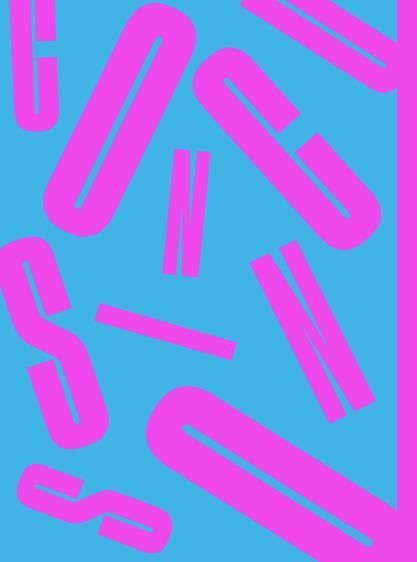


Concussion for Coaches





Let's make concussion impossible to ignore.

A concussion is a mild traumatic brain injury that can result from a direct hit to the head or from a blow to the body.

This guide helps you to navigate and manage concussions, and build a culture of support around them.

Tips for team support

A team that reduces risks, champions safety and prioritises communication is a team that looks out for each other.

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Educate players

Players knowing the symptoms and their severity helps their recognition within themselves and others.

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Have a plan

Create a clear plan and make it widely available. It should cover processes for removing a player, how to seek medical support and the GRTP.



Support reporting

Encouraging self- or peer-reporting helps players understand they are prioritising their health and safety.



Lead by example

Prioritising player safety and concussion recovery shows the team their safety is more important than winning or pushing through an injury.



Proper technique

Teach players proper tackling, ball and contact skills and body position to avoid high or risky tackles.



Training and conditioning

Maintain training for players, including coordination, safe landing techniques, and neck strength.



Rule enforcement

Enforce player safety rules such as penalties for high tackles or dangerous play, to help avoid risky behaviour.



Monitor player

Coaches should monitor players for signs of fatigue, dehydration, and other injury-risk factors.

Recognise. Remove. Recover. Return.

Patience is key; the brain needs time to heal. By following the four R's of concussion management, players have a roadmap for recovery. The four R's are an easy way to check in on a player's recovery journey.



Recognise

Concussion signs show up in a range of ways. These signs may occur straight away, or up to 48 hours after the event.

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Seen a possible concussion?

Red flag symptoms are severe, and require urgent medical attention.

Keep an eye out for these red flags:

- Neck pain
- Increasing confusion
- Repeated vomiting
- Seizures or convulsions
- Double vision
- Weakness, tingling or burning in arms or legs.
- Decreasing levels of consciousness
- Bad or worsening headaches
- Unusual behaviour.

Other signs to look out for

What you see

- Loss of consciousness
- Not moving
- Slow to get up
- Loss of balance/ coordination

- A visible injury to face or head
- Grabbing or clutching of head
- Dazed or blank look

What they experience

- Headaches
- Blurry vision
- Dizzy
- Tired

- Irritable
- Difficulty with memory or concentration
- Difficulty with bright light or loud noises

What to ask

Failure to answer any of these questions may suggest a concussion:

- Where are we now?
- Which half are we in?
- Who scored last in this game or practice?
- What team did you play last week?
- Did your team win the last game?





Remove

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Remove the player from the game or training. Make sure they see a doctor within 24-48 hours. Also, make sure they are with someone responsible for 1-2 hours afterwards, do not drive or drink alcohol.

Recover

The Graduated Return To Play (GRTP) process is a step-by-step guide to help players safely return. It should be tailored to the player, and supervised by parents, a physio, doctor or coach.

The GRTP process

These timeframes are a guide - the player should only move to the next stage if their symptoms allow.

Relative rest

Days 1 – 2

Rest physically and mentally, by avoiding all activities that make symptoms worse.

Light exercise increasing to rugby fitness

Days 3 – 16

Increase heart rate with low to moderate activity, guided by symptoms.

Non-contact training

Days 17 - 18

Increase physical and mental load with activities such as ball skills or weight training.

Get medical clearance

Day 18

Return

The GRTP process takes a minimum of 21 days.

Rest

Day 21

Recover and monitor for any symptoms.

Full-contact training

Days 18 - 20

Skills and con idence are restored by safely participating in contact drills and training.



Return

After standing down for a minimum of 21 days, and receiving medical clearance, the player can return. This may take longer, depending on the age of the player, and the progress they make with their individual GRTP.

Concussion as part of your team discussion.

The aim of the game is to get the whole team supporting one another. Get your team on top of their concussion knowledge and helping each other.

An easy way to do this is to fold concussion discussion into trainings. Refresh their knowledge with trivia, chats and support.

Team trivia

True or false questions

A concussion only False.

happens if your It can
head gets hit. to the

False. It can be either a hit to the head or body.

Headgear reduces the risk of concussion by up to 45%.

False.
Headgear has not been shown to reduce the risk of concussion, but may help with things like bruises and cuts.

Symptoms can appear up to two days after the initial event.

True.
Symptoms can show up immediately, or develop over the first 48 hours.

New Zealand
Rugby's stand
down period
is two weeks.

False.
The minimum stand down for everyone in community rugby is 21 days, but it depends on the player's recovery

Open questions

In the first two
days after a
concussion,
name two things
you should or
shouldn't do?

screen time.

Shouldn't: go home alone, drink alcohol or drive.

Should: rest, see a

doctor and avoid

What must you do before returning to contact training?

Follow the GRTP protocol and get medical clearance from a doctor.

Can you name three signs of concussion?

Any of the following:

- blurred vision
- nausea
- dizziness
- headaches
- light or noise sensitivity
- memory loss
- difficulty sleeping.



Find extra information, such as video resources, suggested programmes from World Rugby and ACC medical provider details on our site.

nzrugby.co.nz/concussion

