

Illness Guidance for Parents

Taken from [GOV.uk website](https://www.gov.uk)

Illness	Period away from school?	Comments
Rashes and skin infections		
Athlete's foot	None	Treatment is recommended, children should not be barefoot at school
Chicken pox	At least 5 days from onset of rash and until all blisters have crusted over	
Cold sores (herpes simplex)	None	
German measles (Rubella)	5 days from onset of rash	
Hand foot and mouth	None	
Impetigo	Until lesions are crusted or healed, or 48 hours after starting antibiotic treatment.	Antibiotic treatment speeds healing and reduces the infectious period.
Measles	4 days from onset of rash and well enough.	
Molluscum contagiosum	None	This is an infection that causes spots on the skin (may be confused with chicken pox) https://www.nhs.uk/conditions/molluscum-contagiosum/
Ringworm	Not usually required	Treatment is required
Roseola (infantum)	None	Usually causes a high temperature and a rash https://www.nhs.uk/conditions/roseola/
Scabies	Can return after first treatment.	Household and close contacts require treatment at the same time.
Scarlet fever	Exclude until 24 hours after starting antibiotic treatment.	Individuals who decline treatment with antibiotics should be excluded until resolution of symptoms
Slapped cheek	None (once rash has developed)	
Shingles	Exclude only if rash is wheeping and cannot be covered.	
Warts and verrucae	None	Verrucae should be covered in swimming pools, gyms and changing rooms.
Diarrhoea and vomiting illnesses		
Diarrhoea and vomiting	Can return 48 hours after diarrhoea and vomiting have stopped.	If a particular cause of the diarrhoea and vomiting is identified, there may be additional exclusion advice, for example E. coli STEC and hep A. Please contact school
Respiratory infections		
COVID-19	Children 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 who have not tested positive ,such as runny nose, and headache who are otherwise well can continue to attend their setting.
Flu (influenza) or influenza like illness	Until recovered	
Tuberculosis* (TB)	Until at least 2 weeks after the start of effective antibiotic treatment (if pulmonary TB).	Only pulmonary (lung) TB is infectious to others, needs close, prolonged contact to spread.

	Exclusion not required for non-pulmonary or latent TB infection.	
Whooping cough (pertussis)	2 days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics	After treatment, non-infectious coughing may continue for many weeks
Other infections		
Conjunctivitis	None	
Diphtheria	Exclusion is essential.	
Glandular fever	None	
Head lice	None	
Hepatitis A	Exclude until 7 days after onset of jaundice (or 7 days after symptom onset if no jaundice).	
Hepatitis B, C, HIV	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact.
Meningococcal meningitis or septicaemia	Until recovered	No reason to exclude siblings or close contacts.
Meningitis* due to other bacteria	Until recovered	No reason to exclude siblings or close contacts.
Meningitis viral	None	Milder illness than bacterial meningitis. Siblings and other close contacts of a case need not be excluded.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise spread.
Mumps	5 days after onset of swelling	
Threadworms	None	Treatment recommended for child and household
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need or respond to an antibiotic treatment.