

Queensland Representative School Sport

Concussion Management Guidelines

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Concussion Management Guidelines

Introduction

Sport related concussion can affect athletes participating in many sports and at all levels, from grassroots to elite. In recent years, there has been increasing concern about the long-term health impacts of concussion and the potential under-reporting of incidents, which may lead to athletes being undiagnosed, untreated, and potentially suffering greater long-term impacts on their health and wellbeing. Concussion affects everyone differently. In some cases, concussion is hard to identify due to the variation of the signs and symptoms displayed by individuals.

The Queensland Representative School Sport (QRSS) Concussion Management Guidelines are based on the Australian Sports Commission (ASC) Australian Concussion Guidelines for Youth and Community Sport as well as other available concussion guidelines from National Sporting Organisations. The guidelines in this document have been adapted to outline the processes for responding to and managing suspected concussions or concussion-related injuries sustained by students during representative school sports activities and events.

Audience

The QRSS Concussion Management Guidelines have been developed for QRSS staff, State and non-state school principals, First Aid Officers, school staff, parents/carers/independent students.

Overview

This guideline provides a clear, consistent, and evidence-based framework for the management of concussion and suspected concussion in QRSS. It recognises the serious short- and long-term health risks of concussion and emphasises early identification, immediate removal from play, medical assessment, and a structured return-to-learn and return-to-play process. The guideline outlines the responsibilities of QRSS staff, schools, Medical Practitioners, parents, and students to ensure a collaborative and conservative approach, particularly for children and adolescents who are more vulnerable to concussion-related impacts. Training requirements, event protocols, and a centralised reporting system support the safe participation of students in representative school sport while safeguarding their health, wellbeing, and educational outcomes.

The management of concussion involves the following steps, with each being completed before moving to the next step, these steps include:

- **Recognise** the injury and **remove** the student from the game
- **Respond** to the suspected concussion
- **Refer** the player to a Medical Practitioner for assessment and **record** incident
- **Return** to learn and play
- **Review**

See the QRSS *Summary of initial concussion management* for an overview.

What is Concussion?

Concussion refers to a temporary disruption in brain function caused by direct or indirect trauma that transmits force to the brain. Concussion can happen from an impact that is not directly to the head and concussion does not always cause loss of consciousness. Symptoms may occur at any time and may develop over the hours or days following the injury. This means that it may be difficult to determine, by either staff, parents or a Medical Practitioner, immediately after the injury whether a person is concussed.

The management of concussions in children and adolescents requires unique considerations suitable for the developing child as they may have greater susceptibility to concussion than adults. They may also take longer to recover and they may be at risk of severe consequences such as second impact syndrome, which is experiencing a second concussion before fully recovering from the first concussion. Therefore, managing concussion in children and adolescents requires different standards and a more conservative approach.

What is considered multiple concussions?

Two concussions within a 3-month period, or three concussions in a 12-month period.

Summary

All players with a suspected or confirmed concussion must be immediately removed from the field and are recommended to not return to play for a minimum of 48 hours. During this time, they must be monitored and assessed by a medical practitioner. If a concussion is diagnosed or suspected by the Medical Practitioner, children and adolescents must follow a minimum 21-day recovery period before returning to sport. If **multiple suspected concussions** are

diagnosed by a medical practitioner a recommended starting point for return to sport after the second concussion within three months, would be 28 days symptom-free before returning to play sport and a minimum of six weeks from the time of the most recent concussion until returning to sport.

In situations where three concussions have occurred within a 12-month period, consideration needs to be given to missing a season of sport.

Concussion Training and Event Requirements

All Queensland Representative School Sport Staff will:

- read and understand the *AIS Australian Concussion Guidelines for Youth and Community Sport* as they form the basis for this guideline.
- familiarise themselves with the QRSS *Summary of initial concussion management* and *Overview of QRSS requirements for return to sport*.
- complete, as part of the QRSS annual induction process, either:
 - Australian Institute of Sport Concussion Management Online Training; or
 - Connectivity's Traumatic Brain Injury Australia's Concussion Short Course
- provide evidence of training completion within the risk assessment form as part of the induction process.

Event Convenors will:

- ensure multiple hard copies of the *CRT6 Concussion Recognition Tool* and the *Form 1: QRSS Concussion Referral and Return Form* are printed for:
 - communication on their use with Team Officials at the Pre-Trial/Championship Meeting
 - use at all QRSS sport trials and championships they are managing.
- ensure a copy of *QRSS Concussion Register* template is available for use at all QRSS events to record all suspected concussions.
- prepare a checklist of the appropriate services that may be required to manage suspected concussion, including:
 - local doctors or medical centres
 - local Hospital Emergency Departments
 - ambulance services (000).

Concussion Management

Requirements

Any player who is suspected of having a concussion must be medically assessed as soon as possible after the injury and are recommended to sit out of play for a minimum of 48 hours. If, at any time, there is any doubt about the severity of the student's concussion, the student should be immediately referred to hospital.

STEP 1: RECOGNISE and REMOVE

If a student sustains direct impact to the head or body that causes rapid head movement, the First Aid Officer will:

- Identify concussion signs and symptoms in line with the *CRT6 Concussion Recognition Tool*.
- Immediately remove a student suspected of having concussion from play, unless there is a suspected injury which would be harmful to the student to move them.

STEP 2: RESPOND

If the student shows concussion signs or symptoms identified as 'red flags' in the *CRT6 Concussion Recognition Tool*, the First Aid Officer will:

- call an ambulance.
- follow first aid principles including danger, response, airway, breathing, circulation and provide first aid to the level of training/certification achieved, until medical assistance is available.
- monitor student's health until the ambulance arrives.
- complete Section 1 of the *Form 1: QRSS Concussion Referral and Return Form* and provide to the student/parent/carer/paramedics for Medical Practitioner to complete.
- complete *MyHR WHS: Health and Safety Incident Data Collection Form* (MyHR Incident Form) and return to the Team Official.

The Team Official attending the incident will:

- assist in managing the incident, e.g., clear incident area of spectators, hold phone for First Aid Officer to talk to emergency services, send staff to guide ambulance to incident area.

- contact the student's parent/carer/emergency contact to inform them of the incident.
- complete Section 1 of the *Form 1: QRSS Concussion Referral and Return Form* if the First Aid Officer is unable to do so and provide to the student/parent/carer/paramedics for the student's treating doctor to complete.
- provide a hard copy of a *MyHR Incident Form* for the First Aid Officer to complete.

If the student does NOT show concussion signs or symptoms identified as 'red flags' in the CRT6 Concussion Recognition Tool but has visible clues of suspected concussion, the First Aid Officer will:

- provide first aid
- ensure the student is supervised by an adult until picked up by a parent/carer/emergency contact.
- complete Section 1 of the *Form 1: QRSS Concussion Referral and Return Form* and provide to the student/parent/carer/paramedics for the Medical Practitioner to complete.
- complete *MyHR Incident Form* and return to the Team Official.

The Team Official attending the incident will:

- support the First Aid Officer to manage the incident
- contact the student's parent/carer/emergency contact to:
 - provide details of the incident
 - request they pick up their child for medical assessment and provide them with the *Form 1: QRSS Concussion Referral and Return Form* to provide to the treating Medical Practitioner.
 - inform them that their child will need a medical assessment as soon as possible.
 - recommend to them that their child should sit out for a minimum of 48 hours.
 - advise medical clearance needed before student can return to play, which should be evidenced by a Medical Practitioner's completion of the *Form 1: QRSS Concussion Referral and Return form* or *Form 2: QRSS Alternative Diagnosis Referral Form*.
 - provide a hard copy of a *MyHR Incident Form* to the First Aid Officer to complete.

STEP 3: REFER and RECORD

In the early stages of injury, it is often not clear whether the issue is a concussion or there is a more severe underlying structural head or neck injury. For this reason, ALL players with a suspected concussion need to be assessed by a Medical Practitioner as soon as possible and are recommended to sit out of play for a **minimum of 48 hours**.

The Parent/Carer/Independent Student will:

- ensure the student receives a medical assessment from a Medical Practitioner as soon as possible.
- request the treating Medical Practitioner complete the *Form 1: QRSS Concussion Referral and Return Form* or *Form 2: QRSS Alternative Diagnosis Referral Form* based on their medical assessment.
- Retain the completed form/s from the Medical Practitioner.

The Team Official will:

- record the incident as soon as possible (no later than the end of the following business day) by logging the incident into MyHR WHS (state school staff access only) or completing the *MyHR Incident Form*.
- provide a hard or electronic copy of the populated *MyHR Incident Form* to the Host Representative School Sport Officer, Student's Representative School Sport Officer and Event Convenor.

The Student's Representative School Sport Officer will:

- forward the populated *MyHR Incident Form* to the student's Principal (or delegated officer).

STEP 4: RETURN

If the Medical Practitioner completed only *Form 1: QRSS Concussion Referral and Return Form*, the Parent/Carer/Independent Student will:

- provide a copy of the completed *Form 1: QRSS Concussion Referral and Return Form* and any associated written advice from the treating Medical Practitioner to:
 - the student's Principal;
 - the Student's Representative School Sport Officer; and
 - the Team Official.
- follow the advice provided by the Medical Practitioner to return to learn and play.

The Team Official will:

- contact the parent/carer/emergency contact of a student who is suspected of having a concussion to:
 - inquire about the student's health
 - use *Overview of QRSS requirements for return to sport* to advise parents/carers/independent students of the process required for the student to safely return to sport.
 - remind parent/carer/independent student that completion of Section 3 of the *Form 1: QRSS Concussion Referral and Return Form* by a Medical Practitioner will be required for the student to return to full participation in representative school sport.

The Principal (or delegated officer) will:

- on receipt of the completed *Form 1: QRSS Concussion Referral and Return Form*:
 - contact the parent/carer, the student and their school teachers to discuss the advice provided by the student's Medical Practitioner.
 - copy and store the advice from the student's Medical Practitioner in the student's OneSchool record (for state schools) or in accordance with non-state school requirements
 - advise the student of the importance of following the Medical Practitioner's advice regarding concussion management.

School staff will:

- follow the advice from the student's Medical Practitioner to support the student's return to school and play following a concussion.
- advise the student of the importance of following the advice from the student's Medical Practitioner (e.g., Return to sport care plan).

If the Medical Practitioner completed Form 1: QRSS Concussion Referral and Return Form and Form 2: QRSS Alternative Diagnosis Referral Form, the Parent/Carer/Independent Student will:

- provide a copy of the completed *Form 1: QRSS Concussion Referral and Return Form*, *Form 2: QRSS Alternative Diagnosis Referral Form* and any associated written advice from the treating Medical Practitioner to:
 - the Team Official;
 - the Student's Representative School Sport Officer; and
 - the student's Principal.

- Sign and return a completed copy of *Form 3: QRSS Concussion Management Confirmation of Return to Event Clearance Form*

The Team Official will:

- on receipt of the completed forms, notify the Event Convenor and Host Representative School Sport Officer the advice from the treating Medical Practitioner that the student can return to play.
- provide a completed copy of the *Form 3: QRSS Concussion Management Confirmation of Return to Event Clearance Form* to the Parent/Carer for signing.

The Principal (or delegated officer) will:

- copy and store the advice from the student's Medical Practitioner, if parent's/carer's/independent student's approval has been received, in the student's OneSchool record (for state schools) or in accordance with non-state school requirements.

STEP 5: REVIEW

The Host Representative School Sport Officer will:

- populate the QRSS Concussion Register (SharePoint) following each event.
 - The QRSS – District School Sport Officer (QRSS-DSSO) will submit the register to the QRSS – Regional School Sport Officer (QRSS-RSSO) for input into the QRSS Concussion Register.
- review the concussion register following every event to identify any particular risk factors that may be mitigated at future events by strategies such as additional staff on site or training for students or staff about concussion prevention.

The Student's Representative School Sport Officer will:

- advise the student's Principal (or delegated officer) of actions taken following a review of the incident as per the *Health, safety and wellbeing incident management* procedure.
- store the students' documents in accordance with Representative School Sport guidelines.

The Principal (or delegated officer) will:

- review the *MyHR Incident Report* of the incident as per the *Health, safety and wellbeing incident management* procedure (for state school staff) or the school process for non-state schools
- store student's documentation relevant to the incident in MyHR (for state schools) or in accordance with school requirements (for non-state schools).

Terms

Event Convenor	The Event Convenor is responsible for the day-to-day management of an event. This includes coordinating scheduling, facilities, participants, and logistics. The role may be filled by a designated convenor, registered teacher, or Team Official.
Medical Practitioner	A Medical Practitioner is a qualified professional registered with the Australian Health Practitioner Regulation Agency (AHPRA), with the necessary licensure, skills, and knowledge to assess, plan, and manage medical care.
First Aid Officer	A First Aid Officer is an individual with current first aid certification or relevant medical qualifications who provides first aid.
Principal	The Principal refers to the Principal of the school the student attends.
Host Representative School Sport Officer	The Host Representative School Sport Officer is responsible for organising and managing district, regional, state, or national events. This role may be filled by a QRSS Sport Officer, QRSS Regional School Sport Officer or QRSS District School Sport Officer.
Student's Representative School Sport Officer	This is the school sport officer responsible for the region, district, or level the student represents. This may be the QRSS Sport Officer, QRSS Regional School Sport Officer or QRSS District School Sport Officer.
QRSS - Sport Officer (QRSS-SO)	The QRSS-SO oversees the coordination of national championships and supports the delivery of state championships.
QRSS - Regional School Sports Officer (QRSS-RSSO)	The QRSS-RSSO coordinates regional teams for participation in state championships and is responsible for organising and delivering both regional trials and state championships.
QRSS - District School Sports Officer (QRSS-DSSO)	The QRSS-DSSO coordinates district teams for participation in regional trials and leads the planning and delivery of district-level trials.
Team Official	A Team Official refers to a coach, manager, or trainer responsible for the student's representative team.
Central Concussion Register	A centralised database for recording suspected concussion incidents across QRSS events at the district, regional, state, and national levels.

Pre-Trial/Championship Meeting	A meeting held prior to trials or championships, chaired by the H-RSSO or, at state level, co-chaired with the QRSS Sport Executive, to discuss event operations and logistics.
QRSS Sport Executive (QRSS-SE)	The QRSS-SE provides sport-specific expertise and collaborates with the Host Representative School Sport Officer, Event Convenor, and working groups to coordinate and deliver state championships.

Legislation

- [Work Health and Safety Act 2011 \(Qld\)](#), section 3.
- [Work Health and Safety Regulation 2011 \(Qld\)](#), section 42.
- [Information Privacy Act 2009 \(Qld\)](#), section 3.

Supporting information for this procedure

- Overview of QRSS requirements for return to sport
- Summary of initial concussion management

Other resources

- [AIS Australian Concussion Guidelines for Youth and Community Sport](#)
- [AIS Concussion Management Online Training](#)
- [AIS Graded Return to Sport Framework for Community and Youth](#)
- [AIS Information for Parents and Teachers](#)
- [AIS Return to Learn Information](#)
- [Connectivity's Traumatic Brain Injury Australia's Concussion Short Course](#)
- [CRT6 Concussion Recognition Tool](#)
- [Health, safety and wellbeing incident management procedure](#)
- [Managing first aid in the workplace procedure](#)

Forms

- Form 1: QRSS Concussion Referral and Return Form
- Form 2: QRSS Alternative Diagnosis Referral Form
- Form 3: QRSS Concussion Management Confirmation of Return to Event Clearance
- Form 4: MyHR WHS: Health and Safety Incident Data Collection Form (MyHR Incident Form)
- QRSS Central Concussion Register

Review date

- December 2027