

Health and Safety Procedure

Infectious Diseases

Applicable Legislation

Disease Notification: Health Protection (Notification) Regulations 2010

Introduction

It is important that whenever a person develops symptoms of any infectious disease that immediate action is taken to minimise the risk of others who may be in close contact becoming infected. This will probably result in the temporary exclusion of that person from work or school activities. Guidance provided below will assist in developing an action plan but expert advice should also be taken (see below).

Purpose

The aim of this procedure is to ensure that the employer fulfils its statutory requirement to assess risks to its employees and to other people who may be affected by its activities.

Scope

This guidance is for the benefit of the managers /Head Teachers to assist them in taking the appropriate action when advised by a work colleague or school pupil that they have developed symptoms of an infectious disease.

Definitions

Notifiable Disease: This will be the responsibility of the healthcare professional (GP, Hospital etc) to notify Public Health England 0845 2799879.

Manager's Responsibilities

The Manager /Head Teacher is required to facilitate the control of any infectious disease that may exist and which may spread throughout the work or school environment and seek guidance by appropriate means to take the required action. (Public Health England 0845 2799879).

Employee's Responsibilities

Employees are required to advise their manager immediately they are aware that they may have contacted an infectious disease. Similarly when applied to a school setting the parent of the child so infected should inform the Head Teacher and follow any recommendations regarding that pupil's exclusion from school.

Disease and incubation period	Period when infectious	Period of exclusion of infected person & others	Notifiable Diseases
ATHLETE'S FOOT – (Not Specified)	During active infection	None – even if not treated. Treatment should start as soon as condition has been confirmed. Treatment is strongly recommended	No
BRONCHIOLITIS -	During the acute stage of illness	Until child is well	No
CHICKENPOX & SHINGLES - (10-21 days)	1-2 days before and 5-6 days after rash develops	For six days since start of rash, If contact is a woman in last 3 weeks of pregnancy seek advice from GP/Obstetrician	No
COLD SORE (See Herpes Simplex)			No
CONJUNCTIVITIS - (2-14 days dependant on cause)	During active infection	Until recovered or not necessary	No
DIARRHOEA & VOMITING - Including: Campylobacter (2-5 days) Cryptosporidiosis (2-10 days) Dysentery E. coli 0157 (1-7 days) Food Poisoning (varies from a few hours to a few days) Viral Gastro-enteritis (1-2 days) Giardiasis Salmonellosis (Few hours to few days) Delete? Norovirus (1-2 days)	When having symptoms of diarrhoea and vomiting	Until diarrhoea or vomiting has settle, people should stay away from work & school until they have been free from symptoms for 48 hours. In some circumstances, e.g. food handlers, advice may need to be sought from the Consultant in Communicable Disease Control (CCDC)	No No No No Yes No No No
FIFTH DISEASE - (Parvovirus , or Slapped Cheek Syndrome) (Variable- 13-20 days)	Infectious before onset of rash	Until the child feels well but no automatic exclusion	No

Disease and incubation period	Period when infectious	Period of exclusion of infected person	Notifiable Diseases
GLANDULAR FEVER - (From 4-6 weeks)	While virus present in saliva which will be at least 2 months	Until the person feels well	No
HAND, FOOT & MOUTH DISEASE - (3-7days)	Until a week after symptoms first show	Until the person feels well	No
HEAD & BODY LICE - (<i>Pediculosis</i>) (Eggs hatch between 7-10 days)	As long as eggs or lice remain alive	None - <i>even if not treated.</i> Treatment should start as soon as condition has been confirmed. Treatment is strongly recommended	No
HEPATITIS A – (2-6 weeks)	Several days before first symptoms until 7 days after onset of jaundice (most infectious before jaundice starts)	Until person feels well	Yes
HEPATITIS B – (6 weeks to 6 months)	Not infectious under normal work / school conditions	Until person feels well	Yes
HERPES SIMPLEX - <i>Cold sores (Type 1 Oral Herpes)</i> (2-12 days)	During infection	None	No
HIV INFECTION (Variable)	Not infectious under normal school conditions	None	No
IMPETIGO - (1-3 days)	As long as septic spots are discharging pus	Until lesions have stopped blistering or crusting over generally 2 days after starting treatment	No
INFLUENZA - (1-3 days)	During infection	Until person feels well, People should remain at home to reduce the spread of infection	No
MEASLES - (7-18 days, usually 10 days)	1 day before first symptoms until 4 days after onset of rash	Until 5 days from onset of rash and the person feels well	Yes
MENINGITIS - (2-10 days depending on cause)	Clinical cases are rarely infectious	Until person feels well (For meningococcal meningitis CCDC will give advice on any action needed)	Yes

Disease and incubation period	Period when infectious	Period of exclusion of infected person	Notifiable Diseases
MUMPS – (12-25 days, commonly 18 days)	6-7 days before and up to 5 days after onset of swelling	5 days from onset of swollen glands and when person feels well	Yes
RINGWORM ON BODY - <i>Tinea Corporis</i> (4-10 days)	As long as rash is present	None - <i>even if not treated.</i> Treatment from GP recommended	No
RUBELLA - German Measles 14-21 days)	Most infectious from 7 days before rash appears and 4 days after	Five days from onset of rash, If contact is a pregnant woman, seek advice from GP	Yes
SCABIES - (Up to 8 weeks depending on previous exposure)	Until mites and eggs are destroyed by treatment	Until day after treatment	No
SCARLET FEVER & STREPTOCOCCAL INFECTION - (Normally 2-5 days, sometimes longer)	Day sore throat starts until 24 hours after antibiotics started	For scarlet fever – 1 day from commencing antibiotics. Other infections on the advice of GP	Yes
THREADWORMS - (Up to 6 weeks for life cycle to complete)	As long as eggs are shed in the faeces (stools)	None - <i>even if not treated.</i> Treatment from GP recommended	No
TUBERCULOSIS (TB) - (2-12 weeks)	As long as sputum contains the bacteria	CCDC will advise on action	Yes
VERRUCAE - <i>Plantar warts</i> (2-3 months, but it may be up to 2 years)	As long as wart is present. They normally disappear eventually within 2 years	None	No
WHOOPING COUGH - <i>Pertussis</i> (5-21 days)	2-4 days before until 21 days after start of cough. If treated with antibiotics, 5 days after starting course	Until 5 days after commencing antibiotic treatment	Yes
DIPHtheria (2-5 DAYS)	Immediate isolation necessary Family contacts excluded until cleared by HPA	Family contacts excluded until cleared by HPA	Yes
GLANDULAR FEVER (4-6 WEEKS)	At least 2 months	Until the person feels well, Treatment offered to household contacts may be extended to other close contacts	No

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For further information and advice:

National guidance : see poster ‘Guidance on infection control in schools and other childcare settings HPA 2010 ([http://www.hpa.org.uk/Infectious diseases](http://www.hpa.org.uk/Infectious_diseases) › *Infection control*)

	email and web addresses	
Specialist:		
Public Health England (Thames Valley Team)	web address: http://www.hpa.org.uk	0845 2799879
NHS Direct	web address: http://www.nhs.uk	111
H&S Training Oxfordshire Skills & Learning Service	email: LandD.sharedservices@oxfordshire.gov.uk	01865 797123
General:		
Health & Safety Team	email: healthandsafetyhelp@oxfordshire.gov.uk web address: http://intranet.oxfordshire.gov.uk/links/intranet/healthandsafety	Helpdesk 01865 797222