



Public Health England

Extract from Guidance on infection control in schools and other childcare settings

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. It does this through advocacy, partnerships, world-class science, knowledge and intelligence, and the delivery of specialist public health services.

PHE is an operationally autonomous executive agency of the Department of Health.

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1. Introduction

The document provides guidance for schools and other childcare settings, such as nurseries, on infection control issues. It is an updated version of guidance that was produced in 2010. Prevent the spread of infections by ensuring:

- routine immunisation
- high standards of personal hygiene and practice, particularly handwashing
- maintaining a clean environment

For further information and advice visit www.gov.uk/phe or contact your local health PHE centre. See Appendix 1 for contact details.

2. Rashes and skin infections

Children with rashes should be considered infectious and assessed by their doctor.

Infection or complaint	Recommended period to be kept away from school, nursery	Comments
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended
Chickenpox	Five days from onset of rash and all vesicles have crusted over	risk to pregnant women
Cold sores, (Herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and heal without treatment
German measles (rubella)	Four days from onset of rash	Preventable by immunisation (MMR x2) risk to pregnant women
Hand, foot and mouth	None	The nursery will contact the local HPT if six or more children are affected within a one to two week period. 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 and recovered	Preventable by vaccination (MMR x2) risk to pregnant women
Ringworm	Exclusion not usually required	Treatment is required
Roseola (infantum) / 6th disease	None	None
Scabies	Child can return after first treatment	Household and close contacts require Treatment at the same time
Scarlet fever	Child can return 24 hours after starting appropriate antibiotic treatment	The person is infectious for two to three weeks if antibiotics are not administered. In the event of two or more suspected cases the nursery will contact the local HP team.
Slapped Cheek / 5th disease Parvovirus B19	None (once rash has developed)	risk to pregnant women
Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune, ie have not had chickenpox. It is spread by very close contact. If further information is required, the nursery will contact the local PHE centre. risk to pregnant women
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms

3. Diarrhoea and vomiting illness

Infection or complaint	Recommended period to be kept away from school, nursery	Comments
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting	Please inform the nursery and seek advice from your GP. The nursery will inform PHE if 6 or more cases are reported within a one to two week period.
E. coli O157 VTEC Typhoid * and paratyphoid * (enteric fever) Shigella (dysentery) Gastroenteritis Campylobacter Giardia Salmonella	Should be excluded for 48 hours from the last episode of diarrhoea and or vomiting, and are well enough to return..	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. The nursery will consult the local PHE centre for further advice. If there are more than two cases of Giardia or Salmonella the nursery will report this to the local PHE centre.
Cryptosporidiosis	Exclude for 48 hours after all symptoms have stopped.	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled

4. Respiratory infections

Infection or complaint	Recommended period to be kept away from school, nursery	Comments
Flu (influenza)	Until recovered	The nursery will report six or more cases within a one to two week period to the local PHE centre.
Respiratory infections including coronavirus (COVID-19)	Children and young people should not attend if they have a high temperature and are unwell Children and young people who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test	Children with mild symptoms such as runny nose, and headache who are otherwise well can continue to attend their setting. risk to pregnant women
Tuberculosis (TB)	The nursery will consult with the local PHE centre	Requires prolonged close contact for spread. Only pulmonary TB is infectious to others.
Whooping cough * (pertussis)	Two days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. The local PHE centre will organise any contact tracing necessary

5. Other infections

Infection or complaint	Recommended period to be kept away from school, nursery	Comments
Conjunctivitis	None	If an outbreak/cluster occurs or six or more cases, the nursery will consult the local PHE centre.
Diphtheria *	Exclusion is essential. The nursery will consult with the local HPT	Family contacts must be excluded until cleared to return by your local PHE centre. Preventable by vaccination.
Glandular fever	None	
Head lice	None	Treatment is recommended only in cases where live lice have been seen
Hepatitis A *	Exclude until 7 days after onset of jaundice (or 7 days after symptom onset if no jaundice)	In an outbreak of hepatitis A, the local PHE centre will advise the nursery on control measures.
Hepatitis B * Hepatitis C * HIV/AIDS	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact. The nursery will contact the local HPE for advice.
Meningococcal Meningitis * Septicaemia *	Until recovered	Meningitis C and B are preventable by vaccination. The nursery will take advice from the HPT and follow any action needed.
Meningitis * due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. The nursery will take advice from the HPT and follow any action needed.
Meningitis viral *	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. If further information is required, the nursery will contact the local PHE centre
Mumps *	Exclude child for 5 days after onset of swelling	Preventable by vaccination (MMR x2 doses)
Threadworms	None	Treatment is recommended for the child and household contacts
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic

For full Guidance

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/exclusion-table>

*** Denotes a Notifiable Disease**

It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control). In addition, organisations may be required via locally agreed arrangements to inform their local PHE centre. Regulating bodies (for example, Office for Standards in Education (OFSTED) / Commission for Social Care Inspection (CSCI)) may wish to be informed – please refer to local policy.

Appendix 1

PHE Avon Gloucestershire and Wiltshire Health Protection Team,
2 Rivergate, Temple Quay,
Bristol,
BS1 6EH

Phone:

[0300 303 8162 option 1 then option 2](tel:03003038162)

Out of hours for health professionals only

[0300 303 8162 option 2](tel:03003038162)