



UK Health
Security
Agency

Measles

Information pack for early years,
education and childcare settings

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Who this pack is for

This pack is for managers and staff working in early years, education and childcare settings in England. It provides information on measles and key actions you can take to reduce the spread of measles infection in your setting.

This pack has been shared with you to support your setting to prepare for potential measles outbreaks, or in response to a measles case.

- If you **do not** have measles cases in your setting, refer to '[Actions for early years, education and childcare settings before there is a measles case](#)'. You **do not** need to take any further action
- If you **have been contacted by your local health protection team about a case or a likely case**, then please read this pack and take the recommended actions

Early years, education and childcare settings are places where measles infection can easily spread. To help to reduce the spread of infection, these settings can:

1. **Share messages around the importance of vaccination** to reduce the spread of measles
2. **Help to identify any groups** that might need additional resources (e.g. translated or simple text information) or further support to encourage vaccination
3. **Provide a location for delivering vaccination sessions** if required.
4. If contacted by the health protection team about a case or likely case, **identify** who might have been in contact with measles cases and **provide information** on what they need to do

In addition to this measles specific resource pack, please note there is a useful practical guide for staff on managing cases of different infectious diseases in children and young people settings, including education – see [Health protection in children and young people settings, including education - GOV.UK](#).

Actions for early years, education and childcare settings before there is a measles case

[Measles](#) is one of the most highly infectious diseases and can spread from person to person quickly, especially in early years, education and childcare settings. There are limited measures to prevent measles spreading if people are unvaccinated. **Having two doses of the Measles, Mumps, Rubella and Varicella (MMRV) or Measles Mumps and Rubella (MMR) vaccine is the most effective way to prevent and control the spread of measles.**

Two doses of the MMRV or MMR vaccine will give you excellent lifelong protection. Due to the introduction of a varicella (chickenpox) vaccination programme, the MMRV vaccine replaced the MMR vaccine in the routine childhood programme from 1 January 2026. Children born on or after 1 January 2020 who need to be caught up with measles vaccination will be offered the MMRV vaccine. Older children and adults born on or before 31 December 2019 who are not up to date can be caught up for free on the NHS whatever their age using the MMR vaccine.

Early years, education and childcare settings are not expected to diagnose cases. You can use the [measles factsheet](#) with all parents, carers and staff to:

- raise awareness of measles and the importance of the MMRV and MMR vaccine
- remind people to check that their families are up to date with MMRV or MMR vaccines
- help parents and carers know the signs and symptoms of measles to watch out for, and know when to seek medical attention
- parents and carers can check their child's red book for their vaccination records
- if anyone has missed their MMRV or MMR vaccination, they can contact their GP to book
- encourage staff to accept the MMR vaccine if they have missed these vaccinations in the past

Measles can make people very ill, particularly those in vulnerable groups. It may be helpful to identify people who attend the setting that are in vulnerable groups so that they can be quickly identified if they come into contact with a measles case. These are:

- people who are immunosuppressed
- People who are pregnant who are not fully vaccinated against measles

- infants younger than 12 months

The Health Protection Team (HPT) may also contact an education or childcare setting directly if they become aware of a case of likely or confirmed measles so having this information to hand will be helpful.

What to do if you suspect a child, student or staff member has measles in your education or childcare setting

If you are made aware of any likely or confirmed cases of measles among people who have attended your setting, who have been diagnosed by a doctor or another healthcare professional, then you should [contact your local HPT](#).

Exclude any infected individuals from the setting, on public health grounds, while they are likely to be infectious (from 4 full days before rash onset and for a further 4 full days). Cases should only return to the setting when they have fully recovered; this is because they may be more likely to get other illnesses when they have measles.

Advise people who have a weakened immune system, are unvaccinated and pregnant, or are under 12 months of age, who have been in the setting at the same time as the likely or confirmed measles case, to seek advice from their GP or midwife. They should tell their GP, or their midwife that they may have been exposed to measles.

Encourage all children and young people over the age of one year old to have the combined MMRV/MMR vaccination as per the [NHS Vaccination Schedule](#). Early years, education and childcare settings can play an important role in raising awareness of the importance of the MMRV/MMR vaccine.

Action card: What to do if you have a child, student or staff member with measles in your education or childcare setting

This action card is for managers and staff working in education or childcare settings. This section refers to **public health exclusions**. These are the time periods an individual should not attend a setting to reduce the risk of spreading the virus while they are infectious. This is different from 'exclusion' as used in an educational sense.

Key actions for you to take

Contact your local HPT



- contact your local HPT if you are made aware of **any likely or confirmed cases of measles among people who have attended your setting, who have been diagnosed by a doctor or another healthcare professional**
- the HPT may be experiencing high levels of demand, so you should follow this action card rather than waiting to be called back. The HPT may have to prioritise those settings with young children who are unlikely to be fully vaccinated against measles
- the HPT may advise additional measures and in certain situations, a multi-agency meeting may be set up and the early years, education or childcare setting invited to attend



You can find your local HPT via this link - [Find your local health protection team in England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/organisations/health-protection-agency/about-us/our-structure/our-regional-teams)

Information to give the HPT

The following information will help the HPT to assess the situation.

- type and size of setting
- name and date of birth of the measles case or cases and which year groups and classes they are in.
- dates of when the case or cases last attended the setting
- if there are any of the following people who may have come into contact with the measles case in your setting:
 - people who are immunosuppressed
 - unvaccinated people who are pregnant
 - infants younger than 12 months

	<p>The HPT may already be aware of the measles case (or cases) because they have already been notified by a doctor. The HPT will assess the information provided by the doctor and may decide that it is unlikely the person has measles. If this happens, they will advise that no further action is required</p>
<p>Exclusion </p>	<ul style="list-style-type: none"> • Confirmed and likely cases should be excluded from the early years, education or childcare setting while they are infectious (from 4 full days before their rash started until 4 full days after their rash started) • Cases should only return to the setting when they have fully recovered; this is because they may be more likely to get other illnesses when they have measles • If a child or member of staff has not had any doses of vaccination against measles and is a close contact of a measles case, for instance a sibling, the HPT may advise that the child not come to the setting for a number of days to reduce the spread of measles. The number of days can vary depending on the circumstances. They will only do this in certain situations, following an individual risk assessment, and will work with the setting to agree the best course of action. This will be advised by your HPT, please ask them to clarify if you are unsure • Most people who are in contact with someone with measles do not need to be excluded from the setting. However, in some circumstances the HPT, in liaison with the headteacher or setting leads, may advise certain people to stay away from the setting, for example people who have had very close contact and have had not had any doses of vaccination against measles
<p>Identify contacts </p>	<p>Measles can make people very ill, particularly those in vulnerable groups. Therefore, it is vital that close contacts are identified promptly in the following priority order:</p> <ul style="list-style-type: none"> • People who are immunosuppressed • Unvaccinated people who are pregnant • Infants younger than 12 months • Other contacts <p>Definition of a close contact in an early years, education or childcare setting includes:</p> <ul style="list-style-type: none"> • those who have spent more than 15 minutes together with the case in a small, confined area (for example, room, a classroom, school bus) • those who have had face to face contact of any length

<p>Management of contacts</p> 	<ul style="list-style-type: none"> • Send the measles factsheet and warn and inform letter to all close contacts identified • Prioritise sending letters to those that are vulnerable (immunosuppressed people, unvaccinated people who are pregnant, and infants younger than 12 months)
<p>Communication to parents and staff</p>	<ul style="list-style-type: none"> • The measles factsheet can be sent to the wider early years, education or childcare setting community to raise awareness of measles and remind all parents to ensure their child is up to date with MMRV/MMR vaccine
<p>Hand and respiratory hygiene</p> 	<ul style="list-style-type: none"> • Promote hand washing with liquid soap and warm water • Supervise and encourage children to wash their hands regularly, using paper towels or hand dryers for drying hands (with wastepaper bin provided for disposal of towels) • Remind staff to wash their hands throughout the day • Encourage good respiratory hygiene, using and disposing of tissues in the bin, followed by hand washing (Catch it, Bin it, Kill it Poster - Infection Prevention Control) • Home (e-bug.eu) has a range of educational resources for ages 3-16 to learn about microbes, infection prevention and control, antibiotics and vaccination

Who needs to contact their doctor for advice right away if they are a contact of a measles case?

The [action card](#) sets out key actions for early years, education and childcare settings to take if there is a measles case in the setting. Below is further information for **people who need to ask their doctor for advice as soon as possible if they have been in close contact with a measles case**. These are:

Contacts with a weakened immune system (immunosuppressed)

These individuals should contact their doctor or specialist as soon as possible. The doctor or specialist can assess whether they are immune to measles, either because they have previously had a measles infection or because they have had two doses of the MMRV or MMR vaccine. If they are not immune and have been in contact with an infected person, the doctor or specialist may organise treatment to help stop them from becoming seriously unwell.

Unvaccinated people who are pregnant

Pregnant staff or students that are not sure of their immunity should seek advice from their doctor or midwife as soon as possible. People are considered immune if they have previously had a measles infection or if they have had two doses of the MMRV or MMR vaccine.

Infants younger than 12 months

Parents and carers of infants younger than 12 months should seek advice from their doctor. Advice may differ depending on the type of contact they had with the person who has measles.

Information on measles

- Measles is very infectious and can spread from person to person quickly, especially in education and childcare settings. There are limited measures to prevent measles spreading if people are unvaccinated. Vaccination is the most effective way to control the spread of measles
- Measles is spread by airborne transmission (for example by droplets which are expelled when someone with the infection sneezes or coughs) and direct contact (for example contact with nose or throat secretions)
- Measles can make people very ill, particularly people who have a weakened immune system (immunosuppressed), young infants (under 12 months), and those who are both pregnant and unvaccinated
- **Those with special educational needs (SEN) are not more vulnerable to measles unless they have a weakened immune system. Most people with SEN, additional special needs (ASN) or disabilities will not require any additional health protection measures**
- Children who get measles can be very unwell and some will suffer life changing complications
- The time it takes for symptoms to develop after someone has been in contact with someone who has measles (incubation period) is around 10 to 12 days from the date of contact with the infected person, but this can vary from 7 to 21 days
- Someone who has measles is considered to be infectious from 4 full days before they develop a rash to 4 full days after they develop the rash (onset of rash is day 0). They should therefore not attend the setting on public health grounds until at least 4 days after their rash developed
- Measles is usually a clinically diagnosed infection. If a GP or healthcare professional diagnoses measles, then this public health exclusion period should be followed. Cases should only return to the setting when they have fully recovered; this is because they may be more likely to get other illnesses when they have measles

Measles Infection Timeline								
Day 4	Day 3	Day 2	Day 1	Day 0	Day 1	Day 2	Day 3	Day 4
← Days before rash				Rash Starts	Days after rash →			
YOU CAN INFECT OTHER PEOPLE DURING ALL OF THESE DAYS								

Clinical symptoms

- Early years, education and childcare settings are not expected to diagnose cases of measles. Anyone with symptoms suggestive of measles should seek advice from their GP or NHS 111
- Usually, someone with measles will feel unwell 2 to 4 days before the rash appears
- Before the rash appears, symptoms include high fever, nasal stuffiness, runny nose, sneezing, cough and conjunctivitis (red and sore eyes).
- The rash usually starts on the face and behind the ears and then expands further on the face and trunk
- The rash is red, blotchy and has both raised and flat parts. It is not itchy and usually lasts for 3 to 7 days
- Further information can be accessed at [Measles - NHS \(www.nhs.uk\)](http://www.nhs.uk)

Vaccination

- MMRV vaccination is a simple and effective way of protecting against measles, mumps, rubella, and varicella (chickenpox). The vaccine is part of the UK's routine childhood immunisation programme and replaced the MMR from 1 January 2026. The first dose is offered to children at 12 months, and the second dose is now offered to children at a new 18 month appointment. Children born on or after 1 January 2020 who need to be caught up with measles vaccination will be offered the MMRV vaccine
- Older children and adults born on or before 31 December 2019 who are not up to date can be caught up for free on the NHS whatever their age using the MMR vaccine
- In the UK, we have 2 MMRV or MMR vaccines which work very well. One of them contains porcine gelatine and the other one does not. If anyone would prefer to have the vaccine that does not contain gelatine, they can talk to their practice nurse or GP
- Coverage for the MMRV/MMR vaccination programme(s) in the UK **has fallen to the lowest level in a decade**

- There has been a resurgence of measles in England and around the world in recent years. Most of the cases in England have been in unvaccinated children under the age of 10 years with many outbreaks linked to nurseries and schools. There is no specific medical treatment for measles, so it is important to get vaccinated as it is the best protection against becoming seriously unwell
- Two doses of the MMRV or MMR vaccine provide excellent lifelong protection against measles, as well as mumps, rubella, and chickenpox (in MMRV). As a setting, you can play an important role in pointing your community to available resources and assuring parents that attending school remains safe and the best option for a child's health and education. If the School Aged Immunisation Service are attending your setting, you may wish to let them know about specific communities who are concerned so that they can consider this in their communications
- Early years, education, and childcare settings can play an important role in raising awareness of the importance of the MMRV or MMR vaccine. Where required, schools provide a useful location for vaccine clinics in response to outbreaks
- Anyone who has not had 2 doses of the MMRV or MMR vaccine should ask their GP practice for a vaccination appointment. It is best to have vaccines on time, but whatever your age you can catch up on a free NHS vaccine if you miss them. Having 2 doses gives long lasting protection

Appendices

- [Template letters – 'Warn and Inform' – likely or confirmed measles case](#)
- [Measles factsheet](#)
- [Further information and resources](#)

Appendix 1 - Template letters

Letter for parents and carers of nurseries and childminders - please update or delete yellow section as per your scenario. For distribution by settings only in agreement with your local health protection team

[Setting Name]

[Setting Address]

[Date]

Dear Parents and Carers,

A child who attends [Setting Name] has suspected measles.

This means that children who also attend the setting and are not fully vaccinated may be at risk of catching measles.

Measles is a highly infectious viral infection. It can spread very easily, and people can become unwell quickly.

Please read the information below so you know what to look out for and what actions to take.

Check vaccination status

The [MMRV or MMR vaccine](#) is the simplest and most effective way to protect people from measles. It needs 2 doses to work. This is part of the [NHS vaccination schedule](#).

Anyone who is not sure if they have had their two doses of MMRV or MMR should check their Red Book or contact their GP practice. You can catch up for free on the NHS whatever your age

Children aged under 12 months

If your child under 12 months old attended the setting at the same time as someone who has measles, please contact your GP for advice.

Children with a weakened immune system

If your child has a weakened immune system due to medication or treatment, then please inform the setting and contact your GP urgently for further advice.

Look out for symptoms (in the next 3 weeks)

Measles usually starts with cold-like symptoms, followed by a rash a few days later. Some people may also get small spots in their mouth.

Contact your GP or NHS 111 for advice. Please **phone** before attending any healthcare service in person. This helps prevent the virus being passed to vulnerable people in waiting areas.

Children with measles are infectious from **four full days** before to **four full days after** the rash starts and should not attend **[setting name]** during this period.

Further information

You can find reliable information here:

- [Measles - NHS](#)
- [MMR \(measles, mumps and rubella\) vaccine - NHS](#)
- [MMRV \(measles, mumps, rubella and chickenpox\) vaccine - NHS](#)

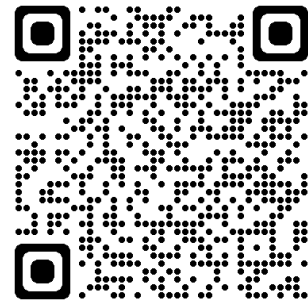
Yours faithfully,

Add sig if appropriate

[Name]

[Position]

[School/Setting Name]



Letter to setting staff - please update or delete yellow section as per your scenario. For distribution by settings only in agreement with your local health protection team

[School / Setting Name]

[School Address]

[Date]

Measles Information for Staff

Dear colleagues.

A child/staff member who attends [Setting Name] has suspected measles.

This means that staff who are not fully vaccinated against measles may be at risk of catching measles.

Measles is a highly infectious viral infection. It can spread very easily, and people can become unwell quickly.

Please read the information below so you know what to look out for and what actions to take.

Check your vaccination status

The best protection against measles is the **MMRV or MMR vaccine**. Please contact your **GP practice** to check your immunisation history. If your records show fewer than two doses, your GP can advise you on your eligibility and arrange vaccination.

People with a weakened immune system

If you have a weakened immune system, due to medical condition or treatment, then please contact your GP as soon as possible and explain you may have been exposed to a case of measles.

People who are pregnant

If you are pregnant and have uncertain or incomplete vaccination history, contact your GP or midwife for advice.

Look out for symptoms (in the next 3 weeks)

Measles usually starts with cold-like symptoms, followed by a rash a few days later. Some people may also get small spots in their mouth.

Contact your GP or NHS 111 for advice. Please **phone** before attending any healthcare service in person. This helps prevent the virus being passed to vulnerable people in waiting areas.

When staff with measles can return to work

Staff with measles are infectious from **four full days** before to **four full days after** the rash starts, and should avoid babies, people who are pregnant and those with weakened immune systems during this time. They should only return after this time and when they are better.

Further information

You can find reliable information here:

- [Measles - NHS](#)
- [MMR \(measles, mumps and rubella\) vaccine - NHS](#)
- [MMRV \(measles, mumps, rubella and chickenpox\) vaccine - NHS](#)

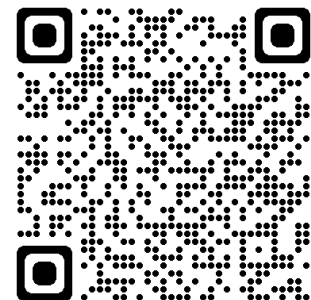
Thank you for helping us reduce the spread of infection in our school community.
Yours sincerely,

Add sig if appropriate

[Name]

[Position]

[School/Setting Name]



Letter for parents and carers of the school - please update/delete yellow section as per your scenario. For distribution by settings only in agreement with your local health protection team

[School / Setting Name]

[School Address]

[Date]

Dear Parent/Carer,

A child who attends [Setting Name] has suspected measles.

This means that children who are not fully vaccinated against measles may be at risk of catching measles.

Measles is a highly infectious viral infection. It can spread very easily, and people can become unwell quickly.

Please read the information below so you know what to look out for and what actions to take.

Check your vaccination status

If you are unsure whether your child has received **MMRV or MMR vaccine**, please contact your GP to check their vaccination record and arrange vaccination if needed.

Contact your GP urgently if your child has a weakened immune system

If your child has a weakened immune system, due to medication or treatment, then please inform the setting and contact your GP urgently for further advice.

Look out for symptoms (in the next 3 weeks)

Measles usually starts with cold-like symptoms, followed by a rash a few days later. Some people may also get small spots in their mouth.

Contact your GP or NHS 111 for advice. Please **phone** before attending any healthcare service in person. This helps prevent the virus being passed to vulnerable people in waiting areas.

Children with measles are infectious from **four full days** before to **four full days after** the rash starts and should not attend [setting name] during this period.

Thank you for helping us reduce the spread of infection in our school community.

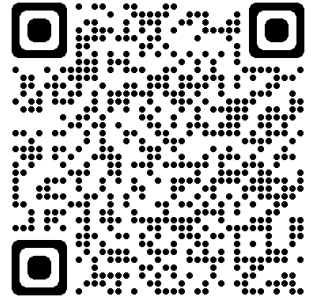
Yours sincerely,

Add sig if appropriate

[Name]

[Position]

[School/Setting Name]



Appendix 2 - Measles factsheet

What measles is

Measles infection is caused by a virus, and spreads between people very easily. Once symptoms start, people can become unwell quickly. You can get measles at any age, but it is often young children who catch it.

How measles spreads

You can catch measles through close contact with someone who has measles. This could be from the air when they cough or sneeze, or by touching things that someone with measles has coughed or sneezed on. Measles spreads very easily in households and in other places where people mix closely together.

You can be protected from catching measles if you have had 2 doses of the measles, mumps, rubella and varicella (MMRV) vaccine or the measles, mumps and rubella (MMR) vaccine, or if you have had the infection before.

A person with measles can spread the infection in the 4 days before they get the rash until 4 days after their rash starts.

Symptoms of measles

Symptoms of measles can start 7 days after first catching the infection. It usually takes between 10 and 12 days to develop symptoms. Sometimes it can take up to 21 days for any symptoms to appear after catching the infection.

Measles usually starts with cold-like symptoms. The first symptoms of measles include:

- a high temperature
- a runny or blocked nose
- sneezing
- a cough
- red, sore, watery eyes

Small white spots may appear inside the cheeks and on the back of the lips a few days later. These spots usually last a few days.

A rash usually appears 2 to 4 days after the cold-like symptoms started. The rash usually starts on the face and behind the ears before spreading to the rest of the body.

The spots of the measles rash can sometimes be raised. They may join to form blotchy patches. They are not usually itchy.

The rash looks brown or red on white skin. It may be harder to see on brown and black skin. Examples of the rash can be seen on the NHS website.

How serious is measles?

Around 1 in 15 people with measles can become seriously unwell. Younger children, people who are pregnant and people with weakened immune systems are more likely to become seriously unwell.

The more serious complications of measles can include:

- ear infections
- lung infection (pneumonia)
- diarrhoea
- dehydration
- fits (which are less common)

Measles infection during pregnancy can result in the loss or early birth of the baby.

Preventing measles – MMRV/MMR

Having the MMRV or MMR vaccine is the best way to prevent measles.

The [MMRV or MMR vaccine](#) is the simplest and most effective way to protect people from measles. It needs 2 doses to work. This is part of the [NHS vaccination schedule](#). As of 1 January 2026, children are offered a combined measles, mumps, rubella and varicella (MMRV) vaccine instead of measles, mumps and rubella vaccine (MMR), as part of the childhood routine 2-dose vaccination schedule. The first dose is usually given to children aged 12 months old, and the second dose is given at 18 months.

The MMRV replaced the MMR in the NHS vaccination schedule in 2026. The [MMR vaccine](#) is still available to children and adults born on or before 31 December 2019 who were not vaccinated against measles, mumps and rubella when they were younger. Children born on or after 1 January 2020 who are not fully vaccinated against measles will be offered MMRV.

If your child is identified as a close contact of someone with measles, sometimes your doctor may recommend the MMRV vaccine is given earlier than these scheduled doses. If a dose is given to an infant aged under 1 year of age the usual 2 doses of MMRV still need to be given at the usual times (with a minimum of 1 month gap between any doses).

If someone has missed a dose or are unsure if they have had any vaccinations, the vaccine can be given at any age. Parents and carers can check their child's red book for their vaccination records.

People who are pregnant or people with weakened immune systems should not have the vaccine. If they think they have had contact with someone with measles they should speak to their GP or midwife for further advice.

For more information on MMRV or MMR vaccinations visit:

[MMRV \(measles, mumps, rubella and chickenpox\) vaccine - NHS](#)

Or [MMR \(measles, mumps and rubella\) vaccine - NHS](#)

Staying away from other people if you are unwell with measles

A person with measles can spread the infection in the 4 days before they get the rash. Once the rash starts, they can still spread the infection for another 4 days.

If you have been told by a healthcare professional that you might have measles, you should stay away from childcare, school or work for at least 4 full days from when your rash first appeared. You can return to your normal activities 4 full days after the rash starts if you feel well and you no longer have a temperature.

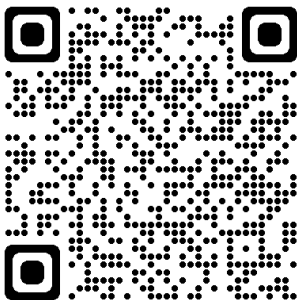
Treatments for people with measles

Measles usually starts to get better in about a week. It can help to rest and drink plenty of fluids, such as water, to avoid dehydration.

Measles can sometimes cause other illnesses. If you have been told by a healthcare professional that you might have measles and think that you or your child is developing more serious health effects, you should contact your GP.

Further information on measles is available at: <http://www.nhs.uk/conditions/measles>

Or scan the QR code:



Appendix 3 – Further information and resources

The following resources will remain up to date and should be used as the point of reference.

Education setting resources

- [Health protection in education and childcare settings](#)
- [A table explaining exclusion period of cases for different childhood infections](#)
- Hand hygiene [resources](#) for education settings
- [Measles - NHS \(www.nhs.uk\)](#)
- [Measles easy read factsheet](#)
- [Immunisations: resources for nurseries and schools](#), including primary, secondary school and nursery reminder posters and postcards to send to parents and posters paper copies. Available to order now to get prepared.
- [Guides to MMRV vaccination for parents](#) Including guides to the MMRV vaccination for parents in a variety of languages (English, Polish, Romanian, Romany, Russian, Spanish, Somali, Tigrinya, Tagalog, Turkish, Twi, Urdu, Ukrainian, Vietnamese, Yiddish, Yoruba)

Guides on immunisation for children and young people born on or after 1st Jan 2020

- [A guide to immunisation for babies up to 13 months of age: for children born on or after 1 January 2025](#) in English.
- Guide to [Immunisations at one year of age](#) in English. Quick guide translated and accessible versions are available to order at [Home - Health Publications](#).
- [Vaccinations for children aged 18 months](#) in English.
- The MMRV is featured in the new version of the [Pre-school vaccinations: guide to vaccinations from 2 to 5 years](#). Paper copies available in English now.
- [Childhood vaccination postcard January 2026](#) - This postcard features the immunisation schedule from 1 January 2026. Please order copies of this postcard to be given to parents and carers of children aged 0-5 years of age.
- [MMRV vaccination](#) guides and posters for parents and carers.
- Further information on the [Measles, mumps, rubella and varicella \(MMRV\) vaccination programme](#)
- More information on the [Routine childhood immunisations from 1 January 2026](#)

Blogs

- [What to do if you think your child has measles and when to keep them off school - The Department for Education \(blog.gov.uk\)](#) (January 2024)
- [How the MMRV protects against 4 potentially serious illnesses, including measles and chickenpox – UK Health Security Agency](#) (December 2025)
- [What are the symptoms of measles and how can I best protect my child? – UK Health Security Agency](#) (March 2026)

Resources and print ready materials for children and adults born on or before 31 December 2019

- Think Measles patient leaflet - [Think Measles!](#)
- Think Measles poster for young people - Think measles: patient leaflet for young people - [Think measles: poster about measles in young people](#)
- [Measles: protect yourself, protect others](#)
- [Immunisations for young people](#) guide and leaflet. Paper copies available in English now.

About the UK Health Security Agency

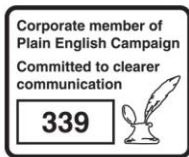
UK Health Security Agency (UKHSA) prevents, prepares for and responds to infectious diseases, and environmental hazards, to keep all our communities safe, save lives and protect livelihoods. We provide scientific and operational leadership, working with local, national and international partners to protect the public's health and build the nation's health security capability.

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