

Union Karate Do Head Injury & Concussion Management Policy

This policy outlines how Union Karate Do will identify, manage, and respond to suspected head injuries and concussions, in accordance with BMABA's national guidance for martial arts. The safety and wellbeing of all participants—particularly children and young people—is our highest priority.

1. Purpose

The purpose of this policy is to ensure that all head injuries and potential concussions are treated as serious safeguarding and medical incidents, with a clear, consistent process in place for assessment, response, recovery, and return-to-play.

2. BMABA National Guidance

This policy follows the [BMABA National Concussion & Head Injury Policy](#), which reflects best practice in martial arts and aligns with UK medical guidance including Sport England and NICE recommendations.

3. What Is a Concussion?

Concussion is a type of brain injury caused by a bump, blow, or jolt to the head or body that results in rapid movement of the brain inside the skull. It can occur even without a loss of consciousness. Symptoms may appear immediately or develop over time.

4. Recognition of Head Injury

- All head injuries must be treated with caution.
- Common signs include confusion, headache, dizziness, nausea, blurred vision, and unsteadiness.
- Loss of consciousness (even briefly) requires immediate medical attention.

5. Immediate Actions

- If a head injury occurs during training or competition, the participant must be removed immediately and not allowed to return that day.
- 'If in doubt, sit them out' must be strictly applied—no exceptions.

- First aiders must assess the individual and monitor for worsening symptoms.
- Parents/guardians must be informed as soon as possible and advised to seek medical evaluation.

6. Reporting Requirements

- All head injuries must be recorded using the club's incident report form.
- Details must be escalated to the Designated Safeguarding Lead (DSL) and BMABA notified in serious cases.

7. Return-To-Play Protocol

No participant may return to contact activity until:

- They have completed a minimum rest period of 21 days (for under 18s) or 14 days (for adults).
- They have followed a graduated return-to-activity plan (light exercise, sport-specific training, full contact).
- They have received medical clearance if symptoms were prolonged or severe.

8. Special Considerations

- Children and young people are at greater risk and must be treated with additional caution.
- Instructors must consider cumulative exposure—repeated minor knocks should not be ignored.
- All staff and instructors should undertake BMABA's CHIMA training (Concussion & Head Injury Management Awareness).

9. Safeguarding Integration

- Head injuries must be treated as safeguarding concerns, particularly where there is delay in reporting, reluctance to rest, or pressure to return early.
- All incidents will be reviewed to ensure safe practices and equipment were in use.

10. Policy Oversight

This policy will be reviewed annually or after any significant incident. Union Karate Do adopts BMABA's guidance as its national standard. Concerns or queries can be raised via the club's DSL or directly to BMABA's Safeguarding Team.

LAST REVIEWED – 23rd July 2025