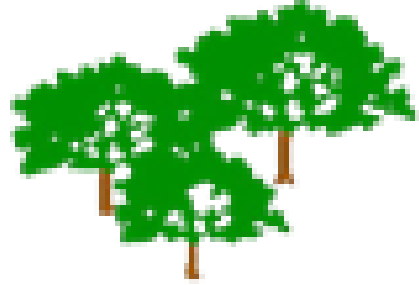


# Grove Street Primary and Nursery School

Grove Street  
Primary School



**MINDS | LEARNING | FUTURES**

*Every child deserves a Champion*

## Bumped Head Policy & Procedures

Date of Policy	Implemented October 2024		
Headteacher Signature	<i>Lisa Walsh</i>	Chair of Governors Signature	<i>Nicky Cornford</i>

A minor head injury can be a frequent occurrence in a school. Fortunately, the majority of head injuries are mild and do not lead to complications or require hospital admission. However, a small number of children may suffer from a severe injury to the brain and concussion. Complications such as swelling, bruising or bleeding can happen inside the skull or inside the brain up to 24 hours after the bump to the head. The presence or absence of a lump at the site of the bump is not an indication of the severity of the head injury. However if you feel the bump or impact to the head isn't classed as a concern then the following procedures apply.

<https://www.nhs.uk/conditions/head-injury-and-concussion/>

## **Minor bump to head**

A minor bump to the head is common in children, particularly those of infant school age. If a child is asymptomatic: No bruising, swelling, abrasion, mark of any kind, dizziness, headache, nausea or vomiting. The child appears well, then the incident will be treated as a "bump" rather than a "head injury"

### **Action to be taken:**

- Child to be assessed by a First Aider
- Apply cold compress
- Complete first aid record on Medical Tracker with details of incident
- Report to class teacher
- Monitor child for any symptoms that may indicate deterioration
- Parent notified via Medical Tracker, select the following options
  - New incident → bump

- Parent notification letter
- Parent **MUST** be spoken to at the end of the day or if parent wants to check on their child after the notification

## **Minor head injury – no loss of consciousness**

A minor head injury often causes bumps, swellings or bruises on the exterior of the head. Other symptoms:

- Nausea
- Mild headache
- Tender bruising or mild swelling of the scalp
- Mild dizziness

### **Action to be taken:**

- Child to be assessed by a First Aider
- Apply cold compress
- Complete first aid record on Medical Tracker with details of incident
- Inform member of SLT and class teacher
- Observation: Monitor child for any symptoms that may indicate deterioration
- No Pe/physical activities
- Parent informed by phone call straight away. If parents wish to come and assess for themselves that option is to be given.
- Parent notified via Medical Tracker, select the following options
  - New incident → Injury → Head Injury
  - Parent notification letter → with NHS guidance option
  - Parent **MUST** be spoken to at the end of the day or if parent wants to check on their child after the notification/phone call

## **Severe head injury**

A severe head injury may not initially exhibit any symptoms but may develop over time and will usually be indicated by one or more of the following symptoms:

- Unconsciousness briefly or longer (eg problems keeping eyes open)
- Difficulty in staying awake (children will often want to sleep after a head injury. You do not need to keep them awake. However, you should rouse them after an hour or so.
- Seizure - any convulsions or having a fit.
- Slurred speech
- Visual problems - any problems with their eye sight- such as blurring of vision or double vision.
- Difficulty in understanding what people are saying
- Confusion - in small babies, this may appear as irritability or difficulty in settling them. In young children, they might not know where they are or get things muddled up. They might have problems speaking or understanding.
- Balance problem
- Loss of power in arms/legs/feet
- Pins and needles
- Amnesia
- Leakage of blood or clear fluid from nose or ears or blood
- New deafness - in one or both ears.
- Bruising around eyes/behind ears
- Unusual breathing patterns.
- Develops a boggy swelling to head.

**Action to be taken:**

- If there is a neck injury and child is unconscious DO NOT move child

- Call 999 and ask for AMBULANCE
- Contact Parent immediately
- Inform Head teacher
- Member of SLT and First Aider to be with child at all times
- Complete first aid record on Medical Tracker with details of incident
  - New incident → Injury → Head Injury
  - Parent notification letter → with NHS guidance option
- Complete M13 and give to Headteacher & Site Manager who will forward to Local Authority

The bumped head policy also applies to all adults and visitors to our school site.

## **Returning to School**

### **Recognise the symptoms**

In rare circumstances, symptoms of concussion may develop up to 24 hours after an injury. If any of the following conditions occur, please refer the child to a doctor, preferably at the local A&E department:

- Severe headache (persistent)
- Sensitivity to bright light
- Vomiting
- Dizziness, double vision, or blurred vision
- Disorientation or confusion
- Changes in consciousness level

### **Remove**

Parents should remove their child from physical activities whilst they recover. Returning to physical activity or sport too soon can:

- Prolong the symptoms of concussion
- Increase the risk of further concussion
- Increase the risk of other injuries
- Affect school performance

## **Rest**

The most important treatment for concussion is rest. For the first 24 hours your child should rest completely from both physical and mental (brain) activities.

### **Physical rest**

- Your child should rest from physical activity for at least 14 days, or longer if symptoms continue.
- They can begin to return to light day to day activities as symptoms settle.

### **Mental rest**

- Spending a long time reading, watching TV, playing computer games etc will initially make symptoms worse.
- After 24 hours complete rest, these can be gradually re-introduced.

### **School**

- Ensure you advise school if your child has had a head injury or concussion outside of school
- It is unusual for children to need a long-time off school following a minor head injury with concussion symptoms.
- It is not unusual for them to miss a day or two if they continue to feel unwell, or their symptoms return during lessons.

## Return

- Once symptoms have settled, and after a minimum of 14 days' rest, your child can begin to return to sport/exercise.
- If your child plays contact sports - After the 2-week rest period, they should have a GRTP programme before returning to active sports. The GRTP programme means that a player is introduced back to sport in a stepwise fashion. It is recommended that a medical practitioner or approved healthcare professional confirm that your child can take part in full contact training.

<https://www.nhs.uk/conditions/head-injury-and-concussion/>

Drowsiness - children will often want to sleep after a head injury. You do not need to keep them awake. However, you should rouse them after an hour or so. If they rouse normally and are not confused, they may go back to sleep. When asleep, check to see that he or she appears to be breathing normally and is sleeping in a normal position. If you are unable to or have difficulty in waking them, attend A&E immediately.

Appendix 1: Bumped head letter template from Medical Tracker

#todays\_date\$

Dear Parent/ Carer of #student\_name\$,,

We wanted to let you know that #student\_name\$ had an accident in school today, which resulted in a head injury.

First aid treatment has been given, and we feel #student\_name\$ is fine to stay in school. As a precaution, we always inform parents/ carers of NHS guidance.

The NHS states that it is essential to seek further medical attention if any of the following occur in the next 48 hours:

- Nausea or vomits repeatedly i.e. more than twice (at least 10 minutes between each vomit)
- Becomes confused or unaware of their surroundings
- Change in behaviour / confusion / Difficulty Concentrating
- Unusual drowsiness, loses consciousness, becomes drowsy or difficult to wake
- Severe headache
- Has a convulsion or fit
- Develops difficulty speaking or understanding what you are saying
- Clumsy walking, staggering, dizziness
- Develops weakness in their arms and legs or starts losing their balance
- Develops problems with their eyesight/ blurred vision /sensitivity to Light
- Bleeding or has clear fluid coming out of their nose or ears
- Does not wake for feeds or cries constantly and cannot be soothed.the following symptoms:
- Unresponsiveness
- Slurred speech

CONTACT YOUR FAMILY DOCTOR OR THE NEAREST ACCIDENT & EMERGENCY

DEPARTMENT IF YOU NOTICE ANY OF THE ABOVE SYMPTOMS

Please note that your child has not displayed any of these symptoms and this is why we have not called you to collect them.

If you wish to talk to us further about the incident, please do not hesitate to contact us on the main school number.

Yours sincerely,

#first\_aider\$

For further information on the NHS guidance for head injuries please click **here**