

Subject: CONCUSSION

**Circular Number:
2024/15**

Date of Issue: 30/08/2024

Audience:

- Principals in Grant-aided Schools;
- Boards of Governors of Grant-aided Schools;
- Education Authority;
- Council for Catholic Maintained Schools;
- Comhairle na Gaelscolaíochta;
- Northern Ireland Council for Integrated Education;
- Governing Bodies Association NI;
- Controlled Schools Support Council;
- Teachers' Unions;
- General Teaching Council for Northern Ireland; and
- EOTAS Centres.

Summary of Contents:

This Circular provides supplemental advice and guidance on dealing with cases of suspected concussion. This Circular must be read in conjunction with [If In Doubt, Sit Them Out – UK Concussion Guidelines for Non-Elite \(Grassroots\) Sport](#)

Enquiries:

Any enquiries about the contents of this Circular should be addressed to:

Governors' Awareness:
Essential

Status of Contents:
Advice

Related Documents:
[If In Doubt, Sit Them Out – UK Concussion Guidelines for Non-Elite \(Grassroots\) Sport](#)

Superseded Documents:
Circular 2015/07
Circular 2014/12

Expiry Date: Not applicable

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INTRODUCTION

1. This Circular provides supplemental guidance on how to manage a situation where someone is suspected of having a concussion. This Circular must be read in conjunction with 'If In Doubt, Sit Them Out – UK Concussion Guidelines for Non-Elite (Grassroots) Sport'.
2. This Circular has two purposes: -
 - to inform schools about the published guidance '[If In Doubt, Sit Them Out – UK Concussion Guidelines for Non-Elite \(Grassroots\) Sport](#)'; and
 - to provide supplementary guidance that is relevant to Northern Ireland.

BACKGROUND

3. The Concussion 'Recognise and Remove' Campaign was initiated in 2014 to raise awareness about concussion, and particularly Second Impact Syndrome (SIS). SIS was determined by the Coroner as the reason for the death of a pupil, Benjamin Robinson, following a head injury sustained whilst playing a rugby match for his school in 2011.
4. The 'Recognise and Remove' Campaign produced information leaflets, posters and a pocket [Concussion Recognition Tool](#) (CRT). These were distributed to all school children in Year 6 and upwards at that time and to other organisations such as sports governing bodies, sports clubs, libraries and leisure centres.

5. The Board of Governors (BoGs) of each school has a duty to safeguard and promote the welfare of pupils (Article 17 of the Education and Libraries (Northern Ireland) Order 2003). It is important that all school staff are aware of the signs of concussion and the associated risks. It is also important that the staff from external organisations, brought into a school to deliver sporting activities, are also aware.
6. While concussion awareness will be embedded as part of the normal operation of schools, it is vital that the messages about concussion remain a priority for schools and that staff are made aware of the guidance and resources that are available.

'IF IN DOUBT, SIT THEM OUT'

7. The UK Government and the Sport and Recreation Alliance published the first UK-wide Concussion Guidelines for Grassroots Sport on 28 April 2023 (supported by The Department for Communities and Sport NI) to help players, coaches, parents, schools, National Governing Bodies and sports administrators to identify, manage and prevent concussion.
8. The guidelines, 'If In Doubt, Sit Them Out', were developed by an expert panel of domestic and international clinicians and academics in neurology and sports medicine, sets out steps to improve understanding and awareness of the prevention and treatment of concussion in grassroots sport where trained medical professionals are less likely to be routinely present. It is targeted at people of all ages.

9. It is important to note that the guidance contains general medical information, but this does not constitute medical advice and should not be relied on as such. Nor is the guidance a substitute for medical advice from a qualified medical practitioner or healthcare provider. You must not rely on this guidance as an alternative to seeking medical advice from a qualified medical practitioner or healthcare provider. In particular, if you have any questions or concerns about a particular medical matter, you should immediately consult a qualified medical practitioner or healthcare provider. If you think you may be suffering from a medical condition you should seek immediate medical attention. You should never delay seeking medical advice, disregard medical advice or discontinue medical treatment because of information contained in this guidance.

ROLES AND RESPONSIBILITIES

10. The 'If In Doubt, Sit Them Out' guidelines also outline the different roles and responsibilities that teachers, coaches, volunteers and parents have following a suspected concussion.

Teachers, coaches, volunteers

- Safely remove the individual from the field of play and ensure that they do not return to play in that game even if they say that their symptoms have resolved.
- Observe the player or assign a responsible adult to monitor the individual once the player is removed.
- If player is under 18 years old, contact parent/guardian to inform them of the possible concussion.
- Arrange for the player to get home safely.

- Advise that a responsible adult should supervise the player over the next 24-48 hours.
- Ensure any relevant injury report form is completed and stored by the school/club/organisation.
- Follow a graduated return (as outlined within the 'If In Doubt, Sit Them Out' guidelines, pages 17-19) to activity (education/work) and sport programme with an emphasis on initial relative rest and returning to education/work before returning to training for sport.
- Advise parents/carers of their role and responsibilities in relation to any concussion incident including advising the school and other relevant organisations about any concussion-related injuries sustained and any activity restrictions recommended by a medical professional. A sample letter is attached at Annex C, which schools may wish to issue.

Parents/carers

- Obtain full details of the incident.
- Do not leave your child alone for the first 24 hours.
- Have your child assessed by an 'appropriate Healthcare Professional' (see paragraph 12 below) within 24 hours.
- Monitor your child for worsening signs and symptoms of concussion for at least 24-48 hours.
- Encourage initial rest/sleep as needed and limit smartphone/computer and screen use for the first 24-48 hours.
- Inform school/work/other sports clubs of the suspected concussion.

- Support your child to follow a graduated return (as outlined within the 'If In Doubt, Sit Them Out' guidelines, pages 17-19) to activity (education/work) and sport programme.

SUPPLEMENTAL GUIDANCE FOR NORTHERN IRELAND SCHOOLS

11. Following review of the UK concussion guidelines, the Department of Education, in conjunction with the Public Health Agency and Sport NI, has provided the following supplemental guidance to address potential issues in managing response to suspected concussion. This guidance **must** be used in conjunction with the 'If In Doubt, Sit Them Out' guidelines;
12. The guidelines recommend that NHS 111 is called within 24 hours of a potential concussion. This number is not available in Northern Ireland and there is currently no alternative number in operation. Therefore, 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 assessed by an appropriate Healthcare Professional, which should be sought within 24 hours. An example of an appropriate Healthcare professional may include your GP or local Urgent Care Centre.
13. If there are concerns about other significant injury or presence of 'red flags' (as stated on page 8 of the 'If In Doubt, Sit them Out' Guidelines) then the pupil

should receive urgent medical assessment onsite or in a hospital Accident and Emergency (A&E) Department using emergency ambulance transfer if necessary.

14. The tables in Annex A provide information and guidance on graduated return to learning and Annex B for return to sport. It is recommended that a short period of relative rest (first 24-48 hours) followed by a gradual return to normal life (education, work, low level exercise), then subsequently to sport is safe and effective. Progression through the stages below is dependent upon the extent of the injury and the activity not more than mildly exacerbating symptoms. Please refer to [If In Doubt, Sit Them Out – UK Concussion Guidelines for Non-Elite \(Grassroots\) Sport](#) for further information.

ANNEX A - GRADUATED RETURN TO LEARNING PROGRAMME

Stage	Focus	Description of activity	Comments
Stage 1	<i>Relative rest period (24-48 hours)</i>	<i>Take it easy for the first 24-48 hours after a suspected concussion. It is best to minimise any activity to 10 to 15-minute slots. You may walk, read and do some easy daily activities provided that your concussion symptoms are no more than mildly increased. Phone or computer screen time should be kept to the absolute minimum to help recovery.</i>	
Stage 2	<i>Return to normal daily activities outside of school or work.</i>	<i>Increase mental activities through easy reading, limited television, games, and limited phone and computer use.</i> <ul style="list-style-type: none"> • <i>Gradually introduce school and work activities at home.</i> • <i>Advancing the volume of mental activities can occur as long as they do not increase symptoms more than mildly.</i> 	<i>There may be some mild symptoms with activity, which is OK. If they become more than mildly exacerbated by the mental or physical activity in Stage 2, rest briefly until they subside.</i>
Stage 3	<i>Increasing tolerance for thinking activities</i>	<i>•Once normal level of daily activities can be tolerated then explore adding in some home-based school or work-related activity, such as homework, longer periods of reading or paperwork in 20 to 30-minute blocks with a brief rest after each block.</i>	

		<ul style="list-style-type: none"> • <i>Discuss with school or employer about returning part-time, time for rest or breaks, or doing limited hours each week from home</i> 	
<i>Stage 4</i>	<i>Return to study and work</i>	<i>May need to consider a part-time return to school or reduced activities in the workplace (e.g. half-days, breaks, avoiding hard physical work, avoiding complicated study).</i>	
<i>Stage 5</i>	<i>Return to full academic or work-related activity</i>	<i>Return to full activity and catch up on any missed work.</i>	

ANNEX B - GRADUATED RETURN TO SPORT PROGRAMME

Stage	Focus	Description of activity	Comments
Stage 1	Relative rest period (24-48 hours)	Take it easy for the first 24-48 hours after a suspected concussion. It is best to minimise any activity to 10 to 15-minute slots. You may walk, read and do some easy daily activities provided that your concussion symptoms are no more than mildly increased. Phone or computer screen time should be kept to the absolute minimum to help recovery.	
Stage 2	Physical Activity (e.g. week 1)	<ul style="list-style-type: none"> • After the initial 24–48 hours of relative rest, gradually increase light physical activity. • Increase daily activities like moving around the house, simple chores and short walks. Briefly rest if these activities more than mildly increase symptoms. 	There may be some mild symptoms with activity, which is OK. If they become more than mildly exacerbated by the mental or physical activity in Stage 2, rest briefly until they subside.
Stage 3	Light aerobic exercise (e.g. weeks 1 or 2)	<ul style="list-style-type: none"> • Walking or stationary cycling for 10–15 minutes. Start at an intensity where able to easily speak in short sentences. The duration and the intensity of the exercise can gradually be increased according to tolerance. • If symptoms more than mildly increase, or new symptoms appear, stop and briefly rest. Resume at a reduced level of 	Progressing too quickly through stages 3 - 5 whilst symptoms are significantly worsened by exercise may slow recovery. Although headaches are the most common symptom following concussion and may persist for several months,

		<p><i>exercise intensity until able to tolerate it without more than mild symptom exacerbation.</i></p> <ul style="list-style-type: none"> <i>• Brisk walks and low intensity, body weight resistance training are fine but no high intensity exercise or added weight resistance training.</i> 	<p><i>exercise should be limited to that which does not more than mildly exacerbate them. Symptom exacerbation with physical activity and exercise is generally safe, brief and is self-limiting typically lasting from several minutes to a few hours.</i></p>
<p><i>Stage 4</i></p>	<p><i>Non-contact training (e.g. during week 2)</i></p>	<ul style="list-style-type: none"> <i>• Start training activities in chosen sport once not experiencing symptoms at rest from the recent concussion. It is important to avoid any training activities involving head impacts or where there may be a risk of head injury. Now increase the intensity of exercise and resistance training.</i> 	<p><i>Progressing too quickly through stages 3 - 5 whilst symptoms are significantly worsened by exercise may slow recovery. Although headaches are the most common symptom following concussion and may persist for several months, exercise should be limited to that which does not more than mildly exacerbate them. Symptom exacerbation with physical activity and exercise is generally safe, brief and is self-limiting typically lasting from several minutes to a few hours.</i></p>

<p><i>Stage 5</i></p>	<p><i>Unrestricted training activities (not before week 3)</i></p>	<ul style="list-style-type: none"> <i>• When free of symptoms at rest from the recent concussion for 14 days can consider commencing training activities involving head impacts or where there may be a risk of head injury.</i> 	<p><i>Individuals should only return to training activities involving head impacts or where there may be a risk of head injury when they have not experienced symptoms at rest from their recent concussion for 14 days.</i></p> <p><i>Recurrence of concussion symptoms following head impact in training should trigger removal of the player from the activity.</i></p>
<p><i>Stage 6</i></p>	<p><i>Return to competition</i></p>	<p><i>This stage should not be reached before day 21* (at the earliest) and only if no symptoms at rest have been experienced from the recent concussion in the preceding 14 days and now symptom-free during pre-competition training.</i></p> <p><i>* The day of the concussion is Day 0 (see example below).</i></p>	<p><i>Resolution of symptoms is only one factor influencing the time before a safe return to competition with a predictable risk of head injury.</i></p> <p><i>Approximately two-thirds of individuals will be able to return to full sport by 28 days but children, adolescents and young adults may take longer.</i></p>

			<i>Disabled people will need specific tailored advice which is outside the remit of this guidance.</i>
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Example:

- *Concussion on Saturday 1st October (Day 0)*
- *All concussion-related symptoms resolved by Wednesday 5th October (Day 4)*
- *No less than 14 days is needed before the individual returns to sport-specific training involving head impacts or where there may be a risk of head injury (Stage 5) on Wednesday 19th October (Day 18)*
- *Continue to be guided by the recommendations above and, if symptoms do not return, the individual may consider returning to competitive sport with risk of head impact on Wednesday 26th October (Day 25)*

Dear parent/carer

CONCUSSION AWARENESS – WHO NEEDS TO KNOW?

The Department of Education has issued revised guidance on concussion; [Concussion guidance | Department of Education \(education-ni.gov.uk\)](https://www.education-ni.gov.uk).

Concussion is a brain injury which is usually caused by hitting the head or a fall. It can happen at any time, anywhere; for example during sports, in the school playground, or at home.

Concussion must always be taken seriously. It is vitally important that any child/young person suspected of having concussion should immediately be stopped from continuing whatever activity they are doing and be assessed by an appropriate healthcare professional within 24 hours.

A second injury when a child has concussion can be extremely serious and may even be fatal. It is vitally important therefore that medical clearance is sought before your child returns to school/play. Children should not resume physical activities such as physical education, sports or games until permitted to do so by a medical professional.

Concussion may also affect your child's ability to learn at school for a period of time. As symptoms vary from child to child, a graduated return to school programme may be needed. If your child suffers a concussion in school or outside school, it is vitally important that you keep all people/organisations with responsibility for caring for your child informed so that they are aware of the potential dangers and any restrictions that may apply to the activities your child is permitted to do.

The 'If In Doubt, Sit Them Out' guidelines produced by The UK Government and the Sport and Recreation Alliance (supported by The Department for Communities and Sport Northern Ireland) is available on the Department of Education's website www.education-ni.gov.uk and provides guidance on the signs to look out for.

Keeping everyone informed about concussion is in your child's best interests. Parents/carers have a key role in making sure that information is passed on to their child's teacher, sports coach, youth leader or other care provider.

Yours faithfully

SCHOOL PRINCIPAL