

## D-13 Illness and Infectious Diseases

### NQS

QA. 2.1	Health
QA. 2.1.2	Health practices and procedures.
QA. 2.2	Safety.
QA. 2.2.1	Supervision.
QA. 3.1.2	Upkeep.
QA. 5.1	Relationships between educators and children.
QA. 5.1.2	Dignity and rights of the child.
QA. 6.1	Supportive relationships with families.
QA. 7.1.2	Management systems.

### National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 85	Incident, injury, trauma and illness policies and procedures
Reg. 86	Notification to parents of incident, injury, trauma and illness
Reg. 87	Incident, injury, trauma and illness record
Reg. 88	Infectious diseases
Reg. 89	First aid kits
Reg. 160	Child enrolment records to be kept by approved provider and family day care educator
Reg. 161	Authorisations to be kept in enrolment record
Reg. 162	Health information to be kept in enrolment record
Reg. 168	Education and care service must have policies and procedures
Reg. 171	Policies and procedures to be kept available
Reg. 173	Prescribed information to be displayed

### My Time, Our Place

LO. 1	Children feel safe, secure, and supported
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### Policy Statement

We aim to provide a safe and hygienic environment that will promote the health of the children. We will take all reasonable steps to prevent the spread of infectious diseases through the implementation of procedures that are consistent with the guidelines of the state Health Authorities. Children with infectious diseases will be excluded from the Centre for the period recommended by the Department of Health.

All care and consideration will be given to the child who becomes ill while at the Centre, ensuring they are kept comfortable and ensuring the risk of cross infection is minimised until the child is collected by the parent/emergency contact.

## **Related Policies**

- ENOSHCP Policy A-4: Enrolment
- ENOSHCP Policy A-17: Privacy and Confidentiality
- ENOSHCP Policy D-2: Hygiene
- ENOSHCP Policy D-4: Food Safety and Handling
- ENOSHCP Policy D-10: First Aid
- ENOSHCP Policy D-14: Immunisation
- ENOSHCP Policy D-21: HIV/AIDS/HEP B & C

## **Procedure**

Parents will be informed about the illness and infectious diseases policy on enrolment through the family handbook.

A child or adult will be considered sick if he/she:

- sleeps at unusual times, is lethargic
- has a fever over 38 degrees
- is crying constantly from discomfort
- vomits or has diarrhoea
- is in need of constant one to one care
- has an infectious disease

If a child is unwell at home, parents will be asked not to bring the child to the Centre. Children who appear unwell when being signed in by their parent/guardian will not be permitted to be left at the service.

If a child becomes ill or develops symptoms at the Centre, the parents will be contacted to take the child home. Where the parents are not available, emergency contacts will be called to ensure the child is removed from the service promptly.

The child will be comforted, cared for and placed in a quiet isolated area with adult supervision until the child's parent or other authorised adult takes them home.

During a mild fever (38°C -39.5°C), natural methods will be employed to bring the child's temperature down until the parents or authorised collector arrives or help is sought. Such methods include; clothes removed as required, clear fluids given, tepid sponges administered.

If an educator is ill they should not report for work. Educators should contact the Centre as soon as possible to inform them that they are unable to attend work.

If an educator member becomes ill or develops symptoms at the Centre, they can return home if able or organise for someone to take them home.

The responsible person will organise a suitable replacement as soon as possible.

### **Infection Control Procedures**

Hand washing is the most effective way to reduce the spread of infection, particularly when handling food or bodily fluids. Staff and children must thoroughly wash their hands before and after handling or eating food, after toileting, after dealing with bodily fluids, after wiping noses, after coughing or sneezing, after handling rubbish, or after touching animals.

Gloves should be worn as a barrier when cleaning up bodily fluids or preparing and handling food. Hands must be washed after gloves are removed and gloves should never be used as a substitute for washing hands.

Safe and hygienic food practices will be maintained to prevent food contamination and the transmission of bacteria (see Food Handling and Hygiene Policy).

All staff dealing with open sores, cuts and bodily fluids with any child or adult shall wear disposable gloves. Staff with cuts, open wounds or skin disease such as dermatitis should cover their wounds and wear disposable gloves. Disposable gloves will be properly and safely discarded and staff must wash their hands after doing so.

If a child has an open wound, it will be covered with a waterproof dressing and securely attached.

If bodily fluids or blood get on the skin but there is no cut or puncture, wash away with warm soapy water.

In the event of exposure through cuts or chapped skin, promptly wash away the fluid in cold or tepid soapy water.

In the event of exposure to the mouth, promptly spit it out and rinse mouth with water several times.

In the event of exposure to the eyes, promptly rinse open eyes gently with cold or tepid tap water or saline solution.

In the event that CPR must be performed, disposable sterile mouth masks are to be used or, if unavailable, a piece of cloth. The staff in charge of the first aid kit will ensure that a mask is available at all times.

Any exposure should be reported to the responsible person and Management to ensure the proper follow up procedure occurs. Where a staff member or child has come into contact with another person's blood or bodily fluids, and they have a break in their skin, or the exposure has been through their mouth or eyes, they should present to a GP to advise the circumstances.

Any soiled clothing shall be handled using disposable gloves, placed and sealed in a plastic bag for the child's parents to take home.

Any blood or bodily fluid spills will be cleaned up immediately using gloves and the area further cleaned with warm water and detergent. Large blood spills should be further wiped with a diluted bleach solution, made up immediately prior to use. Staff must utilise gloves when using the bleach solution. After the clean-up of all spills, staff must remove gloves, and place in a sealed plastic bag along with any cloths used in the cleaning process, and dispose. Following the disposal of such items, staff should thoroughly wash their hands immediately.

### **Management of infectious disease outbreak**

All staff will ensure proper hygiene practices are carried out as outlined in the Hygiene policy.

Children and staff will be excluded from the Centre if they are ill with any contagious illness. This includes diarrhea and conjunctivitis. The period of exclusion will be based on the recommendations outlined by the Department of Health and will be explained to the parent/guardian. For example, children with diarrhea will be excluded for 24 hours after the diarrhea has ceased.

The decision to exclude or re-admit a child or educator will be determined by the responsible person on duty based on the child's/educator's symptoms, medical opinion and Department of Health guidelines for people who have an infectious disease or who have been exposed to an infectious disease.

The responsible person on duty has the right to refuse access if concerned about the child's health. A doctor's clearance certificate will be required for all infectious diseases such as measles, mumps diphtheria, hepatitis A, polio, tuberculosis, typhoid and paratyphoid, before returning to the Centre.

Parents will be informed about the occurrence of an infectious disease in the Centre (Regulation 173), ensuring that the individual rights of staff or children are not infringed upon.

The Public Health Unit will be notified if any child contracts a vaccine-preventable disease.

Payment of fees will be required for children during an outbreak of a vaccine-preventable disease, unless other arrangements discussed and agreed to by the management committee have been made.

### **Management of HIV/AIDS/Hepatitis B and C**

Under the Federal Disability Act and the Equal Opportunity Act, no discrimination will take place based on a child's/parent's/staff member's HIV status.

Discrimination in regard to access to the Centre is unlawful. A child with HIV or Hepatitis B or C has the right to obtain a position in the Centre should a position become available, and a staff member the right to equal opportunity of employment. The Centre has no right to advise other families attending the service of a child or educator's HIV status.

A child with AIDS shall be treated as any other child, as HIV is not transmitted through casual contact. The child shall have the same level of physical contact with educators as other children in the Centre.

Where educators are informed of a child, parent or other staff member who has HIV/AIDS or Hepatitis B or C, this information will remain confidential at all times. A breach of this confidentiality will be considered a breach of discipline.

Educators will ensure that no discussion is made other than insuring proper care of all children is maintained.

Proper, safe and hygienic practices will be followed at all times and implementation of procedures to prevent cross infection as identified in this policy will be implemented.

Educators and parents will be encouraged to participate in AIDS and Hepatitis education.

## **Sources**

- Education and Care Services National Regulations 2011
- National Quality Standard
- My Time, Our Place Framework for School Age Care in Australia
- Disability Discrimination Act 1992
- NSW Anti-discrimination Act 1977
- Work Health and Safety Act 2011
- Privacy Act 1988
- NSW Department of Health Guidelines
- Staying Healthy in Child Care Manual 5th Edition
- Equal Employment Opportunity Act 1987
- Network of Community Activities fact sheet – Guidance for safe working practices in OOSH Centres.

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