

Return to School – Mild Brain Injury

What is a mild brain injury?

A mild brain injury occurs when a student experiences a knock or blow to the head that may cause some temporary and short lived changes in the student's level of consciousness (i.e., <30 minutes), confusion/disorientation/ or difficulties recalling what is happening (<24 hours), and may be associated with a fracture or small bleed. Immediately, after their injury students can experience a number of temporary symptoms including, headache, fatigue, noise/light sensitivity, changes in feelings (e.g., irritability, easily upset), and changes in thinking skills (e.g., decreased concentration, taking longer to process information or think of responses). For most students, these symptoms resolve within 1-3 weeks of their injury, although some students may have symptoms for up to 3 months after their injury. While recovering from a mild brain injury students require both physical and cognitive rest.

When should a student to return to school?

Current guidelines recommend that student's return to activities (including learning) should be done in an individualised and graded manner. That is, student's activities are slowly increased as they are able to tolerate more challenging tasks, without exacerbating or bringing on symptoms. During the early post-injury period complete cognitive rest is recommended. This means no, video/ computer games, texting, homework or school work, iPad, reading, or strenuous social activities (e.g., going to restaurant).

When students are symptom free at this stage, gradually introduce gentle activity such as, 15 minutes of screen time twice per day, reading 5 pages of a book, going for a walk, or having a friend over. Once students tolerate this level of activity, begin introducing more challenging tasks (e.g., 30 minutes of homework, reading for lengthier periods, and social visits to). Once the student is able to tolerate 1-2 hours of homework tasks, begin reintroducing them to school (e.g., half days at school) before increasing to full days at school. Only after the student is tolerating full days at school without symptoms, do you encourage the student to 'catch up' on *essential* missed work. If students experience a worsening of symptoms at any stage try reducing the level of cognitive activity (e.g., instead of 30 minutes of homework, trial 20 minutes). Once this level of activity is well tolerated, begin re-introducing more complex tasks (e.g., 25-30 minutes of work).

What can I do to help my student overcome symptoms of Mild Brain Injury?

Fatigue

- Allow for plenty of rest breaks during class and school. Provide a quiet area for the student to rest if needed.
- Reduce the amount of work a student is expected to complete.
- Allow for a peer note taker who can provide the student with notes (rather than having the student become overly fatigued by listening and taking notes).

Headache

- Identify and manage factors that aggravate headaches.
- Allow the student to move to a quiet area or go to sick bay if symptoms persist or worsen.
- Provide analgesia as recommended by treating medical team.

Noise/ Light sensitivity/ Visual symptoms

- Allow the student to have lunch in a quieter area of the school ground.
- Limit or avoid noisy classes such as music, manual arts, PE, assembly.
- Allow the student to wear sunglasses in school.
- Reduce the brightness of screens such as iPads, computers, smart boards, etc
- Turn off fluorescent lights as needed.

Cognitive (e.g., concentration, processing speed)

- Allow the student extra time to complete tasks or have them complete tasks at their own rate.
- Provide the student with only one activity to complete at a time.
- Where possible minimise distractions.
- Monitor the student's concentration. They may need breaks or prompts and cues to help stay on track.
- Encourage and demonstrate the use of organisation and memory aids (e.g., diaries, calendars, phone).

Feelings

- Provide the student with plenty of opportunity to express their feelings. Where possible validate the student's feelings and if appropriate provide them with reassurance that activity restrictions are temporary.
- Link the student in with an appropriate person (e.g., guidance officer, Kids Help Line, GP, local Psychologist) if their feelings are of concern.

General

- Share medical advice, including information on return to school and activity restrictions with the student's school to ensure a safe, successful, and timely return to school.

What if the student has had their injury during an exam period?

Although most students look 'well' after a mild brain injury it is important to remember that they frequently experience a number of temporary symptoms that can negatively impact on their performance on exams and other formal assessments (such as assignments, in class essays). As such it will be essential to,

- Allow for exams or assessments to be postponed, until the student has sufficiently recovered.
- Provide students with extensions to outstanding assignments or projects while they are recovering.
- Allow students additional time in exams to help manage fatigue, and do not schedule more than one exam on the same day.
- Allow for rest breaks during exams and assessment in quiet one-on-one settings.
- Where possible avoid assessing the student on concepts they may have missed while injured.

Special considerations for high school students returning to school

Although the following factors are important for older students and adolescents, early primary and prep students may also benefit from their caregivers considering the following:

- Identify a key school contact who can share information with the large number of teachers involved in a student's care.
- In general, older students prefer to be involved in developing their return to school plan. This may include, checking that strategies are socially acceptable, providing feedback on their symptoms, and helping choose which subjects to return to initially.
- Older students may complete more double lessons (i.e., 70-90 minute classes) and will likely require a number of fatigue breaks.
- Be mindful of which subjects students are returning to. For example, subjects such as woodwork may exacerbate symptoms of noise sensitivity.

- Consider the student's access to the school environment (and distance between classes). The student may require assistance with heavy bags, rest periods for walking long distances, or being allowed to move to the next class early depending on symptoms.

Contact us

Queensland Paediatric Rehabilitation Service

Level 6

Lady Cilento Children's Hospital

501 Stanley Street, South Brisbane

t 07 3068 2950

e QPRS@health.qld.gov.au

In an emergency, always contact 000 for immediate assistance.

All information contained in this sheet has been supplied by qualified professionals as a guideline for care only. Seek medical advice, as appropriate