

MENINGITIS - EDUCATION FOR ALL

TEACHER'S HANDBOOK



Dear Teacher,

Thank you for requesting the Meningitis Trust's information pack for teachers.

We believe that there may be as many as 34,000 people living in Ireland today who have had viral or bacterial meningitis, many of whom are coping with the impact every day of their lives.

The after-effects of meningitis can range from the loss of a limb (where septicaemia has occurred), to less visible changes such as deafness, blindness, and brain damage. Others will experience a wide range of less debilitating but serious and long term after-effects including memory loss, balance problems, aggression, personality changes, sore or stiff joints, anxiety and depression. Sadly one in 10 will die.

The school faces key issues when someone in the school environment is affected by meningitis; whether it is a teacher or student who contracts the disease themselves, or a close friend or family member has the disease.

Designed specifically for teachers, this pack will help you to manage the impact of meningitis and septicaemia in your school and provide the best possible support for those affected by the disease.

Specifically this pack will give you:

- Information about the disease
- Practical advice about what to do if someone in the school is affected
- Advice about what you can do now to raise awareness of meningitis amongst your staff, pupils and parents which can help save lives
- Details of our free services and how we can help you and your school
- Information about how you can help the Meningitis Trust

I hope you find this information pack useful, but don't forget the Meningitis Trust is only a phone call away, 24 hours a day on 1800 523 196.

Yours sincerely,

Carole Nealon, General Manager

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WHY SHOULD TEACHERS BE CONCERNED ABOUT MENINGITIS?

As a teacher you should be aware of meningitis for four main reasons:

1 So that you can be aware of the signs and symptoms and know what to do if there is a case

Meningitis* can affect anyone at any time and can kill within hours. Teachers, pupils and parents should be aware of the signs and symptoms and know to seek medical help urgently if they think someone might be affected.

2 So that you can properly support a colleague or pupil who is affected

Having an understanding of the disease and its personal and professional impact will put you in a much better position to provide the appropriate physical and emotional support to a colleague or pupil who has been affected by meningitis, whether they have been affected directly or through a close family member contracting the disease.

Knowing how the Meningitis Trust can help through its range of professional support services, including professional counselling and bereavement support, home visits and freephone 24-hour nurse-led helpline, may also be of benefit to the individual, their family and friends and school.

Sadly, some people lose their lives to meningitis or have such serious after-effects they cannot return to school. With help from the Meningitis Trust, an understanding of the disease and its implications can help you to manage.

3 So that you can manage the impact of the disease on the whole school

When someone is affected by meningitis, this can have significant implications for the whole school and community. It can raise issues such as:

- Fear
- Rumours
- Low attendance at school following a case

All of which can have an impact within the school.

4 Supporting a child starting at your school who has had meningitis when they were younger

See details of meningitis after-effects on page 5.

*References to meningitis also include meningococcal septicaemia

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MENINGITIS - THE DISEASE AND ITS IMPACT

This section provides information and guidance to help you understand meningitis and its impact on the school. It contains information about both meningitis and septicaemia, the disease closely associated with meningitis, including:

- signs and symptoms
- prevention
- what happens if there is a case
- how meningitis can impact the school environment

Introduction

Meningitis can strike unexpectedly. The speed at which people become ill, and the devastating after-effects, make it an alarming disease. Meningitis can also be a source of great concern to staff and pupils, particularly when there has been close contact with someone who has contracted the disease.

A good understanding of the disease and its impact will put the school in a better position to support everyone and will help to more effectively manage issues that may arise. This could include anything from reassuring teachers and pupils following a case, to managing reintegration back in to the school environment.

What is meningitis?

Meningitis is a serious infectious disease that can affect anyone at any time. Germs called bacteria or viruses are the major cause of meningitis in Ireland. Many different bacteria and viruses can cause meningitis.

Viral meningitis is rarely life-threatening, although it can make people very unwell. Most people make a full recovery, but some can be left with after-effects.

Bacterial meningitis can be life threatening and needs urgent medical attention. Most people who suffer from bacterial meningitis will recover, but many can be left with a variety of after-effects. In some cases people can die.

The meningococcus is the most common cause of bacterial meningitis in Ireland and causes most concern. The meningococcus can cause both meningitis and septicaemia (blood poisoning). Meningococcal septicaemia can happen with meningitis or on its own. Septicaemia is generally more life threatening than meningitis and can also be caused by other germs.

Key Points

- Meningitis can affect anyone at any time
- Around 300 cases of bacterial meningitis occur every year in Ireland and there are probably more than double that number of cases of viral meningitis
- People can often be left with after-effects ranging from severe and permanent disabilities such as brain damage and deafness to less debilitating, but serious after-effects such as depression and memory loss. All of these can have a real impact on staff and pupils in the school
- A member of staff or pupil can be away from school for weeks or months whilst they recover
- A recent survey commissioned by the Meningitis Trust suggests that over 1 million people in Ireland, over 1 in 3 adults, know a relative, friend, colleague, or someone from their community who has contracted a form of meningitis
- Knowing the signs and symptoms can help save lives and minimise the impact of meningitis
- More than 400 people in Ireland have died of meningitis in the last 20 years

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Who gets meningitis?

It is a common misconception that meningitis only affects children. Although babies and children are most at risk, adults get meningitis too. We estimate that each year in Ireland there are more than 100 cases of meningitis in adults over the age of 15.

What are the signs and symptoms?

Meningitis and septicaemia are not always easy to recognise. In the early stages signs and symptoms can be similar to many other common illnesses, for example flu. Early symptoms can include fever, headache, nausea (feeling sick), vomiting and general tiredness.

Common signs and symptoms for children and adults include:

- Fever – cold hands and feet
- Vomiting
- Headache
- Stiff neck
- Drowsiness
- Confusion
- Rapid breathing
- Diarrhoea
- Stomach cramps
- Dislike of bright lights
- Joint or muscle pain
- A rash that does not disappear under pressure

Signs and symptoms can occur in any order and some may not occur at all.

In the unfortunate event that there is a case of meningitis in the school, you must be prepared to manage the situation quickly and efficiently. If someone is ill or deteriorating rapidly urgent medical help should be sought. All staff should know how to recognise the signs and symptoms of meningitis, because that can help save lives.

More information about the signs and symptoms and the emergency action to take can be found in our 'what is meningitis?' leaflet and on our handy wallet-sized symptoms cards. Visit our website at www.meningitis-trust.ie for full details of the meningitis information leaflets, posters and online resources you can download or order online.

Can it be prevented?

Vaccination is the only way to prevent meningitis. Effective vaccines are available to prevent some types of meningitis, but not all.

Meningococcal group C vaccine (Men C)

This vaccine is available to anyone up to the age of 23. While the risk of the disease is generally low in adults, there is a greater risk for people up to the age of 23.

Pneumococcal vaccine

A new conjugate vaccine is now available as part of the routine vaccination programme for young children up to the age of two. It is also available for young children deemed to be at higher risk of contracting pneumococcal infection up to the age of five. There is also a polysaccharide vaccine available for all adults over the age of 65 years. The vaccine is especially recommended for those who are at increased risk of getting pneumococcal infection, for example, those with serious breathing conditions, heart disease and diabetes.

There is currently no vaccination to protect against meningococcal group B (Men B), the most common cause of bacterial meningitis in Ireland.

If there are concerns about vaccination, advice and information should be sought via the GP or practice nurse. For more readable information on vaccination visit the immunisation website at www.immunisation.ie

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Immunisation schedule for babies born on or after July 1st 2008

Age	Where	Vaccine
Birth	Hospital / Clinic	BCG
2 Months	GP	6 in 1 + PCV
4 Months	GP	6 in 1 + Men C
6 Months	GP	6 in 1 + Men C + PCV
12 Months	GP	MMR + PCV
13 Months	GP	Men C + Hib
4-5 Years	GP / School	4 in 1 + MMR
11- 14 Years	School	Td

BCG	Bacille Calmette-Guerin
6 in 1	Diphtheria, Tetanus, Whooping Cough, Polio, Haemophilus Influenzae B, Hepatitis B
PCV	Pneumococcal Vaccine
Men C	Meningococcal C
MMR	Measles, Mumps, Rubella
Hib	Haemophilus Influenzae B
4 in 1	Diphtheria, Tetanus, Polio, Whooping Cough
Td	Tetanus, Diphtheria

What are the after-effects?

Many people survive meningitis and septicaemia but hundreds are left with debilitating after-effects. These can include deafness, blindness and brain damage. After-effects and complications of septicaemia include areas of scarring, loss of digits (fingers, thumbs or toes) loss of limbs, or organ damage.

Many people will experience a wide range of less debilitating, but still serious and life-long, after-effects. These can include memory loss, balance problems, aggression, personality changes or sore and stiff joints. People may also experience tiredness, clumsiness and persistent headaches; although these usually improve with time, they can be distressing and debilitating.

Everyone responds differently; emotional difficulties will vary depending on age. For example, young children can often experience nightmares, bed wetting, clinginess and temper tantrums. Teenagers can go through a period of depression and find it difficult to express their emotions. Children and adults may experience anxiety and depression, lack of self-esteem and confidence, and behavioural problems such as aggression and mood swings.

Patience and understanding is often the best way forward. Some people may need more support to get them through the bad times.

The impact of meningitis can cause problems when returning back in to the school environment.

What happens when there is a case of meningitis in the school environment?

Because the germs causing bacterial meningitis are not passed easily from person to person, most cases are isolated. When there has been a case of meningitis or meningococcal septicaemia, the local public health team may offer antibiotics to those who have been identified as close contacts - reducing the risk of further cases.

In the rare event that there is more than one case in the school, antibiotics may be offered to wider contacts. Each situation will be individually assessed and appropriate action taken by public health if necessary. Whatever action is thought necessary, it will be in consultation with the Principal of the school.

For every individual in Ireland who has had meningitis, many more are touched by this disease and, in some cases, their lives changed forever. If there is a case of meningitis in the school, it may cause a high level of anxiety and fear amongst everyone, so it is extremely important that accurate information is given out. The local public health team will work with the school to ensure good communication between all concerned. Anyone with concerns should be given the number for the Meningitis Trust 24-hour nurse-led helpline **(1800 523 196)**. Nurses on the line can help answer questions and concerns.

What happens when there is a death in the school environment?

Sadly one in ten cases of meningitis or meningococcal septicaemia are fatal. For many, the suddenness of the disease and the speed with which it develops, can be both shocking and overwhelming. Staff and pupils may be left feeling stunned and traumatised. There will be many unanswered questions about the disease and what has happened. This is where the Meningitis Trust can help; its 24-hour helpline 1800 523 196 is always available and the Trust can also provide a Community Services Nurse or counsellor to come in to the school to help answer questions and give support where needed.

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A parent's perspective - Karen's story



Photo April 2006

Karen Jordan had only gone back to work as a primary school teacher after maternity leave, when her son Adam, aged 7 ½ months, contracted pneumococcal meningitis at the end of February 2006. Adam made a full recovery from meningitis, but suffered from psoriasis, tonsillitis, chest infections and sinusitis in the few years afterwards.

Karen says: "The whole event was stressful; on my return to work I was anxious. I wondered would Adam be alright, was it too soon for him to go back to crèche? Should I have stayed home longer? I was, however, anxious to get things back to some sense of normality. During this time I always had my phone with me. Looking back now I feel that I did my job, but was distracted at times and couldn't put my mind to anything other than what had to be done."

Karen wasn't sure how to approach the department either. She hadn't been sick, but she hadn't applied for parental leave either. Her GP wrote a detailed letter to the department explaining Adam's diagnoses. This was accepted, but it was one of the more stressful moments regarding the time she was off.

Just when Karen thought things were getting back to normal, Adam got tonsillitis. This was the start of a pattern. Her phone was always at her side from then on as she didn't know when the crèche would ring. It happened on many occasions after that; the phone would ring and she would have to abandon her pupils to the capable hands of colleagues as she ran to the doctor and the chemist for yet another antibiotic. Luckily, her mother-in-law could mind Adam when this happened.

This continued for over a year and a half; the most memorable of these being the day when Karen had 22 pupils lined up and ready to walk to the local park. Thankfully two members of staff stepped in and the children didn't miss out. Luckily, after a long two years, Adam's tonsils were taken out and Karen hasn't had to take any time off since the operation; her phone has been demoted to her desk drawer too!

Karen had supportive colleagues when this all happened, she adds *"I don't think the parents were notified as to why I was absent other than that my son was sick, however, I got huge support from them when I looked for postcards to be signed for the pneumococcal meningitis vaccine campaign for the Meningitis Trust. I have also had great financial support from the staff, the Parent's Association and the parent body for running the Mini Marathon. The Board of Management allowed me time off when I spoke at press conferences or appeared on TV shows; they also paid for a substitute teacher to cover my class for one of these events, in their own way contributing to the charity."*



Photo taken on World Meningitis Day 2009

Karen's advice to anyone who finds themselves in a similar situation is to look for the support of family, friends and staff members. It is a stressful enough situation to find oneself in without the added stress of worrying about a class too.

During recovery from meningitis or meningococcal septicaemia do not try to push yourself too far, too soon. Listen to what your body is telling you; the longer you can take in your recovery the better the outcome can be for many.

A pupil's experience – Cian's story



“To look at me with my brother and sisters (that’s me in the middle), you’d never guess that just a few weeks after this picture was taken I was rushed to hospital with meningitis.

If you do just one thing today, please read to the end of my story - what happened to me could happen to you, or to someone you care about. Knowing the facts might just save your life, or theirs.

It was October 4, 2007, and I’d been out with friends, having a good time. I was feeling a bit ‘off’, but as my older sister and dad both had colds, I figured I was getting one too. So, I came home early, got a hot drink and went to bed.

By 2am I felt much worse, with a throbbing headache that just wouldn’t go away. Even though I knew I was burning up, I had to put my hoodie on in bed because I couldn’t stop shivering.

The next morning I collapsed as I was on my way to the doctor’s surgery with my Mum. It was around this time, when the GP examined me and told my parents to get me to hospital immediately, that ‘meningitis’ was first mentioned. But how could that be? I was a healthy teenager, surely I couldn’t get meningitis?

I have a lot to be grateful for, and I know I am one of the lucky ones. I didn’t even know teenagers could get meningitis, let alone die from it, and I want to let as many people as possible know so that no-one else suffers like I did - PLEASE take a few seconds to learn about the signs and symptoms of this terrible disease; then take a little time to consider about how YOU could help make a real difference in the fight against meningitis – because the reality is that teenagers are the second most at risk group of getting meningitis, after the under 5’s.

The Meningitis Trust is an Irish charity that has given me and my family support and advice since I came out of hospital. We know they are there 24-hours a day, every day, if we need them. It receives NO statutory government money for its services or awareness raising activities. I’m hoping that my own school will have a ‘no uniform’ day to help the Meningitis Trust. Just €5 will provide the cards to a whole class.

Since I’ve been ill, I’ve learned a lot about meningitis, and I’m doing what I can to help the Meningitis Trust with their work. You can help too. If you can do something in your school, many more students and families in Ireland will know the facts – I didn’t, and it nearly cost me my life.”

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RETURNING TO SCHOOL

Each person will be affected in a different way and will need to be treated individually. Patience and understanding are vital in helping the teacher or pupil to overcome any problems they might have as a result of meningitis. It is important for the school to consider the following general issues when managing the individuals return in to the school environment:

- School hours – are they up to doing a full day?
- Communication with the person affected
- Communication with teachers in the school ensuring they are aware of any after-effects or concerns
- Specialist equipment or extra help in lessons

School Hours

Part time school hours may need to be considered initially. It can take several weeks or months for someone who has been through the experience of meningitis to feel anything like fully fit again. They can feel anxious about returning back in to the school environment and being able to cope with the day-to-day demands.

Time may be needed for hospital and therapy appointments. Individuals who have suffered serious after-effects may need to attend outpatient appointments on a regular basis for many months. Those who have suffered less serious after-effects will still need time to adjust.

Communication with the person affected

With all the day-to-day activities that have to be managed in a busy school, it may be difficult to find the time to communicate properly with the individual affected by meningitis. This is particularly the case if the individual concerned is not present in the school environment and/or you have to communicate with them via someone else, such as their parent/guardian or partner. It is absolutely vital, however, that good communications exist at this critical time.

Meningitis pre-school age

When a pupil starts school, having had meningitis pre-school age, difficulties may be identified as they learn to cope with a new environment. There can be learning and behavioural problems, memory problems etc. Staff need to be aware that after-effects of meningitis are real and need to be identified as soon as possible. If in doubt, concerns should be discussed with the parents involved and not left to go unmentioned. Parents should be encouraged to seek help and support from their GP. Further information about after-effects can be obtained from the Meningitis Trust, via the 24-hour helpline.

Is it safe for this person to return to the school environment?

When a member of staff or a pupil has been away from school suffering from meningitis or meningococcal septicaemia, some will be concerned when the person returns to school. Fear and lack of knowledge is always a problem, but there is no risk to anyone. It is absolutely fine for the person who has been ill to be back. They will have had all the necessary treatment and will only be coming back because they are well enough to do so and are no longer infectious.

Time off

If a teacher or pupil is directly affected by meningitis, it is likely that they will need considerable time off to recover, both physically and mentally. If someone is indirectly affected, perhaps by a child or partner contracting the illness, it is also likely that a member of staff may require time off to support the person affected. The impact of meningitis can lead to relationship difficulties and an enforced change of lifestyle.

Specialist equipment

You may find that a teacher or pupil who has been affected by meningitis requires specialist equipment to help them do the same as before. For example, if they have to use a wheelchair because meningitis has resulted in the loss of limbs, the school may have to adapt the premises to accommodate them. If someone has lost their hearing they may require special technology for their computer and other aids that will help them during any oral communications. If someone has lost digits (fingers or toes) they may require a specialist keyboard or aids to help them write.

Training

You may find that a teacher or pupil who has been affected by meningitis requires re-training or help with certain pieces of equipment in the school environment. Most activities we carry out without much thought; however a simple step of leaving instructions for use close to any piece of equipment, such as a photocopier or fax machine can reduce the stress for those affected.

Communication with the school environment

It is important that staff and pupils are informed of an individual's progress as they recover. This can be achieved through regular updates via staff, school assemblies, notice boards etc. Sufferers can feel tired and emotional and the knowledge that other people are aware of their illness can help the recovery process.

HOW THE MENINGITIS TRUST CAN HELP YOU

The Meningitis Trust can help you raise awareness of meningitis in your school and support those who have been affected by the disease. The services, support and education provided by the Meningitis Trust are a lifeline for people in Ireland whose lives have been touched by meningitis.

Free information literature

The Meningitis Trust produces a range of clear and concise literature which is available free, including:

- Credit card-sized cards showing the signs and symptoms of meningitis and septicaemia
- Leaflets giving general information about meningitis
- Leaflets explaining the after-effects and support available from the Meningitis Trust
- Various posters featuring the signs and symptoms of meningitis

Visit our website at www.meningitis-trust.ie for full details of the meningitis information leaflets, posters and online resources you can download or order online.

The school can help raise awareness of meningitis by displaying signs and symptoms posters and cards on noticeboards and in the reception area. The school could give every family a symptoms card to keep at home.

24-hour nurse-led helpline (1800 523 196)

The Meningitis Trust's helpline is available 24-hours a day, 365 days a year. Led by specially trained nurses, it offers information and support in over 100 languages. The helpline is also the gateway to all the support services the Meningitis Trust provides to those who have been affected by the disease.

If anyone in the school environment has any queries or concerns about meningitis, they should be directed to the helpline. Sometimes simply talking to someone can be all that is needed and we are always only a phone call away.

One-to-one contacts

A teacher or pupil affected by meningitis may benefit from talking to someone who shares an experience of the disease similar to their own. The Meningitis Trust provides a one-to-one contact service to put people with similar experiences in touch with each other.

Home visits

An experience of meningitis can leave sufferers and their families confused and traumatised. A member of staff or pupil who has been affected by the disease may not know what the future holds and what help is available to them.

The Meningitis Trust provides a free home visiting service involving a trained nurse or counsellor. During the visit they will provide detailed information on all of the free support services the Meningitis Trust provides. They can answer questions and can identify further ways in which the Trust can help. Most importantly people realise they are not on their own.

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Counselling and Bereavement Support

The Meningitis Trust is committed to providing ongoing tailored support to those affected by the trauma of meningitis. Our counselling and bereavement support services provide professional support to anyone directly or indirectly affected by meningitis anywhere in Ireland. We offer counselling free, in a confidential and safe environment; helping people to rebuild their lives after meningitis.

Development Officer

The Trust has a Development Officer who does valuable work in supporting the community and will come in to the school environment, to give presentations and talks to staff, pupils and parents. They can also assist in a SPHE session, to help broaden a pupil's knowledge of meningitis and the work of the Meningitis Trust.

Website

Our sister charity in the UK has a learning website dedicated to children, teachers and parents at www.meningitis-learning.org. This site is split in to three groups, Monty & Friends for the younger children; The Youth Zone for 12-18 year olds; and a Parents & Teachers area. The site is interactive and gives useful information on the illness and the Trust. It also provides teaching resources.

**To speak with someone about meningitis and meningococcal septicaemia,
please call our 24-hour nurse-led Helpline**

1800 523 196

E-mail support@meningitis-trust.ie or visit www.meningitis-trust.ie

HOW YOU CAN HELP THE MENINGITIS TRUST

Our work in helping everyone who is coping with the impact of meningitis, and raising awareness of this devastating disease, is funded almost entirely through support from individuals and organisations in the community, including a number of schools/colleges choosing to fundraise for the Meningitis Trust.

As a national organisation, we can come in to your school to give a presentation on the Trust and how you might like to get involved.

If you would like further information on how your school can get involved in helping the Meningitis Trust, please call us on 01 276 2050 and we will give you all the support, information and materials you need to help with any fundraising you might like to get involved in.

Thank you for your interest in our work. Without support from people like you, the Meningitis Trust would not be able to continue its vital work.

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24-hour nurse-led helpline
1800 523 196

www.meningitis-trust.ie