If they are showing any unusual behaviour seek medical attention.	If your child shows one of the following symptoms,	seek medical attention as soon as possible.	CALL 911 if the child
entrate entrate Sad down Sad entrate Nervous or anxious Sleep Sleep Sleeping more than usual wiston Sleeping more than usual Sleeping less than usual Sleeping less than usual Sleeping less than usual Having a hard time falling asleep Having a hard time falling asleep Having nenergy Having no energy Having a hard time falling asleep Having a hard time falling asleep Having a hard time falling asleep Having no energy Having no energy Having no energy Having no even days following a concussion Having no energy Having no even days following a concussion Having no even days following are getting worse or they develop new Having no even days following the first night. IGHT IGHT Incussion should not be left on their own during the first night. Incussion should be checked regularly—but not woken. A parent should sleep in the same of the child if you have concerns about their breathing, colour, or how they are sleeping. If all of the left has are showing any unusual behaviour seek medical attention.	hinking and Remembering	Emotional and Mood	shows any of these Red Flag
Sad Nervous or anxious Sleep Nervous or anxious Nervous or anxious Sleep Sleeping more than usual Sleeping more than usual Sleeping less than usual It having no energy Sleeping less than usual It having no energy It hav	□ Not thinking clearly	Easily upset or angered	symptoms at any time.
entrate Nervous or anxious	☐ Feeling slowed down	□ Sad	You see:
Sleep	Unable to concentrate	☐ Nervous or anxious	Repeated vomiting
Sleeping more than usual mitting Sleeping less than usual mitting Sleeping less than usual short or noise I Having a hard time falling asleep I Having no energy I Having noise of that day or night. Your child's symptoms are getting worse or they develop new medical attention as soon as possible. IGHT ICHT I	Unable to remember new information	☐ More emotional	Seizura or convilsion
wision witing mitting mitting mitting mas Having a hard time falling asleep Sleeping less than usual	hysical	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 the child if you have concerns about their breathing, colour, or how they are sleeping. If 911. ing normally then let them sleep. Sleep is an important part of the recovery process. thild 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 can be delayed for several hours or even days following a concussion To make can be delayed for several hours or even days following a concussion The first 24 hours. If your child's symptoms are getting worse or they develop new medical attention as soon as possible. IGHT ICHT ICHT ICHT IN THE SHOULD BE LEFT ON THEIR OWN DETAILS TO THE SAME A PARENT SHOULD SHOULD SHOULD SHOULD SHOULD SHOULD SHOULY OF HOW THEY ARE SHEEPING. If THE CHILD IS THE THE SHOULD SHOU	Fuzzy or blurry vision	☐ Sleeping less than usual	The child complains of:
the or noise mass. TO MONITOR AND RECORD INFORMATION TO MONITOR AND RECORD INFORMATION TO MONITOR AND RECORD INFORMATION To Monitor can be delayed for several hours or even days following a concussion To most caused by a head injury can get worse later that day or night. Your child should To 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 SHOULD BE LEFT ON THEIR OWN DETAILS TO THE SAME A PARENT SHOULD BE TO THEIR OWN THEY A PARENT SHOULD SHOULD SHOULD BE TO THEIR OWN THEY A PARENT SHOULD SHOUL	Nausea and vomiting	Having a hard time falling asleep	. cied Xied
thaving no 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. 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. TO MONITOR AND RECORD INFORMATION TO MONITOR AND RECORD INFORMATION TO MONITOR AND AND TO THE THEY SHOULD	Dizziness		
having no energy: TO MONITOR AND RECORD INFORMATION toms can be delayed for several hours or even days following a concussion can be delayed for several hours or even days following a concussion can be delayed for several hours or even days following a concussion cans 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 IN THE FIRST SHOULD BE LEFT ON THEIR OWN DUTING THE FIRST NIGHT. IN THE CHILD IS SHOULD BE SHOULD BE A PARENT SHOULD SHOUL	Sensitivity to light or noise		Double vision
thaving no energy TO MONITOR AND RECORD INFORMATION toms can be delayed for several hours or even days following a concussion toms caused by a head injury can get worse later that day or night. Your child 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 IIGHT I	☐ Balance problems		Weakness or tingling/burning in the arms
stoms can be delayed for several hours or even days following a concussion can be delayed for several hours or even days following a concussion can seed by a head injury can get worse later that day or night. Your child 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 IIGH THEY Should be checked regularly—but not woken. A parent should sleep in the same the child if you have concerns about their breathing, colour, or how they are sleeping. If 911. Ing normally then let them sleep. Sleep is an important part of the recovery process. child best. If they are showing any unusual behaviour seek medical attention.	☐ Feeling tired or having no energy		ol legs
toms can be delayed for several hours or even days following a concussion can be delayed for several hours or even day or night. Your child 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 CLUSSION Should not be left on their own during the first night. IGHT IN IT IS IN IT IS IN		CORD INFORMATION	Severe of increasing headache
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 the child if you have concerns about their breathing, colour, or how they are sleeping. If 311. ing normally then let them sleep. Sleep is an important part of the recovery process. child best. If they are showing any unusual behaviour seek medical attention.	Signs and symptoms can be delayed for several incident. Problems caused by a head injury can ge not be left alone in the first 24 hours. If your child's symptoms seek medical attention as soon as possil	I hours or even days following a concussion et worse later that day or night. Your child should s symptoms are getting worse or they develop new ible.	The child is showing: Unusual behaviour Increasing confusion or irritability
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 the child if you have concerns about their breathing, colour, or how they are sleeping. If 911. ing normally then let them sleep. Sleep is an important part of the recovery process. indid best. If they are showing any unusual behaviour seek medical attention.	THE FIRST NIGHT		
night they should be checked regularly—but not woken. A parent should sleep in the same the child if you have concerns about their breathing, colour, or how they are sleeping. If 1911. If no normally then let them sleep. Sleep is an important part of the recovery process. It they are showing any unusual behaviour seek medical attention.	A child with a concussion should not be left on thei	ir own during the first night.	
ing normally then let them sleep. Sleep is an important part of the recovery process. child best. If they are showing any unusual behaviour seek medical attention.	Throughout the night they should be checked regu hours. Only wake the child if you have concerns abo Symptoms call 911.	ılarly—but not woken. A parent should sleep in the san ıout their breathing, colour, or how they are sleeping. Il	ne room as the child and check on them every two 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 sleep. Si	leep is an important part of the recovery process.	
	You know your child best. If they are showing any u	unusual behaviour seek medical attention.	
	3 of 3 – Updated July 2017		For more information on concussions and resources, visit www.cattonline.com