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29 May 2020

Dear Parent/Guardian

MANAGING LEARNERS WITH COMORBIDITIES

There are many definitions of comorbidities. For our purposes, a comorbidity is deemed to be a chronic health condition or a concurrent illness which could have an impact of making the illness worse in co-occurrence with Covid-19.

We are aware that your child might be diagnosed with an existing comorbidity.

If this is correct, and in the interests of the safety of your child, this letter serves to offer you as a parent/guardian of a learner with a severe comorbidity, the option of keeping your child at home as a concession and overseeing his/her learning at home for the next while until the pandemic recedes.

If you wish to make use of this concession, you must please do the following:

1. Complete the attached form (Annexure I C))
2. Provide the school with a medical history report from the medical practitioner attending to their condition.

Besides supplying the documentation above, parents/guardians must agree to:

1. Create a conducive environment for their child to learn at home. This would include learning space, resources etc.
2. Accept the responsibility to oversee the daily learning of their children at home, including the daily work and assessments.
3. Accept the responsibility of ensuring that they are informed of what work must be learned and what work must be completed on a daily basis.
4. Ensure that all work and assignments are collected and delivered at school, as required by the school.

It is important that parents accept the responsibility for the daily learning of their child.

As your child is still an enrolled learner of Helderberg High School and receives regular input and support from their teachers, you as the parent/guardian remain responsible for the continued payment of school fees.

If you, as a parent/guardian of a learner with a comorbidity, is unable to accept this concession and the responsibilities associated with it, then your child should continue to attend school.

We look forward to your response and confirm our commitment to continue to support your child in his/her best interests.

Yours faithfully

A handwritten signature in black ink, appearing to read 'Ar Basson', with a long horizontal flourish extending to the right.

MR AR BASSON
PRINCIPAL



Annexure I (C)

Dear Principal

ACCEPTANCE FORM: LEARNERS WITH COMORBIDITIES

I, _____ **(Name of parent/guardian),**

parent/guardian of _____ **(Name of learner)**

from _____ **(Name of school)** hereby accept the concession offered to keep my child at home and oversee his/her learning while the Covid-19 restrictions are in place due to their current medical condition as outlined in the **attached** proof from their medical practitioner.

Comorbid condition: _____

I accept and agree that I will now take the responsibilities to oversee the learning of my child at home, as outlined in your letter.

I will also adhere to requests made regarding the completion of assessments and other requirements.

Signature: _____

Date: _____

