

Infection Control During the Coronavirus Pandemic

Statement of intent

We understand that we face a time of great uncertainty and, as a school, we are doing all we can to provide clarity and safety for the school community. This appendix includes provisions which the school will have due regard for during the coronavirus pandemic. The information in this section is under constant review and is updated to reflect changes to government guidance as it is released.

1. Legal framework

- 1.1. This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:
 - DfE and PHE (2020) 'Coronavirus (COVID-19): implementing social distancing in education and childcare settings'
 - PHE and DfE (2020) 'Coronavirus (COVID-19): guidance for educational settings'
 - PHE (2020) 'COVID-19: cleaning of non-healthcare settings'

2. Social distancing measures

- 2.1. The school will adhere to the government's social distancing guidelines as much as is possible.
- 2.2. To ensure the risk of virus spread for both staff and pupils still in school is as low as possible, the following action will be taken:
 - Pupils, parents, carers, staff and any visitors will be told not to enter the building if they are displaying symptoms of coronavirus.
 - The way pupils arrive at school will be reviewed, with a view to reducing any unnecessary travel on coaches, buses or other public transport.
 - Class sizes will be reduced and based on the number of teaching staff available.
 - Pupils will be sat at desks that are two metres apart and will be required to sit in the same seats every day.

- Break times and the movement of pupils around the school will be staggered to prevent large groups of pupils from gathering.
- There will be no lunches on site for pupils or staff.
- Pupils will be asked to visit the toilet one after the other.
- Staff will ensure pupils keep a safe distance whilst in the playground or taking part in physical exercise.
- All unnecessary staff gatherings will be avoided, e.g. where possible, meetings will take place via video conference from different classrooms or offices.
- Parents will be discouraged from gathering at school gates. Floor markings will be placed in pick up areas to ensure parents maintain a two-metre distance from one another.
- Staff will consider using age and developmentally appropriate ways to encourage children to follow social distancing, handwashing and other guidance, e.g. through games, songs and stories.

3. Additional hygiene and cleaning measures

- 3.1. Anyone who feels unwell will be told to stay at home for 7 days if they live alone, or 14 days if they live with others. They will be required to get a test.
- 3.2. All staff and pupils will be:
 - Told to frequently wash their hands with soap and water for 20 seconds.
 - Encouraged not to touch their faces.
 - Told to use a tissue or their elbow to catch coughs or sneezes and use bins for tissue waste.
- 3.3. Pupils who have difficulty washing their hands will be supported by a member of staff.
- 3.4. Sharing food, drink, utensils, equipment and soft toys will be avoided as much as possible. Equipment, toys and surfaces will be cleaned and disinfected more frequently than usual.
- 3.5. The frequency of cleaning will increase, particularly for surfaces in classrooms, within toilet blocks and in changing rooms, in

accordance with PHE's 'COVID-19: cleaning of non-healthcare settings' guidance and the school's daily cleaning routine

- 3.6. Equipment, including keyboards, tables, chairs, door handles, light switches and bannisters, will be cleaned and disinfected regularly. Each class will have a supply of cleaning materials to use throughout the day.

4. Preventing the further spread of infection

- 4.1. If anyone becomes unwell with the symptoms of coronavirus, they will be sent home and advised to follow PHE's 'COVID-19: guidance for households with possible coronavirus infection'.
- 4.2. If a pupil is awaiting collection, they will be moved to the DT room where they can be isolated behind a closed door and receive adult supervision, if required. Where possible, a window will be opened for ventilation.
- 4.3. Where isolation is not possible, the pupil will be moved to an area which is at least two metres from anyone else.
- 4.4. If the pupil needs to use the toilet whilst waiting to go home, they will be required to use a separate bathroom. This bathroom will be cleaned and disinfected using standard cleaning products before anyone else uses it.
- 4.5. If a member of staff has helped someone who is unwell with coronavirus symptoms, they along with the other members of their class team will all go home once the other pupils have been collected.
- 4.6. Staff must wash their hands thoroughly for 20 seconds following any contact with someone who is unwell.
- 4.7. When cleaning an area where a person with possible or confirmed coronavirus has been, staff will use disposable gloves and an apron. Staff will wash their hands with soap and water for 20 seconds after all PPE has been removed.

- 4.8. If there is visible contamination to an area, e.g. with bodily fluids, cleaning staff will use additional PPE to protect their eyes, mouth and nose.
- 4.9. Areas where a symptomatic individual has passed through and spent minimal time, e.g. corridors, but which are not visibly contaminated with bodily fluids, will be cleaned thoroughly with normal cleaning products.
- 4.10. All surfaces that a symptomatic person has come into contact with will be cleaned and disinfected, including objects which are visibly contaminated and those which are potentially contaminated, e.g. door handles.
- 4.11. Disposable cloths or paper rolls and disposable mop heads will be used to clean all hard surfaces, floors, chairs, door handles and sanitary fittings, using one of the following options:
 - A combined detergent disinfectant solution at a dilution of 1,000 parts per million available chlorine
 - A household detergent followed by disinfection (1000 ppm av.cl), following the manufacturer's instructions for dilution, application and contact times
 - An alternative disinfectant which is checked to ensure it is effective against enveloped viruses
- 4.12. Cleaning staff will be asked to:
 - Avoid creating splashes and spray when cleaning.
 - Dispose of any cloths and mop heads used, by putting them into waste bags.
 - Steam clean items that cannot be cleaned using detergents, e.g. upholstered furniture.
 - Dispose of items that are heavily contaminated with body fluids and cannot be cleaned by washing.
- 4.13. Waste from possible cases and the cleaning of potentially infected areas will be put into a plastic rubbish bag which will be tied when full. The plastic bag will then be placed into a second tied bin bag, put in a suitable and secure place, and marked for storage until the individual's test results are known.

- 4.14. It is the member of SLT on site to ensure that other all SLT are informed via email of the pupil/staff and that the Site Supervisor and Cleaning Team are aware of any deeper cleaning that is required due to bodily fluids etc

5. Communication with parents

- 5.1. The school will inform parents about the measures being taken and request they provide support with implementation, e.g. by encouraging measures to continue at home.

6. Pupils

- 6.1. The school will work with the LA and parents to decide how best to continue supporting pupils with EHC plans whilst ensuring they stay healthy and safe.
- 6.2. Some pupils with SEND or complex needs may be unable to follow social distancing guidelines. In these circumstances, staff will increase their level of self-protection by minimising close contact (where appropriate), cleaning frequently touched surfaces, and carrying out more frequent handwashing or virtual learning may be suitable for individuals to protect themselves and the wider community.

7. Monitoring and review

- 7.1. The **Principal** is responsible for continually monitoring PHE and DfE updates and updating this appendix in line with any changes to government guidance.
- 7.2. Any changes to this appendix will be communicated to all staff, parents and relevant stakeholders.

Managing Specific Infectious Diseases

Disease	Symptoms	Considerations	Exclusion period
Athlete's foot	Scaling or cracking of the skin, particularly between the toes, or blisters containing fluid. The infection may be itchy.	Cases are advised to see their GP for advice and treatment.	Exclusion is not necessary.
Chicken pox	Sudden onset of fever with a runny nose, cough and generalised rash. The rash then blisters and scabs over. Several blisters may develop at once, so there may be scabs in various stages of development. Some mild infections may not present symptoms.	Cases are advised to consult their GP.	<p>Chickenpox is infectious from 48 hours prior to a rash appearing up to five days after the onset of a rash.</p> <p>Cases will be excluded from school for five days from the onset of a rash.</p> <p>It is not necessary for all the spots to have healed before the case returns to school.</p>
Cold sores	The first signs of cold sores are tingling, burning or itching in the affected area. Around 24 hours after the first signs appear the area will redden and swell,	Cases are advised not to touch the cold sore, or to break or pick the blisters. Sufferers of cold sores should avoid kissing people and	Exclusion is not necessary.

Disease	Symptoms	Considerations	Exclusion period
	<p>resulting in a fluid-filled blister. After blistering, they break down to form ulcers then dry up and crust over.</p>	<p>should not share items such as cups, towels and facecloths.</p>	
<p>Conjunctivitis</p>	<p>The eye(s) become reddened and swollen, and there may be a yellow or green discharge. Eyes may feel itchy and 'gritty'.</p>	<p>Cases are encouraged to seek advice, wash their hands frequently and not to rub their eyes.</p> <p>The HPT will be contacted if an outbreak occurs.</p>	<p>Exclusion is not necessary.</p>
<p>Coronavirus</p>	<p>A new, continuous cough and a high temperature are the main symptoms of coronavirus.</p>	<p>Cases will be sent home and advised to contact 111 for advice, or 999 if they become seriously ill or believe their life is at risk.</p> <p>The local HPT will be contacted if an outbreak occurs.</p>	<p>Cases will be required to self-isolate at home for 7 days if they live alone, or 14 days if they live with others.</p>
<p>Food poisoning</p>	<p>Symptoms normally appear within one to two days of contaminated food being consumed, although they may start at any point between a few hours and several weeks later. The main symptoms are likely to be nausea,</p>	<p>Cases will be sent home.</p> <p>The HPT will be contacted where two or more cases with similar symptoms are reported.</p>	<p>Cases will be excluded until 48 hours have passed since symptoms were present.</p>

Disease	Symptoms	Considerations	Exclusion period
	vomiting, diarrhoea, stomach cramps and fever.	The cause of a food poisoning outbreak will always be investigated.	For some infections, longer exclusion periods may be required. The HPT will advise in such cases.
Giardia	Symptoms include abdominal pain, bloating, fatigue and pale, loose stools.	Cases will be sent home. The HPT will be contacted where two or more cases with similar symptoms are reported.	Cases will be excluded until 48 hours have passed since symptoms were present.
Salmonella	Symptoms include diarrhoea, headache, fever and, in some cases, vomiting.	Cases will be sent home. The HPT will be contacted where two or more cases with similar symptoms are reported.	Cases will be excluded until 48 hours have passed since symptoms were present.
Typhoid and paratyphoid fever	Symptoms include tiredness, fever and constipation. The symptoms of paratyphoid fever include fever, diarrhoea and vomiting.	All cases will be immediately reported to the HPT.	Cases will be excluded whilst symptomatic and for 48 hours after symptoms have resolved. Environmental health officers or the HPT may advise the school to issue a lengthened exclusion period.

Disease	Symptoms	Considerations	Exclusion period
<p>E. coli (verocytotoxigenic or VTEC)</p>	<p>Symptoms vary but include diarrhoea, abdominal cramps, headaches and bloody diarrhoea.</p>	<p>Cases will immediately be sent home and advised to speak to their GP.</p>	<p>Cases will be excluded whilst symptomatic and for 48 hours after symptoms have resolved.</p> <p>Where the sufferer poses an increased risk, for example, food handlers, they will be excluded until a negative stool sample has been confirmed.</p> <p>The HPT will be consulted in all cases.</p>
<p>Gastroenteritis</p>	<p>Symptoms include three or more liquid or semi-liquid stools in a 24-hour period.</p>	<p>The HPT will be contacted where there are more cases than usual.</p>	<p>Cases will be excluded until 48 hours have passed since symptoms were present.</p> <p>If medication is prescribed, the full course must be completed and there must be no further symptoms displayed for 48 hours following completion of the course before the cases may return to school.</p>

Disease	Symptoms	Considerations	Exclusion period
			Cases will be excluded from swimming for two weeks following their last episode of diarrhoea.
Bacillary dysentery (Shigella)	Symptoms include bloody diarrhoea, vomiting, abdominal pain and fever. It lasts four to seven days on average, but potentially several weeks.	The school will contact the HPT.	Microbiological clearance is required for some types of shigella. The HPT will advise.
Campylobacter	Symptoms include diarrhoea, headache, fever and, in some cases, vomiting.		Cases will be excluded until 48 hours have passed since symptoms were present.
Cryptosporidiosis	Symptoms include abdominal pain, diarrhoea and occasional vomiting.		Cases will be excluded until 48 hours have passed since symptoms were present.
Glandular fever	Symptoms include severe tiredness, aching muscles, sore throat, fever, swollen glands and occasionally jaundice.	The sufferer may feel unwell for several months and the school will provide reasonable adjustments where necessary.	Exclusion is not necessary, and cases can return to school as soon as they feel well.
Hand, foot and mouth disease	Symptoms include a fever, reduced appetite and generally feeling unwell. One or two days later, a rash with blisters will develop on cheeks, hands and feet. Not all cases will have symptoms.		Exclusion is not necessary, and cases can return to school as soon as they feel well.

Disease	Symptoms	Considerations	Exclusion period
Head lice	Other than the detection of live lice or nits, there are no immediate symptoms until two to three weeks after infection, where itching and scratching of the scalp occurs.	<p>Treatment is only necessary when live lice are seen.</p> <p>Staff are not permitted to inspect any pupil's hair for head lice.</p> <p>If a staff member incidentally notices head lice in a pupil's hair, they will inform the pupil's parents and advise them to treat their child's hair.</p> <p>When a pupil has been identified as having a case of head lice, a letter will be sent home to all parents notifying them that a case of head lice has been reported and asking all parents to check their children's hair.</p>	Exclusion is not necessary.
Hepatitis A	Symptoms include abdominal pain, loss of appetite, nausea, fever and tiredness, followed by jaundice, dark urine and pale faeces.	The illness in children usually lasts one to two weeks, but can last longer and be more severe in adults.	Cases are excluded while unwell and for seven days after the onset of jaundice (or the onset of symptoms if no jaundice presents), the case is under five

Disease	Symptoms	Considerations	Exclusion period
			<p>years of age or where hygiene is poor.</p> <p>There is no need to exclude older children with good hygiene.</p>
Hepatitis B	Symptoms include general tiredness, nausea, vomiting, loss of appetite, fever and dark urine, and older cases may develop jaundice.	<p>The HPT will be contacted where advice is required.</p> <p>The procedures for dealing with blood and other bodily fluids will always be followed.</p> <p>The accident book will always be completed with details of injuries or adverse events related to cases.</p>	<p>Acute cases will be too ill to attend school and their doctor will advise when they are fit to return.</p> <p>Chronic cases will not be excluded or have their activities restricted.</p> <p>Staff with chronic hepatitis B infections will not be excluded.</p>
Hepatitis C	Symptoms are often vague but may include loss of appetite, fatigue, nausea and abdominal pain. Less commonly, jaundice may occur.	<p>The procedures for dealing with blood and other bodily fluids will always be followed.</p> <p>The accident book will always be completed with details of injuries</p>	Cases will not be excluded or have their activities restricted.

Disease	Symptoms	Considerations	Exclusion period
		or adverse events related to cases.	
Impetigo	Symptoms include lesions on the face, flexures and limbs.	Towels, facecloths and eating utensils will not be shared by pupils. Toys and play equipment will be cleaned thoroughly.	Cases will be excluded until lesions have healed and crusted or 48 hours after commencing antibiotic treatment.
Influenza	Symptoms include headache, fever, cough, sore throat, aching muscles and joints, and tiredness.	Those in risk groups will be encouraged to have the influenza vaccine. Anyone with flu-like symptoms will stay home until they have recovered. Pupils under 16 will not be given aspirin.	Cases will remain home until they have fully recovered.
Measles	Symptoms include a runny nose, cough, conjunctivitis, high fever and small white spots around the cheeks. Around the third day, a rash of flat red or brown blotches may appear on the face then spread around the body.	All pupils are encouraged to have MMR immunisations in line with the national schedule.	Cases are excluded for four days after the onset of a rash.

Disease	Symptoms	Considerations	Exclusion period
		<p>Staff members should be up-to-date with their MMR vaccinations.</p> <p>Pregnant staff members and those with weak immune systems will be encouraged to contact their GP immediately for advice if they come into contact with measles.</p>	
Meningitis	Symptoms include fever, severe headaches, photophobia, stiff neck, non-blanching rash, vomiting and drowsiness.	Meningitis is a notifiable disease.	Once a case has received any necessary treatment, they can return to school.
Meningococcal meningitis and meningitis septicaemia	Symptoms include fever, severe headaches, photophobia, stiff neck and a non-blanching rash.	<p>Medical advice will be sought immediately.</p> <p>The confidentiality of the case will always be respected.</p> <p>The HPT and school health advisor will be notified of a case of meningococcal disease in the school. The HPT will conduct a risk</p>	<p>When the case has been treated and recovered, they can return to school.</p> <p>Exclusion is not necessary for household or close contacts unless they have symptoms suggestive of meningococcal infection.</p>

Disease	Symptoms	Considerations	Exclusion period
		<p>assessment and organise antibiotics for household and close contacts.</p> <p>The HPT will be notified if two cases of meningococcal disease occur in the school within four weeks.</p>	
Meningitis (viral)	Symptoms include headache, fever, gastrointestinal or upper respiratory tract involvement and, in some cases, a rash.	<p>The case will be encouraged to consult their GP.</p> <p>If more than once case occurs, the HPT will be consulted.</p>	No exclusion is required.
Meticillin resistant staphylococcus aureus (MRSA)	Symptoms are rare but include skin infections and boils.	All infected wounds will be covered.	No exclusion is required.
Mumps	Symptoms include a raised temperature and general malaise. Then, stiffness or pain in the jaws and neck is common. Following this, the glands in the cheeks and under the jaw swell up and cause pain (this can be on one or both sides). Mumps may also cause swelling of the testicles.	<p>The case will be encouraged to consult their GP.</p> <p>Parents are encouraged to immunise their children against mumps.</p>	Cases can return to school five days after the onset of swelling if they feel able to do so.

Disease	Symptoms	Considerations	Exclusion period
Ringworm	Symptoms vary depending on the area of the body affected.	Pupils with ringworm of the feet will wear socks and trainers at all times and cover their feet during physical education.	No exclusion is usually necessary. For infections of the skin and scalp, cases can return to school once they have received treatment.
Rotavirus	Symptoms include severe diarrhoea, stomach cramps, vomiting, dehydration and mild fever.	Cases will be sent home if unwell and encouraged to speak to their GP.	Cases will be excluded until 48 hours have passed since symptoms were present.
Rubella (German Measles)	Symptoms are usually mild, with a rash being the first indication. There may also be mild catarrh, headaches or vomiting. There may be a slight fever and some tenderness in the neck, armpits or groin, and there may be joint pains.	MMR vaccines are promoted to all pupils.	Cases will be excluded for six days from the appearance of the rash.
Scabies	Symptoms include tiny pimples and nodules on a rash, with burrows commonly seen on the wrists, palms, elbows, genitalia and buttocks.	All household contacts and any other very close contacts should have one treatment at the same time as the second treatment of the case. The second treatment must not be missed and should be carried	Cases will be excluded until after the first treatment has been carried out.

Disease	Symptoms	Considerations	Exclusion period
		out one week after the first treatment.	
Scarlet Fever	Symptoms include acute inflammation of the pharynx or tonsils, with tonsils reddening in colour and becoming partially covered with a thick, yellowish exudate. In severe cases, there may be a high fever, difficulty swallowing and tender, enlarged lymph nodes. A rash develops on the first day of fever and is red, generalised, pinhead in size and gives the skin a sandpaper-like texture, with the tongue developing a strawberry-like appearance.	Antibiotic treatment is recommended, as a person is infectious for two to three weeks if antibiotics are not administered. If two or more cases occur, the HPT will be contacted.	Cases are excluded for 24 hours following appropriate antibiotic treatment.
Slapped cheek syndrome, Parvovirus B19, Fifth's Disease	Where symptoms develop, they include a rose-red rash making the cheeks appear bright red.	Cases will be encouraged to visit their GP.	Exclusion is not required.
Threadworm	Symptoms include itching around the anus, particularly at night.	Cases will be encouraged to visit their GP.	Exclusion is not required.
Tuberculosis (TB)	Symptoms include cough, loss of appetite, weight loss, fever, sweating (particularly at night), breathlessness and pains in the chest. TB in parts of the body other than the lungs may produce a painful lump or swelling.	Advice will be sought from the HPT before taking any action, and regarding exclusion periods.	Cases with infectious TB can return to school after two weeks of treatment if well enough to do so, and as long as they have responded to anti-TB therapy.

Disease	Symptoms	Considerations	Exclusion period
			<p>Cases with non-pulmonary TB, and cases with pulmonary TB who have effectively completed two weeks of treatment as confirmed by TB nurses, will not be excluded.</p>
<p>Whooping cough (pertussis)</p>	<p>Symptoms include a heavy cold with a persistent cough. The cough generally worsens and develops the characteristic 'whoop'. Coughing spasms may be worse at night and may be associated with vomiting.</p>	<p>Cases will be advised to see their GP. Parents are advised to have their children immunised against whooping cough.</p>	<p>Cases will not return to school until they have had 48 hours of appropriate treatment with antibiotics and feel well enough to do so, or 21 days from the onset of illness if no antibiotic treatment is given.</p> <p>Cases will be allowed to return in the above circumstances, even if they are still coughing.</p>

Infection Absence Periods



This table details the minimum required period for staff and pupils to stay away from school following an infection, as recommended by Public Health England.

*Identifies a notifiable disease. It is a statutory requirement that doctors report these diseases to their local Public Health England centre.

Infection	Recommended minimum period to stay away from school	Comments
Athlete's foot	None	Treatment is recommended; however, this is not a serious condition.
Chicken pox	Until all vesicles have crusted over	Follow procedures for vulnerable children and pregnant staff.
Cold sores	None	Avoid contact with the sores.
Conjunctivitis	None	If an outbreak occurs, consult the HPT.
Coronavirus	Until fully recovered and no other member of the same household is presenting symptoms (7 days if living	If coronavirus is suspected, consult the local HPT.

Infection	Recommended minimum period to stay away from school	Comments
	alone, 14 days if living with others)	
Diarrhoea and/or vomiting	Whilst symptomatic and 48 hours from the last episode	GPs should be contacted if diarrhoea or vomiting occur after taking part in water-based activities.
Diphtheria*	Exclusion is essential.	Family contacts must be excluded until cleared by the HPT and the HPT must always be consulted.
Flu (influenza)	Until recovered	Report outbreaks to the HPT.
Glandular fever	None	
Hand foot and mouth	None	Contact the HPT if a large number of children are affected. Exclusion may be considered in some circumstances.
Head lice	None	Treatment recommended only when live lice seen.
Hepatitis A*	Seven days after onset of jaundice or other symptoms	If it is an outbreak, the HPT will advise on control measures.

Infection	Recommended minimum period to stay away from school	Comments
Hepatitis B*, C* and HIV	None	Not infectious through casual contact. Procedures for bodily fluid spills must be followed.
Impetigo	48 hours after commencing antibiotic treatment, or when lesions are crusted and healed	Antibiotic treatment is recommended to speed healing and reduce the infectious period.
Measles*	Four days from onset of rash	Preventable by vaccination (MMR). Follow procedures for vulnerable children and pregnant staff.
Meningococcal meningitis*/septicaemia*	Until recovered	Meningitis ACWY and B are preventable by vaccination. The HPT will advise on any action needed.
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. The HPT will advise on any action needed.
Meningitis viral*	None	As this is a milder form of meningitis, there is no reason to exclude those who have been in close contact with infected persons.
MRSA	None	Good hygiene, in particular environmental cleaning and handwashing, is important to minimise the spread. The local HPT should be consulted.

Infection	Recommended minimum period to stay away from school	Comments
Mumps*	Five days after onset of swelling	Preventable by vaccination with two doses of MMR.
Ringworm	Exclusion is not usually required	Treatment is required.
Rubella (German measles)	Four days from onset of rash	Preventable by two doses of immunisation (MMR). Follow procedures for pregnant staff.
Scarlet fever	24 hours after commencing antibiotic treatment	Antibiotic treatment is recommended, as a person is infectious for two to three weeks if antibiotics are not administered. If two or more cases occur, the HPT should be contacted.
Scabies	Can return to school after first treatment	The infected person's household and those who have been in close contact will also require treatment.
Slapped cheek/Fifth disease/Parvo Virus B19	None (once rash has developed)	Follow procedures for vulnerable children and pregnant staff.
Threadworms	None	Treatment recommended for the infected person and household contacts.
Tonsillitis	None	There are many causes, but most causes are virus-based and do not require antibiotics.

Infection	Recommended minimum period to stay away from school	Comments
Tuberculosis (TB)	Pupils with infectious TB can return to school after two weeks of treatment if well enough to do so, and as long as they have responded to anti-TB therapy.	Only pulmonary (lung) TB is infectious. It requires prolonged close contact to spread. Cases with non-pulmonary TB, and cases with pulmonary TB who have effectively completed two weeks of treatment as confirmed by TB nurses, should not be excluded. Consult the local HPT before disseminating information to staff and parents.
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.
Whooping cough (pertussis)*	Two days from commencing antibiotic treatment, or 21 days from the onset of illness if no antibiotic treatment is given	Preventable by vaccination. Non-infectious coughing can continue for many weeks after treatment. The HPT will organise any necessary contact tracing.

Checklist

Date:	
Completed by:	

Action	Action taken?		Comments
	Yes	No	
A 48-hour exclusion rule has been enforced.			
Liquid soap and paper hand towels are available.			
Enhanced cleaning is undertaken twice daily, and an appropriate disinfectant is used.			
Appropriate personal protective equipment (PPE) is available.			
Appropriate waste disposal systems are available for removing infectious waste.			
Toys are cleaned and disinfected on a daily basis.			
Infected linen is segregated, and dissolvable laundry bags are used where possible.			
Visitors are restricted, and essential visitors are informed of the outbreak.			
New children joining the school are delayed from joining.			

The health protection team (HPT) has been informed of any infected food handlers.			
Staff work in dedicated areas and food handling is restricted.			
All staff (including agency) are asked if they are unwell.			
Staff are restricted from working elsewhere.			
The HPT is informed of any planned events at the school.			
The school nurse is informed.			
Ofsted are informed if necessary.			

List of Notifiable Diseases

Under the Health Protection (Notification) Regulations 2010, the following diseases will always be reported to the health protection team (HPT):

- Acute encephalitis
- Acute meningitis
- Acute poliomyelitis
- Acute infectious hepatitis
- Anthrax
- Botulism
- Brucellosis
- Cholera
- COVID-19
- Diphtheria
- Enteric fever (typhoid or paratyphoid fever)
- Food poisoning
- Haemolytic uraemic syndrome (HUS)
- Infectious bloody diarrhoea
- Invasive group A streptococcal disease and scarlet fever
- Legionnaires' disease
- Leprosy
- Malaria
- Measles
- Meningococcal septicaemia
- Mumps
- Plague
- Rabies
- Rubella
- SARS
- Smallpox
- Tetanus
- Tuberculosis
- Typhus
- Viral haemorrhagic fever (VHF)
- Whooping cough
- Yellow fever