



HEAD INJURY POLICY

Head Injuries

Minor head injury and knocks to the head are common, particularly in children. Following the injury, if the person is conscious (awake), and there is no deep cut or severe head damage, it is unusual for there to be any damage to the brain.

However, sometimes a knock to the head can cause damage to a blood vessel which may bleed next to the brain. This is uncommon but can be serious. Symptoms may not develop for some hours, or even days, after a knock to the head. In rare cases, symptoms can develop even weeks after a head injury.

Assessment

All head injuries are referred to the Medical Centre (or to a doctor, paramedic or physiotherapist covering rugby matches on a Saturday) for assessment. Any pupil with a significant head injury must be seen by a doctor. If a doctor is not immediately available, the Medical Centre makes an urgent assessment. The following are checked:

- pulse and blood pressure
- Glasgow Coma Scale Score
- pupils/ eyes following object
- blood or CSF discharge from nose and ears
- battle signs (bruising over mastoids indicating basal skull)
- signs of weakness in limbs

Treatment/Action

URGENT/EMERGENCY

- Ambulance called
- Neuro observations carried out until ambulance arrives
- Parents/guardian contacted to inform of accident and where appropriate arrangements made to meet at hospital
- If the pupil is a boarder, Boarding Housemaster also informed
- Relevant school office informed if the pupil is taken off College premises and/or if a pupils' parents have been contacted

- Pain relief administered as appropriate
- Ice administered as appropriate
- Dressings applied as appropriate
- Medical record updated and accident form completed and sent to the relevant members of staff including the Chief Operating Officer. If the injury is significant the form is sent to the relevant school office, Head of School, the Head of Year Head and Form Tutor.
- Personal data disclosed or included in all forms will be safeguarded and processed in accordance with the Privacy Notice for Parents, Pupils and Old Alleynians and the Data Protection Policy.

NON-URGENT

- Parents/guardian contacted as soon as practicable by telephone (or email in the absence of telephone contact) to inform them of accident and if appropriate they are asked to collect the pupil. The pupil remains in the Medical Centre under the care of the nurse until collected
- If the pupil is a boarder, the Boarding Housemaster also informed
- Relevant school office informed if the pupil leaves College premises and/or if a pupil's parents have been contacted
- Pain relief administered as appropriate
- Ice administered as appropriate
- Dressings applied as appropriate
- Medical record updated and accident form completed and sent to the relevant members of staff including the Chief Operating Officer.

Procedure following treatment of all head injuries

If the injury is sustained during the course of a match the decision as to whether the pupil shall return to play shall be made by the pitch side doctor. In the absence of a doctor this decision can be made by a paramedic, nurse, sports coach, physiotherapist or parent.

The medical or nursing staff will check whether there is need for further immediate assessment in hospital in line with <https://cks.nice.org.uk/topics/head-injury/management/head-injury/> and in accordance with <https://cattonline.com/scat/>. The SCAT5 is a standardized tool for evaluating for a suspected concussion and can be used on individuals aged 13 years and older. For pupils aged 12 and under the Child SCAT5 should be used.

All pupils with head injuries who are sent home or to their Boarding House will be given a head injury advice sheet from <http://patient.info/health/head-injury-instructions> which is regularly updated. This is also emailed to parents / guardian in the case of a non-urgent injury.

Concussion

Any pupil that the Medical Centre staff are aware has a confirmed or suspected concussion diagnosis will be subject to a minimum 2-3-week period of rest following becoming symptom free dependent on their age. Where the concussion was sustained during a rugby match or training the period of rest shall be in line with International Rugby Board (IRB) guidelines. They should then be assessed by a Medical Practitioner as to their suitability to commence a graduated return to play according to the IRB Guidelines.

For pupils with a confirmed or suspected concussion injury, the following protocols will be implemented:

Dulwich Pupils (this includes pupils who are receive a head injury whilst playing away games):

- Following a Friday afternoon/ Saturday/Sunday match, the pupil must be seen by the College GP the following Monday at 1.30pm.
- If during the school week, the pupil must be seen by the College GP on the following day at 1.30pm.
- The College follows the IRB guidelines; all pupils with a confirmed concussion will be off rugby for 23 days.
- Generally, the day of the concussion is day 0 of rest. If the pupil is very symptomatic e.g. headaches, foggy brain, day 0 may commence when these symptoms have subsided.
- The term 'mild' concussion is a misnomer, concussion is concussion with no variability in the guidelines.
- The Graduated Return to Play (GRTP) period is a full 7 seven days. This assessment is completed by the nurse and the pupil is referred to the College GP if there are any concerns.
- When entering the data onto to SOCS, an end date is not included. The pupil is only removed from SOCS when they have successfully completed GRTP. This prevents them from wrongly being selected to play.

Away Pupils (playing in a match at the College):

- All accident reports for away pupils should be entered as a visitor in the College's accident reporting system and sent to the visiting pupil's schools' medical team.
- If the pupil from the visiting school is a boarder, every effort is made to inform the relevant nursing staff to provide for further assessment and monitoring.

Policy Owner: Lead Nurse
Last Reviewed: May 2024
Date of Next Review: Academic Year 2025 - 26 (or earlier if required)