

## RESOLUTION R2011-35

### A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF SOUTH JORDAN, UTAH, APPROVING A CONCUSSION AND HEAD INJURY AWARENESS POLICY.

**WHEREAS**, in 2011 the Utah Legislature passed H.B. 204 “Protection of Athletes with Head Injuries”; and

**WHEREAS**, H.B. 204 requires that an amateur sports organization adopt and enforce a concussion and head injury policy and lists the requirements for such a policy; and

**WHEREAS**, South Jordan City operates public sports/recreation leagues, camps and events; and

**WHEREAS**, City staff has drafted a “Concussion and Head Injury Awareness Policy,” “Concussion and Head Injury Fact Sheet” and “Concussion and Head Injury Acknowledgement” for participants and their parents or guardians to sign before participating in sports or recreation events where a concussion and or head injury may likely occur; and

**WHEREAS**, the City’s Legal staff has recommended that the policy be adopted by the City Council of the City of South Jordan.

**WHEREAS**, the South Jordan City Council finds it in the best interest of the health and welfare of the South Jordan residents to adopt the “Concussion and Head Injury Awareness Policy,” as provided herein to comply with the changes to Utah Statute and to protect its residents.

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF SOUTH JORDAN CITY, STATE OF UTAH:**

**Section 1.**     **Policy.** South Jordan City recognizes that concussions and head injuries are commonly reported injuries in youth who participate in sports and other recreational activities. We acknowledge the risk of injuries when a concussion or head injury is not properly evaluated and managed. Therefore, a child must be immediately removed from a sporting/recreational event, when the child is suspected of sustaining a concussion or traumatic head injury and seek medical attention. The child must receive medical clearance, from a qualified health care provider, who has within three years before the day on which the written statement is made, successfully completed a continuing education course in the evaluation and management of a concussion, and provide South Jordan City a written statement that the child is cleared to resume participation in the sporting/recreational event.

Individuals, 18 and under, participating in South Jordan City sport/recreation programs receive a copy of this policy and a copy of the Concussion and Head Injury Fact Sheet. They must annually submit a signed head injury and concussion acknowledgement form to the City, indicating that they have reviewed, understand and will abide by the information provided, before they participate in a sport or recreational activity.

South Jordan City requires staff, coaches and volunteers, involved in South Jordan City sport/recreation programs, to undergo a training program for the management of concussions and head injuries.

**Section 2.**     **Fact Sheet and Acknowledgement.** (See attached)

**Section 3. Effective Date.** This resolution will be effective immediately upon passage.

APPROVED BY THE CITY COUNCIL OF THE CITY OF SOUTH JORDAN, STATE OF UTAH, ON THIS 20th DAY OF Sept., 2011, BY THE FOLLOWING VOTE:

	YES	NO	ABSTAIN	ABSENT
Leona Winger	<u>X</u>	_____	_____	_____
Larry Short	<u>X</u>	_____	_____	_____
Kathie L. Johnson	<u>X</u>	_____	_____	_____
Brian C. Butters	<u>X</u>	_____	_____	_____
Aleta A. Taylor	<u>X</u>	_____	_____	_____



Mayor: W. Kent Money  
W. Kent Money, Mayor

ATTEST: Anna M. West  
City Recorder

Approved as to form:

Ray W. Gose  
Assistant City Attorney

# South Jordan City

## CONCUSSION AND HEAD INJURY AWARENESS POLICY

Consistent with the requirements of UCA Section 26-53-201 and 26-53-301

### Adopted by Resolution R2011-35

#### Policy:

South Jordan City recognizes that concussions and head injuries are commonly reported injuries in youth who participate in sports and other recreational activities. We acknowledge the risk of injuries when a concussion or head injury is not properly evaluated and managed. Therefore, a child must be immediately removed from a sporting/recreational event, when the child is suspected of sustaining a concussion or traumatic head injury and seek medical attention. The child must receive medical clearance, from a qualified health care provider, who has within three years before the day on which the written statement is made, successfully completed a continuing education course in the evaluation and management of a concussion, and provide South Jordan City a written statement that the child is cleared to resume participation in the sporting/recreational event.

Individuals, 18 and under, participating in South Jordan City sport/recreation programs receive a copy of this policy and a copy of the Concussion and Head Injury Fact Sheet. They must annually submit a signed head injury and concussion acknowledgement form to the City, indicating that they have reviewed, understand and will abide by the information provided, before they participate in a sport or recreational activity.

South Jordan City requires staff, coaches and volunteers, involved in South Jordan City sport/recreation programs, to undergo a training program for the management of concussions and head injuries.

Any questions regarding this policy may be directed to South Jordan City at (801) 254-3742.

South Jordan City  
1600 West Towne Center Drive  
South Jordan, UT 84095  
(801) 254-3742  
[www.sjc.utah.gov](http://www.sjc.utah.gov)



# South Jordan City

## CONCUSSION AND HEAD INJURY FACT SHEET

### WHAT IS A CONCUSSION?

A concussion is a traumatic brain injury that alters the way your brain functions. Effects are usually temporary, but can include problems with headache, concentration, memory, judgment, balance and coordination.

Concussions are common, particularly if you play a contact sport. This injury needs time and rest to heal properly.

### SYMPTOMS OF A CONCUSSION

- Headache
- Nausea
- Dizziness
- Blurry Vision
- Sensitivity to Noise and/or Light
- Feeling Groggy
- Confusion

### SUSPICION OF CONCUSSION/HEAD INJURY

A child must be immediately removed from a sporting event, when the child is suspected of sustaining a concussion or traumatic head injury. Seek medical attention right away. A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to sports. Children, who return to play too soon, while the brain is still healing, risk a greater chance of having a second concussion. Additional concussions can be very serious.

### HOW TO PREVENT A CONCUSSION

- Follow your coaches rules for safety and the rules of the sport
- Practice good sportsmanship at all times
- Use the proper sports equipment, including personal protective equipment (helmets, padding, shin guards and eye and mouth guards)
- Use the proper sports equipment for the game, position or activity
- Wear sports equipment correctly and that fits well
- Wear sports equipment every time you play

### WHEN CAN A CHILD RETURN TO PLAY

The child must receive medical clearance, from a qualified health care provider trained in the evaluation and management of a concussion, and provides the sports organization a written statement that the child is cleared to resume participation in the sporting event.



# South Jordan City

## CONCUSSION AND HEAD INJURY ACKNOWLEDGEMENT

(ATHLETE/PARENT)

The purpose of this acknowledgement form is to confirm that you have read the Concussion and Head Injury Policy and Concussion and Head Injury Fact Sheet. Specifically, that you understand the information provided to you, by South Jordan City, related to potential concussions and head injuries occurring during participation in a sporting event.

(Please Print)

I, \_\_\_\_\_, as a participant of a South Jordan City sport/recreation program;

(Please Print)

and I, \_\_\_\_\_, as the parent/legal guardian of the above named participant; have read the informational material provided to us by South Jordan City, related to concussions and head injuries occurring during participation in a youth sport/recreation program, understand its contents and warnings and agree to abide by the concussion and head injury policy.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

Received a copy of:

South Jordan City Head Injury Awareness Policy

South Jordan City Concussion and Head Injury Fact Sheet

