



The PGS Head Injury Management Policy and Procedure

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The PGS Management of Head Injuries Policy and Procedure, incorporating the 'Graduated Return to Activity and Sport' (GRAS) programme

1 Introduction

- 1.1 This policy and procedure is designed to support all staff in managing a pupil who has sustained a head injury and the guidance it gives applies at any time whilst the pupil is in the School's care; it is also relevant to a member of staff who has sustained a head injury and it applies while they are on the School site and/or involved in School business.
- 1.2 When a pupil or member of staff sustains a head injury, it is vital that all members of staff manage the incident in a consistent way:
 - 1.2.1 in the case of a pupil, the health and wellbeing of the pupil is at all times of paramount importance and if a supervising member of staff is in any doubt as to whether or not a head injury (such as concussion) has occurred they should exercise caution in the best interests of the pupil.
 - 1.2.2 in the case of a member of staff, similar principles as 1.2.1 apply, with the proviso that a member of staff necessarily has more autonomy than a pupil given their age and their rights as an adult in relation to managing for example their own medical treatment, recovery and confidentiality. However, their ability to perform their role – and to do so safely and effectively from their own perspective and that of those working with them or under their supervision - is of significant importance too.
 - 1.2.3 important information about head injuries is contained in Appendix 1 (Head Injury Links) and Appendix 2 (The UK Concussion Guidelines for Non-Elite (Grassroots) Sport - '*If in doubt, sit them out ...*') (**The UK Concussion guidelines – '*If in doubt ...*'**); these should be read in full and carefully, and their guidance followed at all times.
 - 1.2.4 this policy reflects the guidance in The UK Concussion Guidelines - '*If in doubt, sit them out*') (see Appendix 2) - as endorsed by England Rugby (RFU), and in the RFU's HEADCASE resources (see Appendix 3) which have been updated to align with this guidance (www.englandrugby.com)
 - 1.2.5 The School's aim through the provisions of this policy is to provide a safer environment for pupils and staff as they go about their daily education and activities. For this purpose, the School has put in place the following arrangements with **South Coast Rx Ltd** (physiotherapy) to:
 - 1.2.5.1 to implement and manage a new Head Injury (Concussion) Management Pathway, including a **Graduated Return to Activity & Sport (GRAS) programme** within Portsmouth Grammar School. This will appropriately manage head injuries, including suspected concussions, in accordance with The UK Concussion guidelines – '*If in doubt ...*' through Health Care Professional led concussion clinics. See Appendix 3 for details.

See also paragraph 5 and Appendix 3 below for further information relating to the GRAS programme.

- 1.2.5.2 to build and implement an interactive injury **reporting tool for both head injuries and more generally, in collaboration** with the Portsmouth Grammar School, to record and store information regarding injuries. This is likely to include automation of the provision of key safety information (sometimes referred to as 'safety netting'), how to book into the concussion clinic and notifications to relevant staff members.
- 1.2.6 All those involved in the care of an individual with a suspected head injury should recognize the following:
- 1.2.6.1 injuries to the head can occur in many situations in the school environment, for example when a person's head comes into contact with a hard object such as the floor or ground, a desk or another person's body (e.g. in sport).
- 1.2.6.2 the risk of injury is dependent for example on the velocity and force of impact, the part of the head involved in the impact and any pre-existing medical condition(s).
- 1.2.6.3 symptoms of concussion may not develop for some hours, or even days, after a blow to the head, and in rare cases can develop weeks after a head injury. Whilst an initial concussion is unlikely to cause any permanent damage, a repeat injury to the head soon after a prior, unresolved concussion can have serious consequences.
- 1.2.6.4 a return to (sporting) activity before complete resolution of the concussion exposes the individual to the risk of recurrent concussion which can occur with ever decreasing forces.
- 1.2.6.5 there are concerns that repeated concussions could negatively affect an individual's health and wellbeing, shorten a player's career, interfere with academic performance, and may have some potential to result in permanent neurological impairment.
- 1.2.6.6 in light of the above and given the potential seriousness of a head injury, those receiving a head injury are strongly encouraged to follow the PGS Graduated Return to Activity & Sport (GRAS) programme when appropriate (see for example paragraph 5 and Appendix 3 below).
- 1.2.7 for awareness, and with some repetition of points in para 1.2.6 above, the UK Concussion Guidelines – 'If in doubt ..' (p4) note the following key points about concussion:
- *Most people with concussion recover fully with time.*
 - *A concussion is a brain injury.*
 - *All concussions are serious.*
 - *A head injury can be fatal.*
 - *Most concussions occur without loss of consciousness (being 'knocked out').*
 - *Anyone with one or more visible clues, or symptoms of a head injury must be immediately removed from playing or training and must not take part in any further physical sport or work activity, even if symptoms resolve, until assessment by an appropriate Healthcare Professional or by accessing the NHS by calling 111, which should be sought within 24 hours.*
 - *Return to education/work takes priority over return to sport.*
 - *Individuals with concussion should only return to playing sport which risks head injury after having followed a graduated return to activity (education/work) and sport programme.*
 - *All concussions should be managed individually, but there should be no return to competition before 21 days from injury.*
 - *Anyone with symptoms after 28 days should seek medical advice from their GP (which may in turn require specialist referral and review).*

2 Definitions

- 2.1 **'Head injury'** – any trauma to the head other than superficial injuries to the face
- 2.2 **'Concussion'** – 'a traumatic brain injury resulting in a disturbance of brain function. It affects the way a person thinks, feels and remembers things' (*If in doubt ...*, p5). 'It can be caused by a direct blow to the head but can also occur when knocks to other parts of the body result in rapid movement of the head (eg whiplash-type injuries)' (*If in doubt...*, p7); references in this document to a **'blow or impact to the head'** will also include such a mechanism of injury. In this document, references to 'concussion' may also include 'suspected concussion' where appropriate.
- 2.3 For the purposes of this policy, **'staff'** refers to all those individuals employed by the school, either full- time, part-time, on an occasional basis, or even on a voluntary basis, where they are deemed to be responsible for the supervision of the pupils participating in their trip, activity or fixture.
- 2.4 The UK Concussion guidelines – '*If in doubt ...*' suggest that **'signs'** are 'visible clues (what you see)' and **'symptoms'** are 'what you are told/ what you should ask about' (p10). See Appendices 1 and 2 below for information regarding 'signs' and 'symptoms' of a head injury and/or concussion.

3 Scope

- 3.1 As detailed in paragraph 1.1 above, this policy applies to all occasions when a pupil sustains a head injury, or an impact to any part of the head such as the nose, whilst they are under the care of the School, or when a member of staff suffers such an injury or impact whilst they are on the School site and/or involved in School business.
- 3.2 See paragraph 4.6 below for the application of this policy to a head injury sustained by a pupil outside school and paragraph 4.5 and 4.6 below for the application of this policy to a head injury sustained by a member of staff outside school (this policy is to be read in conjunction with the Staff Management of Sickness Absence Policy (tbc) and/or other relevant policies).
- 3.3 The GRAS programme is for use as relevant on **all** occasions when a pupil or member of staff receives an impact to the head and is therefore not solely for use after a sports-related injury.
- 3.4 This policy will apply to all pupils, even where they are over the age of 18, and to all staff.

4 School internal procedures for managing a pupil or member of staff who has received an impact to the head

- 4.1 **At all times, procedures detailed below are subject to emergency or first aid principles** – for example:
- 4.1.1 some head injuries may involve serious and/or urgent issues such as bleeding, fracture, neck or eye injuries, which may or may not also involve concussion, and these may need urgent assessment and treatment.
- 4.1.2 in respect of concussion, procedures below are subject to advice and guidance contained within the following publications:

- 4.1.2.1 The UK Concussion guidelines – ‘*If in doubt ...*’ (see paragraph 1 above and Appendix 2 below) and
- 4.1.2.2 the Rugby Football Union’s (Headcase) Graduated Return to Activity & Sport (GRAS) programme (**‘the Headcase GRAS programme’**) (see paragraph 1 above and Appendix 3 below). This is based upon the UK Concussion guidelines – ‘*If in doubt ...*’ and will apply to injuries whether or not received from rugby.
- 4.1.3 the head injury guidance information below (Appendix 1) and the publications noted in paragraphs 4.1.2 above (and Appendices 2 and 3) detail what signs and symptoms should be looked for, what actions may be appropriate given these and information on urgency and timings. **For example, in some circumstances an ambulance or urgent professional examination may be required immediately and staff should not await colleagues’ input nor a South Coast Rx Head Injury clinic visit before taking action.**
- 4.2 Members of staff, medical or otherwise, are not expected to be able to diagnose head injuries, such as concussion, but will be required to make appropriate judgements when managing a pupil or member of staff who has received an impact to the head. Individuals who receive an impact to the head should be checked for signs and symptoms, using first aid principles and the Appendices to this Policy as a guide, and should be removed immediately from any physical activity in which they are participating.
- 4.3 **IN THE PRE-SCHOOL AND FOR CHILDREN UP TO AND INCLUDING YEAR 2**, children who suffer a blow or impact to the head should be removed from the activity if appropriate:
 - 4.3.1 When the accident is serious enough, children are taken directly to the Health and Wellbeing Centre and/or the nursing staff /emergency services/ NHS are called and appropriate procedures similar to those outlined below for older children will be followed. Specialist paediatric advice may be required (as for older children too)
 - 4.3.2 For pupils in Pre-School, Reception (EYFS), Year 1 and Year 2, the Head Injury (Concussion) Management Pathway may not be appropriate for impacts to the head that occur without signs or symptoms associated with concussion. In these instances, Junior School staff should continue to monitor the child throughout the day following initial assessment and share the Pre-School - Y2 Head Impact letter with parents (see Appendix 6 of the PGS Head Injury Management Policy & Procedure); this includes a link to/copy of the Head Injury Safety Document. A copy of the letter sent should be saved on the pupil’s record.

If the parent, or school, notice any sign(s) or symptom(s) that suggest more serious injury and/or concussion, the pupil should be assessed by a school nurse, South Coast RX Physiotherapy, a medical professional or by NHS 111 as soon as possible after those symptoms become apparent. In some cases, emergency services, urgent medical care or specialist paediatric advice may be required.
- 4.4 **FOR PUPILS IN YEAR 3 AND UPWARDS**, there are broadly three scenarios for staff to manage, noting that children under the age of 8, or indeed older children, may require specialist paediatric advice:
 - 4.4.1 **Scenario 1: No signs and/or symptoms of a head injury are observed or reported:**

- 4.4.1.1 The pupil may return to the activity in which they were participating prior to the impact, but the member of staff supervising the activity must be mindful that delayed concussion is a possibility and that signs and symptoms may appear later.
- 4.4.1.2 If the activity is followed by the end of the school day, the pupil should be handed over to parents directly, either by the supervising member of staff, or a nominated alternative PGS member of staff such as the staff operating Main Reception or the nursing staff in the Health and Wellbeing Centre.
- 4.4.1.3 Key information as to the incident and the pupil's condition to date should also be communicated. It is important to note that, in the absence of specific agreement otherwise, the responsibility for the incident being communicated to parents rests with the original supervising member of staff and so a follow-up phone call may be advisable.
- 4.4.1.4 Staff must also provide parents with [the Head Injury Safety Information email] or, if this is not possible, ensure they understand where to find the Head Injury Safety Document and the PGS Head Injury Management Policy & Procedure on the School's website (<https://www.pgs.org.uk/about-us/policies-reports/policies>), particularly the Appendices.
- 4.4.1.5 Parents would normally be encouraged to collect the pupil from school to prevent the risk associated with symptoms or deterioration occurring whilst the pupil is travelling home independently, for example, on a train.
- 4.4.1.6 If the pupil did not visit the Health and Wellbeing Centre, the member of staff must also ensure the incident is reported to **relevant colleagues (see Appendix 4 below)** including the School's Nursing Team (nursing@pgs.org.uk or using the School's Injury Reporting tool/Evolve); this report should be at the earliest opportunity/ as the urgency of the situation requires and at the latest prior to the beginning of the next school day.

4.4.2 Scenario 2: Some signs and/or symptoms are reported or observed that suggest a possible head injury (for example, concussion) but an ambulance is not required:

4.4.2.1 On the main school site

- (a) The pupil needs to be escorted to the Health and Wellbeing Centre immediately or the school nurses called following which the nurses will take responsibility for the situation, assess the pupil and call home and/or make the necessary arrangements for further medical review.
- (b) The Nursing Team will ensure the incident is also reported to **relevant colleagues (see Appendix 4 below)**; this should be at the earliest opportunity/ as the urgency of the situation requires and at the latest prior to the beginning of the next school day.

4.4.2.2 When away from the main school site but parents are able to collect

- (a) Assuming immediate medical assistance such as an ambulance is not required and there has been no deterioration, the pupil needs to be sent home.
- (b) In the meantime, the pupil should be removed from any activity in which they are participating, should not return to that activity at any time, even if they begin to feel better, and should be monitored closely at all times until they are transferred to the care of their parent(s) or an alternative responsible adult nominated by the pupil's parent(s).
- (c) If the pupil's condition deteriorates, staff may need to seek medical advice by calling 111 for non-emergency advice, or 999 for an ambulance in the event of an emergency.
- (d) On transfer, staff should provide the parent(s) with a description of the incident and the Head Injury Safety Document (this includes an Introduction and information on the Head Injury protocol, Concussion symptoms, When to go to seek emergency help and the Head Injury Clinic) – see Appendix 1 below for link. If this is not possible, ensure parents understand where to find key information (eg the Head Injury Safety Document and the Appendices to the PGS Head Injury Management Policy & Procedure) on the School's website (<https://www.pgs.org.uk/about-us/policies-reports/policies>, including Supporting Documents).
- (e) For the avoidance of doubt, staff should remain with the pupil until they are collected by their parent(s) or nominated adult.
- (f) Pupils and their parents should be strongly encouraged to:
 - seek medical advice as necessary, either immediately or as below
 - ensure a health care professional review has been completed **within 24 hours**, whether for example by appropriate onsite Healthcare Professional, A&E, NHS Walk-in Centre or 111
 - commence the GRAS programme (Appendix 3) immediately (the supervising member of staff should ensure that an engagement email has been sent to the pupil and parent/guardian for them to register for the Head Injury initial clinic. This may be an automated email from the School's Reporting Tool/ Evolve or sent manually).
- (g) If the pupil did not visit the Health and Wellbeing Centre, the member of staff must also ensure the incident is reported to the School's Nursing Team (nursing@pgs.org.uk or using the School's Injury Reporting tool/ Evolve) and relevant colleagues (see Appendix 4 below) ; this report should be at the earliest opportunity/ as the urgency of the situation requires and at the latest prior to the beginning of the next school day.

4.4.2.3 When away from the main school site and parents cannot collect

- (a) The pupil needs to be assessed by a qualified medical professional able to diagnose head injuries, which would normally require a trip to a local A&E department, an NHS Walk-In Centre or by calling 111.
- (b) The pupil should be removed from any activity in which they are participating, should not return to that activity at any time, even if they begin to feel better, and should be monitored closely at all times until they are seen by the aforementioned medical professional.
- (c) The member of staff supervising the activity must ensure the pupil is accompanied to A&E/the Walk-In Centre by a member of PGS staff. The parent(s) should be contacted. A member of SMT/SLT will also be informed on the matter so as to assist in planning the next steps to manage the situation.
- (d) On occasion, but not always, it may be appropriate for a decision to be made, usually following parental consultation, that a pupil travels home on a sports coach/minibus, under supervision, to access medical review back in the Portsmouth/their local area. In such a situation, the interests of the injured child are the priority in decision-making.
- (e) The member of staff must also ensure the incident is reported to relevant colleagues (see Appendix 4 below) including the School's Nursing Team (nursing@pgs.org.uk or using the School's Injury Reporting tool/ Evolve; this report should be at the earliest opportunity / as the urgency of the situation requires and at the latest by the end of the day.
- (f) Pupils and their parents should be strongly encouraged to:
 - seek medical advice as necessary, either immediately or as below
 - ensure a health care professional review has been completed **within 24 hours**, whether for example by appropriate onsite Healthcare Professional, A&E, NHS Walk-in Centre, or NHS 111
 - commence the GRAS programme (Appendix 3) immediately (staff should ensure that an engagement email has been sent to the parent/guardian attaching the Head Injury Safety Document and giving details as to how they should register for the Head Injury initial clinic. This may be given in hard copy or by an automated email from the School's Reporting Tool/Evolve or sent manually).
- (g) If the pupil's condition deteriorates before A&E can be reached, staff should progress to scenario 4.4.3 below. In any event, paragraph 4.4.4 below applies.

4.4.3 **Scenario 3: Some signs and/or symptoms are reported or observed that indicate the need to call an ambulance**

- 4.4.3.1 Some symptoms merit a 999 call for emergency medical attention as they are indicative of a more serious head injury; staff must familiarise themselves with the list of such symptoms (see Appendix 1 and 2 for non-exhaustive guidance).
- 4.4.3.2 Following a 999 call, the parent(s) should then be contacted. If parents are unable to accompany the pupil in the ambulance, the member of staff supervising the pupil will need to do so and remain in *loco parentis* until the parent(s) arrive. The said member of staff must ensure that a member of SMT/SLT is then contacted, and they will assist in planning the next steps to manage the situation.
- 4.4.3.3 The member of staff must also ensure the incident is reported to relevant colleagues (see Appendix 4 below) including the School's Nursing Team (nursing@pgs.org.uk or using the School's Injury Reporting tool); this report should be at the earliest opportunity / as the urgency of the situation requires and at the latest by the end of the day.
- 4.4.3.4 Subject to any medical advice received, pupils and their parents should be strongly encouraged to commence the GRAS programme (Appendix 3) immediately (staff should ensure that an engagement email has been sent to the parent/guardian attaching the Head Injury Safety Document and giving details as to how they should register for the Head Injury initial clinic. This may be given in hard copy or by an automated email from the School's Reporting Tool/Evolve or sent manually).

4.4.4 **For all pupils with signs and/or symptoms that suggest a possible head injury**

- 4.4.4.1 **In cases 4.4.2 and 4.4.3, the pupil will be presumed to have suffered a head injury/ concussion, unless a health professional trained in assessing head injuries confirms otherwise. Where a head injury is suspected or diagnosed, a pupil must undergo an immediate period of complete body and brain rest for a minimum of 24 hours (more if needed or if in doubt) and should remain off school for at least that time.** The advice and protocol in Appendix 2 (UK Concussion Guidelines – '*If in doubt ..*') and the GRAS programme in Appendix 3 should be followed. If symptoms persist which are more significant than those the guidance suggests are to be expected at a given stage, the pupil should follow the GRAS guidance and not return to school; further medical advice should be sought. Pupils should generally not return to school until they are symptom-free or are experiencing only symptoms within the acceptable range detailed in the UK Concussion Guidelines - '*If in doubt ..*'; in some cases, only when medical advice allows, it may be appropriate for the school to help facilitate a 'staged' return.

4.5 **FOR STAFF**

For staff who receive a blow to the head:

- 4.5.1 Where this is sustained on the School site or in the course of school activities, the majority of the procedures detailed for pupils in paragraph 4.4 above and 4.6 below are likely to be relevant, with next of kin/emergency contact replacing parents for example. In all cases, the Senior Deputy Head or a delegated member of SMT or SLT must be informed immediately.
- 4.5.2 Where this is sustained off site and not in the course of School activities, relevant medical information and advice should be communicated to the Senior Deputy Head, Human

Resources and the School Nurses (nursing@pgs.org.uk) in advance of a decision being made about what is or is not appropriate by way of the individual's attendance at the School and their fulfilment of their responsibilities.

- 4.5.3 As well as the care of the member of staff with the head injury, particular care, consideration and provision must also always be made urgently for supervising and managing any pupils or colleagues for whom the member of staff may have had responsibility at the time of their injury or during the period of their treatment or absence.
- 4.5.4 At no time should a member of staff with an actual or suspected head injury drive a school minibus or conduct activities which have the potential to cause or permit significant injury or harm unless both medical staff and the Senior Deputy Head have agreed that this is appropriate.
- 4.5.5 A member of staff with a suspected or actual head injury should not return to an activity in which they are not themselves supervised or working with colleagues unless previous medical advice and the Senior Deputy Head agree that this is appropriate.

4.6 HEAD INJURIES SUFFERED BY PUPILS OR STAFF WHILST OUTSIDE SCHOOL

- 4.6.1 A pupil or member of staff may suffer a head injury whilst participating in an activity outside of the School, for example, at a local hockey club or when cycling. In all such cases, it is the responsibility of the parents or the member of staff/their next of kin to provide the School promptly with the details of the incident, to keep the School updated with the individual's progress and to ensure that a GRAS programme (see paragraph 5 below or an equivalent programme) has been implemented. Staff who have suffered a head injury should also note paragraph 3.2, 3.3 and 3.4 above.
- 4.6.2 If no rehabilitation programme has been implemented, parents or a member of staff are strongly advised to ask the School to initiate the School's own GRAS programme (see paragraph 5 below) or an equivalent so that South Coast Rx Ltd and the School can assist in managing their return to normal physical activity safely.
- 4.6.3 Where the School has been made aware that a pupil may have suffered a head injury outside of school, the School will only allow the individual to participate in normal physical activity at school once the School has been provided with satisfactory reassurances that it is safe to do so, usually via the documentation associated with the GRAS programme. A member of staff is advised similarly. It is the responsibility of the parents and pupil, or in the case of staff the member of staff or their next of kin, to ensure that no inappropriate physical activity is undertaken outside of school whilst the individual is progressing through the school's GRAS programme.

5 The PGS Head Injury (Concussion) Management Pathway & Graduated Return to Activity & Sport (GRAS) programme

5.1 The PGS Head Injury (Concussion) Management Pathway

In order to follow best practice in managing head injuries, the School has engaged South Coast Rx Ltd ('**South Coast Rx**') to implement, operate and manage a new Head Injury (Concussion) Management Pathway (see Link 4 of Appendix 1 for an infographic). This provides Health Care Professional assessment and management of concussions to all PGS pupils over the age of 8. Pupils aged 8 and under are eligible to attend the clinic but the

School and South Coast Rx Ltd would advise on specialist paediatric neurologist review. In outline, the Head Injury (Concussion) Management Pathway works as follows:

- 5.1.1 Using staff who are specifically trained in the assessment and management of concussion as per best practice guidelines, South Coast Rx Ltd will provide a healthcare professional led concussion management clinic which runs from Portsmouth Grammar School premises on two days per week (some variation possible according to demand).
- 5.1.2 Upon referral, South Coast Rx Ltd communicate important safety information, the details of the concussion management pathway, their operational procedures and details of the Head Injury clinic booking portal to the pupil/parent(s).
- 5.1.3 Personal details, contact details and a full medical history are taken by South Coast Rx Ltd on initial clinic booking/attendance and the Clinic booking must be made by the parent. More generally, pupils and parents, not the School, have responsibility at all times for communicating all and any relevant information to South Coast Rx Ltd (copying the School's Nursing Team (nursing@pgs.org.uk) and other relevant members of staff), for example including information about new or ongoing symptoms.
- 5.1.4 The head injury clinic is usually 20 minutes per appointment and pupils are seen in person by South Coast Rx Ltd staff, normally accompanied by their parent or guardian (see 5.4.3 - 5.4.6 below for exceptions).
- 5.1.5 A pupil who is following the Graduated Return to Activity & Sport (GRAS) programme (see paragraph 5.2 and Appendix 3 below) will usually expect to attend/engage with the Clinic on 4 occasions: within 48 or so hours of the injury and weekly or so thereafter. These standard 4 appointments are usually free of charge to pupils or members of staff. If a pupil misses a scheduled appointment without good reason and without notifying South Coast Rx Ltd in advance, a charge for the missed appointment will be added to their next school invoice (see also paragraph 5.2.5 below).
- 5.1.6 At and following initial contact, South Coast Rx Ltd:
 - 5.1.6.1 will communicate to pupils, parents and key stakeholders at Portsmouth Grammar School regarding new concussion and ongoing concussion management, specifically making clear the stage of the GRAS programme reached.
 - 5.1.6.2 will be the main point of contact for parents regarding ongoing head injury (concussion) management of pupils in the event of a head injury / concussion (and parents should additionally also copy any such relevant information in the School's nursing team [nursing@pgs.org.uk and other relevant staff such as the child's tutor, Head of Year and the Sports Department]).
 - 5.1.6.3 may refer individuals with non-improving symptoms for specialist review as relevant. South Coast Rx Ltd will be able to provide more information on this additional service.
- 5.1.7 For select pupils or groups, with specific parental consent in advance, individualised SCAT Testing may be considered.

5.2 The GRAS programme

- 5.2.1 The Graduated Return to Activity & Sport (GRAS) is a programme of rehabilitation that works progressively through increasing levels of exercise intensity over time and is designed to ensure that a pupil or member of staff returns to normal physical activities safely following a head injury; it is based closely on the *UK Concussion Guidelines for*

Grassroots Sport – ‘If in doubt, sit them out’ (UK Government and Sports & Recreation Alliance- April 2023) (*‘UK Concussion guidelines – ‘If in doubt ...’*) and the Rugby Football Union’s (Headcase) *Graduated Return to Activity & Sport programme* (*‘GRAS programme’*). See Appendix 1 below for relevant links, or Appendices 2 and 3.

- 5.2.2 Where a pupil has received a head injury they will be strongly encouraged to follow the GRAS programme unless and until advised otherwise (GRAS; Appendix 3). A member of staff who has received a head injury is likewise strongly encouraged to follow the GRAS programme.
- 5.2.3 Whilst many individuals who engage with the GRAS programme will ordinarily participate in regular sporting activity, it is vital that even those who do not regularly participate still complete the process so that the pupil and their parent(s)/the member of staff understand the necessary limitations of activity that follow a head injury. Individuals must usually remain symptom-free before they can progress through each stage of the programme. If there is a recurrence of symptoms, they must adapt their GRAS stage-progression timings to take account of this; see specific details of the GRAS stages for limited circumstances in which the programme may continue when symptoms are still occurring. In the case of pupils, it is the responsibility of the pupil and their parent/guardian(s) to ensure that the pupil follows the GRAS programme whilst not under school supervision.
- 5.2.4 A pupil must not try to participate in sporting or other activities unless the appropriate approval has been given by South Coast Rx Ltd, usually by their approval of an individual’s progress through the GRAS programme. It is primarily a pupil’s responsibility and that of their parent/guardian to ensure that the GRAS programme advice is followed
- 5.2.5 Parents should note that, in agreeing that their child attends a Head Injury Clinic provided by South Coast Rx Physiotherapy (SCRXP) at The Portsmouth Grammar School, such appointments are not chargeable if the appointments are attended. **However, missed appointments will incur a charge [£39.50 as at July 2025 but subject to change], which will added to the child’s end of term bill.** This is a necessary condition because missed appointments incur a cost that otherwise would be payable by SCRXP or the School, and also because missed appointments represent a missed opportunity for another pupil to benefit from that appointment time.

5.3 Important notes relating to concussion management

- 5.3.1 **The concussion management pathway/GRAS applies in addition to any first aid or emergency assessment and/or treatment required at the point of injury or in the period following it (for example, see Appendix 1 for ‘red flags’ – requiring hospital treatment); such urgent assessment or treatment measures should not therefore be delayed to await a clinic appointment.**
- 5.3.2 Whilst the clinic will usually be located in the PGS Health & Wellbeing Centre, pupils and parents enter into a direct relationship with South Coast Rx Ltd who act independently in setting up and managing the concussion management programme. The terms and conditions of this provision are provided at the initial contact by South Coast Rx Ltd, including those relating to Safeguarding.
- 5.3.3 PGS teaching and nursing staff will not be present or involved in appointments or follow up (except in the case of chaperoning a pupil from a safeguarding perspective – see paragraphs 5.4.3 – 5.4.6 below), although the School will be kept broadly informed as to a pupil’s progress through the various stages of the GRAS programme.

- 5.3.4 South Coast Rx LTD works in collaboration with the Portsmouth Grammar School's IT department to put in place an injury reporting form/Evolve. Built into the reporting tool it is planned to have automated emails to parents containing key safety information, how to book into the concussion clinic and separate email notifications to all relevant staff members.

5.4 Additional notes on consent, confidentiality & safeguarding relating to concussion management

- 5.4.1 Establishing the Head Injury (Concussion) Management Pathway involves a number of consent and confidentiality issues, both personal (eg consent to assessment/treatment by pupils/parents/guardians) and relating to the sharing of personal data, including medical information. Both the School and South Coast Rx Ltd will seek to ensure that all such legal and professional standards are respected. For example, PGS will facilitate communication to parents regarding the new concussion management pathway and ensure appropriate consent or data protection justification for implementation of the pathway and reporting, and pupil attendance at the clinic; South Coast Rx Ltd will also obtain consents for assessment, treatment and data sharing from the pupil and a parent/guardian at their first engagement. Although legally a pupil aged 16 or over can give consent independently it is the School's established practice also to seek parental consent.
- 5.4.2 Explicit verbal consent will be taken at the point of assessment and/or engagement with South Coast Rx Ltd to share information regarding the injury and any other pertinent information with Portsmouth Grammar School. This means that staff can centrally track progress through the GRAS programme. Parental consent for this may also be taken at the beginning of the academic year when writing to parents to inform them of the updated concussion management process.
- 5.4.3 In normal circumstances, a parent or guardian should accompany a pupil who is attending a clinic, particularly for a first clinic visit or if ongoing symptoms are being experienced.
- 5.4.4 Where a parent/guardian cannot be present at a clinic visit, the School will, with appropriate consent of a parent or guardian, provide a chaperone for a pupil of any age. Although legally a pupil aged 18 years or older does not have to attend with a parent, guardian or chaperone, it is the School's established practice that they should do so.
- 5.4.5 The responsibilities of a chaperone are strictly limited to those of safeguarding and it should be noted that they are not empowered to give advice or make decisions on behalf of the child they are accompanying, nor to advocate for the child or report back from the clinic – such communication will be directly between the pupil/parent and South Coast Rx Ltd. Both the parents and South Coast Rx Ltd should then independently update the School as relevant.
- 5.4.6 If relevant, a clinic visit where a parent is unable to attend can be supported by a parental email to the following South Coast Rx email address info@SouthCoastRxPhysiotherapy.co.uk, making clear the name of the pupil, that they are from PGS, their age and the date of the injury. The pupil should also mention at the commencement of the Clinic session that such an email has been sent.
- 5.4.7 Key stakeholders of PGS (see Appendix 4) are usually informed of concussion although parents should also make the school aware of the fact of a head (or any other) injury in the normal way, together with any advice or information which it is relevant for the

school to know. In the first instance, the pupil's tutor, Head of Year, team coach/PE teacher should be contacted, copying the Nursing Team and Director of Sport/Sports Administrator – see Appendix 4 for contact details.

- 5.4.8 A school is a complex, dynamic organization and a pupil's choices and activities are not always easy to track in real time, from sports teams to participation in trips or co-curricular activities. Hence, communication of key information by a parent to key staff in a pupil's school experience is the most reliable way of ensuring the sharing of important head-injury related information. Better that key staff are informed twice than not at all.
- 5.4.9 Appropriate staff members will also have access to a central record of progression through the concussion GRAS programme in order to plan for return to physical activity and competitive sport.
- 5.4.10 At all times, both PGS and South Coast Rx Ltd will consider and ensure compliance with established safeguarding guidelines and practice, both at a national level and internally.
- 5.4.11 Periodic briefings and updates are provided to both staff and parents introducing the new PGS Head Injury (Concussion) Management Pathway outlining what concussion is, best practice guidelines and the School's process and procedure.
- 5.4.12 Both the School and SCRx Ltd retain their own ongoing Insurance cover in relation to their provision of services and activities.

5.5 Return to activity / exercise

In the case of an individual who has sustained a head injury and has commenced the GRAS programme:

- 5.5.1 A pupil will only be permitted to return to exercise as indicated at each relevant stage of the programme and will not be allowed to accelerate or cease participation in it. Failure to adhere to its process and be signed off each stage effectively and as required will result in a delayed return to normal activity.
- 5.5.2 A member of staff is advised similarly and the School retains a full discretion as to what School activities they may be permitted to undertake during their period of recovery. See also The PGS Management of Sickness Absence Policy (tbc)

6 Further information

For further information about the framework of this policy, enquiries should be made to the Assistant Head (co-curriculum) or the Deputy Head (Pastoral).

7 Record keeping

Documents, data and information are retained in accordance with established practice, consents given, including in privacy notices, and the PGS Data Storage and Retention of Documents Policy

8 References

See Appendix 1 for links to these documents:

The UK Concussion Guidelines for Grassroots Sport – 'If in doubt, sit them out' (UK Government and Sports & Recreation Alliance- April 2023) ('UK Concussion guidelines')

The Rugby Football Union's (Headcase) Graduated Return to Activity & Sport (GRAS) programme

CRT6 - Concussion Recognition Tool (Echemendia RJ et al British Journal of Sports Medicine June 2023 Vol57 No11)

9 Allocation of Tasks and Version Control

Allocation of Tasks

Task	Allocated to	When / frequency of review
Keeping the policy up to date and compliant with the law and best practice	Assistant Head (Co-curricular)	As required, and at least annually
Monitoring the implementation of the policy, relevant risk assessments and any action taken in response and evaluating effectiveness	Assistant Head (Co-curricular)	As required, and at least termly
Maintaining up to date records of all information created in relation to the policy and its implementation as required by the GDPR	Health and Wellbeing Centre, Sports Department and JS form staff	As required, and at least termly
Reviewing/receiving input from interested groups (such as pupils, staff, Parents) to consider improvements to the School's processes under the policy	Assistant Head (Co-curricular)	As required, and at least annually
Formal annual review	SMT	Annually

Version Control

Date Approved	19 th March 2025 (SMT)
Date Reviewed	3 rd March 2025 (Health and Safety Committee)
Next Review Date	Spring Term 2026
Policy author (SMT)	Assistant Head (Co-curricular)
Status	External
Report	Health and Safety Report

Ph4300825

Appendices

to

The PGS Head Injury Management Policy & Procedure

**The Management of a Head Injury to a pupil or member of staff at PGS:
Guidance and advice to be issued to pupils and their parents, and to members of
staff/their next of kin**

The following appendices, as updated from time to time, form part of the Head Injury Management Policy at PGS and may be given to the parents of a pupil who has sustained a head injury or to a member of staff or next of kin of a staff member who has sustained a head injury.

Alternatively, they are available on the School's website:

<https://www.pgs.org.uk/about-us/policies-reports/policies>

Appendix 1: Links to key Head Injury documents, including guidance notes

Document name & Link	Additional Information
<u>Head Injury Safety Document</u> [also referred to as Safety netting document]	This includes the following sections: ○ Introduction ○ Concussion signs & symptoms ○ When to seek emergency help ○ Head Injury Clinic This is the document which is issued to all pupils and parents in the event of a head injury. It advises parents on some signs and symptoms to watch out for and what to do in the event that they occur. It also has information on how to book into our concussion clinic. (It is also available at The Health & Wellbeing Centre, at Hilsea and on the PGS school website).
<u>[The PGS Head Injury (Concussion) Tracker]</u> (live link for staff only; or see PGS Online (eg Health & Wellbeing Centre webpage))	This enables staff at PGS to review which stage a pupil is at with respect to their progression through the Head Injury Management (GRAS) programme. This helps staff members adapt activities/learning/games/gym/other sessions where appropriate. There is a tab at the bottom of the tracker which shows what the pupil can / cannot do at each stage. Staff can review these tabs so they can know exactly what the pupil is able to do at any given point of their progression through the tracker. For awareness, the [School] will usually also receive a direct email when South Coast Rx complete a concussion review with a pupil so that the School is updated on their progress, though the primary responsibility is for parents/pupil to inform the School/key staff members of relevant information.
<u>CRT6 Concussion Recognition Tool</u>	This document assists in the identification of concussion signs and symptoms and will guide staff on when to escalate for emergency medical review (copies should be kept in PGS/South Coast medical bags).
<u>PGS Head Injury (Concussion) Management Pathway (11) - The process at a glance</u>	Infographic showing the PGS Head Injury Management process
<u>GRAS Programme</u>	Details of the Graduated Return to Activity & Sport programme, including the six stages (see also paragraphs 1 and 5 of the PGS Head Injury Management Policy & Procedure).
<u>UK Concussion Guidelines ('If in doubt ...')</u>	'If in doubt, sit them out' – national concussion guidelines (see also paragraph 1 and Appendix 2 of the PGS Head Injury Management Policy & Procedure).
<u>South Coast Rx Physiotherapy Head Injury Clinic booking page</u>	Select "PGS Head Injury Clinic Appointment." Link live during high demand periods; at other times contact the Assistant Head (Co-curriculum) or the PGS Nursing Team (see Appendix 4.1 of the PGS Head Injury Management Policy & Procedure for contact details) or South Coast Rx Ltd

<u>The South Coast Rx Head Injury initial email (exemplar - subject to ongoing update)</u>	This includes text and also links from South Coast Rx for parents to the documents listed: ○ Head Injury Safety Document (also referred to as Safety Netting document) ○ CRT-6 - Concussion Recognition Tool ○ PGS Head Injury (Concussion) Management Pathway (11) - The process at a glance.pdf ○ UK Concussion Guidelines ('If in doubt')
<u>The PGS Head Injury Management Policy & Procedure (see next column)</u>	Available from: https://www.pgs.org.uk/about-us/policies-reports/policies

For a summary of key advice in the case of a head injury more generally - see NHS Choices A-Z Head Injury:

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

Appendix 2: UK Concussion Guidelines for Grassroots sport ('If in doubt, sit them out')

Weblink to the full guidelines document:

<https://www.sportandrecreation.org.uk/policy/research-publications/concussion-guidelines>
or [here](#)

Extract: *Index to UK Concussion Guidelines - 'If in doubt, sit them out'*:

Section	Page
Introduction	3
What is concussion?	5
What causes concussion?	7
What can be the consequences of concussion?	7
Initial assessment	7
Red flags – requiring urgent medical assessment	8
Onset of symptoms	9
How to recognise concussion	9
Visible clues or signs of concussion - what you see	10
Symptoms of concussion at or shortly after injury - what you are told/what you should ask about	10
Immediate management of a suspected concussion - anyone with a suspected concussion should be IMMEDIATELY REMOVED FROM PLAY.	11
Shoulds and should nots	12
Following a suspected concussion, what's your role? - coaches, teachers, volunteers - parent, carers - players	13
Concussion recovery	15
Recovery times	16
The graduated return to activity (GRAS) (education/work) and sport programme	17

Government announcement of UK Concussion Guidelines (April 2023) – 'If in doubt ...':

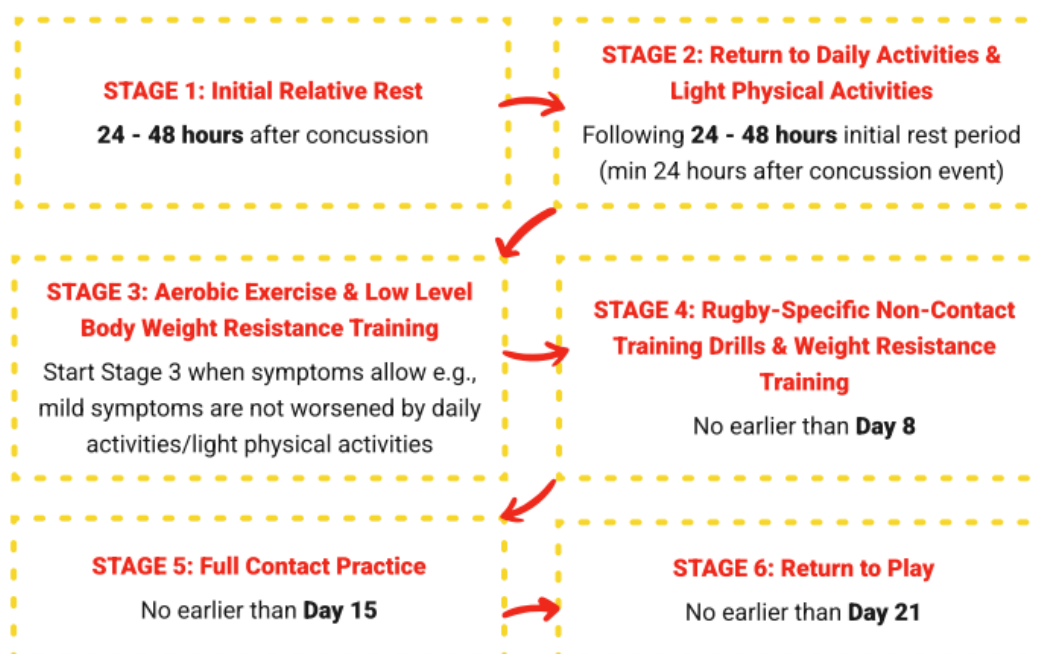
<https://www.gov.uk/government/news/landmark-concussion-guidance-for-grassroots-sport-published>

Appendix 3: The PGS Graduated Return to Play (GRAS) Programme (Headcase RFU)



Overview of:

Graduated Return to Activity & Sport (GRAS) programme



See Section 17 of the [UK Concussion Guidelines for Non-Elite](#) (Grassroots) Sport and its Graduated Return to Activity (Education & Word) & Sport Summary.

See one of these links for full information:

[Graduated Return to Activity and Sport England RFU](#) (GRAS) or [here](#)

A PGS pupil or member of staff who has sustained a head injury is strongly encouraged to enter the GRAS programme and follow the advice given in managing their return to full activity. See The PGS Head Injury Management Policy and Procedure for further detail, including Paragraph 5.5 (Return to activity / exercise).

Appendix 4: Key contacts and Guidance regarding Internal Sharing of Head Injury-related Information

1. **Key contacts** for the operation of this policy include the following:

	Email	Telephone
SouthCoast Rx Ltd Ravelin Sports Centre Cambridge Road Southsea Portsmouth PO1 2SE	info@SouthCoastRxPhysiotherapy.co.uk	07526 750206
PGS Reception		023 9236 0036
PGS Junior School: Head Deputy Head* JS Office	a.wilson-smith@pgs.org.uk ; j.ashcroft@pgs.org.uk ; jsoffice@pgs.org.uk	023 9236 0036 (switchboard) (or see the School's Safeguarding Policy for school mobiles for those asterisked)
PGS Health & Wellbeing Centre (Nursing Team)	nursing@pgs.org.uk	
PGS Director of Sport	s.copeland@pgs.org.uk	
PGS Sports Dept Administrator	h.grist@pgs.org.uk	
PGS Assistant Head (co- curriculum)	m.murray@pgs.org.uk	
PGS Deputy Head (Pastoral)*	l.ryan@pgs.org.uk	
PGS Senior Deputy Head*	r.bristow@pgs.org.uk	
PGS Head of Rugby / hockey / cricket	Contact reception	
PGS CCF Contingent Commander /DofE	Contact reception	
PGS Heads of Year	Contact reception	
SMT Duty Member	As per rota (if relevant) – contact reception	
The PGS Health & Safety Officer / Estates & Operations Bursar	m.smith@pgs.org.uk	

2. PGS Internal Guidance regarding internal sharing of Head Injury-related Information

Note: Primary responsibility is with a pupil and their parent(s) to ensure that:

- a pupil does not participate in an activity which is inappropriate to their injury and/or the stage of their recovery, and
- key relevant staff are informed: eg team coach / PE teacher / trip leader for a forthcoming trip.

The suggestions below are for guidance only and may vary depending on the situation, age and identity of the pupil involved:

1. Access to <u>[Head Injury/Concussion Tracker spreadsheet]</u>: • find under 'Medical Lists' on PGS Online – Health & Wellbeing Centre webpage or via Staff Instructions re Head Injuries • find live link to the Tracker (and discussion) in weekly Pastoral Bulletin and in Sports Department weekly meeting	All PGS teaching staff
2. PGS <u>responsibility</u> for supervising Head Injury Clinic engagement and attendance generally:	Nursing Team and Director of Sport (joint)
PGS <u>administration</u> of Head Injury Clinic engagement and attendance:	Sports Dept Administrator
3. Initial pitchside or other report of a Head injury <u>to be sent to</u> by South Coast Rx, Nursing Team or supervising member of staff <u>to</u>:	1. Parent/ guardian 2. (a) List – Head Injury (SS) inc SCRx Ltd (ext) email group: • Nursing Team • Assistant Head Co-Curriculum • Deputy Head (Pastoral) • Senior Deputy Head • Director of Sport • Sports Dept Administrator • Deputy Bursar (Estates & Operations) / Health & Safety Officer • South Coast Rx physio (if appropriate) or (b) If Junior School: List – Head Injury (JS) inc SCRx Ltd (ext) email group [ie List - Head Injury (SS) plus: • JS Head • JS Deputy Head (Pastoral & Operations) • JS Deputy Head (Academic)
[sent by email or Accident Form (or similar) or in due course by an Injury Reporting Tool/ Evolve]	

	• JS Enrichment co-ordinator]
	Plus
	3. Head of relevant activity (eg rugby, netball, hockey, cricket, CCF, DofE)
	4. Head of Year
	5. Pupil? (if considered appropriate - eg for older pupils but not an automatic expectation)
4. Responsibility for giving and/or sending out <u>Head Injury Safety Document</u> (ie the <u>safety netting doc</u>) to [pupil] / parent[s]:	One of: 1. South Coast Rx Ltd, if pupil seen pitchside; if not, 2. Nursing team, if seen in the Health & Wellbeing Centre in the school day; if not, 3. The member of staff supervising the activity in which the Head Injury occurred (also copying nursing@pgs.org.uk) (NB additional guidance on how to do this included in Staff Instructions relating to Head Injuries (see Appendix 5 of this policy). Further advice may also be obtained from the Nursing Team, the Assistant Head (co-curriculum), the Director of Sport or a member of the Senior Management Team/JS Senior Leadership team
5. Ongoing significant updates on head injury-related information from South Coast Rx Ltd and/or pupil and/or parent(s) and/or staff to be sent to:	Parent/ guardian (a) List – Head Injury (SS) inc SCRx Ltd (ext) email group: (See para 3 above for members & note that re South Coast Rx physio (if appropriate) the formal responsibility for keeping SCRx informed is with parents)) Or (b) If Junior School: List – Head Injury (JS) inc SCRx Ltd (ext) email group (See para 3 above for members) Plus: Head of relevant activity (eg rugby, hockey, cricket, CCF, DofE) Head of Year Pupil? (if considered appropriate - eg for older pupils but not an automatic expectation)
6. Upon receipt of head injury notification or	Nursing Team • notify parents (if not already aware)

significant information, onward sharing decisions / actions		• notify relevant teaching staff/ tutor/ HOY/ Deputy Head co-curriculum/ Deputy Head (Pastoral)/ Senior Deputy Head, trip leaders particularly of pupil engagement in GRAS programme ... • update iSAMS medical with latest info • add a Head Injury icon to iSAMS register • discuss further as appropriate
	Director of Sport/ Sport Administrator	• informs team coach(es) & PE teacher(s) of relevant Head Injury info (eg entering or completing GRAS, other information) • facilitates discussion/updates/ awareness at department meetings (standing item) • removes Head Injury icon from iSAMS register when a pupil completes the GRAS programme
	Head of Year	• informs additional relevant staff of whom they are aware (eg trip/activity leaders)
	Head/Deputy Head of Junior School	
	Deputy Head (Pastoral)	Informs: • Head, if hospitalisation • Trip leaders • SMT duty staff if relevant (eg holidays) • Updates weekly PGS Pastoral Bulletin for staff

Note re privacy and GDPR:

The School is conscious of the importance of respecting GDPR and the privacy of those affected by this Policy, especially in relation to the sharing of potentially sensitive and confidential personal information; this might include medical information, for example. Care will be taken not to communicate such information to more people than is necessary, but it is also recognised that clear communication to a number of people, from teachers to sports staff and to trip or activity leaders, is potentially vital for the safety, health and wellbeing of an affected individual.

Appendix 5

Exemplar of Head Injury Instructions to PGS Staff (9-25) (subject to ongoing update)

PGS-South Coast Rx Ltd – Instructions to PGS Staff re Head Injuries

Part A: SUMMARY

It is imperative that the following steps are taken in the event of a head injury with signs or symptoms:

- Assess/treat/remove from play
- Inform parent / legal guardian
- Advise/get health care professional review within 24 hours* (as below, this could include calling NHS 111 for specialist advice)
- Issue *Head Injury Safety Document*
- Report to [school] for communicating/records
- Ensure pupil books in for Head Injury clinic appointment

*Attention is drawn to the following UK Concussion Guidelines wording:

'all those suspected of sustaining a concussion should be assessed by an appropriate onsite Healthcare Professional or by accessing the NHS by calling 111 within 24 hours of the injury. If there are concerns about other significant injury or the presence of 'red flags' then the player should receive urgent medical assessment onsite or in a hospital Accident and Emergency (A&E) Department using ambulance transfer by calling 999 if necessary (p3)'

Further Advice

The PGS Health & Wellbeing Centre and/or Emergency Services (eg ambulance) or NHS 111 should be called/consulted as necessary if needed, or attendance made at A&E, a walk-in centre or similar, including liaison with parents as appropriate.

South Coast Rx physio staff are also available to help with any questions or concerns. These can either be directed to the medical team at Hilsea on Saturday or by liaising with Cameron Brew directly (info@SouthCoastRxPhysiotherapy.co.uk / 07526 750206)

Further Actions

If South Coast Rx/ Nursing team are not available to send the Head Injury Safety Document, the supervising member of staff should:

- give hard copy and/or send by email to parents:
 - **Head Injury Safety Document** (see Links section below for contents and link)
- send to parents and those listed in Section 2 of the Additional/ More detailed Guidance below/attached:
 - report of the incident

(as soon as parents make a booking for the Head Injury Clinic, they will usually automatically receive the **South Coast Rx Head Injury engagement email** (see Links section below for content and links).

Links/access to key Head Injury documents

(links copied from Appendix 1 of PGS Head Injury Policy & Procedure)

Links to key Head Injury-related documents
<u>Head Injury Safety Document</u> [also referred to as Safety netting document]
<u>The PGS Head Injury (Concussion) Tracker</u> (live link for staff only; or see PGS Online (eg Health & Wellbeing Centre webpage):
<u>CRT6 Concussion Recognition Tool</u>
<u>PGS Head Injury (Concussion) Management Pathway (11) - The process at a glance</u>
<u>GRAS Programme</u>
<u>UK Concussion Guidelines ('If in doubt ...')</u>
<u>South Coast Rx Physiotherapy Head Injury Clinic booking page</u>
<u>The South Coast Rx Head Injury initial email</u> (exemplar - subject to ongoing update)
<u>The PGS Head Injury Management Policy & Procedure</u> Also available from: https://www.pgs.org.uk/about-us/policies-reports/policies

Part B: ADDITIONAL/ MORE DETAILED GUIDANCE re Head Injuries for PGS Staff

1.	Assess and treat the head injury / remove from play or activity
2.	Report the head injury & ensure parents are fully informed
3.	South Coast Rx Physiotherapy
4.	Notifying and recording
5.	The Graduated Return to Activity and Sport (GRAS)
6.	Managing pupils on the GRAS programme
7.	Academic considerations for pupils with concussion
8.	A Summary of useful links
9.	Addendum

1. Assess & treat the head injury /remove from play or activity

Pupils (or staff) who have sustained a head injury should cease/be removed from the activity immediately and [urgent] treatment given/arranged as necessary.

Members of staff are not expected to be able to diagnose a head injury, but will be required to make appropriate judgements when managing a pupil or member of staff who has received an impact to the head. Individuals who receive an impact to the head should be checked for signs and symptoms, using first aid principles and referring to the signs and symptoms on **the CRT6 document** and/or the Head Injury Safety Document (ie the **Safety Netting Document**). This includes advice, which should also be communicated to the pupil/parents, that the pupil should be assessed by an appropriate onsite Healthcare Professional or by accessing the NHS, for example by calling 111, attending A&E or a walk-in centre or similar **within 24 hours of the injury**. Of course, if 'red flags' are present an ambulance/A&E should be called urgently.

If you are in doubt as to whether the child is concussed, do not let the child return to activity. **If in doubt sit them out.**

2. Report the head injury and ensure parents are fully informed

- If at School, staff report the head injury to the Nursing Team if they are not already involved.
- If at Hilsea, staff report the head injury to a member of the Sports Department and a member of South Coast Rx Physiotherapy.
- In all circumstances, staff should:

1	Ensure: • parents have been informed about the injury and that • the Head Injury Safety Document (the 'safety netting document') <u>has</u>	See first link in para 8 below for a link to this document
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	<u>been given in hard copy and/or by email</u>											
2	Complete an email and/or [Accident]/ [Evolve] Form (or similar). This will notify the Nursing team, the Estates Bursar and the Senior Deputy Head. (See Appendix 4 of the Head Injury Management Policy & Procedure for specific key names/ email addresses if needed)	- in the email/[Accident] Form, describe what happened, what signs and symptoms were present, and the subsequent action by PGS staff and/or South Coast RX physiotherapists and/or parents. - for the purpose of communication, please copy the following email addresses into cc section of the email: <table><tr><td>1. Parent/ guardian</td></tr><tr><td>2. (a) List – Head Injury (SS) inc SCRx Ltd (ext) email group:</td></tr><tr><td> - Nursing Team - Assistant Head Co-Curriculum - Deputy Head (Pastoral) - Senior Deputy Head - Director of Sport - Sports Dept Administrator - Deputy Bursar (Estates & Operations) / Health & Safety Officer - South Coast Rx physio (if appropriate) </td></tr><tr><td>Or</td></tr><tr><td>(b) If Junior School: List – Head Injury (JS) inc SCRX Ltd (ext) email group [ie List - Head Injury (SS) plus:</td></tr><tr><td> - JS Head - JS Deputy Head (Pastoral & Operations) - JS Deputy Head (Academic) - JS Enrichment co-ordinator </td></tr><tr><td>Plus</td></tr><tr><td>3. Head of relevant activity (eg rugby, netball, hockey, cricket, CCF, DofE)</td></tr><tr><td>4. Head of Year</td></tr><tr><td>5. Pupil? (if considered appropriate - eg for older pupils but not an automatic expectation)</td></tr></table> [* in due course, email may be replaced by the PGS Injury Reporting Tool Reporting Tool/Evolve] For head injuries, wide reporting is important. It is better that too many receive an email about a head injury than too few.	1. Parent/ guardian	2. (a) List – Head Injury (SS) inc SCRx Ltd (ext) email group:	- Nursing Team - Assistant Head Co-Curriculum - Deputy Head (Pastoral) - Senior Deputy Head - Director of Sport - Sports Dept Administrator - Deputy Bursar (Estates & Operations) / Health & Safety Officer - South Coast Rx physio (if appropriate)	Or	(b) If Junior School: List – Head Injury (JS) inc SCRX Ltd (ext) email group [ie List - Head Injury (SS) plus:	- JS Head - JS Deputy Head (Pastoral & Operations) - JS Deputy Head (Academic) - JS Enrichment co-ordinator	Plus	3. Head of relevant activity (eg rugby, netball, hockey, cricket, CCF, DofE)	4. Head of Year	5. Pupil? (if considered appropriate - eg for older pupils but not an automatic expectation)
1. Parent/ guardian												
2. (a) List – Head Injury (SS) inc SCRx Ltd (ext) email group:												
- Nursing Team - Assistant Head Co-Curriculum - Deputy Head (Pastoral) - Senior Deputy Head - Director of Sport - Sports Dept Administrator - Deputy Bursar (Estates & Operations) / Health & Safety Officer - South Coast Rx physio (if appropriate)												
Or												
(b) If Junior School: List – Head Injury (JS) inc SCRX Ltd (ext) email group [ie List - Head Injury (SS) plus:												
- JS Head - JS Deputy Head (Pastoral & Operations) - JS Deputy Head (Academic) - JS Enrichment co-ordinator												
Plus												
3. Head of relevant activity (eg rugby, netball, hockey, cricket, CCF, DofE)												
4. Head of Year												
5. Pupil? (if considered appropriate - eg for older pupils but not an automatic expectation)												

Head Impacts Pre-School to Year 2

For pupils in Pre-School, Reception (EYFS), Year 1 and Year 2, the Head Injury (Concussion) Management Pathway may not be appropriate for impacts to the head that occur **without signs or symptoms associated with concussion**. In these instances, Junior School staff should continue to monitor the child throughout the day following initial assessment and share with parents the Pre-School - Y2 Head Impact letter (see Appendix 1 link or Appendix 6 of the PGS Head Injury Management Policy & Procedure); this includes a link to/copy of the Head Injury Safety Document. A copy of the letter sent should be saved on the pupil's record.

If the parent, or school, notice any sign(s) or symptom(s) that suggest more serious injury and/or concussion, the pupil should be assessed by a school nurse, South Coast RX Physiotherapy, a medical professional or by NHS 111 as soon as possible after those symptoms become apparent. In some cases, emergency services, urgent medical care or specialist paediatric advice may be required.

3. South Coast Rx Physiotherapy – Head Injury Clinics

Assuming the asterisked and italicised extract from the UK Concussion Guidelines in the first section of Part A above is satisfied, a pupil who has received a head injury should additionally attend South Coast Rx Head Injury Clinics to engage with the PGS Head Injury (Concussion) Management Pathway. **In no circumstances however should appropriate medical review be delayed so as to await the next available clinic appointment.**

The South Coast Rx Clinics for ongoing Head Injury management usually run on a Monday and a Thursday, at the PGS Health and Wellbeing Centre, 1300-1400. In peak periods, parents can book the clinics using the South Coast Rx Ltd [website](#). After selecting availability, parents should go to the dropdown menu entitled "I want to book a..." and select "PGS Head Injury Clinic Appointment." Additional head injury information will usually be sent to parents automatically by email upon booking an appointment.

If there are no appointment slots available or this booking option is not available, parents should contact the Assistant Head Co-curricular (m.murray@pgs.org.uk). The Assistant Head Co-curricular will either explore additional availability from South Coast Rx, or recommend that the child be seen by the school Nursing Team.

Clinics are available to children in all year groups, both in the Junior and Senior School. However, it is also advised that children aged 8 and under be seen by specialist paediatric neurologist.

4. Notifying and recording

If a pupil has sustained a concussion, the Nursing Team will notify relevant staff via email/ Accident Form and/or Evolve [and add an icon to ISAMS which will show on the class register. Further detail on communication of information can be found in Appendix 4 of the PGS Head Injury Management Policy & Procedure.

All concussions and are recorded on the **PGS Head Injury (Concussion) Tracker (see para 8 below for link)**; this can be consulted by any member of PGS staff to see the latest information regarding a pupil's progress and recovery (once they have commenced the Graduated Return to Activity & Sport (GRAS) programme).

5. The Graduated Return to Activity and Sport (GRAS) programme

The stages of the Graduated Return to Activity and Sport (GRAS) programme are summarised below (see para 8 below for link):

Stage 1	24-48 hours of rest. The initial period of rest is 24 hours, which should be extended to 48 hours if symptoms are more than mildly increased during gentle activity, such as walking. Pupils should not return to school during stage 1 unless they are coming specifically to attend a Head Injury clinic.
Stage 2	is a return to daily activity and light physical activities . During Stage 2 pupils can be back in school.
Stage 3	is a return to light exercise .
Stage 4	permits a return to more strenuous exercise , however there must be <u>no contact</u> sport at this stage.
Stage 5	is a return to contact sport training , but <u>not fixtures</u> .
Stage 6	is a return to normal levels of all daily activity, including sports fixtures

6. Managing pupils on the GRAS programme

If you are responsible for overseeing sport, or physical activity, it is important you know which pupils are on the Head Injury/Concussion tracker (see para 8 below for link). You must not allow a pupil to participate in a level of activity that goes beyond what is recommended for their stage of recovery; nor must a pupil and/or parent request this or present themselves for inclusion in such an activity.

If a pupil or parent insists on participation at a level of activity beyond what is recommended, **do not give permission for this to occur**. Any complaints about can be forwarded to the Director of Sport and / or The Assistant Head (Co-curriculum).

7. Academic considerations for pupils with concussion.

Academic staff should be aware of the effect that a concussion may have on pupils in the classroom. Pupils with concussion could exhibit symptoms such as disorientation, headaches, dizziness, nausea, slurred speech and difficulties with memories, alongside other symptoms that are listed **on this document**. In a few such cases, first aid or other medical intervention might be required.

The symptoms of a concussion may affect a pupil's ability to participate in class at a level that would normally be expected. Sometimes, pupils with a concussion may ask to go to the toilet mid-lesson because they are experiencing such symptoms (in such a case, they should at the minimum be accompanied to the toilet block, for example by a friend).

Whilst recovering from a concussion, pupils may struggle to look at screens or a classroom whiteboard. If you are aware of a child recovering from a concussion, some consideration of this fact mor others similar might be required.

8. Links to Key Head Injury documents, including guidance notes
(copy of Appendix 1 of PGS Head Injury Policy & Procedure)

Document name & Link	Additional Information
<u>Head Injury Safety Document</u> [sometimes also referred to as Safety netting document]	This includes the following sections: ○ Introduction ○ Concussion signs & symptoms ○ When to seek emergency help ○ Head Injury Clinic This is the document which is issued to all pupils and parents in the event of a head injury. It advises parents on some signs and symptoms to watch out for and what to do in the event that they occur. It also has information on how to book into our concussion clinic. (It is also available at The Health & Wellbeing Centre, at Hilsea and on the PGS school website).
<u>[The PGS Head Injury (Concussion) Tracker]</u> (live link for staff only; or see PGS Online (eg Health & Wellbeing Centre webpage)	This enables staff at PGS to review which stage a pupil is at with respect to their progression through the Head Injury Management (GRAS) programme. This helps staff members adapt activities/learning/games/gym/other sessions where appropriate. There is a tab at the bottom of the tracker which shows what the pupil can / cannot do at each stage. Staff can review these tabs so they can know exactly what the pupil is able to do at any given point of their progression through the tracker. For awareness, the [School] will usually also receive a direct email when South Coast Rx complete a concussion review with a pupil so that the School is updated on their progress, though the primary responsibility is for parents/pupil to inform the School/key staff members of relevant information.
<u>CRT6 Concussion Recognition Tool</u>	This document assists in the identification of concussion signs and symptoms and will guide staff on when to escalate for emergency medical review (copies should be kept in PGS/South Coast medical bags).
<u>PGS Head Injury (Concussion) Management Pathway (11) - The process at a glance</u>	Infographic showing the PGS Head Injury Management process
<u>GRAS Programme</u>	Details of the Graduated Return to Activity & Sport programme, including the six stages (see also paragraphs 1 and 5 of the PGS Head Injury Management Policy & Procedure).
<u>UK Concussion Guidelines ('If in doubt ...')</u>	'If in doubt, sit them out' – national concussion guidelines (see also paragraph 1 and Appendix 2 of the PGS Head Injury Management Policy & Procedure).

<u>South Coast Rx Physiotherapy Head Injury Clinic booking page</u>	Select “PGS Head Injury Clinic Appointment.” Link live during high demand periods; at other times contact the Assistant Head (Co-curriculum) or the PGS Nursing Team (see Appendix 4.1 of the PGS Head Injury Management Policy & Procedure for contact details) or South Coast Rx Ltd.
<u>The South Coast Rx Head Injury initial email (exemplar - subject to ongoing update)</u>	This includes text and also links from South Coast Rx for parents to the documents listed: - o Head Injury Safety Document (also referred to as Safety Netting document) - o CRT-6 - Concussion Recognition Tool - o PGS Head Injury (Concussion) Management Pathway (11) - The process at a glance.pdf - o UK Concussion Guidelines ('If in doubt')
<u>The PGS Head Injury Management Policy & Procedure</u> (see next column)	Available from: https://www.pgs.org.uk/about-us/policies-reports/policies

9. Addendum

Note: The terms **GRTP** and **GRAS** are interchangeable.

GRTP = “Graduated Return to Play”

GRAS = “Graduated Return to Activity and Sport”

GRAS is the new name for GRTP.

Appendix 6

Pre-school and Infant Head Impact letter home

Child's Name..... Form.....

Dear Parent

This letter is to inform you that your child had an impact to the head during the course of the school day. The time, nature and area of the head injured are detailed below. If relevant, first aid treatment was administered, and staff have continued to monitor the situation whilst your child has been in school without seeing signs or symptoms of concussion.

The receipt of this letter means that the medical staff on site have not assessed your child.

Date/Time of incident:

Nature of incident:

Area of head impacted:

Name of staff member who dealt with the incident:

Please see attached our standard *Head Injury Safety Document*. You should follow the advice carefully in the event that your child develops any of the signs or symptoms described; this includes seeking medical advice from a paediatric healthcare professional as soon as possible if any sign(s) or symptom(s) become apparent.

Please do not hesitate to contact me if you have any questions or need further clarification. Your child's wellbeing is always our priority.

Yours faithfully

Mr Jason Ashcroft
Deputy Head (Pastoral & Operations) (Junior School)

Link to full Head Injury Safety Information leaflet : [Head Injury Safety Document](#)