

Infectious Diseases Policy

To be read with Immunisation and Disease Prevention Policy

Quality Area 2 Children's Health and Safety

Standard 2.1 Each child's health and physical activity is supported and promoted.

Standard 2.1.2 Effective illness and injury management and hygiene practices are promoted and implemented

Aim

Immunisation is a simple, safe and effective way of protecting individuals against harmful diseases before they are exposed to them in the community. Immunisation not only protects individuals, but also others in the community, by reducing the spread of disease.

Scope

Children
Parents
Families
Educators
Management
Visitors
Volunteers

Implementation

- The service will 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 the local Public Health Unit are available under the 'Infectious Diseases Requiring Notification' to the local Public Health Unit and must occur within 24 hours. The Nominated Supervisor is responsible for notifying the local Public Health Unit.
- 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. Many illnesses, while not fitting exclusion criteria, can transmit disease to other children in care, and many non-exclusion diseases can make a child too ill to participate in normal care activities.

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 the next nominated individual will be contacted. The contact will be informed of the child's condition and asked to collect the child from the centre as soon as possible.

Any individual 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 the child has used is disinfected. These items will be washed separately and if possible, air-dried 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 health related information obtained by the service and educators in relation to any child or their family.
- If a child or educator has been unable to attend the service because of an infectious illness, the individual must provide a doctors certificate, which specifically states the child/staff member is able to return to the service.

Infectious Diseases requiring Notification to the local Public Health Unit

In Victoria, children's services centres, such as childcare centres and kindergartens, have a responsibility under the Public Health and Wellbeing Regulations 2009 to manage infectious diseases.

Infectious Diseases only require notification from doctors and laboratories. A list of diseases can be found on following form:

<https://www2.health.vic.gov.au/public-health/infectious-diseases/notify-condition-now>

The National Health and Medical Research Council (NHMRC) recommend that educators should be immunised against:

- Hepatitis A.
- Measles-Mumps-Rubella (MMR)
 - Educators born during or after 1966 who do not have their vaccination records of two doses of MMR or do not have antibodies for rubella require vaccination.
- Varicella (if the staff member has not been previously infected with chickenpox).
- Pertussis (an adult booster dose is especially important for those educators caring for young children who are not fully vaccinated.
- Although the risk is low, educators who care for children with intellectual disabilities should seek advice about hepatitis B immunisation if the children are unimmunised.

Recommended Minimum Periods of Exclusion

*Information taken from National Health and Medical Research Council.
Staying Healthy in Child Care. 4th edition, Commonwealth of Australia 2005.*

Children who are unwell should not attend the service.

Definition of 'contacts' will vary according to disease. Please refer to specific fact sheets for definition of 'contacts'.

Amoebiasis (Entamoeba histolytica)

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

Exclusion of contacts - not excluded.

Campylobacter

Exclude until there has not been a loose bowel motion for 24 hours.
Exclusion of contacts - not excluded.

Candidiasis (see 'Thrush')

Chickenpox (Varicella)

Exclude until all blisters have dried. This is usually at least five days after the rash first appeared in unimmunised children and less in immunised children. Any child with an immune deficiency (e.g. leukaemia) or receiving chemotherapy should be excluded for their own protection. Exclusion not necessary in all other cases.

CMV (Cytomegalovirus infection)

Exclusion is NOT necessary.

Exclusion of contacts - not excluded.

Cryptosporidium infection

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

Exclusion of contacts - not excluded.

Diarrhoea (No organism identified)

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

Exclusion of contacts - not excluded.

Diphtheria

Exclude until medical certificate of recovery is received following at least two negative throat swabs. The first swab not less than 24 hours after finishing a course of antibiotics and must be followed by another swab 48 hours later.

Exclude contacts that live in the same house until cleared to return by an appropriate health authority.

German measles (see 'Rubella')

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 individual 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 is commenced prior to the next day at childcare (i.e. 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, but not before seven days after the onset of jaundice.

Exclusion of contacts - not excluded.

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 individual is developmentally capable of maintaining hygiene practices to minimise the risk of transmission. If the individual 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 individual is severely immunocompromised, they will be vulnerable to other individual's illnesses.

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.

Legionnaires' disease

Exclusion is NOT necessary.

Exclusion of contacts - not excluded.

Leprosy

Exclude until approval to return has been given by an appropriate health authority.

Exclusion of contacts - not excluded.

Measles

Exclude for 4 days after the onset of the rash. Immunised and immune contacts are not excluded. Non-immunised contacts of a case are to be excluded from child care until 14 days after the first day of appearance of rash in the last case, unless immunised within 72 hours of first contact during the infectious period with the first case.

All immunocompromised children should be excluded until 14 days after the first day of appearance of rash in the last case.

Meningitis (bacterial)

Exclude until well and has received appropriate antibiotics.

Exclusion of contacts - not excluded.

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.

Molluscum contagiosum

Exclusion is NOT necessary.

Exclusion of contacts - not excluded.

Mumps

Exclude for nine 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.

Parvovirus infection (fifth disease, erythema infectiosum, slapped cheek syndrome).

Exclusion is NOT necessary.

Exclusion of contacts - not excluded.

Pertussis (see 'Whooping Cough')

Respiratory Syncytial virus

Exclusion is NOT necessary.

Exclusion of contacts - not excluded.

Ringworm/tinea

Exclude until the day after appropriate antifungal treatment has commenced.

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.

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.

Salmonella infection

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

Exclusion of contacts - not excluded.

Scabies

Exclude until the day after appropriate treatment has commenced.

Exclusion of contacts - not excluded.

Scarlet fever (see 'Streptococcal sore throat')

School sores (see 'Impetigo')

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 individual has received antibiotic treatment for at least 24 hours and feels well.

Exclusion of contacts - not excluded.

Thrush (Candidiasis)

Exclusion is NOT necessary.

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.

Typhoid, Paratyphoid

Exclude until medical certificate is produced from appropriate health authority
Contacts - Not excluded unless considered necessary by public health authorities.

Varicella (see 'Chickenpox')

Viral gastroenteritis (viral diarrhoea)

Children are to be excluded until there has not been a loose bowel motion or vomiting for 24 hours.

Exclusion of contacts - not excluded.

Warts

Exclusion is NOT necessary.
Exclusion of contacts - not excluded.

Whooping cough (Pertussis)

Exclude until five days after starting appropriate antibiotic treatment or for 21 days from the onset of coughing. Contacts that live in the same house as the case and have received less than three doses of pertussis vaccine are to be excluded from the service until they have had five days of an appropriate course of antibiotics. If antibiotics have not been taken, these contacts must be excluded for 21 days after their last exposure to the case while the individual was infectious.

Worms

Exclude if loose bowel motions present.
Exclusion of contacts - not excluded.

Sources

Education and Care Services National Regulations 2011
National Quality Standard
Department of Health and Aging, National Immunisation Program Schedule
NHMRC. Staying Healthy in Child Care Preventing infectious diseases in child care 4th edition
Public Health and Wellbeing Act 2008

Policy Reviewed	Modifications	Next Review Date
January 2018	Updated Infectious disease notification website Updated the National Quality Standards references to comply with revised standards.	January 2019