



Dealing with Infectious Diseases

Rationale

At The Pines Preschool we aim to provide a safe and healthy environment for children, families and educators. To achieve this, policies and procedures will be followed to minimise the spread of illness and prevent the transfer of infectious diseases. Infectious diseases are diseases that can be transmitted from one individual to another via the air, bodily secretions, blood, soil, and faecal or oral mediums.

Prevention of transmission will be achieved through effective hygiene practices, promoting a high standard of cleanliness, regular disinfecting of all areas and equipment, informing families about illnesses/diseases present in the preschool and excluding children from attending preschool where necessary.

Confidentiality about a child/family/educator's identity that is ill/infected will be maintained at all times. Educator and management practices will adhere to the law under the Federal Disability Discrimination Act 1992 and the Equal Opportunity Act 1984 SA, that no discrimination will take place based on a child/parent/educators HIV, Hepatitis B or C status.

National Quality Standards

Education and Care Services National Regulations:

- 88 (1) the service must take reasonable steps to prevent the spread of the disease.
- 162 (f) – The child's immunisation status is included on their enrolment record.
- 168 (2) – The centre must have a policy and procedure relating to dealing with infectious diseases, including procedures to comply with regulation 88.

Quality Area 2: Children's health and safety

At our preschool:

- Effective illness and injury management and hygiene practices are promoted and implemented
- Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented

Educators Responsibilities

- Educators will observe children for signs of illness and infectious disease. Parents/caregivers will be contacted and advised if their child is unwell and needs to be collected.
- Children will be excluded from preschool based on the recommendations of the National Health and Research Council Council's 'Recommended Minimum Exclusion Periods for Infectious Conditions for Schools, Pre-schools and Child Care Centres' and SA Health Communicable Disease Control Branch, August 2009. Please see the table attached.
- The preschool will notify the relevant health authority (SA Communicable Disease Control Branch PH: 1300 232 272) when reportable illnesses occur as required by the 'Staying Healthy in Child Care' guide.
- Families will be informed via a sign on the door and text message about infectious diseases at the Preschool.
- Families of children with an impairment of immunity will be advised about outbreaks of contagious diseases in order that they make informed decisions about whether their child attends the centre or not and always acting in the best interests of the child.
- The preschool will request children's approved *Immunisation History Document* on enrolment. Children who are not 'up to date' with their immunisation schedule will not be able to attend Preschool. Educators will be encouraged to maintain up to date immunisations.

Family Responsibilities

- Families will inform educators as soon as possible if their child/ren are diagnosed with an infectious disease.
- A doctor's clearance will be requested where the child is returning after Diphtheria, Hepatitis A, Leprosy, Polio, Tuberculosis or Typhoid.

Preventative Practices:

Hand Washing and Personal Hygiene:

- Hand washing facilities will be easily accessible for educators and children. Sanitiser will also be accessible to educators.
- Hand washing procedures are displayed near hand washing areas (as outlined by the National Health and Medical Research Council).
- Hand washing occurs regularly throughout the day including:
 - Before preparing food
 - Before eating
 - After toileting
 - After changing nappies and toilet training
 - Before and after applying first aid
 - After wiping a nose
 - If contact has been made with blood or bodily fluids.
- Cuts and open wounds should be covered with a dressing (eg band aid).
- All educators must wear gloves when in contact with bodily fluids or open sores, when handling clothes or equipment which has been soiled by bodily fluids or when cleaning a contaminated area. When gloves have been removed, hands must be washed with soap and water.

Cleaning:

- Toys, equipment and learning areas will be cleaned with warm soapy water and disinfected as needed and on the weekly program turnover.
- Tables will be cleaned/disinfected prior to meal times.
- Bathrooms will be cleaned as necessary throughout the day, using designated equipment.
- Cleaners will clean the preschool (including bathrooms) each day.
- Where blood or bodily fluids need to be cleaned up, extra precautions apply.
 - Exclude children from the area.
 - Always wear gloves and wash hands thoroughly afterwards.
 - Remove as much of the matter as possible using paper towel or tissues, and then put immediately in a plastic bag. Tie the bag and discard it.
 - Clean the area using disinfectant, discarding any cloths or paper used in the above manner.
- Where clothing or material has been soiled, use gloves to handle and place in a sealed bag. If the item belongs to the preschool it shall be soaked in disinfectant and washed separately.

Applying First Aid:

- When attending an injured person who is bleeding take care to avoid contact with blood or bodily fluids by using gloves or other protective equipment.
- If an injury is bleeding, allow the bleeding to stop, and then wash away the blood with water. If the eyes or mouth are contaminated wash with water.
- In the event of having to perform CPR, disposable sterile mouth masks are available for use.

Nappy Changing:

- Procedures for nappy changing should be strictly followed, see 'Changing Children Procedure'. These are displayed in bathrooms and change areas and follow the recommendations by the Australian Government National Health and Medical Research Council.

References:

- Education and Care Services National Regulations, 2018
- National Quality Standards, 2018
- 'Health support planning in Education and Children's Services', DECS, 2006, <https://www.education.sa.gov.au/supporting-students/health-e-safety-and-wellbeing/health-support-planning/managing-health-education-and-care/health-support>
- 'Infection control and disease prevention', DfE, <https://www.education.sa.gov.au/supporting-students/health-e-safety-and-wellbeing/health-support-planning/managing-health-education-and-care/personal-care/infection-control-and-disease-prevention>
- Department Policies available at: <https://www.education.sa.gov.au/department/policies>

Recommended Minimum Exclusion Periods from Preschool

Adapted From: 'Recommended Minimum Exclusion Periods for Infectious Conditions for Schools, Pre-schools and Child Care Centres', Australian Government National Health and Medical Research Council, December 2005; and Staying Healthy in Child Care, 5th edition, Australian Government National Health and Medical Research Council, 2012

Disease or condition	Exclusion of case	Exclusion of contacts
Amoebiasis (Entamoeba histolytica)	Exclude until no diarrhoea for 24 hours	Not excluded
Campylobacter infection	Exclude until no loose bowel motion for 24 hours	Not excluded
Candidiasis	See Thrush	
Chickenpox	See Varicella-Zoster	
Cytomegalovirus infection (CMV)	Exclusion is NOT necessary	Not excluded
Conjunctivitis	Exclude until discharge from eyes has stopped (unless doctor has diagnosed non-infectious conjunctivitis)	Not excluded
Cryptosporidium infection	Exclude until no loose bowel motion for 24 hours	Not excluded
Diarrhoea (no organism identified)	Exclude until no loose bowel motion for 24 hours	Not excluded
Diphtheria	Exclude until medical certificate of recovery is received following at least two negative throat swabs, the first not less than 24 hours after finishing a course of antibiotics and the next 48 hours later	Exclude contacts living in same house until cleared to return by appropriate health authority
Food poisoning	Exclude until well – no vomiting or diarrhoea for 24 hours	Not excluded
Fungal infections of the skin or nails (eg ringworm, tinea)	Excluded until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis	Exclude until no loose bowel motion for 24 hours	Not excluded
Glandular fever (infectious mononucleosis, EBV infection)	Exclusion is NOT necessary	Not excluded
Hand, foot and mouth disease	Exclude until all blisters are dry	Not excluded
Haemophilus influenzae type b (Hib)	Exclude until person has received appropriate antibiotic treatment for at least 4 days	Not excluded
Head lice (pediculosis)	Not excluded if effective treatment begins before the next day at the education and care service. The child does not need to be sent home immediately if head lice are detected.	Not excluded
Hepatitis A	Exclude until medical certificate of recovery is received, and until at least 7 days after onset of jaundice or illness	Not excluded
Hepatitis B	Exclusion is NOT necessary	Not excluded
Hepatitis C	Exclusion is NOT necessary	Not excluded
Herpes simplex (cold sores, fever blisters)	Young children and others unable to comply with good hygiene practices should be excluded while lesion is weeping. Lesions should be covered by a dressing where possible	Not excluded
Human immunodeficiency virus (HIV/AIDS)	Exclusion is NOT necessary. If the person is severely immune compromised they will be vulnerable to other people's infections	Not excluded
Hydatid disease	Exclusion is NOT necessary	Not excluded
Impetigo	See School sores	
Influenza and influenza-like illnesses	Exclude until well	Not excluded
Legionnaires' disease	Exclusion is NOT necessary	Not excluded

Leprosy	Exclude until approval to return has been given by an appropriate health authority	Not excluded
Listeriosis	Exclusion not necessary	Not excluded
Measles	Exclude for at least 4 days after the onset of the rash	Immunised and immune contacts are not excluded. For non-immunised contacts, contact a public health unit for specialist advice. All immune compromised children should be excluded until 14 days after first day of appearance of rash in last case
Meningitis (bacterial)	Exclude until well and has received appropriate antibiotics	Not excluded
Meningitis (viral)	Exclude until well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment completed and until well	Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case
Molluscum contagiosum	Exclusion is NOT necessary	Not excluded
Methicillin resistant Staphylococcus aureus (MRSA) skin infection	Exclusion is NOT necessary unless infected skin lesions on exposed surfaces cannot be completely covered with a dressing.	Not excluded
Mumps	Exclude for 9 days or until swelling goes down	Not excluded
Norovirus	Excluded until there has not been a loose bowel motion or vomiting for 48 hours	
Parvovirus infection B19 (Fifth disease, erythema infectiosum, slapped cheek syndrome)	Exclusion is NOT necessary	Not excluded, but people who are anaemic, immune compromised, or pregnant should be informed of possible risk of getting infection
Pneumococcal disease	Excluded until person is well	Not excluded
Respiratory Syncytial Virus	Exclusion is NOT necessary	Not excluded
Roseola	Exclusion is NOT necessary	Not excluded
Ross River virus	Exclusion is NOT necessary	Not excluded
Rotavirus infection	Exclude until no loose bowel motion or vomiting for 24 hours	Not excluded
Rubella (German measles)	Exclude until fully recovered or for at least 4 days after the onset of the rash	Not excluded
Salmonella infection	Exclude until no loose bowel motions or vomiting for 24 hours	Not excluded
Scabies	Exclude until the day after appropriate treatment has commenced	Not excluded
Scarlet fever	See Streptococcal sore throat	
School sores (impetigo)	Exclude until appropriate antibiotic treatment has commenced. Any sores on exposed skin should be completely covered with a watertight dressing	Not excluded
Shigella infection	Exclude until no loose bowel motion for 24 hours	Not excluded
Shingles	See Varicella-Zoster	
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received appropriate antibiotic treatment for at least 24 hours and feels well	Not excluded
Thrush (candidiasis)	Exclusion is NOT necessary	Not excluded
Toxoplasmosis	Exclusion is NOT necessary	Not excluded

Tuberculosis (TB)	Exclude until medical certificate is produced from appropriate health authority	Not excluded Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Typhoid, Paratyphoid	Exclude until approval to return has been given by an appropriate health authority	Not excluded unless considered necessary by public health authorities
Varicella-Zoster (chickenpox and shingles)	Exclude until all blisters have dried (usually at least 5 days)	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise, not excluded
Viral gastroenteritis (viral diarrhoea)	Exclude until no loose bowel for 24 hours	Not excluded
Warts (common, flat and plantar)	Exclusion is NOT necessary	Not excluded
Whooping cough (pertussis)	Exclude from child care, school or workplace and similar settings until 5 days after starting antibiotic treatment, or for 21 days from the onset of coughing	Contact a public health unit for specialist advice about excluding non-vaccinated contacts, or antibiotics
Worms	Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment has occurred	Not excluded
Yersinia infection	Exclude until no diarrhoea for 24 hours	Not excluded