POLICY STATEMENT - The Deniliquin Children’s Centre is committed to providing a safe and healthy environment for all children, staff and other persons attending the service by

- Responding to the needs of the child or adult who presents with symptoms of an infectious disease or infestation while attending the service
- Complying with current exclusion schedules and guidelines set by the Department of Health
- Providing up to date information for families and staff regarding protection of all children from infectious diseases and blood borne viruses, management of infestations and immunisations programs.

RATIONALE - Ensuring the health and safety of children, staff and educators, and supporting children’s ongoing wellbeing, is a core focus of the delivery of our services. Whilst it is not possible to prevent the spread of all infections and diseases, the Deniliquin Childrens Centre is committed to minimizing this risk. This is enhanced through

- Effective hygiene
- Exclusion of ill children, educators and other staff
- Immunisation which is a simple, safe and effective way of protecting people against harmful diseases before they come into contact with them in the community. Immunisation not only protects individuals, but also others in the community, by reducing the spread of disease.

PROCEDURE
HYGIENE AND INFECTION CONTROL
See our Policy
Our service will maintain and promote effective hygiene practices including

- Hygiene practices
- Safe & hygienic storage, handling, preparation of all food and drinks
- Working with children to support the promotion of hygiene practices including hand washing, coughing, dental hygiene and ear care.
- Toileting, nappy changing and cleaning equipment
- The provision of fresh linen and sheeting for cots and mattresses

ILLNESS
Educators and the Nominated Supervisor will:
minimise the spread of potential infectious diseases between children 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

notify the local public health authority when required of notifiable disease within 24 hours

use the attached Recommended Minimum Periods of Exclusion to exclude children with infectious diseases and inform parents of exclusion and non-exclusion periods (QA 2 attachments)

Educators will also advise the Nominated Supervisor as soon as they believe they have an infectious disease and are unable to care for children.

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 educators to decide whether to accept or exclude the child. If educators suspect a child may have an infectious disease, they will exclude the child until they receive a medical certificate stating the child is not contagious and is okay to attend the Service.

Many illnesses, while not fitting exclusion criteria, can transmit disease to other children in care, and can make a child too ill to participate in normal activities. All children who are unwell should not attend the Service and educators will ask parents of children who are unwell to collect the child from the residence/venue within one hour or to make alternative arrangements for their child’s care. If the primary parent/carer doesn’t arrive within one hour, emergency contacts will be contacted to pick up the child.

The Nominated Supervisor will:

- support educators in decisions around children with symptoms of disease
- assist educators in making notification to public health authorities
- organise a pool of regular relief educators to cover educators who are ill and unable to care for children
- request a medical certificate from educators who have been ill stating they are not contagious and are okay to return to work if necessary (See Personal Leave Policy)
- ensure that the procedure for dealing with an infectious disease is followed in the service

If an infectious disease arises at a services educators will respond

- Endeavour to isolate the child from other children
- Ensure the child is comfortable and appropriately supervised
- Complete an incident, injury, illness and trauma record (QA2 attachments)
- Contact the child’s parents or nominated emergency contact (if the child’s parents are unavailable we will contact authorised nominees) and ask them to pick the child up as quickly as possible (and within one hour). Educators will provide information in the child’s home language if possible
- Any person picking the child up from the service must be able to show identification if unknown to the educator
- Ensure all bedding, towels and clothing which has been used by the child are 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.
- Inform all families of the presence of an infectious disease verbally and by placing a notice near the front door using the Infectious Disease Notification sign (QA2 Attachments). The child’s name will not be revealed.
- Ensure confidentiality of any personal of health related information related to any child or family

Families will:
• Keep children at home if they are unwell or have an excludable infectious disease. This includes
  - If the child has an elevated temperature, 38°C or greater
  - Vomited within a 24 hour period
  - Diarrhoea within 24 hours
  - Ear, eye or discoloured nasal discharge
  - A severe cough, runny nose and/or congestion
  - Any communicable disease - see the Exclusion guidelines (QA2 Attachments)
  - if the child has required pain relief medication within 4-6 hours of arrival time.
• Ensure children are symptom free for 24 hours before returning to the service.
• Advise educators if the child requires medication. Medication must be prescribed by a doctor and authorised in writing by a parent or another authorised person. See our Administration of Medication policy. Our service does not administer over the counter medication unless it has been prescribed by a medical practitioner.
• Collect their child from the service should their child become unwell within one hour, or make arrangements for someone else to do so.
• Some behaviours which indicate that the child is unwell include
  - irritable, agitated, fretful, crying, behaving abnormally
  - lethargy, quiet, decreased activity
  - noticeable reduction in appetite or fluid intake
  - an unusual colour, smell or consistency of urine or faeces
  - rash
  - breathing difficulty - including coughing
  - poor colour - pale
  - pain
  - sensitivity to light

Fever
Unwell children include those with fevers. Fevers refer to temperatures above 38°C, and are usually a sign of infection (eg virus). When children develop a fever at the service, educators and staff will:
• contact parents and ask them to collect the child unless we have written advice from a medical practitioner that the fever is not caused by an infectious disease (eg teething). Babies less than 3 months old with fevers must always be collected by parents /authorised nominees who will be advised to take the child to a doctor
• administer first aid if required in line with service procedures. This may include calling an ambulance. Educators and staff will be especially vigilant caring for babies less than 3 months old with fevers
• offer water to the child and ensure they are not overdressed and their clothing is comfortable
• monitor the child’s behaviour, alertness and any other symptoms that could indicate serious infection including rash, stiffness, vomiting, coughing or convulsions

Infectious Diseases requiring Notification to the local Public Health Unit
Our Nominated Supervisor will notify the local Public Health Unit by telephone as soon as possible (and within 24 hours) after they are made aware that a child enrolled at the service is suffering from one of the following vaccine preventable diseases and will comply with any direction:
• Diptheria
• Mumps
• Poliomyelitis
• Haemophilus influenzae Type b (Hib)
• Meningococcal disease
• Rubella ("German measles")
  Measles
• Pertussis ("whooping cough")
• Tetanus

NSW local Public Health unit 1300 066 055 (directory and contact details are available on the following NSW Health website) http://www.health.nsw.gov.au/infectious/pages/notification.aspx

IMMUNISATION

Under the Public Health Act 2010, education and care services cannot enrol a child unless approved documentation has been provided that shows the child:
• is fully vaccinated for their age or
• has a medical reason not to be vaccinated or
• is on a recognised catch-up schedule if the child has fallen behind with their vaccinations.

Immunisation Records
To enrol in our services, families must provide a copy of one or more of the following documents:
• a current Australian Immunisation Register (AIR) Immunisation History Statement which shows that the child is up to date with their scheduled immunisations in line with the NSW Immunisation Schedule
• a current AIR Immunisation History Form on which the immunisation provider has certified that the child is on a recognised catch-up schedule in line with the NSW Immunisation Schedule
• an AIR Immunisation Exemption – Medical Contraindication Form which has been certified by an immunisation provider for a child who cannot receive one or more vaccine(s) for medical reasons

Parents/guardians of children, who through exceptional circumstances, are determined to be in need of protection and/or placed in emergency care, have 12 weeks in which to provide immunisation documentation.

The AIR maintains immunisation records for children up until their 20th birthday and can be contacted on 1800 653 809. AIR Immunisation History and Exemption forms are available on the Department of Human Services website http://www.humanservices.gov.au/

Parents/guardians must provide the Service with an updated copy of their child’s immunisation record when the child receives a vaccine which is on the National or State immunisation schedule. We will regularly remind parents to do this via newsletters, emails or letters.

Immunisation Register
Our service will keep an Immunisation Register which:
• records the immunisation status of each child enrolled at the Service and
• contains immunisation certificates and other certificates provided by parents.

Administration will request copies of up to date immunisation statements and provide copies to all relevant Nominated Supervisors for the child’s file.

If requested, our Service will provide a copy of the record and certificates kept for a child in the Immunisation Register to the parent of the child so they can enrol the child at another education and care Service.

Information about each child will be kept for three years from the date a child last attends the service. (see Deniliquin Children’s Centre Privacy and Confidentiality Policy)

Catering for Children with Overseas Immunisation Records
Overseas immunisation records are not be accepted. They often differ from the schedule recommended in Australia and a child may require extra vaccinations to be up to date with the Australian schedule. Parents are responsible for having their child’s overseas immunisation record transcribed onto the AIR.

Children vaccinated overseas must attend an immunisation provider (eg doctor) to have their overseas record assessed and be offered appropriate immunisations. The Provider will complete an Immunisation History Form which should be provided to the Service. A copy of the AIR Immunisation History Statement should also be provided to the service when it is received by families.
Exclusion Periods for children not fully immunised
Any child that is not fully immunised may be excluded for a period of time if there is a case of a vaccine preventable disease at the service, or if the child has been in contact with someone outside the Service who has a vaccine preventable disease. We will consider the Exclusion Periods recommended by the National Health and Medical Research Council. It is the responsibility of families to inform the Service that their child has come into contact with someone with a vaccine preventable or infectious disease. Parents are responsible for payment of fees while their child is excluded.

Immunisation Related Payments for Parents - Child Care Benefit
The benefit applies to children who are fully immunised or have an approved exemption from immunisation. This initiative ensures parents are reminded of the importance of immunising their children at each of the milestones. For parents to receive CCB without their child being fully immunised their doctor or immunisation provider needs to certify that the child:
- is on a catch-up immunisation schedule or
- has an approved exemption from the immunisation requirements. Approved exemptions include medical contraindications and existing natural immunity but do not include conscientious objection.

Information on how a child's immunisation status affects payments made to a family is available on the Department http://www.humanservices.gov.au/

Immunisations for Educators and Staff
It is important that educators remain up to date with their vaccinations in order to protect themselves as well as children in their care. 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 since 1966 who do not have vaccination records of two doses of MMR, or do not have antibodies for rubella, require vaccination
- Varicella if they have not previously been infected with chickenpox
- Pertussis (whooping cough). An adult booster dose is especially important for those educators caring for the youngest children who are not fully vaccinated
- Influenza (annually)
- Hepatitis B if caring for unimmunised children with intellectual disabilities (although the risk is low).

The Nominated Supervisor will:
- keep up to date records on the immunisation status of the educators in their service with assistance from administration staff.
- regularly provide educators and staff with information about diseases that can be prevented by immunisation through in-service training sessions, fact sheets and the Staying Healthy in Childcare publication (p 67)
- regularly advise educators and staff that some infectious diseases may injure an unborn child if the mother is infected while pregnant through in-service training sessions, fact sheets and the Staying Healthy in Childcare publication (p 69). Advise female educators / staff who are not fully immunised to consider doing so before getting pregnant. These infections include chickenpox, cytomegalovirus and rubella (German measles)
- advise pregnant educators and staff to review the Staying Healthy in Childcare publication and consult their medical practitioner to consider the risks of continuing to work at the service and ensure that pregnant educators and staff follow good infection control and hygiene procedures
- consider restricting pregnant educators and staff to working only with toilet trained children
- exclude all non-immune (unvaccinated) educators and staff for the periods outlined under Exclusion Periods during an outbreak of an infectious disease on unpaid stand down until the Public Health unit determines it is safe for the unimmunised educator to return.
Management will
- ask new employees to confirm in writing that we have provided this information during their induction.
- strongly encourage all non-immune staff to be vaccinated against pertussis, measles-mumps-rubella, varicella, hepatitis A. The Deniliquin Children’s Centre will refund the cost of annual flu vaccines and applicable disease prevention updates for existing employees (Staying Healthy in Childcare p 67).

**LEGISLATIVE REQUIREMENTS**

Education and Care Services National Regulation
Regulation 77,85, 86,87,88,90,162

National Quality Standard
Quality Area 2- 2.1.1, 2.1.4

Children (Education and Care Services National Law Application) Act
Mobile Service- Children (Education and Care Services) Supplementary Provision Regulation 2012
Regulation 66, 80,82,85

**Sources**
Education and Care Services National Regulations
National Quality Standard
Department of Human Resources: National Immunisation Program Schedule
NHMRC. Staying Healthy Preventing Infectious Diseases in Early Childhood Education and Care Services 5th edition
Medicare Australia
Public Health Act 2010 (as amended by Public Health Amendment (Vaccination of Children Attending Child Care Facilities) Act 2013)
Public Health Regulation 2012
Public Health Amendment (Vaccination of Children Attending Child Care Facilities) Regulation 2013
Immunisation Enrolment Toolkit for ECEC Services NSW Health
No Jab No Pay legislation Federal Government

**Attachments**
NQS2.7 A1 Immunisation schedule
NQS2.7 A2 Infectious disease notice
NQS2.7 A3 Incident, injury, illness and trauma record
NQS2.7 A4 Recommended Minimum Exclusion Periods