

Infectious Diseases Policy

To be read with -
Immunisation and Disease Prevention Policy

NQS

QA2	2.1.1	Each child's health needs are supported.
	2.1.4	Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.

National Regulations

Regs	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

Aim

Immunisation is a simple, safe and effective way of protecting individuals against harmful diseases before they come into contact with them in the community. Immunisation not only protects individuals, but also others in the community, by reducing the spread of disease.

Related Policies

Educator and Management Policy

Enrolment Policy

Food Nutrition and Beverage Policy

Health, Hygiene and Safe Food Policy

Incident, Injury, Trauma and Illness Policy

Immunisation Policy

Medical Conditions Policy

Privacy and Confidentiality Policy

Who is affected by this policy?

Child

Parents

Family

Educators

Management

Visitors

Volunteers

Implementation

- The service will use the attached Recommended Minimum Periods of Exclusion to exclude children and educators and inform parents of exclusion and non-exclusion periods for infectious diseases. We will minimise the spread of potential infectious diseases between children, other children and educators by excluding children who may have an infectious disease or are too ill to attend the service and facilitating the prevention and effective management of acute illness in children.
- Notification of the child's parents or nominated contacts will occur immediately of an infectious disease.
- The Nominated Supervisor is responsible for notifying the Department of Health of those infectious diseases detailed under Notifications and Exclusion Periods. This must occur within 24 hours.
- Children might be brought to care with symptoms or signs of illness or while in care suddenly develop an illness that has not been diagnosed by a doctor, and that might be potentially infectious or potentially life-threatening for the child. Symptoms may not clearly fit those listed in exclusion diseases making it difficult for the service to decide whether to accept or exclude the child from the service. If we suspect a child may have an infectious disease, we will exclude the child until we receive a medical certificate stating the child is not contagious and is okay to attend the Service.
- Many illnesses, while not fitting exclusion criteria, can transmit disease to other children in care, and can make a child too ill to participate in normal activities. All children who are unwell should not attend the Service and we will ask parents of children who are unwell to collect the child from our Service or to make alternative arrangements for their child's care.

If an infectious disease arises at the service we will respond to any symptoms in the following manner -

- Isolate the child from other children.
- Ensure the child is comfortable and appropriately supervised by educators.
- Contact the child's parents or nominated emergency contact. If the child's parents are unavailable we will contact the next nominated individual. We will inform the contact of the child's condition and ask for a parent or other authorised individual to pick the child up as quickly as possible. Any individual picking the child up from the service must be approved by the child's parents and be able to show identification.
- Ensure all bedding, towels and clothing which has been used by the child is disinfected. These items will be washed separately and if possible air dried in the sun.
- Ensure all toys used by the child are disinfected.
- Ensure all eating utensils used by the child are separated and sterilised.
- Provide information in the child's home languages to the best of our ability.
- Ensure confidentiality of any personal health related information obtained by the service and educators in relation to any child or their family.
- The Nominated Supervisor or another Responsible Person may require a child or staff member to provide a doctor's certificate on the first day back from an infectious illness stating they are okay to return to the Service.

Notifications and exclusion periods

As outlined in the Public Health and Wellbeing Regulations 2009 (Vic):

- parents must advise educators as soon as possible if a child has an infectious diseases or the child has been in contact with a person infected with an infectious disease. These diseases and the minimum periods of exclusion are listed in Schedule 7 and can be accessed on-line at www.legislation.vic.gov.au
- Approved providers, nominated supervisors must inform the parents and the Secretary of the Department of Health within 24 hours of forming the belief that a child is suffering from pertussis, poliomyelitis, measles, mumps, rubella or meningococcal C.
- Approved providers, nominated supervisors or family day care co-ordinators must not allow a child who has been infected or had contact with the diseases outlined in Schedule 7 to the Regulations to attend the service for the exclusion periods outlined in Schedule 7.

The diseases and exclusion periods outlined in the Schedule to the Public Health and Wellbeing Regulations 2009 are similar to the National Guidelines detailed below under “Recommended Periods of Exclusion”.

Infectious Diseases requiring Notification to the local Public Health Unit

Apart from the notifiable diseases outlined in the preceding section for children’s services, infectious diseases generally only require notification from doctors and laboratories. A quick guide for notifiable conditions in Victoria is available on-line at:

<http://docs.health.vic.gov.au/docs/doc/Quick-guide-for-notifiable-conditions-in-Victoria>

Immunisation and Educators

The National Health and Medical Research Council (NHMRC) recommend that educators should be immunised against -

- Hepatitis A.
- Measles-Mumps-Rubella (MMR).

Educators born during or since 1966 who do not have vaccination records of two doses of MMR, or do not have antibodies for rubella, require vaccination.

- Varicella if they have not previously been infected with chickenpox.
- Pertussis. An adult booster dose is especially important for those educators caring for the youngest children who are not fully vaccinated.
- Hepatitis B if caring for unimmunised children with intellectual disabilities (although the risk is low).

Our service will:

- regularly provide educators and staff with information about diseases that can be prevented by immunisation through in-service training sessions, fact sheets and the Staying Healthy in Childcare publication (found at http://www.decd.sa.gov.au/speced2/files/pages/chess/hsp/Pathways/Staying_healthy_in_child_c.pdf)
- regularly advise educators and staff that some infectious diseases may injure an unborn child if the mother is infected while pregnant through in-service training sessions, fact sheets and the Staying Healthy in Childcare publication. These infections include chickenpox, cytomegalovirus and rubella (German measles) .

- ask new employees to confirm in writing that we have provided this information during their induction.
- encourage all non-immune staff to be vaccinated.
- advise female educators / staff who are not fully immunised to consider doing so before getting pregnant.
- advise pregnant educators and staff to review the Staying Healthy in Childcare publication and consult their medical practitioner to consider the risks of continuing to work at the service.
- ensure pregnant educators and staff follow good infection control and hygiene procedures.

Recommended Minimum Periods of Exclusion

National Health and Medical Research Council .

Staying Healthy -Preventing Infectious Diseases in Early Childhood Education and Care Services 5th edition, Commonwealth of Australia 2012.

Children who are unwell should not attend the service.

The definition of 'contacts' will vary according to disease. Please refer to specific Fact Sheets in the Staying Healthy Publication for the definition of 'Contacts'.

Campylobacter

Exclude until there has not been a loose bowel motion for 24 hours.^b

Exclusion of Contacts - Not excluded.

Candidiasis ('Thrush)

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Chickenpox (Varicella)

Exclude until all blisters have dried. This is usually at least 5 days after the rash first appeared in unimmunised children and less in immunised children.

Exclusion of contacts - Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise not excluded.

CMV (Cytomegalovirus infection)

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Conjunctivitis

Exclude until discharge from the eyes has stopped unless a doctor has diagnosed non-infectious Conjunctivitis.

Exclusion of Contacts - Not excluded.

Cryptosporidium

Exclude until there has not been a loose bowel motion for 24 hours.^b

Exclusion of Contacts – Not excluded.

Diarrhoea (No organism identified)

Exclude until there has not been a loose bowel motion for 24 hours.^b

Exclusion of Contacts - Not excluded.

Fungal infections of the skin or nails (eg ringworm, tinea)

Exclude until the day after starting appropriate anti-fungal treatment.

Exclusion of Contacts - Not excluded.

German measles (See 'Rubella')

Giardiasis

Exclude until there has not been a loose bowel motion for 24 hours.^b

Exclusion of Contacts - Not excluded.

Glandular fever (Mononucleosis, EBV infection)

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Hand, foot and mouth disease

Exclude until all blisters have dried.

Exclusion of Contacts - Not excluded.

Haemophilus influenzae type b (Hib)

Exclude until the person has received appropriate antibiotic treatment for at least 4 days.

Exclusion of Contacts - Not excluded.

Head lice (Pediculosis)

Exclusion is NOT necessary if effective treatment begins before the next day at the Service.
(The child doesn't need to be sent home immediately if head lice are detected).
Exclusion of Contacts - Not excluded.

Hepatitis A

Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice.
Exclusion of Contacts - Not excluded. Contact a public health unit for specialist advice about treating or vaccinating children in the same room or group.

Hepatitis B

Exclusion is NOT necessary.
Exclusion of Contacts - Not excluded.

Hepatitis C

Exclusion is NOT necessary.
Exclusion of Contacts - Not excluded.

Herpes simplex (cold sores, fever blisters)

Exclusion is not necessary if the person is developmentally capable of maintaining hygiene practices to minimise the risk of transmission.

If the person is unable to comply with these practices they should be excluded until the sores are dry. Sores should be covered by a dressing where possible.
Exclusion of Contacts - Not excluded.

Human Immunodeficiency Virus (HIV/AIDS)

Exclusion is NOT necessary. If the person is severely immunocompromised, they will be vulnerable to other people's illnesses.
Exclusion of Contacts - Not excluded.

Human Parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)

Exclusion is NOT necessary.
Exclusion of Contacts - Not excluded.

Hydatid disease

Exclusion is NOT necessary.
Exclusion of Contacts - Not excluded.

Impetigo (school sores)

Exclude until appropriate antibiotic treatment has commenced. Any sores on exposed skin should be covered with a watertight dressing.

Exclusion of Contacts - Not excluded.

Influenza and influenza-like illnesses

Exclude until well.

Exclusion of Contacts - Not excluded.

Listeriosis

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Measles

Exclude for 4 days after the onset of the rash.

Exclusion of Contacts - 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 first day of appearance of rash in the last case.

Meningitis (viral)

Exclude until well.

Exclusion of Contacts - Not excluded.

Meningococcal infection

Exclude until appropriate antibiotic treatment has been completed.

Exclusion of Contacts - Not excluded. Contact a public health unit for specialist advice about antibiotics and /or vaccination for people who were in the same room.

Molluscum contagiosum

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Mumps

Exclude for 9 days or until swelling goes down (whichever is sooner).

Exclusion of Contacts - Not excluded.

Norovirus

Exclude until there has not been a loose bowel motion or vomiting for 48 hours.

Exclusion of Contacts - Not excluded.

Pertussis (See 'Whooping Cough')

Pneumococcal Disease

Exclusion until person is well.

Exclusion of Contacts - Not excluded.

Roseola

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Ross River virus

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Rotavirus infection

Children are to be excluded from the service until there has not been a loose bowel motion or vomiting for 24 hours.^b

Exclusion of Contacts - Not excluded.

Rubella (German measles)

Exclude until fully recovered or for at least four days after the onset of the rash.

Exclusion of Contacts - Not excluded.

Salmonellosis (Salmonella infection)

Exclude until there has not been a loose bowel motion for 24 hours.^b

Exclusion of Contacts - Not excluded.

Scabies

Exclude until the day after appropriate treatment has commenced.

Exclusion of Contacts - Not excluded.

Shigellosis

Exclude until there has not been a loose bowel motion for 24 hours. ^b

Exclusion of Contacts - Not excluded.

Streptococcal sore throat (including scarlet fever)

Exclude until the person has received antibiotic treatment for at least 24 hours and feels well.

Exclusion of Contacts - Not excluded.

Toxoplasmosis

Exclusion is NOT necessary.

Exclusion of Contacts - Not excluded.

Tuberculosis (TB)

Exclude until medical certificate is produced from an appropriate health authority.

Exclusion of Contacts - Not excluded. Contact a public health unit for specialist advice about screening, antibiotics or TB clinics.

Varicella See 'Chickenpox'

Viral gastroenteritis (viral diarrhoea)

Excluded until there has not been a loose bowel motion for 24 hours. ^b

Exclusion of Contacts - Not excluded.

Whooping cough (pertussis)

Exclude until 5 days after starting appropriate antibiotic treatment or for 21 days from the onset of coughing.

Exclusion of Contacts - Contact a public health unit for specialist advice about excluding non-vaccinated contacts, or antibiotics

Worms

Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment has occurred.

Exclusion of Contacts - Not excluded.

^b If the cause is unknown, possible exclusion for 48 hours until the 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.

Sources

Education and Care Services National Regulations 2011

National Quality Standard

Department of Health and Aging, National Immunisation Program Schedule

NHMRC. Staying Healthy -Preventing Infectious Diseases in Early Childhood Education and Care Services 5th edition

Public Health and Wellbeing Act 2008

Public Health and Wellbeing Regulations 2009

Review

The policy will be reviewed annually by the Out of School Hours Care subcommittee of School Council.

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