

Monday 11 March 2019

Newsletter - Dear parents and Caregivers

The term is racing by and the children are immersed in their learning with the support of the International Primary Curriculum and the energy of the staff.

It was wonderful to hear some of this in action at the MahiTahi Assembly on Friday and also great to see them having fun with their games and challenges. A huge thank you to those who came to support the children at their assembly.

Tomorrow Tuesday March 12 we will be closing school at 1pm for the staff to attend their Professional Development . This an important part of the schools development and partnership with our 9 Kahui Ako Schools. We appreciate your support.



Measles -

The number of confirmed cases of measles in Canterbury now stands at fifteen and is likely to rise further over the coming days and weeks. It can now be assumed that measles is circulating widely in our community.

Unimmunised people who come within two metres of an infectious person, however briefly, have a 90% chance of contracting measles.

Measles is a serious, highly infectious, potentially life-threatening disease. One in ten people who get measles will need treatment in hospital. Up to 30 percent will develop complications – usually children under five and adults over the age of 20. Measles during pregnancy increases the risk of miscarriage, premature labour and low birth-weight in babies.

Unimmunised people exposed to measles first develop a respiratory type illness with dry cough, runny nose, temperature over 38.5 C and feel very unwell. The rash starts on day four – five of the illness usually on the face, then moves down to the chest and arms. People are considered infectious from 5 days before, until 5 days after the rash first appears.

The best protection is for people born after 1969 to have had two MMR (measles, mumps and rubella) vaccinations.

General practice teams have been asked to prioritise the following groups for MMR immunisation:

1. People who are not up-to-date according to the schedule for their age group

- Children and young adults (age range 5 years to 28 years) who are either not immunised or who have only received one MMR dose to date.
 - Children 12 months to 5 years who have never received any doses of MMR.
2. The four-year-old MMR can be brought forward to no sooner than four weeks after the previous MMR.
 3. Adults aged 29 to 50 (this group only received one dose of measles vaccine)

Babies whose mother is immune will have some protection if they are currently being breastfed. For children who are too young to have had both MMRs or who cannot be immunised for other reasons, the best way to protect them is to ensure everyone around them has been vaccinated – if you can't get it, you can't pass it on.

“If you think you may have been exposed to measles or have symptoms, please call your general practice first, 24/7. Calls made to general practices after hours will be answered by a nurse who will advise you what to do and where to go if you need to be seen.

Lunch times - we are sticking with our ‘Play, Eat, Learn” cycle again this week taking into account the feedback we have had from parents. I have spoken with three parents who had similar concerns with not enough time to eat. As we head into next week we will also trial this new timetable to support the eating and playing and giving time for the children to refuel.

The staff have noticed a calmer approach to learning after the breaks.

Trial - SCHOOL DAY Timetable - starting next week March 18

8.55 School begins

10.30am Play

11.00am Eat (10 minutes) Read and Feed - In class and supervised

11.10am Learn

12.30pm Play

1.00am Eat (15 minutes) Read and Feed - In class and supervised

1.15pm Learn

2.55pm School finishes



