

Infection	Exclusion period	Comments
Athletes foot	None	Individuals should not be barefoot at the setting (for example in changing areas) and should not share towels, socks or shoes with others.
Chickenpox	At least 5 days from the onset of the rash and until all blisters have crusted over.	Pregnant staff contacts should consult with their GP or midwife.
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores.
Conjunctivitis	None	If an outbreak or cluster occurs, contact local MoH
Respiratory infections including coronavirus (COVID)	Individuals should not attend if they have a high temperature and are unwell. Individuals who have a positive test result for COVID should not attend the setting for 3 days after the day of the test.	Individuals with mild symptoms such as runny nose and headache who are otherwise well can continue to attend the setting.
Diarrhoea and vomiting	Individuals can return 48 hours after diarrhoea and vomiting have stopped.	If a particular cause of the diarrhoea and vomiting is identified, there may be additional exclusion advice, for example, E.coli STEC and hep A.
Diphtheria	Exclusion is essential. Always contact with your local HPT.	Preventable by vaccination. For toxigenic Diphtheria, only family contacts must be excluded until cleared to return by local MoH.
Flu (influenza) or influenza like illness	Until recovered.	Report outbreaks to local MoH.
Glandular fever	None	
Hand foot and mouth	None	Contact your local MoH if a large number of children are affected. Exclusion may be considered in some circumstances.
Head lice	None	
Hepatitis A	Exclude until 7 days after onset of jaundice (or 7 days after symptoms if no jaundice).	In an outbreak of hepatitis the MoH will advise on control measures.

Hepatitis B, C, HIV	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact. Contact your local MoH for more advice.
Impetigo	Until lesions are crusted or healed, or 48 hours after starting antibiotic treatment.	Antibiotic treatment speeds up the healing and reduces the infectious period.
Measles	4 days from onset of rash and well enough.	Preventable by vaccination with 2 doses of MMR. Promote MMR for all individuals, including staff. Pregnant staff contacts should see prompt advice from their GP or Midwife.
Meningococcal meningitis or septicemia	Until recovered.	Meningitis ACWY and B are preventable by vaccination. Your local MoH will advise you on the action needed.
Meningitis due to other bacteria	Until recovered.	Hib and pneumococcal meningitis are preventable by vaccination. Your local MoH will advise you on the action needed.
Meningitis viral	None	Milder illness than bacterial meningitis. Siblings and other close contacts of a case need not be excluded.
MRSA	None	Good hygiene, in particular hand washing and environmental cleaning, are important to minimize spread.
Mumps	5 days after onset of swelling.	Preventable by vaccination with 2 doses of MMR. Promote MMR for all individuals including staff.
Ringworm	Not usually required	Treatment is needed.
Rubella (German measles)	5 days from onset of rash.	Preventable by vaccination with 2 doses of MMR. Pregnant staff contacts should seek prompt advice from their GP or Midwife.
Scabies	Can return after first treatment.	Household and close contacts require treatment at the same time.



Scarlet fever	Exclude until 24 hours after starting antibiotic treatment.	Individuals who decline treatment with antibiotics should be excluded until resolution of symptoms. In the event of 2 or more cases, please contact local MoH.
Slapped cheek/Fifth disease/Parvovirus B19	None (once rash has developed)	Pregnant contacts should consult their GP or Midwife.
Threadworms	None	Treatment recommended for child and household.
Tonsillitis	None	There are many causes, but most are due to viruses and do not need or respond to antibiotic treatment.
Tuberculosis (TB)	Until at least 2 weeks after the start of the antibiotic treatment (if pulmonary TB) Exclusion is not required for no pulmonary or latent TB infection.	Only pulmonary (lung) TB is infectious to others, needs close, prolonged contact to spread. Local MoH will organise contact tracing.
Warts and verrucae	None	Verrucae should be covered in swimming pools, gyms and changing rooms.
Whooping cough	2 days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics.	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. The local MoH will organise contact tracing.