



Research Informed Teaching, Learning, & Research

POLICY FOR MANAGING MENINGITIS

4. Raising awareness among students

At the start of the academic year, all new students will be encouraged to:

- (i) Familiarise themselves with the symptoms and signs of meningococcal disease. The Student Centre will have a range of leaflets and symptom cards for all students, posters will be displayed throughout the University and at the Halls of Residence. Information on meningococcal disease will be incorporated in the student diary for all new students.
- (ii) There will be an annual poster and leaflet awareness campaign at the start of every academic year. Student Services will publicise information on their webpages. It is recognised that students in Halls of Residence may be at greater risk and so information is particularly directed to those students.
- (iii) The services of the Greater Manchester Health Protection Agency (GMHPA) can be used to deliver talks and hold stalls at the Freshers Fair.
- (iv) Students will be encouraged to register with a local general practice. Vaccination for meningococcal disease will be available for collection throughout the academic year.
- (v) Promote MenC vaccination among first year students.
- (vi) All students will be encouraged to inform a friend, colleague or warden at the Halls of Residence if they are feeling ill, so that their symptoms can be monitored and prompt medical attention sought if their condition deteriorates

5. Raising awareness among staff

The following are suggest

- (ii) The poster and leaflet information indicated above will also be available to staff at the University.

6. Case definitions

The following recommended case definitions have been adopted from the

Possible case: Person with a clinical diagnosis of meningococcal meningitis or septicaemia without microbiological confirmation, where the clinician and public health doctor consider that diagnoses other than meningococcal disease are at least as likely.

Probable case: (e)-3(d)omil a clinical diagnosis oil a-3(u)-3(t)6TJETBT1 0 0 1 143.9 5

residence, the extent of the information cascade will be suggested by GMHPU. The Student Services Manager will be asked to liaise with the Head of School and consideration will be given at this stage to issuing information to students on the same course. The identification of close friends (where possible) will also be carried out. Consideration and arrangements will be made to provide pastoral support for students, family and close friends and information will be given to those who wish to speak with the Meningitis charity helpline.

The Student Services Manager, in liaison with the Communications and Publications Manager, will draw up a reserve press statement and one point of communication will be agreed. The situation will then be monitored by the GMHPU.

9. Multiple probable/confirmed cases of Meningococcal meningitis

The University will be alerted by the GMHPU if there are multiple cases of meningococcal disease. In the event of the cases being unrelated the GMHPU will recommend a single case action plan.

If the cases are related, this will be determined by results from the HPA Meningococcal Referencing Laboratory the GMHPU will convene an Outbreak Control Meeting (OCT). The roles and responsibilities of the members will be clearly defined.

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of the incident. The University may be advised to set up a helpline number for students, staff and parents and arrangements will be made by the OCT. Many queries and concerns are likely to be best dealt with by the University and such helplines should be able to be set up at short notice.

The Outbreak Control Meeting will organise for notification of details of the incident to the Meningitis Research Foundation/ National Meningitis Trust and disseminate details of charities helplines.

The University in partnership with the Health Protection Agency will develop and release a press statement and media response. There will be one point of communication agreed. It will be necessary for the OCT to agree on a spokesperson for the health protection unit and the University.

The situation will be monitored by the GMHPU.

Note: In the event of an outbreak a number of University rooms should be immediately available for use by the GMHPU. Appropriate rooms would be Orlando Common Room, Deane Lecture Theatre and the Sports Centre. Additional telephone lines should also be made available for use as required.

10. Action after a case or outbreak

After a case or outbreak, action will be reviewed by the OCT, the University should consider pastoral and after care of the affected student(s), family and friends and staff at the University. Immediate reassurance and support should be given. Families, staff and students affected would be referred to the charities for further help and support.

The Student Services Manager will also review the incident to identify any policy, procedures and future management of similar situations.

Equality Impact Assessment

11. The University of Bolton is committed to the promotion of equality, diversity and a supportive environment for all members of our community. Our commitment to equality and diversity means that this policy has been screened in relation to the use of plain English, the promotion of the positive duty in relation to race, gender and disability and avoidance of discrimination to other equality groups related to age, sexual orientation, religion or belief or gender reassignment.

Other Related Policies

12. Other relevant policies include:

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Monitoring and Review

13. This policy will be monitored and reviewed by the Student Services Manager.

14. The policy will be reviewed every three years by the Student Services Manager in collaboration with the Greater Manchester Health Protection Agency.

Dissemination of and Access to the Policy

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Appendix 1

Policy for Managing Probable/Confirmed Meningococcal Meningitis/Septicaemia & Action Plan Flowchart

