



ST MARY'S SPECIAL SCHOOL

School Illness Policy

Introduction

St Mary's Special School has a duty of care to all its pupils and members of staff. This policy aims to set out procedures to be followed when children become unwell, to ensure that they are well cared for and that, where the cause is may be of an infectious nature, others are not exposed needlessly. Procedures regarding the administration of medicine during the school day are also outlined.

Illness or Infection at School

Responsibility of Parents/ Guardians

When children should be kept at home:

Parents are asked **not** to send their children to school if any of the following apply:

- The child has symptoms of an infectious illness that is mentioned in the list of 'Common Ailments requiring Pupils to Stay at Home' at the back of this policy (**Appendix 1**) or in HSE Publication: 'Management of Infectious Diseases in School – 2014', Chapter 9. <http://www.hpsc.ie/a-z/lifestages/schoolhealth/File.14304.en.pdf>
- The child does not appear well enough to participate in the normal programme of curriculum/school activities.
- The child requires more care than the classroom team is able to provide without affecting the health, safety and Teaching/ learning of the other pupils.
- If antibiotics are prescribed, the child should not attend school until 48 hours after treatment has begun and **must be showing signs of improvement**.
- If head lice or ringworm is noticed, the child may not come to school until treatment has been successful. (See the end of **Appendix 1** at the back of this policy.)
- If a child has been sent to school and is clearly unwell or becomes unwell during the school day, as described above, a parent/ guardian or emergency

contact will be required to collect him/ her promptly from school- by whatever means necessary.

Pupil Absence – Informing the bus escort

If a pupil becomes ill overnight or at the weekend and is unable to attend on the next school day, the parent/ guardian should contact the bus escort so the school bus need not come unnecessarily to the house. The evening before a pupil returns to school, the parent/ guardian should phone the bus escort to ensure their son/ daughter is collected in the morning.

Pupil Absence – Informing the school

As well as contacting the bus escort, the parent/ guardian must also contact the school office, stating the reason for the child's absence.

This is very important for the following reasons:

- If a child has an illness which is recognised by HSE as an infectious disease, staff, other parents/guardians or the authorities may need to be notified. It is vital that information about an infectious disease is passed to the school as soon as possible.
- National Educational Welfare Board requires the reason for absence to be recorded
- Child absences may affect how staff members are assigned during the school day.

Returning to school

- A pupil who has an infectious ailment, e.g. diarrhoea, vomiting, heavy cold, should remain at home until they are no longer infectious. The length of time before return will depend on the ailment and on the treatment. Guidelines in **Appendix 1** of this policy, or in 'Management of Infectious Diseases in School' (Chapter 9), should be followed. For some infectious diseases, the school may require a doctor's 'fitness to return' note before the child is allowed to come back to school.

Collecting a child when ill/Parent responsibility

If the school contacts a parent/guardian to say that their child has been examined and is not well enough to be at school, or travel home on school transport. The parent/ guardian must arrange to collect the child promptly. This is primarily for the well-being of the child who is unwell. In the case of infectious diseases, it is also very

important for the well-being of the other vulnerable and fragile pupils and school staff. Classroom staff will aim to keep the child as comfortable as possible while waiting for a parent/ guardian to arrive.

- It is important that parents ensure school has up to date contact numbers for them and also provides the school with an emergency contact

Responsibility of School

If a child feels unwell or appears unwell, on arrival at school or during the school day, the procedures at the back of this policy, in **Appendix 2**, will be followed for the well-being of the child who is sick and of all members of the school community.

On an ongoing basis, St Mary's Special School aims to promote good hygiene practices that will help prevent transmission of infection. These practices will be taught as part of the SPHE curriculum and will be consolidated throughout the school day. They will include:

- Teaching and implementing effective handwashing throughout the school, with staff leading by example
- Teaching and implementing respiratory hygiene and cough etiquette, e.g. to turn away when coughing or sneezing, etc.
- Provision of gloves, aprons, suitable sanitising cleaning products and cleaning equipment for staff who are in contact with bodily fluids when caring for a child.

Administration of Emergency/long term Medication in School

In St Mary's Special School, emergency medication is administered by the school staff. (Providing relevant training, emergency medication forms and current prescriptions have been submitted). As the medical needs of our pupils change, the Board of Management and school staff may need to respond to requests for administration of other types of similar medication e.g. epi-pen.

Responsibility of School

The teacher and SNA must ensure that medication is correctly stored or in the case of medication that travels home it must be handed directly to the bus escort at the end of the school day. Staff must ensure that training is in place if required before medication arrives on the school premises. The school is not responsible for the administration of non-emergency medication.

Administration of Infrequent/ short term medication is the sole responsibility of Parents/guardians (e.g. a course of antibiotics)

Appendix 1

Common Ailments requiring Children to Stay at Home or to Visit GP

CHICKEN POX: The child should not attend school until all scabs are dry and crusted. This is usually 5-7 days after appearance of rash.

DIARRHOEA: When your child has had diarrhoea due to infection, he/ she should only return to school once 48 hours have passed following the last loose bowel movement. For example, if your child has his/her last loose bowel movement at 11 am on Sunday morning, he/she cannot return to school until Wednesday morning.

VOMITING: As in the case of diarrhoea, the child should remain at home until 48 hours have passed since last episode of vomiting due to infection.

FEVER: The normal body temperature is 36.5 to 37.2 C. If the child develops a temperature, she/he should remain at home until 24 hours after the fever has passed.

HEAVY COLD SYMPTOMS OR FLU LIKE SYMPTOMS: e.g. large amount of yellow-green nasal discharge, sleepiness, ear pain and/or fever. The child should be kept at home until these have subsided and the he/ she is able to participate in the normal school curriculum.

MILD COLD SYMPTOMS: If a child's mild cold symptoms would prevent him/ her from participating in normal school curriculum, e.g. significant weariness at onset, streaming discharge from nose, persistent cough, he/ she should be kept at home until symptoms have subsided.

CONJUNCTIVITIS: inflammation of the lining of the eye and eyelid, causing sore or red eyes; can be highly contagious if bacterial or viral. Children with red eye/s and a watery or sticky discharge must be evaluated by a doctor, who will advise about return to school – at least 24 hours after start of treatment, perhaps until fully recovered.

IMPETIGO: The fluid inside the blisters is very infectious. The child should be taken to the doctor who will advise about return to school, usually when blisters have dried and healed or a minimum of 24 hrs after commencing antibiotics,

Common Conditions requiring Immediate Treatment

HEAD LICE: It is important to avoid contact between an affected child and others. If parents/guardians notice head lice, or are advised that they have been noticed in the child's hair at school, treatment must be completed before the child returns to school

RINGWORM: A child with suspected ringworm should be taken to their GP and, if ringworm is confirmed, treatment should begin as soon as possible. Once parents/guardians attend to this, the child may return to school.

Appendix 2

Internal School Procedures when Child is Unwell

- If a class teacher is concerned that a child is unwell, she/ he will inform the Principal/Vice Principal.
- If the school feels a child needs to go home because he/ she may have an infectious illness, or is too unwell to participate in school activities, the Principal/Vice Principal/Teacher will inform parents/guardians/emergency contact. If the child is not infectious but may require 'over the counter' medication to alleviate symptoms (e.g. Calpol for headache), the teacher will phone a parent/ guardian to advise this. They will also document any first-aid treatment in the child's communication book, and re-assess the child within an agreed timeframe.
- In the case of a child who is unwell and is awaiting collection, staff will ensure that the child is supervised, reassured and made as comfortable as possible.

If the child has an infectious condition:

- further contact with other children will be limited by moving the child to a separate space in the classroom or by removing him/ her from the classroom, if/where possible.
- all other necessary precautions will be taken to limit the spread of infection, i.e. careful hand-washing and use of suitable sanitising cleaning products, as required.
- the parent/ guardian may be given a 'Return to School Slip' to be completed and returned to child's class teacher on his/ her return to school.

Kevin Tade

Principal

13/3/19

Date

Teresa Well

Chairperson

13th March 2019

Date