

2.5 Infection Control

Minimise Spread of Infectious Diseases and Exclusion

Applies to: All Koorana staff working in Preschools, families attending Koorana Preschools and visitors.

Purpose

To minimise the spread of infectious diseases between children, visitors and staff, by conforming to National Health and Medical Research Council (NHMRC) requirements for exclusion of children with infectious diseases and other legislative requirements.

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Approved by: CEO

Policy context: This policy relates to	
Standards or other external requirements	<p>National Quality Standards – Quality Area 2 – Standard 2.1, Elements 2.1.3 & 2.1.4</p> <p>http://files.acecqa.gov.au/files/National-Quality-Framework-Resources-Kit/NQF-Resource-03-Guide-to-NQS.pdf</p>
Legislation or other requirements	<p>Children (Education and Care Services National Law Application) Act 2010</p> <p>http://www.legislation.nsw.gov.au/#/view/act/2010/104</p> <p>Education and Care Services National Regulations [Regulation 88; (2)(c) under Regulation 168]</p> <p>http://www.acecqa.gov.au/national-regulations</p> <p>Work Health and Safety Act 2011</p> <p>https://www.legislation.gov.au/Details/C2016C00887</p> <p>Work Health and Safety Regulation 2011</p> <p>http://www.legislation.nsw.gov.au/#/view/regulation/2011/674</p>

	Public Health Act 1991 (NSW) http://www.legislation.nsw.gov.au/#/view/act/1991/10
Contractual obligations	N/A
Resources	Staying Healthy in Childcare, NHMRC, 5th edition, 2012 http://www.imagineeducation.com.au/files/GapTraining/Staying_Healthy_5th_Edition.pdf World Health Organisation http://www.who.int/en/

Documents related to this policy

Related policies	2.6 Hand Washing 2.7 Nappy changing and toileting 2.10 Nutrition, Food safety and Dental care
Forms, record keeping or other organisational documents	Nappy Changing Procedure Toileting Procedure Hand Washing Procedure

Definitions

"Koorana" means Koorana Child and Family Services Incorporated.

"Parents" includes a legal guardian.

"Visitors" includes students, volunteers, visiting professionals, performers and contractors.

"Staff" is a Koorana staff member working in the Preschool, e.g. Educator, Administrator or Key Worker. This may also include other Koorana staff such as Case Managers, Early Linker, Therapists, Head Office Administrators, Home and Community Based Key Workers and Koorana Management when visiting or working in the Preschool.

"Infectious disease" are caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi; the diseases can be spread, directly or indirectly, from one person to another. (World Health Organisation)

"Exclusion" means not being able to attend Preschool until cleared by a medical professional or the Preschool Leader to resume attending.

POLICY STATEMENT

Infections can spread through contact with body fluids that are airborne or on the skin. Furthermore, most viruses, bacteria or parasites can survive on surfaces and can be transmitted to another person via a surface. Excluding sick children and staff is one of the most important ways of limiting the spread of infection in a children's service.

By following the exclusion periods set down by the NHMRC of infectious children, educators and other staff will significantly reduce the risk of the spread of diseases to other healthy children and staff. The exclusion periods recommended by the NHMRC are based on the time a child or staff member is infectious to others. Contacts of certain infectious diseases may, at the discretion of the local Public Health Unit, be excluded for their own safety.

In addition to exclusion, regular effective washing of both adult and children's hands significantly reduces the risk of transmission of infectious diseases as well as immunisation and additional strategies such as appropriate use of gloves, effective cleaning and cough and sneeze etiquette.

The common ways infections spread include

1. Coughing or sneezing (droplet transmission) – *Tiny droplets are spread into the air and onto surrounding surfaces.*
2. Breathing contaminated air (airborne transmission) – *Airborne transmission is different from droplet transmission because the germs are in even smaller particles than droplets, and they can be infectious over time and distance.*
3. Direct contact (contact transmission) – *Germs can spread through contact with infectious body fluids, such as mucus, saliva, vomit, blood, urine and faeces.*
4. Animals – *Germs can be present on the skin, hair, feathers and scales of animals, and in their faeces, urine and saliva.*
5. Food – *If the food is not heated or chilled properly.*

PRACTICES

When suspecting an infectious disease look for signs and symptoms that a child may be unwell including

- unusual behaviour (child is irritable or less active than usual, more upset than usual, seems uncomfortable or just seems unwell)
- temperature
- drowsiness
- poor circulation, e.g. muscle cramps and painful legs, tissue swelling, discoloured skin, Increased tiredness, concentration problems
- poor urine output
- diarrhoea and/or vomiting
- loss of appetite

- conjunctivitis (tears, eyelid lining is red, irritated eyes, swelling and discharge from eyes)
- unusual spots or rashes
- patch of infected skin (crusty skin or discharging yellow area of skin)
- very pale faeces
- sore throat or difficulty in swallowing
- headache, stiff neck, sensitivity to light
- severe, persistent or prolonged coughing
- frequent scratching of the scalp or skin
- breathing trouble (particularly in babies under 6 months old)
- pain

If a child looks too ill on arrival at the Preschool, the Educator can ask the parent or guardian to take the child to the doctor to get a clearance certificate or send them home.

If an infectious disease is suspected Preschool Educators will:

- Notify the family as soon as possible, request they, or a responsible person nominated by the parent or guardian, pick up and take the child to the doctor/hospital.
- Isolate the child from other children providing the sick child and all other children can be adequately supervised until the child has been picked up. This does not have to be in another room as long as interactions and sharing of objects does not occur.
- Assess the child for any need for first aid or emergency treatment, make them comfortable and reassure them.
- Ask the parent to contact the Preschool Leader to inform the service of the diagnosis so appropriate action can be taken.
- Inform the family of when they can bring the child back to care and if they will require a doctor's clearance certificate.
- Inform all families as soon as possible of the presence of the suspected infectious disease at the Preschool. Ensure confidentiality.
- When a confirmed outbreak of an infectious disease has occurred, discuss the situation with the local Public Health Unit, and request the Public Health Unit to provide written advice and information about identification, prevention and management of possible infection or serious illness. The WorkCover Authority may also need to be notified.
- Ensure appropriate cleaning of the area and equipment is carried out.

Vomiting and diarrhoea

If a child vomits or has diarrhoea at Preschool, Educators will make a decision whether or not to call the parent after the first bout and whether or not the child needs to be collected. The parent/guardian will be called if the child has a second bout of vomiting or diarrhoea and the child needs to be collected.

Exclusion of Sick Children and Staff

Excluding sick children and staff is one of the most important ways of limiting the spread of infection in children's services. The spread of certain infectious diseases can be reduced by excluding a person who is known to be infectious from contact with others who are at risk of catching the infection.

Exclude children/staff who:

- Are ill and may need to see a doctor.
- Are too ill to participate in the normal daily activities.
- May require isolation/extra supervision, which may impact on the care, safety and supervision of other children in care.
- Have signs/symptoms of a possible infectious disease.

Children and staff will be excluded for the minimum time required for infectious conditions. The recommended minimum periods of exclusion are based on risk of infection; however, a child or staff member may need to stay at home longer than the exclusion period to recover from an illness. A doctor's certificate will be required to return to the Preschool stating the diagnosis and stating that they are no longer infectious.

When excluding children or staff, staff will:

- Identify when symptoms or a medical diagnosis fit a condition with an exclusion period.
- Refer to the recommended minimum periods of exclusion table.
- Advise the parents or staff member to refer to National Health and Medical Research Council to determine when they may return to the Preschool.
- If required contact the Public Health Unit.

The need for exclusion will depend upon:

- The National Health and Medical Research Council's recommended minimum exclusions periods for infectious conditions.
- The ease with which the infection can be spread.
- The ability of the infected person to follow hygiene precautions.
- The severity of the disease.
- The child's level of wellness and ability to participate.

Standard Precautions

Using standard infection control precautions will reduce the occurrence and risks of infectious disease.

Standard precautions include:

- Good hygiene practices, including hand washing.
- Use of personal protective equipment, e.g. disposable gloves.
- Appropriate handling and disposal of infectious waste.
- Appropriate cleaning of areas and contaminated items.
- Appropriate exclusion of ill children and Educators/staff.
- Use of alcohol-based hand sanitisers for situations where hand washing facilities are not readily available, such as when taking children on excursions.
- Covering cuts with water-resistant dressings.

- Separate the ill child/ren and keep under supervision until they can be picked up by their family or nominated authority to collect.
- The use of single use disposable medicine cups or syringes.
- The use of digital thermometers and between each use, clean according to the manufacturer's instructions, or by wiping with a single use alcohol swab.
- Keeping up to date relevant information about infectious diseases.
- Provide education and advice to parents and guardians including information in community languages for CALD families.
- Being vigilant and observe for the signs and symptoms of the same disease occurring in any other child or person that has been in contact with the child (most incubation periods for common infectious diseases are around 1 to 2 weeks).
- Children and staff who have HIV, AIDS, Hepatitis B, or Hepatitis C, are not excluded (unless the person is acutely infectious or has an infectious secondary infection). The service may not be aware that a child or a staff member has these illnesses. It is the responsibility of the parents of the child and the individual staff member to monitor their condition and where necessary exclude themselves from the service if they are acutely infectious or have a secondary infection.
- Children who have vomited, suffered diarrhoea or gastroenteritis may not attend the centre until they have not had any symptoms for **24 hours**. The child must have eaten solid foods, without any signs of vomiting or diarrhoea, before they can return.
- Educators may not attend the Preschool until they have not had any symptoms for **48 hours** after diarrhoea or vomiting ceases. (NSW Health exclusion periods); Administration staff may return after 24 hours.
- Children with fevers of 38°C or higher must not attend the Preschool until the fever has ceased.
- Teaching and following appropriate 'cough and sneeze' etiquette will lead to preventing the spread of germs that are carried in droplets is by coughing or sneezing into your inner elbow, or by using a tissue to cover your mouth and nose, then putting all tissues in the rubbish bin straight away and cleaning hands with either soap and water or an alcohol-based rub.

Record Keeping - Infectious Diseases

The Preschool will keep a record of all illnesses of children and staff for any significant infectious disease. These records will include the date, symptoms, diagnosis (confirmed or suspected) and action taken, e.g. exclusion, family informed.

This assists to:

- Prevent further outbreaks/spread of disease.
- Demonstrate if the approach to infection control is working.
- Identify the cause of any outbreak.

Immunisation

Immunisation is one of the strategies to prevent children and staff becoming infected with vaccine preventable infectious diseases.

Preschools will:

- Encourage staff to be fully immunised.

- Ensure children enrolled are fully immunised, have an approved exemption or be on an approved catch up schedule.
- Maintain a record of each child's immunisation including updates.
- Inform families of children and staff that are not fully immunised or not immunised during outbreaks of vaccine-preventable disease.

Informing the Public Health Unit

The Preschool Leader or the Responsible Person of the Preschool will notify their local Public Health Unit by phone as soon as possible after they are made aware that a child enrolled at the Preschool is suffering from one of the following vaccine preventable diseases:

- Diphtheria
- Haemophilus influenzae Type b (Hib)
- Measles
- Mumps
- Meningococcal disease
- Pertussis ("whooping cough")
- Poliomyelitis
- Rubella ("German measles")
- Tetanus

The Preschool Leader or the Responsible Person will also notify the Public Health Unit by phone as soon as possible after they are made aware that two or more persons in the same group are suffering from gastrointestinal illness (e.g. Shigellosis, Salmonellosis, Rotavirus, Norovirus, Giardiasis, Gastroenteritis, Cryptosporidiosis, Campylobacter) or when they suspect an infectious disease outbreak is affecting their Preschool, e.g. outbreaks of a respiratory illness.

The Public Health Unit staff may be able to help:

- Identify the cause of the illness.
- Explain the consequences to children and staff of an infection.
- Trace the source of the infection (for example contaminated food).
- Advise on appropriate control measures (for example vaccines, antibiotics, exclusion, education, infection control practices).
- Provide valuable advice and support.
- Provide resources that may be necessary to manage outbreaks.

Please Note

This Policy is not flexible. It is intended for the protection of children and adults in the Preschool environment. Our Preschools are not appropriately set up to care for ill children.

Parents need to be aware that the Preschool will need to be able to contact either the parents or the nominated emergency contacts at *all times*. Educators are not responsible for decisions about the primary health care of sick children. Parents can make these important decisions. If the parents or nominated contact persons cannot be contacted and a child is sufficiently ill or distressed because of illness, an ambulance will be called to take the child to hospital.



*Koorana Child and Family Services Incorporated: Preschool Infection Control -
Minimise Spread of Infectious Diseases and Exclusion Policy*

Recommended minimum exclusion periods

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Condition	Exclusion of case	Exclusion of contacts ^a
Campylobacter infection	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded
Cytomegalovirus (CMV) infection	Not excluded	Not excluded
Conjunctivitis	Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis	Not excluded
Cryptosporidium	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Diarrhoea (No organism identified)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Fungal infections of the skin or nails (e.g. ringworm, tinea)	Exclude until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Glandular fever (mononucleosis, Epstein Barr virus [EBV] infection)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
Haemophilus influenzae type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded. Contact a public health unit for specialist advice
Head lice (pediculosis)	Not excluded if effective treatment begins before the next day at the education and care service. The child does not need to be sent home immediately if head lice are detected	Not excluded
Hepatitis A	Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice	Not excluded. Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes simplex (cold sores, fever blisters)	Not excluded if the person can maintain hygiene practices to minimise the risk of transmission. If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry. Sores should be covered with a dressing, where possible	Not excluded
Human immunodeficiency virus (HIV)	Not excluded. If the person is severely immune compromised, they will be vulnerable to other people's illnesses	Not excluded
Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)	Not excluded	Not excluded
Hydatid disease	Not excluded	Not excluded
Impetigo	Exclude until appropriate antibiotic treatment has started. Any sores on exposed skin should be covered with a watertight dressing	Not excluded
Influenza and influenza-like illnesses	Exclude until person is well	Not excluded
Listeriosis	Not excluded	Not excluded
Measles	Exclude for 4 days after the onset of the rash	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 appearance of the rash in the last case
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case
Molluscum contagiosum	Not excluded	Not excluded
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner)	Not excluded
Norovirus	Exclude until there has not been a loose bowel motion or vomiting for 48 hours	Not excluded

Koorana Child and Family Services Incorporated: Preschool Infection Control - Minimise Spread of Infectious Diseases and Exclusion Policy

Pertussis (whooping cough)	Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing	Contact a public health unit for specialist advice about excluding non-vaccinated and incompletely vaccinated contacts, or antibiotics
Pneumococcal disease	Exclude until person is well	Not excluded
Roseola	Not excluded	Not excluded
Ross River virus	Not excluded	Not excluded
Rotavirus infection	Exclude until there has not been a loose bowel motion or vomiting for 24 hours ^a	Not excluded
Rubella (German measles)	Exclude until fully recovered or for at least 4 days after the onset of the rash	Not excluded
Salmonellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Scabies	Exclude until the day after starting appropriate treatment	Not excluded
Shigellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Toxoplasmosis	Not excluded	Not excluded
Tuberculosis (TB)	Exclude until medical certificate is produced from the appropriate health authority	Not excluded. Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Varicella (chickenpox)	Exclude until all blisters have dried—this is usually at least 5 days after the rash first appeared in non-immunised children, and less in immunised children	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise, not excluded
Viral gastroenteritis (viral diarrhoea)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Worms	Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment has occurred	Not excluded

^a The definition of 'contacts' will vary according to the disease—refer to the specific fact sheet for more information.

^b If the cause is unknown, possible exclusion for 48 hours until 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.

Adapted from SA Health Communicable Disease Control Branch: <http://www.dh.sa.gov.au/pehs/branches/branch-communicable.htm>. Note that exclusion advice is consistent with Series of National Guidelines (SANGs) where available.

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