

## Return to Learn Planning Document

G. F. Strong School Program (Robyn Littleford/Helen Salatellis)

The student's individual symptoms will guide the creation of this planning document. To promote recovery within the school context, the goal is to have the student participate in an appropriate balance of cognitive activity and rest, thereby avoiding overexerting the brain to the level of worsening or reproducing symptoms. aZ

STUDENT: \_\_\_\_\_

SCHOOL CONTACT PERSON: \_\_\_\_\_ DATE: \_\_\_\_\_ REVIEW DATE: \_\_\_\_\_

SYMPTOMS	STAGE	DAILY SCHEDULING	ACCOMMODATIONS	ACCOMMODATIONS (CONT'D)
<p><b>PHYSICAL:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Headache</li> <li><input type="checkbox"/> Fatigue</li> <li><input type="checkbox"/> Sleep disturbance</li> <li><input type="checkbox"/> Dizziness/lightheadedness</li> <li><input type="checkbox"/> Nausea/vomiting</li> <li><input type="checkbox"/> Light sensitivity</li> <li><input type="checkbox"/> Noise sensitivity</li> <li><input type="checkbox"/> Blurred vision</li> <li><input type="checkbox"/> Double vision</li> <li><input type="checkbox"/> Balance problems</li> <li><input type="checkbox"/> Other physical symptoms: _____</li> </ul> <p><b>COGNITIVE:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Poor attention/concentration</li> <li><input type="checkbox"/> Forgetfulness/poor memory</li> <li><input type="checkbox"/> Taking longer to think</li> </ul> <p><b>EMOTIONAL:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Irritability/easily angered</li> <li><input type="checkbox"/> Frustration/impatience</li> <li><input type="checkbox"/> Restlessness</li> <li><input type="checkbox"/> Depression</li> <li><input type="checkbox"/> Anxiety</li> </ul> <p><b>PRE-EXISTING ISSUES:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Prior concussion</li> <li><input type="checkbox"/> Learning Disability</li> <li><input type="checkbox"/> ADD/ADHD</li> <li><input type="checkbox"/> Depression</li> <li><input type="checkbox"/> Anxiety</li> <li><input type="checkbox"/> History of migraines</li> <li><input type="checkbox"/> Other: _____</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> <b>STAGE 1</b> Student is resting at home (24-48 hrs.)</li> <li><input type="checkbox"/> <b>STAGE 2</b> Light mental activity at home, as tolerated, and with frequent rest breaks</li> <li><input type="checkbox"/> <b>STAGE 3</b> Student is at school part-time, receiving maximum accommodations, on a shortened schedule with built-in breaks</li> <li><input type="checkbox"/> <b>STAGE 4</b> Student is increasing time spent in school, and receiving moderate learning accommodations</li> <li><input type="checkbox"/> <b>STAGE 5</b> Student is at school full-time and requiring minimal learning accommodations</li> <li><input type="checkbox"/> <b>STAGE 6</b> Student is at school full-time and without learning accommodations</li> </ul>	<p><b>START TIME DETAILS:</b> _____</p> <p><b>END TIME DETAILS:</b> _____</p> <p><b>COURSE EXPECTATIONS/ PROGRAM EXPECTATIONS:</b> _____ _____ _____</p> <p><b>LEARNING SUPPORT DETAILS:</b> _____</p> <p><b>PE DETAILS:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> No PE – medical exclusion</li> <li><input type="checkbox"/> Adapted PE program</li> <li><input type="checkbox"/> Full PE – written clearance provided</li> </ul>	<p><b>REST BREAKS:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Frequency _____</li> <li><input type="checkbox"/> Duration _____</li> <li><input type="checkbox"/> Location _____</li> </ul> <p><b>CLASSROOM ENVIRONMENT:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Preferential seating at front of class</li> <li><input type="checkbox"/> Seat way from bright sunlight</li> <li><input type="checkbox"/> Temporary exclusion from classes with excessive noise and/or safety issues                             <ul style="list-style-type: none"> <li><input type="checkbox"/> Band/choir</li> <li><input type="checkbox"/> Wood/metalwork</li> <li><input type="checkbox"/> Other: _____</li> </ul> </li> <li><input type="checkbox"/> Quiet space to complete school work                             <ul style="list-style-type: none"> <li><input type="checkbox"/> Library</li> <li><input type="checkbox"/> Learning Support</li> <li><input type="checkbox"/> Counselling</li> <li><input type="checkbox"/> Other: _____</li> </ul> </li> </ul> <p><b>GENERAL CLASSROOM LEARNING:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Reduce work load</li> <li><input type="checkbox"/> Prioritize essential work</li> <li><input type="checkbox"/> Use peer tutor or partner</li> <li><input type="checkbox"/> Provide written instruction</li> <li><input type="checkbox"/> Provide class notes</li> <li><input type="checkbox"/> Use and review student agenda</li> </ul> <p><b>RE: ATTENTION/CONCENTRATION:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Shorter assignments</li> <li><input type="checkbox"/> Break down tasks</li> <li><input type="checkbox"/> Lighter work load</li> </ul> <p><b>RE: MEMORY</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Repetition</li> <li><input type="checkbox"/> Written instructions</li> <li><input type="checkbox"/> Use of calculator</li> <li><input type="checkbox"/> Shorter reading passages</li> <li><input type="checkbox"/> Smaller chunks to learn</li> <li><input type="checkbox"/> Recognition cues</li> </ul>	<p><b>RE: PROCESSING SPEED</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Extra time for tasks and tests</li> <li><input type="checkbox"/> Slow down verbal information</li> <li><input type="checkbox"/> Check for comprehension versus memorization</li> </ul> <p><b>RE: MOOD</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Access to school counsellor</li> <li><input type="checkbox"/> Reduce stressful situation</li> <li><input type="checkbox"/> Provide supportive feedback</li> <li><input type="checkbox"/> Allow student to leave class when needed</li> <li><input type="checkbox"/> Provide avenues for student to express themselves</li> <li><input type="checkbox"/> Allow time for socialization</li> <li><input type="checkbox"/> Provide reassurance</li> </ul> <p><b>RE: HOMEWORK</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Limited to _____ per day</li> </ul> <p><b>RE: ASSESSMENT</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> No testing</li> <li><input type="checkbox"/> Limited testing (1 test per day)</li> <li><input type="checkbox"/> Accommodations                             <ul style="list-style-type: none"> <li><input type="checkbox"/> Extra time</li> <li><input type="checkbox"/> Separate setting</li> <li><input type="checkbox"/> Breaks as required</li> </ul> </li> </ul> <p><b>RE: ADDITIONAL CONSIDERATIONS</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Sunglasses</li> <li><input type="checkbox"/> Hat</li> <li><input type="checkbox"/> Noise cancelling/reducing earplugs</li> <li><input type="checkbox"/> Water bottle</li> <li><input type="checkbox"/> Earphones for music</li> </ul> <p><b>OTHER:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Class transition before bell</li> <li><input type="checkbox"/> No assemblies</li> <li><input type="checkbox"/> Restricted recess/lunch activities (Alternate: _____)</li> <li><input type="checkbox"/> Elevator pass</li> </ul>

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