**OCAA Concussion Code of Conduct**

**Athletes**

**Background**

Rowan’s Law (Bill 193) was given Royal assent on March 7th, 2018 by the Ontario Legislature. Rowan’s Law imposes various requirements on sport organizations, or entities that carry out amateur competitive sport. These requirements include:

* Any individual cannot participate in a sport activity unless they confirm they have reviewed the ministry approved concussion awareness resources and signed the sport organizations concussion code of conduct.
* Organizations must establish a removal-from-sport protocol for athletes who are suspected of having sustained a concussion, as well as a return-to-sport and return-to-learn protocol for athletes who have sustained a concussion.

In accordance with Rowan’s Law, the OCAA has developed a Code of Conduct for all participating athletes, coaches and athletic therapists to read and follow. OCAA does not tolerate dangerous behaviours which are considered high risk for causing concussion or head injuries. The following expectations are required by our athletes. I acknowledge the following:

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|  | 1. 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.
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| initial |  |
|  | 1. Individuals are expected to be completely honest to themselves, therapy staff, and doctors about how they are feeling both during assessment and follow up appointments.
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| initial |  |
|  | 1. I have a commitment to sharing any pertinent information regarding incidents of removal from sport with the athlete’s school and any other sport organization with which the athlete has registered.
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| initial |  |
|  | 1. I am expected to wear proper equipment and avoid intentional contact with an athlete that is in a vulnerable position.
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| initial |  |
|  | 1. I understand I will not be able to return to play following an incident where I experience signs and symptoms of concussion. I understand my commitment to supporting the return-to-sport process, including the 6-step return to play guidelines. I understand I will have to be cleared by a physician or qualified medical professional, preferably one with experience in concussion management, prior to returning to play.
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| initial |  |
|  | 1. I have a commitment to fair play and respect for all (respecting other coaches, team therapy staff, officials, and all participants and ensuring my athletes respect others and play fair).
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| initial |  |

**I have read and understand the statements in the Code of conduct for Athletes and agree to conduct myself in a manner that demonstrates the established standards in the OCAA’s Code.**

**I have reviewed the concussion awareness resources provided to me by my institution.**

**I have had the opportunity to ask questions and been made aware of my institutions removal-from-sport and return-to-sport policies.**

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|  |  |  |  | Click or tap to enter a date. |
| Name of Student (Print) |  | Signature of Student\* |  | Date |
|  |  |  |  |  |
|  |  |  |  | Click or tap to enter a date. |
| Name of Parent (if under 18) |  | Signature of Parent (if under 18) |  | Date |

*\*By typing my name above, this will be acknowledged as my signature.*