



# Carlisle & Hampton Hill Federation



## Carlisle Infant School

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6<sup>th</sup> December 2022

Dear parents/carers

## Information for parents from the UK Health Security Agency re: Group A Streptococcus (GAS)/scarlet fever

### What is Group A Streptococcus?

Group A Streptococcus or Streptococcus pyogenes is a bacterium that can be found in the throat and on the skin. People may carry it and have no symptoms of illness or may develop infection.

### How is it spread?

Group A Streptococcus survives in throats and on skin for long enough to allow easy spread between people through sneezing and skin contact. People who are currently carrying the bacteria in the throat or on the skin may have symptoms of illness or they may have no symptoms and feel fine. In both cases, these bacteria can be passed on to others.

### What kinds of illnesses are caused by Group A Streptococcus?

Most Group A Streptococcus illnesses are relatively mild, with symptoms including a sore throat ("strep throat"), scarlet fever or a skin infection such as impetigo. However, on rare occasions, these bacteria can cause other severe and sometimes life-threatening diseases.

Although scarlet fever is usually a mild illness, it should be treated with antibiotics to minimise the risk of complications and reduce the spread to others.

We continue to see elevated levels of scarlet fever cases particularly in young children.

We would like to take this opportunity to remind you of the signs, symptoms and the actions to be taken.

The early symptoms of scarlet fever include:

- ✚ sore throat
- ✚ headache
- ✚ fever
- ✚ nausea
- ✚ 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 darker skin, although the 'sandpaper' feel should be present

- ✚ patients typically have flushed cheeks and are pale around the mouth. This may be accompanied by a 'strawberry tongue'
- ✚ as the child improves peeling of the skin can occur.

### [NHS scarlet fever fact sheet with images](#)

During periods of high levels of scarlet fever there may also be an increase in outbreaks in schools, nurseries and other childcare settings.

Children who have recently had/have influenza or chickenpox are more at risk of developing serious GAS infection during an outbreak of scarlet fever and so the school community and parents/carers should remain vigilant for symptoms such as:

- ✚ a persistent high fever
- ✚ cellulitis (skin infection)
- ✚ arthritis (joint redness, pain or swelling).

Schools, nurseries and other childcare settings have on rare occasions been the focus for clusters of invasive GAS disease, especially when there are both outbreaks of chickenpox and influenza at the same time as GAS infections.

### **What is invasive Group A Streptococcal (iGAS) disease?**

Although rare, invasive Group A Streptococcus disease may occur when bacteria get into parts of the body where bacteria are not usually found. These infections are called invasive Group A Streptococcal disease and can be very serious and even life-threatening.

### **What are the symptoms of invasive Group A Streptococcal disease?**

The most important thing to be aware of are the early signs and symptoms of invasive Group A Streptococcal disease. These are:

- ✚ high Fever
- ✚ severe muscle aches
- ✚ localised muscle tenderness
- ✚ redness at the site of a wound

### **What should I do if my child becomes unwell?**

If your child becomes unwell contact your GP practice. Alternatively, you can call NHS111 and you should also call NHS111 if your surgery is closed.

### **If my child is unwell, should they stay off school?**

- ✚ If your child becomes unwell with these symptoms you should contact your GP practice or call NHS111 (which operates a 24/7 service) to seek advice. If your child is unwell they should stay off school until they are better
- ✚ It remains important that scarlet fever cases are treated promptly with antibiotics to limit further spread, and reduce risk of potential complications in cases. If scarlet fever is suspected they should be excluded from nursery/school/work for 24 hours after the commencement of appropriate antibiotic treatment.
- ✚ ensuring staff and children who are unwell stay away from the setting, remain the most important steps and will help reduce transmission of most infections within your setting

### **What else can I do to prevent my child from becoming unwell?**

Because Group A Streptococcal disease is spread through coughing, sneezing and skin contact, it's important to have good hand hygiene and catch coughs and sneezes in tissues and throw these away. If you are unwell, stay at home and seek medical advice. This will all help limit the spread of other infections, which are common this time of year.

Encouraging the staff and pupils to receive influenza vaccinations in line with national schedule, and to keep up to date with all recommended national childhood immunisations, especially where they are known to be in risk groups will also help.

The school will maintain an ongoing emphasis on regular environmental cleaning, hand and respiratory hygiene.

### **Further information**

[5 ways to protect your under 5's this winter - blog](#)

[The complete routine immunisation schedule from February 2022](#)