

School Nursing Newsletter for Primary Schools

December 2021

This newsletter aims to provide families and young people with some useful information from the School Nursing Team for keeping healthy.

Welcome to the December edition of our newsletter



Seasons greetings to you and your families. We wish you all a healthy, safe and happy time over the Christmas break.



Managing Asthma in the winter

As the temperature gets colder outside you might notice the cold affects your child's asthma symptoms. There may be an increase in coughing and wheezing or breathing may be more difficult. To help prevent asthma attacks caused by the cold, make sure their mouth and nose are covered loosely by a scarf so that the air is warmed before breathing it in. Drinking lots of fluids is also important to help keep the mucus in their lungs thinner so the body can remove it more easily. Make sure your child takes their preventer inhaler regularly as directed by their GP and make sure their reliever inhaler is available at all times.

If they are using their reliever inhaler three or more times a week, book an extra asthma review. Please make sure your child's asthma is regularly reviewed by their GP or asthma clinic. For further hints and tips about managing asthma [visit Asthma.org.uk](https://www.asthma.org.uk)

When should your child be off school?

It can be very difficult as a parent or carer to know when you child should be off school. Keep your child off school and get a test for your child if they have any of the main symptoms of COVID-19:

- ❖ a high temperature
- ❖ a new, continuous cough
- ❖ a loss or change to their sense of smell or taste

[Find out more about symptoms of COVID-19 and what to do](#)

For minor coughs, sore throats and common colds, your child can go to school but if they have a **fever they must stay at home until the fever goes**. Make sure they wash their hands regularly and throw used tissues in the bin. A sore throat and a fever could also be a sign of tonsillitis. [Visit Gov.uk](https://www.gov.uk) for further information managing specific infectious diseases.

This table shows current NHS advice on common health conditions.

Condition	How long should the child stay off school?	Do
Chicken pox Shingles	At least 5 days or until rash is dry and crusted over.	Be aware it can spread to those who have never had chicken pox from the fluid in the blisters.
Cold sore	Not necessary.	Encourage them not to touch the blister, kiss anyone or share items like cups or towels.
Conjunctivitis	Not necessary.	Encourage your child not to rub their eyes and to wash their hands regularly.
Ear infection/ Earache	Until they're feeling better, or if they have a fever once that has gone away.	
Food poisoning Diarrhoea Vomiting Rotavirus	Until 48 hours after diarrhoea & vomiting has stopped and they feel well enough. In some cases, more time may be required if the Health Protection team advise.	Encourage good hand hygiene.
Glandular fever	Once they feel well enough to return.	Encourage good hand hygiene.
Hand foot & mouth disease	Once they feel well enough to return.	Encourage your child to throw away any used tissues straight away and to wash their hands regularly.
Headlice	Not necessary.	Treat if live lice are seen & inform the class teacher.
Impetigo	Until lesions are crusted or 48 hours after starting antibiotics.	Encourage your child to wash their hands regularly & not to share things like towels and cups. Clean toys & play equipment.
Flu	Once they feel well enough to return.	Remind your child to cover their nose and mouth with a tissue when coughing or sneezing & throw tissues in the bin. Ensure regular hand washing with soap and water, especially after coughing or sneezing. Immunise your child.
Measles	4 days after start of rash. Very infectious, they must not attend school.	Immunise your child.

Mumps	5 days after onset of swelling.	Encourage good hygiene at all times. Immunise your child.
Ringworm	Not necessary but requires treatment.	Get treatment from a pharmacist, unless on scalp in which case see GP.
Rubella (German Measles)	5 days from start of rash.	Ensure no contact with pregnant women. Immunise your child.
Scabies	Until after first treatment is carried out.	Make sure second treatment (1 week after first) is not missed. All household contacts and any other very close contacts should have 1 treatment at the same time as the second treatment of the case.
Slapped cheek syndrome	Not necessary as no longer infectious once the rash occurs.	If you suspect your child has slapped cheek syndrome, take them to see a GP and let the school know if they're diagnosed with it.
Threadworm	Not necessary.	Get treatment from a pharmacist. Encourage good hygiene.
Whooping Cough	After 48 hours of antibiotic treatment and they feel well enough to return.	Immunise your child.



Are your child's immunisations up to date?

To check what the routine schedule is and whether any vaccinations have been missed please [visit the NHS website](#)

Asthma, SARS (Severe Allergic Reaction), Epilepsy

Did you know the school nurses run medical awareness sessions for school staff on the management of asthma, severe allergies, and epilepsy? Please make sure if your child has any of these that they have an up-to-date care plan and medication in school. It is amazing how quickly inhalers and adrenalin pens can get out of date and as you know these can be life saving medications.

Your child's emotional and mental health

Since lockdown many children are struggling with their emotional and mental health. If you are worried about your child's behaviour or mental health some excellent resources and advice can be found on the [Young Minds website](#)

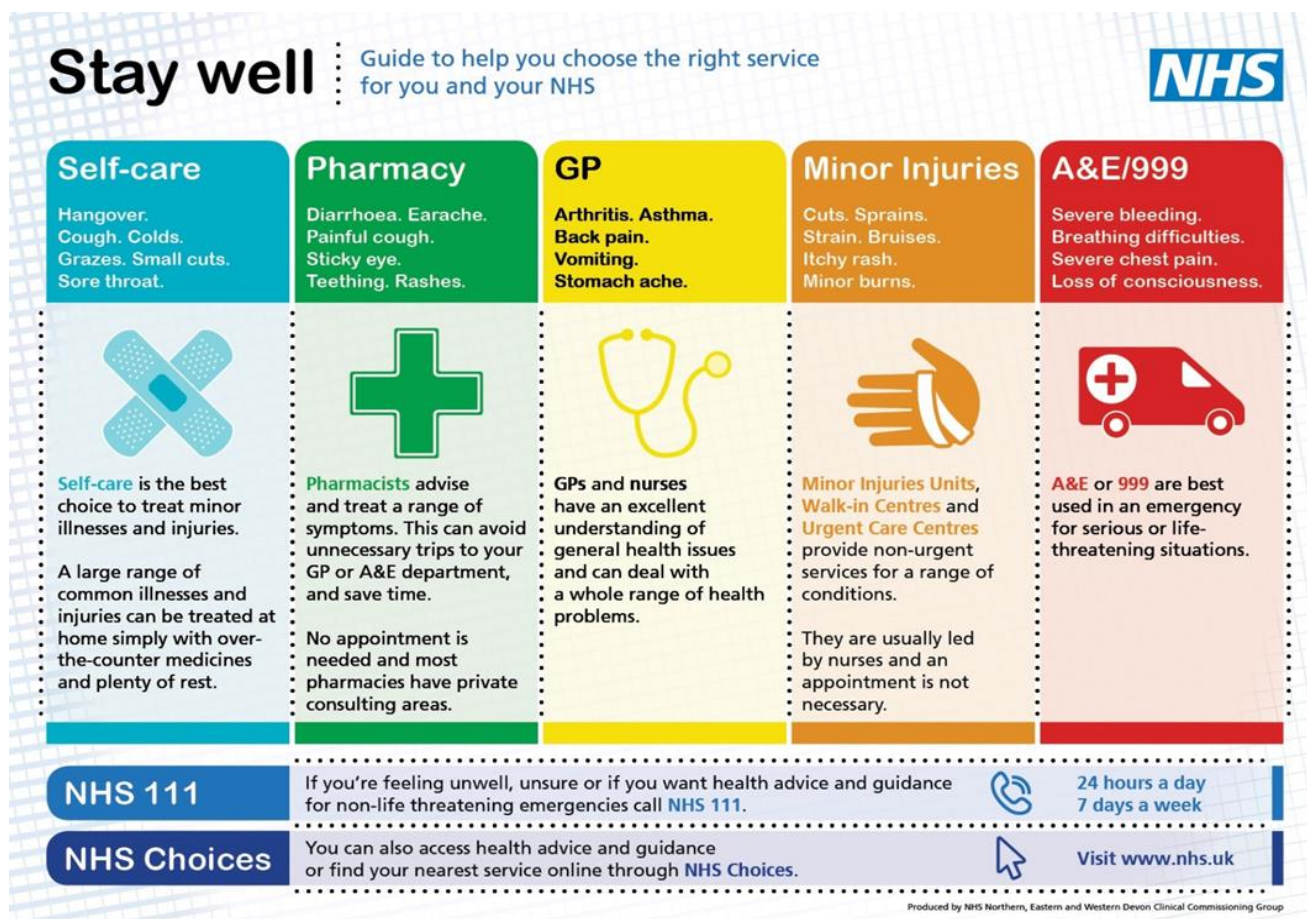
Further support and advice on how to talk to your child if you are concerned, help with difficult behaviour and emotions and sleep is also available from [NHS Every Mind Matters](#)

Unsure how to choose the right service for you or your child?



If you're unsure if you need A&E, contact 111 first. The NHS will help you right away and if you need urgent care can book you in to be seen quickly and safely. Emergency care services maintain social distancing and ensure you are given the right care in the right place in a timely and safe way.

The diagram below can help you decide the best place to go for care.



Do you need support with bedwetting, daytime wetting or soiling?

Bedwetting, otherwise known as enuresis, affects approximately half a million children and teenagers in the UK.



Some people can find bedwetting an embarrassing subject to talk about and this can delay the child, young person or family from seeking help. Bedwetting can have a big impact on a child's self-esteem and on their family life, but it's nothing to be ashamed of and it's important to get help if you need it.

For more information, how you can help and when to ask for additional support please [visit our website](#).

The ERIC website offers support and advice for children and young people with a bowel or bladder condition. [You can visit the ERIC Site here](#).

Daytime wetting or bladder issues

Needing a wee all the time, having to rush to the toilet, damp pants or big accidents – wee problems can be a nuisance and embarrassing. Sorting them out can sometimes be simple. Check:

- ❖ Is your child constipated? Poo should be soft and easy to pass, and children should poo between 3 times a day and 4 times a week.
- ❖ Look out for a Urinary Tract Infection (UTI). These are often undetected as your child may not seem unwell. Signs to look out for are rushing to the toilet to wee, the wee might be smelly and/or cloudy, they may complain of tummy ache or stingy wee. See the GP – there is a simple test that can be done to confirm a UTI.
- ❖ Get drinking. The bladder is a muscle so needs to be stretched and worked out, if your child is not drinking enough this can cause a number of problems. They should drink 6-8 drinks spread throughout the day. Water is best. Avoid fizzy drinks, caffeinated drinks like coffee, tea, cola, or energy drinks. Sometimes citrus drinks like orange or blackcurrant or those with artificial flavourings & sweeteners can irritate the bladder making it want to empty before it is ready.
- ❖ Relax to wee. Sit on the toilet – boys as well – it is easier to relax sitting down and completely empty the bladder. Support feet firmly on a box or a stool so the knees are above the hips. Keep toys, games or books beside the toilet to encourage your child not to rush and take their time to completely relax.

It may take a while for things to change and with drinking more initially there may be more accidents but continue trying. If after trying these suggestions, there is no improvement please contact your local school nursing team.

ERIC the children's bowel and bladder charity also offer some excellent advice.

[Advice for children with daytime bladder problems | ERIC](#)

Contacting your School Nursing team

We have a dedicated phone line for parents and carers, and for young people in Year 9 and above. It covers Bracknell Forest, Reading, West Berkshire and Wokingham. We are here to give you health advice and refer you into the service for ongoing support if you need it.



We're available 9am - 4.30pm Monday to Friday.

Call **0300 365 0010**

If there is no response please leave a voicemail message with the name of your child, contact number and brief outline of the issue and we will respond as soon as we can.

If your child already has an open referral to school nursing, please contact your local team instead:

- **Bracknell Forest: 0300 365 6000** (select option 3)
Bracknellforest.SN@berkshire.nhs.uk
- **Wokingham: 0118 949 5055**
csnwokingham@berkshire.nhs.uk
- **Reading: 0118 920 7514**
csnreading@berkshire.nhs.uk
- **West Berkshire: 01635 273384**
csnwestberks@berkshire.nhs.uk

We are available Monday to Friday 9am-5pm. There is reduced cover during school holidays.

[Visit our website](#) for more help and support for children and young people.



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