



Illness and Infectious Diseases Policy

POLICY STATEMENT

Coowarra OOSH will aim to provide a safe and hygienic environment that will promote the health and wellbeing of our children. We will take all reasonable steps to prevent the spread of infectious diseases through the implementation of procedures that are consistent with guidelines of State Health Authorities. All children and adults in the service will be considered as infectious and these procedures must be consistently applied across the centre.

Children with infectious diseases will be excluded from the service for the period recommended by the Department of Health when required. Where there is an outbreak of an infectious disease each enrolled child's parent/emergency contact will be notified within 24 hours under ordinary circumstances. The service will take care when issuing the notification to ensure it is not done in a manner that is prejudicial or names any particular child.

Parents/guardians are advised upon enrolment and in regular reminders not to bring sick children to the service and to arrange prompt collection of children who are unwell. The care needs of a sick child cannot be met without dramatically reducing the general level of supervision of the other children, or risking other children's health.

Where a child takes ill at the service all care and consideration will be given to comfort the child and minimise the risk of cross infection until the child is collected by the parent/emergency contact.

PROCEDURES

- Parents/Guardians will be informed about the illness and infectious diseases policy on enrolment and the policy is on the service website.
- A regularly updated copy of the Department of Health guidelines on infectious diseases from NSW Dept of Health website (<http://www.health.nsw.gov.au/publichealth/Infectious/a-z.asp>) will be kept attached to the illness and infectious disease policy for reference by educators and management and to be made available to parents on request.
- A child or adult will be considered sick if they:
 - sleep at unusual times, or is lethargic.
 - has a fever over 38.
 - is crying constantly from discomfort.
 - vomits or has diarrhoea.
 - is in need of constant one to one care.
 - Symptoms of an infectious disease.



Coowarra Out Of School Hours Care Service Inc

- If a child is unwell at home parents are not permitted to bring the child to the centre. Children who appear unwell when being signed in by their parent/ guardian will not be permitted to be left at the service.
- If a child becomes ill or develops symptoms at the centre the parents will be contacted to take the child home. Where the parents are not available emergency contacts will be called to ensure the child is removed from the service promptly.
- If a child becomes unwell whilst at school, parent/guardian will need to collect the child from the school sick bay. Educators will not collect children from sickbay to take to the centre.
- The child who is ill will be comforted, cared for and placed in a quiet isolated area with adult supervision until the child's parent or other authorised adult takes them home.
- All equipment that has been used by sick children is to be cleaned and sanitised in line with service cleaning policy
- During a fever natural methods will be employed to bring the child's temperature down until the parents arrive or help is sought. Such methods include: clothes removed as required, clear fluids given, tepid sponges administered.
- If a child's temperature is very high, cannot be brought down and parents cannot be contacted, the child's doctor will be contacted and permission sought to give paracetamol. If the situation becomes serious the child will be taken to the doctor or an ambulance called.
- If an educator becomes ill or develops symptoms at the centre they can return home if able or organise for someone to take them home.
- The Co-ordinator will organise a suitable educator replacement as soon as possible.

Infection Control Procedures

- All educators dealing with open sores, cuts and bodily fluids with any child or adult shall wear disposable gloves.
- Educators with cuts, open wounds or skin disease such as dermatitis should cover their wounds and wear disposable gloves.
- Disposable gloves will be properly and safely discarded and educators 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.



Coowarra Out Of School Hours Care Service Inc

- In the event of having to perform CPR, disposable sterile mouth masks are to be used, or if unavailable a piece of cloth. The educator in charge of the first aid kit will ensure that a mask is available at all times.
- Any exposure should be reported to the Co-ordinator and Management to ensure proper follow up procedures occur.

Note: It is best to use cold or tepid water temperatures in all cleaning processes. Hot water may coagulate the blood and protect any virus from the soap or disinfectant.

- Any soiled clothing shall be handled using disposable gloves, soaked in disinfectant or hot soapy water. Clothing will be placed and sealed in a plastic bag for the parents to take home.
- 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.

Management of HIV/AIDS/Hep B and C

- Under the Federal Disability Act and the Equal Opportunity Act, no discrimination will take place based on a child's/parent's/Educators HIV status.
- Discrimination in regard to access to the centre is unlawful. A child with HIV or Hepatitis B or C has the right to obtain a position in the centre should a position become available and an educator the right to equal opportunity of employment. The service has no obligation to advise other families attending the service of a child's or educators HIV status.
- A child with HIV/AIDS shall be treated as any other child, as HIV is not transmitted through casual contact. The child shall have the same level of physical contact with Educators as other children in the centre.
- Where educators are informed of a child, parent or another educator who has HIV/AIDS or Hep B or C, this information will remain confidential at all times. A breach of this confidentiality will be considered a breach of discipline.
- Educators will ensure that no discussion is made other than insuring proper care of all children is maintained.
- Proper safe and hygienic practices will be followed at all times and implementation of procedures to prevent cross infection as identified in this policy (**See also Hygiene policy for details.**) will be implemented.
- Educators and parents/guardians will be encouraged to participate in AIDS and Hepatitis education.

Management of Infectious Disease Outbreak



Coowarra Out Of School Hours Care Service Inc

- Children and educators will be excluded from the service if they are ill with any contagious illness. This includes diarrhoea and conjunctivitis.
- 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.
- 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 period of exclusion will be based on the recommendations outlined by the Department of Health. The recommendation will be available at the service for viewing.
- The Service Co-ordinator 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 Co-ordinator 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 Co-ordinator or educator have the right to refuse access if concerned about the child's health.
- Children and educators 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.
- Parents will be informed about the occurrence of an infectious disease in the service ensuring that the individual rights of educators or children are not infringed upon.
- All educators will ensure proper hygiene practices are carried out as outlined in the Hygiene Policy.
- 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

Notification Mechanisms

Infectious Diseases:

- Nominated Supervisor will notify their local public health unit (PHU) by) as soon as possible after they are made aware that a child enrolled at the Service is suffering from one of the following vaccine preventable diseases:
 - Diphtheria
 - Mumps
 - Poliomyelitis
 - Haemophilus influenzae Type b (Hib)



Coowarra Out Of School Hours Care Service Inc

- Meningococcal disease
 - Rubella ("German measles")
 - Measles
 - Pertussis ("whooping cough")
 - Tetanus
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- Management will notify Safe Work NSW and NSW Health of high-risk blood borne virus exposure incidents.
 - Management will keep records for period of time as advised by Safe Work NSW (for 30 years), which should include registers of incidents, outcomes and recommendation from workplace investigations and evaluations of the effectiveness of actions taken.
 - Nominated Supervisors are encouraged to seek advice from their local PHU when they suspect an infectious disease outbreak is affecting their Service, such as outbreaks of a gastrointestinal or respiratory illness.
 - For further information on Childhood infectious diseases, please refer to the 5th edition of Staying healthy – Preventing infectious diseases in early childhood education and care services

Table 1 Recommended methods for cleaning blood spills

Size of spill	What to do
Spot (e.g. drop of blood less than the size of a 50-cent coin)	• Wear gloves • Wipe up blood immediately with a damp cloth, tissue or paper towel • Place the cloth, tissue or paper towel in a plastic bag or alternative; seal the bag and put it in the rubbish bin • Remove gloves and put them in the rubbish bin • Wash surface with detergent and warm water • Wash your hands with soap and water
Small (up to the size of the palm of your hand)	• Wear gloves • Place paper towel over the spill and allow the blood to soak in • Carefully lift the paper towel and place it in a plastic bag or alternative; seal the bag and put it in the rubbish bin • Remove gloves and put them in the rubbish bin • Clean the area with warm water and detergent using a disposable cloth or sponge; place the cloth in the rubbish bin • Wipe the area with diluted bleach and allow to dry • Wash your hands with soap and water
Large (more than the size of the palm of your hand)	• Wear gloves • Cover the area with an absorbent agent (e.g. kitty litter or sand) and allow the blood to soak in • Use a disposable scraper and pan to scoop up the



Coowarra Out Of School Hours Care Service Inc

	absorbent material and any unabsorbed blood or body fluids • Place the absorbent agent, the scraper and the pan into a plastic bag or alternative; seal the bag and put in the rubbish bin • Remove gloves and put them in the rubbish bin • Mop the area with warm water and detergent; wash the mop after use • Wipe the area with diluted bleach and allow to dry • Wash your hands with soap and water
Adapted from National Health and Medical Research Council 2010, Australian guidelines for the prevention and control of infection in healthcare, NHMRC, Canberra.	

Table 2 Recommended methods for cleaning bodily spills
When cleaning up spills of faeces, vomit or urine, the following procedures should be used:

• Wear gloves.
• Place paper towel over the spill and allow the spill to soak in. Carefully remove the paper towel and any solid matter. Place it in a plastic bag or alternative, seal the bag and put it in the rubbish bin.
• Clean the surface with warm water and detergent and allow to dry.
• If the spill came from a person who is known or suspected to have an infectious disease (e.g. diarrhoea or vomit from a child with gastroenteritis), use a disinfectant on the surface after cleaning it with detergent and warm water
• Wash hands thoroughly with soap and running water (preferably warm water).

CONSIDERATIONS

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN'S HEALTH AND SAFETY		
2.1	Health	Each child's health and physical activity is supported and promoted.



Coowarra Out Of School Hours Care Service Inc

2.1.1	Wellbeing and comfort	Each child's wellbeing and comfort is provided for, including appropriate opportunities to meet each child's needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2	Safety	Each child is protected.

EDUCATION AND CARE SERVICES NATIONAL LAW AND NATIONAL REGULATIONS	
Sec. 172	Offence to fail to display prescribed information
Sec.174(2)(a)	Serious incident- any emergency for which emergency services attended
12	Meaning of serious incident
77	Health, hygiene and safe food practices
83	Staff members and family day care educators not to be affected by alcohol or drugs
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
89	First aid kits
90	Medical conditions policy
92	Medication record
93	Administration of medication
162	Health information to be kept in enrolment record
168	Education and care service must have policies and procedures
170	Policies and procedures to be followed
172(2)(g)	a notice stating that there has been an occurrence of an infectious disease at the premises
173	Prescribed information to be displayed
175(2)(c)	Prescribed information to be notified to the Regulatory Authority- (2) any circumstance arising at the service that poses a risk to the health, safety or wellbeing of a child or children attending the service

RELATED POLICIES

Administration of Medication Policy	Immunisation Policy
Child Safe Environment Policy	Incident, Injury, Trauma and Illness Policy



Coowarra Out Of School Hours Care Service Inc

Code of Conduct Policy Enrolment Policy Family Communication Policy Governance Policy Hand Washing Policy	Medical Conditions Policy Physical Environment Policy Confidentiality Policy Work Health and Safety Policy
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UPDATED AND ENDORSED: August 2025 DATE FOR REVIEW AND EVALUATION: June 2028
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