



Re:PS/NP 02/02/2018

Dear Parents/Carers,

Scabies!

Please note we have been informed by a parent that their child has been diagnosed with scabies. Please copy and paste the attached link for guidance which we have also listed below.

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases#scabies>

Scabies

Scabies is a skin infection caused by tiny mites that burrow in the skin. The pregnant female mite burrows into the top layer of the skin and lays about 2 to 3 eggs per day before dying after 4 to 5 weeks. The burrows may be several centimetres long but they are very close to the surface of the skin. The eggs hatch after 3 to 4 days into larvae which move to hair follicles where they develop into adults.

Symptoms

The appearance of the rash varies but tiny pimples and nodules are characteristic. Secondary infection can occur if the rash has been scratched. The scabies mites are attracted to folded skin such as the webs of the fingers. Burrows may also be seen on the wrists, palms elbows, genitalia and buttocks.

Spread

Spread is most commonly by direct contact with the affected skin. Occasionally if there is impaired immunity or altered skin sensation, large numbers of mites occur and the skin thickens and becomes very scaly.

Exclusion

Yes. The infected child or staff member should be excluded until after the first treatment has been carried out.

Do's

The child can return after the first treatment has been completed. It is important that the second treatment is not missed and this should be carried out 1 week after the first treatment. All household contacts and any other very close contacts should have 1 treatment at the same time as the second treatment of the case.

We will be carrying out a deep clean of the school. Please inform the school office if your child does contract scabies.

Thank you, Nikki Pollitt Deputy Head