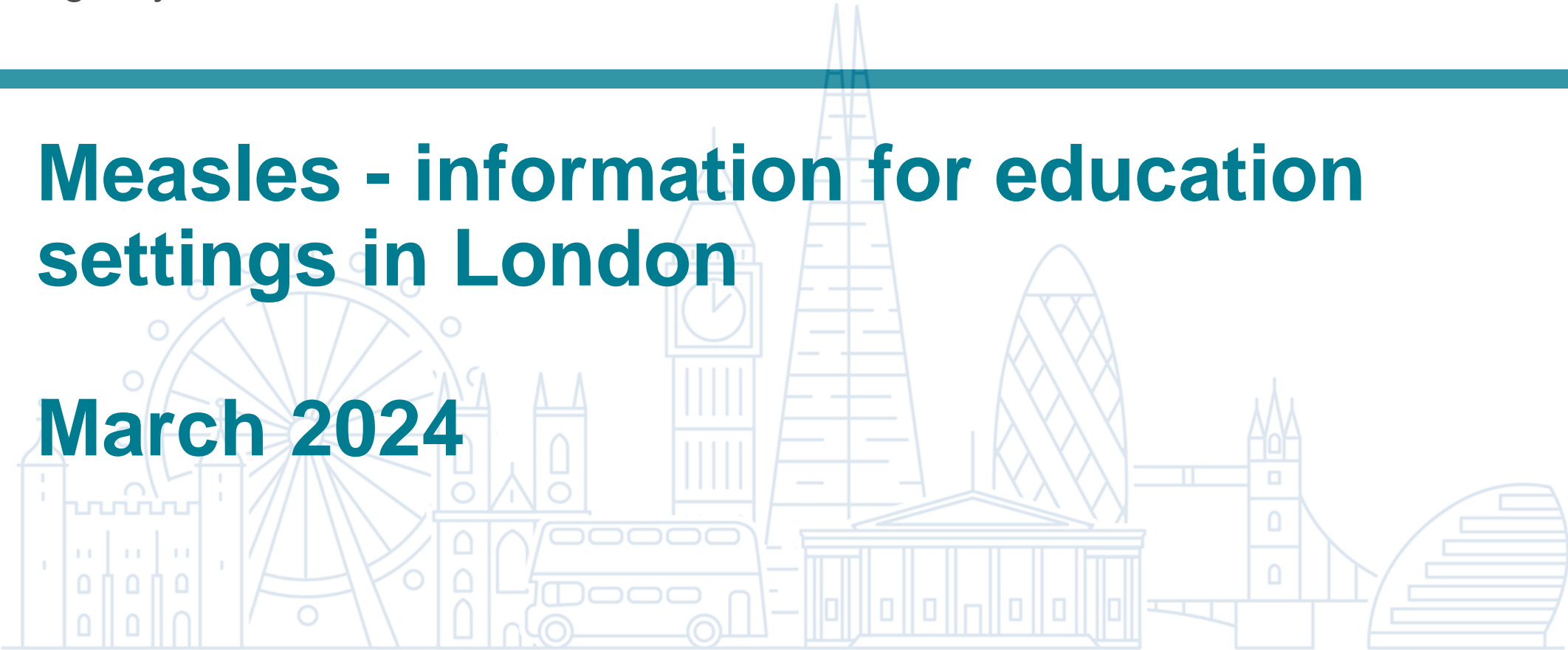




UK Health  
Security  
Agency

# Measles - information for education settings in London

March 2024



# Today we are going to cover

- What is measles? Signs and symptoms
- Current situation and why are we worried?
- The MMR vaccine
- How cases and outbreaks in educational settings are managed
- Actions London health system is taking
- What schools should do now, your take away
- Q&A

**The session will be recorded and shared, along with the slides.**



# What is measles?



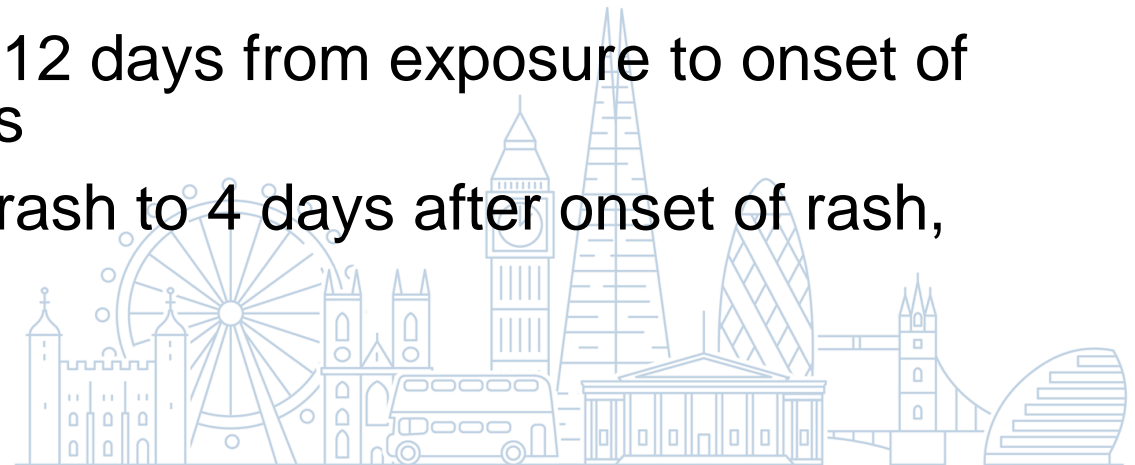
# Overview of measles

## What is measles?

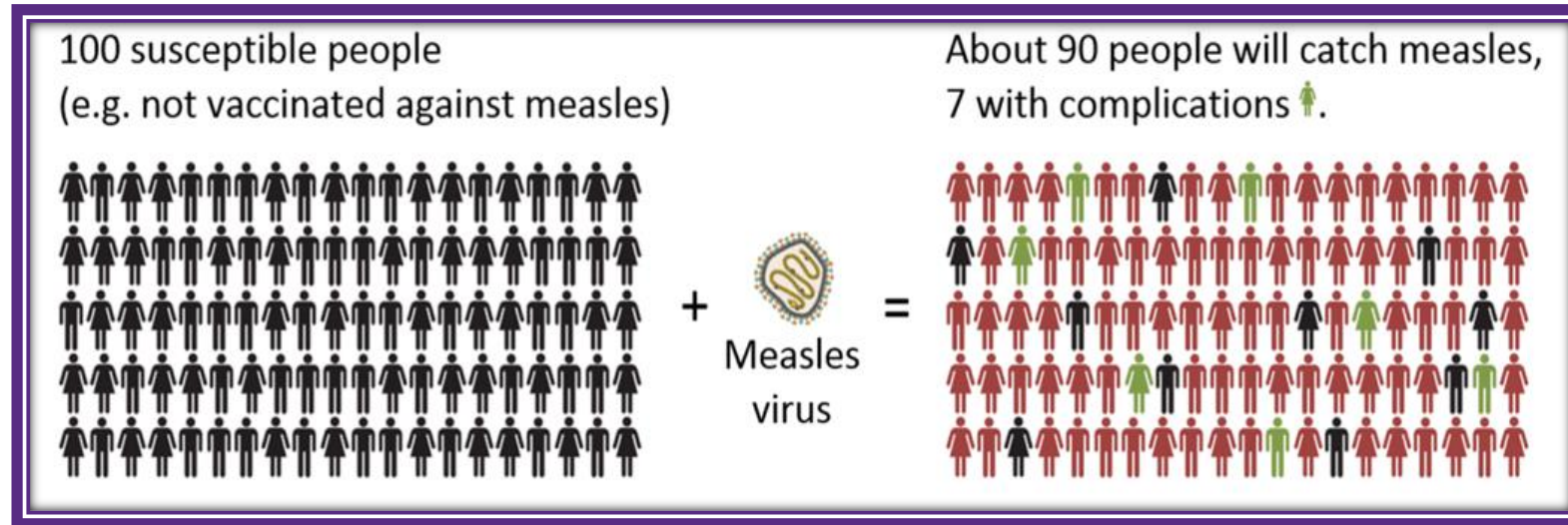
- Measles is a serious disease caused by a virus that spreads very easily. One case of measles can infect 9 out of 10 of unvaccinated close contacts
- Measles can be very debilitating for very young infants, adults, immunosuppressed individuals and pregnant women - who are more likely to develop complications and require hospitalisation

## How is it spread?

- Measles is transmitted through the respiratory route through coughing and sneezing
- It has an incubation period: usually 10 to 12 days from exposure to onset of symptoms, but can vary from 7 to 21 days
- Infectious period: 4 days before onset of rash to 4 days after onset of rash, rash counts as day 0



# Measles signs and symptoms



## Signs and symptoms

- Fever above 38 degrees
- Conjunctivitis/sore eyes/red eyes
- Cough/ runny nose
- Generally feeling unwell
- White spots in mouth
- Rash which starts on the face and neck before spreading to limbs, chest and abdomen

## Complications

- Ear infections/ongoing problems
- Pneumonia
- Severe dehydration
- Convulsions
- Encephalitis
- Brain damage
- In severe cases death



# Current situation and why we are worried

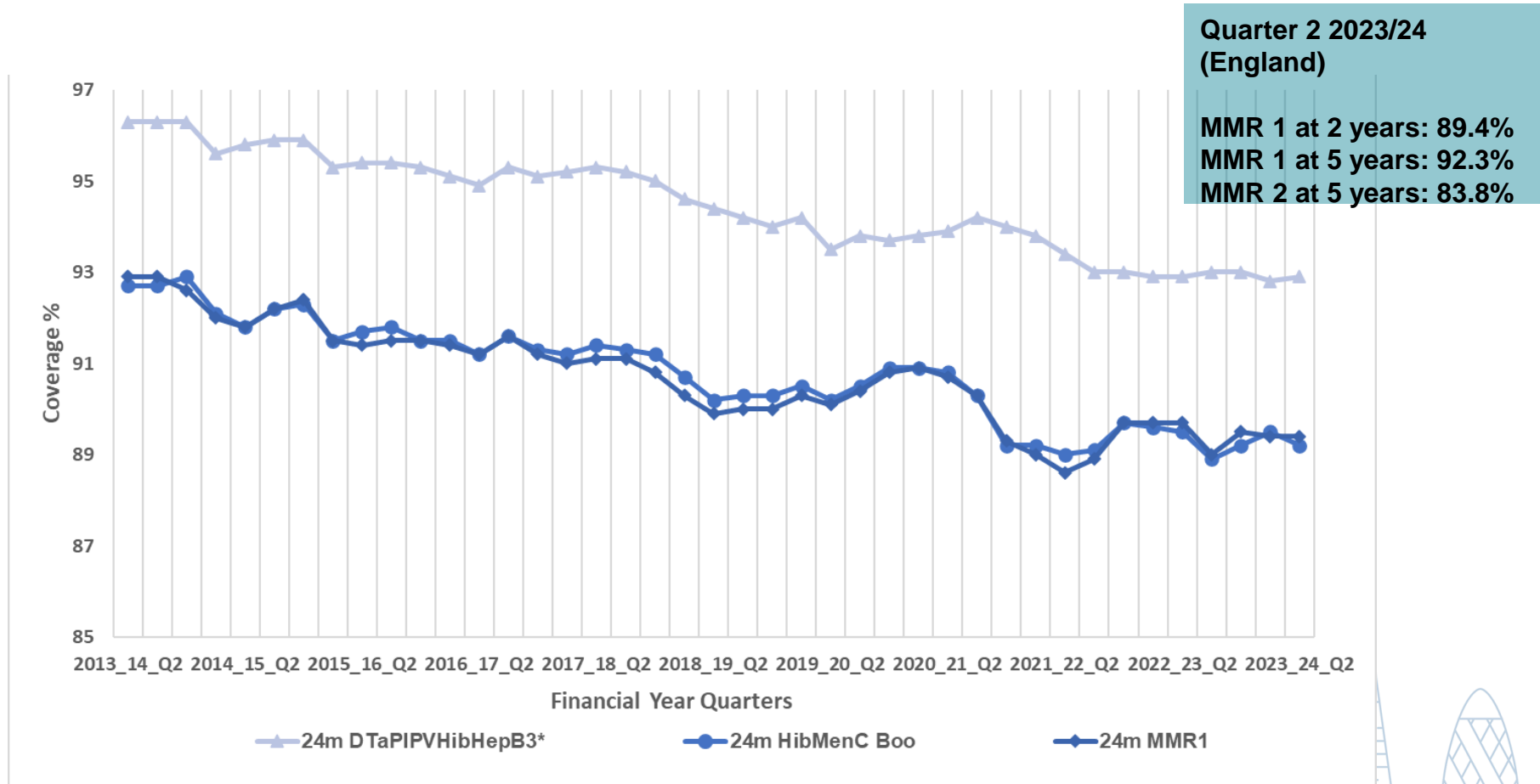


# Why are we worried?

- There has been a rise in measles cases in England in 2023 and a particular rise in London in the last two months
- Coverage for MMR vaccine in UK has fallen to the lowest level in a decade:
  - 1st dose uptake in 2 year olds 89%
  - 2nd dose in 5 year olds 85.5%
- London has historically had lower uptake of childhood immunisations, including the MMR, compared to the rest of the country
- Therefore, London is at particular risk of large outbreaks
- To prevent outbreaks, we need to achieve 95% uptake with 2 doses of the MMR vaccine by the time children turn 5 years old

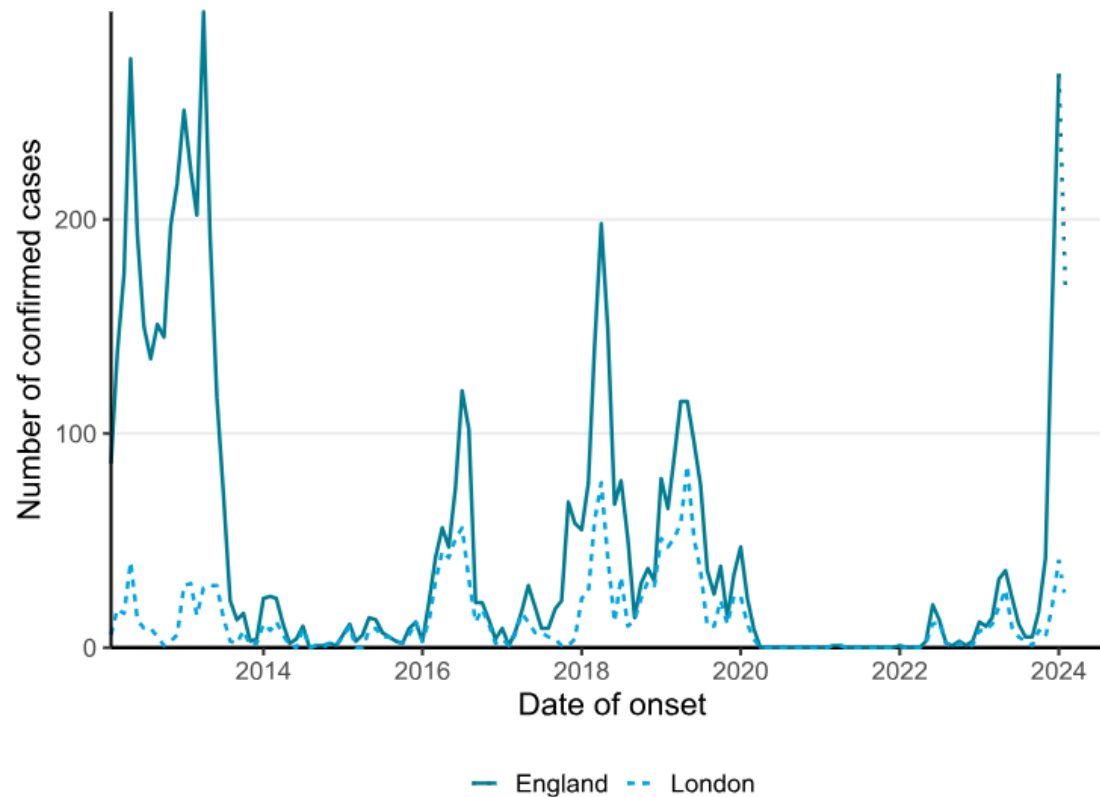


Vaccine coverage in 2-year-old children, by quarter from Q2 2013 to Q2 2023. (MMR1, Hib/MenC, Hexavalent vaccines) Source: UKHSA COVER Quarterly statistics





# Measles total laboratory confirmed\* measles cases from January 2012 to February 2024, London and England



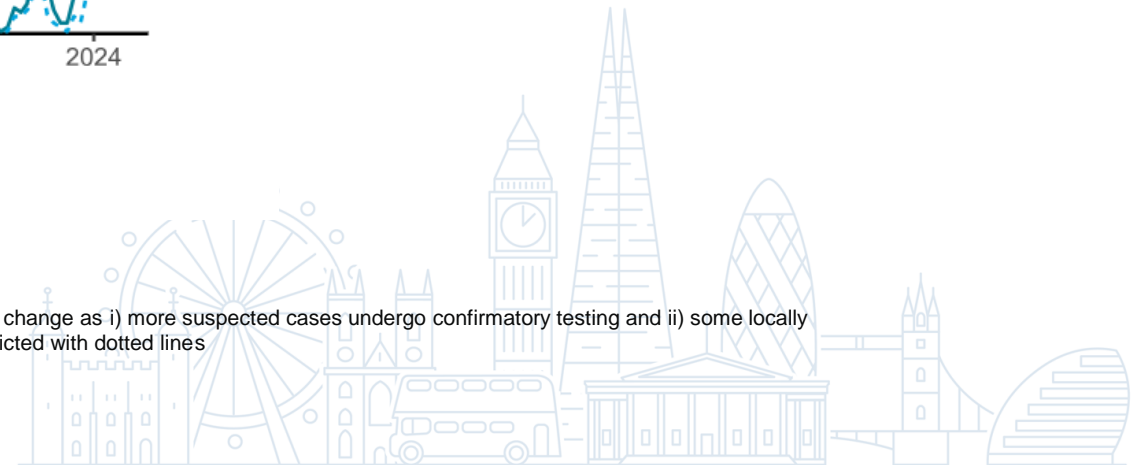
**Annual lab confirmed measles cases, England**

2019 – 1085  
2020 – 79 (last case in March 2020)  
2021 – 2  
2022 – 53  
2023 – 368  
2024 (to 26 Feb) - 650

**Source Enhanced National Measles Linelist**

[note 1] Cases confirmed through either local or reference laboratory testing.

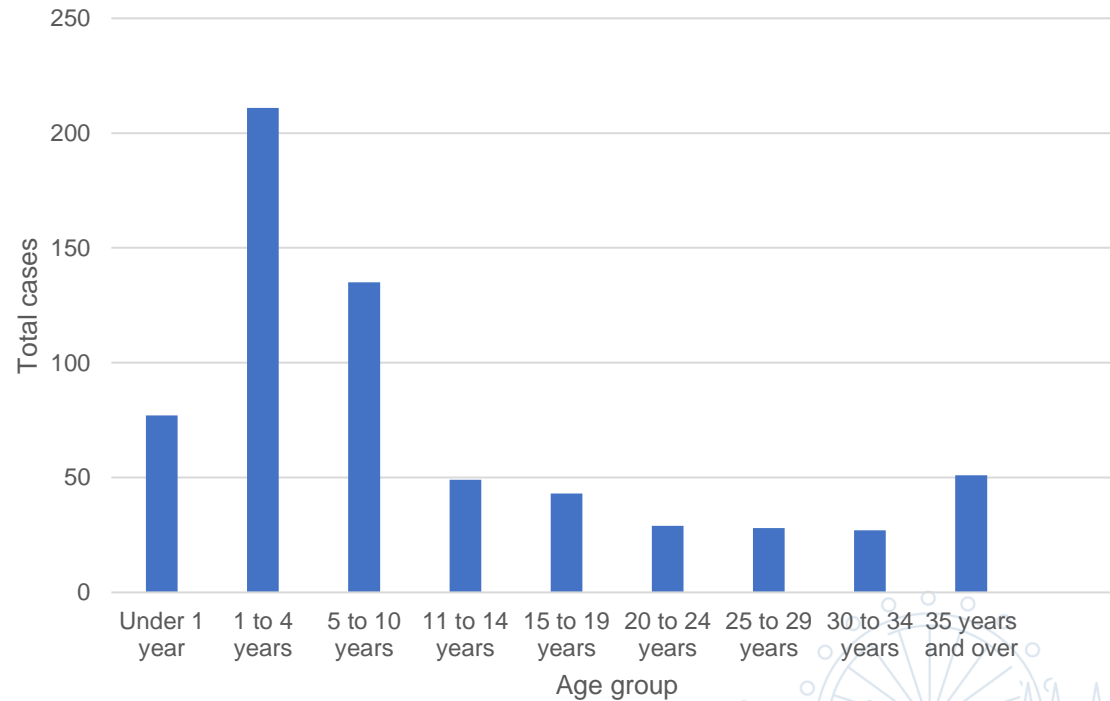
[note 2] There is a data reporting lag, therefore data for the past 4 weeks are provisional and subject to change as i) more suspected cases undergo confirmatory testing and ii) some locally tested cases are discarded after confirmatory testing at the Reference laboratory and are therefore depicted with dotted lines



# Measles laboratory confirmed cases – by age

The majority (423 of 650, 65%) of these cases were in children under the age of 10 and 27% (178 of 650) in young people and adults over the age of 15.

Laboratory confirmed cases of measles by age group and region in England: 1 October 2023 to 26 February 2024



Source Enhanced National Measles Linelist

[note 3] Data for the past 4 weeks are provisional and subject to confirmation in the reference laboratory.

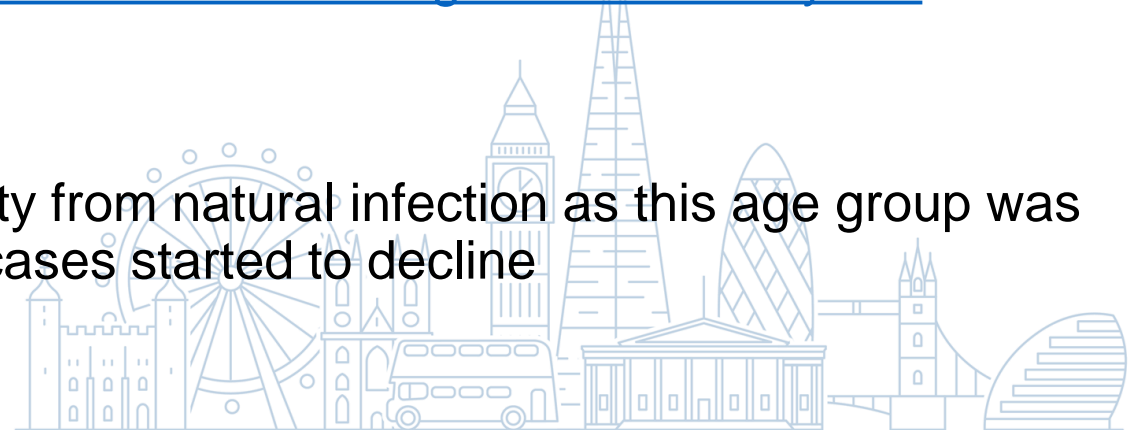


# MMR vaccine



# MMR Vaccine

- Children are offered the MMR vaccine according to the routine schedule:
  - First MMR dose at 12 months of age (95% effective)
  - Second MMR dose at 18 months or soon after (99% effective)
  - Pork free vaccine available
- Individuals with uncertain or incomplete immunisation histories should be brought up to date at the earliest opportunity
- Anyone who has missed out on their 2 doses of MMR vaccine can be brought up to date at any age. There are no negative effects from vaccinating people who are already immune For more information about where to get a vaccine <https://www.selondonics.org/our-residents/your-health/living-well/childrenshealth/>
- Those born before 1970 are likely to have immunity from natural infection as this age group was highly exposed to measles before the number of cases started to decline



# How cases and outbreaks in educational settings are managed



# General advice on managing infectious disease in educational settings

Please refer to this guidance for general advice on managing cases of infectious diseases

[www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities)



# Managing suspected measles cases in educational settings

- Education and childcare settings are **not expected to diagnose cases**
- If a child is ill within an educational setting, the setting should send the child home and encourage them to seek health advice
- If a parent/carer suspects their child may have measles, the child should not attend the education or childcare setting until they have had advice from a healthcare professional
- If measles is suspected (e.g. because the child has been in contact with a known case), the parent/carer should inform any health care setting ahead of the visit if possible, or immediately on arrival

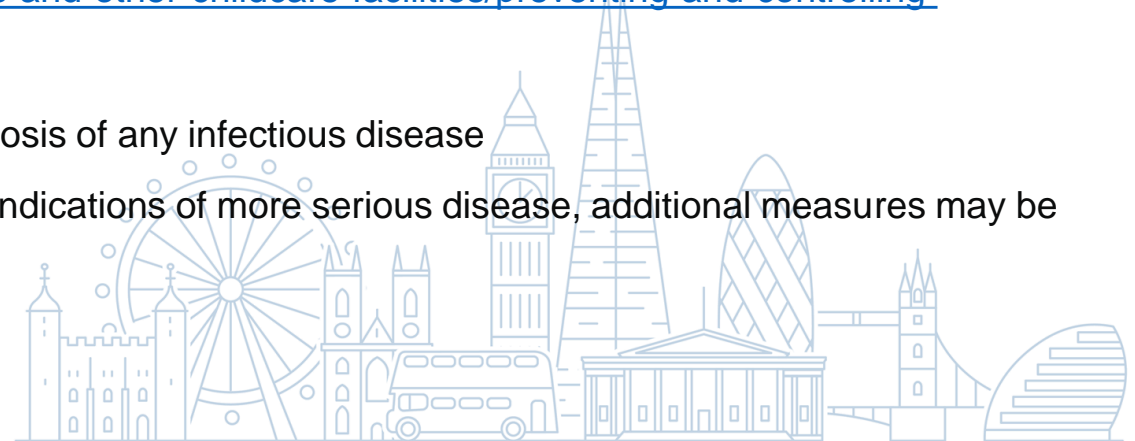


# Advice for all outbreaks of infectious disease

Many infectious diseases can be managed by reinforcing the measures recommended in prevention and controlling infections - [www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/preventing-and-controlling-infections](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/preventing-and-controlling-infections)

and by:

- encouraging all people who are unwell not to attend the setting or remain separate from others, wherever possible – Further guidance on exclusions - [www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z)
- ensuring all eligible groups are enabled and supported to take up the offer of immunisation programme [www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/supporting-immunisation-programmes](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/supporting-immunisation-programmes)
- including coronavirus (COVID-19) and flu
- ensuring occupied spaces are well ventilated and let fresh air in
- reinforcing good hygiene practices such as frequent cleaning <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/preventing-and-controlling-infections#cleaning> and hand hygiene <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/preventing-and-controlling-infections##hand-hygiene>
- Requesting that parents, carers or students inform the setting of a diagnosis of any infectious disease
- During an outbreak or incident, when there are either several cases, or indications of more serious disease, additional measures may be required





# Managing cases of measles in educational settings

If there is a case of measles in an education setting:

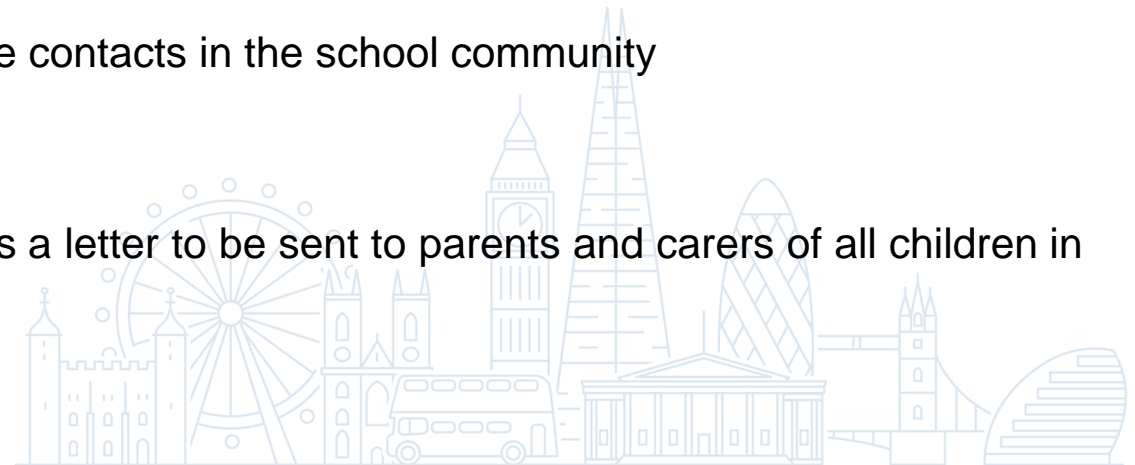
- The HPT may request details of the child (name and date of birth) and the contact details for the parent from the setting
- Please note that this information can be shared with the HPT without having to seek the parent's consent and seeking of consent should not delay the risk assessment
- HPT will advise on further actions based on information available
- In complex situation or for multiple cases the HPT may bring together an incident management team meeting to determine next steps



# Managing cases of measles in educational settings

If HPT are aware that there is likely case who has attended the setting while infectious, the HPT will advise on:

- **Exclusion of case and close contacts who are unvaccinated**
  - Case stays away from school until 4 days after onset of rash
  - Household contacts who are unvaccinated may be asked to stay away from school for up to 21 days after the case's onset of rash UNLESS they receive a vaccine in 3 days
  - This will only be advised after an individual risk assessment
  - Vaccinated contacts can attend school as normal
- **Management of any vulnerable contacts in the school community**
  - HPT will request information on vulnerable contacts in the school community so they can be given advice on what to do next
  - Measles can make people very ill, particularly those who are immunocompromised, pregnant, and infants (< 1 year)
  - The school have a duty of care to identify vulnerable close contacts in the school community
- **Sharing information with parents and staff**
  - HPT will share an education resource pack which includes a letter to be sent to parents and carers of all children in the school considered to be "exposed" to the case

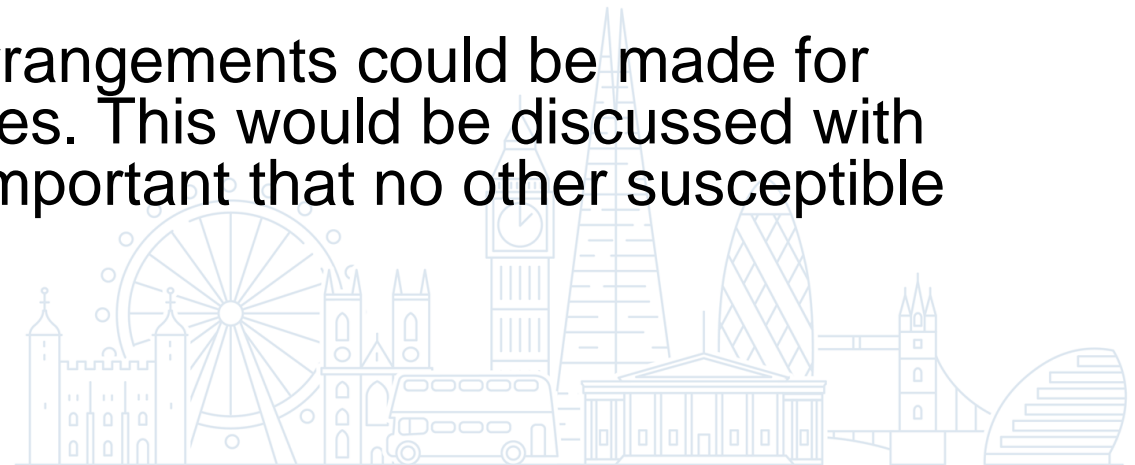


# Exclusion advice during exam period

The exclusion advice is the same during exam periods because the risk of passing on the infection is too high to allow cases to attend

- Students or staff who have suspected measles need to stay away from school until 4 full days after their rash starts.
- People who are not immune but have been in close contact with measles at home should stay away from school for as long as advised by the HPT
- Non-immune siblings of people with measles should stay away from school for as long as advised by the HPT

However, for **significant** exams special arrangements could be made for non-immune siblings of people with measles. This would be discussed with the HPT on a case-by-case basis as it is important that no other susceptible students or staff are exposed to measles



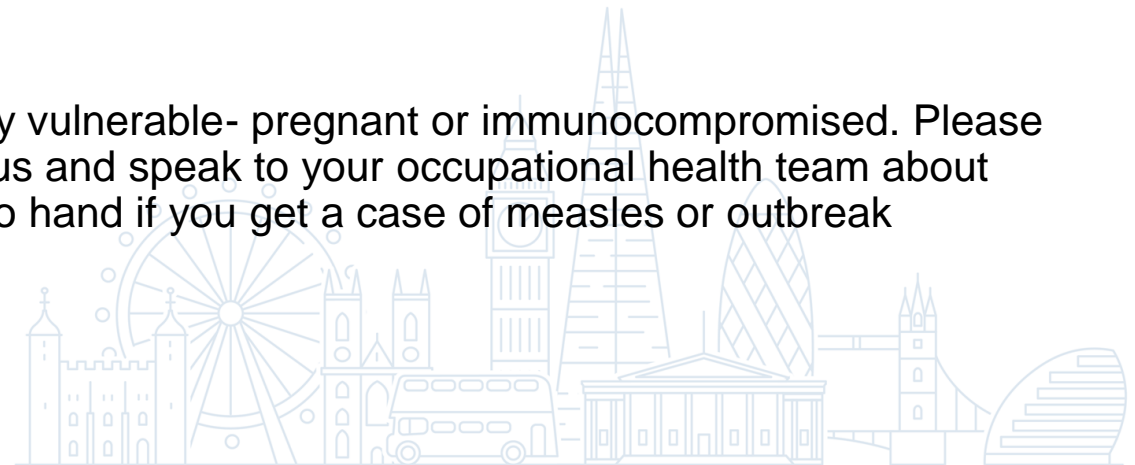
# Actions London health system is taking

- Managing cases and outbreaks with the intention of preventing spread
- Catch up opportunities are on offer in
  - Schools (via School aged immunisation services)
  - GPs (evergreen offer)
  - Community clinics
- National childhood immunisations media campaign launched March 2024
- London multi-stakeholder communications campaign to be launched in Autumn 2024
- Local community engagement



# What schools should do now – your important take aways

- Work with your School Age Immunisation Services (SAIS) team to improve uptake of routine vaccinations in the school [www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/supporting-immunisation-programmes](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/supporting-immunisation-programmes)
- Share with parents/carers and students reminders that the MMR vaccine is safe, free, effective and the best protection for our children and young adults
- Be aware of the contact details for your HPT <https://www.gov.uk/health-protection-team>
- Encourage ALL staff (teaching and otherwise) to check their vaccination status and get their MMR vaccine as needed. Anyone who has missed out on their 2 doses of MMR vaccine can be brought up to date at any age. There are no negative effects from vaccinating people who are already immune
- Be aware of any pupils and staff in school who may be clinically vulnerable- pregnant or immunocompromised. Please ask pregnant staff to check their own measles vaccination status and speak to your occupational health team about anyone not fully protected. You will also need this information to hand if you get a case of measles or outbreak
- Please note last slide with links in resources



# Q & A



# Resources for educational settings

- The best action for education settings to prevent outbreaks, and support school attendance, is to encourage uptake of the MMR vaccine.
- A wide range of immunisation resources for education settings are available. Schools, nurseries and childminders are encouraged to share these with parents or carers. Higher education settings are also encouraged to share resources with their students.
- **Leaflets**
- [www.gov.uk/government/publications/measles-protect-yourself-protect-others](http://www.gov.uk/government/publications/measles-protect-yourself-protect-others)
- [www.gov.uk/government/publications/measles-dont-let-your-child-catch-it-poster](http://www.gov.uk/government/publications/measles-dont-let-your-child-catch-it-poster)
- With translations [www.gov.uk/government/publications/measles-dont-let-your-child-catch-it-flyer-for-schools](http://www.gov.uk/government/publications/measles-dont-let-your-child-catch-it-flyer-for-schools)
- Vaccine communications toolkit for universities helping to protect students from vaccine preventable infectious diseases  
<https://khub.net/documents/135939561/174090192/MMR+MenACWY+and+coronavirus+vaccine+comms+toolkit+for+universities.pdf/6ec4e100-242b-4f5c-f1ea-bf88cace1ecb>
- Copies of printed publications and the full range of digital resources to support the immunisation programmes can be ordered through the <https://www.healthpublications.gov.uk/Home.html> health publications platform
- DfE published a blog on Education Hub: [educationhub.blog.gov.uk/2024/01/22/what-to-do-if-you-think-your-child-has-measles-and-when-to-keep-them-off-school/](http://educationhub.blog.gov.uk/2024/01/22/what-to-do-if-you-think-your-child-has-measles-and-when-to-keep-them-off-school/)
- Posters to raise awareness of measles outbreak, also in translations  
[www.gov.uk/government/publications/measles-outbreak](http://www.gov.uk/government/publications/measles-outbreak)

