

	<b>POLICY CS-0012.D</b>
 <b>MACQUARIE</b> University	<b>MANAGING INFECTIOUS DISEASES</b>

<b>Purpose</b>	To provide a healthy environment for children by minimising the spread of infectious diseases.
<b>Overview</b>	<p>While Campus Life Children’s Services have stringent policies and procedures in place to provide a safe and healthy environment, we understand infectious diseases may occur in spite of these and procedures need to be in place to deal with these instances.</p> <p>Maintaining hygiene practices within the service and teaching children about health and hygiene will assist in the prevention of infectious diseases. Providing families with timely and current information will further support this process.</p> <p>For the purpose of this policy, <b>infectious diseases</b> are diseases that are caused by an infectious agent or that can be passed on (transmitted) by an infectious agent and can lead to illness. They also can be passed from one person to another.</p> <p><b>Illness whilst in child care</b> is when a child becomes ill while attending any Campus Life Children’s Service.</p> <p>A <b>parent</b> is someone who has legal responsibility for a child. This may be a natural parent (through birth) or a legal guardian (legally appointed) but does not include a parent who is prohibited by a court order from having contact with the child.</p>
<b>Scope</b>	All Campus Life Children’s Services
<b>The Policy</b>	<p>Common strategies for preventing the spread of infectious diseases will be incorporated into daily practices. These include:</p> <ul style="list-style-type: none"> <li>• Effective hand washing</li> <li>• Exclusion of ill children and staff</li> <li>• Immunisation</li> <li>• Cough and sneeze etiquette</li> <li>• Appropriate use of gloves</li> <li>• Effective environmental cleaning</li> </ul> <p><b>Enrolment</b> During enrolment, the service will collect information from families regarding the child’s health history and current immunisation status.</p>

All families will be informed during the enrolment process that they need to advise the service if their child is diagnosed with an Infectious Illness.

### **Immunisation**

Campus Life Children's Services will not enrol a child unless the parent/guardian has provided documentation that shows the child:

- Is fully vaccinated for their age, or;
- Has a medical reason not to be vaccinated, or;
- Is on a recognised catch-up schedule if their child has fallen behind with their vaccinations.

Parents must provide the early childhood service with one or more of the following documents before they can be enrolled:

1. A current Australian Childhood Immunisation Register (ACIR) Immunisation History Statement which shows that the child is up to date with their scheduled immunisations.
2. A current ACIR Immunisation History Form on which the immunisation provider has certified that the child is on a recognised catch-up schedule.
3. An ACIR Immunisation Exemption – Medical Contraindication Form which has been certified by an immunisation provider for a child who cannot receive one or more vaccine(s).

Other records such as the NSW Personal Health Record (Blue Book), a GP letter or an overseas immunisation record will not be accepted.

The centre will request ongoing updates from families in regards to immunisation and will maintain an Immunisation Register in order to track each child's status.

In the event of an outbreak of a vaccine preventable disease, unimmunised children may be required to stay at home for the duration of the outbreak. This will be based on recommendations in the latest edition of *Staying Healthy – Preventing infectious diseases in early childhood education and care services*.

During the orientation process, all staff will be advised if an unimmunised child enrolls in the centre.

### **Exclusion of Ill Children and Staff**

Children who have been diagnosed with, or are suspected of having, an infectious disease will be excluded from the service.

Exclusion periods as recommended in the latest edition of *Staying Healthy in Childcare – Preventing Infectious Diseases in Child Care* will be followed in the first instance. However, where the Public Health

Unit is involved they may provide advice that will supersede and override these recommendations and families will be advised of this.

Where a child falls ill at the centre and is suspected of having an infectious disease they will be required to be collected as soon as possible from the services. With the exception of fever, vomiting or diarrhoea, if the child is confirmed to have an infectious disease, they may only return to the centre once the exclusion period has expired and with a supporting letter from a registered medical practitioner stating they are no longer contagious. If the registered medical practitioner does not consider the child to have an infectious disease then the child may only return to the centre with a supporting letter from that medical practitioner stating this.

If the child has a fever, vomiting or diarrhoea then they may return to the centre once they have been symptom free at home for at least 24 hours.

Campus Life Children's Services staff are required to follow the same exclusion periods as children and will adhere to the Campus Life Leave Policy in regards to provision of medical certificates.

Different exclusion periods will apply to people whose work involves food handling. If staff have vomiting or diarrhoea and their work involves food handling, they should not return to work until they have been symptom-free for 48 hours. Staff whose work involves serving food may return to work after 24 hours symptom-free but refrain from serving food for that first day.

A child presenting with a suspected or confirmed infectious disease will be removed from direct contact with other children until a parent or authorised emergency contact arrives to collect the child. In order to maintain staff:child ratios and for child protection reasons, this separation may be within the child's normal playroom, but away from other children, or in the Centre Manager's office.

Any toys or equipment that the child may have come into contact with on the day will be immediately removed from the area and cleaned as per recommended cleaning instructions.

The Illness Register will be updated with any cases of suspected or confirmed infectious diseases.

A child will be excluded if they appear unwell regardless if they have a fever or not.

A child is considered unwell if they are not participating in the program as they normally would and/or they require more 1 to 1 care from an adult than they normally would. This might present through any of the following symptoms:

- Fever
- Lethargy and decreased activity
- Drowsiness

- Breathing difficulty
- Poor circulation (child is pale, hands and feet are cold, may be turning blue)
- Poor eating
- Decreased urine output (fewer wet nappies than usual in infants)
- Rash
- Pain

### **Vomiting and Diarrhoea**

Diarrhoea is frequent passing of loose or watery faeces more frequently than is normal for that particular person. Vomiting may or may not occur at the same time.

When a child has two instances of vomiting and/or diarrhoea at the service, the parents will be contacted to collect the child from the centre.

Where there is an existing case of either vomiting or diarrhoea in the centre all subsequent children exhibiting the same symptoms will be excluded from the service after only one instance of either. If a child returns to the centre after having vomiting or diarrhoea and then exhibits the same symptoms in the day of their return, parents will be contacted to collect the child immediately.

### **Fever**

A child is considered to have a fever when the body temperature rises to above 38°C. Fever is usually a sign of infection in the body (often a virus) and it helps the body's immune system fight off the infection.

When a child has a temperature at or above 38°C, the parents will be contacted to collect the child from the centre. Paracetamol may be administered if required and only if previous written authorisation has been provided by the parents. (Refer to the *Managing Fever in a Child Procedure* for more information.)

### **Notifying families of cases of infectious diseases**

Families will be notified via email and paper notices in the centre as soon as a suspected case of an infectious disease is confirmed, or a report is made by a family.

This notification will:

- Identify the room/s where the infectious disease occurred
- keep the identity of the child/ren confidential
- provide information about the exclusion period and control management strategies
- be updated as the situation requires

### **Returning to the centre after an Infectious Illness**

Children and staff must be clear of infection prior to returning to the centre.

Where a medical certificate has provided clearance but the Nominated Supervisor or Responsible Person on duty is not comfortable with the health of the child then they may refuse attendance. It is recommended in this instance that the Nominated Supervisor/Responsible Person first contact the Public Health Unit for advice.

The final decision to allow a child to return to the service sits with the Nominated Supervisor or Responsible Person, regardless of a medical certificate being presented.

### **Public Health Unit**

Campus Life Children's Services have a responsibility to alert the Public Health Unit of outbreaks of some specific diseases. At these times, the Public Health Unit may recommend alternative management strategies to control the outbreak such as increasing exclusion periods, and these decisions will be communicated to families.

### **Pregnancy**

There are a number of infectious diseases which can affect the unborn child. These include:

- Cytomegalovirus
- Hand, foot and mouth
- Fifth disease (Slapped Cheek)
- Listeriosis
- Rubella (German Measles)
- Toxoplasmosis
- Varicella (Chicken Pox)

All staff and parents who are pregnant, or think they could be pregnant, are encouraged to seek medical advice in the event any of these infectious diseases occur at the centre.

### **General Practices and Strategies**

The service will be professionally cleaned and the environment will be clean and hygienic at all times.

The staff will provide opportunities for children to understand and practice hygiene strategies at routine times and through intentional teaching.

The staff will implement the health and hygiene strategies of the service including:

- Hand washing – washing and drying thoroughly, and remembering to include babies when hand washing
- Nappy changing procedures
- Wearing gloves (especially when in direct contact with bodily fluids)
- Appropriate handling and preparation of food.

Staff will remain up to date with hygiene and health and safety strategies by attending relevant professional development opportunities.

	<p>Families will agree to:</p> <ul style="list-style-type: none"> <li>• Keep their child at home if they appear unwell</li> <li>• Keep their child at home if their child has had any form of medication including paracetamol (eg Panadol) or ibuprofen (eg Nurofen) within the last 12 hours</li> <li>• Keep their child at home for 24 hours following the commencement of a course of antibiotics</li> <li>• Observe the recommended exclusion periods</li> <li>• Inform the service if there has been any infectious diseases within their family that their child may unknowingly be carrying</li> <li>• Understand that some children and staff may be affected more severely by infectious diseases because of their circumstances, such as pregnancy, cultural background, and low immunity</li> <li>• Request their medical practitioner provide them with a clearance certificate that outlines the infectious disease that was present and when their child will be able to return to the Centre</li> <li>• Ensure the child is symptom free of fever, vomiting or diarrhoea for at least 24 hours at home before returning to the Centre</li> </ul>
<b>Keywords</b>	

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