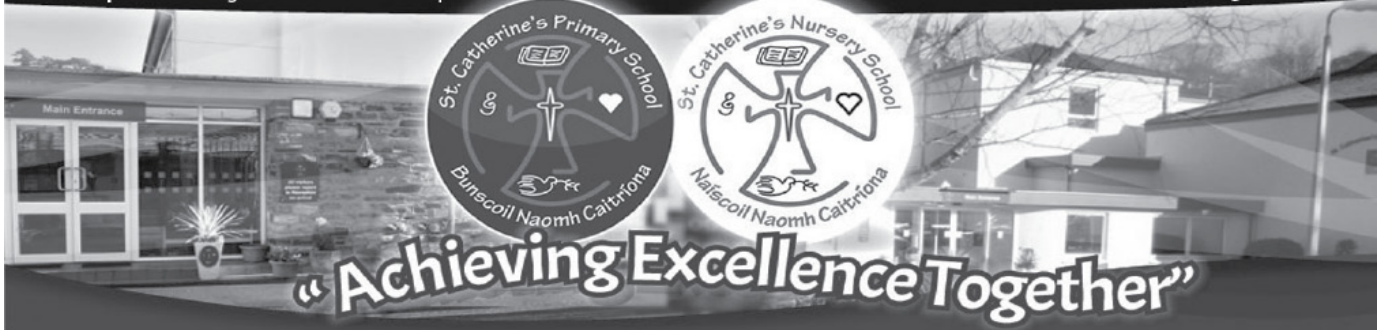


# St. Catherine's Primary School

Principal: Mrs. Bridget Wilders B.Ed. P.G. Dip.Ed. P.Q.H.

Email: [bwilders592@c2kni.net](mailto:bwilders592@c2kni.net)



## JUNIOR SITE

Phone: (028) 7138 2272

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Strabane

Co. Tyrone

BT82 8HT

## SENIOR SITE

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## WEEKLY NOTE - Monday 30th April 2018

Check us out on our website: [www.stcatherinesps.co.uk](http://www.stcatherinesps.co.uk)

Download Our **FREE** School App

St Catherines PS, Strabane



Facebook : StCatherines PrimarySchool



Follow us on Twitter : stcatherinesps



Follow us on Instagram : St Catherine's Primary School

# Bank Holiday and Election Day School Closure

As our school is used as a polling station, we will be closed on **Thursday 3rd May due to ELECTION DAY**. School will reopen as usual on Friday 4th May.

However School will close on **Monday 7th May** due to the annual Bank Holiday but will open as usual on Tuesday 8th May.



*God bless you all! Bridget Wilders, Principal*

# Guidance on Infection Control: Advice for Parents

From time to time our children take infections and ailments. Common infections that “do the rounds” in Nursery, Primary Schools and child care settings are Flu, Tummy Bugs, Slapcheek, Scarlet Fever, Chicken Pox, impetigo, hand, foot and mouth, headlice etc.

We are sending home a little advice sheet from HSC Public Health Agency for parents to peruse to guide you and help you understand more about these infections.

However if parents need further advice re infections that their children may contract, do not hesitate to contact the GP or School Nurse. (Ms Celine Ward, Strabane Health Centre).

Prevent the spread of infections by ensuring: routine immunisation, high standards of personal hygiene and practice, particularly handwashing, and maintaining a clean environment. Please contact the Public Health Agency **Health Protection Duty Room (Duty Room) on 0300 555 0119** or visit [www.publichealth.hscni.net](http://www.publichealth.hscni.net) or [www.gov.uk/government/organisations/Public-health-england](http://www.gov.uk/government/organisations/Public-health-england) if you would like any further advice or information, including the latest guidance. Children with rashes should be considered infectious and assessed by their doctor.

Rashes and skin infections	Recommended period to be kept away from school, nursery or childminders	Comments
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended
Chickenpox*	Until all vesicles have crusted over	See: Vulnerable children and female staff – pregnancy
Cold sores, (Herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting
German measles (rubella)*	Four days from onset of rash (as per “Green Book”)	Preventable by immunisation (MMR x 2 doses). See: Female staff – pregnancy
Hand, foot and mouth	None	Contact the Duty Room if a large number of children are affected. Exclusion may be considered in some circumstances
Impetigo	Until lesions are crusted and healed, or 48 hours after commencing antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles*	Four days from onset of rash	Preventable by vaccination (MMR x 2). See: Vulnerable children and female staff – pregnancy
Molluscum contagiosum	None	A self-limiting condition
Ringworm	Exclusion not usually required	Treatment is required
Roseola (infantum)	None	None
Scabies	Child can return after first treatment	Household and close contacts require treatment
Scarlet fever*	Child can return 24 hours after commencing appropriate antibiotic treatment	Antibiotic treatment recommended for the affected child. If more than one child has scarlet fever contact PHA Duty Room for further advice
Slapped cheek (fifth disease or parvovirus B19)	None once rash has developed	See: Vulnerable children and female staff – pregnancy
Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune i.e. have not had chickenpox. It is spread by very close contact and touch. If further information is required, contact the Duty Room. SEE: Vulnerable Children and Female Staff – Pregnancy
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms

<b>Diarrhoea and vomiting illness</b>	<b>Recommended period to be kept away from school, nursery or childminders</b>	<b>Comments</b>
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting	
<i>E. coli</i> O157 VTEC*	Should be excluded for 48 hours from the last episode of diarrhoea	Further exclusion is required for young children under five and those who have difficulty in adhering to hygiene practices
Typhoid* [and paratyphoid*] (enteric fever)	Further exclusion may be required for some children until they are no longer excreting	Children in these categories should be excluded until there is evidence of microbiological clearance. This guidance may also apply to some contacts of cases who may require microbiological clearance
Shigella* (dysentery)		Please consult the Duty Room for further advice
Cryptosporidiosis*	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled

<b>Respiratory infections</b>	<b>Recommended period to be kept away from school, nursery or childminders</b>	<b>Comments</b>
Flu (influenza)	Until recovered	See: Vulnerable children
Tuberculosis*	Always consult the Duty Room	Requires prolonged close contact for spread
Whooping cough* (pertussis)	48 hours from commencing antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. The Duty Room will organise any contact tracing necessary

<b>Other infections</b>	<b>Recommended period to be kept away from school, nursery or childminders</b>	<b>Comments</b>
Conjunctivitis	None	If an outbreak/cluster occurs, consult the Duty Room
Diphtheria *	Exclusion is essential. Always consult with the Duty Room	Family contacts must be excluded until cleared to return by the Duty Room. Preventable by vaccination. The Duty Room will organise any contact tracing necessary
Glandular fever	None	
Head lice	None	Treatment is recommended only in cases where live lice have been seen
Hepatitis A*	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)	The duty room will advise on any vaccination or other control measure that are needed for close contacts of a single case of hepatitis A and for suspected outbreaks.
Hepatitis B*, C, HIV/AIDS	None	Hepatitis B and C and HIV are bloodborne viruses that are not infectious through casual contact. For cleaning of body fluid spills. SEE: Good Hygiene Practice
Meningococcal meningitis*/septicaemia*	Until recovered	Some forms of meningococcal disease are preventable by vaccination (see immunisation schedule). There is no reason to exclude siblings or other close contacts of a case. In case of an outbreak, it may be necessary to provide antibiotics with or without meningococcal vaccination to close contacts. The Duty Room will advise on any action needed.
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case. The Duty Room will give advice on any action needed
Meningitis viral*	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case. Contact tracing is not required
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. If further information is required, contact the Duty Room
Mumps*	Exclude child for five days after onset of swelling	Preventable by vaccination (MMR x 2 doses)
Threadworms	None	Treatment is recommended for the child and household contacts
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic

\* denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the Director of Public Health via the Duty Room.

**Outbreaks:** if a school, nursery or childminder suspects an outbreak of infectious disease, they should inform the Duty Room.

## Good hygiene practice

**Handwashing** is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting, and respiratory disease. The recommended method is the use of liquid soap, warm water and paper towels. Always wash hands after using the toilet, before eating or handling food, and after handling animals. Cover all cuts and abrasions with waterproof dressings.

**Coughing and sneezing** easily spread infections. Children and adults should be encouraged to cover their mouth and nose with a tissue. Wash hands after using or disposing of tissues. Spitting should be discouraged.

**Personal protective equipment (PPE).** Disposable non-powdered vinyl or latex-free CE-marked gloves and disposable plastic aprons must be worn where there is a risk of splashing or contamination with blood/body fluids (for example, nappy or pad changing). Goggles should also be available for use if there is a risk of splashing to the face. Correct PPE should be used when handling cleaning chemicals.

**Cleaning** of the environment, including toys and equipment, should be frequent, thorough and follow national guidance. For example, use colour-coded equipment, follow Control of Substances Hazardous to Health (COSHH) regulations and correct decontamination of cleaning equipment. Monitor cleaning contracts and ensure cleaners are appropriately trained with access to PPE.

**Cleaning of blood and body fluid spillages.** All spillages of blood, faeces, saliva, vomit, nasal and eye discharges should be cleaned up immediately (always wear PPE). When spillages occur, clean using a product that combines both a detergent and a disinfectant. Use as per manufacturer's instructions and ensure it is effective against bacteria and viruses and suitable for use on the affected surface. Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below. A spillage kit should be available for blood spills.

**Laundry** should be dealt with in a separate dedicated facility. Soiled linen should be washed separately at the hottest wash the fabric will tolerate. Wear PPE when handling soiled linen. Children's soiled clothing should be bagged to go home, never rinsed by hand.

**Clinical waste.** Always segregate domestic and clinical waste, in accordance with local policy. Used nappies/pads, gloves, aprons and soiled dressings should be stored in correct clinical waste bags in foot-operated bins. All clinical waste must be removed by a registered waste contractor. All clinical waste bags should be less than two-thirds full and stored in a dedicated, secure area while awaiting collection.

**Sharps, eg needles,** should be discarded straight into a sharps bin conforming to BS 7320 and UN 3291 standards. Sharps bins must be kept off the floor (preferably wall-mounted) and out of reach of children.

## Sharps injuries and bites

If skin is broken as a result of a used needle injury or bite, encourage the wound to bleed/wash thoroughly using soap and water. Contact GP or occupational health or go to A&E immediately. Ensure local policy is in place for staff to follow. Contact the Duty Room for advice, if unsure.

## Animals

Animals may carry infections, so wash hands after handling animals. Health and Safety Executive for Northern Ireland (HSENI) guidelines for protecting the health and safety of children should be followed.

**Animals in school** (permanent or visiting). Ensure animals' living quarters are kept clean and away from food areas. Waste should be disposed of regularly, and litter boxes not accessible to children. Children should not play with animals unsupervised. Hand-hygiene should be supervised after contact with animals and the area where visiting animals have been kept should be thoroughly cleaned after use. Veterinary advice should be sought on animal welfare and animal health issues and the suitability of the animal as a pet. Reptiles are not suitable as pets in schools and nurseries, as all species carry salmonella.

**Visits to farms.** For more information see <https://www.hseni.gov.uk/publications/preventing-or-controlling-ill-health-animal-contact-visitor-attractions>

## Vulnerable children

Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers, on high doses of steroids and with conditions that seriously reduce immunity. Schools and nurseries and childminders will normally have been made aware of such children. These children are particularly vulnerable to chickenpox, measles and parvovirus B19 and, if exposed to either of these, the parent/carer should be informed promptly and further medical advice sought. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza. This guidance is designed to give general advice to schools and childcare settings. Some vulnerable children may need further precautions to be taken, which should be discussed with the parent or carer in conjunction with their medical team and school health.

## Female staff\* – pregnancy

If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash, this should be investigated by a doctor who can contact the duty room for further advice. The greatest risk to pregnant women from such infections comes from their own child/children, rather than the workplace.

- Chickenpox can affect the pregnancy if a woman has not already had the infection. Report exposure to midwife and GP at any stage of pregnancy. The GP and antenatal carer will arrange a blood test to check for immunity. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles.
- German measles (rubella). If a pregnant woman comes into contact with German measles she should inform her GP and antenatal carer immediately to ensure investigation. The infection may affect the developing baby if the woman is not immune and is exposed in early pregnancy.
- Slapped cheek disease (fifth disease or parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), inform whoever is giving antenatal care as this must be investigated promptly.
- Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed she should immediately inform whoever is giving antenatal care to ensure investigation.
- All female staff born after 1970 working with young children are advised to ensure they have had two doses of MMR vaccine.

\*The above advice also applies to pregnant students.

## Immunisations

Immunisation status should always be checked at school entry and at the time of any vaccination. Parents should be encouraged to have their child immunised and any immunisation missed or further catch-up doses organised through the child's GP.

For the most up-to-date immunisation advice and current schedule visit [www.publichealth.hscni.net](http://www.publichealth.hscni.net) or the school health service can advise on the latest national immunisation schedule.



When to immunise	Diseases vaccine protects against	How it is given
2 months old	Diphtheria, tetanus, pertussis (whooping cough), polio and Hib Pneumococcal infection Rotavirus Meningococcal B infection	One injection One injection Orally One injection
3 months old	Diphtheria, tetanus, pertussis, polio and Hib Rotavirus	One injection Orally
4 months old	Diphtheria, tetanus, pertussis, polio and Hib Pneumococcal infection Meningococcal B infection	One injection One injection One injection
Just after the first birthday	Measles, mumps and rubella Pneumococcal infection Hib and meningococcal C infection Meningococcal B infection	One injection One injection One injection One injection
Every year from 2 years old up to P7	Influenza	Nasal spray or injection
3 years and 4 months old	Diphtheria, tetanus, pertussis and polio Measles, mumps and rubella	One injection One injection
Girls 12 to 13 years old	Cervical cancer caused by human papillomavirus types 16 and 18 and genital warts caused by types 6 and 11	Two injections over six months
14 to 18 years old	Tetanus, diphtheria and polio Meningococcal infection ACWY	One injection One injection

This is the Immunisation Schedule as of July 2016. Children who present with certain risk factors may require additional immunisations. Always consult the most updated version of the "Green Book" for the latest immunisation schedule on [www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book#the-green-book](http://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book#the-green-book)

From October 2017 children will receive hepatitis B vaccine at 2, 3, and 4 months of age in combination with the diphtheria, tetanus, pertussis, polio and Hib vaccine.

**Staff immunisations.** All staff should undergo a full occupational health check prior to employment; this includes ensuring they are up to date with immunisations, including two doses of MMR.

Original material was produced by the Health Protection Agency and this version adapted by the Public Health Agency,  
12-22 Linenhall Street, Belfast, BT2 8BS.  
Tel: 0300 555 0114.  
[www.publichealth.hscni.net](http://www.publichealth.hscni.net)  
Information produced with the assistance of the Royal College of Paediatrics and Child Health and Public Health England.

# New Bicycle Parking Stands for St. Catherine's!



Our Sustrans Officer, Mr Ronan Mc Laughlin, has very kindly donated bicycle parking stands to our Senior Site. They are located in the main playground beside the Year 5 C classroom! We are delighted to report that there are now Bicycle Parking Stands on both sites as in the Junior School they are located at the top of the main playground also!

Now is the time in the better weather to get walking, cycling or scooting to and from school! #getactive

# Summer Uniform

Every Year around the beginning of May we switch to our Summer Uniform..... weather permitting of course! Children may wear their Summer Uniform from Tuesday 7th May onwards .... Hopefully the weather will reflect SUMMER!

Our Summer Uniform is as follows.....

**Girls:** Blue/ White Summer Dress , white socks (full length or ankle socks) and black shoes. Current school jumper or cardigan can also be worn with their dress.

**Boys:** Plain white poloshirt, PLAIN NAVY Shorts or school navy trousers, black/ navy socks, black shoes or PLAIN BLACK Trainers. Current school jumper or cardigan can also be worn.

It is to be noted that our Summer School Uniform is NOT compulsory and parents need not feel under any pressure to purchase it. If parents do not wish to use the Summer Uniform the current uniform is fine. Many thanks!

It is to be noted also that little Nursery Pupils (poloshirt with logo, sweatshirt with logo and navy jogging bottoms) wear the same Uniform all year round.

## Summer Uniform

### Girls



Light blue and white checked dress

White full length/ ankle socks



Children can wear their Jumper/ Cardigan all year round

### Boys



White polo shirt  
Navy trouser shorts/ trousers  
Navy/ black socks

All children should wear plain black shoes/ trainers



# P.T.F.A. Fun Event

PTFA are hosting a **DENIM MOVIE Day** on Friday 4th May.

All children should wear **DENIM** and casual "Cool" Clothes to school on this day. A movie will be shown for each class.

Children should donate £1 to school funds.

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## MORE Uniform NEWS!!

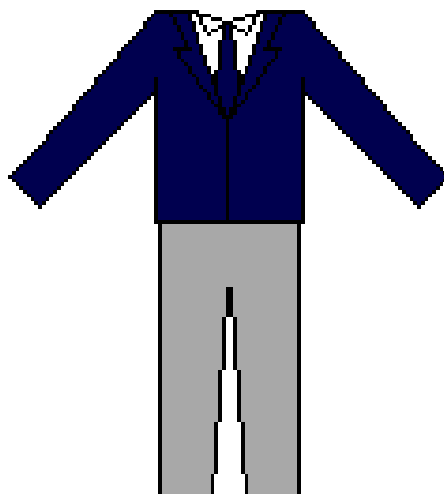
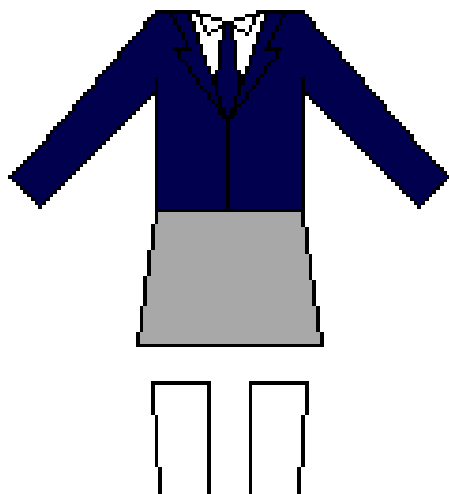
As you know, our Uniform Supplier is SELECT KIDZ who are based in Derry.

They have asked us to let parents know that they have now moved premises to their new shop at 105 Spencer Road, Derry BT47 6AE.

The staff from Select Kidz will be running

a Uniform Savings Club again this year in St Catherine's for any parent who would like to join.

Parents report to us every year that they like the idea of saving for the uniforms and for getting the chance to fit children with items in the school



To this end, Staff from SELECT KIDZ will visit our school on the following dates to run the Uniform Savings Club:

- Wednesday 2nd May 9.30am-10.30am in the Assembly Hall in the JUNIOR SCHOOL
- Wednesday 16th May 9.30am-10.30am in the Assembly Hall in the JUNIOR SCHOOL
- Wednesday 30th May 9.30am-10.30am in the Assembly Hall in the JUNIOR SCHOOL
- Wednesday 13th June 9.30am-10.30am in the Assembly Hall in the JUNIOR SCHOOL
- Wednesday 27th June 9.30am-10.30am in the Assembly Hall in the JUNIOR SCHOOL

# P6 TRANSFER TESTS HOLIDAY PACK

Dear Parent/ Guardian

Fairfields have been producing practice papers for the N.I transfer tests for over 25 years and are one of the most popular publishers of these materials on the market.

We publish a "Holiday Pack" which literally thousands of children have found to be of benefit to them over the holidays.

The pack contains 10 Tests, a Parent's Guide and Answers.

Individuals may order these directly from us at £28 per pack but your school has opted to collect the money and distribute the packs on our behalf. Therefore we can offer them to you at an extremely generous discounted price of £12.

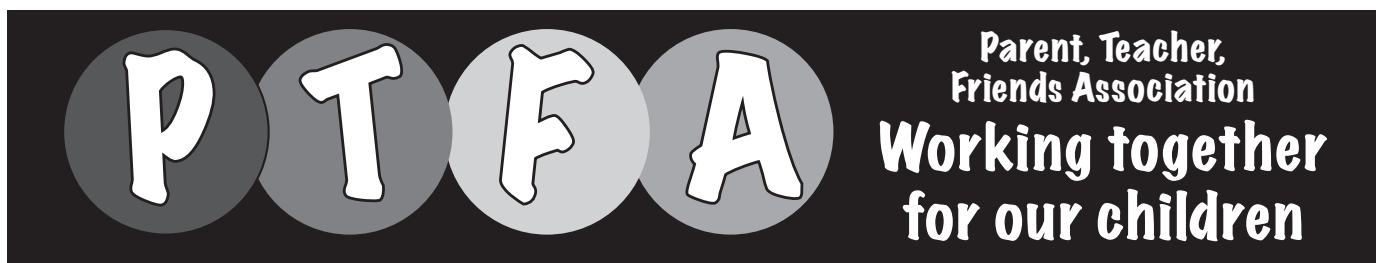
If you wish to order a pack, please send in your payment of £12 to the school.

Yours faithfully  
Fairfields

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## The Big Pedal 2018

We will be participating in the exciting annual Big Pedal Competition which will run from the 23rd April until 4th May 2018. We will be competing against other schools in the UK. There are lots of amazing prizes to be won! Let's get more active and help our environment by walking, cycling and scooting to school. Keep an eye out for further details of Big Pedal Events.



**Come along and join in our PTFA Meetings . . . . craic is good . . . . be a part of helping your child's school!**

**Next meeting is Thursday 10th May  
at 7pm in the Junior School.**



# BIG PEDAL NEWSFLASH

## The Big Street Survey

We (the Senior Eco team) have been very busy exploring our local area especially around our school. We have conducted a survey to work out the safest route to school.

***We surveyed four areas:***

- Mount Carmel Heights
- The new bridge
- Fountain Street
- Bowling Green

***We studied each of these areas very carefully.***

- We explored the volume of traffic, counted pedestrians and cyclists.
- We observed and recorded what we were able to see and hear at the four locations.
- We looked at how many parked cars there were and we observed how much space had been used for car parks.
  - From all of the information which we recorded we found that the area surrounding Mount Carmel Heights was the quietest at that time.
  - We conducted our survey at 9.30am and we realised that this time did have an impact on our results as we know how busy this area is at school times.

From our findings we have created a Manifesto. There are number things that we would like to see change in our local area.

1. Bins to be in place for the correct disposal of dog waste. We found it very difficult when we were walking around the streets as there was lots of dog waste on the footpaths. We noticed how unpleasant this was and quite dangerous too.
2. Removal of graffiti from the walls in the surrounding areas. Some of us remarked on the inappropriate language which has been sprayed on some of the walls. We felt that this was ruining our lovely environment.
3. A Cyclist lane: We would love to see a cyclist lane in our local area. We think this would help to encourage more cyclists and help reduce pollution.
4. Lower Speed Limit: We noticed that some cars were driving very fast and that it was dangerous for pedestrians.
5. Less space being used for car parks: We noticed that a lot of space in our local area is being used as car parks. We were able to see how big the car park at the Credit Union was as it was being resurfaced.

**This made us think... imagine that space being used as a play park, running track or an Eco garden!!!!**

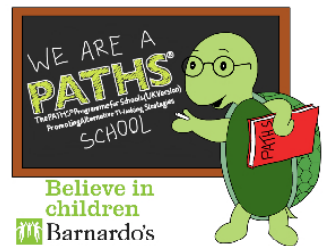
**We will keep you updated on any developments. A very special word of thanks to our Eco team for working so hard on this matter. Keep up the brilliant work!!**



# **PATHS Programme in St. Catherine's (Promoting Alternative Thinking Strategies)**

## **PATHS Quote of the Month - May**

***Good manners are GOOD for you! They almost always come with a smile and sometimes even a hug. They are like boomerangs, when you send them out with good intentions, they nearly always come back the same way. Send out your good manners today!***



## **Prayer of the Month May**

### ***PRAYER TO MARY***

***Mary, mother of Jesus,  
I want to live and love like you  
I want to love the Father  
I want to love like Jesus.***

***Mother of Jesus, blessed are you.  
Mother of Jesus, my mother too.  
Help me to live like Jesus  
And help me to live like you.  
AMEN***





# Fairfields P6 Transfer Tests Holiday Pack

Please find enclosed £12 as payment for the Fairfields  
P6 Transfer Test Holiday Pack.

Signed: \_\_\_\_\_

Parent/Gaurdian of: \_\_\_\_\_

Class: \_\_\_\_\_

Teacher: \_\_\_\_\_