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'STAY AT HOME IF UNWELL' POLICY

It is the endeavor of the school to provide a happy and healthy learning environment for every student and employee. Minimizing the spread of infections and communicable diseases plays a huge part in ensuring the health of the staff and students. Thus, this policy is to ensure that procedures are implemented to minimize the source and transmission of infection.

Students/staff members will be encouraged to stay at home if they are unwell. The school reserves the right not to admit any student or staff member onto the premises who appears to be unwell. A student or staff member who is unwell on arrival to school will be sent home to minimize the risk of cross infection. Any student who has any of the following symptoms should be seen by a physician or remain at home until fully recovered.

- a. Fever
- b. Diarrhea
- c. Vomiting
- d. Eye or ear discharge
- e. Red eye
- f. Rash of unknown origin
- g. Ring worm
- h. Known contagious infections

The school guideline is that such students/staff members are symptom free, prior to returning to school. An important way to reduce the spread of COVID-19 is to keep students/staff members who are ill, away from school.

- Advise all employees to stay home if they are sick until at least 24 hours after their fever is gone or after symptoms have improved
- Prepare and advise staff members on flexible leave policies and alternate work from home schedules. This will help prevent the spread of infection in school, allow staff members to continue to work or function while limiting contact with others, help maintain continuity of operations, and help student/staff members manage their health and their family's needs.
- Prepare for employees to stay home from work and plan ways for essential school functions to continue. Cross-train staff to perform essential functions so that the business can continue operating.

If a student develops sickness while in the school, then he/she needs to be assessed by the school doctor/nurse. They must have permission from their class teacher to come to the clinic bringing with them a Nurse pass. The clinic will notify the parents to collect the student from the school.

Students diagnosed with communicable disease may come back to school provided they are symptom free and have medical certificate given after a follow up with the doctor and was checked by the nurse in the school clinic.

DHA list of communicable diseases are as follows but not limited to the following:

Disease or condition	Incubation period (Approximately)	Exclusion cases	Exclusion contacts
Chicken pox	From two to three weeks. Usually, 13-17 days	Exclude from school until vesicles become dry or 10 days from appearance of rash	Not excluded
Conjunctivitis		Until discharges from eyes has ceased	Not excluded
Diphtheria	Two to five days	Until cultures are negative, until receipt of a medical certificate of recovery from infection	Domiciliary contacts excluded until investigated by medical officer and shown to be clear of infection
Giardiasis (Diarrhoea)	One to three weeks or longer; or average seven to ten days	Until diarrhea ceases	Not excluded
Hepatitis A	Fifteen to fifty days; the average twenty-eight to thirty days	Exclude from school or work for one week after the onset of illness or jaundice. Until receipt of a medical certificate of recovery from infection or on subsidence of symptoms	Not excluded
Hepatitis B	Sixty to ninety days: the range is forty-five to one hundred eighty days	Until recovered from acute attack	Not excluded
Impetigo (school sores)		Until sores have fully healed. The child may be allowed to return earlier provided that appropriate treatment has commenced and that sores on exposed surfaces such as scalp, face, hands or legs) are properly covered with occlusive dressings	

Measles (Rubella)	Appropriately ten days, but varies from seven to ten days and may be as long as fourteen days until the rash appears	Until at least five days from the appearance of rash, or until receipt of medical certificate of recovery from infection	Non-immunized contacts must be excluded for thirteen days from the first day of appearance of rash in the last case unless immunized within 72 hours of contact
Meningococcal infection	Commonly three to four days, but can vary from two to ten days	Until receipt of a medical certificate of recovery from infection	Household contacts must be excluded from school or child-care until they have received appropriate chemotherapy for at least 48 hours
Meningitis (Viral, Aseptic)	Varies with specific agent. Twelve to twentyfive days; commonly eighteen days	Exclusion from school, child-care or workplace until nine days after the onset of swelling. Until fully recovered.	Not excluded.
Pediculosis (Head lice)		Until appropriate treatment has commenced	Not excluded.
Pertussis (Whooping cough)	It is commonly seven to ten days; rarely more than fourteen days.	Until two weeks after the onset of illness and until receipt of a medical certificate of recovery from infection	Household contacts must be excluded from attending a children's services centre for twenty-one days after last exposure to infection if the contacts have not previously had whooping cough or immunization against whooping cough.
Poliomyelitis/ Acute flacid Paralysis (AFP)	Seven to fourteen days the range is three to thirty-five days for paralytic cases	Exclude from schools and children's settings until at least fourteen days after onset of illness and until receipt of a medical certificate of recovery from infection	Not excluded

Rubella (GERMAN MEASLES)	Sixteen to eighteen days	Exclude from school for at least five days after onset of the rash	Not excluded
Scabies	Two to six weeks before itching occurs in a person not previously infected if a person is re-exposed it is one to four days.	Until appropriate treatment has commenced.	Not excluded.
Shigellosis (Diarrhea)	From twelve hours to four days (Usually one to three days)	Until diarrhea ceases	Not excluded
Streptococcal infection including scarlet fever	One to three days	Exclude from schools and children's settings until a medical certificate of recovery from infection has been obtained	Not excluded
Trachoma	Varies	Until appropriate treatment has commenced	Not excluded
Tuberculosis	From infection to the primary lesion or significant tuberculin reaction; about four to twelve weeks.	Until receipt of a medical certificate from a health officer of the department that child is not considered to be infectious.	Not excluded
Typhoid fever	One to three weeks (depending on the infective dose from three days to three months)	Until receipt of a medical certificate of recovery from infection	Not excluded unless the medical officer of a health of the department considers exclusion to be necessary.

Signed by:



Ms. Shiny Davison
Principal

Date: 08.22.2022