



# Caversham Preparatory School

## Policies and Procedures

### Head Injury Policy

## Head Injury Policy

### Introduction

The purpose of this policy is to minimise the short and long term adverse effects of head injuries, whether the injury occurred in school or outside of school.

### Definition of Concussion

Concussion is the sudden but short-lived loss of mental function that occurs after a blow or other injury to the head. It is the most common but least serious type of brain injury. The medical term for concussion is minor traumatic brain injury. If a brain scan is carried out, concussion is only diagnosed if the scan is normal – for example, there is no bleeding or swelling of the brain.

### Symptoms of concussion

include;

- Nausea or vomiting
- Amnesia, confusion, irritability
- Severe headache
- Pressure in head
- Neck pain
- Balance problems
- Visual disturbances, blurred vision, sensitivity to light
- Sensitivity to noise
- Dizziness or drowsiness
- Feeling slowed down
- Feeling like 'in a fog' 'don't feel right'
- Difficulty concentrating or remembering
- Fatigue or low energy
- More emotional 'change of personality'
- Sadness
- Nervous or anxious

Whilst in most cases the onset of symptoms of concussion is immediate or within minutes of the injury, in some cases there is a delayed onset which may be up to 48 hours. Young players are more susceptible to concussion, take longer to recover, have more significant memory/mental processing issues and are more susceptible to rare but potentially fatal complications of further concussions.

While for most the symptoms usually last for a few days, they may last for a few weeks or in a small number of cases longer; when it may be called Post-concussion Syndrome. During the recovery time however, the brain does appear to be more vulnerable and if another concussion is sustained during this time, the risk of more severe and prolonged symptoms is increased, especially in young people. For example, in sport, this is why it is so important to recognize concussion, remove the player immediately from play, and not allow them to return to play until their brain function has returned to normal and they have been medically cleared by a doctor. If managed correctly, concussion rarely has serious consequences, and a full recovery can be expected.



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### Repeated Concussions

There can be considerable variations in the initial effects of concussion and spontaneous recovery is often rapid, this could increase the potential for players to ignore concussion symptoms at the time of injury and/or return to play prior to full recovery. There is an increasing amount of research that suggests that returning to play before complete resolution of the concussion exposes the player to the risk of concurrent concussions that occur with ever decreasing forces, and result in chronic symptoms of Post-Concussion Syndrome.

### Post-concussion syndrome

“Is a set of symptoms that may continue for weeks, months, or a year or more after a concussion – a mild form of traumatic brain injury. About 15% of individuals with a history of a single concussion develop persistent symptoms associated with the injury”.

### Significant Head Injury

If a significant head injury is suspected, then emergency medical assistance should be called for by dialling 999. If possible, any witnesses should give an account of what happened to the ambulance staff. Any loss of consciousness (LOC) represents significant brain trauma and the player requires assessment in A and E. LOC for 5 minutes or more will normally mean that a CT scan is needed. It is important that the player is accompanied to A and E by an adult who can give an accurate history of the injury.

### Preventing concussion

There's no guaranteed way to prevent concussion, but at Caversham Prep we try to minimise head injury in our children.

This includes:

- We play only tag rugby
- We do not allow balls to be ‘headed’ during play football or matches
- We wear helmets when riding a bicycle or scooter
- We wear a seatbelt when in a car or school bus or a trip bus
- We supervise the children when on the climbing frame and only timetable one class to use it at a time

It's important to avoid head injuries as repeated concussions or blows to the head have been linked to serious problems, including a brain condition called chronic traumatic encephalopathy.

### Management of concussion at Caversham Prep following a head injury

Following a head injury and assessment by the trained first aider, a pupil may be advised to remain off sporting activities (including outdoor pursuits, games and PE) for a minimum of 48 hours.

If they are symptom free during this time then they may resume activities. If they show any signs of concussion during these 48 hours then they must see their GP for assessment and remain off activities for three weeks. They must see their GP at the end of this three week period to ascertain that they are fit to return to activities.

Any pupil who has not had this clearance from their GP will not be allowed to resume sporting activities. If they have had symptoms of concussion during this three week period then they may



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require a further period of exclusion from sporting activities. At all times, the pupil must adhere to medical advice. Once a pupil has returned to activities and are symptom free, if they then develop symptoms of concussion, they must stop immediately and seek further medical advice as a long rest period may be required.

### Home Fixtures

Any pupil who sustains a head injury whilst at school should be assessed by the First Aid Lead. If able, the pupil may be escorted to the school medial room by another pupil or a member of staff. The parents of the child will be informed immediately.

Any pupil who has sustained a head injury will be given a copy of the Caversham Preparatory School Head Injury advice sheet by the First Aid Lead (attached at the end of this document). This should be documented in the School Accident Book.

### Away Fixtures

The pupil should be assessed by the First Aider at the away fixture or if there is a school medical centre, they should be assessed by a nurse or doctor. The pupil should be given Caversham Preparatory School's Head Injury advice sheet and the parents must be informed. If a paper copy is not available then parents must be advised to read the head injury advice document in the 'policies' section of the school website. The medical advice must be adhered to and the pupil taken to A and E if required. If head injury occurs at a non-sporting event off site then the same applies regarding treatment.

### Informing Parents

It is important that parents are informed of any bump to the head even if it may seem like a minor injury at the time. This is to ensure that parents are able to recognize any later signs of concussion. If the child has had a bump to the head a head bump sticker will be stuck on the child's school jumper/cardigan to alert everyone that the child has had a head bump and will need to be monitored.



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## Policy Administration

### Linked Policies

This policy also needs to be in line with other school policies and therefore should be read in conjunction with the following school policies:

- First Aid Policy

### Quoted Legislation and Guidance

### Review Schedule

This policy is reviewed by the Bursar or Head Tacher annually or if needed to respond to a situation.

### Update and Review Log

Updated/ Reviewed By	Date	Notes
J Lawson	January 2021	This policy was written to expand and replace the 'Head Bump' Policy that the school already has. This policy was written because of the link that repeated heading of the ball in sports can cause long term brain damage, including dementia.
A Lawson	15/05/2022	Review
J Lawson	Sept 2022	Reviewed