



Harrietsham Church of England Primary School

Headteacher: Mrs Jackie Chambers
Deputy: Mr Jon Gambell
Chair of Governors: Mrs Rebecca Emson



Nurtured We Flourish

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Email: office@harrietsham.kent.sch.uk
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17th March 2026

Dear Families,

We have been asked to share the below information with you all with regards to the recent meningococcal disease outbreak in Kent. I have highlighted some of the key points.

The main message is that all children should continue to attend school as normal and that the risk of transmission of this illness is very low within a primary school setting because:

- 1) The infection doesn't spread easily.
- 2) We do not have the type of close contact needed to spread the illness within a primary school.
- 3) Lots of our children have been vaccinated against Meningitis B as part of their routine childhood vaccination programme so it is very unlikely that the bacteria causing the infection will be brought into a primary school setting.

Kind regards,

Jackie Chambers
Headteacher

Information for parents and children

We are writing to update you on the current distressing outbreak of invasive meningococcal disease in Kent, with 13 cases confirmed since 13 March.

About invasive meningococcal disease

Meningococcal disease (meningitis and septicaemia) is an uncommon but serious disease caused by meningococcal bacteria. **The onset of illness is often sudden and early diagnosis and treatment with antibiotics are vital.** While meningococcal disease can affect all ages, recent outbreaks have shown that older children, teenagers and young adults, particularly those in shared settings, are more likely to be affected.

How invasive meningococcal disease spreads

Meningococcal infection doesn't spread very easily. The bacteria can only be passed to others after a long period of close contact, for example living with someone in shared accommodation, through prolonged kissing or sharing vapes.

People may be offered preventive antibiotics if they have had significant, close contact with someone with meningococcal disease in the last 7 days.

What UK Health Security Agency is doing

UK Health Security Agency (UKHSA) is leading a multi-agency management team to respond to this outbreak. Specialists at UKHSA are interviewing affected individuals and their families to help identify all close contacts and arrange antibiotics to limit spread.



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Investigations have confirmed some of the cases visited Club Chemistry in Canterbury between 5 to 7 March prior to becoming unwell. UKHSA is working closely with the nightclub and partners, including the University of Kent, to limit the spread. UKHSA is now advising anyone who visited Club Chemistry on 5 March, 6 March or 7 March to come forward for post exposure preventative antibiotic treatment as a precautionary measure.

What you need to do

There are two important actions that all students and parents can take to support management of this incident and help protect themselves. These are:

1. Be aware and alert to the signs and symptoms of invasive meningococcal disease.
2. Encourage uptake of preventive antibiotic treatment for those who are eligible.

Signs and symptoms

Meningococcal disease can progress rapidly, so it's essential that parents and students are alert to the signs and symptoms of meningococcal meningitis and septicaemia. You should seek urgent medical help if you or your child develop any symptoms of meningococcal disease.

- a rash that doesn't fade when pressed with a glass
- sudden onset of high fever
- severe and worsening headache
- stiff neck
- vomiting and diarrhoea
- joint and muscle pain
- dislike of bright lights
- very cold hands and feet
- seizures
- confusion/delirium
- extreme sleepiness/difficulty waking

Preventive antibiotic treatment

If you or your child attended Club Chemistry between the 5 and 7 March, we strongly encourage you to come forward for preventative antibiotic treatment as a precautionary measure. This can be collected from the following sites:

- Gate Clinic, Kent and Canterbury Hospital, Ethelbert Road, Canterbury, CT1 3NG - open until 8pm on Monday 16 March and planned to open from 8.30am to 7.30pm on Tuesday 17 March.
- Westgate Hall, Westgate Hall Road, Canterbury, Kent, CT1 2BT. Planned to be open from 8.30am to 7.30pm on Tuesday 17 March.
- Carey Building, Thanet Hub, Margate Northwood Rd, Westwood, Broadstairs, CT10 2WA. Planned to be open from 8.30am to 7.30 pm on Tuesday 17 March.
- Senate Building at University of Kent, CT2 7NZ – open until 8pm on Monday 16 March (queue closes 7.15pm) and from 9am to 8pm on Tuesday 17 March.

Meningococcal disease does not spread easily, and outbreaks of this size are rare. If you have not been contacted directly by UKHSA the risk to you/your child is low. You or your child can continue to attend school or college as normal unless you have been directly advised otherwise by your local health protection team.



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Vaccination

There are several types of meningococcal bacteria that can cause meningitis. The current outbreak is caused by Meningococcal B (MenB).

Teenagers are routinely offered the MenACWY vaccine, which protects against four other types of meningitis: A, C, W, and Y. This usually happens in school Years 9 and 10. If someone missed this vaccination at school, they can still get it up until their 25th birthday. It's especially important to get it before starting university or college, where infections can spread more easily. You can get it by contacting your GP.

However, the MenACWY vaccine does not protect against MenB, and there is no routine MenB vaccination programme for young adults. MenB vaccination is only routinely offered to children under two, meaning children born before 2015 (when this programme was introduced) have not been vaccinated as part of their routine immunisation schedule. Because of this, it's important to know the signs and symptoms of meningitis and septicaemia—spotting them early can save lives.

Finally, make sure that children stay up to date with all their routine vaccinations, as these offer important protection.

In some outbreaks, vaccination against meningococcal group B (MenB) is used as an additional protective measure, particularly when there is evidence that vaccination can reduce the risk of late cases in affected groups. UKHSA continues to review all information to identify and assess appropriate prevention and control action. If vaccination becomes recommended as part of the response, parents will be informed immediately with clear instructions on who is eligible, when clinics will run, and what steps to take.

The most important steps to take at this stage are to be alert to the signs and symptoms of invasive meningococcal disease and encourage uptake of antibiotic treatment to those who are eligible.

For more information, visit the **NHS website** <https://www.nhs.uk/conditions/meningitis/> or see the information available from two charities who offer free support via their websites and helplines:

The Meningitis Research Foundation

www.meningitis.org

Helpline UK 0800 8800 3344

Meningitis Now

www.meningitisnow.org

Helpline 0808 80 10 388

or helpline@meningitisnow.org

Kind regards,

UKHSA and DfE



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