



# Policy Update: Illness and Infectious Diseases and Pandemic Management

This policy is extracted from Coogee Care Centre Policies & Procedures (V#8 13/12/2019), found on [www.coogeehealthcare.org.au/Policies-procedures](http://www.coogeehealthcare.org.au/Policies-procedures). This section is reviewed and updated from 23/03/2020. This information supercedes any reference to illness and infectious disease or pandemic management, including the section "Illness and Infectious Diseases" on page 92 of the current V#8 Policies & Procedures.

## 1. Illness and Infectious Diseases

### 1.1 POLICY STATEMENT

Our Service will provide a safe and hygienic environment that will promote the health and wellbeing of the children ("My Time, Our Place" Outcome 3). We will take all reasonable steps to prevent and manage the spread of infectious diseases through the implementation of procedures that are consistent with guidelines of State Health Authorities.

### 1.2 CONSIDERATIONS

- Education and Care Services National Regulations r85, 86, 87, 88
- National Quality Standard 2.1
- Other Service policies/documentation; Parent Handbook, Staff Handbook, Enrolment and Orientation Policy, Providing a Child Safe Environment Policy, Incident, Injury, Illness and Trauma Policy.
- Other; Disability Discrimination Act 1975, NSW Anti-discrimination Act 1977, Work Health and Safety Act 2011, Staying Healthy in Child Care (5th Edition) NSW Dept. of Health guidelines.

### 1.3 PROCEDURE

#### 1.3.1 Prevention

- Universal precautions will be consistently applied across service practices to ensure prevention of the spread of infections is effective.

- A regularly updated copy of the Department of Health Guidelines on Infectious Diseases will be kept at the service for reference by staff, management and families.
- If a child is showing symptoms of an infectious disease whilst at home, families are not permitted to bring the child to the service. Children who appear unwell when being signed in by their family will not be permitted to be left at the service.
- Hand washing will be practiced by all educators and children before preparing or eating food and after all dirty tasks such as toileting, cleaning up any items, wiping a nose, before and after administering first aid, playing outside or handling an animal. In addition, educators will wash their hands before leaving the service.
- The service will be cleaned daily and rosters maintained as evidence of the cleaning tasks being undertaken.
- All toilet facilities will have access to a basin or sink with running water, soap and hand drying facilities.
- Women and girls will have access to proper feminine hygiene disposal.
- Soap and paper towels will also be available in the kitchen area.
- All toilets, hand basins and kitchen facilities used by the service will be cleaned and disinfected daily. General surfaces will be cleaned with detergent after each activity and at the end of the day and all contaminated surfaces will be disinfected.
- Toys will be washed, cleaned and disinfected on a regular basis with material items such as dress ups and cushion cover laundered as required but a minimum of quarterly.
- Educators will maintain and model appropriate hygiene practices and encourage the children to adopt effective hygiene practices. As part of children taking increasing responsibility for their own health and physical wellbeing, educators should acknowledge children who are modelling hygiene practices.
- Informal education in proper hygiene practices will be conducted on a regular basis, either individually or as a group through conversations, planned experiences, inclusion in service routines and reminders. Health and hygiene practices will be highlighted to parents, and where appropriate information sheets or posters will be used by educators to support these practices.
- Educators will aim to provide a non-judgmental approach to differences in hygiene practices and standards between families in order to support children's developing sense of identity. Where practices differ to standards expected in the service remind children that these are practices to be followed in the service but they may be different for them at home.
- All educators will be advised upon appointment to the position to maintain their immunity to common childhood diseases, tetanus and Hepatitis B through immunisation with their local health professional

### **1.3.2 Management**

- Children and staff with infectious diseases will be excluded from the service for the period recommended by the Department of Health.
- The Centre will provide information to families about an infectious disease at the Centre.
- Where there is an outbreak of an infectious disease, each enrolled child's family/emergency contact will be notified within 24 hours under ordinary circumstances. The service will maintain confidentiality when issuing the notification and ensure it is not prejudicial or identify any children.
- Under NSW public health guidelines, children with head lice are not excluded as long as head lice management is ongoing. This had been interpreted as excluding the child from the service until treatment has commenced. A child with head lice can be treated one evening and return to the centre the next day, even if there are still some eggs presents.
- In the event of an outbreak of vaccine-preventable disease at the service or school attended by children at service, parents of children not immunised will be required to stay at home for the duration of the outbreak, for their own protection.
- If a child develops symptoms of a possible infectious disease whilst at the service, their family will be contacted to take the child home. Where they are not available, emergency contacts will be called to ensure the child is removed from the service promptly.
- All staff dealing with open sores, cuts and bodily fluids shall wear disposable gloves and practice universal precautions.
- Staff with cuts, open wounds or skin diseases such as dermatitis should cover their wounds and wear disposable gloves.
- Disposable gloves will be properly and safely discarded and staff are to 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 gets on the skin but there is no cut or puncture, wash away with hot soapy water.
- In the event of exposure through cuts or chapped skin, promptly wash away the fluid, encourage bleeding and wash 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 gently with cold or tepid tap water or saline solution.
- In the event of having to perform CPR, disposable sterile mouth masks are to be used, or if unavailable a piece of cloth. The staff person in charge of the first aid kit will ensure that a mask is available in the kit at all times.
- Any exposure should be reported to the Nominated Supervisor and management to ensure proper follow up procedures occur.
- When assisting children with toileting and nappy changing, staff will ensure that they wear gloves and wash their hands afterwards. They will also encourage the child to wash their hands.

- Staff will consider the resources they are using when assisting school age children when toileting to ensure they are age appropriate and ensure privacy for the child and ease of use by staff.
- Any soiled clothing shall be handled using disposable gloves and be placed in a sealed plastic bag for the parents to take home for laundering. The service will never rinse soiled clothing.
- Any blood or bodily fluid spills will be cleaned up immediately, using gloves and the area fully disinfected. Cloths used in cleaning will be wrapped in plastic bags and properly disposed of according to current infection control guidelines.
- 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.
- The Nominated Supervisor will at all times follow the recommendations as outlined in the Health Department document.
- The decision to exclude or re-admit a child or staff member will be the responsibility of the Nominated Supervisor based on the child's symptoms, medical opinion and Department of Health guidelines for children who have an infectious disease or who have been exposed to an infectious disease.
- The Nominated Supervisor or staff members have the right to refuse access if concerned about the child's health.
- Children and staff with diarrhoea will be excluded for 24 hours after the symptoms have disappeared or after a normal stool.
- 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 service.

### **1.3.3 Management of HIV/AIDS/Hep B and C**

- Under the Federal Disability Act and the Equal Opportunity Act, there will be no discrimination based on a child's/family/educator's HIV status.
- A child with AIDS shall be treated as any other child and will have the same level of physical contact with educators as other children in the centre.
- Where educators are informed of a child, family member or another educator who has HIV/AIDS or Hep B or C, this information will remain confidential at all times. The service has no obligation to advise other families attending the service of a child's or educators HIV status.
- 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 consistently implemented.
- Educators and families will be encouraged to participate in AIDS and Hepatitis education.



## 2. Epidemic/ Pandemic Management

### 2.1 POLICY STATEMENT

- When there is a national/global outbreak of disease, this may require different management to a localised outbreak of infectious disease or general infection control. The aim of this section is to minimise the spread of disease, maintain business operations and meet the needs of our community.

### 2.2 PROCEDURE

- During times of epi/pandemic, we will follow regular updates from government and any relevant regulatory bodies, and endeavour to adhere to advice and direction given.
- We will maintain up to date risk assessment/management as well as action plans relevant to each issue and enact them as necessary.
- If conditions require changes to regular operation, we will consult with the committee, the staff and the community where possible to ensure any changes balance the needs of service continuity with those of the community we serve.