

Infection control (taken from PHE guidance Scarlet fever: managing outbreaks in schools and nurseries)

In schools and nurseries infections can be spread through direct physical contact between children and staff and through shared contact with physical surfaces such as table tops, taps, and handles. The following are steps that should be taken.

Exclusion -Staff and parents should be reminded that children and adults with scarlet fever should not return to nursery or school until **at least 24 hours after starting treatment with an appropriate antibiotic**. Individuals who do not take antibiotic treatment will be infectious for two to three weeks.

Hand washing -remains the most important step in preventing such infections. Good hand hygiene should be enforced for all pupils and staff and a programme should be put into place that encourages children to wash their hands at the start of the school day, after using the toilet, after play, before and after eating, and at the end of the school day. It is important that hands are washed correctly. Liquid soap via a soap dispenser should be made available and there should be a plentiful supply of paper towels. Hand hygiene resources for schools: <http://www.e-bug.eu/>

Respiratory hygiene - Children and adults should be encouraged to cover their mouth and nose with a tissue when they cough and sneeze and to wash hands after sneezing and after using or disposing of tissues. Spitting should be discouraged.

Cover cuts - Breaching the skin barrier provides a portal of entry for the organism, therefore children and staff should be reminded that all scrapes or wounds, especially bites, should be thoroughly cleaned and covered.

Enhanced environmental cleaning - The environment can play a significant part in transmission as the streptococcus bacteria can be found to remain in dust as well as on furniture and equipment. Cleaning of the environment, including toys and equipment, should as a minimum be carried out daily during the outbreak and a very thorough terminal clean should be undertaken when the outbreak is declared over. Touch points such as taps, toilet flush handles, and door handles, should be cleaned regularly throughout the day

Hypochlorite at 1000 ppm of available chlorine, preceded by cleaning if any dirt is visible, is recommended for cleaning of equipment, hard surfaces, hard toys and sleep mats. Horizontal surfaces should be kept clear of unnecessary equipment and ornaments to allow thorough cleaning to occur.

Carpets and soft furnishings should be vacuumed daily; the vacuum cleaner should have a high efficiency filter on its exhaust. Single use cloths or paper towel should be used for cleaning. Where soft toys cannot be avoided, they should be machine washed; hard surface toys are more easily washed and disinfected. Consider replacing low cost items that may be difficult to clean thoroughly e.g. pencils, crayons, play dough and plasticine.

During the terminal (end of outbreak) clean, carpets and rugs should be should be cleaned with a washer-extractor. Curtains, soft furnishing covers and all linen should be removed, and washed at the hottest compatible temperature. After this they should not be placed in the same laundry basket or other container that was used for the uncleaned items. Soft furnishings without removable covers should be steam cleaned taking care to hold the nozzle of the steam cleaner sufficiently close to the surface and for long enough for all surfaces (particularly contact areas) to ensure they heat up thoroughly.

Please also see the following link to new **guidance on infection control in schools and other childcare settings** that may be helpful. <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>