



RETURN TO SCHOOL (RTS) PLAN FOLLOWING A CONCUSSION: FOR CHILDREN AND YOUNG PEOPLE

Following a concussion there should be a gradual return to activity before full participation in school. The following chart is a guideline to help a child or young person safely return to school using a staged approach. Recovery from concussion is an individual process and any return to activity should be done in consultation with a doctor or health care professional.



FOLLOWING CONCUSSION

Stage	Home Activity	School Activity/Teacher Notes
1. No cognitive activity as long as there are symptoms. 24-48 hrs.	<ul style="list-style-type: none"> Complete mental rest at home (including screen time). Allow as much sleep as possible. Limit things that require your child to think, focus, and reason or remember. Remove any electronics and computers from your child's room. Remove any activity planners and to-do lists from your child's room. Give your child plenty of fluids to drink. 	<ul style="list-style-type: none"> Remove child from school. <p>Teacher notes:</p> <ul style="list-style-type: none"> No school for 2 to 3 days.
<p>When the child is symptom free for 24 hours move on to stage 2. Child should be experiencing no headaches, and their concentration and energy levels should have significantly improved.</p>		
2. Light cognitive activity.	<ul style="list-style-type: none"> Stay in quiet rooms. Allow as much sleep as possible. Have structured school-work time on non-school days. Limit screen time to less than two hours a day. For example, there may be 20 minutes of screen time followed by two hours of break time. Help your child to not stress over missed school work. 	<ul style="list-style-type: none"> Attend school 3 half-days a week (or build up to this). Take rest days in between school days with minimal screen time. Rest during recess and PE (no sport). <p>Teacher notes:</p> <ul style="list-style-type: none"> Reduce workload and have more simple learning objectives. Allow the student to 'read' the material rather than need to learn. For example, provide notes to highlight rather than having student take notes. Excuse student from routine work/tests. Ask about symptoms after/during class.
<p>Move to next stage if no headache after half-day school attendances. Ensure the child's concentration and fatigue has significantly improved to be able to tolerate a full day.</p>		
3. Moderate and more frequent cognitive activity.	<ul style="list-style-type: none"> Have rest periods after school, as needed 	<ul style="list-style-type: none"> Increase school to full-time with rest periods as needed. <p>Teacher notes:</p> <ul style="list-style-type: none"> Reduce workload and have simpler learning objectives. Excuse student from routine work/tests. Give the student minimal homework. Ask about symptoms after/during class.
<p>Move to next stage if no headache after full day; concentration and fatigue have significantly improved.</p>		
4. Return to school full-time and increase cognitive load.		<ul style="list-style-type: none"> Increase cognitive load during school and increase homework load (individualised). <p>Teacher notes:</p> <ul style="list-style-type: none"> Re-introduce complex learning objectives, routine work and tests as tolerated, with accommodations.
<p>Progress to final stage if child is symptom free and concentration and fatigue levels are back to normal.</p>		
5. Back to regular full cognitive activity.	<ul style="list-style-type: none"> Able to participate in all normal home and social interactions. 	<ul style="list-style-type: none"> Able to participate in all school academic activities.

*Refer to Fact sheet: Physical and Cognitive Activity Suggestions for Recovery Stages after Concussion

**Screen time is the time spent viewing of TV/video, computer, electronic games, hand-held devices or other visual devices.