Infectious Diseases Policy

To be read with -
Immunisation and Disease Prevention Policy

NQS

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National Regulations

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Aim

Our service aims to minimise the spread of potentially infectious diseases between children, their families and staff by excluding children who may have an infectious disease or who are too ill to attend the service.

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 follow the ACT’s exclusion requirements under law and the regulations, 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.

- All appropriate notifications to ACT Government Health must occur as soon as possible. The Nominated Supervisor is responsible for notifying ACT Government Health.

- 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 person. We will inform the contact of the child’s condition and ask for a parent or other authorised person to pick the child up as quickly as possible. Any person 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 aired dry 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.

- Inform all service families and educators of the presence of an infectious disease.

- Ensure confidentiality of any personal of health related information obtained by the service and educators in related 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.

Fevers
Unwell children include those with fevers. Fevers refer to temperatures above 38°C, and are usually a sign of infection (eg virus). When children develop a fever at the service, educators and staff will:

- contact parents and ask them to collect the child unless we have written advice from a medical practitioner that the fever is not caused by an infectious disease (eg teething). Babies less than 3 months old with fevers must always be collected by parents /authorised nominees who will be advised to take the child to a doctor
- administer first aid if required in line with service procedures. This may include calling an ambulance. Educators and staff will be especially vigilant caring for babies less than 3 months old with fevers
- if the child is distressed, bathe their face in lukewarm water and administer paracetamol if parents have given written permission
- offer water to the child and ensure they are not overdressed and their clothing is comfortable
- monitor the child’s behaviour, alertness and any other symptoms that could indicate serious infection including rash, stiffness, vomiting, coughing or convulsions

**Infectious Diseases requiring Notification to ACT Government Health**

Infectious Diseases notification should be directed to ACT Government Health using the form included in this Policy.

Appropriate ACT Government Health contact details are available on the form included in this Policy.

As outlined under Division 6.2, Section 105 (2) of Public Health Act 1997 (ACT), “a person who is responsible for the care, support or education of someone else must notify the chief health officer of the person if the first person believes, on reasonable grounds, that the other person has, or may have, a notifiable condition”.

The Public Health Regulation 2000 (ACT) sets out the following requirements regarding infectious diseases –

- A person responsible for the child must, during the period of exclusion from school or home-based care, take reasonable precautions (appropriate to that condition) to prevent the child transmitting the condition.
- A person who knows or suspects that the person has a transmissible notifiable condition, or knows or suspects that the person is a contact of such a person, must take reasonable precautions (appropriate to that condition) against transmitting the condition.
- If a person responsible (the responsible person) for another person (the other person) knows or suspects that the other person has a transmissible notifiable condition, or knows or suspects that the other person is a contact of such a person, the responsible person must take reasonable precautions (appropriate to the condition) to prevent the other person from transmitting the condition.
Exclusion from school, child care or home-based care as required by ACT law/regulations -
A parent or guardian of a child enrolled at the service must, as soon as possible, inform the person in
charge of care if the parent or guardian has reasonable grounds for believing that the child has a
condition mentioned in Schedule 1 of the Public Health Regulation 2000 (ACT) and any contacts the
child has been in contact with as follows:

(For information on all diseases, please refer to the Recommended Minimum Periods of Exclusion
Heading.)

Recommended Minimum Periods of Exclusion

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’.

Amoebiasis (Entamoeba histolytica)
- Exclude until diarrhoea ceases.
- Contacts – Not excluded.

Campylobacteriosis
- Exclude until diarrhoea ceases.
- 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’)

Exclusion of Contacts - Not excluded.

Giardiasis

Exclude until there has not been a loose bowel motion for 24 hours.
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’)**

- Exclusion until person is well.
- Exclusion of Contacts - Not excluded.

**Pneumococcal Disease**

- Exclusion is NOT necessary.
- 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.  
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)**

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

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*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 Act 1997
- Public Health Regulation 2000

Review

The policy will be reviewed annually. The review will be conducted by:

- Management
- Employees
- Families
- Interested Parties

Last reviewed: July 2016  Date for next review: July 2017