8th December 2022

Dear Parents/Carers

Group Strep A

Group A Streptococcus is a common bacteria which many of us will carry on our skin or throats and does not always result in illness. Strep A is common in children, aged between 5-15.

Please find attached guidelines issued yesterday detailing information regarding Group Strep A.

In addition, we would ask parents to be vigilant with the following childhood illnesses, and NOTIFY SCHOOL IF YOUR CHILD HAS A CONFIRMED CASE OF SCARLET FEVER, IMPETIGO OR CHICKEN POX, or any other infectious disease:

<u>Impetigo</u> – a skin infection which starts with red sores or blisters which will burst leaving crusty patches. This will need to be treated with antibiotics from your GP and the child can return to school 48 hours after the start of antibiotics

<u>Scarlet Fever</u> – appears similar to flu, includes a high temperature, sore throat and swollen glands on the neck. A rash will appear within 12-48 hours, starting on the chest and stomach and spreading. This will need to be treated with antibiotics from your GP and the child can return to school 24 hours after the start of antibiotics

<u>Tonsillitis</u> – sore throat, pain on swallowing, temperature above 38 degrees, swollen painful glands, white spots on throat, bad breath

<u>Chicken pox</u> - itchy red spots which turn into fluid filled blisters. The blisters usually burst and turn into scabs. May have a temperature of over 38 degrees, aches, pains, loss of appetite and generally feeling unwell. Highly infectious. Can return to school when EVERY spot has scabbed over – usually around 5-7 days after onset.



School has reintroduced the use of hand gel for staff and children to use before entering the lunch hall and when needed in the classroom, in order to reduce the spread of any infection around school.

The NHS has up to date advice on any infectious illness.

Please continue to notify school of any absences due to illness and update school daily.

Yours faithfully

Mrs ALLISON HANSON PUPIL WELFARE OFFICER

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Scarlet Fever and Strep A Information for Pupils, Parents and Staff

Strep A (Group A streptococcus) is a common bacteria. Lots of us carry it in our throats and on our skin and it doesn't always result in illness. However, Strep A can cause a number of infections, some mild and some more serious. Scarlet fever is caused by strep A and in rare cases, strep A can also cause a more serious illness called invasive group A strep infection.

Scarlet fever is usually a mild illness, though it typically needs to be treated with a course of antibiotics to minimise the risk of complications and reduce the spread to others. Scarlet fever, is highly contagious and is spread by close contact with someone carrying the bacteria. It takes around 2 to 5 days to develop symptoms after exposure to these bacteria. Scarlet fever usually clears up after a week, but it is advisable to visit your GP to get a full diagnosis and proper treatment.

Check for Scarlet Fever

The first signs of scarlet fever often include a sore throat, headache, fever, swollen neck glands (a large lump on the side of your neck), nausea and vomiting.

A rash appears 12 to 48 hours later. It looks like small, raised bumps and starts on the chest and tummy, then spreads. The rash makes your skin feel rough, like sandpaper. Typically, it first appears on the chest and stomach, rapidly spreading to other parts of the body. On more darkly-pigmented skin, the rash may be harder to spot, although the 'sandpaper' feel should be present.

Further symptoms include:

- fever over 38.3° C (101° F) or higher is common
- white coating on the tongue which peels a few days later, leaving the tongue looking red and swollen (known as 'strawberry tongue')
- swollen glands in the neck
- feeling tired and unwell
- flushed red face, but pale around the mouth. The flushed face may appear more 'sunburnt' on darker skin
- peeling skin on the fingertips, toes and groin area, as the rash fades

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Contact NHS 111 or your GP if:

- your child is getting worse
- your child is feeding or eating much less than normal
- your child has had a dry nappy for 12 hours or more or shows other signs of dehydration
- your baby is under 3 months and has a temperature of 38C, or is older than 3 months and has a temperature of 39C or higher
- your baby feels hotter than usual when you touch their back or chest, or feels sweaty
- your child is very tired or irritable

Call 999 or go to A&E if:

- your child is having difficulty breathing you may notice grunting noises or their tummy sucking under their ribs
- there are pauses when your child breathes
- your child's skin, tongue or lips are blue
- your child is floppy and will not wake up or stay awake

Managing the illness

If you think you, or your child, have scarlet fever:

- see your GP or contact NHS 111 as soon as possible
- make sure that you or your child take(s) the full course of any antibiotics prescribed. Although you or your child will feel better soon after starting the course of antibiotics, you must complete the course to ensure that you do not carry the bacteria in your throat after you have recovered
- make sure you and members of your household frequently wash their hands with warm water and soap (for at least 20 seconds), particularly after using the toilet, after using a tissue to catch a cough or sneeze, and before eating.
- stay at home, away from nursery, school or work for at least 24 hours after starting the antibiotic treatment, to avoid spreading the infection
- You should not share eating utensils, clothes, bedding and towels with an infected person. All contaminated tissues or handkerchiefs should be washed, or disposed of immediately.



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Useful links and guidance

Group A Strep - What you need to know (UKHSA): Group A Strep - What you need to know - UK Health Security Agency (blog.gov.uk)

Update on scarlet fever and invasive Group A strep: UKHSA update on scarlet fever and invasive Group A strep - GOV.UK (www.gov.uk)

NHS, Scarlet Fever: <u>Scarlet fever - NHS (www.n</u>hs.uk)

Should I keep my child off school checklist: Should I keep my child off school checklist poster (publishing.service.gov.uk)



WINTER ILLNESSES IN NORTH EAST SCHOOLS INFORMATION FOR PUPILS, PARENTS AND STAFF September 2022

As autumn and winter approach, it is likely that there will be increasing numbers of people affected by winter illnesses, such as diarrhoea and vomiting, influenza and scarlet fever. This leaflet provides advice for pupils, parents and staff on how to reduce the risk of catching these common bugs.

General hygiene

Handwashing is a highly effective way of preventing many infections from spreading. Pupils and staff should frequently wash their hands with warm water and soap, particularly after using the toilet, after using a tissue to catch a cough or sneeze, and before eating. As they are not effective against some germs which cause gastrointestinal illnesses, hand sanitiser gels are not a suitable substitute for handwashing after using the toilet.

Respiratory infections including influenza (flu) and COVID-19

Respiratory viruses such as flu and other flu-like illnesses spread easily between people from coughs and sneezes and can live on surfaces for several days. Symptoms may develop quickly and can include sudden fever, a dry chesty cough, a sore throat, aching body, headache, tiredness, diarrhoea or tummy pain, and nausea. For most people, viral respiratory infections result in an unpleasant but self-limiting illness. However, some people are at risk of developing severe illness or complications, including older adults, pregnant women, those with a long-term condition or a weakened immune system, and those in long-term care facilities.



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Vaccination of eligible children can reduce the risk of infection, including to others they are in contact with. There is more information on the COVID-19 vaccine for children at https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/coronavirus-covid-19- vaccination-for-children/coronavirus-covid-19-vaccine-for-children-aged-5-to-15/

The seasonal flu jab offers the best available protection against severe illness caused by the influenza virus. All children and adults eligible for an NHS vaccination should take up this offer.

There is more information on the flu vaccine for children at

https://www.nhs.uk/conditions/vaccinations/child-flu-vaccine/

If you or your child are in an at-risk group and develop symptoms of flu, anti-viral treatment may be advised. Please seek prompt medical assessment via NHS 111, a GP or a nurse who will be able to provide further advice.

If you or your child are in an at-risk group and have had recent contact with a confirmed influenza case and have not had the seasonal flu jab, anti-viral treatment may be advised. Please seek prompt advice via NHS 111, a GP or a nurse.

If you or your child are not in an at-risk group and develop symptoms of flu, and would like advice on managing these symptoms, please consult a pharmacist, NHS 111, or your GP or nurse in the usual way.

As with any respiratory illness, any child or staff member with these symptoms should stay off school until any fever has resolved and they are well enough to do their normal activities.

There is more information on flu at

nhs.uk/conditions/flu

Diarrhoea and vomiting

It is not unusual for viruses which cause diarrhoea and vomiting to circulate among children, especially over the winter. If you or your child develop these symptoms and are concerned about them, please contact NHS 111 or your GP or nurse in the usual way.

Any child or staff member who develops diarrhoea and/or vomiting should stay off school until 48 hours after they last had diarrhoea or vomiting.

There is more information on diarrhoea and vomiting at

nhs.uk/conditions/diarrhoea-and-vomiting



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Scarlet fever

Scarlet fever is usually a mild illness, though it typically needs to be treated with a course of antibiotics to minimise the risk of complications and reduce the spread to others. Scarlet fever is characterised by a fine red rash which typically appears first on the chest and stomach, rapidly spreading to other parts of the body. The skin can feel a bit like sandpaper, and the face can be flushed red while remaining pale around the mouth. The rash often appears after or along with symptoms such as a sore throat, headache, fever, nausea and vomiting. Children who have recently had chickenpox are at high risk of a more severe course of illness if they catch scarlet fever.

If you think you or your child has scarlet fever, please seek prompt medical assessment via NHS 111, or your GP or nurse.

Any child or staff member who develops scarlet fever should stay off school until 24 hours after their first dose of antibiotics.

There is more information on scarlet fever at

nhs.uk/conditions/scarlet-fever

COVID-19

It is possible that we will see an increase in the number of COVID-19 cases over the autumn and winter period. Vaccination offers the best available protection against severe illness caused by COVID-19. Anyone eligible for an NHS COVID-19 booster vaccination should take up this offer.

Symptoms of COVID-19 include fever, a new continuous cough, a loss of or change to your sense of taste or smell, shortness of breath, feeling unusually tired, an aching body, a headache, sore throat, blocked or runny nose, a loss of appetite, diarrhoea and feeling or being sick. If you or your child develop these symptoms and are concerned about them, please contact NHS 111 or your GP or nurse in the usual way.

As with any respiratory illness, any child or staff member who develops these symptoms should stay off school until any fever has resolved and they are well enough to do their normal activities. Although most people are no longer eligible for COVID-19 testing, any child who happens to have a positive COVID-19 test should stay off school for at least three days from the date of the test, and any adult who happens to have a positive COVID-19 test should stay off school for at least five days from the date of the test. There is more information on COVID-19 at

nhs.uk/conditions/coronavirus-covid-19



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School closures

The Health Protection Team **does not** frequently or routinely advise that schools close when there are increased levels of diarrhoea and vomiting, increased number of COVID cases, or increase numbers of cases of other winter illnesses. Closing schools does not usually provide substantial additional protection against catching illnesses which are commonly circulating in the community.

However, schools may need to close for other practical reasons, such as due to high levels of staff absence, or a need to facilitate additional cleaning. Any decision about school closures will be taken by the school's management team, and any queries regarding these should be addressed to the school.