



Bump to Head, Head Injury and Concussion Policy

Related documents include:

- Basic First Aid and Treatment Responses
- Abbey College First Aid Trained Staff
- Student Medical Form
- Excursion Policy
- Healthy Lifestyle Policy
- First Aid Box Checklist
- Location of First Aid Boxes Poster
- Self-Medication Assessment
- Self-Medication Roommate Agreement
- Individual Student File
- Medicine Log Book
- Student Handbook
- Pharmacy return Form
- Medication removed from students Form
- Students Monitoring Log
- IHCP

Legal Status:

Monitoring and Review

- This policy will be subject to continuous monitoring, refinement and audit by the Welfare Manager.
- The Welfare Manager will undertake a formal annual review of this policy for the purpose of monitoring and of the efficiency with which the related duties have been discharged, by no later than one year from the date shown below, or earlier if significant changes to the systems and arrangements take place, or if legislation, regulatory requirements or best practice guidelines so require.
- The next official date for review is November **2026**

Introduction

First Aid is emergency care given to an injured person (in order to minimise injury and future disability) before professional medical care is available. Abbey College in Malvern will ensure that a First Aid Needs Assessment is carried out to ensure the First Aid arrangements are suitable and sufficient. Teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of pupils in the same way that parents are expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

Below are definitions of head injuries and describes the steps that will be taken at Abbey College to assess each student should they suffer an injury to the head.

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Minor bump to head

A minor bump to the head is common in children particularly those of primary school age. If a child is asymptomatic i.e. there is no bruising, swelling, abrasion, mark of any kind, dizziness, headache, nausea or vomiting and the child appears well then, the incident will be treated as a 'bump' rather than a 'head injury'.

Treatment in school:

Student to be assessed by a First aider.

Observe, If the student begins to display head injury symptoms then will be sent to the Welfare manager/Welfare Assistant for further assessment, if no change during observation then the pupil will return to normal lessons.

Minor Head Injury – no loss of consciousness

A minor head injury often just causes bumps or bruises on the exterior of the head.

Other symptoms Include:

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

Treatment in school:

- Paracetamol if needed for pain relief (*Ibuprofen should not be given if a head injury is suspected*)
- Ice pack to swelling
- Rest
- Observation

Accident form to be completed

If any of the following symptoms are displayed, the student would need to receive immediate medical attention in hospital, if there is a:

- Loss of consciousness/confusion or drowsiness
- Loss of balance or difficulty in walking
- Loss of power in arms/legs
- Clear fluid leaks from nose or ear
- Significant visual disturbance – blurred or double vision
- Severe headache not eased by pain relief
- Vomiting
- Seizure

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Severe Head Injury-loss of consciousness

A severe head injury will usually be indicated by one or more of the following symptoms:

- Unconsciousness briefly or longer
- Difficulty in staying awake
- Seizure
- Slurred speech
- Visual problems
- Difficulty in understanding what people are saying
- Balance problems
- Loss of power in arms/legs/feet
- Pins & needles
- Amnesia
- Leakage of clear fluid from nose or ears
- Bruising around eyes/behind ears

Treatment in school:

- Suspect neck injury if unconscious and do not move
- **CALL 999 FOR AMBULANCE**
- Complete accident form

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.

The cumulative effects of having more than one concussion can be permanently damaging. Concussion must be taken extremely seriously to safeguard the long-term welfare of the person.

Symptoms include:

- Headache
- Dizziness
- Feeling in a fog
- May or may not have lost consciousness
- Vacant expression
- Vomiting
- Unsteady on legs
- Slow reactions
- Inappropriate or abnormal emotions – irritability/nervous/anxious
- Confused/disorientated

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- Loss of memory of events leading up to and after the concussion

Treatment:

If a head injury occurs during sport the student should be removed from the game and must not resume playing.

- Rest
- Ice pack
- Simple painkillers such as paracetamol. (*Ibuprofen should not be given if a head injury is suspected*)
- Observation
- Head injury advice sheet given and must inform the parents.

If any of the above symptoms occur the student must be seen by a medical professional in A&E, minor injuries or the GP surgery, the Welfare Manager/Welfare Assistant will advise on the best course of action. However, if in doubt the student should be seen in hospital.

Communication with parents/guardians

When a student suffers a head injury and has been seen by a medical professional, parents must be informed immediately. If a parent cannot be contacted or their first language is not English, the guardian will be contacted.

Reporting & Recording of Accidents

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) some accidents must be reported to the HSE. The College must keep a record of any reportable injury, disease or dangerous occurrence. This must include: the date and method of reporting; the date, time and place of the event; personal details of those involved and a brief description of the nature of the event or disease. This record can be combined with other accident records. The College Accident/Incident Book is kept in Student Services and maintained by the Welfare Manager.

An unreliable accident / incident reporting system, or the under reporting of near miss incidents could lead to dangerous occurrences recurring which may result in personal injury to staff or visitors.

Breach of the statutory requirement to report specific incidents to the Health & Safety Executive (HSE) may lead to prosecution.

RIDDOR – Incidents to be reported

- Accidents resulting in death or major injury
- Accidents which prevent normal duties for more than 7 days
- Loss of consciousness due to asphyxia or absorption of harmful substances
- Fractures / Dislocations
- Amputation
- Loss of sight – temporary or permanent
- Chemicals or hot metal burn to eye

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- Penetrating eye injury
- Electric Shock
- Injury leading to hypothermia
- Unconsciousness needing resuscitation / hospital admission for over 24hrs.
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For further details, please refer to the Health and Safety Policy and First Aid and Medication Policy.

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