

*Following Jesus' footsteps and inspired by St. Robert Southwell we work hard,
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First Aid during the school day

You will be notified of any minor medical or first aid treatment administered to your child via an app message. Please remember to check the app regularly for such messages as they will be deleted after 7 days to adhere to online compliance. For Nursery and Reception children, you will be alerted to any minor incidents via Tapestry. Please be assured that for anything we deem more serious or that requires further attention, you will be contacted by telephone.

We have an additional procedure in place when children receive a bump to the head. Any child who suffers a bump to any part of their head, will be issued with a yellow wristband stating the date and time of the incident. The wristband will serve to alert all staff within Nursery, and the wider School, that a bump to the head has occurred. You will continue to receive a message via Tapestry or the app outlining the incident. Children will be told that the wristband must remain on their wrist until they get home to show their parents/carers, including if they attend an after-school club.

The wristband will notify you that one of our first aiders looked after and assessed your child, and at the time it was not thought necessary to refer them for further attention. However, in rare circumstances, symptoms can develop up to 24 hours after the injury. Please do not hesitate to contact your GP, NHS Direct helpline or A&E Department should any of the following occur: -

- severe headache (persistent)
- does not like bright light
- vomiting
- dizzy, double or blurred vision
- becomes disorientated or confused
- drowsiness



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Returning to School after illness

Most conditions can be classified as one of a few minor health conditions. Whether or not you send your child to school will depend how serious you judge the illness to be. This guidance can help you make that judgement.

Coughs and Colds – a child with a minor cold or cough may attend school. If the cold is accompanied by shivers, drowsiness or a fever please keep your child away from school until the symptoms have subsided and your child feels well enough to join in with a normal school day – usually 24 to 48 hours. If your child has a severe cough it is best to consult your GP, who can provide guidance as to whether the child should stay at home. A severe cough can be debilitating for the child, interrupt lessons and your child will not be at their best.

Raised temperature – if your child has a raised temperature, they should not attend school until the temperature has returned to normal (without being controlled by medication such as paracetamol or ibuprofen) and they are feeling better. A normal temperature in a child is about 36.4°C (97.5 °F) but this can vary slightly from child to child. A fever is usually considered to be a temperature of 38 °C (100.4 °F) or above.

Rash – rashes can be the first sign of many infections such as Chicken Pox and Measles. Children with these conditions should not attend school. If your child has a rash, check with your GP before sending them to school.

Headaches – a child with a minor headache does not normally need to be kept off school. If the headache is accompanied by a fever or rash, then keep your child off school and consult your GP.

Sore throat – a child with a sore throat alone does not have to be kept off school. If your child has a temperature and is ill with it, the child should stay at home. A sore throat is often a precursor to a cold or possibly Tonsillitis.

Vomiting & Diarrhoea

Non-viral - Children can be sick for many reasons – eating too many sweets and fizzy drinks, eating a food which disagrees with them; you know your child and whether any of the above have caused the sickness. Some children also have specific intolerances to certain foods; they may be sick or have diarrhoea but are then well once the offending food has left their system. If any of the above are the reason for a one-off episode of vomiting, then the child may return to school once they feel well – after 24 hours.

Viral - Vomiting can also be caused by a viral condition. It is this form of sickness that concerns us most as we do not want other children to be infected and viral conditions can spread through a school quickly. If you cannot identify a reason for your child's sickness and perhaps other members of the family have been ill, the sickness is accompanied by a fever, listlessness, a temperature and a general feeling of being unwell do not send your child to school for 48 hrs following the last incident of vomiting or diarrhoea. If you return your child to school before the 48 hrs and the cause of the vomiting is known to be viral, the school will ask you to take your child home for another day even if they appear well.

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To minimise the risk of transmission of infection to other children, and staff, the following guidelines are recommended. Such cases of illness must be reported to the school.

Disease/Illness	Minimum Exclusion Period
Chickenpox	At least 5 days from onset of rash and until all blisters have crusted over. Advisable to seek advice from GP or midwife if pregnant.
Conjunctivitis	Exclusion not usually required but treatment (eye drops/cream) must have commenced.
Respiratory infections including covid-19 & influenza	Children should not attend school if they have a high temperature and are unwell. Children with mild symptoms such as a runny nose and who are otherwise well can continue to attend. Children with a positive covid-19 test result should stay at home and avoid contact with other people for 3 days. They can return to school after this time once any temperature is gone and they feel well enough.
Diarrhoea & vomiting	Viral – 48 hours from last episode of diarrhoea or vomiting.
Glandular Fever	Exclusion not usually required.
Hand, foot & Mouth	Exclusion not usually required.
Head lice	No exclusion - please treat immediately and inform school.
Hepatitis A	Exclude until 7 days after onset of jaundice (or 7 days after symptom onset if no jaundice)
Impetigo	Once the spots have crusted over, healed or 48 hours after commencing antibiotics and the child feels well. Spots must be covered if possible.
Measles & German Measles (Rubella)	4 days from the onset of the rash and until the child feels well. Advisable to seek advice from a GP or midwife if pregnant. Preventable by vaccination.
Mumps	5 days after onset of swelling. Preventable by vaccination
Ringworm	Exclusion not usually required. Must be covered and treatment required.
Scabies	Child may return to school the day after treatment has commenced. Treatment also recommended for household and close contacts.
Scarlett Fever	Exclude until 24 hours after starting antibiotic treatment.
Shingles	Exclude only if rash is weeping and cannot be covered. Advisable to seek advice from GP or midwife if pregnant.
Slapped Cheek (Fifth Disease or Parvovirus B19)	None, once rash has developed. Advisable to seek advice from GP or midwife if pregnant.
Threadworms	None – treatment recommended for the child and household.
Warts & Verrucae	None – Verrucae must be covered in swimming pools, gymnasiums & changing rooms.
Whooping cough (pertussis)	48 hours after commencing antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment. Preventable by vaccination.



Medication in School

We only administer medication that is prescribed by a GP or a medical professional as part of a medical care plan or a short course of occasional prescribed medication such as antibiotics. However, parents are encouraged to schedule their child's medication so that they do not need a dose during the school day. For example, a child who is on antibiotics to be taken three times a day, can usually take all three doses outside school hours.

However, if your child does need medication during school hours, the following procedures must be followed.

- Only prescription medication should be brought in school - this includes antibiotics, asthma inhalers, auto injections or insulin.
- Medications must be brought into school in their original container - as dispensed by a pharmacist, labelled with your child's name. They must include instructions for administration, dosage and storage. Such items **MUST NOT** be put in your child's bookbag.
- Written consent must be provided for school to administer medication - please complete the form via the school app or alternatively a paper form is available to complete in the school foyer.

Non-prescription medicines such as Calpol, Ibuprofen, throat lozenges, vapour rubs, nasal sprays, antiseptic creams and over the counter hayfever medications must not be brought into school and will not be administered by school staff. Children who are unwell enough to need these medications during school hours are generally not well enough for school. Such items **MUST NOT** be put in your child's bookbag.



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However, we do have a school supply of Calpol or Ibuprofen that can be administered, with parental consent on a case-by-case basis, should your child have a very high temperature or are in pain e.g. earache.

If your child suffers from hayfever or associated allergies during hayfever season, **IT IS ABSOLUTELY VITAL** that they are administered their antihistamine, eye drops or nasal spray prior to coming to school to manage their symptoms. We recommend that your child takes (in liquid form) cetirizine hydrochloride, piriteze or Benadryl, (instead of piriton) as the dosage guidelines for children aged 6-12 are 1 x 5ml spoonful in the morning and 1 x 5ml spoonful in the evening – please always seek advice from your GP or a medical professional. We do have a school supply of piriton and piriteze for emergencies that can be administered with parental consent on a case-by-case basis.

Should you require any further information or clarification, please contact: -

Caroline McEvoy
Welfare
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