



Head Injuries Protocol

Person(s) responsible for this policy		Nurse	
Last review by	C. Bearman R. Tomlin	Review date	September 2024
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1. Introduction

1.1 The National Institute for Clinical Excellence (NICE) defines a head injury as any trauma to the head other than superficial injuries on the surface of the face. Minor head injuries and knocks to the head are common, particularly in children. Many of these happen at school.

1.2 The aim of this protocol is to provide a safe environment for all staff and students and to ensure all staff have a clear understanding of how to manage someone who has sustained a head injury.

Remember: IF IN DOUBT, SIT IT OUT

2. Procedure

2.1 The majority of head injuries are minor and can be assessed and treated by a qualified first aider.

2.2 In the event of a head injury sustained by either student or staff, the school nurse or qualified first aider should be notified immediately so that an assessment can be made. The assessment should be made using the Head Injury Assessment Form (see appendix 1).

2.3 The patient's conscious level should be recorded (AVPU can be used in this instance)

A - Alert/eyes open

V - Verbal/ eyes open to verbal stimuli

P - Pain/eyes open to painful stimuli

U - Unresponsive/eyes remain closed to all stimuli

If in any doubt of the seriousness of the injury contact the school nurse, or in their absence phone 111 (NHS non-emergency number medical helpline).

2.3 The head injury should be recorded on CPOMS & Sphera. The NHS head injury advice guidance (see appendix 2) should be sent home with the student and emailed to the parent.

2.4 - If the student remains in school the following communications should take place:

- **Junior School** - A head bump wrist band should be given to the pupil and the class teacher informed. If the head injury is significant the nurse/first aider should call home. Otherwise, parents to be informed via school text message or email.
- **Senior School** – A head bump wristband as well as a Head Injury alert card will be given to the student to show teachers in the remaining lessons of the day. If the head injury is significant the nurse/first aider should phone parents. Otherwise, parents to be informed via school text message or email.

3.0 Head Injury Advice

3.1 If you have any concerns about a head injury you should liaise with the school nurse immediately. If the school nurse is unavailable, or it is an evening or weekend sports fixture further medical advice should be sought by consulting NHS 111

3.2 When to go to hospital

In rare cases there may be a serious head injury and staff should look out for the following signs:

- Unconsciousness or reduced consciousness (e.g. can't keep eyes open)
- Any clear fluid from either or both ears and/or nose
- Bleeding from either or both ears
- Bruising behind either or both ears
- Any signs of skull damage or a penetrating injury
- The person has had previous brain surgery

- A forceful blow to head at speed (e.g. fall down the stairs, fall from a height of 1m or more)
- The person has had a previous problem with uncontrollable bleeding or a blood clotting disorder, or is taking a drug that may cause bleeding problems (e.g. anticoagulant)
- The person is intoxicated by drugs and/or alcohol
- There are any safeguarding concerns (e.g. non-accidental injury)

If any of the above apply an ambulance should be called and the person taken to A&E immediately

3.3 Staff should also look out for the following:

- Problems with understanding, speaking, reading or writing
- New deafness in one or both ears
- Loss of feeling in part of their body
- Problems with balance or general weakness
- General weakness
- Change in eyesight
- Any convulsions/seizures
- Any problems with memory of events before or after injury
- A headache that will not go away
- Any vomiting
- Irritability or altered behaviour

If any of the above apply the person should also seek medical attention at hospital.

4.0 Return to School and Sport Following a Diagnosed Concussion

4.1 Return to school and sport following any diagnosed concussion will be informed by medical advice and using the Concussion Guidelines from [The Sport and Recreation Alliance](#)

GDST Hub > Documents > Sports, PE and Games – All Guidance > Concussion in PE and Sports – AfPE Guidelines – 2016 (1).docx

4.2 The medical letter and a return to school care plan should be recorded on CPOMS and all necessary staff alerted.

4.3 It is the responsibility of the parents to inform the school if their child has had a head injury outside of school. If a concussion has been suspected or diagnosed a

letter should be obtained from the injured person's GP to confirm it is safe for them to return to sport. If a GP's letter is not possible, confirmation must be given by the parents in writing that they have sought medical advice and have had confirmation that it is safe for their child to return to sport.

References:

- Headway – Concussion in Sport
<https://www.headway.org.uk/media/3798/concussion-in-sport-factsheet.pdf>
- NICE – Head injury: assessment early management
<https://www.nice.org.uk/guidance/cg176>
- Sport and Recreation Alliance – Concussion Guidelines for the Education Sector -
<https://www.sportandrecreation.org.uk>
https://www.afpe.org.uk/physical-education/wp-content/uploads/Concussion_guidelines_for_the_education_sector_June2015.pdf

Appendix 1

Head Injury Assessment Form

Senior school, Junior school and Early Years Foundation Stage

To be completed by School Nurse or First Aider attending the incident



Name of injured person		
Class / Form		
Date & time of injury		
Description of incident (What, where, how, witnesses, equipment)		
Injury and findings		
CONSCIOUS LEVEL (Circle one)	Alert – eyes open Verbal – eyes open to verbal stimuli Pain – eyes open to painful stimuli Unresponsive – eyes remain closed to all stimuli	
Observations Record if the person has any of these symptoms.	Nausea? Headache? Blurred vision?	
If the injury is serious then check eye-pupil dilation. School Nurse or staff trained to do this	Are the pupils equal and reacting to light?	
Advice given / Action Taken		
Name of School Nurse or First aider assessor		

This form should be completed and handed to the school nurse who will complete a report on Sphera. This form should also be scanned onto CPOMS.


Appendix 2

Click [here](#) to access the NHS advice sheet so it can be printed out and emailed to staff and parents

Head Injury Advice Sheet
Advice for parents and carers of children




How is your child?


RED

If your child has any of the following during the next 48 hours:

- Vomits repeatedly i.e. more than twice (at least 10 minutes between each vomit)
- Becomes confused or unaware of their surroundings
- Loses consciousness, becomes drowsy or difficult to wake
- Has a convulsion or fit
- Develops difficulty speaking or understanding what you are saying
- Develops weakness in their arms and legs or starts losing their balance
- Develops problems with their eyesight
- Has clear fluid coming out of their nose or ears
- Does not wake for feeds or cries constantly and cannot be soothed


You need urgent help
Go to the nearest Hospital Emergency (A&E) Department or phone 999


AMBER

If your child has any of the following during the next 48 hours:

- Develops a persistent headache that doesn't go away (despite painkillers such as paracetamol or ibuprofen)
- Develops a worsening headache

You need to contact a doctor or nurse today
Please ring your GP surgery or call NHS 111 - dial 111


GREEN

If your child:

- Is alert and interacts with you
- Vomits, but only up to twice
- Experiences mild headaches, struggles to concentrate, lacks appetite or has problems sleeping

If you are very concerned about these symptoms or they go on for more than 2 months, make an appointment to see your GP.

Self Care
Continue providing your child's care at home. If you are still concerned about your child, call NHS 111 – dial 111

How can I look after my child?

- Ensure that they have plenty of rest initially. A gradual return to normal activities/school is always recommended.
- Increase activities only as symptoms improve and at a manageable pace.
- It is best to avoid computer games, sporting activity and excessive exercise until all symptoms have improved.

www.what0-18.nhs.uk

This guidance is written by healthcare professionals from across Hampshire, Dorset and the Isle of Wight

Appendix 3 - Head Injury Flowchart

