



**I don't feel
very well**

**A guide on how to decide if your child
is well enough to go to school**



Introduction

As a parent you want your child to always be feeling their best for school and when they are not feeling very well it can be confusing to decide whether they should go to school or not.

This guide will help you understand what illnesses you should keep your child home from school for and how you can help your child feel better.

When it comes to your child's health, it's always better to be safe than sorry. If you are ever in doubt about your child's health, talk to a health professional. Serious childhood illnesses are extremely rare. But, if you think your child might be affected, always trust your instincts and get help from a health professional straight away.

Whenever your child is away from school ill, it is important to inform their school. On the first day of your child's illness, telephone the school to tell them that your child will be staying at home. The school may ask about the nature of the illness and how long you expect the absence to last.

If it becomes clear that your child will be away for longer than expected, phone the school as soon as possible to explain this.



Top tips!

See our quick check list of when you should not send your child to school on page 32

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Health Services in Southampton

Self care

If your child has a very minor illness or injury self care is the best way to treat it. Common illnesses and injuries can be treated at home simply by combining medicines with plenty of rest. It is useful to keep a first aid kit at home containing self care essentials such as a thermometer and paracetamol. Lots of helpful tips on self care are available on the NHS Choices website at www.nhs.uk



NHS Direct 0845 4647

NHS Direct is available 24 hours a day, 365 days a year. If you are worried about your child's health, you can call NHS Direct and get advice from trained nurses. When you call NHS Direct, they will ask you to provide some basic information, including details of any medication your child may have had. NHS Direct will assess the problem and advise you on the best course of action.

NHS Direct also provides information and self care advice online at www.nhsdirect.nhs.uk



Pharmacist



Your pharmacist has knowledge of everyday health issues and can help you with advice on common health problems and minor illnesses such as colds, skin conditions and allergies and could save you a trip to your GP surgery. There are often pharmacies in supermarkets and many are open late.

GP



It is important to register your child with a GP. Your GP can give you advice and the medicines you need and can also point you in the right direction if you need other specialist services. You will need to make an appointment but your GP will see your child quickly if you are worried.

GPs provide a range of services by appointment including medical advice, examinations and prescriptions. GPs can offer urgent next-day appointments and many have extended opening hours and a home visit service.

Your GP can also ensure that your child stays healthy by vaccinating them against diseases such as measles, mumps and rubella.

Health Services in Southampton

Out of Hours service 0300 300 2012

Outside your GP opening hours you can access a GP through the Out of Hours service. This service should only be used for urgent health problems that cannot wait until your GP practice re-opens. The service does not deal with repeat prescriptions. You can contact the service by calling 0300 300 2012.



School Nurses

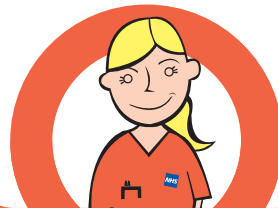


Your child's school will have a named qualified School Nurse who is available to support parents around how to manage their child's health whether this is a one-off minor illness or a long-term condition (for example asthma or diabetes). Your School Nurse can also see your child during school hours if your child feels unwell or injured. Your School Nurse is available to meet with you, just ask your child's school for contact details.

Walk-in Centre or Minor Injuries Unit

If your child has a minor injury including deep cuts, sprains and minor burns, you can visit Southampton's Minor Injuries Unit (MIU) based at the Royal South Hants Hospital instead of the Emergency Department.

The MIU is open for you to walk in from 8am to 9.30pm, 365 days a year. Walk-in care is also available from Bitterne Health Centre and for registered patients at the Adelaide GP Surgery in Millbrook.



Emergency Department

Emergency Departments should only be used in a critical or life-threatening situation.

The Emergency Department provides emergency care for people who show the symptoms of serious illness or are badly injured. If you suspect an injury is serious go straight to the Emergency Department or dial 999 and ask for an ambulance.

The only Emergency Department in Southampton is based at Southampton General Hospital, Tremona Road, Southampton, Hampshire, SO16 6YD.



Colds

Pharmacy tip

Children can be treated using paracetamol and ibuprofen to help bring down a raised temperature. You can get paracetamol and ibuprofen from your pharmacy, always tell your pharmacist how old your child is.



GP Tip

During the winter months, children are more likely to get flu. The symptoms are similar to a cold but will be much more serious. This can be concerning and your child will need to stay home from school, it is important that you speak to your GP as soon as possible to get further advice. Remember you can call NHS Direct for advice from a health professional on 0845 4647.

If your child has a long term health condition such as asthma, diabetes, kidney or heart disease or a weak immune system due to disease, they need to get the seasonal flu vaccination which is available from your GP. The seasonal flu vaccination is safe and will help to protect your child from flu.



Colds

It's normal for children to have eight or more colds a year. This is because there are hundreds of different cold viruses and young children have no immunity to any of them as they've never had them before. Gradually they build up their natural defences and get fewer colds.

There are some good things about children catching a few colds and coughs. Most bugs will run their course without doing any real harm because they are viruses which get better on their own, however there are things you can do at home to help:

- Give your child more to drink than normal.
- You can give your child, paracetamol and ibuprofen to bring down their temperature, reduce pain and discomfort. There are special products for children. It will state on the packet how much you should give children of different ages.
- Encourage family and friends to wash their hands regularly to stop the cold spreading.
- Nose drops can help ease a blocked nose. Ask your pharmacist or GP about which ones to use and how.

Usually a cold isn't a reason for a long length of absence from school and once your child seems to be feeling better it is fine to send them back to school. Usually within one to two days.



Self Care Tip

CATCH IT

Germs spread easily. Always carry tissues and use them to catch your cough or sneeze



BIN IT

Germs can live for several hours on tissues. Dispose of your tissue as soon as possible



KILL IT

Hands can transfer germs to every surface you touch. Clean your hands as soon as you can



Regular hand washing with soap and water is the best way to stop the spread of viruses and bacteria

Coughs and sore throats



Coughs and sore throats

Children often cough when they have a cold because of mucus trickling down the back of the throat. Although it's upsetting to hear your child cough, coughing helps clear away this mucus. If your child is drinking, eating and breathing normally and there's no wheezing, a cough isn't usually anything to worry about and shouldn't be a reason why your child cannot attend school.

- Warm drinks with lemon and honey can help soothe sore throats and reduce coughing
- Visit your local pharmacy who will be able to tell you what cough medicines will be suitable for your child.

If your child has a bad cough that won't go away, see your GP. If your child also has a high temperature and is breathless, they may have a chest infection. If this is caused by bacteria rather than a virus your GP will prescribe antibiotics to clear up the infection. Antibiotics won't soothe or stop the cough straightaway.

If a cough continues for a long time, especially if it's worse at night or is brought on by your child running about, it could be a sign of asthma. Some children with asthma also have a wheeze or breathlessness. If your child has any of these symptoms make an appointment with your GP.

Emergency Department Tip

Remember if your child seems to be having trouble breathing, make sure you get help from a health professional straight away.



School Nurse Tip

Having a sore throat is your body's way of defending itself. The immune response can mean inflamed glands which can be painful when swallowing. This is usually normal with a cough and cold.



Being sick and diarrhoea



Being sick and diarrhoea

There are many reasons why your child may be sick or have diarrhoea, they may have eaten or drunk something that doesn't agree with them or have picked up a stomach bug.

There are some simple tips you should follow if your child is sick or has diarrhoea:

- Don't take your child back to school until at least 48 hours after the last episode of diarrhoea or vomiting.
- Give your child lots of clear drinks to replace the fluid that's been lost.
- Don't give your child fruit juice or squash as this can cause diarrhoea.
- Only give them food if they want it and try to give them foods which are easy to digest such as plain toast.
- Your local pharmacist can advise you about oral rehydration treatments.

- You can help to prevent any infection spreading by using separate towels for your child and reminding everyone in the family to wash their hands after using the toilet and before eating.
- Don't allow children to swim in swimming pools for two weeks after the last episode of diarrhoea.

Make sure you contact your GP urgently if:

- There is blood in your child's diarrhoea
- Your child has diarrhoea and is being sick at the same time.
- Your child has diarrhoea that is particularly watery, has blood in it or lasts for longer than two or three days.
- Your child has a severe or continuous stomach ache.

Tonsillitis



Tonsillitis

The main symptom of tonsillitis is a sore throat. There may be several other symptoms such as:

- Coughing
- Headaches
- Pain when swallowing
- High temperature (fever) over 38°C (100.4°F)
- Tiredness
- Pain in ears or neck
- White pus-filled spots on tonsils
- Swollen lymph nodes (glands) in the neck.

Your child should not attend school if they have tonsillitis as they can pass it onto other children. If you think your child has tonsillitis please contact your GP for an appointment as soon as possible.

Your GP will advise you on how to treat the symptoms of tonsillitis, what treatment your child needs and how long they should be off school.

Impetigo



Impetigo

Impetigo is a highly contagious bacterial infection of the surface layers of the skin, which causes sores and blisters.

Impetigo is not usually a serious condition. However, you should take precautions to avoid spreading it to other people, particularly if your child attends school. If your child has Impetigo make sure all your family carefully wash their hands after touching affected areas of skin, and do not share towels or bed linen.

Treating impetigo

If you suspect your child has Impetigo please make an appointment to see your GP. Antibiotic creams are usually recommended to treat the impetigo infection and minimise the risk of it spreading. Most children are no longer contagious after 48 hours of treatment.



School Nurse Tip

Your child can go back to school once they have started treatment for at least 48 hours.

Chickenpox



Chickenpox

Chickenpox is a mild condition that most children catch at some point. It takes 10 to 21 days for the signs to show. If you are sure it is Chickenpox you do not need to go to your GP unless your child is very unwell. Chickenpox is most common in children who are between two and eight years old. Your child is also more likely to catch chickenpox in winter and spring, particularly between March and May.

Chickenpox can be passed on to others from about two days before the rash appears until roughly five days after. The rash usually appears on the chest and back. You and your child should stay away from other people until all of the blisters have fully burst and dried, which usually happens five to seven days after the first blister appears. You can take your child out if they are well enough, but be careful to keep away from other people.

After the last blister has burst and dried, they are no longer likely to pass the infection on. Chickenpox spreads from spit, sneezes and coughs from a person who has Chickenpox.



School Nurse Tip

If you think your child has chickenpox, make sure you keep them off school and visit your local pharmacy to get advice about treatments.



Pharmacy tip

It is important to keep children cool as itching gets worse if they are hot. Speak to your local pharmacy about treatment which can help to calm itching (especially at night) to help stop the blisters scarring.

Measles



Measles

Measles is a highly infectious viral illness. It causes a range of symptoms including a fever, coughing and distinctive red-brown spots on the skin.

The most effective way of preventing measles is the measles, mumps and rubella (MMR) vaccine. Measles is most common among children aged between one and four years old, although anyone who has not been vaccinated against measles can catch it.

Treatment for measles is normally not necessary as the body's immune system can usually fight off the infection in a couple of weeks. Typically, once you have fought off the measles infection, you develop immunity (resistance) to it. However, possible complications of measles include pneumonia, ear and eye infections and croup (an infection of the lungs and throat). More serious complications, such as inflammation of the brain (encephalitis), are rare but can be fatal.

For more information about measles and vaccinations please contact your GP.



School Nurse Tip

If you think your child has measles contact your GP who can advise you on how long your child should be away from school and what treatments your child will need. Your GP can tell you what signs to look out for as your child gets better and when your child will feel well enough to go back to school.

Mumps



Mumps

Mumps is a very contagious viral infection that usually affects children. The most common symptom of mumps is a swelling of the parotid glands. The parotid glands are located on one side, or both sides, of the face. The swelling gives a person a distinctive 'hamster face' appearance.

Once a person has had mumps, they usually develop immunity against further infections. People who are infected are most contagious for one to two days before the onset of symptoms, and for five days afterwards. During this time, it is important to prevent spreading the infection to other people, particularly those at high risk of developing complications. For example:

- teenagers and young adults who have not been vaccinated
- pregnant women – it is important to keep your child off school as the school may have pregnant staff.

The mumps virus is spread in the same way as the common cold and flu viruses. The most effective way to prevent mumps is to have the MMR vaccination. For young children with mumps the symptoms should pass within two weeks without causing any long-term problems. For teenagers and adults with mumps they can have a higher risk of developing complications, some of which can be serious.

As there is currently no cure for mumps, treatment is aimed at relieving the symptoms and preventing the further spread of infection.



School Nurse Tip

Contact your GP if you think your child has mumps. Your GP can advise you on how long your child should be away from school and what treatments will help your child feel better.

Scarlet fever



GP tip

The most common treatment for scarlet fever is a 10-day course of antibiotics. This will usually be penicillin taken by mouth. Your child must stay at home for at least 24 hours after the treatment is started. The symptoms usually go in a few days if the antibiotics are taken properly. The whole course of treatment must be finished to make sure the infection is fully cleared.

Scarlet fever

Scarlet fever is a bacterial illness that causes a distinctive pink-red rash. Scarlet fever is usually mild however in the last few years there has been a small increase in the number of cases in Southampton.

The main symptom of scarlet fever is a widespread, fine pink-red rash that feels like sandpaper to touch. It may start in one area, but soon spreads to many parts of the body, such as the ears, neck and chest. The rash may be itchy.

If your child has scarlet fever they will develop a flushed, red face – hence the name scarlet fever – although the skin around the mouth stays white. The tongue may look a bit like a strawberry. Other symptoms include swollen neck glands, especially if you generally feel unwell. Symptoms usually develop one to four days after a person is infected. Scarlet fever usually follows a sore throat or impetigo that is caused by particular strains of bacteria.

Scarlet fever is very contagious and usually affects children aged four to eight years old. Because it's so contagious, scarlet fever is likely to affect someone who is in close contact with a person with a sore throat or impetigo that is caused by bacteria.

Pharmacy tip

Other ways to treat the symptoms of scarlet fever include:

- give your child plenty of cool fluids, especially if they do not have much of an appetite
- keep their room cool
- you can give your child paracetamol to relieve aches and pains and bring down a high temperature
- you can apply calamine lotion to relieve itching of the rash.



Slapped cheek syndrome



Slapped cheek syndrome

Slapped cheek syndrome is a common childhood viral infection which usually affects children who are between 3- 15 years old. It is most common during the late winter months or early spring. The most common symptom of slapped cheek syndrome is the appearance of a bright red rash on both cheeks, along with a high temperature, headaches, joint pain and a sore throat.

In children, slapped cheek syndrome is a mild, self-limiting infection, which means that it will get better by itself without the need for treatment.



GP tip

There are certain groups of people in which slapped cheek syndrome can cause serious symptoms and complications including people with blood disorders, pregnant women and people with a weakened immune system. It is important if you or your child are in one of these groups and you suspect that it could be slapped cheek syndrome make an appointment as soon as possible with your GP.



Pharmacy tip

You can give your child painkillers, such as paracetamol, or ibuprofen to help relieve symptoms, such as a high temperature, headache, and joint pain. Antihistamines can be used to relieve the symptoms of itchy skin. You can also make sure that your child gets plenty of rest and drinks plenty of fluids as this will help to relieve the symptoms of a sore throat and a high temperature.

Meningitis



Emergency Department tip

Know the signs of meningitis:

Bacterial meningitis has a number of early warning signs that can occur earlier than the other symptoms. These are:

- Pain in the muscles, joints or limbs, such as in the legs or hands
- Unusually cold hands and feet, or shivering
- Pale or blotchy skin and blue lips.

Meningitis causes symptoms such as:

- Severe headache
- Vomiting
- High temperature (fever) of 38°C or over
- Stiff neck
- Sensitivity to light
- Red or purple spots that don't fade under pressure (do the glass test explained to the left)
- Rapid or unusual patterns of breathing.

Meningitis

Meningitis is a very serious illness, but if it's diagnosed and treated early most children make a full recovery. There are several types of meningitis, and some can be prevented by vaccinations (speak to your Health Visitor or GP for more information).

Early symptoms of meningitis may be similar to a cold or flu (fever, vomiting, irritability and restlessness). However, children with meningitis can become seriously ill in hours, so make sure you can recognise the signs.

Not all children will develop all the symptoms listed below. If your child develops some of these symptoms, especially red or purple spots, get medical help urgently.

If you can't get in touch with your GP, or are still worried after you've spoken to them, take your child to the Emergency Department.



Children and Teenagers

Meningitis  Septicaemia  Meningitis & Septicaemia 

 Fever, cold hands & feet	 Pale, blotchy skin. Spots/rash see Glass Test
 Vomiting	 Severe headache
 Drowsy, difficult to wake	 Stiff neck
 Confusion & irritability	 Dislike bright lights
 Severe muscle pain	 Convulsions/seizures

Illustrations from the Meningitis Trust website

Anxiety or feeling worried



Homework, exams, fall outs with friends and bullying can all make your child feel stressed and anxious. Anxiety and stress are normal healthy reactions to everyday life and happen to everyone at times of danger or in worrying situations.

Anxiety and worry can become a problem when they interfere with your child's everyday life. Children who experience worry may be irritable, not sleep well, lose interest in food, worry a lot and appear depressed or negative. Headaches and stomach pains can also be stress-related.

Anxiety and worry can be broken down into three components:

- **Physical** – The physical symptoms we experience in our body, such as an increased heart rate, sweating and a dry mouth. These are all normal but can be very frightening (some children think they are having a heart attack, or might be sick). It is important to explain that these symptoms as part of our natural fight or flight response.
- **Thoughts** – The internal messages we say to ourselves. Worrying situations can make us think 'I am not going to cope', 'I can't do this' or 'I am rubbish.' Often these messages can get the better of us, but we need to challenge them and replace them with more coping self talk 'I will try', 'It will be ok' and 'I can always seek help.'
- **Behaviour** – What we do. The ways we cope with anxiety or stress. This may include avoiding things, becoming aggressive, running away and alcohol and drug misuse.

Anxiety or feeling worried

There are a number of things you can do to help your child feel better if they are feeling stressed or anxious:

- Ensure your child eats well - a balanced diet is vital for your child's health, and can help them to feel better during stressful times. Some parents find that too many high-fat, high-sugar and high-caffeine foods and drinks (such as cola, sweets, chocolate, burgers and chips) make their children hyperactive, irritable and moody.
- Encourage sleep - good sleep will improve your child's thinking and concentration. Allow half an hour or so for kids to wind down between studying, watching TV or using a computer and going to bed to help them get a good night's sleep.
- Discuss stress and anxiety - remind your child that feeling nervous is normal.
- Encourage exercise - make sure your kids are active. Exercise can help boost energy levels, clear the mind and relieve stress. Walking, cycling, swimming, football and dancing are all effective.



School Nurse Tip

If you are concerned about your child's stress and anxiety make sure talk to your child's teacher or tutor so they can help to support your child and they feel confident to attend school.



GP tip

Whilst stress and anxiety are normal, if you are concerned about your child and think they are having serious problems please book an appointment with your GP. There is lots of support available.

Understanding why your child may say they are too ill to go to school...



Understanding why your child may say they are too ill to go to school...

Sometimes your child may tell you they are ill when really there is something else going on which is making them not want to go. Make sure you take time to talk to your child, listen to how they are feeling and offer reassurance if they are worried or upset.

Sometimes children don't want to go to school for reasons other than being unwell, these could include your child saying:

- My friend is off today
- I don't want to walk to school by myself
- Person x is being horrible to me
- I don't like the work we have to do today
- I haven't done my homework so I will get told off
- I don't want to do my detention
- I don't need to learn what we are learning today
- The work is too hard or too easy.

The best thing to do is talk to a member of staff at school and let them know the problems your child is experiencing. Together you can agree the best way to support your child, so that they feel confident to attend school.



Top tips



When not to send your child to school

Most of the time it is perfectly acceptable to send your child to school if they are just a little 'under the weather', suffering from a runny nose or sore throat. Most of the time you can rely on your own instinct as a parent and common sense but it is helpful to know when you really must not send your child to school.

When deciding if your child is well enough to go to school ask yourself the following questions:

- Is your child well enough to do the activities of the school day? If not, keep your child at home.
- Does your child have a condition that could be passed on to other children or school staff? If so, keep your child at home.
- Would you take a day off work if you had this condition? If so, keep your child at home.

When not to send your child to school:

- If your child has a high temperature (over 38°C).
- If your child has vomiting and diarrhoea. You can send your child back to school 48 hours after the last episode of vomiting or diarrhoea.
- If your child has tonsillitis. Your child's GP will tell you how long your child should be kept at home.
- If your child has impetigo. Your child can only attend school after having received treatment for at least 48 hours.
- If your child has chickenpox. Your child can only go back to school when all blisters have fully burst and dried.
- If your child has measles. Your child's GP will tell you how long your child should be kept at home.
- If your child has mumps. Your child's GP will tell you how long your child should be kept at home.
- If your child has scarlet fever. Your child's GP will tell you how long your child should be kept at home.
- If your child has slapped cheek syndrome. Your child's GP will tell you how long your child should be kept at home.

Remember your child's school will always send your child home if they consider them too ill to attend. To ensure that schools can contact you should there be an emergency please make sure that your contact details are up to date.



School Nurse top tips

- Tell your child's school, if your child has a medical condition or needs to take medicine- even if it is for a short time.
- Make sure that any medication your child needs at school is labelled with your child's full name and how often it should be taken. Make sure you discuss the medication with your child's teacher.
- Make sure that any medication is within the expiry date.
- Ensure that your child catches up on any school work they have missed.

Useful contacts

- **Emergency - 999**
- **NHS Direct - 0845 4647**
www.nhsdirect.nhs.uk
- **Out of Hours GP Service - 0300 300 2012**
- **Parent Support Link - 023 8039 9764**
www.parentsupportlink.org.uk
For parents who have a child or family member taking drugs and/or alcohol.
- **Southampton Dental Helpline - 0845 050 8345**
www.southamptondentalhelpline.nhs.uk
- **Southampton Children and Young People's Trust**
www.youngsouthampton.org
- **Family Lives - 0808 800 2222**
www.familylives.org.uk
Help and support in all aspects of family life.

Get in touch

If you have a compliment, concern or complaint please contact the Patient Experience Service on **023 8029 6933** or email **patientexperienceservice@nhs.net**



For a translation of this document,
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large
print

or



or



please contact Access to Communication

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