

Policy Statement

This policy acts to ensure that our education and care service is committed to providing a safe and healthy environment for all children, staff and any other persons attending the service by:

- Responding to the needs of the child or adult who presents with symptoms of an infectious disease or infestation while attending the service
- Complying with current exclusion schedules and guidelines set by the Public Health Unit
- Providing up to date information and resources for families and staff regarding protection of all children from infectious diseases
- Ensuring Educators, staff, children and families are familiar with the health and hygiene procedures to reduce the spread of infectious diseases

Explanation

Children are often infectious before symptoms appear. Therefore, it is important for Educators to operate with good hygiene practices at all times. Excluding sick children, Educators and staff is one of the most important ways, together with good hygiene and immunisation of limiting the spread of infection within the service. The spread of certain infectious diseases can be reduced by excluding a person who is known to be infectious from contact with others who are at risk of catching the infection.

It is important that Educators and staff act appropriately, and with sensitivity when dealing with a child and family where there has been an outbreak of an infectious disease.

Educators, Coordinators, Staff and parents/guardians need to be informed about the range of infectious diseases that are common in early childhood settings. This information is contained in the Exclusion from Care Guideline from Staying Healthy in Childcare, which is attached to this policy.

Goals

The ways that children interact with each other and with adults in education and care services means that diseases can quickly spread in a variety of ways. Whilst it is not possible to prevent the spread of all infections and diseases, minimising the risk is enhanced through:

- Effective hand hygiene
- Regular cleaning and maintenance of furniture and equipment
- Exclusion of ill children, Educators and other staff
- Immunisation

Policy Created
February 2016

Policy Last Updated
September 2023

Policy Review Date
February 2025

Strategies

Effective Hygiene

Our service will maintain and promote effective hygiene practices including:

- Correct handwashing techniques
- Using standard precautions when handling blood, all body fluids, secretions and excretions, dried blood and other body substances
- Cleaning toys and other items that children are likely to put into their mouths, after use
- Raking sandpits often and covering securely when not in use
- Disposing of soiled items in a container that is inaccessible to children
- Washing rubbish bins and nappy buckets regularly
- Actively promoting handwashing and other hygiene practices with children and families

Exclusion of Children, Educators and Other Staff

Infectious Diseases

In order to prevent the spread of infectious diseases through interpersonal contact, our service will adhere to the exclusion period table, published by the National Health and Medical Research Council

Fever

In children a temperature over 38C indicates a fever. A fever is usually caused by an infection somewhere in the body. Some types of infections that lead to a fever include:

- Viral (caused by a virus) – such as a cold, flu or gastroenteritis
- Bacterial (caused by bacteria) such as ear infections, pneumonia

In order to prevent the spread of infection and ensure wellbeing, children with a temperature above 38C will be excluded from the service

Immunisation

Our services practice is guided by our state's department of health in relation to child Immunisations. We will share resources and information from government bodies and recognised authorities to support families access information regarding Immunisations.

Exclusion Periods

The Public Health Unit will be advised as soon as the service is aware that a child or Educator has contracted a vaccine preventable disease and any directions will be followed accordingly.

Any child or Educator that is not fully immunized maybe excluded for a period of time if there is a case of a vaccine preventable disease at the service, or if the child or Educator

has been in contact with someone outside the service who has a vaccine preventable disease. We will consider the Exclusion Periods recommended by the National Health and Medical Research Council and act on any directions provided by the Public Health Unit.

It is the responsibility of families to inform the service that their child has come into contact with someone with a vaccine preventable or infectious disease.

Roles and Responsibilities

Approved Provider

- Ensure that where there is an occurrence of an infectious disease at the service, reasonable steps are taken to prevent the spread of that infectious disease
- Ensure that where there is an occurrence of an infectious disease at the service, a parent/guardian or authorised emergency contact of each child at the service is notified as soon as is practicable
- Ensure that information from the Public Health Unit about the recommended minimum exclusion periods is displayed at the service and is adhered to in the event of an outbreak
- Ensure that the parent/guardian and Public Health Unit are notified as soon as possible after being made aware that an enrolled child:
 - Has a vaccine preventable disease or
 - Is reasonably suspected of having come into contact with a person who has a vaccine preventable disease, and the enrolled child has no evidence of immunisation against or immunity by infection from that disease
- Ensure that any directions provided by the Public Health Unit are followed regarding the possible exclusions of a child or Educator who is not immunised against a vaccine preventable disease
- Report any occurrence of an immune preventable disease to the Department of Health Infectious Diseases Unit
- Report any incidences of an outbreak of an infectious illness to the department of Public Health Unit in Goulburn (02) 4824 1837
- Ensure that appropriate and current information and resources are provided to staff and parents/guardian regarding the identification and management of infectious diseases and viruses
- Provide information and resources to Educators on how to prevent the transmission of infectious diseases
- Keep informed about current legislation, information, research and best practice
- Ensure that any changes to the exclusion table or immunisation schedule are communicated to staff and parents/guardians in a timely manner

Nominated Supervisor/Coordinator

- Raise concerns with the Approved Provider if any circumstances arise that may pose a risk to a child's health, safety and wellbeing are identified, including cultural, environmental and operational risks
- Model safe hygiene practices to Educators and children where possible
- Ensure practices are implemented that aim to prevent the spread of infectious diseases
- Contact the parents/guardians of a child suspected of suffering from an infectious or vaccine preventable disease and requesting the child be collected as soon as possible
- Notify a parent/guardian or authorised emergency contact person when a symptom of an excludable infectious illness or disease has been observed
- Establish good hygiene and infection control procedures and ensure that they are adhered to by everyone at the service
- Ensure the exclusion requirements for infectious diseases are adhered to as per the recommended minimum exclusion periods, notifying the Approved Provider and parents/guardians of any outbreak of infectious disease at the service, and displaying the information in a prominent position
- Advise parents/guardians on enrolment that the recommended minimum exclusion periods will be observe in regard to the outbreak of any infectious diseases
- Advise the parents/guardians of a child who is not fully immunised on enrolment that they may be required to keep their child at home when an infectious disease is diagnosed at the service, dependant on directions form the Public Health Unit
- Request that parents/guardians notify the service if their child has or is suspected of having an infectious disease
- Provide information and resources to families to assist in the identification and management of infectious diseases
- Maintain confidentiality at all times
- Ensure that an "Incident, Injury, Trauma and Illness" record is completed as soon as practicable or no later than 24 hours of the illness occurring

Educators

- Raise concerns with the Approved Provider if any circumstances arise that may pose a risk to a child's health, safety and wellbeing are identified, including cultural, environmental and operational risks
- Implement good hygiene practices that aim to prevent the spread of infectious diseases, including daily cleaning
- Ensure that handwashing by all attending the service is regularly practised

- Ensure that they protect themselves from infections that are vaccine preventable or that may be contracted due to poor hygiene practices
- Seek advice on health matters including immunisation
- Exclude children from care that are sick or have an infectious disease
- Complete the Accident/Illness/Trauma/Incident Form for any child/ren that have been sent home from care
- Record any illness in the Illness/Absence Record for any illness that occurred whilst the child was in care, or if the child was kept at home due to illness
- In the event of an outbreak take reasonable steps to ensure the further spread of the infection is minimised through the implementation of additional hygiene and cleaning practices
- Notify parents of the outbreak of an infectious disease as soon as is practicable
- Ensure that any children that are suspected of having an infectious illness are responded to and their health and emotional needs supported at all times
- Implement appropriate health and safety procedures when tending to ill children
- Ensure that families are aware of their need to collect their children as soon as practicable to ensure the child's comfort
- Maintain their own immunisation status and advise the Approved Provider/Nominated Supervisor of any updates to their immunisation status
- Provide varied opportunities for children to engage in hygiene practices, including routine opportunities and intentional practices
- Observe signs and symptoms of children who may appear unwell and inform the Nominated Supervisor
- Provide access to information and resources for parents/guardians to assist in the identification and management of infectious diseases
- Monitor any symptoms in children that may indicate the presence of an infectious disease
- Maintain confidentiality at all times

LINKS TO:

- **Education & Care Services National Law**
Section 167, 172, 174
- **Education & Care Services National Regulations**
85, 86, 87, 88, 103, 162, 168(2)(c), 169, 170, 171, 172, 173, 175
- **National Quality Standards/Elements:**
2.1, 6.1, 6.2
- **Child Safe Standards**
1, 2, 3,4, 5, 6,7, 8, 9, 10

Families

- Keep children home from care if they are sick or have had an outbreak of an infectious disease
- Promptly pick up a sick or infectious child that has become ill whilst in care
- Provide a Doctor's Certificate for their child if requested by the service before returning to care
- Notify the Service if their child has been diagnosed with an immune preventable disease e.g. whooping cough, measles or rubella

- Inform the service if their child has an infectious disease or has been in contact with a person who has an infectious disease
- Communicate with the service about their child's health and wellbeing
- Notify the service if their child is being tested for an infectious disease
- Provide immunisation documentation upon enrolment and as immunisations are updated
- If directed by the Public Health Unit, keep their children at home when an infectious disease has been diagnosed at the service and their child is not fully immunised against that infectious disease

Continual Monitoring and Improvement

Continual improvement and monitoring will occur in the following ways:

- Incidental and planned consultation with families
- Approved Provider and Coordinators accessing current relevant information
- Approved Provider, Coordinators and Educators accessing current and relevant training
- Internal evaluation of incidences and the improvement of systems

SOURCES

- Education and Care Services National Regulations - December 2021
- Education and Care Services National Law - January 2022
- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations - October 2017
- Guide to the National Quality Standard - January 2020
- Implementing the Child Safe Standards: A Guide for Early Education and Outside School Hours Care Services, NSW Department of Education, 2021
- A Guide to the Child Safe Standards, NSW Office of the Children's Guardian, 2020
- ACECQA – FDC Approved Provider compliance responsibilities – October 2017
- Be You
- My Time Our Place: Framework for School Age Care in Australia
- ECA Code of Ethics
- United Nations Convention on the Rights of the Child
- Occupational Health and Safety Act 2000 and Regulations 2001 (NSW)
- Public Health Act 1991 (NSW)
- Staying Healthy: Preventing Infectious Diseases in Early Childhood Education and Care Services, National Health and Medical Research Council (NHMRC), 5th Edition 2012

LINKS TO OTHER POLICIES:

- Administration of First Aid
- Child-Safe Environment
- Dealing with Medical Conditions
- Delivery & Collection of Children
- Enrolment & Orientation
- Governance & Management
- Incident, Injury, Trauma & Illness
- Nutrition & Safe Food Handling
- Water Safety

Recommended minimum exclusion periods

ADAPTED FROM STAYING HEALTHY | 5TH EDITION | 2013

Condition	Exclusion of case	Exclusion of contacts*
Campylobacter infection	Exclude until there has not been a loose bowel motion for 24 hours [†]	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded
Cytomegalovirus (CMV) infection	Not excluded	Not excluded
Conjunctivitis	Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis	Not excluded
Cryptosporidium	Exclude until there has not been a loose bowel motion for 24 hours [†]	Not excluded
Diarrhoea (No organism identified)	Exclude until there has not been a loose bowel motion for 24 hours [†]	Not excluded
Fungal infections of the skin or nails (e.g. ringworm, tinea)	Exclude until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours [†]	Not excluded
Glandular fever (mononucleosis, Epstein Barr virus (EBV) infection)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
Haemophilus influenzae type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded. Contact a public health unit for specialist advice
Head lice (pediculosis)	Not excluded if effective treatment begins before the next day at the education and care service. The child does not need to be sent home immediately if head lice are detected	Not excluded
Hepatitis A	Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice	Not excluded. Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes simplex (cold sores, fever blisters)	Not excluded if the person can maintain hygiene practices to minimise the risk of transmission. If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry. Sores should be covered with a dressing, where possible	Not excluded
Human immunodeficiency virus (HIV)	Not excluded. If the person is severely immune compromised, they will be vulnerable to other people's illnesses	Not excluded
Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)	Not excluded	Not excluded
Hydatid disease	Not excluded	Not excluded
Impetigo	Exclude until appropriate antibiotic treatment has started. Any sores on exposed skin should be covered with a watertight dressing	Not excluded
Influenza and influenza-like illnesses	Exclude until person is well	Not excluded
Listeriosis	Not excluded	Not excluded
Measles	Exclude for 4 days after the onset of the rash	Immunised and immune contacts are not excluded For non-immunised contacts, contact a public health unit for specialist advice. All immunocompromised children should be excluded until 14 days after the appearance of the rash in the last case
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case
Molluscum contagiosum	Not excluded	Not excluded
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner)	Not excluded
Norovirus	Exclude until there has not been a loose bowel motion or vomiting for 48 hours	Not excluded
Pertussis (whooping cough)	Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing	Contact a public health unit for specialist advice about excluding non-vaccinated and incompletely vaccinated contacts, or antibiotics
Pneumococcal disease	Exclude until person is well	Not excluded
Roseola	Not excluded	Not excluded
Ross River virus	Not excluded	Not excluded
Rotavirus infection	Exclude until there has not been a loose bowel motion or vomiting for 24 hours [†]	Not excluded
Rubella (German measles)	Exclude until fully recovered or for at least 4 days after the onset of the rash	Not excluded
Salmonellosis	Exclude until there has not been a loose bowel motion for 24 hours [†]	Not excluded
Scabies	Exclude until the day after starting appropriate treatment	Not excluded
Shigellosis	Exclude until there has not been a loose bowel motion for 24 hours [†]	Not excluded
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Toxoplasmosis	Not excluded	Not excluded
Tuberculosis (TB)	Exclude until medical certificate is produced from the appropriate health authority	Not excluded. Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Varicella (chickenpox)	Exclude until all blisters have dried—this is usually at least 5 days after the rash first appeared in non-immunised children, and less in immunised children	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise, not excluded
Viral gastroenteritis (viral diarrhoea)	Exclude until there has not been a loose bowel motion for 24 hours [†]	Not excluded
Worms	Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment has occurred	Not excluded

* The definition of 'contacts' will vary according to the disease—refer to the specific fact sheet for more information.

[†] If the cause is unknown, possible exclusion for 48 hours until cause is identified. However, educators and other staff who have a food handling role should always be excluded until there has not been a loose bowel motion for 48 hours.

Adapted from SA Health Communicable Disease Control Branch: <http://www.dh.sa.gov.au/pubs/branches/branch-communicable.htm>. Note that exclusion advice is consistent with Series of National Guidelines (SoNGs) where available.

Staying Healthy. Preventing infectious diseases in early childhood education and care services | 5th Edition | Printed June 2013 | NHMRC Ref. CH55e

