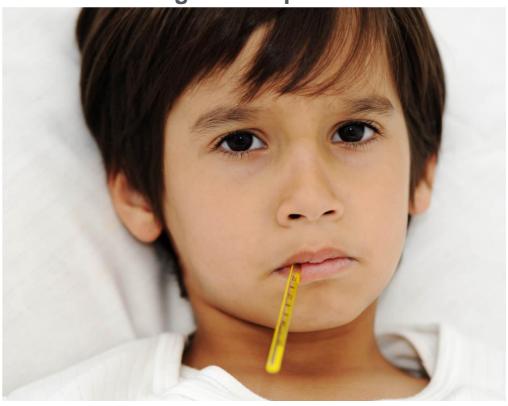
Minor Illness and School Attendance

A guide for parents







Children who attend school regularly are more likely to achieve well at school and reach their full potential.

Missing school disrupts school routines and learning. The most common reason given for children to miss school is illness, however most of the time childhood ailments can be managed in school.

Whilst the absence rate has improved, we have found a steady increase in the number of children missing school due to assumed illness. We need the support of all parents to tackle this trend.

To help avoid unnecessary school absences, we have produced this leaflet as a general guide to help you decide whether your child is well enough to attend school.

Is my child well enough to attend school?

Many children experience common ailments from time to time. Most of these do not need a prescription, are rarely serious and do not require time away from school. Often treating your child's ailment or illness yourself, or with advice and medicines from your pharmacist, can be the quickest and easiest way to deal with it.

Schools may not agree to authorise your child's absence for minor illnesses, and you have a duty to ensure your child is not absent where this can be avoided.

Raised temperature (fever)

If your child looks or feels shivery, usually cold or hot, they may have a raised temperature. This may be due to a variety of reasons. If your child has a raised temperature (over 37.5C), they should not be in school. It is important to measure the temperature accurately with a thermometer.

However, your child should be able to return to school 24 hours after they feel and look better.

Colds and coughs

A child may attend school with slight cold and cough.

If your child has asthma, remember they may need their blue inhaler more often.

Occasionally coughs can be persistent and can last for weeks.

However, children with bad or long-lasting coughs need to see their GP. Once treated or when the cough is controlled or disappearing and the child is feeling better, they need to return to school.

Rashes

A rash could be the first sign of one of childhood's many illnesses, such as chicken pox or measles. The rash or 'spots' may cover the entire body or just appear in only one area.

Do not send a child to school with an unexplained rash or skin eruption until you have consulted your doctor.

Aches and pains

If your child has a persistent tooth or ear ache, they need to see a dentist or a doctor without delay. A child whose only complaint is slight headache does not usually need to be kept at home.

Tummy ache

If your child complains of 'non severe' tummy ache, headache or other symptoms persistently and not wanting to attend school, this may be linked to your child being unhappy at school e.g. bullying or finding school work difficult.

Speak to your child, the teacher or school nurse to discuss and find ways of dealing with it

Vomiting and diarrhoea

If a child is vomiting or has diarrhoea, keep them off school and ensure adequate fluid intake. Children can return to school 48 hours after the last episode of diarrhoea or vomiting.

Seek medical advice if your child does not improve as you expect.

Sore throat

If your child complains of a slight sore throat and has no other symptoms, they are fit to go to school. If the sore throat occurs with a raised temperature, they need to stay at home.

Lack of sleep

Establishing good habits is important. Ensure that your child goes to bed early as lack of sleep will affect his/her ability to function in the morning, leading to lateness.

Medical appointments

Where possible please arrange doctor, dentist and optician appointments outside of school hours. If this is not possible, your child should attend school for the remainder of the day.

Medication in school

If your child needs to take prescribed medication during the school day, please arrange this with the school staff or school nurse. They do not need to be kept at home. Each school will have a policy for management and administration of medicines.

The following table provides guidance on some common childhood illnesses:

Illness	Recommendations	
Chicken Pox	Children can return to school 5 days from onset of the rash.	
Conjunctivitis	No need to be off school.	
Diarrhoea and Vomiting	Children can return to school 48 hours from last episode of diarrhoea or vomiting. Exclude from swimming for 2 weeks.	
Flu (Influenza)	Children should return to school as soon as they have recovered.	
German Measles (Rubella)	Keep off school for 5 days from onset of rash.	
Glandular Fever	No need to be off school.	
Head Lice (Nits)	No need to be off school.	
Impetigo	Keep off school until lesions are crusted or healed.	
Measles	Keep off school for 5 days from onset of rash.	
Mumps	Keep off school for 5 days from onset of swollen glands.	
Ringworm	Keep off school only until treatment commenced.	
Scabies	Child can return after first treatment	
Threadworms	Children should attend school.	
Warts and Verrucae	Children should attend school.	

^{*}All information taken from Guidance on Infection Control in Schools and Other Child Care Settings (HPA 2006)

General information

Please remember that early morning aches often pass, so don't keep your child at home 'just in case' when they could be learning in class.

Tell school staff and they will phone you if your child continues to have symptoms or report that they are well.

If you are not sure, check the guidance in this leaflet. For further advice you could talk to a member of the school staff, your doctor or the school nurse.

Your contact details

Please make sure that the contact details the school has are current and up to date.

It is important that the school is able to make contact with you during the day if your child is not well enough to stay in school.

Health tips

To ensure that your child is happy, healthy and able to participate fully in school activities, your child must:

- Be registered with a GP.
- Have regular checks with a dentist.
- Have all childhood immunisations as recommended by the Department of Health.
- Enjoy a healthy diet and exercise.
- · Get enough sleep.
- Have regular checks for head lice every two weeks and using the wet combing method.
- · Be up to date with recommended vaccination schedule.

Parents/carers must:

- Work closely with lead professionals and others where children have special needs to ensure their needs are met.
- Try to attend medical appointments outside school hours if possible.
- Speak to school staff or school nurse if you have any concerns about your child.

Some common rules about illness absences

Minor illness

If your child is unwell on a school day, please always contact the school in the morning to let them know, with the specific reason as this needs to be logged in the class register.

Longer term absence

If there are concerns about your child's attendance the school will refer your child to the school nurse or/and may ask you to present a medical evidence to verify the reason for absence. A letter from parent is needed when:

- A child has any condition requiring hospital or surgical care.
- The child returns to school with a cast or stitches.
- The child needs restricted PE lessons or playtime activities for more than three consecutive days.

If your child has attended accident and emergency or has been admitted to hospital, please follow the recommendations of hospital staff on when your child is able to return to school.

When a parent or sibling is ill

A parent should make alternate arrangements to get the well child to school. Family illness is not considered a legitimate reason for school absence.

Developing good family or parent networks can be helpful as **schools will not authorise absence due to parental illness.** Please discuss any difficulties with the school as they may be able to offer support.

Contact details:

School Health Service

School nurses and their teams can be contacted via your child's school office.

Education Welfare Service

Telephone: 020 8489 3866

Other useful contact and information:

NHS Direct (Available 24 hours for advice)

Phone: 111 Web: www.nhsdirect.nhs.uk with thanks to:

Bridget Owen, NHS Haringey Clinical Commissioning Group (CCG) Mary Fox, Whittington Health