

# CERTIFIED CONCUSSION SPECIALIST COMMITTEE MEMBER ROLE DESCRIPTION

## SUMMARY

The Committee Member of the ad hoc *Certified Concussion Specialist* committee is a volunteer participant who assists in the development of the *Certified Concussion Specialist* curriculum.

## Educational Requirements

- The educational requirements are noted by specific role:
  - Behavioral/Emotional Health Specialist ..... Master’s, PhD
  - Cognitive Rehabilitation Specialist ..... Master’s, PhD
  - Diagnostic Expert ..... MD
  - Fatigue Specialist..... MD
  - Headache Specialist ..... MD
  - Hearing Specialist ..... AudD or Master’s\*
  - Neurologist ..... PhD, Board Certified
  - Neuropsychology ..... PhD, Board Certified
  - Physical Medicine and Rehab Physician ..... MD, Board Certified PM&R
  - RTL Specialist..... Master’s, PhD; Pediatric Experience
  - RTP Specialist ..... Master’s, PhD
  - RTW Specialist..... Master’s, PhD
  - Sleep Disorder Specialist ..... MD, DO, PhD
  - Social Work/Case Management ..... MSW, RN
  - Sports Concussion Specialist ..... MD, PhD
  - Vestibular Rehabilitation Specialist ..... PT, OT or equivalent, Certified in Vestibular Tx
  - Vision Rehabilitation Specialist ..... MD, MA, OTR/L or equivalent

## EXPERIENCE REQUIREMENTS

- 5+ years working in the field of brain injury and/or 100+ patients treated or referred for concussion

## RESPONSIBILITIES

- Attending committee and subcommittee meetings
- Defining expected outcomes within the scope of the project goals
- Identifying a common concussion/mTBI nomenclature for the duration of the project
- Identifying existing guidelines that are applicable to the Diagnosis/Assessment and Management/Treatment of acute and chronic concussion
- Identifying gaps in areas where guidelines do not exist
- Assisting with development of clinical practice guidelines using the AGREE approach
- Assisting with identification of potential authors for curriculum content areas with utilization of the identified guidelines and practice recommendations (in conjunction with BIAA)

## SKILLS

- Knowledge and demonstrated ability to diagnose and/or treat concussion
- Some familiarity with guideline development

## **CERTIFIED CONCUSSION SPECIALIST COMMITTEE MEMBER ROLE DESCRIPTION**

### **TIME COMMITMENT (see page 3 for detailed outline)**

- 14-month project
- Minimally 14 committee meetings
- Undetermined subcommittee meetings
- Outside of committee work to identify guidelines, develop practice guidelines, develop content, etc.

### **MEETINGS & COMMUNICATION**

- All meetings are conducted via GoToMeeting or GoToWebinar and will occur at mutually agreeable times
- All tasks, communications, project management, file management and file storage will occur through a MONDAY.COM account

### **COMMITTEE MEMBERS**

- The committee size will not exceed 20 members inclusive of committee chairs.
- Subcommittees will be developed at appropriate stages of the project

### **Expenses**

- Significant expenses are not anticipated

## CERTIFIED CONCUSSION SPECIALIST COMMITTEE MEMBER ROLE DESCRIPTION

### TIME COMMITMENT - Participation in this project entails the following:

A 14-month commitment as a member of the **Concussion Specialist Certification Committee**:

- **Phase 1.0** establishes the committee. The committee members meet 3 times (1.0 to 1.5-hour meetings). The goal is to establish the project and provide everyone a full understanding of the project.

- **Phase 1.0 – (Mar '19 – May '19)**

1. Focus: Introductions, Introduce Project Plan and Scope
2. Focus: Develop Project Goals; Finalize Curriculum Outline
3. Focus: Identify Common Concussion Nomenclature

- **Phase 1.1** is dedicated to identification of existing practice guidelines (e.g., Ontario, DVBC, current literature, etc.). The committee members meet 6 times (1.0 to 1.5-hour meetings). Depending upon individual committee members' area of expertise, there will be subcommittee meetings regarding the areas in items 2-5 below.

- **Phase 1.1 – (May '19 – Oct '19) - 6 committee meetings to identify existing guidelines**

1. Focus: Concussion Basics
2. Focus: Acute Phase Diagnosis/Assessment \*
3. Focus: Acute/Subacute Phase Management/Tx \*
4. Focus: Persistent Symptoms & Chronic Concussion Management/Tx \*
5. Focus: Chronic Phase - Management/ Tx \*
6. Focus: Review of Identified Guidelines

- **Phase 1.2** is dedicated to identifying gaps where clinical guidelines do not exist, establishing clinical practice guidelines using a structured consensus process, and appraisal of the quality of clinical evidence.

- **Phase 1.2 – (Aug '19 – Feb '20) – 3 committee meetings to identify gaps in guidelines \*\***

1. Focus: Review of Existing Guidelines to Identify Gaps from Phase 1.1 \*
2. Focus: Develop PICO(T) questions for each gap item \*
3. Focus: Discuss literature search output for each gap item \*
4. Focus: Develop Draft Recommendations for Each Gap Item \*
5. Focus: Review Final Recommendations for Each Gap Item \*

- **Phase 2.0** is dedicated to the development of the **Concussion Specialist Certification** curriculum based on the information provided in the previous phases. In this phase, committee members may participate in the development of comprehensive outlines.

- **Phase 2.0 (Nov '19 to Apr '20) Curriculum Outline Development \*\***

1. Chronic Phase - Management/ Treatment Curriculum Outline
2. Acute Phase Diagnosis/Assessment
3. Acute/Subacute Phase Management/Tx
4. Persistent Symptoms & Chronic Concussion Management/Tx
5. Chronic Phase - Management/ Tx

- **Phase 3.0** is dedicated to the development of a concussion certification examination to assess the core competencies geared to practitioners, based on the knowledge gained from previous phases.

- **Phase 3.0 (Mar '20 to Jun '20) Concussion Certification Examination Development**

1. Item Development (this phase is completed outside of this committee)

\* Indicates that committee members will most likely break off into sub-committees based on their areas of expertise. Those meetings will be ad hoc. \*\* Committee members are intensely supported by the committee chairs, whose roles include project management and clinical expertise and who are charged with the bulk of the heavy lifting on this project.