

Strike Lane Primary School



Sickness & Illness Policy

Policy Review	Date	Personnel
Created	May 18	SENDCO
Reviewed	May 20	SENDCO
	Sept 24	SENDCO

Sickness & Illness Policy

Introduction

This policy is about children's attendance at school when they are unwell. As a general principle, children should not be in school when they are ill, both for their own welfare and also to be fair to other children and protect them from becoming ill. In specific situations the appropriateness of attending school or not will need to be determined on a case by case basis. Ultimately, the school has the right to refuse admission to a child who is unwell: this decision will be taken by the Senior Leadership Team.

Policy:

- Strike Lane Primary School aims to provide a safe, secure and healthy environment for all children attending school, and to avoid the spread of illness. We will always follow the advice given to us by our health colleagues, and children with specific contagious conditions, will have to stay away from school to protect the other children, for the length of time as indicated in the table below.
- If your child is ill and requires an absence from school then parents must telephone school and either leave a message or speak to a member of staff in the office before 9am. Absences that fail to be reported or occur after 9.10am may be reported as an unauthorised absence.
- Parents must inform school of absences each day of illness (before 9am), unless the illness is long term.
- If a child becomes ill during the day, their parent/carer(s) will be contacted and asked to collect their child as soon as possible. During this time the child will be cared for in a quiet, calm area with a member of staff.
- If a contagious infection is identified in the school, all parents will be informed to enable them to spot the early signs of this illness in their own child. All equipment and resources that may have come into contact with a contagious child will be cleaned and sterilised thoroughly to reduce the spread of infection.
- It is important that children are not subjected to the rigours of the school day, (which requires socialising with other children and being part of a group setting), when they have first become ill and require a course of antibiotics. Our policy, therefore, is that children on antibiotics for the first 24 hours of the course should not attend school. Following this period of time, the school's Medicine Policy provides advice and guidance regarding the administering of medication in school should children require it.
- Strike Lane's Head Lice Policy is readily available and all parents are requested to check their children's hair regularly.
 - Handwashing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting, and respiratory disease. The recommended method is the use of liquid soap, warm water and paper towels. Children are encouraged to always wash hands after using the toilet, before eating or handling food, and after handling animals. Cover all cuts and abrasions with waterproof dressings.
 - Coughing and sneezing easily spread infections. Children and adults should be encouraged to cover their mouth and nose with a tissue. Wash hands after using or disposing of tissues.
 - Spitting should be discouraged.

Transporting children to hospital:

- If a child has a serious accident or becomes severely unwell at school an ambulance will be called.
- Whilst waiting for the ambulance, the parent/carer(s) will be contacted and arrangements will be made to meet them at the hospital (or at school if this is more appropriate).
- A senior member of staff will accompany the child taking relevant medical information, medication, and anything else deemed necessary, until parents are present. • Children who witness

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an accident may well be affected by it and will need lots of cuddles and reassurance. Staff not involved with the sick or injured child will move children to areas away from the emergency, reassure children and keep the routines as normal as possible.

Infection or complaint	Recommended period to be kept away from school	Comments
Chickenpox	At least five days from onset of rash and until all blisters have crusted over	Pregnant staff contacts should consult with their GP/midwife
Cold sores	None	Avoid kissing and contact with the sores.
Conjunctivitis	None	If an outbreak or cluster occurs contact your local UKHSA protection team
Respiratory infections including coronavirus (COVID 19)	Individuals should not attend if they have a high temperature and are unwell. Individuals who have a positive test result for COVID-19 should not attend the setting for 3 days after the test	Individuals with mild symptoms such as a runny nose, and headache who are otherwise well can continue to attend their setting
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting.	If it has been an isolated episode or vomiting is due to a build-up of phlegm for example, then the individual may return with mutual agreement from home and school.
Diphtheria	Exclusion is essential	Preventable by vaccination
Flu (influenza)	Until recovered	
Glandular fever	None	
German Measles (rubella)	5 days from onset of rash	Preventable by immunisation (MMR x2 doses).
Hand, foot and mouth	None	Exclusion maybe considered in some circumstances.
Head Lice	None	
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles	4 days from onset of rash	Preventable by immunisation (MMR x2)
Meningococcal meningitis/septicaemia	Until recovered	Meningitis C is preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case.

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Meningitis due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case.
Meningitis viral	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case
Mumps	Exclude child for 5 days after onset of swelling	Preventable by vaccination (MMR x2 doses)
Ringworm	Exclusion not usually required	Treatment is required
Scabies	Child can return 24 hours after first dose of chosen treatment UNLESS they can avoid close contact with others.	Household and close contacts require treatment at the same time.
Scarlet fever	Child can return 24 hours after starting appropriate antibiotic treatment	
Slapped cheek	None (once rash has developed)	Children may feel unwell prior to the rash including temperature and 'flu like' symptoms.
Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune i.e. have not had chickenpox. It is spread by very close contact and touch.
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.
Cryptosporidiosis	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled
Whooping cough (pertussis)	5 days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment.	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks.
Threadworms	None	Treatment is recommended for the child and household contacts.
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic

Additional information for parents can be found here:-

<https://www.nhs.uk/live-well/is-my-child-too-ill-for-school/>