



Watford Grammar School for Girls

POLICY FOR SUPPORTING PUPILS WITH MEDICAL CONDITIONS

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Committee Responsible	F G & P (Health and Safety Committee)

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1. Purpose, Scope and Principles

The purpose of the policy is to provide a framework for the Governors and Headmistress to enable Watford Grammar School for Girls (WGGs) to meet the needs of the pupils of the school with long-term medical conditions.

The principles include:

- The school will provide children with medical conditions the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission to or prevented from taking up a place at WGGs because arrangements for their medical conditions have not been made.
- We will listen to the views of pupils and parents/carers.
- Pupils and parents/carers should feel confident in the care they receive from the school and that the level of care meets their needs.
- Staff will understand the medical conditions of pupils on roll at WGGs and that they may be serious and adversely affect a child's quality of life and therefore impact on the child's ability and confidence.
- All staff will be trained to understand their duty of care to children and young people and know what to do in the event of an emergency.
- WGGs, together with the local health community, will understand and support this medical conditions policy.
- We understand that all children with the same medical condition will not have the same needs and as such we will focus on the needs of each individual child.
- We recognise our duties as detailed in Section 100 of the Children and Families Act 2014. (Other related legislation is referenced in DfE guidance p21). Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, WGGs will comply with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this policy should be read in conjunction with the Special educational needs and disability (SEND) code of practice.

This policy has been drawn up in consultation with a wide range of local key stakeholders within both the school and health settings. Stakeholders include pupils, parent/carers, the school nurse, school staff, governors, and relevant local health specialist services.

2. Legislation and Guidance

DfE guidance

DfE statutory guidance on Supporting Pupils with Medical Conditions (2015) for governing bodies of maintained schools and proprietors of academies in England

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statutory_guidance_on_supporting_pupils_at_school_with_medical_conditions.pdf

states that Governing bodies should ensure that all schools develop a policy for supporting pupils with medical conditions which is reviewed regularly and is readily accessible to parents and school staff.

Governing bodies should ensure that the arrangements they set up include details on how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation.

Details should include:

- who is responsible for ensuring that sufficient staff are suitably trained,
- a commitment that all relevant staff will be made aware of the child's condition,
- cover arrangements in case of staff absence or staff turnover to ensure someone is always available,
- information for supply teachers,
- risk assessments for school visits, holidays, and other school activities outside of the normal timetable,
- monitoring of individual healthcare plans.

3. Communication

The medical conditions policy is supported by a clear communication system for staff, parent/carers and other key stakeholders to ensure its full implementation. These systems include the use of email, the Staff Bulletin, Staff briefings and Parentmail to inform and update all stakeholders.

Pupils, parent/carers, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy annually.

4. Training

- All staff, including temporary or supply staff, will be made aware of the medical conditions at WGGs and understand their duty of care to pupils in an emergency.
- All staff, including temporary or supply staff will be made aware of the content of this policy, know what action to take in an emergency and receive updates at least yearly. WGGs medical

team will provide regular training for common conditions e.g. asthma, allergies, epilepsy and diabetes.¹

- WGGs makes sure that all staff providing support to a pupil receive suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or parent/carer. A member of the school nursing team will provide regular training and the school keeps an up to date record of all training undertaken and by whom.

5. Individual Healthcare Plan

All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required at school have an individual healthcare plan (IHP)², which explains what help they need in an emergency. The IHP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.

6. Medical Emergencies

If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

7. Administering Medication

The school understands the importance of medication being taken and care received as detailed in the pupil's IHP.

- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.
- WGGs will make sure that there are sufficient members of staff who are able to administer the medication and meet the care needs of an individual child. This includes escort staff for home to school transport if necessary. WGGs will ensure that there are sufficient numbers of staff

¹ For pupils requiring insulin injections/insulin via pumps or blood glucose monitoring in schools the Paediatric Diabetes Team will provide this level of training and education.

² An example template for an IHP has been produced by DfE - see template A.

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

trained to cover any absences, staff turnover and other contingencies. WGGGS governing body has made sure that there is the appropriate level of insurance and liability cover in place.³

- WGGGS will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the pupil to involve their parent/carer, while respecting their confidentiality.
- When administering medication, for example pain relief, WGGGS will check the maximum dosage and when the previous dose was given.
- WGGGS have chosen to hold an emergency salbutamol inhaler for use by pupils who have been prescribed a reliever inhaler and for whom parental consent for its use has been obtained. (see appendix 3 for further information)
- WGGGS will make sure that members of staff accompanying a pupil with a medical condition on an off-site visit, including overnight stays, are informed of their medical condition and how this needs to be managed.
- Parents/carers must understand that they should let the school know immediately if their child needs a change of medication.
- If a pupil misuses their medication, or anyone else's, their parent/carer will be informed as soon as possible and our disciplinary procedures followed.

8. Storage of Medication and Equipment.

- WGGGS will make sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, e.g. asthma inhalers, auto-injectors etc. are readily available wherever the child is in the school and on off-site activities, and are not locked away.
- Pupils may carry their own medication/equipment, or they should know exactly where to access it. Those pupils deemed competent to carry their own medication/equipment with them will be identified and recorded through the pupil's IHP in agreement with parents/carers.

³ For school's covered by HCC's insurance where an IHCP is in place; parents have consented for the school to administer medication / meet other support needs as part of that plan; trained staff undertake these support needs and record keeping in relation to administration is robust then liability cover would be in place for common treatments administered by staff. (e.g. in relation to oral medication, inhalers, epi-pens, pre-packaged doses via injection etc.)

The insurance section have a detailed list of treatments which are covered, if you have pupils with significant medical needs contact insurance@hertfordshire.gov.uk or by phone on 01992 555480 for further advice and to ensure coverage.

- Pupils can carry controlled drugs if they are deemed competent to do so, otherwise WGGs will store controlled drugs securely in a non-portable container, with only named staff having access. Staff can administer a controlled drug to a pupil once they have had specialist training.
- WGGs will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes.
- WGGs will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents/carers are asked to collect all medications/equipment at the end of the school year, and to provide new and in-date medication at the start of each year.
- WGGs will dispose of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

9. Record Keeping

- As part of our admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.
- WGGs will use an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEN but does not have a statement or EHC plan, their special educational needs are mentioned in their IHCP. Appendix 2 is used to identify and agree the support a child needs and the development of an IHCP.
- WGGs will have a centralised register of IHPs, and an identified member of staff has the responsibility for this register.
- IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- The pupil (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. School staff are made aware of, and have access to, the IHP for the pupils in their care.
- WGGs will ensure that the pupil's confidentiality is protected.
- WGGs shall seek permission from parents/carers before sharing any medical information with any other party.

- WGGGS will keep an accurate record of all medication administered, including the dose, time, date and supervising staff.

10. Physical Environment

WGGGS is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. We are also committed to providing so far as is reasonably practicable an accessible physical environment for out-of-school activities.

- WGGGS will ensure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff will be made aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside WGGGS anti bullying policy, to help prevent and deal with any problems. Opportunities such as PACE and science lessons will be used to raise awareness of medical conditions to help promote a positive environment.

WGGGS understands the importance of all pupils taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order they are accessible to all pupils. This includes out-of-school clubs and team sports.

- Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- WGGGS ensures all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

11. Physical Activity And Offsite Visits

WGGGS will seek to ensure so far as is reasonably practicable that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.

- WGGGS staff appreciate that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- WGGGS will not penalise pupils for their attendance if their absences relate to their medical condition.

- WGGGS will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENDCO/ who will liaise with the pupil (where appropriate), parent/carer and the pupil's healthcare professional.
- WGGGS will make sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

12. Common Triggers That Can Make Common Medical Conditions Worse Or Can Bring On An Emergency

WGGGS is committed to identifying and reducing triggers both at school and on out-of-school visits:

- Our staff receive training and written information on medical conditions which includes avoiding/reducing exposure to common triggers.
- The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with medical needs.
- WGGGS will review all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.

13. Roles And Responsibilities

WGGGS works in partnership with all relevant parties including the pupil (where appropriate), parent/carer, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

Key roles and responsibilities are outlined in Appendix 1.

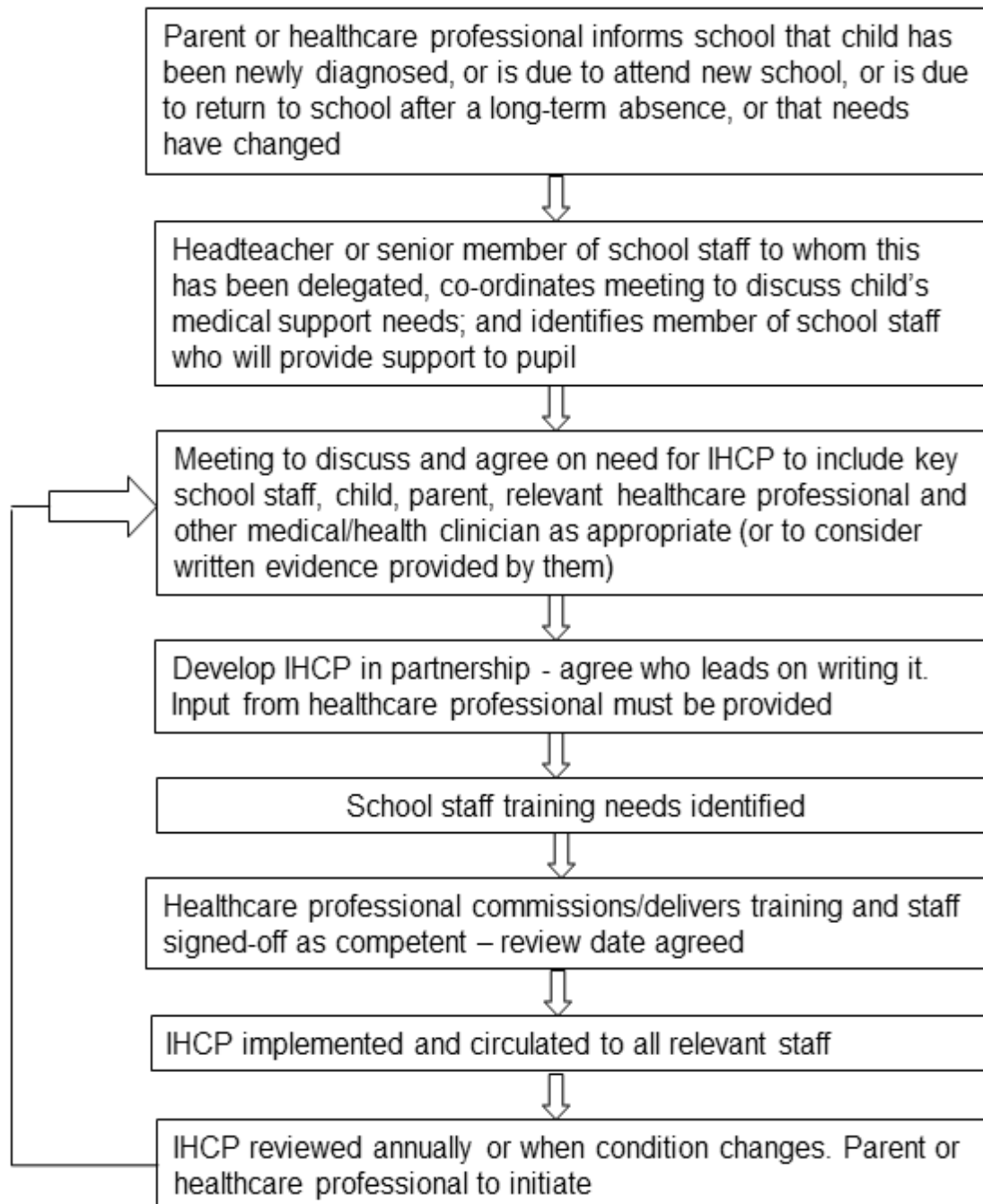
14. Policy review, evaluation and updates

In evaluating the policy, Watford Grammar School for Girls seeks feedback from key stakeholders including pupils, parents/carers, school nurses, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services and governors. The views of pupils with medical conditions are central to the evaluation process.

Should parents and pupils be dissatisfied with the support provided they should discuss these concerns with the Headmistress.

Appendix 1

Model process for developing individual healthcare plans



Appendix 2: Roles and responsibilities

Governing body– must make arrangements to support pupils with medical conditions in school by ensuring that:

- a policy for supporting pupils with medical conditions in school is developed and implemented.
- pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life.
- sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Headmistress – will be responsible for developing and implementing the school’s policy ensuring that:

- All staff are made aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- All staff that need to know are aware of the child’s condition.
- Sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- They take overall responsibility for the development of individual healthcare plans.
- That school staff are appropriately insured and are aware that they are insured to support pupils in this way.
- They contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

Medical Team – consisting of the Medical lead and the First Aid Officer will:

- Respond to medical emergencies and administer first aid or in the event of a serious accident/emergency, dial the ambulance service, inform parents and accompany student to hospital if necessary
- Be responsible for matters of health, which shall include those pupils referred to Medical Team during their attendance at school.
- Co-ordinate and maintain an up-to-date knowledge of health conditions of pupils
- Ensure the provision of medication and make adequate provision for their safe storage

- Provide a sympathetic presence in the school and to be sensitive to the needs and welfare of pupils.
- Provide a point of counselling to pupils and then to assess the need for further counselling from external providers.
- Play an active part in the school's health programme, including 'hygiene' and education with regards to puberty, adolescent changes etc various PHSE matters
- Organise the training and updating of First Aid qualifications for teachers.
- Complete all relevant forms following accidents, and, if necessary, report it to the Headmistress
- Supervise the use of medical room, to carry out checks to ensure that all equipment are in good order, repairs carried out, and that room and bedding are clean.
- Work with the Director of Key Stages to identify and then manage pupil appointments with the School Nurse and Counsellor/s.
- Liaise with the safeguarding team as appropriate.
- Co-ordinate, in liaison with school health, and assist with immunisation programmes (ie meningitis, Tetanus, Diphtheria, Polio and HPV).

School staff– any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

School nurse – every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they will do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare

plans. Anyone dealing with the medical care of a pupil in school should contact the named school nurse for that school to ensure a coordinated approach.

Pupils – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Appendix 3

Watford Grammar School for Girls has chosen to hold an emergency salbutamol inhaler for use by pupils who have been prescribed a reliever inhaler and for whom written parental consent for its use has been obtained.

The protocol for the use of this inhaler is detailed below, following the Department of Health Guidance on the use of emergency salbutamol inhalers in schools.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/360585/guidance_on_use_of_emergency_inhalers_in_schools_October_2014.pdf

The use, storage, care and disposal of the inhaler and spacers will follow the school's policy on supporting pupils with medical conditions. Specific guidance on storage and care is provided on page 12 of the Department of Health Guidance on the use of emergency salbutamol inhalers in schools.

Watford Girls hold a register of children prescribed an inhaler and this list is kept with the emergency inhaler.

Written parental consent is sought for the use of the emergency inhaler. Where consent is received the use of the emergency inhaler will be included in the pupils IHP.

Parents/carers will be informed if their child has used the emergency inhaler.

At Watford Girls the two volunteers for ensuring this protocol is followed are **Katie Barrett** and **Jo Shrimpton**

Appendix 4 : Infectious Diseases Procedure

In addition to this policy document – please refer to Public Health England Guidance on infection control in schools – updated March 2019

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

1) Purpose and Rationale

To provide a guide for action should an infectious disease surface in the school and/or community. The policy allows for two types of situations:

- non-widespread disease that is, nevertheless, infectious and dangerous – e.g. chickenpox, meningitis.
- a widespread disease that is infectious and dangerous.

a) When a case(s) is confirmed at WGS

We will seek advice taken from Public Health England or the Local Authority as to whether we should close, partially close or remain open.

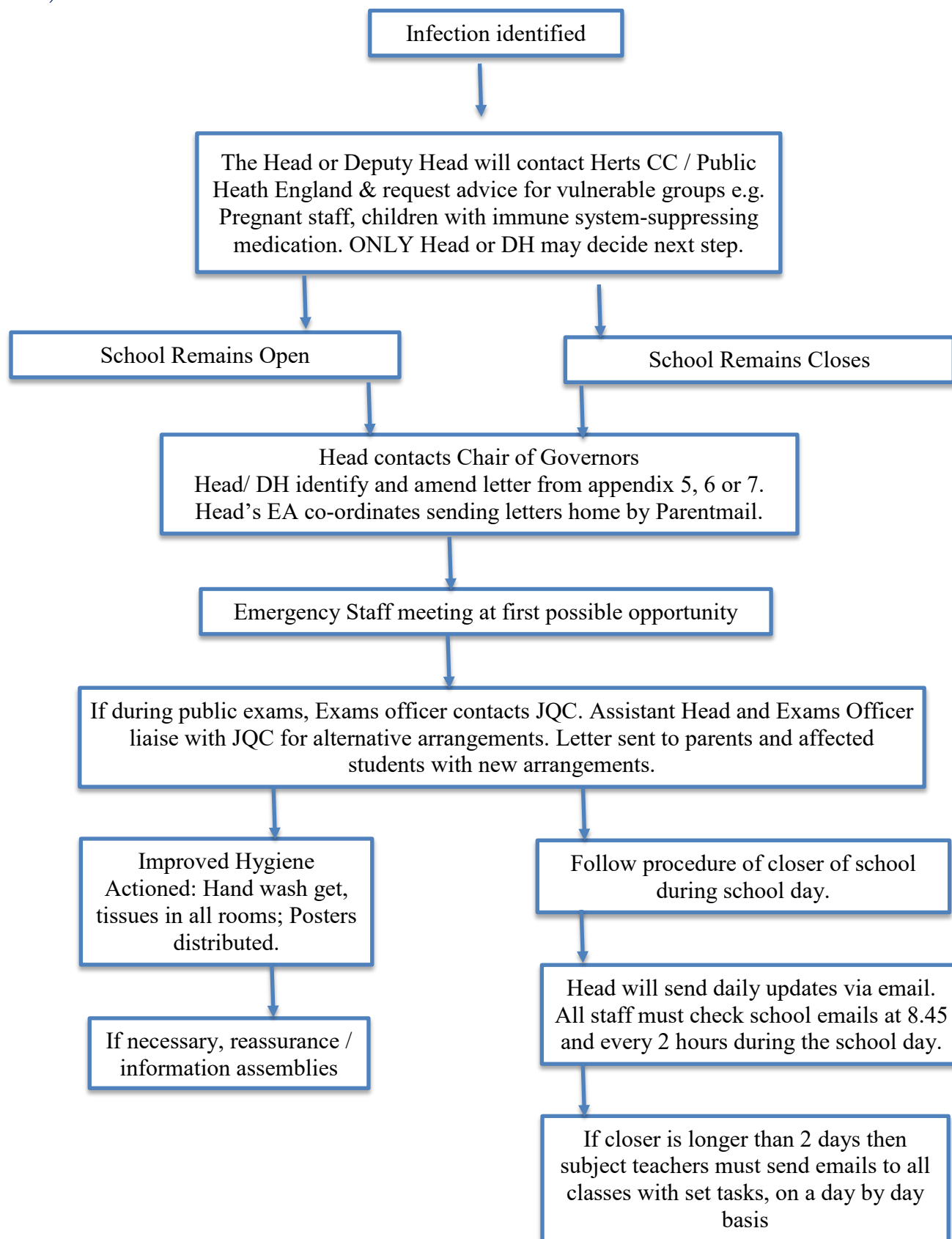
- We will notify parents by Parentmail that a case is confirmed.
- If the advice is that WGS remains open, children or staff showing symptoms will be required to stay away from school for 7 days/for at least 3 days after symptoms subside – whichever is the longer.
- Where a case is confirmed in a parent/carer/member of their immediate household, the infected person will be required to stay away from the school site for 7 days/for at least 3 days after symptoms subside – whichever is the longer. If the student is not showing any symptoms they will still be able to attend school if brought in by a well relative or friend, unless medical or Public Health England advice to the contrary.
- We will continue to keep our website updated with the latest information

b) Contact Numbers

Our local Health Protection Team is East of England: 0300 303 8537 Option 1. Second Floor, Goodman House, Station Approach, Essex. CM20 2ET. EastofEnglandHPT@phe.gov.uk

Non Emergency NHS: 111

c) Action Plan



Appendix 5 : Sample letter if advice is that infected children stay at home, but if uninfected others may come in to school despite infection of family members:

Dear Parents

As you may well have heard, **DISEASE NAME** has been spreading quickly through the Watford area along with other parts of SW Hertfordshire.

There have been several confirmed cases in SW Herts schools. The advice that we have had from the local Health Protection Team is that **COMPLETE WITH ADVICE – e.g. the infection is not life threatening although may involve unpleasant symptoms.**

Following a risk assessment carried out by Public Health England, the local NHS primary care trust and local authority, the school has been advised that no other actions are necessary and the school will remain open as usual.

⁴: **DISEASE NAME** is in the community and therefore, we have been advised that there is nothing to be gained from keeping healthy children away from school; they are as likely to catch **DISEASE NAME** outside of school as within.

With so many cases being reported, it is quite possible that a majority of schools in SW Herts will report cases within the next two weeks. All schools in SW Herts are also being advised to behave as they would with any similar illness. Schools will remain open unless we cannot guarantee that there will be enough adults to ensure safe supervision of children.

Parents are advised to manage common childhood symptoms e.g. treat fever with medication, ensure sufficient fluid intake etc. If the child is ill with **DISEASE-NAME** like symptoms they should be kept away from school to avoid infecting other children and staff. Siblings of children who have either been diagnosed with **DISEASE NAME** or who have **DISEASE NAME**-like symptoms should attend school as normal as long as they remain symptom-free.

If parents are concerned that their child is unwell and is displaying some of the symptoms of the infection, they should call the non emergency NHS contact number: 111 or their GP practice for more information.

For general information, please call the national **DISEASE NAME** information line **CONTACT NUMBER**. Information can also be found at www.nhs.uk and **DISEASE-SPECIFIC WEBSITE**.

Thank you for your co-operation at this difficult time. Please contact the school office should you have further concerns.

Yours sincerely

⁴ **DELETE THIS PARAGRAPH IF NOT APPLICABLE**

Appendix 6: Sample letter in the case of a meningococcal disease outbreak

Dear Parents

I am writing to inform you that a WGGs student has recently been admitted to hospital with suspected meningococcal infection. The school has taken advice from Herts CC and no further action is necessary at the present time. There is no reason to make any changes in the school's routine and no reason for children to be kept at home.

Meningococcal bacteria are carried in the back of the throat of about one in ten people at any one time, but only very rarely cause illness. Most people who carry the bacteria become immune to them. The bacteria do not spread easily and those who have had prolonged, close contact with the person with meningitis/septicaemia are at a slightly greater risk of getting ill. These people have been identified and given antibiotics to stop the bacteria spreading.

Although the risk of another case in the school is very small, it is sensible to be aware of the signs and symptoms: fever, vomiting, bruising rash, severe headache, rapid breathing, stiff neck, dislike of bright light, cold hands and feet, joint/muscle pain.

Not all of these signs and symptoms may show at once, but someone with this illness may become very ill. The illness may progress over one or two days but it can develop very rapidly, sometimes in a matter of hours.

Diagnosis in the early stages can sometimes be difficult. The early signs can be similar to bad 'flu symptoms but be watchful and use your judgement. If someone becomes ill with some of these signs or symptoms, contact the doctor urgently and ask for advice.

If you have individual worries about this case, you can speak to a member of the Health Protection Team on 0300 303 8537 during normal working hours. Further information is available 24 hours a day from The Meningitis Research Foundation www.meningitis.org 0808 800 3344 CHECK NUMBER, The National Meningitis Trust www.meningitis-trust.org 0845 6000 800 CHECK NUMBER and the non emergency NHS contact number: 111.

I will keep you informed should the situation change.

Yours sincerely

Appendix 6: Sample letter in the event of the school closing

Dear Parents

Public Health England has informed the school that some of its students have been diagnosed with **INSERT DISEASE NAME**.

The student is / students are receiving the appropriate medical care. **Close contacts of the student(s) are receiving antimicrobial drugs as a precaution – delete if inappropriate.**

Following a risk assessment carried out by Public Health England, the local NHS primary care trust and local authority, as a precaution the school has been advised to close temporarily with immediate effect for a period of **INSERT NUMBER** days. We plan to reopen on **_____**.

The school is working closely with the Public Health England, NHS colleagues and local authorities to monitor the situation.

If you or your child develops symptoms of **DISEASE-NAME**-like illness the advice of the Health Protection Agency is to stay at home and contact your GP or the non emergency NHS line: 111.. Each case will be assessed and, if necessary, testing and treatment will be provided.

Good basic hygiene can help to reduce transmission of most infections, including **DISEASE NAME**.

This includes:

- Covering your nose and mouth when coughing or sneezing, using a tissue when possible.
- Disposing of dirty tissues promptly and carefully.
- Washing your hands frequently with soap and water to reduce the spread of the virus from your hands to your face or to other people.
- Cleaning hard surfaces (such as door handles) frequently using a normal cleaning product.
- Making sure your children follow this advice.

For more information on **DISEASE NAME** call the national information line on **INSERT NUMBER**.

Alternatively, visit the Public Health England website: <https://www.gov.uk/government/organisations/public-health-england> **check this**, Your child will be able to continue with school work online via Lara.

Yours sincerely

Appendix 7: WHO threat levels

Inter-pandemic Period		
1	No new influenza virus subtypes detected in humans	UK not affected
2	Animal influenza virus subtype poses substantial risk	UK has strong travel/trade connections with affected country UK affected
Pandemic Alert Period		
3	Human infection(s) with a new subtype, but no new human to human spread to a close contact	UK not affected
4	Small cluster(s) with limited human-to human transmission but spread is highly localised, suggesting that the virus is not well adapted to humans	UK has strong travel/trade connections with affected country
5	Large cluster(s) but human-to-human spread still localised, suggesting that the virus is becoming increasingly better adapted to humans	UK affected
Pandemic Period		
6	Increased and sustained transmission in general population	UK Alert level 1 Virus/cases only outside the UK 2 Virus isolated in the UK 3 Outbreak(s) in the UK 4 Widespread activity across the UK
Post Pandemic Period		
	End of pandemic Return to inter-pandemic period	