



Introduction

George Watson's College ('our School') is committed to understanding how to recognise symptoms of concussion and how to manage a child's recovery from concussion.

Parents, colleagues and pupils are encouraged to view the [2 minute video from Scottish Rugby](#) which starts a journey of awareness.

Most head injuries are not serious but parents should always seek review by a registered Healthcare Professional if their child displays any symptoms (as identified below) after a head injury. See [here](#) for the Care Quality Commission's definition of Healthcare Professional. Concussion is not usually life threatening but can cause serious symptoms that require medical attention. Treatment may include rest, taking a break from specific activities and pain relief.

Minor head injuries are part of everyday life for growing children, and our School Nurses are experienced in dealing with these presentations. Therefore, this policy will focus on those head injuries which are confirmed as concussion or where there is suspected concussion.

It is essential that everyone in our school community understands their role in the management of Individuals with concussion. This policy and its accompanying procedures have been developed so that everyone who has the potential to be involved in the supervision, or care of those with concussion or a suspected concussion know what to do. This extends to witnessing out of character or abnormal behaviour in young people who may have sustained a head injury and is to safeguard the health and wellbeing of the children and young people under our care.

All sports and activities at our School follow the 'UK Government 'IF IN DOUBT, SIT THEM OUT' UK Concussion Guidelines for Non-Elite (Grassroots) Sport April 2023. As our School is one which plays rugby in Scotland, the standards expected of the School are specified in the "*SRU Partnership Agreement*", which the Principal signs each session. This agreement commits our School to following the "[SRU Concussion Policy](#)" when managing concussion or suspected concussion. This policy summarises those expectations and outlines the procedures we follow.

Scope

This policy covers all pupils within the school grounds, and those pupils representing George Watson's College off site.

Principles

The following principles underpin this policy and the application of the supporting procedures:

- The welfare of our pupils and any pupils in our care, is paramount
- 'Recognise and Remove' Protocols apply across all sport and PE activities.
- "*If in Doubt, Sit them Out*" principle will be applied to all - **Annex 1**
- Return to education takes priority over return to sport/play - refer to [ACoRN](#) guidance, Return to Normality
- These procedures apply to all cases of concussion or suspected concussion, regardless of cause and regardless of which activity the pupil is returning to
- If concussion is confirmed or suspected, no pupil will return to competitive sport until they have completed the Graduated Return To Play/Activity (GRTP) stages which in the under 19

age group will take 21 days assuming they are symptom free - refer to **Annex 2** and **Annex 3**.

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.

Concussion occurs as a result of either a **direct** or **indirect** injury to the head. Commonly it is considered as a result of a direct, traumatic blow to the head. However, indirect traumatic forces elsewhere in the body can lead to an acute acceleration/deceleration injury to the brain, which can also lead to a concussion.

Symptoms of Concussion

Symptoms of concussion can be mild to severe, and in some cases emergency treatment may be needed. The most common symptoms of concussion are:

- confusion, such as being unaware of your surroundings, a delay in answering questions, or having a blank expression
- headache
- dizziness
- nausea
- loss of balance
- feeling stunned or dazed
- disturbances with vision, such as double vision, blurred vision or “seeing stars” or flashing lights
- difficulties with memory.

Return to Normal Life and Learning

Following a concussion our priority is to return pupils to their education before we consider returning them to sport. Parents are advised to follow the [ACORN guidance, Return to Normality](#), following concussion or suspected concussion. This guidance provides a step by step pathway, designed to carefully return pupils to normal life and the learning environment.

Return to Sport

When ready to do so, any pupil with concussion or suspected concussion, can resume playing sport but only after they have completed the Graduated Return to Play (GRTP) stages - refer to Annex 2 and Annex 3 for more information. The GRTP is a recognised pathway of all sports governing bodies and held within the *UK Concussion Guidelines for Non-Elite (grassroots) Sport (April 2023)*. This document is a collaboration with key stakeholders in sport, physical activity and education, athlete healthcare providers, research institutions, the Royal College of General Practitioners, the Royal College of Emergency Medicine, the Society of British Neurological Surgeons and governmental departments from all four UK Home Nations.

Roles and Responsibilities

Parents/Guardians

- Your child should be assessed by a Healthcare Professional, as soon as possible after incurring a suspected concussion, letting the School know the outcome either by phone or email
- Update the School as soon as possible and prior to your child's return where practical to enable the School to implement any additional measures to ensure their safety, and support their return to education
- Inform the School if your child has suffered a head injury out with school and/or if they have concussion or suspected concussion
- Inform the School if your child develops symptoms of concussion (even if no significant head injury/accident has occurred) following an incident out with school, e.g. sport or activity at weekend
- If your child suffers a head injury at school, please follow the advice given to you by the School Nurses or PE colleagues
- Should your child develop symptoms of concussion please advise the school to enable the review of their progress through the GRTP stages
- Please discuss with your child and support them to understand their responsibilities under this policy.
- Parents are advised to follow the [ACORN guidance, Return to Normality](#), following concussion or suspected concussion.

Pupils

- Recognise some of the risks to yourself and others in relation to sport. Consider the risk of injury to yourself and others when participating in sport seriously
- Be honest with how you are feeling following an injury or when being assessed
- If one of your friends tells you they are feeling unwell or is showing signs of concussion, tell a member of staff
- Senior School pupils: If you are given a green card by the School Nursing Team please keep it with your school ID card and show it to your teachers. This alerts them that you have suffered a head injury
- Information provided to you by the Nursing Team will also be emailed to you and your parents, please discuss this with them
- Report to the Medical Bay if you are feeling unwell or for review as requested.

Director of PE and Sport

- Comply with the head injury reporting requirements of the School
- Ensure all PE staff are familiar with the head injury reporting documentation and guidance
- Ensure all PE staff (including coaches, supply teachers and contracted first aid personnel) are made aware of and comply with this policy and procedure
- Complete the online SRU Concussion Education [course](#).

PE/Sport Coaches

- Be aware of the signs of concussion and know what to do in such a situation - refer to **Annex 1**. Seek advice from the School Nurses if unsure
- Ensure risk assessments, for all activities where concussion could occur, are completed and reviewed on an annual basis
- Ensure that for all incidents/accidents (home/away) there is a completed Accident Form. This can be completed via the portal>Health and Safety>Accident Reporting Form

- Work with the School Nursing Team, parents and pupils in the Graduated Return to Play stages
- Check SOCS for up to date changes to pupils excluded from sport and those completing the GRTP stage
- Escalate to the Clinical Team any report of symptoms whilst a pupil is completing stages of GRTP.

School First Aiders and Contracted First Aiders

- You must complete the SRU Concussion awareness course
- If attending an incident, (at a home or away fixture/event) you must ensure an Accident/Incident Report form has been completed by a member of our School staff with access to the online Staff portal.

School Nurses

- If a pupil presents in the medical bay with a concussion/suspected concussion, follow the algorithm Junior School or Senior School as appropriate.
- Contact the parent directly via phone to advise on the action that is required, including obtaining an immediate medical assessment as required
- Actions include, but are not limited to:
 - Advise parents on UK Concussion Guidelines for Non-Elite (grassroots) Sport.
 - Email head injury information and guidance
 - Offer general advice on head injuries
 - Discuss [ACoRN Guidance, Return to Normality](#)
- If a School Nurse is the first responder at an incident/accident, you must complete an Accident Form (online via the portal) and activate the head injury pathway and consider need for escalation at any stage
- Be available to support teaching staff who are taking the pupil through the GRTP stages
- Follow up with parents on the pupil's recovery and rehabilitation as required.

All Colleagues

All colleagues have a responsibility to:

- Be aware of the signs of concussion and know what to do in such a situation - refer to **Annex 1**. Seek advice from the School Nurses if unsure or have concerns
- Ensure risk assessments, for all activities where concussion could occur, are completed and reviewed on an annual basis
- Be familiar with the concussion and suspected concussion treatment algorithm and this policy
- Be aware of reporting system and pupil identification of concussion:
 - Junior School wristband
 - Senior School Green Identification Card
- Complete the SRU [Concussion](#) e-module.

Pupil Absence Administrators

- Alert the Nursing Team if any pupil is registered on the absence line as being off with 'head injury', 'concussion', 'suspected concussion', or a sport related injury, which could be of concern under this policy.

Health and Safety Manager

- Review accident data quarterly with option for specific significant case review as required

- Where an accident on campus or away as part of a school activity meets RIDDOR criteria, report to the Health and Safety Executive and to the Health and Safety Committee
- Prepare termly (summary only) reports on accidents for the Education and Pupil Wellbeing Committee and the Health and Safety Committee.

Record keeping

All accidents/incidents will be recorded in the school's Accident and Near Miss Register and will be reported to the Health and Safety Committee and to the Governing Council's Education and Pupil Wellbeing Committee.

School Nurses maintain records of pupils who present with impact injury which could lead to concussion or suspected concussion. Records should include, where practical, the outcome of any medical assessment arranged by the parent, the advice given to the pupil, parent format if the advice and any responses received.

When pupils are off sport as a result of a concussion or suspected concussion this is recorded in the SOCS system by the School Nurse who is managing the pupil's case. This record, once complete, prevents the pupil from being selected for sporting activities.

In accordance with the SRU Injury Management Regulations, the Director of Rugby will complete a Serious Injury Report via the SCRUMS system, if any player has a rugby injury or related and as a result:

- Attends hospital or is seen by a medical practitioner
- Has concussion or suspected concussion
- Requires time away from the game.

Implementation and Review

The owner of this policy is the Chief Operating Officer.

This policy will be reviewed every two years and will be approved by the Education and Pupil Wellbeing Committee of the Governing Council.

These protocols will be shared with colleagues and parents via the School's website and Staff Portal. Contracted First Aiders/Physiotherapists will receive a copy of these procedures from the Director of PE and Sport.

Relevant Guidance

- [The UK Concussion Guidelines for Non-Elite \(Grassroots\) Sport.](#)
- [Scottish Rugby's Concussion Policy](#)
- [Scottish Sport Concussion Guidelines \(Sport Scotland\)](#)
- Graduated Return to Play Protocols (Under 19's) - **Annex 2 and Annex 3**
- [ACoRN Guidance: Return to Normality](#)

Other Documents/Reference sites

- Sport Concussion - Symptom Evaluation (GWC)
- [NHS Inform Concussion advice](#)
- [Child Brain Injury Trust](#)

ANNEX 1: Concussion/Suspected Concussion During Extra Curricular Sport/PE/Activity

All pupils under the age of 19 must be managed in accordance with the [Recognise and Remove protocols](#) and the [U19 Graduated Return to Play protocols \(Annex 2 and Annex 3\)](#)

If concussion is suspected, but an ambulance not required, follow these actions:

- Remove the injured pupil from the activity immediately and seek assistance from the First Aider or School Nurse, if available. **“IF IN DOUBT, SIT THEM OUT”** applies to all activities
- Do not leave the pupil alone at any time
- Ensure the pupil is collected by a parent/responsible person and advise the parent to contact 111 for further advice and concussion assessment
- Pass on clear information to parents/guardians, of what you know about the suspected concussion
- **The injured pupil should not return to the activity**
- If you are the key witness to the incident you **MUST**, without delay, complete an Accident/Incident Report Form, available on the Staff Portal.

Call 999 immediately if the pupil has:

- Severe neck pain/suspected neck injury - do NOT move them
- Double vision
- Blood coming from one or both ears
- Weakness or tingling/burning in arms or legs
- Severe or increasing headache
- Seizure (fit)
- Loss of, or deterioration of consciousness (more drowsy)
- Repeated vomiting
- Increasing confusion or irritability
- Unusual behaviour changes
- Is having difficulty staying awake, speaking, or understanding what people are saying

Pass on clear information to the ambulance staff, of what you know about the suspected concussion.

The pupil must be accompanied to A&E by a responsible adult who can give an accurate history of the injury.

ANNEX 2: Graduated Return to Play (GRTP)

What is the GRTP?

Pupils may only start a graduated return to play once symptom-free for a minimum of 14 days and have returned to school.

The GRTP is an incremental process which must be followed before any pupil with concussion or suspected concussion can resume playing any sport, based on the key stages of:

- Rehabilitate the person
- Rehabilitate the brain
- Return to normal life/learning
- Return to sport

The School Nurses will oversee this rehabilitation, in liaison with the PE staff, coaches, pupils and their parents. IT IS IMPORTANT THAT PUPILS ATTEND MEDICAL BAY FOR REVIEWS, AS REQUESTED.

Regardless of the pupil's age, sport/activity or level played, the stages of the GRTP are the same.

Medical Assessments

It is recommended in the Scottish Rugby Concussion Guidance that any rugby player under 19 should obtain medical clearance from a GP or medical professional, who is experienced in concussion management, before commencing the GRTP stages.

All pupils have to feel ready to return to sport and must progress symptom-free through the GRTP Stages. Prior to participation in full contact training at Stage 5 of the GRTP, Scottish Sport recommends a review by a GP or medical professional, who is experienced in concussion management.

Recurrent or Multiple Concussions

Pupils with two or more concussions within 12 months, unusual presentations or prolonged recovery, should be assessed by a GP or medical practitioner with experience in sports-related concussions.

A medical practitioner must oversee and manage their return to sport activities and their progress through the GRTP protocols.

U13's

- All of the stages in the GRTP must be followed but for pupils under 13 their return to play/sport must be taken more slowly than stated on the chart in Annex 3, which is designed for people between the age of 13 -19. Their return to play and progression through the GRTP stages should also be under the guidance of a doctor.

ANNEX 3

GRADUATED RETURN TO PLAY STAGES: MINIMUM RETURN TO PLAY INTERVALS UNDER 19'S

Stage	Rehab Stage	Exercise allowed	% Max heart rate	Duration	Objective	Progression period
	Minimum rest period	Complete body and brain rest			Recovery	14 days
For rugby playing pupils: Medical clearance by GP or medical professional is recommended by the SRU before commencing the GRTP stages						
2	Light exercise	Walk, light jog, swim, stationary cycle. NO resistance training, weight lifting, hard running, jumping	<70%	<15 mins	Increase heart rate	48 -72 hours (if symptom free)
3	Sport specific exercise	Simple movement activities e.g. running drills. Limit body and head movement. NO head impact activities	<80%	<45 mins	Add movement	48 -72 hours (if symptom free)
4	Non contact training	Progress to more complex training with increased intensity, coordination and attention e.g. passing. May start resistance training. NO head impact activity	<90%	<60 mins	Exercise, coordination and skills / tactics	48 -72 hours (if symptom free)
For ALL pupils: Medical clearance by GP or medical professional is recommended before participating in Stage 5 (Sport Scotland and SRU)						
5	Full contact practice	Normal training activities with risk of potential body contact			Restore confidence and assess functional skills by coaching staff	48 -72 hours (if symptom free)
6	Return to play	Normal uncontrolled matchplay			Return to play	MINIMUM: 14 day rest + 8 days GRTP = Day 23 post injury**

*Not all sports require contact. However, with creative coaching most sports can increase the intensity to fulfil this stage

** For children aged under 13, return to sport should be longer than the standard GRTP timeframe (outlined above and be guided by their GP throughout this process.