



WHANGANUI HIGH SCHOOL POLICY

INFECTIOUS DISEASES

Policy No: 5.9
(NAG 5)

INTRODUCTION	<ol style="list-style-type: none">1 The impact of any Potentially Infectious Diseases is a concern in our community. Whanganui High School is committed to creating a safe environment for all students and staff.2 The School has a role in emphasising attitudes and practices that will safeguard the well-being of people infected and in providing guidelines for dealing with potentially hazardous situations.
OBJECTIVES	<ol style="list-style-type: none">1 Ensure that staff, students and parents receive accurate information about the effects of infectious diseases.2 Provide a supportive environment for persons affected by an infectious disease.3 Develop confidence in staff and students to handle potentially hazardous situations involving these diseases.4 Ensure that employment policies do not discriminate against people on the grounds that they have a potentially infectious disease.
GUIDELINES	<ol style="list-style-type: none">1 Information about infectious diseases will be given to students as part of an ongoing integrated Health Education programme.2 Staff and parents will be informed about, and have the opportunity to be involved in educational programmes concerning these diseases when appropriate.3 The School will follow the specific guidelines suggested by the Ministry of Health to deal with blood spills (<i>refer Appendix 1</i>); or call in a specialist contractor if required.4 Any person with an infectious disease will be encouraged to seek treatment and must respect the rights of others to be infection free. Confidentiality in respect to the knowledge of an infected person may be waived, if the person is a danger to others because he/she does not respect the rights of others to be infection free.5 Employment will not be affected by the knowledge that a person has an infectious disease.6 In the event of a pandemic, the guidelines of the Ministry of Education and Ministry of Health will be followed.
EXPECTED OUTCOME	Staff, students and parents are given accurate information, and their well-being is safeguarded in potentially hazardous situations.
EVALUATION	The Board, in association with the Principal, will review this policy on a three-yearly cycle in accordance with the School's quality management cycle.

Approved by the Board
Signed Chairperson:

Date:

27/2/23

Signed Principal:

Date:

27/2/23

**GUIDELINES FOR INFECTION CONTROL OF RESPIRATORY, DROPLETS,
GASTRO AND OTHER BLOOD-BORNE VIRUSES IN SCHOOL**

- 1 **Before treating a child who is bleeding, make sure you cover any cuts or abrasions you may have on your hands and arms with a water-proof dressing.**
- 2 Wear gloves for all procedures.
- 3 Don't delay treatment of a child who is bleeding, ***under any circumstances***, because gloves are not immediately available. Use an absorbent barrier such as a towel, paper towel, handkerchief, etc. for an actively bleeding child.
- 4 Dispose of used gloves, soiled dressings, sanitary towels, tissues, etc., in a place where they will not be handled, eg. in bags which are burnt or buried.
- 5 Wipe clean and then sterilise all surfaces and instruments contaminated with blood. Make sure you use an effective disinfectant, eg. (one volume of household bleach to nine volumes of cold water.).
- 6 Soak surfaces for 20 minutes and then wipe dry. Prepare a fresh solution immediately before you want to use it.
- 7 Wash hands thoroughly when you have finished. Hand washing is usually adequate for non-blood secretions, but the above precautions (ie, gloves, etc.) can also be used.
- 8 Make sure that first-aid kits include disposable gloves, disposable wipes and towels, plastic bags for contaminated waste, a skin disinfectant and a bleach solution (or hypochlorite solution or granules) with instructions for use.
- 9 Refer to Ministry of Health guidelines for respiratory viruses causing coughing/sneezing droplets, eg. covering mouth and nose when coughing or sneezing. Good handwashing hygiene should be followed (*refer Appendix 2*).
- 10 Anyone presenting with a gastro virus should be sent home, and advised to seek medical attention if the virus lasts more than 48 hours. Good handwashing hygiene should be followed.
- 11 For information or advice contact the Whanganui District Health Board Public Health Services on 06 348 1775 or at <https://www.wdwb.org.nz/our-community/our-public-health-centre/wdwb-public-health-service/>

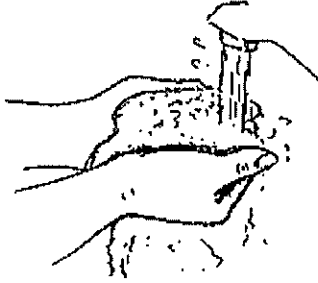
PROTECTING YOURSELF AND OTHERS AGAINST RESPIRATORY ILLNESS

HANDWASHING IS THE MOST IMPORTANT THING YOU CAN DO TO PROTECT YOURSELF

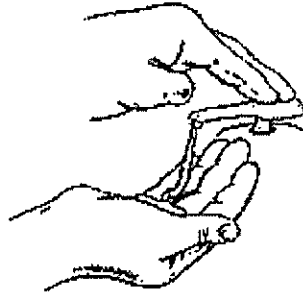
- Cover your nose and mouth when coughing or sneezing
- Use a tissue and dispose of this once used
- Always wash hands after coughing and sneezing or disposing of tissues
- Keep your hands away from your mouth, nose and eyes.
- Avoid contact with individuals at risk (eg, people with underlying or chronic illnesses such as immune suppression or lung disease) until the influenza-like symptoms have resolved.
- Avoid contact with people who have influenza-like symptoms.
- Ask students to use a tissue and cover their nose and mouth when coughing or sneezing and to wash and dry their hands afterwards.

Hand Hygiene with Soap and Water

1. Remove jewelry.
Wet hands with warm water



2. Add soap to palms



3. Rub hands together to create a lather



4. Cover all surfaces of the hands and fingers



5. Clean knuckles, back of hands and fingers



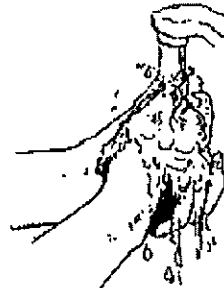
6. Clean the space between the thumb and index finger



7. Work the finger tips into the palms to clean under the nails



8. Rinse well under warm running water



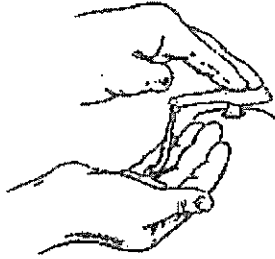
9. Dry with a single-use towel and then use towel to turn off the tap



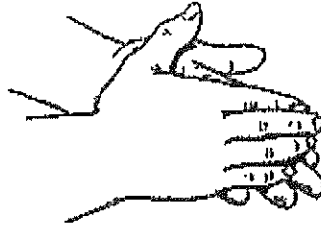
Minimum wash time 10-20 seconds.

Hand Hygiene with Alcohol-based Hand Sanitizer

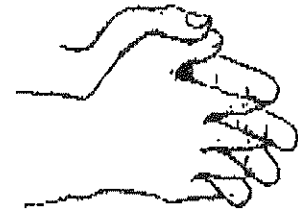
1. Remove jewelry. Apply enough product to open palms.**



2. Rub hands together palms to palms



3. Rub in between and around fingers



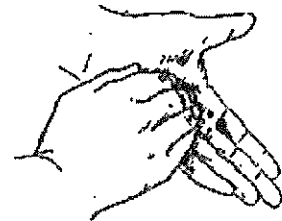
4. Cover all surfaces of the hands and fingers



5. Rub backs of hands and fingers. Rub each thumb.



6. Rub fingertips of each hand in opposite palm



7. Keep rubbing until hands are dry.















****The volume required to be effective varies from product to product. Enough product to keep hands moist for 15 seconds should be applied.**

Do not use these products with water. Do not use paper towels to dry hands.

Note: Wash hands with soap and water if hands are visibly dirty or contaminated with blood or other body fluids. Certain manufacturers recommend washing hands with soap and water after 5-10 applications of gel.

Infectious Diseases:

information & exclusion list

Condition	This disease is spread by	Early Symptoms	Time between exposure and sickness	Exclusion from school, early childhood centre, or work*
Rashes and skin infections				
Chickenpox 	Coughing, sneezing and contact with weeping blisters.	Fever and spots with a blister on top of each spot.	10-21 days after being exposed.	1 week from appearance of rash, or until all blisters have dried.
Hand, foot and mouth disease	Coughing, sneezing, and poor hand washing.	Fever, flu-like symptoms – rash on soles and palms and in the mouth.	3-5 days	Exclude until blisters have dried. If blisters able to be covered, and child feeling well they will not need to be excluded.
Head lice (Nits)	Direct contact with an infested person's hair.	Itchy scalp, especially behind ears. Occasionally scalp infections that require treatment may develop.	N/A	None, but ECC/school should be informed. Treatment recommended to kill eggs and lice.
Measles 	Coughing and sneezing. Direct contact with an infected person. Highly infectious.	Runny nose and eyes, cough and fever, followed a few days later by a rash.	7-18 days	5 days after the appearance of rash. Non-immune contacts of a case may be excluded.
Ringworm	Contact with infected skin, bedding and clothing.	Flat, ring-shaped rash.	4-6 weeks	None, but skin contact should be avoided.
Rubella (German Measles) 	Coughing and sneezing. Also direct contact with an infected person.	Fever, swollen neck glands and a rash on the face, scalp and body.	14-23 days	Until well and for 7 days from appearance of rash.
Scabies	Contact with infected skin, bedding and clothing.	Itchy rash.	4-6 weeks (but if had scabies before it may develop within 1-4 days)	Exclude until the day after appropriate treatment.
School sores (Impetigo)	Direct contact with infected sores.	Blisters on the body which burst and turn into scabby sores.	Variable	Until sores have dried up or 24 hours after antibiotic treatment has started.
Slapped cheek (Human parvovirus infection) 	Coughing and sneezing. The virus may be passed from mother to child during pregnancy.	Red cheeks and face-like rash on body.	4-20 days	Unnecessary unless unwell.
Diarrhoea & Vomiting illnesses				
Campylobacter Cryptosporidium Giardia Salmonella 	Undercooked food, contaminated water. Direct spread from an infected person or animal.	Stomach pain; fever, nausea, diarrhoea and/or vomiting.	Campylobacter 1-10 days Cryptosporidium 1-12 days Giardia 3-25 days Salmonella 6-72 hours	Until well and for 48 hours after the last episode of diarrhoea or vomiting. Cryptosporidium – do not use public pool for 2 weeks after symptoms have stopped. Salmonella – Discuss exclusion of cases and contacts with public health service.
Hepatitis A 	Contaminated food or water, direct spread from an infected person.	Nausea, stomach pain, general sickness, jaundice a few days later.	15-50 days	7 days from the onset of jaundice.
Norovirus 	Contact with secretions from infected people.	Nausea, diarrhoea and/or vomiting.	1-2 days	Until well and for 48 hours after the last episode of diarrhoea or vomiting.
Rotavirus 	Direct spread from infected person.	Nausea, diarrhoea and/or vomiting.	1-2 days	Until well and for 48 hours after the last episode of diarrhoea or vomiting.
Shigella 	Contaminated food or water, contact with an infected person.	Diarrhoea (may be bloody), fever, stomach pain.	12 hours-1 week	Discuss exclusion of cases and their contacts with public health service.
VTEC/STEC (Verocytotoxin- or shiga toxin-producing E. coli) 	Contaminated food or water, unpasteurised milk. Direct contact with animals or infected person.	High incidence of bloody diarrhoea, stomach pain. High rate of hospitalisation and complications.	2-10 days	Discuss exclusion of cases and their contacts with public health service.
Respiratory Infections				
Influenza and Influenza-like illness (ILI) 	Coughing and sneezing. Direct contact with infected person.	Sudden onset of fever with cough, sore throat, muscular aches and a headache.	1-4 days (average about 2 days)	Until well.
Streptococcal sore throat	Contact with secretions of a sore throat. (Coughing, sneezing etc)	Headache, vomiting, sore throat. An untreated sore throat could lead to rheumatic fever.	1-3 days	Exclude until well and/or has received antibiotic treatment for at least 24 hours.
Whooping cough (Pertussis) 	Coughing. Adults and older children can pass on the infection to babies.	Runny nose, persistent cough followed by "whoop", vomiting or breathlessness.	5-21 days	Five days from commencing antibiotic treatment or, if no antibiotic treatment then 21 days from onset of illness or until no more coughing, whichever comes first.
Other Infections				
Conjunctivitis (Pink eye)	Direct contact with discharge from the eyes or with items contaminated by the discharge.	Irritation and redness of eye. Sometimes there is a discharge.	2-10 days (usually 3-4 days)	While there is discharge from the eyes.
Meningococcal Meningitis 	Close contact with oral secretions. (Coughing, sneezing etc)	Generally unwell, fever, headache, vomiting, sometimes a rash. Urgent treatment is required.	3-7 days	Until well enough to return.
Meningitis – Viral	Spread through different routes including coughing, sneezing, faecal-oral route.	Generally unwell, fever, headache, vomiting.	Variable	Until well.
Mumps 	Coughing, sneezing and infected saliva.	Pain in jaw, then swelling in front of ear and fever.	12-25 days	Exclude until 5 days after facial swelling develops, or until well.

For further information contact:

Your Public Health Nurse

Your Public Health Service

Website: www.health.govt.nz and/or on National Transaktion 0800-44

Notifiable diseases (Doctors notify the Public Health Service)

Progression:  Progression:  Progression:  Progression:  Progression:  Progression:  Progression:  Progression: 

*Small children under 16 years of age should be professionally assessed for public health service.

New Zealand Government



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