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Dear Parents and Carers,

'Strep A' infections
You may be aware of news in the media regarding group A streptococcus (GAS) bacterial infections, 'Strep A', among children. There is a higher number of these infections than is normally seen at this time of year. We are sending out this communication to provide further information on this national situation and **guidance on the actions you can take to help reduce the spread of this infection.**

Group A streptococcus is a bacterium that can be found in the throat and on the skin and survives for long enough to allow easy spread between people through sneezing and skin contact. People who are currently carrying the bacteria 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 to look out for
Most GAS illnesses are relatively mild, with symptoms including a sore throat ("strep throat"), scarlet fever or a skin infection, such as impetigo. The symptoms of scarlet fever include a sore throat, headache, fever, nausea and vomiting. This is followed by a fine red rash which typically first appears on the chest and stomach, rapidly spreading to other parts of the body. On more darkly-pigmented skin, the scarlet rash may be harder to spot, but it will still feel like 'sandpaper'. The face can be flushed red but pale around the mouth. 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.

Though uncommon, GAS can cause other severe and sometimes life-threatening diseases, including invasive Group A Streptococcus (iGAS) infection. This can occur if the bacteria get into parts of the body where bacteria are not usually found. **As a parent, if you feel that your child seems seriously unwell, you should trust your own judgement:**

What to do
Contact NHS 111 or your GP if:
- your child is getting worse
- your child is feeding or eating much less than normal
- your child has had a dry nappy for 12 hours or more or shows other signs of dehydration
- your baby is under 3 months and has a temperature of 38C, or is older than 3

months and has a temperature of 39C or higher
• your baby feels hotter than usual when you touch their back or chest, or feels sweaty
• 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

Further information on GAS infections is provided in the following blog that is being updated by the UK Health Security Agency (UKHSA), the lead agency responding to this national situation: Group A Strep - What you need to know - UK Health Security Agency (blog.gov.uk).

We urge all parents and carers to:

• remind children of the importance of good respiratory and hand hygiene – by this we mean teaching your child how to wash their hands properly with soap for 20 seconds, and how to use a tissue to catch coughs and sneezes, disposing of the tissue after use, and washing hands thereafter
• keep children off school should they feel unwell
• ensure that any child diagnosed with a GAS infection stays off school for the recommended period after starting antibiotics, that is, at least 24hrs after starting antibiotics for strep throat or 48hrs for impetigo, and is well enough to attend an early years or school setting thereafter
• remain vigilant to the signs and symptoms of GAS infection and any deterioration in your child's condition, seeking early medical help as necessary
• ensure your child is up to date with their immunisations, especially the seasonal flu vaccine as we know that flu can predispose children to more severe illness with GAS.

The higher number of GAS infections is country-wide. Nevertheless, instances of iGAS are uncommon and most infections can be managed with antibiotics.

Please be assured that we continue to liaise with the Council's Public Health team and will provide any further important updates to parents and carers as these become available. Should we suspect an outbreak of GAS infection in our setting, we will follow national guidance and work with the UKHSA health protection team to manage the situation. Where necessary, we will provide information to carers and parents to advise on any specific actions to take around any outbreaks.

Thank you for your continued support in this matter.

Mr J Bartlett
Headteacher