

Woodbridge School Head and Neck Injury

Policy

Woodbridge School has established this Policy to provide education about head and neck injuries for the school staff and personnel and to outline procedures for staff to follow in managing head and neck injuries.

Woodbridge School seeks to provide a safe return to all activities for all students after injury, particularly after concussion. In order to effectively and consistently manage these injuries, procedures have been developed to aid in insuring that students with head injuries are identified, treated and referred appropriately, receive appropriate follow-up medical care during the school day and are fully recovered prior to returning to school activity.

Head Injury Causes

Falls are a common cause of minor head injury in children and adolescents, and other causes can be motor vehicle crashes, pedestrian and bicycle accidents, sports related trauma and child abuse.

Low force injuries (e.g. short falls, hit by low speed or soft object such as a toy or ball) have a low risk of brain injury.

In comparison, incidents that have a higher risk of brain injury include:

- High speed motor vehicle accidents
- Falls from great heights
- Being hit by a high speed, heavy or sharp object eg cricket bat / ball, golf club, rugby tackle.
- Inflicted injury, such as vigorous shaking.

Procedure

A pupil who sustains a head injury whether it is thought to be a minor injury must be escorted to Surgery immediately, if able. If no staff are in attendance, witnessing pupils must take on the responsibility themselves to escort the injured pupil to Surgery, or seek immediate adult assistance. If the injured pupil is not able to be escorted, then the medical staff should be informed to assess the pupil at the site of the accident. Staff can take the decision to telephone for an ambulance if they realise the injury is serious, prior to the school medical staff arriving.

If the pupil is symptomatic of a head injury, or has lost consciousness at all, the pupil should be sent to Accident and Emergency by ambulance with an adult escort. The parents or guardian of the pupil should be informed as soon as possible of the injury and a subsequent need for a visit to A&E.

An accident form should be completed for school records and also a member of staff (usually medical) needs to report the accident as an injury requiring hospitalisation according to RIDDOR regulations.

Pupils who have sustained a diagnosed head injury will not be able to play any contact sport at school for 3 weeks from the date of the accident, but they may be able to take part in some light physical exercise.

Recognition of Concussion

Common signs and symptoms of head injury resulting in concussion.

Signs (observed by others)

- Athlete appears dazed or stunned.
- Confusion.
- Unsure about game, score, opponent.
- Moves clumsily (altered coordination).
- Balance problems.
- Personality change.
- Responds slowly to questions.
- Forgets events prior to injury.
- Forgets events after the injury.
- Loss of consciousness (for any duration).

Symptoms (reported by athlete)

- Headache.
- Fatigue.
- Nausea or vomiting.
- Double vision, blurry vision.
- Sensitive to light or noise.
- Feels sluggish.
- Feels “foggy”.
- Problems concentrating.
- Problems remembering.

First Aid for Neck Injuries

There is a risk of neck injury at Woodbridge School mainly through sports and activities in The Valley, if the injury is not life threatening a student or staff member should in the first instance contact the medical staff (x 1223) and ask the casualty to remain still until assistance arrives. If it is obvious the injury is serious, then follow the guidelines as below -

Neck pain is an injury common to athletes and is not regularly a serious cause for concern, with symptoms disappearing over the course of a few days with correct rest and treatment.

First aid for neck injuries can significantly prevent an individual from suffering further damage.

Causes

Any severe blow, fall or other accident may result in injury to the neck.

Symptoms

Unconsciousness, breathing difficulty, pain, swelling, loss of sensation, headache, loss of sensation or paralysis.

Emergency Treatment

- Dial 999/112 immediately and then contact medical staff.
- DO NOT move casualty unless absolutely necessary to save life.
- DO NOT bend or twist victim's neck or body. Careful handling is extremely important
- Check casualty's breathing. If breathing stops, open airway.
- Maintain position in which casualty was found, even if neck or back is bent, and immobilize head, neck, shoulders and torso.
- Roll up towels, blankets, or clothing and place around head, neck, shoulders and torso.

Author(s):	CLT, MRS
Date:	April 2011
Review Frequency:	Annual
Review Date:	April 2012
References:	RFU, Head Injury in Children and Adolescents; Sara Schutzman MD