

Dealing with Infectious Diseases Procedure

Policy

The Dealing with Infectious Diseases Procedure falls under the Dealing with Infectious Diseases Policy. Hawthorn Early Years will provide an environment that promotes the health and wellbeing of children, families, employees and visitors. The Service will exclude children, employees and visitors who are suffering from contagious diseases and undertake infection control measures to reduce the spread of diseases and illnesses.

Application of Procedure

This procedure applies to the Approved Provider, the Board of Hawthorn Early Years all subcommittees of the Board of Management, employees, students, volunteers, families, children and others attending the programs and activities of Hawthorn Early Years.

Key Definitions

Exclusionary Illnesses & Diseases

COVID: Any child that displays signs or symptoms of COVID will be sent home immediately and a Rapid Test undertaken at home. If positive then the child must remain home for 5 days and as long as all symptoms are gone they can return. If negative, depending on the nature of the symptoms, they can return to the service as soon as these have gone. (For fever, vomiting, diarrhoea the exclusion periods must be adhered to.)

Vomiting: A child who is vomiting should be kept home until 24 hours after the vomiting has stopped unless it is during an outbreak (2 or more cases in the one classroom) and then is it 48 hours. Microorganisms, which cause vomiting and diarrhoea are highly contagious and can spread through the Service very rapidly.

Diarrhoea: A child who has watery stools should not attend the Service until he/she has been free of diarrhoea for 24 hours unless it is during an outbreak (2 or more cases in the one classroom) and then is it 48 hours.. If, however, your child has an allergy or condition that regularly causes this condition, please inform the Centre Manager.

A fever: A child with a fever of more than 38°C must be kept at home. Any unwell child who presents with a fever whilst attending the Service will need to be collected immediately and will be unable to return the next day as a minimum. A child who is sent home with a fever must be free from a fever for a minimum of 24 hours (without the use of paracetamol) before returning to the Service. The child's activity level and appetite should also be back to normal.

Chickenpox: A highly infectious disease that starts with cold-like symptoms such as a runny nose, mild fever, cough and fatigue and these are followed by a characteristic spotty rash. The rash begins as small red spots that quickly



tur into fluid filled blisters. Children with chickenpox are infectious 2 days before the rash appears and until all blisters have formed scales or crusts and dried. Before a child returns to care they must have a medical clearance.

Cold sores (Herpes simplex): These are painful sores, usually around the mouth, possibly with a fever. The condition requires medical attention if the infection is severe or if the sores develop secondary infection. The child should have sores covered with a dressing or be excluded until the sores have healed, particularly where there is a risk of the child coming into contact with young babies.

Contagious conjunctivitis: This is an infection of the eyes, characterised by redness, a yellow discharge and watering. This condition requires specific medical attention and children may not return to the Service until the discharge from the eyes has stopped.

Hand-Foot-Mouth Disease: This is a highly contagious infection. It consists of small lesions that tend to spread quickly on the side of the tongue or inside the mouth around the cheek region. Lesions also appear on hands, feet and legs, and occasionally they may appear on the buttocks. Parents are requested to keep children away from the Service until blisters have stopped appearing and <u>all</u> blisters have dried and a medical clearance has been provided

Impetigo (School Sores): This is a contagious skin infection characterised by crusted sores that usually appear first on the face area. This condition requires specific medical attention and the child should be kept at home until the sores have healed, or treatment has started and the sores are covered.

Pediculosis (Head Lice): The child does not need to be excluded if effective treatment begins before the next day at the Service. An effective treatment is when a treatment has been used and all the live lice are dead and removed and all the lice eggs have been removed. We recommend other members of the family are checked and treated as required.

Prescribed antibiotics: A child who has been prescribed antibiotics for an illness should be kept at home for at least 24 hours. NOTE: If the child has not previously been prescribed the medication, the Service educator will not administer the first dose of any medication, in case of allergic reaction. This is provided for in the Administration of Medication Policy.

Hawthorn Early Years Is Committed To:

Providing an environment that promotes health and wellbeing of children, employees and visitors of the Service. This includes taking appropriate measures to reduce the spread of contagious diseases and illnesses. Health Regulations state that children or employees suffering from infectious diseases must be isolated from other children, and therefore excluded from the Service for specific periods of time. When children become ill at the Service, the Education and Care Services National Regulations require that the parent or guardian be contacted as soon as practicable and arrangements made for the child to be taken home as soon as possible.



Hawthorn Early Years will:

Exclude contagious individuals

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).

Be 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.

Ensure the exclusion of children, staff, students and volunteers when they are unwell or displaying symptoms of an infectious disease or virus. 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.

Where there is uncertainty surrounding the health of a child the decision to approve a child's return or attendance at the Service lies with the nominated supervisor or person in day-to-day charge. This is regardless of whether families provide a doctor's certificate/clearance certifying that the child is no longer contagious or are well. This is because it's not always possible to obtain an accurate diagnosis without pathology testing for suspected cases of an illness/infectious disease.

Reporting Outbreaks to the Public Health Unit and Regulatory Authority

If a child is believed to be suffering from a vaccine preventable disease, The Department of Health and Human Services (DHHS) must be notified in order to receive instructions on the exclusion of the child. Prior to the exclusion of the child, the centre director or centre manager will call the DHHS Communicable Disease Control Unit on 1300 651 160 to obtain information on the disease and ensure any exclusions are made based on firm medical evidence of the diagnosis of a vaccine preventable disease.

The nominated supervisor or person-in-charge must also notify the Regulatory Authority of any incidence of a notifiable infectious disease or illness (any vaccine preventable disease).

The person in charge is not allowed to permit a child to attend the Service if they are infected with an infectious disease as listed in Schedule 6 to the Health (Infectious Diseases) Regulations 2001 (Schedule 6 poster displayed in the foyer). For some diseases, such as measles or COVID-19, contacts may also need to be excluded from the Service to minimise the risk of infection to other children and employees. Advice will be taken from the DHHS Communicable Disease Control Unit when enforcing exclusion of cases and contacts for the same reasons as outlined in the paragraph above.



If a gastroenteritis (gastro) outbreak is suspected the centre director or centre manager will notify the Communicable Disease Prevention and Control Unit on 1300 651 160 within 24 hours (Refer below for further information about gastro).

Provide health information to parents/guardians

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.

A copy of the recommended minimum periods of exclusion for cases of, and contact with, infectious diseases is displayed at the Service. Information is included in the Family Handbook and given to parents/guradians when they enrol their child/ren.

All employees, volunteers and students will:

Provide appropriate care for unwell children

Ensure that any child suspected of having an infectious illness is responded to and their health and emotional needs supported at all times.

Ensure any child suspected of having an infectious illness is unobtrusively and sensitively isolated from other children and supervised whilst waiting for collection by parents or guardian.

Ensure that appropriate health and safety procedures are implemented when treating ill children- wear disposable gloves, face mask or other personal protective equipment if needed.

Contact the child's parent or guardian ensuring they are aware of the need to collect their ill child as soon as practicable from the Service.

In the case of a serious illness or if educators are concerned for the health and safety of a child who is unwell an ambulance will be called and parents/guardians notified as soon as possible.

Whilst waiting for the collection of a child, educators will pack up their belongings so they are ready to leave when their parent or guardian arrives.

Managing Fevers

If a child develops a fever whilst at the Service, educators will ensure that the child drinks plenty of water and that they are made as comfortable as possible. Only excessive clothing should be removed (e.g. coats, beanies, bulky jumpers) and the child made comfortable in line with their current body temperature which can cycle from hot to cold/shivery. In accordance with the administration of Medication Policy, paracetamol is not kept on the premise and will not be administered.



If a child is known to have had a convulsion due to a high temperature, the parent may provide a doctor's letter confirming the reasons why paracetamol may be required (e.g., febrile convulsions) and an action plan stating the circumstances in which paracetamol should be administered including the appropriate dose.

If a child's temperature reaches 40 degrees and the parent is unable to attend immediately or is unable to be contacted, an ambulance will be called.

Record of infectious diseases/illnesses

Ensure that an Illness Form is completed for all instances where a child becomes unwell at the Service and that this information is provided to parents/guardians.

Ensure that details of any infectious disease or illness occurring at the Service is recorded in the Infectious Diseases and Illness Register located in the front office.

Provide health information to parents/guardians

Provide a copy of information about the suspected illness or disease from 'Staying Healthy in Childcare' to parents/guardians of ill children.

If there is an outbreak of an infectious disease within the Service, an administration officer will communicate this by placing health notices as follows:

- at the entrance of the relevant classroom
- on the glass entrance doors to the relevant wing of the building (Juniors or seniors).
- Online via the Services communication platform to relevant classrooms.

Health Notices will generally include:

- Name and date of Infection
- Signs and Symptoms
- Infectious period
- Exclusion periods
- Treatment.

Practice infection control

When caring for an unwell child, educators will avoid touching other children until they have washed their hands and will encourage the child to cough or sneeze into their elbow.

Ensure all resources or items touched by a child with a suspected illness are thoroughly cleaned and disinfected-(cushions, pillows, toys etc.).

Ensure that a daily clean is carried out on surfaces that may transmit germs such as high touch objects including doorknobs, tables, light switches, handles, 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



Management and Control of Gastro outbreaks:

An outbreak of gastroenteritis may be defined as two or more cases of vomiting and/or diarrhoea occurring amongst children and/or employees, within 48 hours of each other that cannot be explained by medication or other medical conditions.

The Department of Health's *Guide for the management and control of gastroenteritis outbreaks in children's centres* will be referred to when managing gastro outbreaks at the Service. The document can be accessed on the web via this link: https://www2.health.vic.gov.au/about/publications/researchandreports/A-guide-to-the-management-and-control-of-gastroenteritis-outbreaks-in-childrens-centres

During outbreaks the Guide will be used to provide information for:

- Environmental cleaning (sections 3.1 and appendix 1B)
- Chlorine concentration instructions (Appendix 1A)
- Hand hygiene, infection control, and faecal specimen collection (Sections 3 and 5)
- Case lists (Section 4 and Appendix 4)

The cleaning should be carried out in:

- All communal areas and rooms used by the children,
- · All toys and equipment that children use,
- Bathrooms, toilets and nappy change areas, and
- Kitchen areas.

Any carpeted areas where people have been ill should be cleaned with hot water and detergent, before being steam cleaned.

The cleaning should be repeated regularly until the outbreak has ceased. In children's services this is most practical during outdoor play time, and again at the end of the day. Soft toys and the use of sandpits and water play tables/areas should be avoided during an outbreak.

If staff cases occur they should remain absent from work for at least 48 hours after symptoms have ceased. Agency or contract staff (such as cleaners) must also be advised of the outbreak. All staff (including catering staff) should be provided with information regarding the need for high levels of personal hygiene, and the importance of not working while ill. Only catering staff should have access to the kitchen and staff should avoid transferring between rooms during this period.

Effective hand hygiene is the most important measure in preventing the spread of infection. This can be done with **soap and water**, which removes dirt and germs from the hands and reduces the numbers of viruses on the hands to a safer level, or by using an alcohol-based hand rub, which is recommended for hand cleansing when hands are not visibly dirty. Hand hygiene should be continued until the outbreak has been declared to be over and staff may then return to their routine hand hygiene practices. (Section 3.2 in the guide).

Case lists will be updated twice a week with new cases and/or new information on cases already on the list. These will be provided to the Communicable Disease Prevention and Control Unit (fax: 1300 651 170 or cdir@dhhs.vic.gov.au) and to Boroondara Council's EHO.



Parents/guardians will:

Notify the Service immediately if their child is diagnosed as having an infectious disease.

Keep child/ren at home if they are unwell, not only for their own well-being, but also for the health of the other children.

Collect or arrange for their child/ren to be collected as soon as possible if they become unwell or develop a fever while at the Service.

Ensure children do not return to the service for 48 hours after the cessation of symptoms if a child has been suffering from gastro or for 24 hours following the last occurrence of a fever without the use of paracetamol.

Parents are encouraged to take out ambulance membership, if they have not already done so, as the Service will not be held responsible for the costs incurred in transporting a child by ambulance.

See also:

- 1. Dealing with Infectious Diseases Policy
- 2. Hygiene Procedure
- 3. Health and Safety Policy.
- 4. Administration of Medication Procedure