

Concussion Policy

Approved 1 January 2022

Introduction

DanceSport Australia is committed to a fair and safe environment for all DanceSport members and participants. In so doing, DanceSport Australia works and co-operates with all Australian and State Government agencies to bring about that safe environment.

Concussions can occur in daily activity as well as during any sport or recreational activities – including dance. Concussions can have immediate and long-lasting effects on an individual. Therefore, all concussions are considered serious. It is essential that dancers, dance educators, dance coaches, parents, and healthcare providers learn the signs and symptoms of concussion and what to do if a concussion occurs.

1. Definition of Concussion

- 1.1. Concussion refers to a disturbance in brain function caused by trauma to the head or body that can alter brain function. Even what might be considered a 'mild' bump, blow or 'ding' to the head can result in severe consequences serious consequences are not limited only to those with loss of consciousness. Less than 10% of concussions involve a loss of consciousness. 'Mild' impacts may affect the dancers' ability to perform daily mental and physical tasks, may result in changes to mood and personality, and may reduce the dancers' ability to safely participate in dance activity. Each concussion is unique, and each affects the injured dancer in a different way.
- 1.2. Recognition and proper response to concussions when they first occur is imperative to help prevent further injury or even death.

2. Signs and Symptoms

2.1. A dancer may experience or demonstrate any of the signs or symptoms below after sustaining a trauma to the head or body. Keys to identifying concussion include an observed or reported forceful bump, blow or jolt to the head or body that results in rapid movement of the head AND any changes in the dancer's behaviour, thinking or physical function. It is important to remember that you can't 'see' a concussion and that not all dancers will experience or report the symptoms right away. Some dancers may wait for hours or even days after the injury to report a problem.

Signs Observed by Others Symptom	ns Reported by Dancer
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 Appears dazed or confused Is confused Forgetfulness Is unsure of surroundings Moves clumsily/is uncoordinated Answers questions slowly Loses consciousness (even briefly) Demonstrates behaviour, mood or personality changes Can't recall events prior to hit or fall Nause tinglir Balan Doub the exit of the ex	nce problems or dizziness le or blurry vision, ringing in ars itivity to light and noise ased emotional viour/irritability entration or memory problems ng sluggish, low energy, foggy

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oblems with insomnia or
cessive fatigue

- 2.2. Most individuals with a concussion will fully recover in a timely manner given early and proper care. However for some individuals, signs and symptoms of concussion may last for days, weeks or longer and may be present during daily functioning, not only with exercise or dance activity.
- 2.3. Research informs us that some aspects of cognition and the body's balance system can be affected for months following concussion. Dancers who experience any of the signs or symptoms listed above following a trauma to the head or body should be immediately kept out of dance participation and any activities that increase symptoms until a licensed health care provider, experienced in evaluating concussion, says they are symptom-free and that it is safe to return to activity. A repeat concussion that occurs before the brain has recovered from the first trauma usually within a short time period (hours, days, weeks) can slow the recovery process and/or increase the chances for long-term problems. Thus the importance of monitoring and clearance by a licenced healthcare provider trained in concussion management.

3. Initial Response to Suspected Concussion

- 3.1. If the dancer loses consciousness:
 - a) Dial 000.
 - b) Do not move dancer.
 - c) A qualified healthcare provider or first aid responder should immediately perform a primary survey to ensure the dancer's airway, breathing and circulation are not compromised, and to check for signs of additional injury.
 - d) Parents/guardians/next of kin should be contacted.
- 3.2. If the dancer is conscious:
 - a) A decision must be made to remove (or not remove) the dancer from the floor for medical assessment. The responsibility for making this decision is prioritised as:
 - i) A qualified healthcare provider or first aid responder, if present; then
 - ii) The Chairman of Adjudicators; then
 - iii) The event organiser's senior person in attendance.
 - b) If removed, the dancer should not be left alone.
 - c) Parents/guardians/next of kin should be contacted.

4. Management

- 4.1. Concussion management includes both physical and cognitive (mental) rest until symptoms resolve for all activities of daily living prior to returning to dance. If there is any question whether a dancer should participate, the following should be adopted: "When in doubt, sit them out."
- 4.2. Monitoring for mental or physical deterioration over the initial few hours after injury is essential.
- 4.3. Restful sleep and relaxation is important. Like an injury, the injured body part (in this case the brain) needs rest from activity to promote healing.
- 4.4. DO NOT return to dance the same day as the injury, even if symptoms resolve.
- 4.5. DO return to dance only after being cleared by a licensed healthcare provider experienced in concussion management, which may include a variety of tests designed to assess brain function (neurocognitive tests).

5. Return to Dance

- 5.1. Once the dancer's symptoms have resolved with daily activity, the dancer should follow a step-wise return to dance protocol. The dancer should only progress to the next level if symptom free at the current level and if at any stage the dancer experiences a recurrence of symptoms, he/she needs to return to the previous level of activity until the symptoms resolve and should not try to progress for at least 24 hours.
- 5.2. Each step may take a minimum of one day, depending on the duration or recurrence of symptoms. Dancers will progress through the following at differing rates:
 - a) No physical activity until the dancer is asymptomatic (has no symptoms) at rest
 - b) Light aerobic exercise (walking or stationary bike, but not resistance training)
 - c) Dance specific training, exercise and daily activities no jarring movements
 - d) Non-contact dance training and return to cognitive skills (light reading and computer work)
 - e) Full contact dance training after medical clearance (may include cognitive and physical testing)
 - f) Return to unrestricted class, rehearsal, performance after medical clearance
 - 5.3. A dancer may work with a number of licensed healthcare providers who will assist in his/her recovery including certified athletic trainers, physiotherapists, sports medicine physicians, neuro-psychologists, psychiatrists, and/or osteopaths.