

## Summary of Actions – Rashes & Skin Complaints

Infection or complaint	Recommended period for the pupil/student to be kept away from school to reduce contagion (although child may be unable to attend school if unwell)	Comments
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended
Chickenpox	Until all vesicles have crusted over	
Cold sores, (Herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting
German measles (rubella)	Four days from onset of rash (as per "Green Book")	NOTIFIABLE. Preventable by immunisation (MMR x 2 doses).
Hand, foot and mouth	No recommended period, although school absence is usual until symptoms have cleared	Contact your local HPT if a large number of children are affected. Exclusion may be considered in some circumstances
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles	Four days from onset of rash	NOTIFIABLE. Preventable by vaccination (MMR x 2).
Molluscum contagiosum	None	A self-limiting condition, although those with MC should avoid touching or sharing items.
Ringworm	Exclusion not usually required	Treatment is required. Avoid close contact and sharing of items.
Roseola (infantum)	No recommended period, although school absence is usual until symptoms have cleared	Unusual in school age children
Scabies	Child can return after first treatment	Household and close contacts require treatment
Scarlet fever	Child can return 24 hours after starting appropriate antibiotic treatment	NOTIFIABLE. Antibiotic treatment is recommended for the affected child
Slapped cheek /Parvovirus B19	None (once rash has developed)	Pre-rash symptoms similar to fever.
gles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune, i.e. have not had chickenpox. It is spread by very close contact and touch. If further information is required, contact your local PHE centre.
Verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms

## Summary of Actions – Respiratory Infections

Infection or complaint	Recommended period for the pupil/student to be kept away from school to reduce contagion (although child may be unable to attend school if unwell)	Comments
COVID-19	From onset of high temperature or new persistent cough until test proves negative, or fully recovered.	Note added April 2020. This guidance may be updated regularly. The government latest recommendations will be used.
Flu (influenza)	Until recovered	See section on Pandemic Illness. Might be notifiable.
Tuberculosis	Always consult your local PHE centre	NOTIFIABLE. Requires prolonged close contact for spread
Whooping cough (pertussis)	Five days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	NOTIFIABLE. Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local PHE centre will organise any tracing of contacts if necessary

## Summary of Actions – Diarrhoea and/or Vomiting

Infection or complaint	Recommended period for the pupil/student to be kept away from school to reduce contagion (although child may be unable to attend school if unwell)	Comments
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting.  See also the later section on Norovirus	
<i>E. coli</i> O157 VTEC Typhoid [and paratyphoid*] (enteric fever) Shigella (dysentery)	Should be excluded for 48 hours from the last episode of diarrhoea. Further exclusion may be required for some children until they are no longer excreting	NOTIFIABLE. See section on Food Poisoning Further exclusion is required for children aged five years or younger and those who have difficulty in adhering to hygiene practices. Children in these categories should be excluded until there is evidence of microbiological clearance. This guidance may also apply to some contacts who may also require microbiological clearance. Please consult your local PHE centre for further advice
Cryptosporidiosis	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled

## Summary of Actions – Other Infections

Infection or complaint	Recommended period for the pupil/student to be kept away from school to reduce contagion (although child may be unable to attend school if unwell)	Comments
Conjunctivitis	None	If an outbreak/cluster occurs, consult your local PHE centre
Diphtheria	Exclusion is essential. Always consult with your local HPT	NOTIFIABLE. Family contacts must be excluded until cleared to return by your local PHE centre. Preventable by vaccination. Your local PHE centre will organise any contact tracing necessary
Glandular fever	None	
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)	NOTIFIABLE. In an outbreak of hepatitis A, your local PHE centre will advise on control measures
Hepatitis B, C, HIV/AIDS	None	NOTIFIABLE. Hepatitis B and C and HIV are bloodborne viruses that are not infectious through casual contact
Meningococcal meningitis/septicaemia	Until recovered	NOTIFIABLE. Meningitis C is preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case. In case of an outbreak, it may be necessary to provide antibiotics with or without meningococcal vaccination to close school contacts. Your local PHE centre will advise on any action is needed
Meningitis due to other bacteria	Until recovered	NOTIFIABLE. Hib and pneumococcal meningitis are preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case. Your local PHE centre will give advice on any action needed
Meningitis viral	None	NOTIFIABLE. Milder illness. There is no reason to exclude siblings and other close contacts of a case. Contact tracing is not required
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. If further information is required, contact your local PHE centre
Mumps	Exclude child for five days after onset of swelling	NOTIFIABLE. Preventable by vaccination (MMR x 2 doses)
Threadworms	None	Treatment is recommended for the child and household contacts
Tonsillitis	None	There are many causes, but many cases are due to viruses and do not need antibiotics