



Illness and Communicable Disease Policy

Introduction

The Illness and Communicable Disease Policy is to enable the school community to reduce the spread of Communicable Diseases and to respond in a positive and informed manner to Communicable Disease issues.

Purpose

1. To provide clear guidelines as to when children or supervisors should not attend school, due to their illness.
2. To profile immunisation as a means of reducing the spread of vaccine preventable diseases.
3. To raise awareness among parents / whanau/ caregivers, staff and students, of Communicable Disease and health issues.
4. To ensure that the principles of the Privacy Act 1993 are met.

Guidelines

1. General conditions indicating that a child should not attend:
 - The illness prevents the child from participating comfortably in programme activities.
 - The illness results in a greater care need than the school can reasonably provide without compromising the health and safety of other children.

- The child has any of the following conditions: fever, persistent crying, difficulty breathing, or other signs of possible severe illness.
- Diarrhoea: a general guideline is that no child should attend if they have diarrhoea, and they should have at least one normal bowel motions before returning to the school. If the diarrhoea was accompanied by any other symptoms such as fever, stomach pains, nausea, vomiting or headache, this indicates a gastrointestinal infection, and the child should stay away until at least 48 hours after the first normal bowel motion.
- Vomiting two or more times in the previous 24 hours, unless the vomiting is known to be caused by a non-communicable condition and the child is not in danger of dehydration. Repeated vomiting suggests an infection, so the child should be taken to the GP for a diagnosis.
- Mouth sores associated with an inability of the child to control his or her saliva unless the child's GP or Regional Public Health or the Medical Officer of Health advises that the child is non-infectious. Further Reference: Health (Infectious and Notifiable Diseases) Regulations 1998
- Rash with fever or behavioural change, until a doctor has determined that the illness is not a communicable disease.

2. Immunisation

- Shine Montessori Educare is required to keep an immunisation Register for all children born from January 1995.
- On enrolment, parents will be required to provide confirmation of their child's immunisation status.
- It is the responsibility of the Ministry of Health to identify children who are not immunised. They will check the register if there is a threat of disease in the school's catchment area.
- In the event of a vaccine preventable disease outbreak the Medical Officer of Health will make all decisions

regarding the welfare of all the children. Parents of children not immunised, or whose immunisation status is unclear, may be requested to keep their children at home for their own protection, until cleared by the Medical Officer of Health. (Regulation 14 of the Health Regulations 1998 Infectious and Notifiable Diseases) (See Appendix 1 "Exclusion")

- "Unimmunised" means they have not received at least one dose of measles or MMR vaccine after twelve months of age. This can be waived if the contact or their doctor can provide evidence of laboratory-proven measles infection in the past.
 - Information will be kept accurate and confidential in accordance with the Privacy Act.
3. Hepatitis B immunisation for staff will be encouraged by the school community.
 4. Questions and advice to the school community on any communicable disease issue may be directed to the Health Support Service.
 5. The school will arrange education sessions as needed for staff, on current practices concerning communicable disease prevention in the school community.
 6. This policy will be discussed by staff / BOT bi-annually to ensure continued awareness.
 7. Staff will be encouraged to seek professional development in order to provide health education on health issues.
 8. Employment/enrolment at the school will not be jeopardised by the presence of blood borne viruses.
 9. Because there is no basis for others needing to know HIV, Hepatitis B or C status, disclosure will be entirely voluntary.
 10. Rumours of students or staff with blood borne viruses in the school will neither be confirmed or denied.

11. The school will have in place standard safety and hygiene procedures, which adequately deal with infection control in the school community. (See Appendix 2)
12. Health information is stored and used according to the principles of the Privacy Act, 1993.
13. Health information is only used for the purpose for which it is collected.
14. Statistics are reported in a way that student or staff member are not identifiable.

EXCLUSION

- Education (Early Childhood Centres) 1998 Regulations 28
 - requires that the "licensee of a licensed centre must take all reasonable steps to ensure, that any child suffering from any infectious disease listed in the second schedule of the Health (Infectious and Notifiable Diseases) 1966, is excluded from the centre.
 - Any child who is suffering from any disease ... or from any ailment, illness, or other conditions affecting the child's health, may be excluded from attending any licensed centre at the discretion of the person responsible, for any period the person thinks appropriate.
- None of the Health Regulations affect a child's right to be enrolled at a centre.
- The Education (Early Childhood Centres) Regulations 1990 - Reg.31, imply but do not state, that "susceptible (unimmunised) teachers should also be excluded.

Where measles have been diagnosed

We have to rely upon the common sense of parents, teachers and the principal, and we ask "susceptible" students and teachers to stay away until fourteen days after the appearance of the last rash in the Preschool.

Note that the parents of excluded children often get angry, especially if it is later proven that the case was not e.g. measles after all. The Public Health Nurse and Medical Officer of Health, must do their best to defuse the situation, by explaining that often the diagnosis will not be proven in time but the public health action needs to be taken on suspicion. Children who are fully immunised for age are not excluded, and children may return following vaccination.

GUIDELINES

- Always wash hands:
 - Before preparing food
 - Before eating
 - After using the toilet
 - Before (if possible) and after giving first aid.

- Students and staff should wear adequate footwear to prevent puncture wounds to the feet.
- Always cover cuts and grazes, including your own.
- On the playground, any bleeding wounds must be covered immediately, before the child is allowed back to play.
- If possible wear disposable gloves when giving first aid or dealing with faeces or blood. If gloves are not available a towel or cloth will provide a barrier to blood.
- Blood spills and soiled instruments should be cleaned with an appropriate solution for 20 minutes before wiping dry.
- Used gloves, soiled dressings, etc should be wrapped in plastic bags, and disposed of properly. Hot cycle of the washing machine is adequate treatment for bloodied or soiled clothing and linen.
- Written procedures for first aid and cleaning blood spills will be displayed around the school on all first aid cabinets.