

# DEALING WITH INFECTIOUS DISEASE

## Early Years Services

### **Purpose**

The purpose of this policy is to ensure effective infection control practices are in place to prevent the spread of infections, as well as processes to manage outbreaks of infectious diseases. Maintaining high standards of hygiene is essential and reasonable steps are taken to prevent the spread of infection in the services.

### **Policy Statement**

City of Stonnington aims to ensure a healthy environment for all children, families and Educators attending its Early Years Services. The health and wellbeing of children are prioritised by implementing effective infection control practices to reduce spread of illness and manage occurrences of infectious diseases efficiently.

Children who are unwell or appear to be unwell should stay home until fully recovered.

### **Definitions**

*Exclusion period:* Families keeping unwell children at home in the event of illness or infectious disease within the service. The aim is to reduce the spread of infectious diseases, so the less contact between people who have an infectious disease and people at risk of catching it, the less chance the disease has of spreading.

*Fever:* fever by itself is not necessarily an indicator of severe sickness. However, a fever (temperature more than 38.0 °C) in a child is usually a sign of infection and may need to be investigated.

*Infectious Disease:* a disease that is designated under a law of relevant jurisdiction or by a health authority as a disease that would require a person with the disease to be excluded from an education and care service.

*Unwell:* showing one or more of the following symptoms: high temperature, persistent coughing, rash, thick discharge from nose, discharge from eyes, lethargic, blisters or open sores, vomiting, diarrhoea, excessively irritable or “not themselves.”

### **Scope**

This policy applies to:

- Early Years Coordinator
- Team Leaders
- Educators
- Parents/Guardians
- Administration Officer

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- Cook
- Students on placement
- Volunteers
- Agency Educators engaged at the service

## **Responsibilities**

### **Early Years Coordinator**

- Ensure obligations as the Approved Provider representative are met under *Education and Care Services National Law* and *Education and Care Services National Regulations*
- Ensure effective infection control practices are implemented to prevent the spread of infectious diseases
- Liaise with Facilities Management Team regarding service cleaning requirements for Early Years Services and ensure that cleaning is completed appropriately
- Ensure budget accommodates for the provision of cleaning supplies and appropriate Personal Protective Equipment (PPE) and/or additional cleaning of services if deemed necessary.

### **Team Leaders**

- Ensure obligations are met under *Education and Care Services National Law* and *Education and Care Services National Regulations*
- Confirm current, up to date Immunisation History Statements are provided for each child on enrolment in line with *Victorian Government Department of Health No Jab No Play* legislation and request updates at six monthly intervals thereafter
- Take reasonable steps to prevent or minimise exposure to infectious diseases occurring at the service
- Ensure premises, furniture and equipment are kept safe, clean and well maintained, including high risk areas (e.g. bathroom, toilet, nappy change area, sandpit), furniture, equipment and all clothing and linen
- Monitor daily cleaning undertaken by professional contractors to ensure particular attention is given to high-risk areas to ensure a healthy environment
- Order and maintain cleaning products and personal protective equipment (PPE) so there are supplies readily available when needed
- Promote infection control and hygiene practices with Educators and provide relevant information to parents/guardians when appropriate
- Refer to *Staying Healthy Preventing infectious diseases in early childhood education and care services 6<sup>th</sup> Edition 2024* for guidance relating to symptoms, infectious diseases as well as exclusion periods
- When necessary apply discretionary authority to request parent/guardian collect their child if they are unwell, or contact authorised nominees identified on the enrolment record to collect the child if unable to contact parent/guardian
- Requests to collect an unwell child can only be disputed with a clearance certificate from a medical practitioner deeming the child is not infectious
- If Educators or support staff are unwell ensure shifts are covered and they remain home in line with requirements outlined in *Minimum Period of Exclusion from*

*Primary Schools and Children's Services for Infectious Diseases and Cases, Staffing and Continuity of Educator Policy and Absence Procedure*

- Notify parents/guardians via email/Storypark and display notices if an infectious disease has occurred at the service and provide updates accordingly
- Monitor case numbers and if two or more cases occur notify *City of Stonnington Health & Immunisation Department and Department of Health's South East Public Health Unit* of the current outbreak and comply with guidelines provided
- Advise professional contractors if an outbreak of an infectious disease occurs so additional cleaning procedures can be implemented when cleaning after hours
- Submit notification to Department of Education (DET) of any infectious disease outbreaks that pose a risk to the health, safety or wellbeing of children attending the service
- Implement exclusion periods as defined by *Public Health and Wellbeing Regulations 2019* via *Minimum Period of Exclusion from Primary Schools or Children's Services for Infectious Diseases and Cases and Contacts* or *Staying Healthy Preventing infectious diseases in early childhood education and care services 6<sup>th</sup> Edition 2024*.

## **Educators**

- If unwell stay home in line with requirements outlined in *Minimum Period of Exclusion from Primary Schools and Children's Services for Infectious Diseases and Cases, Staying Healthy Preventing infectious diseases in early childhood education and care services 6<sup>th</sup> Edition 2024, City of Stonnington Leave Procedure, Staffing and Continuity of Educator Policy and Absence Procedure*
- Can choose to have recommended immunisations through *City of Stonnington Public Health & Immunisation Department*
- Implement *Dealing with Infectious Diseases Policy* and follow *Occupational Health & Safety (OHS) Safe Work Procedure*
- Apply and role model infection control practices for hand hygiene, nappy changing, toileting and food handling to prevent the spread of infection
- Integrate hygiene practices and infection control awareness into the educational program with children
- Monitor children's health, safety and wellbeing at all times and manage concerns accordingly
- If a child becomes unwell contact parents/guardians to collect the child and advise the Team Leader. If parents/guardians cannot be contacted Team Leader may choose to contact authorised nominees to collect the child
- Refer to *Staying Healthy Preventing infectious diseases in early childhood education and care services 6<sup>th</sup> Edition 2024* for knowledge and guidance to support further discussion with parents/guardians
- When monitoring a child who is unwell Educator must complete *Incident, Injury, Trauma, and Illness Record* with details of symptoms and actions taken while supervising the child until parent/guardian arrives
- Educators should notify the Team Leader if any cases of an infectious disease are reported who will then monitor case numbers and undertake reporting obligations

- If an outbreak is declared Educators commence additional cleaning measures throughout the day using the *City of Stonnington Cleaning Register – Illness Outbreaks* until the outbreak is declared over
- Wear disposable gloves for any contact with body fluids (blood, vomit or faeces) and spills should be promptly cleaned and disinfected to reduce potential risk to other children and Educators
- In the case of a serious illness or injury, an Educator will accompany a child by ambulance to hospital until parent/guardian arrives.

### **Parents/guardians**

- Be familiar with the *Dealing with Infectious Diseases Policy* and procedures
- Provide Immunisation History Statement on enrolment and when additional immunisations are administered or on request at six monthly intervals
- Communicate and notify Educators of any health-related information about their child on arrival at the service
- Keep their children home if they show any signs of illness
- Inform the Team Leader if their child has been diagnosed or in contact with a person diagnosed with an infectious disease
- Keep their child at home if an infectious disease is identified at the service that their child is not fully immunised against
- In accordance with the *Education and Care Services Regulations (2011 SI 653)*, parents/guardians must, on enrolment, authorise Early Years Services to seek emergency medical, hospital and ambulance services in case of an emergency.

### **Cook**

- Follow hygiene measures and infection control practices outlined in *Food Safety Policy* and *Food Safety Program for Princes Close Early Years Service*.

### **Procedure**

#### ***Preventing Infection – Infection Control Measures***

- City of Stonnington engage professional cleaning company for daily cleaning particular attention given to high-risk areas such as bathrooms and toilets to ensure hygiene standards are maintained
- A range of infection control measures are implemented that aim to prevent infectious diseases spreading and break the chain of infection including:
  - Personal strategies - immunisation, hand hygiene, respiratory hygiene, wearing gloves and masks, nappy changing and toileting, safely dealing with wounds and body fluids
  - Environmental strategies - ventilation, cleaning and food safety
  - Exclusion - to reduce the spread of illness.

#### ***Preventing Infection - Hand hygiene***

- Appropriate hand hygiene is one of the most effective ways to break the chain of infection and reduces the risk of cross contamination
- Appropriate hand hygiene should be completed in the following situations:

- on arrival at the service
  - before and after handling or eating food
  - before and after applying sunscreen
  - before and after administering medication
  - before and after using gloves
  - after changing nappies
  - after cleaning the nappy change area
  - after assisting children with toileting
  - after using the toilet
  - after coming inside from outdoors
  - after wiping a nose (either a child's nose or your own)
  - after handling garbage
  - after cleaning up spills of body fluids - blood, vomit, saliva, urine or faeces
  - after touching animals
  - after handling chemicals
  - when leaving the service
- *National Health and Medical Research Council* recommend the following steps for effective hand washing which should take around 40-60 seconds:
    - wet hands with running water (preferably warm water)
    - apply soap to hands
    - lather soap and rub hands thoroughly, including the wrists, palms, between fingers, around the thumbs, and under the nails for at least 20 seconds
    - rinse hands thoroughly under running water
    - dry hands thoroughly using an individual paper towel or hand towel
  - Infants who cannot stand at the basin, their hands should still be thoroughly cleaned with moistened disposable wipes or individual hand cloths
  - Paper towel or individual hand towels for drying hands should never be shared between children. If using individual hand towels, they are washed regularly
  - Children are supported to wipe their own nose and wash their hands afterwards
  - Where full hand washing facilities are not available (outdoors, excursions, routine outings) Educators use hand sanitiser after wiping children's noses and wash their hands as soon as practical.

### ***Prevention and Awareness – Immunisation***

- Up to date Immunisation History Statements are required on enrolment in line with *Victorian Government Department of Health No Jab No Play* legislation and at regular six monthly intervals thereafter.

### ***Prevention and Awareness - PPE***

- Gloves must be used when changing soiled nappies or children's clothing or whenever coming into contact with body fluids
- Gloves should never be reused and must be disposed of appropriately then followed up with thorough hand hygiene.

### **Healthy Environment**

- City of Stonnington engage a professional cleaning company for daily cleaning particular attention given to high-risk areas such as bathrooms, toilets to ensure high standard of hygiene is maintained
- Equipment and resources should be cleaned and sanitised frequently when in use, plastic items can be cleaned in the dishwasher and soft toys in washing machine
- Ventilation is encouraged in all indoor spaces wherever possible via windows, external doors or air purifiers to reduce the risk of airborne infections.

### **Healthy Environment - Contact with body fluids – blood, vomit, urine or faeces**

- Disposable gloves should be worn for any contact with body fluids including blood, vomit, urine or faeces
- If blood spills occur Educators should firstly, look after the child and provide first aid or request assistance from another Educator or Team Leader
- When cleaning up spills of blood, vomit, urine or faeces or breastmilk, wear gloves and wipe up the spill use paper and disposing in the rubbish bin along with gloves
- Always clean surfaces or areas with warm water and detergent then dry with paper towel and wipe the area using hospital grade disinfectant and allow to dry
- Wash hands or other parts of the skin thoroughly with warm soapy water as soon as practicable.

### **Managing Infection - Illness**

- Educators, support staff, children, parents/guardians, and/or visitors should not attend the service if they are feeling unwell or displaying signs of illness such as:
  - Fever of 38° or above
  - Lethargy and decreased activity – requiring one on one attention
  - Lack of appetite – eating or drinking less than usual
  - Pain or symptoms of pain such as irritability, teething, etc
  - Diarrhoea or vomiting in the previous 24 hours
  - Cold like symptoms including persistent cough, consistent runny nose
  - Discharge from the eyes
  - Other symptoms of illness
- When a child displays symptoms of illness or is unable to participate in the program they will be kept comfortable until parent/guardian collects them from the service
- If a child displays signs of pain or increased irritability associated with teething the child should remain at home. Teething symptoms usually lasts around 48 hours, if symptoms continue, seek medical advice as there may be an underlying illness.

### **Managing Infection - Infectious disease and exclusion**

- If a child is diagnosed with an infectious disease listed on the *Minimum Period of Exclusion from Primary Schools and Children's Services for Infectious Diseases and Cases* they will need to be excluded for the period defined by *Victoria Government Department of Health*
- Children with diagnosed or recorded medical conditions may be excluded from these circumstances if consistent with their medical condition

- If a confirmed case of an infectious disease that is part of *National Immunisation Program* any child not fully immunised should be excluded until risk is reduced
- If vomiting or diarrhoea occurs twice in a short space of time parent/guardians should be contacted to collect the child, they will need to remain home for 24hrs after symptoms cease.

### ***Managing Infection - Infectious Disease Outbreak (confirmed outbreaks only)***

- The *City of Stonnington Public Health & Immunisation Department* will allocate an Environmental Health Officer who will recommend additional measures to reduce the spread and manage the outbreak
- During a gastroenteritis outbreak, if a child vomits or has diarrhoea, parent/guardians will be contacted straight away to collect the child
- If there is a gastroenteritis outbreak children are required to remain home for 48 hours after symptoms cease based on *Department of Health* guidelines.

## **Relevant Legislation, Policies & Sources**

### *Absence Procedure*

*Department of Health Australian Health Protection Principal Committee*

*Dealing with Medical Conditions Policy*

*Education and Care Services National Law Act 2010*

*Education and Care Services National Regulations (2011 SI 653) – Version 1 January 2025*

*Food Safety Policy*

*Food Safety Program for Princes Close Early Years Service*

*Incident, Injury, Trauma, and Illness Policy*

*Immunisation Policy*

*National Health and Medical Research Council [Staying healthy: Preventing infectious diseases in early childhood education and care services - 6th Edition](#)*

*National Quality Standard*

*Public Health and Wellbeing Regulations 2019*

*Staffing and Continuity of Educators Policy*

*Victorian State Government Department of Health [A guide for the management and control of gastroenteritis in children's centres](#)*

*Victorian State Government Department of Health [Minimum Period of Exclusion from Primary Schools and Children's Services for Infectious Diseases Cases and Contacts](#)*

*Victorian Government Department of Health [No Jab No Play for early childhood education and care services | health.vic.gov.au](#)*

*Victorian State Government Department of Health [Teeth development in children | Better Health Channel](#)*

## **Related Service Forms**

City of Stonnington Cleaning Register – Illness Outbreaks

Enrolment Record

Incident, Injury, Trauma, and Illness Form

Occupational Health & Safety (OHS) Safe Work Procedure

Parent Handbook

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# Minimum period of exclusion from primary schools and children's services<sup>1</sup> for infectious diseases cases and contacts

Public Health and Wellbeing Regulations 2019

## Schedule 7

Column 1 Number	Column 2 Conditions	Column 3 Exclusion of cases	Column 4 Exclusion of Contacts
1	Chickenpox	Exclude until all blisters have dried. This is usually at least 5 days after the rash appears in unimmunised children, but may be less in previously immunised children	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise not excluded
2	Conjunctivitis	Exclude until discharge from eyes has ceased	Not excluded
3	Cytomegalovirus (CMV) infection	Exclusion is not necessary	Not excluded
4	Diarrhoeal illness*	Exclude until there has not been vomiting or a loose bowel motion for 24 hours	Not excluded
5	Diphtheria	Exclude until medical certificate of recovery is received following at least two negative throat swabs, the first not less than 24 hours after finishing a course of antibiotics and the other 48 hours later	Exclude family/household contacts until cleared to return by the Chief Health Officer
6	Glandular fever (Epstein-Barr Virus infection)	Exclusion is not necessary	Not excluded
7	Hand, Foot and Mouth disease	Exclude until all blisters have dried	Not excluded
8	Haemophilus influenzae type b (Hib)	Exclude until 48 hours after initiation of effective therapy	Not excluded
9	Hepatitis A	Exclude until a medical certificate of recovery is received, but not before 7 days after the onset of jaundice or illness	Not excluded
10	Hepatitis B	Exclusion is not necessary	Not excluded
11	Hepatitis C	Exclusion is not necessary	Not excluded
12	Herpes (cold sores)	Young children unable to comply with good hygiene practices should be excluded while the lesion is weeping. Lesions to be covered by dressing, where possible	Not excluded
13	Human immuno-deficiency virus infection (HIV)	Exclusion is not necessary	Not excluded
14	Impetigo	Exclude until appropriate treatment has commenced. Sores on exposed surfaces must be covered with a watertight dressing	Not excluded
15	Influenza and influenza like illnesses	Exclude until well	Not excluded unless considered necessary by the Chief Health Officer
16	Leprosy	Exclude until approval to return has been given by the Chief Health Officer	Not excluded
17	Measles	Exclude for at least 4 days after onset of rash	Immunised contacts not excluded. Unimmunised contacts should be excluded until 14 days after the first day of appearance of rash in the last case. If unimmunised contacts are vaccinated within 72 hours of exposure with any infectious case, or received Normal Human Immunoglobulin (NHIG) within 144 hours of exposure of any infectious case, they may return to the facility
18	Meningitis (bacterial — other than meningococcal meningitis)	Exclude until well	Not excluded
19	Meningococcal infection	Exclude until adequate carrier eradication therapy has been completed	Not excluded if receiving carrier eradication therapy

<sup>1</sup> Children's services cover the terms 'education and care service premises' or 'children's services centre' used in the regulations. It includes centres such as childcare centres and kindergartens.

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Column 1 Number	Column 2 Conditions	Column 3 Exclusion of cases	Column 4 Exclusion of Contacts
20	Mumps	Exclude for 5 days or until swelling goes down (whichever is sooner)	Not excluded
21	Molluscum contagiosum	Exclusion is not necessary	Not excluded
22	Pertussis (Whooping cough)	Exclude the child for 21 days after the onset of cough or until they have completed 5 days of a course of antibiotic treatment	Contacts aged less than 7 years in the same room as the case who have not received three effective doses of pertussis vaccine should be excluded for 14 days after the last exposure to the infectious case, or until they have taken 5 days of a course of effective antibiotic treatment
23	Poliovirus infection	Exclude for at least 14 days from onset. Re-admit after receiving medical certificate of recovery	Not excluded
24	Ringworm, scabies, pediculosis (head lice)	Exclude until the day after appropriate treatment has commenced	Not excluded
25	Rubella (German measles)	Exclude until fully recovered or for at least four days after the onset of rash	Not excluded
26	Severe Acute Respiratory Syndrome (SARS)	Exclude until medical certificate of recovery is produced	Not excluded unless considered necessary by the Chief Health Officer
27	Shiga toxin or Verotoxin producing Escherichia coli (STEC or VTEC)	Exclude if required by the Chief Health Officer and only for the period specified by the Chief Health Officer	Not excluded
28	Streptococcal infection (including scarlet fever)	Exclude until the child has received antibiotic treatment for at least 24 hours and the child feels well	Not excluded
29	Tuberculosis (excluding latent tuberculosis)	Exclude until receipt of a medical certificate from the treating physician stating that the child is not considered to be infectious	Not excluded
30	Typhoid fever (including paratyphoid fever)	Exclude until approval to return has been given by the Chief Health Officer	Not excluded unless considered necessary by the Chief Health Officer

## Regulation 111

A person in charge of a primary school, education and care service premises or children's services centre must not allow a child to attend the primary school, education and care service premises or children's services centre for the period or in the circumstances:

- \* specified in column 3 of the Table in Schedule 7 if the person in charge has been informed that the child is infected with an infectious disease listed in column 2 of that Table; or
- \* specified in column 4 of the Table in Schedule 7 if the person in charge has been informed that the child has been in contact with a person who is infected with an infectious disease listed in column 2 of that Table.