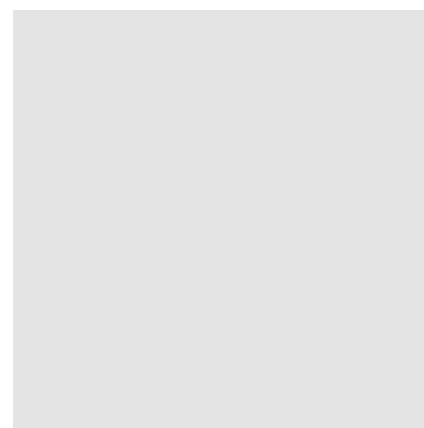
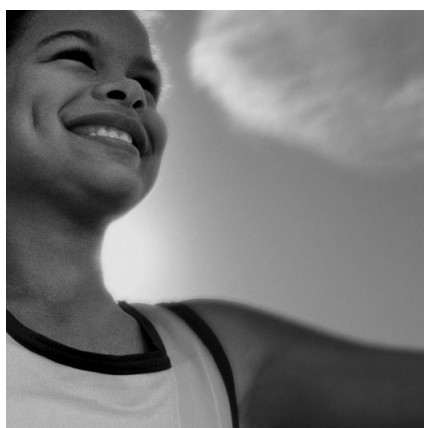
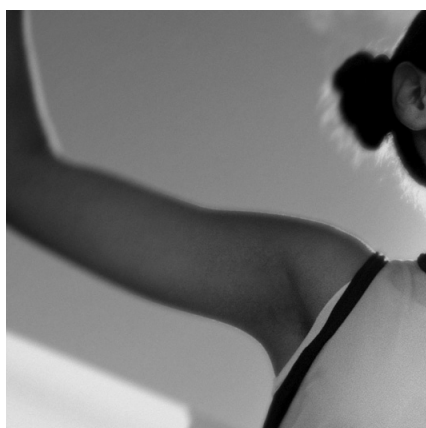




Keeping students healthy

Helping children prevent illness



By encouraging your child to be physically active from an early age you can help them to develop healthy habits that will continue throughout their lives.

How to encourage your child to be active

- You are a role model for your child – if your child sees you enjoying physical activity it can encourage them to participate.
- Make time to be active as a family – go for a bushwalk or beach walk, go bike riding or walk the dog
- Buy gifts that encourage physical activity, such as bats and balls
- Have a basketball or netball hoop installed at your house, keep balls in the car for visits to the park
- Start slowly and build up the amount of activity if your child is not currently active.

For more ideas about healthy lifestyles
www.healthykids.nsw.gov.au

Sun protection

Most of the sun exposure that causes skin damage occurs during childhood and adolescence, so our school has in place sun protection policies and practices aimed at protecting children from the damaging effects of the sun.

At school your child will be encouraged to protect their skin by:

- Reducing their exposure to the sun
- Wearing a hat in the playground
- Having a 'No hat, play in the shade' policy for recess and lunchtime
- Wearing clothing with collars
- Remaining in the shade whenever possible, particularly during peak UV times.

Please apply 15+ broad-spectrum sunscreen on your child each day before school.

To prevent illness, children need to:

- Eat plenty of fruits and vegetables and drink lots of water
- Get enough sleep at night
- Have time to rest without planned activities
- Wash hands regularly with soap and running water
- Try to avoid contact with people who are not well.

If your child is sick

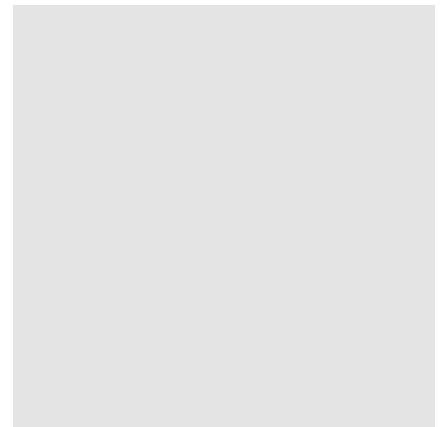
Keep your child away from school and see your doctor if your child has any of the following:

- A fever of 38° C or above
- Vomiting or diarrhoea
- Severe cold or flu symptoms
- Rashes of an unknown origin.



Head lice

A guide for parents



Anyone can get head lice and it is common for school children to get head lice at some time. Head lice can spread when children's hair comes into contact with one another. Although itchy and annoying head lice do not harm your child.

To prevent getting head lice

- Tie your child's hair back
- Tell your child not to share hats or clothes
- Check your child's hair regularly.

If your child has head lice

- Continue to send your child to school
- Inform the school so they can inform others to check their children's hair, your child does not have to be identified
- Do not use household chemicals (such as kerosene or methylated spirits) to treat head lice.

Comb and conditioner method

Head lice breathe through small openings along their abdomens called spiracles. Coating hair in something thick and slimy like a white hair conditioner makes these openings close over, shutting down the louse's breathing for about 20 minutes. Although the louse will not die with this method, it does slow it down so that you can comb them out.

You can do the following:

- Sit your child in a low position in front of you and put on a video or DVD for your child to watch while you work.
- Wrap a towel or kitchen paper around your child's shoulders to catch conditioner spill.

- Apply lots of conditioner to the scalp and massage it through all hair shafts. Lice live close to the scalp, so make sure that you cover the hair shaft close to the scalp. Combing will spread the conditioner onto the rest of the length of hair. Every hair has to be coated to ensure it reaches the lice.
- When the hair is detangled and manageable, use a fine lice comb to comb out each section several times.
- After each comb out, wipe the conditioner on the paper towel. If the child has head lice, you will see them on the towel.

- Keep combing each section of hair until no further lice, nymphs or eggs appear on the paper towel. Often you will see lots of old egg casings that may take a while to remove.
- Once you have combed and recombbed each section of hair, either re-plait or tie it back.

Commercial lice treatment

A commercial lice treatment (available from your local chemist) can be effective, but you will need to read the label and follow the safety instructions carefully.

Generally, treatment must be applied twice (one week apart) to catch all growth stages of the lice.

When using a lice treatment only treat the heads that actually have head lice or else you are really just contributing to lice resistance of treatment to products.

USEFUL TIPS

Head lice often gather on the crown of the head. A good head lice comb should also remove nymphs, the stage between egg and adult louse— teenagers really. These can be difficult to identify with the naked eye, but appear as small insects on the paper towel.

For more information

www.health.nsw.gov.au/headlice

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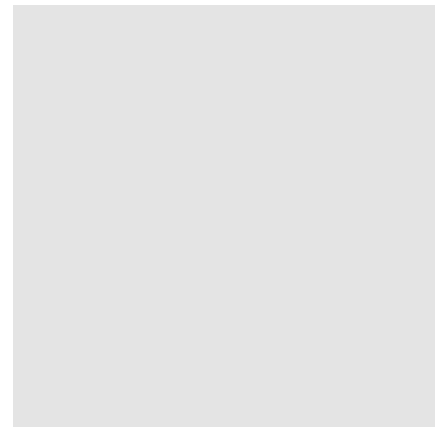
T 9561 8000

www.schools.nsw.edu.au



Fun food ideas

Making lunch and recess more appealing for your child



NSW public schools are embracing the Fresh tastes @ school program for healthy school canteens. School canteens now have yummy wraps, focaccias, noodle and rice dishes.

Here are some ideas to make recess and lunch more likely to be eaten.

- Try to involve your child in selecting what to pack in their lunch box.
 - Pack recess (or fruit break) and lunch separately
 - Try to add variety. No one likes to eat the same thing every day
 - You can get variety in bread by using wraps, pita bread, focaccia, and a variety of bread rolls
 - Some healthy snacks include dried fruit, popcorn, pretzels, yoghurt, scones and pikelets
 - Carrots, cucumber and celery cut in strips can be dipped in various healthy dips for snacks
 - Keep treat foods, such as chocolate, chips, energy bars and cakes to an occasional lunchbox item
- You can use left overs from the night before, such as sausages, pizza, quiche and rissoles
 - Foods stay fresher and tastier if they are individually wrapped – waxed paper is easier for children to unwrap than cling wrap
 - Keep it simple. Even with good intentions, it is easy to pack too many food choices and too much food
 - Children are likely to choose the easy foods first and may not end up eating their 'proper' lunch
 - Provide portions that are small enough for your child to eat
 - If your child hasn't finished everything, find out why and try to address this when you pack lunch the next day.

Be aware of anaphylaxis

There may be students at school that have a severe allergic reaction to nuts or other foods which may even be life threatening. We may discourage the use of peanut butter or other foods for this reason. So please check with the school office or watch the newsletter to find out more.

Water wisdom

Water is the best thirst quencher. Soft drinks and juices are not encouraged at school as they contain sugar. Children are encouraged to drink water through the day at school. Please supply your child with a drink bottle so that they can fill it throughout the day. This can be frozen overnight to keep it cool.

For more ideas go to

www.healthykids.nsw.gov.au



Infectious diseases

An overview

Some illnesses may be infectious. To prevent these infections spreading to other students, please see your doctor and keep your child at home for the advised time.

Infectious disease	Time from exposure to illness	Symptoms	Do I need to keep my child home?	How can I help prevent spread?
Chicken pox	2 to 3 weeks.	Slight fever, runny nose, and a rash that begins as raised pink spots that blister and scab.	Yes, for 5 days after the rash first appears and until the blisters have all scabbed over.	Immunisation is available for children over 18 months old. It is recommended for people over 12 years who are not immune.
Conjunctivitis	1-3 days.	The eye feels scratchy, is red and may water. Lids may stick together on waking.	Yes, while there is discharge from the eye.	Careful hand washing; avoid sharing towels. Antibiotics may be needed.
Gastroenteritis	Depends on the cause: several hours to several days.	A combination of frequent loose or watery stools, vomiting, fever, stomach cramps, headaches.	Yes, at least for 24 hours after diarrhoea stops.	Careful hand washing with soap and water after using the toilet or handling nappies and before touching food.
German measles (Rubella)	2 to 3 weeks.	Often mild or no symptoms; mild fever, runny nose, swollen nodes, pink blotchy rash that lasts a short time.	Yes, for at least 4 days after the rash appears.	Immunisation (MMR) at 12 months and 4 years of age.
Glandular fever	4 to 6 weeks.	Fever, headache, sore throat, tiredness, swollen nodes.	No, unless sick.	Careful hand washing, avoid sharing drinks, food and utensils and kissing.

Infectious disease	Time from exposure to illness	Symptoms	Do I need to keep my child home?	How can I help prevent spread?
Hand, foot and mouth disease	3 to 7 days.	Mild illness, perhaps with a fever, blisters around the mouth, on the hands and feet	Yes, until the blisters have dried.	Careful hand washing especially after wiping noses, using the toilet and changing nappies.
Head lice	Time from infestation to eggs hatching usually 5 to 7 days.	Itchy scalp, white specks stuck near the base of the hairs, lice may be found on the scalp.	No, as long as headlice management is ongoing.	Family, friends and classroom contacts should be examined and managed if infested.
Hepatitis A	About 2 to 6 weeks.	Often none in small children; sudden fever, loss of appetite, nausea, vomiting, jaundice (yellowing of skin and eyes), dark urine, pale stools.	Yes, for 2 weeks after first symptoms or 1 week after onset of jaundice.	Careful hand washing; close contacts may need to have an injection of immunoglobulin; immunisation recommended for some people.
Impetigo (school sores)	1 to 3 days.	Small red spots change into blisters that fill with pus and become crusted; usually on the face, hands or scalp.	Yes, until treatment starts. Sores should be covered with a watertight dressing	Careful hand washing.
Influenza	1 to 3 days.	Sudden onset fever, runny nose, sore throat, cough, muscle and headaches.	Yes, until they feel better.	Immunisation, is recommended for the elderly and people with chronic illnesses.
Measles	About 10 to 12 days until first symptoms, and 14 days until the rash develops.	Fever, tiredness, runny nose, cough and sore red eyes for a few days followed by a red blotchy rash that starts on the face and spreads down the body and lasts 4 to 7 days.	Yes, for at least 4 days after the rash appears	Immunisation (MMR) at 12 months and 4 years. Contacts who are not immune should not attend school or work for 14 days.
Meningococcal Disease	2 to 10 days.	Sudden onset of fever and a combination of headache, neck stiffness, nausea, vomiting, drowsiness and rash.	Seek medical help immediately. Patient will need hospital treatment	Close contacts should see their doctor urgently if symptoms develop, and may need to have a special antibiotic. Immunisation with Meningococcal C vaccine at 12 months of age.
Mumps	14 to 25 days.	Fever, swollen and tender glands around the jaw.	Yes, for 9 days after onset of swelling.	Immunisation (MMR) at 12 months and 4 years of age.
Ringworm	Varies (may be several days).	Small scaly patch on the skin surrounded by a pink ring.	Yes, until the day after fungal treatment has begun.	Careful hand washing.

Infectious disease	Time from exposure to illness	Symptoms	Do I need to keep my child home?	How can I help prevent spread?
Scabies	New infections: 2 to 6 weeks; reinfections: 1 to 4 days.	Itchy skin, worse at night. Worse around wrists, armpits, buttocks, groin and between fingers and toes.	Yes, until the day after treatment has begun.	Close contacts should be examined for infestation and treat if necessary. Wash linen, towels and clothing worn in the past 2 days in hot water and detergent.
Scarlet fever	1 to 3 days.	Sudden onset sore throat, high fever and vomiting, followed by a rash in 12 to 36 hours.	Yes, until at least 24 hours of treatment has begun and the child is feeling better.	Careful hand washing. Sick contacts should see their doctor.
Slapped cheek (Erythema infectiosum, Fifth disease, Parvovirus B19)	1 to 2 weeks.	Mild illness; fever, red cheeks, itchy lace-like rash and possibly cough, sore throat or runny nose. Can cause foetal disease in pregnant women.	No, most infectious before the rash appears.	Careful hand washing; avoid sharing drinks.
Whooping cough (pertussis)	7 to 20 days.	Starts with runny nose, followed by persistent cough that comes in bouts. Bouts maybe followed by vomiting and a whooping sound as the child gasps for air.	Yes, until the first 5 days of a special antibiotic have been taken.	Immunisation at 2,4,6, and 18 months and 4 years of age. A special antibiotic can be given for the patient and close contacts. Unimmunised contacts may be excluded from child care until the first 5 days of a special antibiotic has been taken.
Worms	Several weeks.	Itchy bottom.	No.	Careful hand washing. Whole household should be treated. Wash linen, towels and clothing worn in the past 2 days in hot water and detergent.

Referenced www.health.nsw.gov.au

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For more information please contact your doctor, local public health unit or community health centre - look under NSW Government at the front of the White Pages.