

Dear Parents and Carers.

Letter to update you with regards to scarlet fever and Strep A. Including, what the school is doing to reduce the risk of infection.

We are sure that you will have picked up information from the news regarding a recent increase in notifications of scarlet fever and invasive streptococcal disease.

WKS has been advised that 'Regionally and nationally, we continue to see high rates of scarlet fever, higher than would be expected for this time of year. The same pattern continues to be seen with cases of invasive group A streptococcus (iGAS) increasing, particularly in children under 10 years. iGAS is a far less common infection caused by the same bacteria as scarlet fever but can lead to more serious illness.'

In brief: The bacteria usually causes a mild infection producing sore throats or scarlet fever that can be easily treated with antibiotics.

In very rare circumstances: this bacteria can cause a serious illness called invasive group A streptococcus (iGAS).

While this is uncommon it is important that parents are on the lookout for symptoms and consult a doctor as quickly as possible so their child can be treated. This way we can stop the infection becoming serious.

The early symptoms of scarlet fever include sore throat, headache, fever, nausea and vomiting. After 12 to 48 hours the characteristic red, pinhead rash develops, typically first appearing on the chest and stomach, then rapidly spreading to other parts of the body, and giving the skin a sandpaper-like texture. The scarlet rash may be harder to spot on different skin tones, although the 'sandpaper' feel should be present.

Patients typically have flushed cheeks and pallor around the mouth. This may be accompanied by a 'strawberry tongue'. As the child improves peeling of the skin can occur.

West Kirby School and College

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Actions to take:

- Contact your GP
- Children with suspected scarlet fever should not attend school until 24 hours after starting appropriate antibiotic treatment for scarlet fever.
- Whilst scarlet fever is circulating it is especially important that any children and adults with chickenpox do stay off school until all their blisters have dried over, which is at least 5 days after they first appeared.

What the school is doing to reduce the risk of infection:

In addition to our daily cleaning regimes, staff in primary classrooms will increase frequency of the following:

- Wipe down frequently touched areas multiple times daily with disinfectant wipes. These include (but are not limited to) table tops, taps, toys and handles.
- Maintain an ongoing emphasis on hand washing, and supervise this to make sure children use soap and do this properly
- Make sure that any sneezes are caught by a tissue, tissue in bin and hands washed afterwards
- Improve ventilation by opening windows and doors, as safe and appropriate
- Ensure staff and children who are unwell remaining away from the setting
- Ensure any cuts or scrapes are thoroughly cleaned and covered with waterproof dressings to help prevent invasive infection.
- Liaise with our Local Authority Health Protection Team for advice and guidance Further guidance

This information has come from Alder Hey Children's hospital:https://alderhey.nhs.uk/contact-us/press-office/latest-news/scarlet-fever-and-invasive-group-strepSigns and symptoms of scarlet fever

More information about scarlet fever can be found here:https://www.gov.uk/government/publications/scarlet-fever-symptoms-diagnosis-treatment

Specific guidance for under 5s for this winter can be found at:

https://ukhsa.blog.gov.uk/2022/10/25/5-ways-to-protect-your-under-5s-this-winter/

As always, we closely listen to and follow advice from our Local Health Authority. If you have any concerns about your child's health, please seek advice from your GP or you can contact our School Nurse. We seek to minimise infections and to work with you to keep everybody safe.

Please contact your child's class teacher if we can support your further.

With kind regards

Rebecca Johnson Sian Thomas School Nurse Principal.