

INTRODUCTION

Head injury is defined by the National Institute for Health and Clinical Excellence (NICE) as any trauma to the head/face, other than superficial injuries. Within the school setting this may vary from minor to very serious and potentially life threatening.

PROCEDURE

All injuries should be assumed as significant until proven otherwise by thorough, documented assessment. In order to make this assessment quick and effective, all coaches and teaching staff are issued with a Pocket Sport Concussion Assessment Tool (SCAT) card for reference and assessment if medical staff are not present at the fixture.

If there is suspicion of a spinal injury or loss of consciousness, the pupil must not be moved and 999/112 called immediately. A spinal injury should be considered if there is any neck pain or bone tenderness, spinal pain, neurological deficit or loss of sensation in extremities.

Any pupil that sustains a blow to the head or face must be removed from play immediately. They should not be allowed to continue to play until assessed by a pitch-side medical professional (if present) or accompanied to the Medical Centre for assessment and appropriate intervention.

Please note that whilst an initial concussion is unlikely to cause any permanent damage, a repeat injury to the head soon after a prior, unresolved concussion can have serious consequences. The subsequent injury does not need to be severe to have permanently disabling or deadly effects.

MEDICAL CENTRE ASSESSMENT

Initial Assessment

On arrival to the Medical Centre the pupil should be assessed by the Nurse. Minimal acceptable documentation must include:

- Nature/mode of injury
- Establish that the pupil has a full recollection of events. Any loss of consciousness?
- BP, Pulse, Pupil size and reactivity
- Glasgow Coma Score (all three components)

These must be documented on separate nursing sheets, not just the medical chit.

- If no neurological symptoms are displayed, the pupil should be kept in the Medical Centre for a minimum of **two hours** with regular half hourly neuro obs.
- If mild symptoms are displayed, e.g.: dizziness, headache, the pupil must be kept for a minimum of **six hours** with half hourly observations for 4 hours then hourly for the remaining 2 hours.

Please note: Safety of the pupil is of paramount importance. If in doubt, call the Senior Sister for advice and keep the pupil for longer/overnight if you are not happy.

INFORMATION

The pupil's parents and Housemaster/Housemistress/Matron should be informed as soon as is practical. FIT

FOR DISCHARGE

If the pupil is fit to go back to House or their own homes for rest, Matrons and Parents should be informed and advised on what symptoms to look out for over the next 24/48hours. The pupil should be discharged with a Head Injury Advice Sheet. They should then re attend the Medical Centre after 48 hours for follow up using SCAT3 assessment tool (appointment in diary).

Pupils should not return to sport until a follow up assessment has been performed and documented by Medical Centre Staff.

CONCUSSION

Concussion is a disturbance in brain function caused by direct or indirect force to the head and most often does not involve loss of consciousness. Concussion should be suspected in the presence of **any one or more** of the following:

- Symptoms (Headache)
- Physical Signs (Unsteadiness)
- Impaired Brain Function (Confusion)
- Abnormal Behaviour (Change in Personality)

If a pupil has been concussed they must remain off all contact sport for **3 weeks**. The Medical Centre Team are responsible for performing the assessments of concussion and injuries and their advice must be observed without exception. Failure to observe advice from the Medical Team may place a pupil at serious risk and is a responsibility that should not be undertaken by anyone other than a trained medical professional.

It is not unusual for symptoms from a head injury to persist for several days or weeks. Therefore returning to school or sport following a head injury may be dependent on special concessions for the pupil regarding academic and sport exemptions being put into place.

MANAGEMENT OF HEAD INJURIES DURING AWAY MATCHES

If a pupil sustains a heads injury during an away match a neurological assessment by a medical professional should be performed prior to travelling back to school. The pupil must be deemed fit to travel and appropriate persons are to be contacted (parents/guardians, matrons, HsM's). On return to school the pupil must attend the Medical Centre for follow up with the documentation of the initial assessment that was performed at the away match.

GUIDELINES RECOGNISED BY Medical Officers of Schools Association (MOSA)

“A player who has suffered concussion shall not participate in any match or training session for a minimum period of three weeks from the time of injury, and may only do so when symptom-free and declared fit, after medical examination. This rest period is necessary, as a child/ adolescent who is symptomatic following a head injury is likely to have sustained a greater impact force compared to an adult with the same level of post-concussive symptoms.”