

## What is measles?

Measles is a highly infectious virus, which spreads quickly if people have not had the MMR vaccine. Measles can cause severe illness, especially among certain at-risk groups, including babies and small children, pregnant women, and people with weak immunity. Complications can include pneumonia, meningitis, and blindness, and could result in hospitalisation, permanent disability, and in rare cases, it can even cause death.

## How is measles treated?

There is no medical cure for measles, other than letting it run its course with some clinical intervention, so the best possible treatment is prevention through the measles, mumps and rubella (MMR) immunisation when children are eligible. If parents are unsure of their child's immunisation status they should speak to their GP who can arrange an appointment if needed to catch up with immunisations.

Two doses of MMR are needed for maximum protection. A version of MMR is available which does NOT contain pork ingredients.

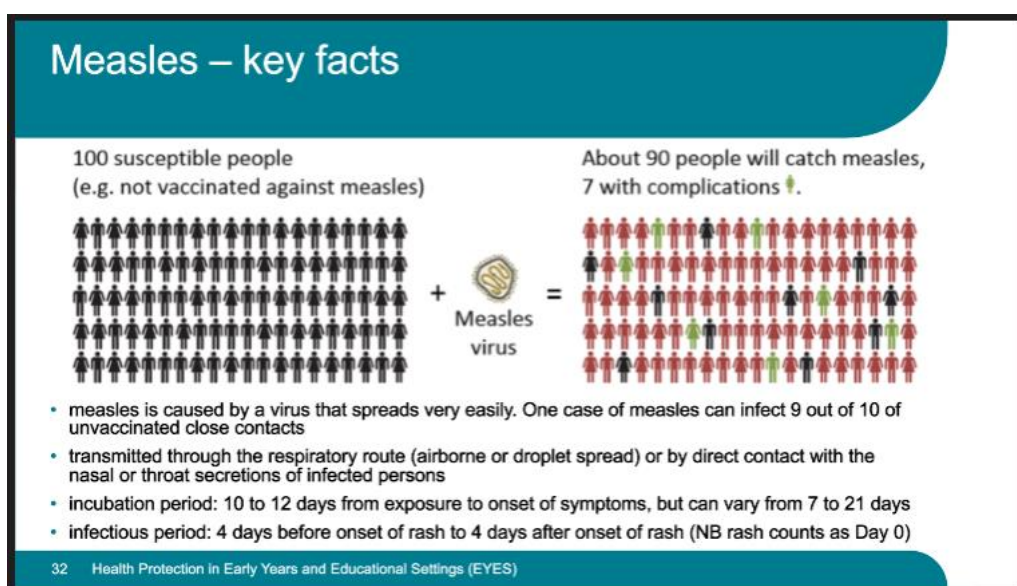
## What are the symptoms of measles?

- Cold-like symptoms such as runny or blocked nose, sneezing and cough
- Red, sore watery eyes
- High temperature (fever) which may reach around 40C / 104F
- A non-itchy, red-brown rash usually appears 3-5 days later (sometimes starting around the ears before spreading to rest of the body). Spots may be raised and join to form blotchy patches, which may be harder to see on darker skin tones.

Further information is available via [this link from NHS](#).

## How contagious is measles?

Measles is very infectious. If 100 unvaccinated people are in a room and one has measles, it can spread to 90 others. Seven of those 90 would be expected to experience complications.



## How is measles spread?

Measles is spread when an infected person coughs or sneezes. However, there are behaviours which can reduce the risk of spreading or catching it:

### Do

- ✓ wash your hands often with soap and warm water
- ✓ use tissues when you cough or sneeze
- ✓ throw used tissues in the bin

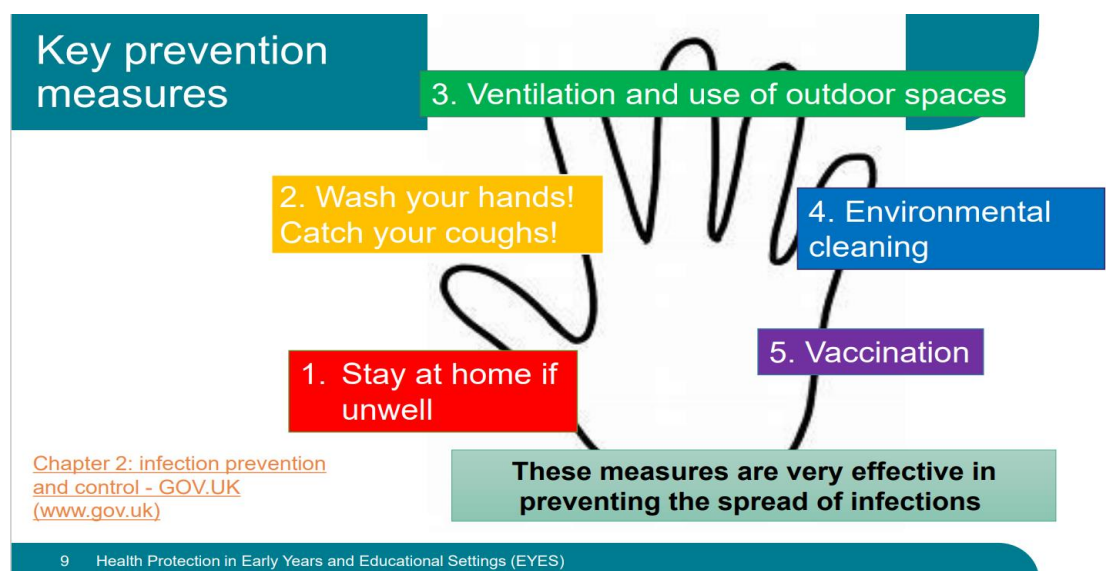
### Don't

- ✗ do not share cutlery, cups, towels, clothes, or bedding

## What can we do to be pro-active in managing infection control in general, including measles?

Review your infection control risk assessment, which can be found here: [Infection Control Measures.docx](#). There may be details in this document specific to your site.

It is important to ensure that anyone who has the early symptoms of measles does not come into work/school.



## Can we send parents and staff information about immunisation against measles?

**Yes.** Local Public Health teams across our five local authority areas are sending you template letters – please use these. North Somerset’s version has previously been shared with you in the absence of any others, but letters specific to your area’s arrangements are now being sent to you.

## I’m a member of staff, and I don’t know if I have been vaccinated or not?

## FAQ Measles

You can contact your GP or you can use the NHS website to access your immunisation records

<https://www.nhs.uk/nhs-services/gps/view-your-gp-health-record/>

### **What is the MMR vaccine?**

This immunisation provides effective protection against three diseases – measles, mumps and rubella. This vaccine is effective, safe and free of charge.

Two doses of the vaccine are required to produce satisfactory protection. The first dose of MMR is given soon after the first birthday. A second dose is normally given before school entry.

If a family or individual avoids pork, an MMR vaccine is available that does not contain any pork products. This can be requested when speaking to the GP practice.

However, if a person is not yet immunised, you can have the MMR immunisation at any age. If either a child or adult is not fully protected against measles (two doses of MMR), their parents/the adult can contact their GP surgery to arrange immunisation.

It is never too late to get immunised or catch-up doses. This is especially important when measles is circulating because any child or adult who has not had at least one dose of MMR and comes into contact with a person with measles will have to be excluded from nursery, school or work for **21 days**.

### **Can I have the vaccination as an adult if I wasn't immunised as a child?**

**Yes.** There is no age cut-off for the vaccine, and there is no risk to having the vaccination again if you cannot find evidence of your vaccination status.

### **If I had measles as a child, do I have natural immunity?**

**Yes.** But you may not have had mumps or rubella (German measles) so will not have natural immunity against these diseases, which the MMR vaccine also protects against.

### **Can I try and find out the status of vaccination in my staff group?**

Staff do not have to tell you if they have been vaccinated or not, but most will (as they did previously with COVID). If you have staff who fall into vulnerable categories (such as pregnancy or reduced immune systems) advise them to seek medical advice.

### **What do I do if a child has suspected measles?**

If children have symptoms of measles, please tell them to stay at home or return home. Please advise parents they should not bring their children to school premises with any symptoms of measles.

Suspected measles may cause concern. Advice is available on the NHS website, UK Health Security Agency (UKHSA) webpages, NHS 111 and from the person's GP.

Please advise parents NOT to go to their GP practice or any other healthcare provider – instead, they should phone for advice and say it could be measles.

### **What do we do if we have had confirmation of a student with measles within the school setting?**

Because measles is a notifiable disease – meaning that any GP/healthcare provider diagnosing the measles has to report this to UKHSA – they should know first and be in contact with the school Principal or Ops Manager.

However, there needs to be a two-way reporting, so if you are aware of a diagnosed case, report it to SWHPT. You can do this by calling **0300 303 8162** and selecting option 1, or emailing [swhpt@ukhsa.gov.uk](mailto:swhpt@ukhsa.gov.uk).

If you need to take this step, please have background information ready to share. This should include infection numbers, how many in the class any considered vulnerable people, or how many you know to be unvaccinated.

### **What is the incubation period of measles?**

The incubation period for measles is usually seven to ten days – but can be as long as 21 days.

### **How long should a diagnosed person with measles remain off school?**

People with confirmed measles should stay away from school until four days after the rash appeared – treating the day the rash first appeared as day zero – and until well enough to return.

SWHPT can advise further, and you should also refer to your poster on infectious diseases in childcare setting and [the A-Z of infectious disease in school settings](#).

### **What about close contacts of a diagnosed measles case – do I have to contact trace?**

No. Contact tracing is undertaken by SWPHT. However, you will be able to help.

## Measles – why early years and schools are important

Measles infection can spread easily in your settings – you are key partners to help the Health Protection Team (HPT) respond to cases including

- Identifying clinically vulnerable contacts
- Identifying unvaccinated contacts
- Helping us warn and inform staff, parents and children
- Encourage vaccination
- You can help to reduce spread of measles through sharing key messages around the importance of vaccination and hand hygiene
- You have insight and greater ability to support underserved communities that may need additional and/or alternative resources for engagement



### **How long does a close contact need to remain off school?**

If someone is identified as a close contact of a confirmed outbreak, they could have to remain away from school/work for up to 21 days, if they are from a vulnerable group.

### **Should I ascertain vulnerable groups (eg non-vaccinated, low immune systems, pregnant) among staff?**

The best defence against contracting measles is to ensure you are vaccinated with two doses of MMR. Your local Public Health teams are sending you template letters that you can send to staff, parent groups etc.

Vaccination is not compulsory – however it is highly advisable. Staff do not have to share this information with you, but some will. PHT will have numbers of details of students vaccinated.

It is advisable, as previously with COVID, to identify your vulnerable groups.

**Do we need a measles risk assessment?**

You need your infection control risk assessment, which details the controls you are using at the setting to manage all infections. This will include measles.

**Useful websites**

**NHS Guidance on Measles**

<https://www.nhs.uk/conditions/measles/>

**NHS Guidance on the MMR Vaccine**

<https://www.nhs.uk/conditions/vaccinations/mmr-vaccine/>

**Managing Infectious disease in school settings (Overview)**

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

<https://www.gov.uk/government/publications/infectious-diseases-schools-and-other-childcare-settings>

**Managing specific infectious diseases A to Z**

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z>

**How to check your own individual immunisation records**

<https://www.nhs.uk/nhs-services/gps/view-your-gp-health-record/>