

Guidance on infection prevention and control in schools and childcare settings

Remember you can help prevent the spread of infections by checking children have had their routine immunisations, maintaining a clean environment, and ensuring good personal hygiene (among staff and children), especially ensuring regular hand washing.

UK Health Security Agency (UKHSA) Health Protection Team (HPT)
For outbreaks or advice please contact the UKHSA South West Centre HPT on 0300 3038162 or email SWHPT@UKHSA.GOV.UK



UK Health Security Agency Guidance: Health protection in schools and other childcare facilities

<https://bit.ly/3sjXwBn>



Spotty book
Notes on infectious diseases in schools and nurseries

<https://bit.ly/3EbDyUT>



The NHS routine immunisation schedule

<https://bit.ly/3miaRpS>



The Green Book
Information for public health professionals on immunisation

<http://bit.ly/2fHqF4K>

Rashes and skin infections	Recommended period to be kept away from school or childcare setting	Comments
Chickenpox and shingles	Five days from onset of rash AND until all lesions have crusted over	Advise pregnant women to contact their GP if exposed and unsure if they have previously been infected
Cold Sores (Herpes Simplex)	None	Cold sores remain contagious until they are completely healed. They are generally mild and heal without treatment (7-10 days) - Avoid kissing and close skin to skin contact of the sore - Don't share items that come into contact with the affected areas (cutlery / lip balm)
Hand, Foot and Mouth	None	<u>Contact your UKHSA HPT if many children are affected.</u> Exclusion may be considered in some circumstances
Impetigo	Until lesions are crusted over or 48 hours after antibiotic treatment has been started	Impetigo is highly infectious, and it is spread by direct contact Antibiotic treatment speeds healing and reduces the infectious period
Measles*	Excluded as soon as measles is suspected until five days after the onset of rash	<u>Contact UKHSA HPT as soon as measles cases are notified to the school.</u> Preventable by immunisation (MMR x2 doses). Promote MMR for all pupils and staff. - Advise staff contacts who are pregnant, unimmunised or have weakened immune systems to contact their GP immediately
Molluscum contagiosum	None	A self-limiting condition. The lesions will resolve over time without any treatment
Parvovirus or fifth disease (slapped cheek)	None (once rash has developed)	Request parents notify the school so that pregnant contacts can be advised to consult GP or midwife following exposure
Panton-Valentine Leucocidin (PVL)	None if they feel well	Individuals should not take part in contact sports or use communal gym equipment until their skin lesion has totally healed. <u>For further guidance contact UKHSA HPT</u>
Ringworm (incl foot ringworm – athletes' foot)	Exclusion is not required for individuals with athlete's foot. Individuals with skin and scalp ringworm can return to school once they have started treatment with anti-fungal agents	Treatment is required
Rubella (German Measles) *	Six days from onset of rash	Preventable by immunisation (MMR x2 doses). See UKHSA document above. Advise pregnant staff contacts to seek prompt advice from their GP
Scabies	Until after the first treatment has been completed	Household and close contacts require treatment at the same time. <u>In the event of 2 or more suspected cases, contact UKHSA HPT</u>
Scarlet Fever*	Exclude until 24 hours of appropriate antibiotic treatment complete	A person is infected for 2-3 weeks if antibiotics are not administered. <u>In the event of 2 or more suspected cases, contact UKHSA HPT</u>
Warts and Verrucas	None	Verrucas should be covered in swimming pools, gymnasiums and changing rooms

Respiratory infections	Recommended period to be kept away from school or childcare setting	Comments
COVID-19	Until temperature has resolved and they are well enough. If tested positive, child should stay home for 3 days.	Report outbreaks in line with local policy
Flu (Influenza)	Until recovered	Report outbreak to your local UKHSA HPT
Tuberculosis *	When diagnosed with TB a treatment team will assess whether other people are at risk of infection and require screening	Requires prolonged close contact for spread. Only pulmonary TB is infectious to others. <u>Always consult your local UKHSA HPT before disseminating information to staff/carers</u>
Whooping Cough* (Pertussis)	Until they have had 48 hours of appropriate antibiotic treatment AND feel well enough to return. OR after 21 days from onset of illness if no antibiotic treatment has been taken	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. <u>Your UKHSA HPT will organise any contact tracing necessary</u>

Diarrhoea and vomiting illness	Recommended period to be kept away from school or childcare setting	Comments
Infectious Diarrhoea and Vomiting (Gastroenteritis) Bacteria Campylobacter Salmonella Shigella (bacillary dysentery) E.coli 0157 Viruses Rotavirus Small round structured viruses (e.g. Norovirus or Winter Vomiting Disease) Parasites Cryptosporidium Giardia	Should be regarded as very infectious and must be kept away from school until the diarrhoea and vomiting has stopped for at least 48 hours They must have been passing normal stools for at least 48 hours Some Gastro infections (Like E.coli 0157) require <u>microbiology clearance and UKHSA will advise on these</u>	An infection in the gut causing diarrhoea and vomiting (gastroenteritis) can be easily passed to others. Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. Exclusion from swimming is advisable for two weeks after the diarrhoea has settled. <u>If an outbreak occurs, consult UKHSA HPT</u> A diarrhoea and vomiting checklist for schools can be found in the UKHSA health protection in schools guidance (QR code above).

Other infections	Recommended period to be kept away from school or childcare setting	Comments
Conjunctivitis [bacterial or viral]	Exclusion is not required unless they are particularly unwell	Advise parents to seek advice immediately if there is a possibility their baby has infective conjunctivitis <u>If an outbreak/cluster occurs, consult your UKHSA HPT</u>
Diphtheria *	Exclusion is essential. Always consult with your UKHSA HPT	Preventable by vaccination. Family contacts must be excluded until cleared to return by your UKHSA HPT. <u>UKHSA HPT will organise any contact tracing necessary</u>
Glandular Fever	None	Spread is by saliva, usually through kissing or being in close contact with a carrier
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)	Household contacts of individuals with Hepatitis A may occasionally require exclusion from school. <u>Contact local UKHSA HPT who will advise on any action needed</u>
Hepatitis B*, C*, HIV/AIDS	None if they are well enough	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact. <u>See UKHSA guidance document above</u>
Meningococcal Meningitis*/Septicaemia *	Until recovered. There is no reason to exclude any siblings or other close contacts of the case from school	Meningitis ACWY and B are preventable by vaccination. <u>Contact local UKHSA HPT who will advise on any action needed</u>
Meningitis* due to other bacteria	Until recovered	Hib and Pneumococcal Meningitis are preventable by vaccination. <u>Contact local UKHSA HPT who will advise on any action needed</u>
Meningitis viral*	Until recovered There is no reason to exclude any siblings or other close contacts of the case from school	Milder illness than bacterial meningitis.
Mumps (paramyxovirus)*	Exclude child for five days after onset of swelling	It is very contagious and spread in saliva, the same way as a cold or flu. Preventable by vaccination (MMR x2 doses). Promote MMR to pupils and staff
Worm infestations [including hookworm, roundworm, tapeworm, threadworm, and whipworm]	None	Treatment is recommended for the child and household contacts

Pre-school, nursery, or childminder

* denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (for some local authorities, this may be UKHSA) In addition, you may need to inform other regulating bodies, for example Office for Standards in Education (OFSTED) or Care Quality Commission (CQC). Please follow local policy.