Infectious Diseases Policy

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY				
2.1.1	Wellbeing and	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each		
	comfort	child's needs for sleep, rest and relaxation.		
2.1.2	Health practices and	Effective illness and injury management and hygiene practices are promoted and implemented.		
	procedures	Effective niness and injury management and hygiene practices are promoted and implemented.		
2.2	Safety	Each child is protected.		

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS		
77	Health, hygiene and safe food practices	
85	Incident, injury, trauma and illness policies and procedures	
86	Notification to parents of incident, injury, trauma and illness	
87	Incident, injury, trauma and illness record	
88	Infectious diseases	
90	Medical conditions policy	
162	Health information to be kept in enrolment record	

RATIONAL

The way 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:

- o effective hand hygiene
- o exclusion of ill children, educators and other staff
- o immunisation

Our Service has a duty of care to ensure that children families, educators, and visitors of the Service are provided with a high level of protection during the hours of the Service's operation.

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.

AIM

KAZ Early Learning Centre will minimise the spread of potentially infectious diseases between children, and the Service, by excluding children, educators/staff, and visitors, who may have an infectious disease or are too ill to attend the Service.

WHO IS AFFECTED BY THIS POLICY?

Child

Parents

Family

Educator

Staff
Management
Visitors
Volunteers

IMPLEMENTATION

To minimise the spread of Infectious disease between children, educators/staff and visitors, KAZ Early Learning Centre will:

- Exclude from care and notify the local Public Health Unit and provide details of any known or suspected persons with any of the following diseases:
 - Diphtheria
 - Haemophilus Influenzae type b (Hib)
 - Measles
 - Meningococcal disease
 - Mumps
 - Pertussis (whooping cough)
 - Poliomyelitis
 - Rubella (German measles)
 - Tetanus

KAZ Early Learning Centre will also seek advice from their local Public Health Unit when they suspect an infectious disease outbreak is affecting the service such as outbreaks of gastrointestinal or respiratory illness.

- Exclude a child or educator/staff member with any of the following symptoms which might indicate they have a potentially serious illness:
 - vomiting,
 - o rash, especially if purplish or hemorrhaging spots (possibly meningococcal) or blistering (possibly staphylococcal),
 - headache,
 - stiffness of the neck,
 - aversion to light (photophobia),
 - o drowsiness or any unusual state of consciousness or behaviour,
 - o convulsion or epileptic seizure.
 - o severe pain anywhere (including toothache),
 - o swelling of the lips, mouth, tongue, throat, neck or airways,
 - o hives.
 - asthma, wheezing, or any difficulty breathing,
- Exclude a child or educator /staff member with any of the following symptoms which might indicate they have an infectious illness:
 - diarrhea,
 - generalised rash,
 - enlarged or tender lymph glands,
 - severe cough with fever,
 - o head lice, nits, scabies, ringworm, impetigo, or mouth ulcers not yet treated,

- o mouth ulcers due to herpes simplex virus or coxsackie virus,
- o infection or yellow or green discharge of the eyes or ears,
- o if any other infectious disease is suspected.
- Exclude children, educators/staff, volunteers or visitors who have infectious diseases other than listed above in accordance with the NHMRC Recommended Minimum periods of exclusion.
- Ensure all educators/staff and persons working at the Service conform to all infectious disease policies.
- Make sure the child is comfortable, and is supervised by an educator/staff member, contact with other children will be avoided.
- Contact the child's parents/guardians or, if they are unable to be contacted, an authorised nominee for emergencies as listed on the enrolment form. Inform the parents/guardian or authorised nominee of the child's condition, or suspected condition, and ask that the child be picked up from the Service as soon as possible.
- Ensure all bedding, towels, clothing, etc., which has been used by the child is disinfected these articles should be washed separately and, if possible, aired in the sun to dry.
- Ensure all contact toys are separated and disinfected.
- Ensure all eating utensils are separated and sterilised.
- Information will be available in relevant community languages when required.
- Inform all families of the presence of an infectious disease in the Service.
- The Service will ensure confidentially of any personal or health related information obtained by the Service, in relation to any children, educators/staff, children's parents/guardian and families.
- If a child or an educator/staff member has been unable to attend the Service because of
 an infectious illness, when the child or an educator/staff member has fully recovered the
 family, or an educator/staff member must obtain a certificate from their doctor which
 specifically states the child or an educator/staff member is not infectious and is able to
 attend care, or return to work.

Responsibilities of the Approved Provider

- Ensure the service operates in line with the Children (Education and Care Services) National Law (NSW) 2010 and Education and Care Services National Regulations.
- Ensure children are protected from harm by ensuring relevant policies and procedures are followed regarding health and safety within the Service.
- Collect, maintain, and appropriately store the required enrolment documents and enrolment information, including health and immunisation records of children in the Service.
- Ensuring 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 (National Regulation 88(1)).
- Ensuring 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 of the occurrence as soon as is practicable.

- As soon as practicable, a family member or authorised emergency contact of each child being cared for must be notified of the occurrence (National Regulation 88(2)).
- Ensuring that information from the Department of Health about the recommended minimum exclusion periods is displayed at the service, and is adhered to in the event of an outbreak of an infectious disease.
- Notifying the Regulatory Authority and parent/guardian within 24 hours of a serious incident including when a child becomes ill at the service or medical attention is sought while the child is attending the service (National Regulation 86).
- Ensuring that appropriate and current information and resources are provided to staff and parents/guardians regarding the identification and management of infectious diseases, blood-borne viruses and infestations.
- Ensure the medical conditions policy is given to families.
- Keeping informed about current legislation, information, research and best practice.
- Ensuring that any changes to the exclusion table or immunisation schedule are communicated to families and staff immediately.

Responsibilities of the Nominated Supervisor

- Contacting the parents/guardians of a child suspected of suffering from an infectious
 or vaccine- preventable disease, or of a child not immunised against a vaccinepreventable disease that has been detected at the service, and requesting the child
 be collected as soon as possible.
- Notifying a parent/guardian or authorised emergency contact person when a symptom of an excludable infectious illness or disease has been observed.
- Ensuring that a minimum of one staff with current approved first aid qualifications is in attendance and immediately available at all times the service is in operation (National Regulation 136).
- Establishing good hygiene and infection control procedures and ensuring that they are adhered to by everyone at the service.
- Ensuring 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 this information in a prominent position.
- Requesting that parents/guardians notify the service if their child has, or is suspected of having, an infectious disease or infestation.
- Providing information and resources to families to assist in the identification and management of infectious diseases and infestations.
- Maintaining confidentiality at all times.
- Provide relevant sourced materials to families.
- Ensuring that an "Incident, Injury, Trauma and Illness" record is completed as soon as practicable or no later than 24 hours of the illness occurring (National Regulation 86).
- A hygienic environment is maintained.
- Children do not attend the Service if they are unwell. If a child has been sick they must be well for 24hrs before returning to the Service.
- Toys and equipment will be washed with detergent and air-dryed.

- Floor surfaces will be cleaned on a daily basis after each meal and at the end of each day.
- Toilets/bathrooms will be cleaned in the middle of the day, the end of the day and whenever needed throughout the day.
- Pregnant staff do not change nappies or assist in toileting or cleaning up toileting accidents to prevent unexpected cross contamination and risk to pregnancy.

Responsibilities of the Educators

- 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 the need to collect their children as soon as practicable to ensure the child's comfort.
- Provide varied opportunities for children to engage in hygiene practices, including routine opportunities, and intentional practice.
- Observing signs and symptoms of children who may appear unwell and informing the Nominated Supervisor.
- Providing access to information and resources for parents/guardians to assist in the identification and management of infectious diseases and infestations.
- Monitoring any symptoms in children that may indicate the presence of an infectious disease.
- Maintaining confidentiality at all times.

Responsibilities of the Families

- Providing Immunisation documentation upon enrolment and as the child receives subsequent immunisations.
- Keep their children at home if they are unwell or have an excludable infectious disease.
- Where a child has an acceptable exemption, keep the children at home when an
 infectious disease has been confirmed at the service and the child is not fully
 immunised against that infectious disease, until there are no more occurrences of
 that disease and the exclusion period has ceased.
- Inform the service if their child has an infectious disease or has been in contact with a person who has an infectious disease.

Immunisation Requirements

From the 1st of January 2018 all children attending a centre-based service must be up to date with their vaccinations and provide an up to date AIR Immunisation History Statement provided through Medicare on the MyGov account to the service upon enrolment or when immunisations have been updated. Should a child not be up to date then the family will not receive any benefit from the government. Enrolling children who are not immunised could result in a financial penalty to the Approved Provider.

Children who cannot be fully vaccinated due to a medical condition or who are on a recognised catch-up schedule will still be able to be enrolled upon presentation of the appropriate form signed by a medical practitioner.

To find out more information visit NSW Health website in the link below where they offer a toolkit with relevant information regarding the requirements for immunisation.

There are no current requirements for educators to receive vaccinations, but it is highly recommended due to the risks.

If a child has not been immunised, they may be excluded from care during outbreaks of some infectious diseases, even if their child is well, depending on advice from the Public Health Unit.

The Approved Provider/Nominated Supervisor will ensure that this policy is maintained and implemented at all times.

Related Statutory Obligations & Considerations

Australian Children's Education and Care Quality Authority (ACECQA)

http://www.acecqa.gov.au/

Australasian Society of Clinical Immunology and Allergy eTraining

https://etraining.allergy.org.au/login/index.php

Children (Education and Care Services) National Law (NSW) No 104a

https://www.legislation.nsw.gov.au/#/view/act/2010/104a/full

Department of Education

http://www.dec.nsw.gov.au/what-we-offer/regulation-and-accreditation/early-childhood-education-care

Early Years Learning Framework (EYLF)

http://files.acecqa.gov.au/files/National-Quality-Framework-Resources-

 $Kit/belonging_being_and_becoming_the_early_years_learning_framework_for_australia.pdf$

Education and Care Services National Regulation

http://www.legislation.nsw.gov.au/#/view/regulation/2011/653

Department of Health

http://www.health.nsw.gov.au/Infectious/Pages/default.aspx,

http://www.health.nsw.gov.au/Infectious/controlguideline/Pages/default.aspx

Department of Health Immunisation Toolkit

http://www.health.nsw.gov.au/immunisation/Publications/immunisation-enrolment-toolkit.pdf

National Quality Framework (NQF)

http://acecqa.gov.au/national-quality-framework/

National Health and Medical Research Council (NHMRC) -

https://www.nhmrc.gov.au/_files_nhmrc/publications/attachments/ch55e_exclusion_period_poster_130701.pdf

National Health and Medical Research Council (NHMRC)

https://www.nhmrc.gov.au/guidelines-publications/ch55

Occupational Health and Safety Act 2000

http://www.legislation.nsw.gov.au/#/view/act/2000/40/whole

Work Health and Safety Act 2011

Related Telephone Numbers

- Early Childhood Directorate 1800 619 113
- Public Health Unit- 1300 066 055
- Emergency Services 000

REVIEW

This policy will be updated to ensure compliance with all relevant legal requirements every year. Appropriate consultation of all stakeholders (including staff and families) will be conducted on a timely basis. In accordance with Regulation 172 of the *Education and Care Services National Regulation*, families of children enrolled will be notified at least 14 days and their input considered prior to any amendment of policies and procedures that have any impact on their children or family.

Date Issued	October 2019	Review Date	October 2020
Amendment	Exclusion table and web links updated		

Family, Educator and Staff Comments:		

Recommended minimum exclusion periods ADAPTED FROM STAN

ADAPTED FROM STAYING HEALTHY | 5TH EDITION | 2013

Condition	Exclusion of case	Exclusion of contacts ^a
Campylobacter infection	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded
ytomegalovirus (CMV) infection	Not excluded	Not excluded
onjunctivitis	Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non- infectious conjunctivitis	Not excluded
ryptosporidium	Exclude until there has not been a loose bowel motion for 24 hours*	Not excluded
iarrhoea lo organism identified)	Exclude until there has not been a loose bowel motion for 24 hours*	Not excluded
ungal infections of the skin or nails e.g. ringworm, tineal	Exclude until the day after starting appropriate antifungal treatment	Not excluded
iardiasis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
landular fever (mononucleosis, pstein Barr virus [EBV] infection)	Not excluded	Not excluded
and, foot and mouth disease	Exclude until all blisters have dried	Not excluded
aemophilus 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
ead 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
epatitis 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
epatitis B	Not excluded	Not excluded
lepatitis C	Not excluded	Not excluded
ferpes 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 youngt, they should be excluded until the sores are dry. Sores should be covered with a dressing, where possible	Not excluded
luman immunodeficiency virus (HIV)	Not excluded. If the person is severely immune compromised, they will be vulnerable to other people's illnesses	Not excluded
fuman parvovirus B19 (fifth disease, erythema nfectiosum, slapped cheek syndrome)	Not excluded	Not excluded
fydatid disease mpetigo	Not excluded Exclude until appropriate antibiotic treatment has started. Any sores on exposed skin	Not excluded Not excluded
	should be covered with a watertight dressing	
nfluenza and influenza-like illnesses	Exclude until person is well	Not excluded
isteriosis	Not excluded	Not excluded
Measles	Exclude for 4 days after the enset 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
lorovirus	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
neumococcal disease	Exclude until person is well	Not excluded
Roseola	Not excluded	Not excluded
loss 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
Bubella (German measles)	Exclude until fully recovered or for at least 4 days after the onset of the rash	Not excluded
almonellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
cabies	Exclude until the day after starting appropriate treatment	Not excluded
Phigellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	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 Tuberculosis (TB)	Not excluded Exclude until medical certificate is produced from the appropriate health authority	Not excluded Not excluded. Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
/aricella (chickenpox)	Exclude until all bilsters have difed—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, leukaemial or receiving dhemotherapy should be excluded for their own protection. Otherwise, not excluded.
Aral gastroenteritis (viral diamhoea) Norms	Exclude until there has not been a loose bowel motion for 24 hours ⁶ Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment	Not excluded Not excluded
STAVING Healthy Staving Healthy Prior of American American Staving Healthy Sta	has occurred * The definition of 'contacts' will vary according to the disease—refer to the specific fact si ! If the cause is unknown, possible exclusion for 48hours, until cause is identified. However, has not been a loose bewell motion for 48 hours.	theer for more information. r, educators and other staff who have a food handling role should always be excluded until the staff who have a food handling role should always be excluded until the staff which is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent with Sn to the staff exclusion advice is consistent exclusion.
4	Australian Government National Health and Medical Research Council	N/H/M/R/

Note: The NHMRC recommends that children who are physically unwell should be excluded from attending school, pre-school and child care centres. This list should be read in conjunction with the National Health and Medical Research Council's publication: Staying Healthy in Child Care. 5th edition, Canberra.