Prevention of infection in schoolchildren

Viruses that cause common respiratory and gastrointestinal infections spread easily in schools. Preventing infections both at school and at home reduces absences and outbreaks. By following the measures presented in this guideline, you can help to reduce the spread of infections.

Infection prevention

Many diseases are spread through direct contact or through respiratory secretions, stool, or surfaces contaminated with these secretions. Close contacts increase the likelihood of microbes spreading from one person to another. If infectious secretions get on the mucous membranes of the mouth, nose, or eyes, it can cause the infection. Infection prevention is based on reducing these transmission routes.

Hand hygiene

Hand hygiene is the most important means of preventing infections and transmission, both in adults and in children. Fingernails should be kept short, as dirt easily accumulates under long nails, which can be difficult to clean.

Handwashing with soao and water

- always after using the toilet
- always before eating or handling food
- always after blowing the nose; alternatively, an alcohol-based hand rub can be used

Handwashing:
- Wet hands with water
- Take soap from the dispenser and rub it all over hands, paying attention to thumbs and fingertips.
- Rinse hands thoroughly
- Use a paper towel to dry hands and to turn off the tap

Use of hand sanitizer

Hand sanitizer can be used in situations where handwashing is not possible or when you want to enhance hand hygiene by rubbing sanitizer onto hands after washing. Hand sanitizer can be used e.g. outdoors.

Hand sanitizer rub:
- Take at least two portions of the sanitizer onto your palm
- Rub sanitizer thoroughly into your hands
- Rub sanitizer to your fingertips and tumps

Coughing etiquette and blowing your nose

Coughing, sneezing, and blowing the nose produces a lot of droplets, through which viruses spread easily.

When coughing or sneezing, the mouth should be covered either with the inside of the elbow or with a tissue. It is also acceptable to cough or sneeze into one's clothing. Hands must be cleaned afterwards by washing them with soap and water or by using hand sanitizer.

A single-use paper tissue should always be used for blowing the nose. After use, the tissue is should be disposed in the waste and hands must be washed and/or disinfected.

Vaccinations

In school health care, children receive the vaccines included in the national vaccination programme (Vaccination programme for children and adults - THL)

In addition, the primary TBE vaccination series will be offered to those children attending comprehensive school in the risk areas defined by the THL within Western Uusimaa. (TBE-rokote eli "punkkirokote" - THL.)

If you have any questions about vaccinations, please contact your school public health nurse.

Screening for infectious diseases

If your family has moved to Finland from abroad, your child may be eligible for screening for certain infectious diseases.

If you have questions about screening, please contact the school public health nurse.

Other hygiene practices

Hats, scarves, combs, hairbrushes, and hair accessories are personal items and should not be shared or exchanged with friends. It is also advisable to wash these items regularly. Clothes should likewise not be borrowed or exchanged with friends, and children should not drink from the same water bottle.

General principles for staying home from school

For some illnesses, staying home long enough is necessary to prevent an outbreak. For many common infections, however, staying home has only a limited effect on preventing transmission.

The indicative time frames below are based primarily on the contagiousness of the illnesses. These guidelines do not determine how long a child should stay home to recover from the illness itself — that must always be assessed case by case. Being prescribed antibiotic treatment does not automatically mean that a child needs to stay home from school.

Illness	**When can the child return to school?**
Whooping cough	After completing the antibiotic treatment, or if at least 3 weeks have passed since the onset of symptoms.
Vomiting and/or diarrhoea Vatsatauti, Magsjuka, Stomach flu	48 hours after the symptoms ended. Exceptions are EHEC, shigella, salmonella, typhoid fever, and paratyphoid fever, where the return to daycare follows the instructions of the infection prevention and control unit.
Group A streptococcus tonsillitis, scarlet fever	24 hours after starting the antibiotic treatment.
Impetigo Märkärupi, Svinkoppor, Impetigo	When the sores have dried **and** 24 hours have passed after starting the treatment with oral antibiotics/48 hours have passed after starting treatment with antibiotic ointment.
Chickenpox	When all the scabs have dried up, usually 5–6 days after the start of the rash.
Scabies Syyhyn itsehoito-ohje eri kielillä	Always contact a doctor. The child can return to daycare on the following day after the first treatment.
Flu, influenza, fifth disease, roseola or Hand-foot-and- mouth disease Enterorokko, Enterovirus, Hand, foot and mouth disease	When the child's general condition is such that he or she can participate in daycare activities. One fever-free day is a good rule. Prolonged absence from home usually does not prevent the spread of infections.
Eye infection	Home care is required only in cases with severe symptoms.
Ear infection	When the child is fever-free and in good general condition.

Covid-19 (the coronavirus disease)	When the symptoms have clearly decreased, the temperature is gone, and the child's general condition is such that he or she is able to participate in daycare activities.
Pinworms Kihomadot, Springmask, Pinworms	Needs to be identified and treated but does not require the child to stay home from daycare.
Head lice Päätäit Huvudlöss Head lice	On the following day after the treatment.
Molluscum contagiosum	No need to stay home from daycare.