



## **ILLNESS, INFECTIOUS DISEASE AND IMMUNISATION POLICY**

### **POLICY STATEMENT**

Clovelly out of School Care recognises that Immunisation helps to reduce the incidence of childhood infectious diseases now and in the future. Upon enrolment, the child's original 'Immunisation Record' issued by the Australian Childhood Immunisation Register will be sighted by an educator and/or kept in the child's file to ensure that their immunisation is up to date.

Children come into contact with many other children and adults in the childcare environment causing them to contract infectious illnesses. The National Quality Standards require services to implement specific strategies to minimise the spread of infectious illness. At Clovelly out of School Care we aim to maintain the health of all children, educators and their families, ensuring a healthy environment and minimising cross contamination and the spread of infectious illnesses.

In the case of infectious diseases children are often infectious before symptoms appear. Therefore, it is important for educators to operate with good hygienic practices. It is also important that educators act appropriately and with sensitivity when dealing with an infectious child and their family. Information about infectious diseases are available for educators and parents and our procedures to reduce the spread of such infection in OOSH is readily available in the foyer.

### **PROCEDURE**

#### **Immunisation**

- A child is unable to enrol into the service unless approved documentation has been sighted and shows the child is:
  - fully vaccinated for their age, has a medical reason not to be vaccinated, has a parent/guardian who has a conscientious objection to vaccination or is on a recognised catch-up schedule if the child has fallen behind with their vaccinations.

Approved documentation of immunisation status includes;

- An ACIR Immunisation History Statement which shows that the child is up to date with their scheduled vaccinations.
- A Medicare Immunisation History Form (IMMU13) on which the immunisation provider has certified that the child is on a recognised catch-up schedule.
- A Medicare Immunisation Exemption - Medical Contraindication Form (IMMU11) which has been certified by an immunisation provider.
- A Medicare Immunisation Exemption Conscientious Objection Form (IMMU12) which has been certified by an immunisation provider and a parent.
- If and when an outbreak of an immunise-able infectious disease occurs, all families will be made aware of the outbreak.
- Any child who is not immunised will be excluded from the service if and when an outbreak of an immunise-able infectious disease occurs to protect that child and to prevent further spread of infection. In the instance of the child being immunised and the Immunisation record not provided to the Service – the child would be viewed as not being immunised.



- Families who do not have their child immunised, or have out-of-date immunisation records, may not be entitled to Child Care Subsidy, or may have their subsidy cancelled. This is not a decision made by the service.
- All educators are encouraged to keep up to date with their immunisations. The service requires a declaration from educators on their immunisation status and will be treated the same way as a child who is not immunised if an infectious disease is detected within the service. A list of available and recommended immunisations is displayed in the educator room for educators' reference.
- Management will maintain a current record of vaccination status of all educators. All information will be kept confidential. This record will be updated annually.
- Current information will be regularly provided to employees and families on vaccine-preventable diseases.

#### Employees will:

- Provide proof of current immunisation status.
- Actively seek immunisation for all diseases currently on the vaccinations schedule if not already immunised or unsure of status.
- Actively seek immunisation for all other recommended diseases, e.g. Hepatitis - A & C, HIB, annual Flu (influenza) Vaccination and Whooping Cough.
- Maintain current immunisation status.

#### Infectious Diseases

- There are 4 steps to the spread of infections:
  1. The person with the infection spreads germs into their environment.
  2. The germ must survive in the environment.
  3. The germ is then passed to another person.
  4. The next person becomes infected.

“Infectious illnesses may be due to viruses, bacteria, protozoa or fungi. All of these organisms are too small to see with the naked eye. These germs can survive on the hands and objects, for example, toys, door handles and bench tops. The length of time a germ can survive on a surface depends on the germ itself, the type of surface it has contaminated and how often the surface is cleaned. Washing with detergent and water is a very effective way of removing germs.” Germs can be transmitted through the air, through contact with faeces and then contact with mouths, direct contact with skin and contact with other body secretions. (e.g. runny noses, blood).

The three most important ways of preventing the spread of infectious disease:

1. Effective hand washing.
2. Exclusion of sick children and educators.
3. Immunisation.

Recommended practices in the service guidelines on these procedures may assist Educators in ensuring children and families are kept free from infection.

#### The Approved Provider and service will:

- Provide information and resources to educators on how to prevent the transmission of infectious diseases.
- Model safe hygienic practices to educators and children where possible.
- Report any occurrence of an immune preventable disease to the Department of Health Infectious Diseases Unit.
- Discuss immunisation requirements and schedule with families at the time of enrolment.

#### Educators will:

- Implement good hygiene practices that aim to prevent the spread of infectious disease.



- Ensure that they protect themselves from infections that are vaccine preventable or contracted due to poor hygiene practices.
- Seek advice on health matters including immunisation.
- Seek advice on screening for:
  - Rubella, chicken pox and particularly CMV for all female Educators of child bearing age.
  - Some other illnesses that may affect the unborn child include Listeriosis, toxoplasmosis, erythema, infectiosum (also called Parvovirus or slapped cheek syndrome).
- Exclude children from care that are sick or infectious.
- Request families to update immunisation records regularly.

It is the responsibility of parents to:

- Not send infectious or sick children into care.
- Seek advice on immunisation of their child from a medical practitioner.
- Promptly pick up a sick or infectious child that becomes ill whilst in care.
- Seek a Doctor's Certificate if required by the educator before returning to care.
- Notify the service Director and the approved provider if their child has been diagnosed with an immune preventable disease e.g. whooping cough, measles or rubella.

**Illness**

This policy should be used in conjunction with the following Service policies:

- Management of Incident, Injury, Trauma and Illness Policy.

Our Service has adopted the Staying Healthy in Child Care – Preventing Infectious disease in child care (Fifth Edition) publication, developed by the National Health and Medical Research Council. We aim to provide families with up to date information regarding specific illnesses and ways to minimise the spread of infection within the service.

We understand that it can be difficult for families to know when their child is sick. Families may experience problems taking time off work or study to care for their child at home. Obtaining leave from work or study can enhance negative attitudes in the workplace which can cause stress on families. Families may also experience guilt when they send their child to care who is not well. However, it is imperative that families preserve a focus not only on the well-being of their own child but also upon the well-being of other children and the child care professionals at the service.

The need for exclusion and the length of time a person is excluded depend on how easily the infection can spread, how long the person is likely to be infectious and how severe the disease can be. To protect the health of children and educators within the service, it is important that children and educators who are ill are kept away from the Service for the recommended period. Our educators are not medical practitioners and are not able to diagnose whether or not a child has an infectious illness. However, if an infectious illness is suspected, our Service may ask the family to collect their child from care as soon as possible or not bring the child to care. Management and Educators may request families seek medical advice and provide a medical certificate stating that the child is no longer infectious prior to returning to care.

Children arriving at the Service who are unwell

*Management has the right to not accept a child into care if they:*

- Are unwell and unable to participate in normal activities or require additional attention.
- Have had a temperature, vomiting and/or diarrhoea in the last 24 hours.
- Have started anti-biotics in the last 24 hours.
- Have a contagious illness or disease.

Children who become ill at the Service



Children may become unwell throughout the day, in which Management and Educators will respond to children's individual symptoms of illness.

- A child who has passed two runny stools/vomited whilst at the Service will be sent home and may only return once a Doctor's Certificate has been produced.
- Educators will take the child's temperature. If the child's temperature is 38°C or higher, an educator will contact the child's parents/guardian/emergency contacts as soon as possible to have the child picked up and provide verbal authorisation to administer paracetamol.
- Place the child in a quiet area where they can rest, whilst being supervised.
- Continue to document any progressing symptoms.
- Complete Illness Record, ensuring the form has been completed correctly and signed by the parent/guardian/emergency contact.
- Contact parents to collect the child immediately

Reporting Outbreaks to the Public Health Unit Outbreaks of communicable diseases represent a threat to public health. To prevent outbreaks, it is important to monitor the number of people who contract certain infectious diseases and their characteristics, and to work with patients and their doctors to help prevent spread to other people.

The NSW Public Health Act 2010 lawfully requires and authorises doctors, hospitals, laboratories, school principals and child care service directors to confidentially notify NSW Health of patients with certain conditions, and to provide the information delineated on the notification forms. Specialist trained public health educators 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 contemplate the release/disclosure of patient information where it is lawfully required or authorised. Management is required to notify the local public health unit (PHU) by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the school or facility is suffering from one of the following vaccine preventable diseases:

- Chicken pox
- Diphtheria.
- Mumps.
- Poliomyelitis.
- Haemophilus influenzae Type b. (Hib)
- Meningococcal disease.
- Rubella. ("German measles")
- Measles.
- Pertussis. ("whooping cough")
- Tetanus.
- An outbreak of gastrointestinal or respiratory illness.

Common Colds and Flu - The common cold (Viral upper respiratory tract infections) are very common in children occurring 6-10 times a year on average with the highest number usually being during the first 2 years in child care, kindergarten or school. Symptoms may include coughing, runny nose and a slight temperature. In circumstances where a child appears to have a cold or flu symptoms, management will determine if the child is well enough to continue at the service or if the child requires parental care.

Our Service aims to support the family's need for childcare, however families should understand that a child who is unwell will need one-on-one attention which places additional pressure on educator ratios and the needs of other children.

### Excluding children from the Service



- When a child has been diagnosed with an illness or infectious disease, the Service will refer to Staying Healthy in Childcare (5th Edition) to find the recommended exclusion period and also request a medical clearance from the GP stating that the child is cleared to return to the childcare setting.
- When an infectious disease has been diagnosed, the Service will display appropriate documentation and alerts for families including information on the illness/disease, symptoms, infectious period and the exclusion period. (This information can be obtained from Staying Healthy In Child Care 5th Edition).
- Children that have had diarrhoea and vomiting will be asked to stay away from the Service for 48 hours after symptoms have ceased to reduce infection transmission as symptoms can develop again after 24 hours in many instances. Notifying families and Emergency Contact.
- It is a requirement of the Service that all emergency contacts are able to pick up an ill child within a 30-minute timeframe.
- In the incident that the ill child is not collected in a timely manner or should parents refuse to collect the child a warning letter will be sent to the families outlining Service policies and requirements.

#### Management and Educators will ensure

- Effective hygiene policies and procedures are adhered to at all times.
- Effective environmental cleaning policies and procedures are adhered to all times.
- All families are given a copy of relevant policies upon enrolment which will be explained by management including;
  - Management of Incident, Injury, Trauma and Illness Policy
  - Illness, Infectious Disease and Immunisation Policy
  - Medical Conditions Policy
- Any child who registers a temperature of 38°C or above will need to be collected from the Service and will be excluded for 24 hours since the last elevated temperature or until the Service receives a doctor's clearance letter stating that the child is cleared of any infection and able to return to childcare.
- A child who has not been immunised will be excluded from the Service if; an infectious disease is reported within the Service community and that child is deemed to be in danger of contracting the illness. Please refer to our Illness, Infectious Disease and Immunisation Policy

#### Families Responsibility

In order to prevent the spread of disease, families are required to monitor their child's health, in particular:

- Unusual runny nose.
- High temperature.
- Diarrhoea.
- Red, swollen or discharging eyes.
- Vomiting.
- Rashes.
- Irritability, unusually tired or lethargic.

#### Returning to care after surgery

- Children who have undergone any type of surgery will need to take advice from their doctor/surgeon as to when it is appropriate to return to care.
- Children will require a medical clearance stating the child is fit and able to return to the Service and participate in daily activities.



## **RELEVANT DOCUMENTS FOR CONSIDERATION**

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations

The Business of Childcare, Karen Kearns 2004

Staying Healthy in Child Care 5th Edition

National Health and Medical Research Council

Management of Incident, Injury, Trauma and Illness Policy

Family Handbook

Staff Handbook

Version number	Date effective	Description of amendment
4	May 2018	Changes to wording
5	February 2019	Changes to wording and format
6	April 2020	Changes to wording and format

**Considered and accepted by the Management Committee (representative) – S. Skelton**

**Considered and accepted by the staff (representative) – Katrina Thomas**