GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru Public Health Wales

Public Health Wales
Health Protection Team

Exclusion Period for Common Infections (January 2022)

The table below is a guide on whether an individual with an infection should attend a setting e.g. a school or workplace. This is based on the level/period of infectiousness and not on whether the individual is well enough to attend. If uncertain, individuals should stay at home and seek advice from NHS Direct Wales 0845 46 47 (NHS 111 where available), their Pharmacy or General Practitioner (GP). If a setting requires advice on infections and length of time an individual should be kept away from the setting (exclusion period) then they are asked to:

1. Refer to the information table below
2. Seek advice, if required, from relevant health professionals such as GP, Pharmacy, Health Visitor, School Nurse etc
3. In the case of staff illness/exposure contact their own Occupational Health Team
4. Contact the **Health Protection All Wales Acute Response (AWARe) Team on 0300 003 0032**

When there are local/national outbreaks of illness, settings will usually be informed and advised of any actions they are required to take by the Health Protection/All Wales Acute Response Team. Settings are asked to keep a register of unwell individuals and also have a register of individuals who may be considered vulnerable to infection. If there are two or more cases of an infection; or more than the usual number of a common infection, then the setting should seek advice from the Health Protection (AWARe) Team.

Rashes and skin infections	Length of Time an individual is to be kept away from Setting (Exclusion Period)	Comments
Unexplained rashes should be considered infectious until health advice is obtained.		
Athlete's foot	None	Athletes' foot is not a serious condition. Treatment is recommended
Chickenpox	5 days from onset of rash AND until all vesicles (blisters) have crusted over	Infectious for 2 days before onset of rash. *SEE: Vulnerable Individuals and Pregnancy (below)*
Cold sores, (Herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting.
German measles (rubella)*	Four days from onset of rash	Preventable by vaccination and covered by the routine immunisation schedule (MMR x 2 doses). *SEE: Pregnancy (below)*
Hand, foot and mouth	None	Not to be confused with Foot and Mouth disease in animals
Impetigo	Until affected areas are crusted and healed, or 48 hours after commencing antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles*	Four days from onset of rash	Preventable by vaccination and covered by the routine immunisation schedule (MMR x 2 doses). *SEE: Vulnerable individuals and Pregnancy (below)*
Molluscum contagiosum	None	A self-limiting condition
Ringworm	None	Keep covered. Treatment is recommended
Scabies	Affected individual can return after first treatment	Household and close contacts require concurrent treatment
Scarlet fever*	Individual can return 24 hours after commencing appropriate antibiotic treatment	Antibiotic treatment recommended for the affected individual. Please consult with Health Protection Team if Flu and/or Chicken Pox circulating at same time as Scarlet Fever in setting.
Slapped cheek/Fifth disease/Parvovirus B19	None	*SEE: Vulnerable individuals and Pregnancy (below)*
Shingles	Individual only to be kept away from setting if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune i.e. have not had chickenpox. It is spread by very close contact and touch. If further information is required, contact the Health Protection Team. *SEE: Vulnerable individuals and Pregnancy (below)*
Warts and Verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms
Diarrhoea and vomiting illness		
Clostridioides difficile (formerly known as Clostridium difficile/C.diff)	48 hours from last episode of diarrhoea	If there are two or more cases in a setting please seek advice from the Health Protection Team
Cryptosporidiosis	Keep away from setting for 48 hours from the last episode of diarrhoea.	Affected individuals should not swim for two weeks after the last episode of diarrhoea.
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting	If there are two or more cases in a setting please inform the Health Protection Team/Environmental Health Officer
E. coli O157 STEC* Typhoid [and paratyphoid] (enteric fever)* Shigella* (dysentery)	Keep away from the setting for 48 hours from the last episode of diarrhoea as a minimum. Some individuals may need to be kept away from the setting until they are no longer excreting the bacteria in their faeces. Always consult with your local	Individuals aged 5 years or younger, those who have difficulty in maintaining good personal hygiene, food handlers and care staff need to be kept away from the setting until there is proof that they are not carrying the bacteria (microbiological clearance). Your local Environmental Health Officer will give advice in all cases.

	Environmental Health Officer/Health Protection Team	Microbiological clearance may also be required for those in close contact with a case of disease. The Environmental Health Officer/Health Protection Team can provide advice if required
Respiratory illnesses		
COVID-19 (coronavirus-19)*	Please follow current Welsh Government guidance on self-isolation: Self-isolation | GOV.WALES if you become symptomatic (high temperature ≥ 37.8^{0}C; new continuous cough; or loss of/change in sense of smell or taste) OR test positive, if you are asymptomatic. Test Trace Protect (TTP) team will advise on necessary exclusion period if it is a Variant of Concern (VoC).	Case and contact(s) to follow current Welsh Government guidance on self-isolation: Self-isolation | GOV.WALES as appropriate. Test Trace Protect (TTP) team will advise on necessary exclusion period. *SEE: Vulnerable individuals and Pregnancy (below) and Welsh Government advice on People at increased risk of Coronavirus*
Flu (influenza)	Until recovered	*SEE: Vulnerable individuals (below)*
Tuberculosis*	Always consult the Health Protection Team	Requires prolonged close contact for spread
Whooping cough (pertussis)*	48 hours from commencing antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination and covered by the UK routine immunisation schedule. After treatment, non-infectious coughing may continue for many weeks.
Other infections		
Conjunctivitis	Usually none.	If there are two or more cases in a setting seek advice from the Health Protection Team
Diphtheria*	Must not attend setting. Always consult the Health Protection Team	Preventable by vaccination and covered by the UK routine immunisation schedule. Family contacts must be kept away from setting until cleared to return by the Health Protection Team. The Health Protection Team will consider the risk of any contact the individual has had with others if necessary.
Eye and ear infections	Usually none. The Health Protection Team can advise if an affected individual needs to be kept away from the setting.	As both viruses and bacteria can cause eye and ear infections, not all will require antibiotic treatment.
Glandular fever	None	Infectious for up to 7 weeks before symptoms start. Glandular fever can cause spleen swelling so avoid sports or activities that might increase risk of falling and damaging spleen.
Head lice	None	Treatment is recommended only in cases where live lice have been seen
Hepatitis A*	Individual should be kept away from the setting until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)	If there are two or more cases in a setting the Health Protection Team will advise on necessary control measures
Hepatitis B*, C*, HIV	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through normal social contact.
Meningococcal Meningitis/Septicaemia*	Until they have received the appropriate antibiotic. Always consult the Health Protection Team	Several types of meningococcal disease are preventable by vaccination. There is no reason to keep siblings or other close contacts of the affected individual from attending settings. If two or more cases within 4 weeks, contact the Health Protection Team.
Haemophilus influenzae type B (Hib) Meningitis/Septicaemia*	Until they have received the appropriate antibiotic. Always consult the Health Protection Team	Haemophilus influenzae type B (Hib) is preventable by vaccination. There is no reason to keep siblings or other close contacts of the affected individual from attending settings. If two or more cases within 4 weeks, contact the Health Protection Team.
Meningitis due to other bacteria*	None	There is no need for the Health Protection Team to identify people the individual has been in contact with. There is no reason to exclude siblings or other close contacts of the affected individual from settings. The Health Protection Team can advise on actions needed
Meningitis viral*	None	Milder illness. There is no need for the Health Protection Team to identify people the individual has been in contact with. There is no reason to exclude siblings and other close contacts of the affected individual from settings.
Meticillin Resistant Staphylococcus Aureus	None	Good hygiene, in particular hand washing and environmental cleaning, are important to minimise spread.
Mumps*	Five days after onset of jaw/neck swelling	Preventable by vaccination and covered by the routine immunisation schedule (MMR x 2 doses).
Threadworms	None	Treatment is recommended for the child and household contacts
Tonsillitis	None	There are many causes, but most are due to viruses and therefore do not require antibiotics.

*denotes a notifiable disease/organism. It is a statutory requirement that doctors report a notifiable disease to the Proper Officer of the Local Authority (usually a Consultant in Communicable Disease Control/Health Protection).

Vulnerable Individuals
Some medical conditions make people vulnerable to infections that would rarely be serious in most people. These include those being treated for leukaemia or other cancers, on high doses of steroids and with conditions that seriously reduce immunity.

Pregnancy
If a woman develops a rash during pregnancy or is in direct contact with someone with a rash or an infection, they should ask their GP/Midwife if they need any relevant investigations e.g. blood test. The greatest risk during pregnancy from infections comes from their own child/children, rather than the workplace.

Immunisation
All individuals are encouraged to ensure they have received all the vaccines that are offered in the UK schedule. If anyone is uncertain which vaccines they have received they should contact their GP surgery. For further information about the immunisation schedule, please visit: NHS 111 Wales Vaccinations

Rydym yn croesawu galwadau ffôn yn Gymraeg / We welcome phone calls in Welsh

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