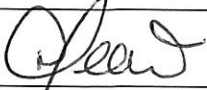





SOP Number WHSC 004.03

SOP Title Concussion Procedure

	NAME	TITLE	SIGNATURE	DATE
Author	D. Plant	Junior Organiser		28/5/23
	R Deegan	Junior Organiser		28/5/23
	N Harris	Junior Organiser		28/5/23
Authoriser	Dr Goeff Plant	Safety Officer		28/5/23

Effective Date:

28/05/23.

Revision History**Revision 01**

- New

Revision 02

- Updated documentation layout and numbering system

Revision 03

- Updated documentation due to committee change

Reference Documentation

SOP WHSC 001 "WHSC Documents list and control process"
 SOP WHSC 002 "Safety Statement and Operations Manual"
 SOP WHSC 003 "Safety Boat Operations"
 SOP JS 001 "Junior Sailing Procedure"

1. PURPOSE

The purpose of this procedure is to outline the signs and symptoms of, and care required for a person with suspect concussion.

2. INTRODUCTION

Concussion is a brain injury and can be caused by a direct or indirect blow to the sailor's head or body. Concussion can occur when the sailor is hit by the boom or in the case of high-performance sailing, when the body or head collide with any part of the boat.

Immediately following a suspected concussion, the brain is susceptible to further significant damage in the event of another impact, therefore the sailor **MUST** be removed immediately from the water.

Concussion typically results in an immediate onset of short-lived signs and symptoms. Most concussions occur without a loss on consciousness. However, in some cases, the signs and symptoms of concussion may evolve over a number of minutes or hours.

- **Concussion must be taken very seriously**
- **Any sailor with a suspected concussion MUST be removed immediately from the session.**
- **The sailor should be medically assessed.**
- **They MUST NOT be left alone.**

3. SCOPE

This SOP applies to all members of WHSC.

4. RESPONSIBILITIES

4.1 All members (especially Shore Duty / Beachmaster / Safety Boat drivers / Skippers) and Instructors

To ensure you are familiar with this procedure in the recognition of a suspected concussed sailor and the steps required for follow up care.

4.2 Safety Officer

To ensure that this procedure is reviewed annually and updated as necessary.

5. SPECIFIC PROCEDURE

5.1 Visible Signs of Suspected Concussion

The presence of any one or more of the following signs and symptoms may suggest a concussion:

- Confusion
- Amnesia/ short term memory loss concerning what just happened
- Blurred vision
- Dazed or blank look
- Dizziness
- Clutching head
- Pressure in head
- Headache
- Emotional / sadness
- Irritability
- Suspected or confirmed loss of consciousness
- Loss of responsiveness
- Poor balance in the boat / falling over
- Nausea / vomiting
- Tiredness / low energy
- Drowsiness
- Stating they 'Don't feel right'

5.1.1 Questions to ask the injured person

- 'What venue are we at today?' or 'Where are we now?'
- 'Approximately what time of the day is it?'
- 'How did you get here today?'
- 'What was your last competition?'
- 'What were you doing this time last week?'

5.2 Recognise and Remove

If you suspect the sailor has concussion, the following **must** happen:

- **IMMEDIATELY REMOVED** from the activity and must not return.
- Must not be left alone
- Always be in the care of a responsible adult who is informed of their condition

- Must not drive a vehicle
- Be medically assessed as soon as possible

5.3 Shore Duty / Beachmaster Procedure

To implement correct procedure when running coaching sessions, the coach must have a system in place to ensure the safety of a sailor with suspected concussion.

The coach / instructor / Safety boat driver must

- a) Contact the 'Shore Duty' / Beachmaster either by VHF or phone.
- b) Alert them of the suspected concussion and
- c) Arrange to meet them at a designated rendezvous point on shore

The 'Shore Duty' / Beachmaster adult should:

- a) Have the medical consent forms of all sailors involved in the session
- b) Make arrangements for the sailor to receive further medical attention
- c) Never leave the sailor alone
- d) Not allow the sailor to return to the session or to sailing on the same day as a head injury SI)
- e) Inform the Safety Officer / Sailing Secretary or Junior Organiser (if juniors sailing course).
- f) Complete Accident / Incident Log (located in Race Office and bar), (*ref. SOP WHSC 002, Safety Statement and Operations Manual, Appendix 5*)

In all cases of suspected concussion, it is recommended that the sailor is referred to a medical or healthcare professional for diagnosis and advice, even if the symptoms resolve.

5.4 Ongoing Management of a Concussion or Suspected Concussion

REST THE BODY, REST THE BRAIN

Rest is the cornerstone of concussion treatment. This involves:

- Resting the body, 'physical rest'
- Resting the brain, 'cognitive rest'
- Avoidance of
 - Physical activities such as running, cycling, swimming, work activities, etc
 - Cognitive activities such as schoolwork, homework, reading, tv, video games, etc

- Students with a diagnosis of concussion may need allowance for impaired cognition during recovery, such as additional time for classwork, homework and exams.

Anyone with a concussion or suspected concussion should not

- Be left alone in the first 24 hours
- Consume alcohol in the first 24 hours, and thereafter should avoid alcohol until free of all concussion symptoms.
- Drive a motor vehicle and should not return to driving until provided with medical or healthcare professional clearance or, if no medical or healthcare professional advice is available, should not drive until free of all concussion symptoms.

Most concussion resolve within 7-10 days, but it is advised that anybody who has had a suspected concussion is reviewed and assessed prior to returning to sailing, by a medical professional who has experience in dealing with concussion.

6. FORMS/TEMPLATES TO BE USED

n/a

