Scammonden Road, Barkisland, Halifax, W. Yorkshire, HX4 OBD

Email: admin@barkisland.calderdale.sch.uk

Headteacher: Mrs B. Schofield (B.Ed (Hons)NPQH)

www.barkislandcofeschool.org.uk

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Scarlet fever and invasive Group A strep

Dear Parents and Carers

You will no doubt have seen recent press reports about the tragic deaths of young children from invasive Group A strep. We continue to see a higher than usual number of Scarlet Fever cases in children, which, on very rare occasions, can lead to invasive Group A strep (iGAS), which is a very serious illness.

The following is guidance that we have received from Calderdale Public Health

This year, we are seeing a higher number of cases of scarlet fever than usual. Scarlet fever is caused by a bacteria which generally causes a mild infection that can be easily treated with antibiotics. This bacteria also causes other respiratory and skin infections such as strep throat and impetigo.

Symptoms of scarlet fever include a sore throat, headache, and fever, along with a fine, pinkish or red body rash with a sandpapery feel. On darker skin, the rash can be more difficult to detect visually but will have a sandpapery feel. Contact NHS 111 or your GP if you suspect your child has scarlet fever, because early treatment of scarlet fever with antibiotics is important to reduce the risk of complications such as pneumonia or a bloodstream infection.

Scarlet fever is highly infectious, so if your child has scarlet fever, keep them at home until at least 24 hours after the start of antibiotic treatment to avoid spreading the infection to others.

In very rare circumstances, the bacteria that causes scarlet fever can get into the bloodstream and cause serious illness - called invasive Group A strep (iGAS). While still uncommon, there has been an increase in invasive Group A strep cases this year, particularly in children under 10.

If your child is showing signs of deteriorating after a bout of scarlet fever, a sore throat, or a respiratory infection, it is important that you speak to a health professional. As a parent, if you feel that your child seems seriously unwell, you should trust your own judgement in seeking help.

Contact NHS 111 or your GP if:

- 1. your child is getting worse
- 2. your child is feeding or eating much less than normal
- 3. your child has had a dry nappy for 12 hours or more or shows other signs of dehydration
- 4. your baby is under 3 months and has a temperature of 38°C, or is older than 3 months and has a temperature of 39°C or higher
- 5. your baby feels hotter than usual when you touch their back or chest, or feels sweaty
- 6. your child is very tired or irritable

Working with the Diocese of Leeds and the Metropolitan Borough of Calderdale May he give you the desire of your heart and make all your plans succeed Psalm 20:4

















Call 999 or go to A&E if:

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

Good hand and respiratory hygiene are important for stopping the spread of many bugs. By teaching your child how to wash their hands properly with soap for 20 seconds, using a tissue to catch coughs and sneezes, and keeping away from others when feeling unwell, they will be able to reduce the risk of picking up or spreading infections.

