

Throston Primary School

Bumped Head Protocol

February 2026



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.

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 and the child appears well, then the incident will be treated as a “bump” rather than a “head injury”.

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.

Action to be taken:

- Child to be assessed by a First Aider
- Apply ice pack
- Complete first aid slip with details of incident
- Bumped Head wristband given
- Report to teacher/adult in class
- Parent MUST be spoken to at the end of the day, first aid slip given to them. If child walk home, message or telephone a parent.

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 ice pack
- Complete first aid slip with details of incident

- Bumped Head wristband given
- Observation
- No PE/physical activities
- Report to Teacher/adult in class
- Parent informed by phone call straight away. If parents wish to come and assess for themselves that option is to be given.
- Parent MUST be spoken to at the end of the day, first aid slip given to them. If child walk home, message or telephone a parent.

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 problem
- Loss of power in arms/legs/feet
- Pins and needles
- Amnesia
- Leakage of blood or clear fluid from nose or ears or blood
- Bruising around eyes/behind ears

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

Child to be assessed by a
First Aider



Bumped head Protocol

Are any of the following present?

- Unconsciousness briefly or longer
- Difficulty in staying awake
- Seizure
- Slurred speech
- Visual problems
- Difficulty in understanding what people are saying
- Balance problem
- Loss of power in arms/legs/feet

Yes

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

Call 999 and ask for an
ambulance

Contact parent

Inform Headteacher

No

Does the child have
any dizziness,
headache, nausea or
vomiting?

Yes

Apply ice pack

Complete first aid
slip

Give Bumped
Head wristband

Observation and no
PE /physical activities

Report to
teacher/adult in class

Parent to be telephoned
and given option to come
and assess child.

Parent to be spoken to at
end of day and given slip. If
walking home, dojo to
parent with update

No

Is there a mark of
any kind, bruise,
swelling,
abrasion?

Yes

Apply ice pack

Complete first aid
slip

Give Bumped Head
wristband

Report to
teacher/adult in class

Parent to be spoken to at end
of day and given slip. If
walking home, dojo to parent