



DEALING WITH INFECTIOUS DISEASES POLICY

Important note: A pandemic is an epidemic of an infectious disease that has spread across a large region, for instance multiple continents or worldwide, affecting a substantial number of people. ELAA advises that the contents of this policy are relevant to a pandemic event. In considering what actions are required by an Approved Provider, information and guidance provided by the Australian Health Protection Principal Committee (AHPPC), Victorian Government, the Department of Health and Human Services (DHHS) and the Department of Education and Training (DET) should be followed and adhered to.

Mandatory – Quality Area 2

PURPOSE

This policy will provide clear guidelines and procedures to follow when:

- a child attending a Shine Bright EYM service shows symptoms of an infectious disease
- a child at a Shine Bright EYM service has been diagnosed with an infectious disease
- managing and minimising the spread of infectious diseases, illnesses and infestations (including head lice).
- managing and minimising infections relating to blood-borne viruses
- managing and minimising infections relating to epidemics (refer to *Definitions*) and pandemics (refer to *Definitions*) (e.g. coronavirus (COVID-19))

Note: This policy includes information on child immunisation.

POLICY STATEMENT

1. VALUES

Shine Bright EYM is committed to:

- providing a safe and healthy environment for all children, staff and any other persons attending the service
- responding to the needs of the child or adult who presents with symptoms of an infectious disease or infestation while attending the service
- preventing the spread of vaccine-preventable diseases
- complying with current exclusion schedules and guidelines set by the Department of Health and Human Services (DHHS)
- complying with the advice of the Australian Health Protection Principal Committee (AHPPC), Victorian Chief Health Officer and DHHS
- providing up-to-date information and resources for families and staff regarding protection of all children from infectious diseases, blood-borne viruses, immunisation programs and management of infestations.

Shine Bright EYM supports the Immunise Australia Program and National Immunisation Program (NIP), which is currently recommended by the National Health and Medical Research Council (NHMRC) and supported by the Commonwealth Government. All educators/staff at Shine Bright EYM are committed to preventing the spread of vaccine-preventable diseases through simple hygiene practices such as hand washing, effective cleaning procedures, monitoring immunisation records and complying with recommended exclusion guidelines and timeframes for children and educators/staff.

2. SCOPE

This policy applies to the Approved Provider, Nominated Supervisor, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Shine Bright EYM Kindergartens, including during offsite excursions and activities

3. BACKGROUND AND LEGISLATION

Background

Infectious diseases such as the Chicken Pox, Common Cold, Measles and Mumps, are common in children and adults are also susceptible.

Children are at a greater risk of exposure to infections in a children's service than at home due to the amount of time spent with a large number of other children.

The DHHS publishes the *Minimum Period of Exclusion from Primary Schools and Children's Services Centres for Infectious Diseases Cases and Contacts*, to assist in protecting the public by preventing, or containing, outbreaks of infectious conditions common in schools and children's services and is regulated by the *Public Health and Wellbeing Regulations 2019*.

During an epidemic or pandemic, further instruction and guidance may be issued by the DHHS and the Australian Health Protection Principal Committee (AHPPC).

An approved service must take reasonable steps to prevent the spread of infectious diseases at the service, and ensure that the parent/guardian, authorised nominee or emergency contact of each child enrolled at the service is notified of the occurrence of an infectious disease as soon as possible. The service must have policies and procedures in place for dealing with infectious diseases (Regulations 4, 88). The service has a duty of care to ensure that everyone attending the service is provided with a high level of protection during all hours that the service is in operation. Protection can include:

- notifying children, families and staff when an excludable illness/disease is detected at the service
- complying with relevant health department exclusion guidelines
- increasing staff awareness of cross-infection through physical contact with others.

The Victorian Government offers an immunisation program for children to assist in preventing the spread of infectious diseases. There is also the Immunise Australia Program and National Immunisation Program (NIP), which is currently recommended by the National Health and Medical Research Council (NHMRC) and supported by the Commonwealth Government.

Early childhood education and care services that are regulated under the *Education and Care Services National Law Act 2010* have obligations under No Jab No Play legislation (*Public Health and Wellbeing Act 2008*), including to request, assess and manage immunisation documentation and to assist parents/carers and families who may face difficulties in meeting the requirements (refer to *Enrolment and Orientation Policy*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011 Regulation 88*
- Family Assistance Legislation Amendment (Jobs for Families Child Care Package) Act 2017
- *Health Records Act 2001*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
- *National Quality Standard, Quality Area 6: Collaborative Partnerships with Families and Communities*
- *Occupational Health and Safety Act 2004*
- Privacy and Data Protection Act 2014 (Vic)

- Privacy Act 1988 (Cth)
- Public Health and Wellbeing Act 2008
- *Public Health and Wellbeing Regulations 2019*

4. DEFINITIONS

Blood-borne virus (BBV): A virus that is spread when blood from an infected person enters another person's bloodstream. Examples of blood-borne viruses include human immunodeficiency virus (HIV), hepatitis B, hepatitis C and viral haemorrhagic fevers. Where basic hygiene, safety, infection control and first aid procedures are followed, the risks of contracting a blood-borne virus are negligible.

Epidemic: is an outbreak of a contagious disease that spreads rapidly and extensively, and affects many individuals simultaneously in an area or population.

Exclusion: Inability to attend or participate in the program at the service.

Illness: Any sickness and/or associated symptoms that affect the child's normal participation in the program at the service or poses a contagious threat to other children, families and staff. A child will be considered ill if they have a temperature of 38°C or above, as measured by staff on two occasions at 10 minute intervals.

Infection: The invasion and multiplication of micro-organisms in bodily tissue.

Infestation: The lodgement, development and reproduction of arthropods (such as head lice), either on the surface of the body of humans or animals, or in clothing.

Infectious disease: A disease that can be spread, for example, by air, water or interpersonal contact. An infectious disease is designated under Victorian Law or by a health authority (however described) as a disease that would require the infected person to be excluded from an education and care service.

Medication: Any substance, as defined in the *Therapeutic Goods Act 1989* (Cth), that is administered for the treatment of an illness or medical condition.

Minimum exclusion period: The minimum period for excluding any person from attending a children's service to prevent the spread of infectious diseases as specified in Schedule 7: Minimum Period of Exclusion from Primary Schools and Children's Services for Infectious Diseases Cases and Contacts of the *Public Health and Wellbeing Regulations 2019*, the. An infringement penalty for failure to exclude a child with, or exposed to, a specified infectious disease applies (applicable to a person in charge). The exclusion period table, published by the DHHS, can be accessed at [school exclusion/school exclusion table](#)

Outbreak: An outbreak may be defined as two or more cases of vomiting and/or diarrhoea occurring at the service among children and/or staff within 48hours of each other. If this occurs and the symptoms cannot be explained by medication or other medical conditions, you may have an outbreak.

Pandemic: is an epidemic (refer to Definitions) occurring worldwide, or over a wide geographic area and affecting a large proportion of the population.

Pediculosis: Infestation of head lice that is transmitted by having head-to-head contact with another person who has head lice. Pediculosis does not contribute the spread of any infectious diseases and outbreaks of this condition are common in schools and childcare facilities.

Recommended minimum exclusion period: The period recommended by the Department of Health and Human Services for excluding any person from attending a children's service to prevent the spread of infectious diseases through interpersonal contact. The exclusion table published by the Department of Health and Human Services can be accessed at [school exclusion table](#)

Serious incident: A serious incident (regulation 12) is defined as any of the following:

- the **death of a child** while being educated and cared for at the service or following an incident while being educated and cared for by the service
- any **incident involving serious injury or trauma to a child** while the child is being educated and cared for, which:
 - a reasonable person would consider required urgent medical attention from a registered medical practitioner; or
 - the child attended or ought reasonably to have attended a hospital e.g. a broken limb*

- any **incident involving serious illness of a child** while that child is being educated and cared for by a service for which the child attended, or ought reasonably to have attended, a hospital e.g. severe asthma attack, seizure or anaphylaxis*

NOTE: In some cases (for example rural and remote locations) a General Practitioner conducts consultation from the hospital site. Only treatment related to serious injury, illness or trauma is required to be notified, not other health matters.

- any emergency for which **emergency services** attended

NOTE: This means an incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at an education and care service. It does not mean an incident where emergency services attended as a precaution.

- a child appears to be **missing or cannot be accounted for** at the service
- a child appears to have been **taken or removed** from the service in a manner that contravenes the National Regulations
- a child was mistakenly **locked in or out of the service** premises or any part of the premises.

Notifications of serious incidents should be made to the regulatory authority (DET) through the [NQA IT System](#). If this is not practicable, the notification can be made initially in whatever way is best in the circumstances.

NOTE: some of serious incidents above are also reportable incidents under the *Occupational Health and Safety Act 2004* and require notification to WorkSafe.

5. SOURCES AND RELATED POLICIES

Sources

- Communicable Disease Section, Public Health Group, Victorian Department of Health & Human Services (2011), *The Blue Book: Guidelines for the control of infectious diseases*. Available at: [The blue book](#)
- Communicable Disease and Prevention Control Unit: phone – 1300 651 160: <http://ideas.health.vic.gov.au> and infectious.diseases@health.vic.gov.au
- Communicable Disease Section, Victorian Department of Health & Human Services (2019), *A guide to the management and control of gastroenteritis outbreaks in children's centres*. Victorian Government, Melbourne: [A guide to the management and control of gastroenteritis outbreaks in childrens centres](#)
- National Immunisation Program, Department of Health, Australian Government: [national immunisation program](#)
- Department of Health & Human Services, Victoria (2012) *Head lice management guidelines*: [Head lice management guidelines](#)
- *Immunisation Enrolment Toolkit for early childhood services*: [immunisation enrolment toolkit](#)
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011* (2017), ACECQA: [NQF Resource 02 Guide to ECS Law Regs](#)
- *Guide to the National Quality Standard* (2017), ACECQA: [NQF Resource 03 Guide to NQS](#)
- National Health and Medical Research Council (2013) *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition): [staying healthy preventing infectious diseases early childhood education and care services](#)
- Information about immunisations, including immunisation schedule, DHHS: [immunisation](#)
- WorkSafe, Victoria (2008) *Compliance code: First aid in the workplace*: [compliance code first aid workplace](#)
- Statements Section for statements on health emergencies, AHPPC. Available at: [australian health protection principal committee ahppc](#)
- A guide for the management and control of gastroenteritis in children's centres – see Industry guide children's services centres [A guide to the management and control of gastroenteritis outbreaks in childrens centres](#)
- Victorian Government website for Early Childhood Settings. <https://www.coronavirus.vic.gov.au/managing-illness-schools-and-early-childhood-education-and-care-services>

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Enrolment and Orientation Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Occupational Health and Safety Policy*
- *Confidentiality and Privacy Policy*

PROCEDURES

The Approved Provider is responsible for:

- ensuring that if there is an occurrence of an infectious disease at the service, reasonable steps are taken to prevent the spread of that infectious disease (Regulation 88(1))
- ensuring that where there is an occurrence of an infectious disease, a parent/guardian, authorised nominee or emergency contact of each child at the service is notified of the occurrence as soon as is practicable (Regulation 88(2))
- ensuring that information from the DHHS about the minimum exclusion period (refer to *Definitions*) is displayed at the service, is available to all stakeholders including staff, parents/guardians, students and volunteers. ensuring that a child is excluded from the service in accordance with the minimum exclusion periods (refer to *Definitions*) when informed that the child is infected with an infectious disease (refer to *Definitions*) or has been in contact with a person who is infected with an infectious disease (refer to *Definitions*) as required under Regulation 111(1) of the *Public Health and Wellbeing Regulations 2019*
- in addition to the above all children and staff are required to remain at home until 48 hours after symptoms of gastrointestinal illness have ceased.
- contacting the Communicable Disease Section, DHHS (refer to *Definitions*) if there is an outbreak of two or more cases of gastrointestinal illness in a 48-hour period
- ensuring obligations under No Jab No Play legislation (*Public Health and Wellbeing Act 2008*), including to request, assess and manage immunisation documentation and to assist parents/carers and families who may face difficulties in meeting the requirements are met (refer to *Enrolment and Orientation Policy*)
- ensuring when directed by the Chief Health Officer, that a child who is at material risk of contracting a vaccine-preventable disease is excluded until the Chief Health Officer directs that attendance can be resumed (Regulation 111(24) of the *Public Health and Wellbeing Regulations 2019*)
- notifying DET within 24 hours of a serious incident (refer to *Definitions*) via the [NQA ITS](#)
- supporting the Nominated Supervisor and the staff at the service to implement the requirements of the minimum exclusion periods
- conducting a thorough inspection of the service on a regular basis, and consulting with staff to assess any risks by identifying the hazards and potential sources of infection
- ensuring that the Nominated Supervisor, staff and everyone at the service adheres to the *Hygiene Policy* and the procedures for infection control relating to blood-borne viruses (refer to [Attachment 4](#))
- ensuring that appropriate and current information and resources are provided to all staff and parents/guardians regarding the identification and management of infectious diseases, blood-borne viruses and infestations
- keeping informed about current legislation, information, research and best practice
- ensuring that any changes to the exclusion table or immunisation laws are communicated to all staff and parents/guardians in a timely manner
- complying with the advice of the Australian Health Protection Principal Committee (AHPPC), Victorian Chief Health Officer and DHHS in an epidemic or pandemic event (refer to [Attachment 4](#)).

The Nominated Supervisor/Responsible Person in Charge is responsible for:

- ensuring that where there is an occurrence of an infectious disease at the service, reasonable steps are taken to prevent the spread of that infectious disease (Regulation 88(1))

- ensuring that where there is an occurrence of an infectious disease at the service, a parent/guardian or authorised emergency contact of each child at the service is notified of the occurrence as soon as is practicable (Regulation 88(2))
- ensuring that information from the DHHS about the minimum exclusion periods (refer to *Definitions*) is displayed at the service and is available to all stakeholders including staff, parents/guardians, students and volunteers
- ensuring that a child is excluded from the service in accordance with the minimum exclusion periods (refer to *Definitions*) when informed that the child is infected with an infectious disease (refer to *Definitions*) or has been in contact with a person who is infected with an infectious disease (refer to *Definitions*) as required under Regulation 111(1) of the *Public Health and Wellbeing Regulations 2019*
- in addition to the above all children and staff are required to remain at home until 48 hours after symptoms of gastrointestinal illness have ceased.
- contacting the Communicable Disease Section (refer to *Definitions*) if there is an outbreak of two or more cases of gastrointestinal illness in a 48 hour period at the service
- ensuring that a minimum of one educator with current approved first aid qualifications is in attendance and immediately available at all times the service is in operation (refer to *Administration of First Aid Policy*).

As a demonstration of duty of care and best practice, ELAA recommends that **all educators** have current approved first aid qualifications and anaphylaxis management training and asthma management training

- establishing good hygiene and infection control procedures, and ensuring that they are adhered to by everyone at the service (refer to *Hygiene Policy* and [Attachment 4](#) – Procedures for infection control relating to blood-borne viruses)
- ensuring the exclusion requirements for infectious diseases are adhered to as per the minimum exclusion periods (refer to *Definitions*), notifying the Approved Provider and parents/guardians of any outbreak of infectious disease at the service, and displaying this information in a prominent position
- advising parents/guardians on enrolment that the minimum exclusion periods and the Guide for the management and control of gastroenteritis in children’s centres will be observed in regard to the outbreak of any infectious diseases or infestations (refer to sources)
- advising the parents/guardians of a child who is not fully immunised on enrolment that they will be required to keep their child at home when an infectious disease is diagnosed at the service, and until there are no more occurrences of that disease and the exclusion period has ceased
- ensuring that parents/guardians understand that they must inform the Approved Provider or Nominated Supervisor as soon as practicable if the child is infected with an infectious disease or infestation, or has been in contact with a person infected with a condition for which the exclusion of contacts is specified (Regulation 110, *Public Health and Wellbeing Regulations 2019*)
- providing information and resources to parents/guardians to assist in the identification and management of infectious diseases and infestations
- providing a *Head lice action form* ([Attachment 2](#)) to the parents/guardians of a child suspected of having head lice
- providing a head lice notification letter ([Attachment 3](#)) to all parents/guardians when an infestation of head lice has been detected at the service
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*)
- complying with the advice of the Australian Health Protection Principal Committee (AHPPC), Victorian Chief Health Officer and DHHS in an epidemic or pandemic event (refer to [Attachment 4](#)).

Staff are responsible for:

- encouraging parents/guardians to notify the service if their child has an infectious disease or infestation
- observing signs and symptoms of children who may appear to have an illness, and informing the Nominated Supervisor or Responsible Person in Charge.
- monitoring any symptoms in children that may indicate the presence of an infectious disease, including taking the child’s temperature, if it is 38°C or above, repeat after 10 minutes. During the 10 minute interval take any appropriate measures to reduce the temperature i.e remove jumper, keep child quiet etc. Take appropriate measures to minimise cross-infection, ill children should be isolated if onset of illness occurs

while at the centre and parents should be contacted immediately and requested to take the child home as soon as possible.

- Completing the Incident, Injury, Trauma and Illness Record whenever a child is sent home due to illness. Refer to Attachment 1 from the Incident, Injury, Trauma and Illness Policy.
- complying with the *Hygiene Policy* of the service and the procedures for infection control relating to blood-borne viruses (refer to [Attachment 4](#))
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*)
- complying with the advice of the Australian Health Protection Principal Committee (AHPPC), Chief Health Officer and DHHS in an epidemic or pandemic event (refer to [Attachment 4](#)).
- providing access to information and resources for parents/guardians to assist in the identification and management of infectious diseases and infestations

Parents/guardians are responsible for:

- keeping their child/ren at home if they have an illness or are unwell, or have an excludable infectious disease (refer to *Definitions*)
- Collecting their child, or making arrangements for their child to be collected as soon as possible when notified of their child's illness.
- informing the Nominated Supervisor or the Responsible Person in Charge as soon as practicable if their child has an infectious disease (refer to *Definitions*) or has been in contact with a person who has an infectious disease (Regulation 110 of the *Public Health and Wellbeing Regulations 2019*)
- complying with the minimum exclusion periods (refer to *Definitions*) or as directed by the Approved Provider or Nominated Supervisor after the Chief Health Officer directed them to exclude a child enrolled who the Chief Health Officer has determined to be at material risk of contracting a vaccine-preventable disease (Regulation 111(2) of the *Public Health and Wellbeing Regulations 2019*)
- complying with "A guide for the management and control of gastroenteritis in children's centres", see sources.
- regularly checking their child's hair for head lice or lice eggs, regularly inspecting all household members, and treating any infestations as necessary
- notifying the service if head lice or lice eggs have been found in their child's hair and when treatment was commenced
- complying with the *Hygiene Policy* and the procedures for infection control relating to blood-borne viruses (refer to [Attachment 4](#)) when in attendance at the service.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- ensure that all information related to infectious diseases on display and supplied to parents/guardians is current
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures unless a lesser period is necessary because of a risk.

ATTACHMENTS

- Attachment 1: [Head lice action form](#)
- Attachment 2: [Head lice notification letter](#)
- Attachment 3: [Procedures for infection control relating to blood-borne viruses](#)

- Attachment 4: [Actions for early childhood and care services in an epidemic or pandemic event](#)

This policy was adopted by the Approved Provider of Shine Bright EYM on May 2021

REVIEW DATE: 2024