



Infectious Diseases

Please find below guidelines issued for information, this is not an inclusive list of all matters. Please contact the school if you require any explanation on any of the points or you have any questions regarding an infectious disease your child may have. Parents should inform the school as soon as possible if their child is suffering from an infectious disease.

COVID-19

Children who experience a dry persistent cough, a high temperature or a loss of taste or smell are potentially positive for COVID-19. Within school the child will be isolated from the class and parents will be required to collect the child and book a test. The child may not return to school unless they have had a negative test or isolated for a period of 10 days.

Parents are asked to notify the school if a member of their household tests positive for COVID-19, we can therefore consider additional precautions. We ask the parents to take their child for a precautionary PCR test.

If a child receives a positive test and has been in school, the school will communicate with the relevant authorities and follow the advice given. Further information can be found on the school's COVID-19 risk assessment.

Sickness and Diarrhoea (including E-Coli and Cryptosporidiosis)

Children who are sick or have an episode of diarrhoea should remain at home for a period of at least 48 hours after the last episode. Children should not swim for 2 weeks after an instance of diarrhoea. In the case of E-Coli children must be excluded until there is evidence of microbiological clearance.

Chicken Pox

Children should remain at home until all spots have scabbed over.

Conjunctivitis

This is highly contagious and easily spread by children. We therefore ask if your child is suffering from this infection, that they stay home until all redness and irritation has subsided. Treatment is now available over the counter at a pharmacy. Children should not swim until the condition has completely cleared.

Hand Foot and Mouth

Children should stay off school until their temperature subsides and blisters and ulcers are no longer causing pain.

Headlice

Parents should check their children's hair regularly. Children may return to school once their hair has been treated. We ask that children with shoulder length hair or longer wear it tied back and plaited.

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Impetigo

Impetigo is highly contagious and children must not come to school until all lesions are healed.

Ringworm

Treatment is required, exclusion is not usually required, please follow the advice of your doctor or pharmacist.

Scarlet Fever

A child can return to school 24 hours after antibiotic treatment has commenced.

Slapped Cheek

A child may return to school once the rash has fully developed. Parents must advise the school if their child develops this condition as it is a risk to pregnant women.

Threadworm

This is a common illness and we will make parents aware if a case of Threadworm has been reported in their child's class. Encouraging children to wash their hands and keeping finger nails short can help prevent infection. Treatment is available at most pharmacies.

Warts and Verruca's

Verruca socks must be worn when swimming to prevent the spread of infection.

Whooping Cough

A child may return to school five days after starting antibiotic treatment, or 21 days after the onset if no antibiotic treatment.

Guidance for Pregnant Staff and Parents on Infection Control in Schools

The School Office will inform all staff and parents if there is a child with an infectious disease in school to ensure that those who have not yet announced pregnancy are aware and can take action.

- Chickenpox can affect the pregnancy if a woman has not already had the infection. Report exposure to midwife and GP at any stage of exposure. The GP and antenatal carer will arrange a blood test to check for immunity. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles.
- German measles (rubella). If a pregnant woman comes into contact with German measles she should inform her GP and antenatal carer immediately

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to ensure investigation. The infection may affect the developing baby if the woman is not immune and is exposed in early pregnancy.

- Slapped cheek disease (parvovirusB19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), inform whoever is giving antenatal care as this must be investigated promptly.
- Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed she should immediately inform whoever is giving antenatal care to ensure investigation.

If a pregnant staff member develops a rash or is in direct contact with someone with a potentially infectious rash, this should be investigated by a doctor. The risk to pregnant women from such infections can be greater if they have from own child/children, rather than that in the workplace. Risk assessments will be carried out for all pregnant staff.

This policy applies to all members of our school community, including those in our EYFS setting. Banstead Prep School is fully committed to ensuring that the application of this policy is non-discriminatory in line with the UK Equality Act (2010). Further details are available in the school's Equal Opportunity Policy document.

Banstead Prep School seeks to implement this policy through adherence to the procedures set out in the rest of this document. In line with our Provision of Information policy, this document is available to all interested parties on our website and on request from the School Office.

Next Review Sept 2022

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