



Executive Headteacher: Mrs L. A. Gwinnett

Ref: 3347 LMA

09 December 2022

Dear Parent,

Scarlet Fever

We are writing to inform you of a recent national increase in notifications of scarlet fever to the UK Health Security Agency (UKHSA), above seasonal expected levels. We would like to take this opportunity to remind you of the signs, symptoms and the actions to be taken if you think that you or your child might have scarlet fever.

Signs and Symptoms of Scarlet Fever

Dr Sakthi Karunanithi, Director of Public Health, Lancashire County Council, said "Scarlet fever is usually a mild illness that can be easily treated with antibiotics, but it is highly infectious". It is not usually serious, and antibiotic treatment reduces the risk of complications (such as pneumonia) and spread to others.

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 darker skin, although the 'sandpaper' feel should be present. Patients typically have flushed cheeks and be pale around the mouth. This may be accompanied by a bright red 'strawberry' tongue.

If you think you, or your child, might have scarlet fever:

- contact your GP or NHS 111 as soon as possible
- make sure that you or your child take(s) the full course of any antibiotics prescribed. Although you or your child will feel better soon after starting the course of antibiotics, you must complete the course to ensure that you do not carry the bacteria in your throat after you have recovered
- stay at home, away from school or work for at least 24 hours after starting the antibiotic treatment, to avoid spreading the infection

You can help stop the spread of infection through frequent hand washing and by not sharing eating utensils, clothes, bedding and towels. All contaminated tissues should be disposed of immediately.



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Invasive Group A Strep (iGAS)

The same bacteria which cause scarlet fever can also cause a range of other types of infection such as skin infections (impetigo) and sore throat. In very rare cases, the bacteria can get into the bloodstream and cause an illness called invasive group A strep (iGAS). Whilst still very uncommon, there has been an increase in iGAS cases this year, particularly in children under 10 years old. It is very rare for children with scarlet fever to develop iGAS infection.

As a parent, you should trust your own judgement.

Contact NHS 111 or your GP if:

- your child is getting worse
- your child is eating much less than normal
- your child has a temperature of 39C or higher
- your child is very tired or irritable

Call 999 or go to A&E if:

- your child is having difficulty breathing – you may notice grunting noises or their tummy sucking under their ribs
- there are pauses when your child breathes
- your child's skin, tongue or lips are blue
- your child is floppy and will not wake up or stay awake

Stop the spread

During periods of high incidence of scarlet fever, there may also be an increase in outbreaks in schools, nurseries and other childcare settings. Children and adults with suspected scarlet fever should stay off nursery / school / work until 24 hours after the start of appropriate antibiotic treatment. Good hygiene practice such as hand washing remains the most important step in preventing and controlling spread of infection.

In school we will be taking the following simple measures to reduce the risk of infections spreading from person to person:

- encouraging children to wash their hands more often
- ensuring children do not share eating utensils
- reminding and demonstrating to children the 'Catch it, bin it, kill it' process
- contacting parents promptly if children show the signs and symptoms of scarlet fever



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- encouraging parents to contact their GP if their child shows any of the signs and symptoms of scarlet fever
- current cleaning regimes are deemed sufficient, however in areas identified to have had either suspected or confirmed cases, enhanced cleaning measures will be implemented to reduce the risk of transmission.

Please do not hesitate to contact us at school if you have any further questions or queries.

Yours sincerely,

L MacLaren

Additional resources and information:

[NHS – Scarlet Fever](#)

[Scarlet fever: symptoms, diagnosis and treatment](#)

[Health protection in education and childcare settings](#)

[Hand hygiene resources for schools](#)

