CONTROL OF INFECTIOUS DISEASE POLICY

The spread of infections in the early childhood environment is facilitated by microbial contamination of the environment, as well as the greater exposure to young children who are still developing hygienic behaviours and habits. Our Service will minimise children’s exposure to infectious diseases by adhering to all recommended guidelines from relevant government authorities regarding the prevention of infectious diseases, promoting practices that reduce the transmission of infection, ensuring the exclusion of sick children and educators, supporting child immunisation, and implementing effective hygiene practices.

Our Service will provide up-to-date information and advice to parents, families and educators sourced from the Australian Government Department of Health, Australian Health Protection Principal Committee (AHPPC) and state Ministry of Health about infectious diseases as required. Recommendations from the Health Department will be strictly adhered to at all times.

NATIONAL QUALITY STANDARD (NQS)

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

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| 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 |
| 93 | Administration of medication |
| 162 | Health information to be kept in enrolment record |
| 168 | Education and care service must have policies and procedures |
| 170 | Policies and procedures to be followed |
| 172(2)(g) | a notice stating that there has been an occurrence of an infectious disease at the premises |
| 173 | Prescribed information to be displayed |
| 175 | Prescribed information to be notified to the Regulatory Authority |
| EDUCATION AND CARE SERVICES NATIONAL LAW |
| 172 | Offence to fail to display prescribed information |
| ~~174(2)(a)~~ | ~~Notification to the Regulatory Authority- (a) any serious incident at the approved education and care service~~ |

RELATED POLICIES

|  |  |
| --- | --- |
| Administration of Medication Policy Bottle Safety and Preparation PolicyChild Safe Environment PolicyCoronavirus (COVID-19) Management PolicyDental Health PolicyEnrolment PolicyFamily Communication Policy Governance PolicyHand Washing Policy Health and Safety Policy  | Immunisation Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Nappy Change and Toileting Policy Physical Environment Policy Pregnancy in Early Childhood PolicySick Children Policy Sleep and Rest PolicyWork Health and Safety Policy |

PURPOSE

Children encounter many other children and adults within the Service environment which can result in the contraction of infectious illnesses. 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. We aim to manage illnesses and prevent the spread of infectious diseases throughout the Service.

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

SCOPE

This policy applies to children, families, educators, staff, visitors, approved provider, nominated supervisor and management of the Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations, the approved provider must ensure policies and procedures are in place in relation to dealing with infectious diseases. (ACECQA, August 2021).

Our Service is committed to minimise the spread of infectious diseases and viruses by implementing recommendations as stated in the Staying healthy: *Preventing infectious diseases in early childhood education and care services (*Fifth Edition) developed by the Australian Government National Health and Medical Research Council and advice provided from the Australian Health Protection Principal Committee (AHPPC).

We are guided by decisions regarding exclusion periods and notification of infectious diseases by the *Australian Government- Department of Health* and local Public Health Units in our jurisdiction as per the Public Health Act.

The need for exclusion and the length of time a person is excluded from the Service depends on:

* how easily the infection can spread
* how long the person is likely to be infectious and
* the severity of the infectious disease or illness.

This policy must be read in conjunction with our other Quality Area 2 policies:

* Immunisation Policy
* Sick Children Policy
* Incident, Injury, Trauma and Illness Policy
* Medical Conditions Policy and
* Handwashing Policy
* COVID-19 Management Policy

PREVENTING INFECTIOUS DISEASES

Children enter education and care services when their immune systems are still developing. They have not been exposed to many common germs and therefore are susceptible to bacteria that may cause infections. Given the close physical contact children have with other children in early childhood and care, it is very easy for infectious diseases and illnesses to spread through normal daily activities.

Our Service implements rigorous hygienic practices to limit the spread of illness and infectious diseases including:

* effective hand washing hygiene
* cough and sneeze etiquette
* appropriate use of gloves
* exclusion of children, educators or staff when they are unwell or displaying symptoms of an infectious disease or virus
* effective environmental cleaning including toys and resources (including bedding)
* requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the Service
* physical distancing (if recommended by Australian Health Protection Principal Committee [AHPPC] and/or Safe Work Australia)
* use of face masks (as mandated by PHO)
* restricting parents and visitors from entering our service to reduce threat of spread of a community disease (e.g.: COVID-19)

Immunisation requirements

Immunisation is a reliable way to prevent many childhood infectious diseases. Unvaccinated children due to their parent’s conscientious objection are no longer able to be enrolled in approved early childcare services. Children who cannot be fully vaccinated due to a medical condition or who are on a recognised catch-up schedule may still be enrolled upon presentation of the appropriate form signed by a medical practitioner who meets the criteria stated by the Australian Government.

Only parents of children (less than 20 years of age) who are fully immunised or are on a recognised catch-up schedule can receive Child Care Subsidy (CCS) and the Family Tax Benefit Part A end of year supplement. The relevant vaccinations are those under the *National Immunisation Program* (NIP), which covers the vaccines usually administered before age five. These vaccinations must be recorded on the Australian Immunisation Register (AIR).

Educators and other staff at our Service are highly recommended to keep up to date with all immunisations including yearly influenza vaccinations. These include vaccinations recommended by the National Health and Medical Research Council (NHMRC). Educators, staff and visitors, including health professionals, volunteers, students, committee members and contractors are required to be fully vaccinated for COVID-19 under Public Health Orders in NSW.

Refer to *Immunisation Policy* for more information

Reporting Outbreaks to the Public Health Unit and Regulatory Authority

Outbreaks of communicable diseases and contagious viruses represent a threat to public health. To help prevent outbreaks, the Department of Health monitors the number of people who contract certain infectious diseases and their characteristics, the recent travel or attendance of infected people in a public place or on public transport and works with health specialists and doctors to help prevent the transmission of diseases to other people.

The Public Health Act 2010 lawfully requires and authorises doctors, hospitals, laboratories, school principals and childcare centre directors to confidentially notify the Public Health Unit (PHU) of patients with certain conditions, and to provide the required information on the notification forms. Specialist trained public health staff review this information and if necessary, contact the patient’s doctor, and sometimes the patient, to provide advice about disease control and to complete the collection of information.

All information is held confidentially in order to protect the patient’s privacy. Both the NSW and Commonwealth Privacy Acts only release/disclose patient information where it is lawfully required or authorised.

Management is required to notify the local PHU by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the Service is suffering from one of the following vaccine preventable diseases or any confirmed case of COVID-19:

* Diphtheria
* Mumps
* Poliomyelitis
* Haemophilus influenzae Type b (Hib)
* Meningococcal disease
* Rubella (‘German measles’)​
* Measles ​
* Pertussis (‘whooping cough’​)
* Tetanus ​
* An outbreak of 2 or more people with gastrointestinal or respiratory illness

Management will closely monitor health alerts and guidelines from Public Health Units and the Australian Government- Department of Health for any advice and emergency health management in the event of a contagious illness outbreak.

The Approved Provider must also notify the Regulatory Authority of any incidence of a notifiable infectious disease or illness. [ACECQA contact regulatory authority](https://www.acecqa.gov.au/help/contact-your-regulatory-authority)

MANAGEMENT WILL ENSURE:

* that all information regarding the prevention and transmission of infectious diseases is sourced from a recognised Government Health authority [Australian Government Department of Health](https://www.health.gov.au/)
* exclusion periods for people with infectious diseases recommended by Government Authorities are implemented for all staff, children, parents, families and visitors
* the Service implements recommendations from [*Staying healthy: Preventing infectious diseases in early childhood education and care services*](https://nhmrc.govcms.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services)to maintain a healthy environment
* advice and recommendations from the Australian Health Protection Principal Committee (AHPPC) and Safe Work Australia will be implemented where reasonably possible
* children are protected from harm by ensuring relevant policies and procedures are followed regarding health and safety within the Service
* required enrolment information, including health and immunisation records of enrolled children is collected, maintained and appropriately and securely stored
* a staff immunisation record that documents each staff member’s previous infection or immunisations (including dates) is developed and maintained
* a record is kept of all staff’s COVID-19 vaccinations [if mandated by Public Health Orders]
* the Public Health Unit is notified in the event of an outbreak of viral gastroenteritis. Management must document the number of cases, dates of onset, duration of symptoms. An outbreak is when two or more children or staff have a sudden onset of diarrhoea or vomiting in a 2-day period. (NSW Government- Health 2019)
* a notice is clearly displayed stating that there has been an occurrence of an infectious disease at the service
* required enrolment information, including health and immunisation records of enrolled children is collected, maintained and appropriately and securely stored

Managing a positive case of COVID-19 in an ECEC settings

Changes may occur to how our Service manages positive cases of COVID-19 during 2022. We will be directed by our regulatory authority as to what procedures need to be followed to ensure the health and safety of all staff, children and families.

Any person who tests positive to COVID-19 must inform their workplace/employer and education and care service as soon as possible. If a parent or carer attended the Service while infectious, they must inform the service. A positive person must self-isolate for a minimum of 7 days.

Exemptions may apply for staff who work as essential workers.

The Approved Provider must notify the Regulatory Authority of a positive case/or cases of COVID-19 within 7 days, or as soon as possible through the [(NQA ITS)](https://public.nqaits.acecqa.gov.au/Pages/Landing.aspx) as per Regulation 175(2)(c )

* management will determine staff, children and visitors who were in attendance with the case during the infectious period
* management will notify those in attendance and send a risk of COVID-19 letter
* isolation is no longer mandatory for exposures in ECE services, however it is recommended
* the service will undertake a thorough clean and disinfection
* a decision to close the service may be required if staffing ratios are affected and all families and staff will be notified of the closure
* privacy and confidentiality laws are adhered to- the person/s who has the confirmed case of COVID-19 will be on a ‘need to know’ basis only
* re-opening dates will be confirmed to the Regulatory Authority, DESE and families.

A NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL ENSURE:

* a hygienic environment is promoted and maintained
* children are supported in their understanding of health and hygiene practices throughout the daily program and routine (hand washing, hand drying, cough and sneeze etiquette)
* educators and staff are aware of relevant immunisation guidelines for children and themselves
* an Immunisation History Statement for each child is collected on enrolment and maintained/updated regarding the child’s immunisation status (AIR) and any medical conditions
* families are provided with relevant sourced materials and information on infectious diseases, health, and hygiene including:
	+ the current NSW Immunisation Schedule
	+ exclusion guidelines in the event of a vaccine preventable illness at the Service for children that are not immunised or have not yet received all their immunisations
	+ advice and information regarding any infectious diseases in general and information regarding any specific infectious illnesses that are suspected/present in the Service.
* families are provided with information about an infectious disease verbally and by displaying and emailing the Infectious Diseases Notification Form and details
* information or factsheets related to the disease/infection and the necessary precautions/exclusions required will be provided to families
* families are advised that they must alert the Service if their child is diagnosed with an infectious illness
* all educators are mindful and maintain confidentiality of individual children’s medical circumstances
* that opportunities for educators to source pertinent up to date information from trusted sources on the prevention of infectious diseases and maintaining health and hygiene are provided
* that opportunities for staff, children, and families to have access to health professionals by organising visits/guest speakers to attend the service to confirm best practice are provided
* families are advised to keep children at home if they are unwell. If a child has been sick, they must be well for 24hrs before returning to the Service. For example, if a child is absent due to illness or is sent home due to illness, they will be unable to attend the next day as a minimum. The Nominated Supervisor may approve the child’s return to the Service if families provide a doctor’s certificate/clearance certifying that the child is no longer contagious and is in good health. Please note; it is not always possible to obtain a doctor’s certificate or clearance for suspected cases of an illness. The decision to approve a child’s return is up to the Approved Provider/Nominated supervisor
* to complete the register of *Incident, Injury, Trauma or Illness* and/or document incidents of infectious diseases no later than 24 hours of an illness or infectious disease occurring in the Service
* educators or staff who have diarrhoea or an infectious disease do not handle food for others and are not to return to work until they have been symptom free for 48 hours
* any risk to a child or adult with complex medical needs is minimised in the event of an outbreak of an infectious disease or virus. This may require a risk assessment and decision-making regarding the suitability of attendance of the child or staff member during this time.

EDUCATORS WILL ENSURE:

* that any child suspected of having an infectious illness is responded to and their health and emotional needs supported at all times
* any child suspected of having an infectious illness is isolated from other children and supervised whilst waiting for collection by parents or guardian
* that appropriate health and safety procedures are implemented when treating ill children- wear disposable gloves, face mask or other PPE if needed
* families are aware of the need to collect their unwell child/ children as soon as practicable from the Service
* after confirmation that a child is suffering from an infectious disease, and as soon as practical, the family of each child must be notified whilst maintaining the privacy of the ill/infectious child. Communication may be:
	+ verbally
	+ through a letter from the educator or Approved Provider
	+ posting a note or sign at the entry of the residence
	+ via electronic message- text message or email
* all resources or items touched by a child with a suspected illness are thoroughly cleaned and disinfected- (cushions, pillows, toys)
* their own immunisation status is maintained, and the Approved Provider/Nominated Supervisor is advised of any updates to their immunisation status
* they are fully vaccinated against COVID-19 and have provided proof of vaccination to the approved provider
* opportunities are provided for children to participate in hygiene practices, including routine opportunities, and intentional practice such as hand washing, sneezing and cough etiquette
* consideration is given to the combination of children to decrease the risk of attaining an infectious illness when planning the routines/program of the day
* they adhere to the Service’s health and hygiene policy including:
	+ hand washing
	+ daily cleaning of the Service
	+ wearing gloves (particularly when in direct contact with bodily fluids- nappy changing and toileting)
	+ appropriate and hygienic handling and preparation of food
	+ wearing face masks if mandated by PHU
* they maintain up-to-date knowledge with respect to Health and Safety through on-going professional development opportunities
* that children rest ‘head to toe’ to avoid cross infection while resting or sleeping
* that cots or mattresses are placed at least 1.5m away from each other if physical distancing measures are required to be implemented
* children do not to share beds at the same time
* bedding is cleaned using detergent and water after each use and if the surface is known to be contaminated with a potential infectious disease, disinfectant is also used to clean beds
* that all play dough is freshly made every week. If there is an outbreak of vomiting and/or diarrhoea, or any other contagious communicable disease, play dough is to be discarded at the end of each day and a new batch made each day for the duration of the outbreak
* children wash their hands before and after using play dough.

Prevention strategies for minimising the spread of disease within our Service include all staff ensuring:

* full adherence to the NHMRC childcare cleaning guidelines
* to clean surfaces first with detergent and water before using disinfectants. (Disinfectants cannot kill germs unless areas are clean)
* mops used for toilet accidents are to be soaked in disinfectant in a bucket in the laundry sink and then air-dried
* that a daily clean is carried out on other surfaces that may transmit germs such as high touch objects including doorknobs, tables, light switches, handles, remotes, play gyms, low shelving, etc. This will be increased to several times a day if an outbreak of an infectious disease/virus has been recorded in the Service or to minimise the risk of transmission of a virus such as COVID-19
* that if a child has a toileting accident, the items are placed in a plastic bag with the child’s name on it. The plastic bag will be stored in a sealed container labelled ‘soiled/wet clothing’ for parents to take home
* cloths are colour coded so that a separate cloth is used to clean floors, bathroom, art and craft, and meal surfaces
* that any toy that is mouthed by a child is placed immediately in the ‘mouthed toys” container basket located on top of the grey cupboard above craft sink and washed with warm soapy water at the end of the day. All washable toys out on display for the children are to be washed on a weekly basis to decrease the risk of cross contamination and recorded with the date and a signature as evidence.
* toys and equipment (that are difficult to wash) will be washed with detergent (or soap and water) and air-dried in sunlight
* washable toys and equipment will be washed in detergent and hot water or supa quat and let aired to dry. All toys and equipment that have been cleaned will be recorded on the toy cleaning register.
* furnishings, fabric tablecloths and pillowcases will be laundered at the end of each week and hung out to dry. This will be more frequent during winter months or daily during an outbreak of illness in the Service.
* 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 using supa quat and a red cloth.
* when cleaning up spills of faeces, vomit or urine off beds, floors, bathrooms etc. educators will use disinfectant on the surface after cleaning it with detergent and warm water
* pregnant staff members should not change nappies or assist in toileting or cleaning up toileting accidents to prevent unexpected cross contamination and risk of contracting Cytomegalovirus (CMV). (see *Pregnancy in Early Childhood Policy)*

FAMILIES WILL:

* adhere to the Service’s policies regarding *Control of Infectious Diseases*, *Immunisation*, *Sick Children* and exclusion requirements
* adhere to the Service’s restrictions of entry into the Service in the event of an outbreak of an infectious disease or virus
* adhere to the Service’s policy regarding *Hand Washing*
* exclude their child from care if they display symptoms of an infectious illness or disease or in the event of a vaccine preventable disease occurs in the Service and their child is not immunised fully
* advise the Service of their child’s immunisation status, by providing a current Immunisation History Statement recorded on the Australian Immunisation Register (AIR) for the Service to copy and place in the child’s file
* advise the Service when their child’s medical action plan is updated
* provide sufficient spare clothing, particularly if the child is toilet training
* adhere to the Service’s risk minimisation strategies if their child has complex medical needs in the event of an outbreak of an infectious disease or virus

Resources

[Gastro Pack NSW Health](https://www.health.nsw.gov.au/Infectious/gastroenteritis/Documents/ccc-gastro-pack.pdf)

[Recommended exclusion periods- Poster](https://nhmrc.govcms.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services) Staying Healthy: Preventing Infectious diseases in early childhood education and care services

[Minimum periods for exclusion from childcare services (Victoria)](https://www2.health.vic.gov.au/Api/downloadmedia/%7B8B903A66-28C3-452E-B5A1-AE234D3365E5%7D)

[Time Out Keeping your child and other kids healthy!](https://www.health.qld.gov.au/__data/assets/pdf_file/0022/426820/timeout_poster.pdf) (Queensland Government)

Time Out Brochure [Why do I need to keep my child at home?](https://www.health.qld.gov.au/__data/assets/pdf_file/0025/702619/timeout-brochure.pdf)

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<https://www.health.nsw.gov.au/immunisation/Pages/childcare_qa.aspx>

NSW Public Health Unit: <https://www.health.nsw.gov.au/Infectious/Pages/phus.aspx>

*Public Health Act 2010*

*Public Health Amendment Act 2017*

Public Health Regulation 2012

Public Health and Wellbeing Regulations 2019 Victoria

Queensland Health [Information for parents about infectious diseases and exclusion periods in Queensland early](https://www.health.qld.gov.au/__data/assets/pdf_file/0025/702619/timeout-brochure.pdf)

[childhood education centres and schools](https://www.health.qld.gov.au/__data/assets/pdf_file/0025/702619/timeout-brochure.pdf)

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Safe Work Australia

REVIEW

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| --- | --- | --- | --- |
| POLICY REVIEWED BY | Haidee Cheesewright | Educator | 7.05.22 |
| POLICY REVIEWED | MAY 2022 | NEXT REVIEW DATE | MAY 2023 |
| MAY 2022 | * deleted information about a confirmed COVID-19 case replaced by *Managing a positive case of COVID-19 in an ECEC Service*
* sources checked for currency
 |
| POLICY REVIEWED | PREVIOUS MODIFICATIONS | NEXT REVIEW DATE |
| MAY 2021 | * New policy developed
 | MAY 2022 |