

Dealing with Infectious Diseases

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY

Policy Statement

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; and
- ¬ providing up-to-date information and resources for families and staff regarding protection of all children from infectious diseases and blood-borne viruses, management of infestations and immunisation programs.

Goals / What are we going to do?

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:

- □ effective hand hygiene;
- educating the children in hygiene practices;
- exclusion of ill children, educators and other staff; and

(Staying Healthy; Preventing infectious diseases in early childhood education and care services 5th edition 2015)

Strategies / How will it be done?

Effective Hygiene

Our service will maintain and promote effective hygiene practices, including:

- □ correct handwashing technique;
- □ using standard precautions when handling blood, all body fluids, secretions and excretions, dried blood and other body substances, including the use of disposable gloves.
- □ cleaning toys and mouthed items, after use;

- ¬ raking sandpits often and/or securely covering them when not in use;

- ⊲ actively promoting handwashing and other hygiene practices with children and families;
- ¬ separate ill children from others and keep under supervision until they can be picked up; and

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- □ ensure that disposable medical equipment must be discarded after one use. All other medical equipment must be cleaned, disinfected or sterilised after each use in accordance with manufacturers instructions.

Exclusion of III 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 Department of Health.

www.nhmrc.gov.au

Fever

In children, a temperature over 38°C indicates a fever.

A fever is usually caused by an infection somewhere in the body. Some types of infections that lead to fever include:

- ¬ viral (caused by a virus) around nine out of ten children with a fever will have a viral illness, such as cold, flu or gastroenteritis.

www.health.vic.gov.au/edfactsheets/downloads/fever-in-children.pdf http://raisingchildren.net.au/articles/fever_a.html

In order to prevent the spread of infection and ensure wellbeing, children with a temperature above 37.5°C will be excluded from the service. The child's temperature will be determined by taking it twice, with a 10 minute lapse between each reading.

Immunisation

The NSW Government Immunisation Toolkit for early childhood education and care services guides our practice and provides resources and information to support families access information regarding immunisation. Under the Public Health Act 2010, and the Bill passed by the NSW Parliament to amend this act, parents who wish to enrol their child are required to provide at the time of enrolment:

¬ An AIR Immunisation History Statement which shows that the child is up to date with their scheduled vaccinations,

or

¬ An AIR Immunisation History Form on which the immunization provider has certified that the child is on a recognized catch up schedule (temporary for 6 months only)

Each child's immunisation status will be recorded on the services immunisation register at the time of enrolment.

Under the Public Health Act, a 12-week temporary exemption for children evacuated during a state of emergency and those in emergency out of home care is extended to all children in out of home care and Aboriginal and Torres Strait Islander children.

The Admin Officer will check that an updated approved immunisation form has been provided for each child after each immunisation milestone (6 weeks, 4 months, 6 months, 12 months, 18 months and 4 years of age, as appropriate) and record the details on the immunisation register. This will be retained for 3 years from the date on which each enrolled child ceases to attend the service, and a copy of a child's immunisation documentation will be provided to another service in the event that the child transfers to that service (upon request).

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 immunised may be 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 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

Role	Authority/Responsibility For
Approved Provider	Ensure the service operates in line with the Education and Care Services National Law and National Regulations 2011 including:
	Ensuring that information from the Public Health Unit about the recommended minimum exclusion periods is displayed at the service, is available to all stakeholders and is adhered to in the event of an outbreak of an infectious disease (as designated by the Department of Health.
	 ✓ Ensuring that the parent/guardian and Public Health Unit are informed within 24 hours of becoming aware that an enrolled child is suffering from: a) Pertussis, or
	b) Poliomyelitis, or c) Measles, or d) Mumps, or
	e) Rubella, or f) Meningococcal C, or g) Diptheria, or
	h) Haemophilus influenza Type b (Hib), or i) Tetanus
	□ Ensuring that any directions provided by Public Health Unit are followed regarding the possible exclusion of a child or educator who is not immunised against a vaccine preventable disease.

 Notifying the Regulatory Authority 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. 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. communicated to staff and parents/guardians in a timely manner. Nominated or vaccine- preventable disease, and requesting the child be collected as soon as Supervisor possible. 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. Establishing good hygiene and infection control procedures, and ensuring that they are adhered to by everyone at the service. 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. ¬ Advising parents/guardians on enrolment that the recommended minimum exclusion periods will be observed in regard to the outbreak of any infectious diseases or infestations. Advising 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, dependent on directions from the Public Health Unit. 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. → Providing relevant sourced materials to families. practicable or no later than 24 hours of the illness occurring. Early Childhood

Educators

- □ Implementing appropriate health and safety procedures, when tending to ill children.

	✓ Maintaining their own immunisation status and advising the Approved Provider/Nominated Supervisor of any updates to their immunisation status.
	□ Providing 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.
Families	□ Providing Immunisation documentation upon enrolment and as administered.
	□ Informing the service if their child has an infectious disease or has been in contact with a person who has an infectious disease.

Monitoring, Evaluation and Review

This policy will be monitored to ensure compliance with legislative requirements and unless deemed necessary through the identification of practice gaps, the service will review this Policy every two years.

Families and staff are essential stakeholders in the policy review process and will be given opportunity and encouragement to be actively involved.

In accordance with R. 172 of the Education and Care Services National Regulations, the service will ensure that families of children enrolled at the service are notified at least 14 days before making any change to a policy or procedure that may have significant impact on the provision of education and care to any child enrolled at the service; a family's ability to utilise the service; the fees charged or the way in which fees are collected.

RELATED GUIDELINES, STANDARDS, FRAMEWORKS

- National Quality Standard, Quality Area 2: Children's Health and Safety − Standards 2.1, 2.1.1, 2.1.2, 2.2
- ¬ National Quality Standard, Quality Area 6: Collaborative Partnerships with Families and Communities − Standard 6.1, 6.2

RESOURCES/USEFUL LINKS

- ◄ Immunisation Toolkit www.health.nsw.gov.au/immunisation/Publications/ immunisation-enrolment-toolkit.pdf
- ¬ NSW Immunisation Schedule 1 July 2018 www.health.nsw.gov.au/ immunisation/Pages/schedule-changes.aspx
- ¬ Immunisation www.humanservices.gov.au/individuals/enablers/ immunisation-requirements/35396
- ¬ Vaccination Q&A www.health.nsw.gov.au/immunisation/pages/provider qa.aspx
- Staying Healthy: Preventing infectious diseases in early childhood education and care services 5th edition July 2015 www.nhmrc.gov.au/sites/default/files/documents/attachments/ch55- staying-healthy.pdf
- ¬ Exclusion period for infectious diseases table

 ¬ www.nhmrc.gov.au/file/5111/download?token=sqK1YrXf
- ⊲ AIR-Immunisation History Statement Australian Immunisation Register
- ¬ Public Health Amendment (Vaccination of Children Attending Child Care Facilities) Bill 2013; Public Health regulation 2012; Public Health Act 2010 Parliament of NSW www.parliament.nsw.gov.au/bills/Pages/bill-details. aspx?pk=737
- ¬ Public health and Wellbeing Amendment (No Jab, no Play) Act, 2015 www.legislation.vic.gov.au/Domino/Web_Notes/LDMS/PubStatbook.nsf/51dea
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