



Subject: INFECTIOUS DISEASES POLICY	Policy No: ELC 04 – Version 2
Covers: COLLEGIATE ELC, OSHC AND KINDERGARTEN	Effective: December 2018
	Revised: November 2018
	Review Date: December 2020

Infectious Diseases

Policy

Where there is an occurrence of an infectious disease (as listed in *Staying Healthy 5th Edition*) at Collegiate Early Learning (ELC), Outside School Hours Care (OSHC) and St Michael's Collegiate Kindergarten, the approved provider must ensure reasonable steps are taken to prevent the spread of the infectious disease at the School/service and that the parents or an authorised emergency contact of each child being educated and cared for is notified of the occurrence as soon as practicable.

An environment that supports health, safety and wellbeing will be implemented and maintained.

Procedure

In managing and controlling the spread of infectious disease, Collegiate ELC, OSHC and St Michael's Collegiate Kindergarten will implement the following hygienic procedures to break the chain of the infection. The chain of infection may be broken at any stage in the chain of infection:

1. The chain has a source (bacteria, virus, fungi, protozoa);
2. The germ spreads from the source;
3. The germ infects another person.

Effective Hand Hygiene

One of the most effective ways to break the chain of infection and prevent the transmission of disease is through effective hand washing with both soap and water to ensure both dirt and germs are thoroughly removed; alcohol based hand wash¹ only reduces the number of germs. Soap alone will not dirt or kill germs; running water is required also.

Where soap and water are unavailable (i.e. during an excursion; in the outdoor environment) alcohol based hand wash may be used. Alcohol based hand wash has been proven to increase hand hygiene and be a convenient and effective way to remove or reduce the number of germs.

Effective hand drying is as important in the prevention of the transmission of disease as effective hand washing procedures. Ineffective hand drying (i.e. damp hands) may transfer up to 1000 times more bacteria than effective procedures. Hands should be thoroughly dried using clean, disposable paper towel.

Hands should be washed before you touch anything that should stay clean and after touching anything that may contaminate your hands. This includes before:

- Putting on gloves;
- Giving medication;
- Eating or handling food;
- Putting on sunscreen or other lotion to a child(ren);

And after:

- Taking off gloves;
- Changing a nappy or helping children use the toilet;
- Using the toilet;
- Wiping a child's (or your own) nose;
- Cleaning up body fluids.

To effectively wash hands:

- Wet hands with running water;
- Apply soap to hands (including wrists, palms, between fingers and under nails) and lather thoroughly;
- Rub hands together for a minimum of 15 seconds;
- Rinse thoroughly under running water.
- Dry hands thoroughly.

Infants need their hands washed as often and as thoroughly as older children:

- If the infant can stand at a small hand basin, wash their hands the same way you wash your own hands.
- If the infant cannot stand at a hand basin, wash their hands with pre-moistened disposable wipes, then dry thoroughly.

Exclusion of Ill Children, Teachers, Educators and Other Persons

The aim of exclusion is to minimise the spread of infectious disease. The need for and the length of the exclusion period (i.e. outlined in *Staying Healthy 5th Edition*) depends upon:

- How easily the infection may spread;
- How long the person may potentially be infectious for;
- The severity of the disease.

In determining the exclusion of a child or other person:

- Verify if the symptoms or diagnosed disease has a minimum exclusion period;
- Verify the child or other person's immunisation status;
- Confirm when the child or other person is able to return to the service.
- Where verification is required in regard to exclusion periods (or returning after an exclusion period) the Public Health Unit (DHS) should be contacted.

Note: Even when a condition does not have a prescribed minimum exclusion period, unwell persons are encouraged to not attend the service until such time as they are fully recovered. (Also refer to the Incident, Injury, Trauma and Illness Policy and Procedure).

Immunisation

On enrolment, parents (or other person responsible for enrolling the child) will be requested to supply the School/service with a copy of the child's immunisation record² to verify that the child has received all the vaccinations recommended for their age group.

All documentation must be securely stored with the child's enrolment record.

Where a child's immunisation is updated, the parents must also update the child's immunisation record with Collegiate ELC, OSHC or Kindergarten/School.

Where a child, teacher, educator or staff member has not been medically vaccinated /immunised ('not medically vaccinated' includes a person who may have been naturopathically or homeopathically vaccinated), the person will be excluded from Collegiate ELC, OSHC or Kindergarten for the duration of the infectious period and outbreak, even if the person is well themselves (refer to www.immunise.health.gov.au for a current exclusion list). Parents will be made aware of these exclusion requirements during the enrolment process.

In the event of a breakout of an infectious disease, the following must occur:

- A notice stating that there has been an occurrence of an infectious disease will be clearly displayed at the main entrance of the service premises;
- Parents (or an authorised emergency contact) will be notified of the occurrence (e.g. signage, verbal, Parent Portal or email);
- Relevant information will be available to families via the usual channels of communication.

Under the Australian Government, Department of Human Services requirements, a child's immunisation status may impact on a family's ability to claim Child Care Subsidy (CCS). For further information, including immunisation requirements and immunisation medical exemptions refer to

<https://www.humanservices.gov.au/individuals/enablers/immunisation-requirements/35396>

Exclusion Periods

The following list is an extract from *Staying Healthy 5th Edition*. For a more detailed list, please refer to *Staying Healthy 5th Edition*

<https://nhmrc.gov.au/sites/default/files/documents/reports/clinical%20guidelines/ch55-staying-healthy.pdf> or

<https://www.humanservices.gov.au/individuals/enablers/immunisation-requirements/35396>

Condition	Exclusion of case	Exclusion of contacts
<i>Campylobacter</i> infection	Exclude until there has not been a loose bowel motion for 24 hours ²	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded

Cytomegalovirus infection (CMV)	Not excluded	Not excluded
Conjunctivitis	Exclude until discharge from eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis	Not excluded
Diarrhoea (no organism identified)	Exclude until there has not been a loose bowel motion for 24 hours ²	Not excluded
Fungal infections of the skin or nails (e.g. ring worm, tinea)	Exclude until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours ²	Not excluded
Glandular fever (mononucleosis, Epstein-Barr virus [EBV] infection)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
<i>Haemophilus influenzae</i> type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded Contact public health unit for specialist advice
Head 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
Hepatitis 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
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes 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 young), they	Not excluded

	<p>should be excluded until the sores are dry</p> <p>Sores should be covered with a dressing, where possible</p>	
Human immunodeficiency virus (HIV)	<p>Not excluded</p> <p>If the person is severely immune compromised, they will be vulnerable to other people's illnesses</p>	Not excluded
Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)	Not excluded	Not excluded
Impetigo	<p>Exclude until appropriate antibiotic treatment has started</p> <p>Any sores on exposed skin should be covered with a watertight dressing</p>	Not excluded
Influenza and influenza-like illnesses	Exclude until person is well	Not excluded
Measles	Exclude for 4 days after the onset of the rash	<p>Immunised and immune contacts are not excluded</p> <p>For non-immunised contacts, contact the public health unit for specialist advice</p> <p>All immunocompromised children should be excluded until 14 days after the appearance of the rash in the last case</p>
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment completed	<p>Not excluded</p> <p>Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case</p>
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner)	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 contacts, or antibiotics
Pneumococcal disease	Exclude until person is well	Not excluded
Rubella (German measles)	Exclude until the person has fully recovered or for at least 4 days after the onset of the rash	Not excluded
Scabies	Exclude until the day after starting appropriate treatment	Not excluded
<i>Shigellosis</i>	Exclude until there has not been a loose bowel motion for 24 hours ²	Not excluded
Tuberculosis (TB)	Exclude until medical certificate is produced from the appropriate health authority	Not excluded Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Varicella (chicken pox)	Exclude until all blisters have dried—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, leukaemia) or receiving chemotherapy should be excluded for their own protection as they are at high risk of developing severe disease Otherwise, not excluded
Viral gastroenteritis (viral diarrhoea)	Exclude until there has not been a loose bowel motion for 24 hours ²	Not excluded
Worms	Exclude if loose bowel motions are occurring Exclusion is not necessary if treatment has occurred	Not excluded

Note: Where a teacher, educator or other person's role includes food handling, the person should always be excluded until there has not been a loose bowel motion, vomiting or gastro symptoms for 48 hours.

Cough and Sneeze Etiquette

When an infected persons coughs or sneezes, the infected droplets may spread up to 2 meters away to be breathed in directly by another person or contaminate nearby surfaces. To prevent this, cover your mouth and nose with the inner elbow, or use a tissue. All tissues are to be placed in a bin straight away and hands cleaned with either soap and water or an alcohol based wash.

Appropriate Use of Gloves

Wearing gloves does not replace the need for effective hand washing. Gloves should be worn where an educator may come into contact body fluids or excretions (e.g. changing soiled nappies/clothing or cleaning up vomit or blood). Disposable (single use) gloves should only be used. Disposable, single use gloves should not be reused.

Hands must always be washed before and after wearing disposable gloves.

The *Toileting and Nappy Change Policy* outlines practice in regard to use of gloves in regard to toileting and nappy change.

How to Remove Disposable Gloves:

- Pinch the outside of one glove near the wrist and peel the glove off so it ends up inside out.
- Keep hold of the peeled-off glove in your gloved hand while you take off the other glove - put one or two fingers of your ungloved hand inside the wrist of the other glove.
- Peel off the second glove from the inside, and over the first glove, so you end up with the two gloves inside out, one inside the other.
- Place the gloves in the rubbish bin, and wash your hands

Effective Environmental Cleaning

Effective environmental cleaning can support breaking the chain of infection and minimising infectious diseases.

The length of time a germ can survive on a surface (including the skin) depends on the germ itself, the type of surface it has contaminated and how often the surface is cleaned.

Washing hands (as outlined above) and surfaces regularly with detergent and water is a very effective way of removing germs and breaking the chain of infection and minimising the impact of the infectious diseases.

Effective environmental cleaning may include routine cleaning with detergent and water, followed by rinsing and drying (Detergents help to loosen the germs so that they can be rinsed away with clean water). Rinsing with clean water removes the loosened germs and any detergent residues from the surface, and drying the surface makes it harder for germs to survive or grow. Although it is best to use warm water, cold water can also be used with a little extra scrubbing.

Where possible, Collegiate ELC, OSHC and St Michael's Collegiate Kindergarten will reduce toxins, chemicals and single use items within the environment (refer to the Sustainability Policy and Provision of a Child Safe Environment Policy or *Staying Healthy 5th Edition* for further information).

Relevant Policies and Procedures

- Administration of First Aid Policy and Procedure
- Enrolment and Orientation Policy and Procedure

- Incident, Injury, Illness and Trauma Policy and Procedure
- Medical Conditions Policy and Procedure
- Provision of a Child Safe Environment Policy and Procedure
- Sustainability Policy and Procedure

Sources

- *Education and Care Services National Law*
- *Education and Care Services National Regulations*
- ACECQA
- Australian Government, Department of Human Services
- *Staying Healthy (5th Edition)*

¹ Alcohol based hand wash must be stored so as not to be accessible to children and only used with adult supervision.

² A copy of an immunisation record MUST be taken in regard to Kindergarten and may be sighted or copied in regard to ELC and OSHC.