

Coaches Code of Conduct‐ Concussion Awareness

**I can help prevent concussions through my:**

* Efforts to ensure that my athletes wear the proper equipment and wear it correctly.
* Efforts to help my athletes develop their skills and strength so they can participate to
* the best of their abilities.
* Respect for the rules of my sport or activity and efforts to ensure that my athletes do,
* too.
* Commitment to fair play and respect for all (respecting other coaches, team trainers,
* officials and all participants and ensuring my athletes respect others and play fair). \*

**I will care for the health and safety of all participants by taking concussions**

**seriously. I understand that:**

* A concussion is a brain injury that can have both short- and long-term effects.
* A blow to the head, face, or neck, or a blow to the body may cause the brain to move around inside the skull and result in a concussion.
* A person doesn’t need to lose consciousness to have had a concussion.
* An athlete with a suspected concussion should stop participating in training, practice or competition **immediately**.
* I have a commitment to concussion recognition and reporting, including self-reporting of possible concussion and reporting to a designated person when an individual suspects that another individual may have sustained a concussion.
* Continuing to participate in further training, practice or competition with a suspected concussion increases a person’s risk of more severe, longer lasting symptoms, and increases their risk of other injuries or even death.

**I will create an environment where participants feel safe and comfortable**

**speaking up. I will:**

* Encourage athletes not to hide their symptoms, but to tell me, an official, parent or another adult they trust if they experience **any** symptoms of concussion after an impact.
* Lead by example. I will tell a fellow coach, official, team trainer and seek medical attention by a physician or nurse practitioner if I am experiencing any concussion symptoms.

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* Understand and respect that any athlete with a suspected concussion must be removed from sport and not permitted to return until they undergo a medical assessment by a physician or nurse practitioner and have been medically cleared to return to training, practice or competition.
* *For coaches only*: Commit to providing opportunities before and after each training, practice and competition to enable athletes to discuss potential issues related to concussions.

**I will support all participants to take the time they need to recover.**

* I understand my commitment to supporting the return-to-sport process.
* I understand the athletes will have to be cleared by a physician or nurse practitioner before returning to sport.
* I will respect my fellow coaches, parents, physicians and nurse practitioners and any decisions made with regards to the health and safety of my athletes.

**I will help prevent concussions, through my:**

* Commitment to zero-tolerance for prohibited play that is considered high risk for causing concussions.
* Acknowledgement of mandatory expulsion from competition for violating zero tolerance for prohibited play that is considered high risk for causing concussions.
* Acknowledgement of the escalating consequences for those who repeatedly violate the Concussion Code of Conduct.

**By signing here, I acknowledge that I have fully reviewed and commit to this Concussion Code of Conduct.**

**Coach:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Official:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_