



CONTROL OF INFECTIOUS DISEASES POLICY

The spread of infections in the education and care environment is facilitated by microbial contamination of the environment, as well as the greater exposure to young children who are still developing hygienic behaviours and habits. **Our Out of School Hours Care (OSHC) Service** will minimise children’s exposure to infectious diseases by adhering to all recommended guidelines from relevant authorities regarding the prevention of infectious diseases, promoting practices that reduce the transmission of infection, ensuring the exclusion of sick children and educators, supporting child immunisation, and implementing effective hygiene practices.

Our Service will provide up-to-date information and advice to parents, families and educators sourced from the Australian Government Department of Health, Australian Health Protection Principal Committee (AHPPC) and state Ministry of Health about infectious diseases as required. Recommendations from the Health Department will be strictly adhered to at all times.

NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
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 REGULATIONS	
77	Health, hygiene and safe food practices
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

90	Medical conditions policy
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	Prescribed information to be notified to the Regulatory Authority
EDUCATION AND CARE SERVICES NATIONAL LAW	
172	Offence to fail to display prescribed information

RELATED POLICIES

Administration of Medication Policy Coronavirus (COVID-19) Management Policy Child Safe Environment Policy Dental Health Policy Enrolment Policy Family Communication Policy Governance Policy Hand Washing Policy Health and Safety Policy	Immunisation Policy Incident, Injury, Trauma and Illness Policy Medical Conditions Policy Physical Environment Policy Pregnancy in Early Childhood Policy Sick Children Policy Rest Time Policy Work Health and Safety Policy
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PURPOSE

Children encounter many other children and adults within the OSHC Service environment which can result in the contraction of infectious illnesses. Our Service has a duty of care to ensure that children families, educators, and visitors of the Service are provided with a high level of protection during the hours of the Service’s operation. We aim to manage illnesses and prevent the spread of infectious diseases throughout the Service.

Immunisation 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 within the community, by reducing the spread of disease and illnesses.

SCOPE

This policy applies to children, families, staff, educators, approved provider, nominated supervisor and management of the OSHC Service.

IMPLEMENTATION

Under the Education and Care Services National Regulations, the approved provider must ensure policies and procedures are in place in relation to dealing with infectious diseases. (ACECQA, August 2021). Our Service is committed to minimise the spread of infectious diseases and viruses by implementing recommendations as stated in the *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) developed by the Australian Government National Health and Medical Research Council and advice provided from the Australian Health Protection Principal Committee (AHPPC).

We are guided by decisions regarding exclusion periods and notification of infectious diseases by the *Australian Government- Department of Health* and local Public Health Units in our jurisdiction as per the Public Health Act.

The need for exclusion and the length of time a person is excluded from the Service depends on:

- how easily the infection can spread
- how long the person is likely to be infectious and
- the severity of the infectious disease or illness.

This policy must be read in conjunction with our other Quality Area 2 policies:

- Immunisation Policy
- Sick Children Policy
- Incident, Illness, Accident and Trauma Policy and
- Medical Conditions Policy and
- Handwashing Policy
- COVID-19 Management Policy

PREVENTING INFECTIOUS DISEASES

Children often enter school and education and care services when their immune systems are still developing. They have not been exposed to many common germs and therefore are susceptible to bacteria that may cause infections. Given the close physical contact children have with other children in OSHC it is very easy for infectious diseases and illnesses to spread through normal daily activities.

Our OSHC Service implements rigorous hygienic practices to limit the spread of illness and infectious diseases including:

- effective hand washing hygiene
- cough and sneeze etiquette
- use of gloves
- exclusion of children, educators or staff when they are unwell or displaying symptoms of an infectious disease or virus
- effective environmental cleaning including toys and resources
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the OSHC Service
- physical distancing (if recommended)
- use of face masks (as mandated by PHO)
- restricting parents and visitors from entering our service to reduce threat of spread of a community disease (e.g.: COVID-19)

Immunisation requirements

Immunisation is a reliable way to prevent many childhood infectious diseases. When enrolling a child in an Out of School Hours Care Service, parents will be asked to provide an Immunisation History Statement. Should a child not be fully immunised according to the National Immunisation Program Schedule, they will not be prevented from enrolling.

Only parents of children (less than 20 years of age) who are fully immunised or are on a recognised catch-up schedule can receive Child Care Subsidy (CCS) and the Family Tax Benefit (FTB) Part A end of year supplement.

Educators and other staff at our OSHC Service are highly recommended to keep up to date with all immunisations including yearly influenza vaccinations. These include vaccinations recommended by the National Health and Medical Research Council (NHMRC). Educators, staff and visitors, including health professionals, volunteers, students, committee members and contractors are required to be fully vaccinated for COVID-19 under Public Health Orders in [NSW](#)

Refer to Immunisation Policy for more information.

Reporting Outbreaks to the Public Health Unit and Regulatory Authority

Outbreaks of communicable diseases and contagious viruses represent a threat to public health. To help prevent outbreaks, the Department of Health monitors the number of people who contract certain

infectious diseases and their characteristics, the recent travel or attendance of infected people in a public place or on public transport, and works with health specialists and doctors to help prevent the transmission of diseases to other people.

The Public Health Act 2010 lawfully requires and authorises doctors, hospitals, laboratories, school principals and childcare centre directors to confidentially notify the Public Health Unit of patients with certain conditions, and to provide the required information on the notification forms. Specialist trained public health staff review this information and if necessary, contact the patient's doctor, and sometimes the patient, to provide advice about disease control and to complete the collection of information.

All information is held confidentially in order to protect the patient's privacy. Both the **NSW** and Commonwealth Privacy Acts only release/disclose patient information where it is lawfully required or authorised.

Management is required to notify the local Public Health Unit (PHU) by phone (call 1300 066 055) 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 or any confirmed case of COVID-19.

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella ('German measles')
- Measles
- Pertussis ('whooping cough')
- Tetanus
- An outbreak of 2 or more people with gastrointestinal or respiratory illness.

Management will closely monitor health alerts and guidelines from Public Health Units and the Australian Government- Department of Health for any advice and emergency health management in the event of a contagious illness outbreak – (e.g.: COVID-19)

The Approved Provider must also notify the Regulatory Authority of any incidence of a notifiable Infectious disease or illness. [acecqa contact regulatory authority](#)

MANAGEMENT WILL ENSURE

- that all information regarding the prevention of infectious diseases is sourced from a recognised health authority [Australian Government Department of Health](#)
- exclusion periods for people with infectious diseases recommended by Government Authorities are implemented for all staff, children, parents, families and visitors
- the OSHC service implements recommendations from [Staying healthy: Preventing infectious diseases in early childhood education and care services](#) to maintain a healthy environment
- advice and recommendations from the Australian Health Protection Principal Committee (AHPPC) and Safe Work Australia will be implemented where reasonably possible
- children are protected from harm by ensuring relevant policies and procedures are followed regarding health and safety within the OSHC Service
- a staff immunisation record that documents each staff member's previous infection or immunisations (including dates) is developed and maintained
- a record is kept of all staff's COVID-19 vaccinations [if mandated by Public Health Orders]
- the Public Health Unit is notified in the event of an outbreak of viral gastroenteritis. Management must document the number of cases, dates of onset, duration of symptoms. An outbreak is when two or more children or staff have a sudden onset of diarrhoea or vomiting in a 2-day period. (NSW Government- Health 2019)
- a notice is clearly displayed stating that there has been an occurrence of an infectious disease at the OSHC service
- required enrolment information, including health and immunisation records of enrolled children is collected, maintained and appropriately and securely stored

Managing a positive case of COVID-19 in OSHC settings

Changes may occur to how our OSHC Service manages positive cases of COVID-19 during 2022. We will be directed by our regulatory authority as to what procedures need to be followed to ensure the health and safety of all staff, children and families.

Any person who tests positive to COVID-19 must inform their workplace/employer, education setting and school aged care service as soon as possible. If a parent or carer attended the OSHC Service while infectious, they must inform the service. A positive person and any close contacts must self-isolate for a minimum of 7 days. Exemptions may apply for staff who work as essential workers.

The Approved Provider must notify the Regulatory Authority of a positive case/or cases of COVID-19 within 7 days, or as soon as possible through the [\(NQA ITS\)](#) as per Regulation_175(2)(c)

- management will determine staff, children and visitors who were in attendance with the case during the infectious period
- management will notify those in attendance and send a risk of COVID-19 letter
- isolation is no longer mandatory for exposures in ECE services, however it is recommended
- the service will undertake a thorough clean and disinfection
- a decision to close the service may be required if staffing ratios are affected and all families and staff will be notified of the closure
- privacy and confidentiality laws are adhered to- the person/s who has the confirmed case of COVID-19 will be on a 'need to know' basis only
- re-opening dates will be confirmed to the Regulatory Authority, DESE and families.

See: [Management of COVID positive cases in ECE service NSW](#)

A NOMINATED SUPERVISOR/ RESPONSIBLE PERSON WILL ENSURE:

- a hygienic environment is promoted and maintained
- children are supported in their understanding of health and hygiene practices throughout the daily program and routine (hand washing, hand drying, cough and sneeze etiquette)
- educators and staff are aware of relevant immunisation guidelines for children and themselves
- an Immunisation History Statement for each child is requested on enrolment regarding the child's immunisation status (AIR) and any medical conditions
- families are provided with relevant sourced materials and information on infectious diseases, health, and hygiene including:
 - the current **NSW** Immunisation Schedule
 - exclusion guidelines in the event of a vaccine preventable illness at the Service for children that are not immunised or have not yet received all their immunisations
 - advice and information regarding any infectious diseases in general and information regarding any specific infectious illnesses that are suspected/present in the Service.
- families are provided with information about an infectious disease verbally and by displaying and emailing the Infectious Diseases Notification Form and details
- families are advised that they must alert the OSHC Service if their child is diagnosed with an Infectious Illness
- all educators are mindful and maintain confidentiality of individual children's medical circumstances
- that opportunities for educators to source pertinent up to date information from trusted sources on the prevention of infectious diseases and maintaining health and hygiene are provided

- that opportunities for staff, children, and families to have access to health professionals by organising visits/guest speakers to attend the service to confirm best practice are provided
- families are advised to keep children at home if they are unwell. If a child has been sick, they must be well for **24hrs** before returning to the Service. For example, if a child is absent due to illness or is sent home due to illness, they will be unable to attend the next day as a minimum. **The Nominated Supervisor may approve the child's return to the Service if families provide a doctor's certificate/clearance certifying that the child is no longer contagious and is in good health. Please note; it is not always possible to obtain a doctor's certificate or clearance for suspected cases of an illness. The decision to approve a child's return is up to the Approved Provider/Nominated supervisor**
- to complete the register of *Incident, Injury, Trauma of Illness* and/or document incidents of infectious diseases no later than 24 hours of an illness or infectious disease occurring in the Service.
- educators or staff who have diarrhoea or an infectious disease do not handle food for others and are not to return to work until they have been symptom free for 48 hours
- any risk to a child or adult with complex medical needs is minimised in the event of an outbreak of an infectious disease or virus. This may require a risk assessment and decision-making regarding the suitability of attendance of the child or staff member during this time.

Educators will ensure:

- that any child suspected of having an infectious illness is responded to and their health and emotional needs supported at all times
- any child suspected of having an infectious illness is isolated from other children and supervised whilst waiting for collection by parents or guardian
- that appropriate health and safety procedures are implemented when treating ill children- wear disposable gloves, face mask or other PPE if needed
- families are aware of the need to collect their unwell child/ children as soon as practicable from the OSHC Service
- after confirmation that a child is suffering from an infectious disease, and as soon as practical, the family of each child must be notified whilst maintaining the privacy of the ill/infectious child.

Communication may be:

- verbally
- through a letter from the educator or Approved Provider
- posting a note or sign at the entry of the residence
- via electronic message- text message or email

- all resources or items touched by a child with a suspected illness are thoroughly cleaned and disinfected- (cushions, pillows, toys)
- their own immunisation status is maintained, and the Approved Provider/Nominated Supervisor is advised of any updates to their immunisation status
- they are fully vaccinated against COVID-19 and have provided proof of vaccination to the approved provider
- opportunities are provided for children to participate in hygiene practices, including routine opportunities, and intentional practice such as hand washing, sneezing and cough etiquette
- consideration is given to the combination of children to decrease the risk of attaining an infectious illness when planning the routines/program of the day
- they adhere to the OSHC Service's health and hygiene policy including:
 - hand washing
 - daily cleaning of the service
 - wearing gloves (particularly when in direct contact with bodily fluids)
 - appropriate and hygienic handling and preparation of food
 - wear face masks if mandated by PHU
 - COVIDSafe Plan
- they maintain up-to-date knowledge with respect to Health and Safety through on-going professional development opportunities

Prevention strategies for minimising the spread of disease within our Service include all staff ensuring:

- full adherence to the NHMRC childcare cleaning guidelines
- to clean surfaces first with detergent and water before using disinfectants. (Disinfectants cannot kill germs unless areas are clean)
- mops used for toilet accidents are to be soaked in disinfectant in a bucket in the laundry sink and then air-dried.
- that a daily clean is carried out on other surfaces that may transmit germs such as high touch objects including doorknobs, tables, remotes, light switches, low shelving, etc. This will be increased, if an outbreak has been recorded in the Service or to minimise the risk of transmission of a virus such as COVID-19
- that if a child has a toileting accident, the items are placed in a plastic bag with the child's name on it. The plastic bag will be stored in a sealed container labelled 'soiled/wet clothing' for parents to take home.

- cloths are colour coded so that a separate cloth is used to clean floors, bathroom, art and craft, and meal surfaces
- all washable toys/equipment out on display for the children are to be washed on a weekly basis to decrease the risk of cross contamination and recorded with the date and a signature as evidence.
- toys and equipment (that are difficult to wash) will be washed with detergent (or soap and water) and air-dried in sunlight
- washable toys and equipment will be washed in **detergent and hot water or the dishwasher** and aired to dry (toys will not be washed in the dishwasher at the same time as dishes). All toys and equipment that have been cleaned will be recorded on the toy cleaning register.
- all cleaning procedures will be recorded on the **Service's Cleaning Checklist**
- floor surfaces will be cleaned on a daily basis after each meal and at the end of each day
- toilets/bathrooms will be cleaned in the middle of the day, the end of the day and whenever needed throughout the day using detergent and water followed by disinfectant **and paper towel**
- when cleaning up spills of faeces, vomit or urine off floors, bathrooms etc. educators will use disinfectant on the surface after cleaning it with detergent and warm water
- pregnant staff members should not assist in toileting or cleaning up toileting accidents to prevent unexpected cross contamination and risk of contracting Cytomegalovirus (CMV). (see *Pregnancy in Early Childhood Policy*)

FAMILIES WILL:

- adhere to the Service's policies regarding *Control of Infectious Diseases, Immunisation and Sick Children* and adhere to exclusion requirements
- adhere to the Service's restrictions of entry into the Service in the event of an outbreak of an infectious disease or virus
- adhere to the Service's policy regarding *Hand Washing*
- exclude their child from care if they display symptoms of an infectious illness or disease or in the event of a vaccine preventable disease occurs in the OSHC Service and their child is not immunised fully
- advise the OSHC Service of their child's immunisation status, by providing approved written documentation for the Service to copy and place in the child's file
- advise the OSHC Service when their child's immunisation/medical condition is updated to ensure that immunisation and medical records are up to date
- adhere to the Service's risk minimisation strategies if their child has complex medical needs in the event of an outbreak of an infectious disease or virus.

Resources

[Gastro Pack NSW Health](#)

[Recommended exclusion periods- Poster Staying Healthy: Preventing Infectious diseases in early childhood education and care services](#)

[Minimum periods for exclusion from childcare services \(Victoria\)](#)

[Minimum periods of exclusion may be different in each state or territory. Check your own jurisdiction and include a link for parents to access.]

[Time Out Keeping your child and other kids healthy!](#) (Queensland Government)

Time Out Brochure [Why do I need to keep my child at home?](#)

SOURCE

Australian Children's Education & Care Quality Authority. (2014).

ACECQA. (2021). Policy and procedure guidelines. *Dealing with Infectious Diseases*.

Australian Government Department of Health Health Topics <https://www.health.gov.au/health-topics>

Australian Government. Department of Health (2019). *National Immunisation Strategy for Australia 2019-2024*

https://www.health.gov.au/sites/default/files/national-immunisation-strategy-for-australia-2019-2024_0.pdf

[Australian Government Department of Health Australian Health Protection Principal Committee \(AHPPC\)](#)

Department of Human Resources: National Immunisation Program Schedule: <https://beta.health.gov.au/initiatives-and-programs/national-immunisation-program>

Early Childhood Australia Code of Ethics. (2016).

Education and Care Services National Law Act 2010. (Amended 2018).

[Education and Care Services National Regulations](#). (2011).

Guide to the Education and Care Services National Law and the Education and Care Services National Regulations. (2017).

Guide to the National Quality Framework. (2017). (Amended 2020).

Guide to the National Quality Standard. (2020).

Medicare Australia (Department of Human Services): <https://www.humanservices.gov.au/individuals/medicare>

National Health and Medical Research Council (NHMRC): <https://www.nhmrc.gov.au/>

National Health and Medical Research Council. (2012). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

NSW Government Department of Health. Vaccination requirements for child care.

https://www.health.nsw.gov.au/immunisation/Pages/childcare_qa.aspx

NSW Public Health Unit: <https://www.health.nsw.gov.au/Infectious/Pages/phus.aspx>

Public Health Act 2010

Public Health Amendment Act 2017

Public Health Regulation 2012

Public Health and Wellbeing Regulations 2019 Victoria

Queensland Health [Information for parents about infectious diseases and exclusion periods in Queensland early childhood education centres and schools](#)

Revised National Quality Standard. (2018).

Safe Work Australia

REVIEW

POLICY REVIEWED BY	TRACEY RYAN	DIRECTOR	MARCH 2022
POLICY REVIEWED	MARCH 2022	NEXT REVIEW DATE	MARCH 2023
MODIFICATIONS	<ul style="list-style-type: none"> deleted information about a confirmed COVID-19 case replaced by <i>Managing a positive case of COVID-19 in an OSHC Service</i> services must check with their state regulatory authority for current guidelines for managing a positive case of COVID-19 as definitions of close contacts and management of cases may change minor edits sources checked for currency 		
POLICY REVIEWED	PREVIOUS MODIFICATIONS	NEXT REVIEW DATE	
OCTOBER 2021	<ul style="list-style-type: none"> Additional law/regulations added- ACECQA Guidelines to Policy and Procedures document- Dealing with Infectious Diseases (August 2021) additional related policies added Additional information added re: mandated COVID-19 vaccinations 	MARCH 2022	
MARCH 2021	<ul style="list-style-type: none"> review of policy changed to March each year in readiness for cold/flu season 'Information to be displayed at the Service' deleted (this is contained in Immunisation Policy' sources checked for currency and links updated where needed additional resources added for Queensland services 	MARCH 2022	
SEPTEMBER 2020	<ul style="list-style-type: none"> addition of use of detergent and water to clean surfaces before disinfecting as per Staying Healthy: Preventing infectious diseases in ECEC guidelines additional information related to procedures for a positive case of COVID-19 at the service 	MARCH 2021	
MAY 2020	<ul style="list-style-type: none"> Additional information from Australian Health Protection Principal Committee and Safe Work Australia re: physical distancing, immunisation for staff, risk minimisation for vulnerable children/adults, additional cleaning Requirement of a doctor's certificate for suspected cases of infectious disease made editable for individual services to decide upon Pregnancy in Early Childhood reference and risks of CMV and pregnancy 	JUNE 2021	

	<ul style="list-style-type: none"> Inclusion of recommended exclusion periods Poster link – Staying Healthy: Preventing infectious diseases in ECEC 	
MARCH 2020	<ul style="list-style-type: none"> Implementation information added regarding infectious illnesses Added mandatory reporting to public health unit information Rearranged some content into new headings- Prevention Strategies deleted repeated items New sources added 	JUNE 2021
JUNE 2019	<ul style="list-style-type: none"> Some grammar, punctuation and spelling edited. Additional information added to points. Sources checked for currency. Sources/references corrected, updated, and alphabetised. Added a Related Policy. Related policies alphabetised. 	JUNE 2020
JUNE 2018	<ul style="list-style-type: none"> Updated the opening statement, included the 'Related Policy' section and made minor adjustments to selected text 	JUNE 2019
OCTOBER 2017	<ul style="list-style-type: none"> New policy created 	OCTOBER 2018