



Policy 2.5

Sick Children

Children come into contact with many other children and adults in the early childhood environment increasing their exposure to others who may be sick or carrying an infectious illness. The National Quality Standard requires early childhood education and care services to implement specific strategies to minimise the spread of infectious illness and maintain a healthy environment for all children, educators and families. We acknowledge the difficulty of keeping children at home or away from childcare when they are sick and the pressures this causes for parents, however our Service aims to minimise the transmission of infectious diseases by adhering to regulations and policies protecting the health of all children, staff, families and visitors.

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.
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.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
85	Incident, injury, trauma and illness policies and procedures
88	Infectious diseases

90	Medical conditions policy
92	Medication record
93	Administration of medication

RELATED POLICIES & PROCEDURES

Administration of First Aid Policy Administration of Medication Policy Infectious Diseases Policy Coronavirus-COVID-19 Management Policy Enrolment Policy Family Communication Policy	Handwashing Procedure Immunisation Policy Incident, Illness, Accident and Trauma Policy Medical Conditions Policy Pregnancy in Early Childhood Policy
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PURPOSE

We aim to maintain the health and wellbeing of all children, staff, and their families, ensuring a healthy environment and minimising cross contamination and the spread of infectious illnesses by implementing best practice and high standards of personal hygiene within our Service.

SCOPE

This policy applies to children, families, staff, management, and visitors of the Service.

IMPLEMENTATION

Our Service has adopted the *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) publication recommendations developed by the Australian Government National Health and Medical Research Council to guide our practices to help limit the spread of illness and disease. We aim to provide families with up to date information regarding specific illnesses and ways to minimise the spread of infection within the Service and at home.

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.

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

- Infectious Diseases Policy
- Immunisation Policy

- Incident, Illness, Accident and Trauma Policy and
- Medical Conditions Policy and
- Handwashing Procedure

Staying Healthy: Preventing infectious diseases in early childhood education and care services (2013) explains how infections are spread as 'The Chain of Infection'.

There are three steps in the chain:

- The germ has a source
- The germ spreads from the source
- The germ infects another person

The chain of infection can be broken at any stage to help prevent and control the spread of diseases.

The germ has a source

Germs can be picked up directly from an infected person or from the environment. It is important to understand that an infected person may not show any signs or symptoms of illness.

The germ spreads from the source

Germs can spread in several ways, including through the air by droplets, through contact with faeces and then contact with mouths, through direct contact with skin, and through contact with other body secretions (such as urine, saliva, discharges or blood).

Some germs can spread directly from person to person, others can spread from the infected person to the environment. Many germs can survive on hands and on objects such as toys, door handles and bench tops. The length of time a germ can survive on a surface (including the skin) depends on the germ itself, the type of surface it has contaminated and how often the surface is cleaned. Washing hands and surfaces regularly with detergent and water is a very effective way of removing germs and preventing them spreading through the environment.

(Source: Staying healthy: Preventing infectious diseases in early childhood education and care services, 5th Edition, 2013 p: 7)

The germ infects another person

When the germ has reached the next person, it may enter the body through the mouth, respiratory tract, eyes, genitals, or broken or abraded skin. Whether a person becomes ill after the germ has entered the body depends on both the germ and the person's immunity.

Illness can be prevented at this stage by stopping the germ from entering the body (for example, by making sure that all toys that children put in their mouths are clean, by washing children's hands, by covering wounds), and by prior immunisation against the germ.

Source: *Staying healthy: Preventing infectious diseases in early childhood education and care services*, 5th Edition, 2013 p: 7)

Minimizing the spread of infections and diseases in early education and care services

We understand that it can be difficult for families to know when their child is sick. Families may experience problems taking time off work or study to care for their child at home. Obtaining leave from work or study can contribute to negative attitudes in the workplace which can cause stress on families. Families may also experience guilt when they send their child to care who is not well.

However, it is imperative that families maintain a focus not only on the well-being of their own child but also upon the well-being of other children and the early childhood professionals at the Service. To protect the health of children and staff within the Service, it is important that children and staff who are ill are kept away from the Service for the recommended period.

At times, an outbreak of a new or 'novel' virus or infection, such as COVID-19, may require exclusion from the Service that is not specified in general exclusion periods for common infectious illnesses. Information, education and recommendations regarding any 'novel' virus will be provided by the Australian Government Department of Health and/or local public health unit.

(see **Excluding Children from the Service** section)

The need for exclusion and the length of time a person is excluded 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.

Our Educators and staff are not medical practitioners and are not able to diagnose whether or not a child has an infectious illness. However, if an infectious illness is suspected, our Service may ask the family to collect their child from care as soon as possible or not bring the child to care.

- Management and Educators *may* request families seek medical advice and provide a medical certificate stating that the child is no longer infectious prior to returning to care. **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 help minimise the spread of illness and infectious diseases our Service implements rigorous hygiene and infection control procedures and cleaning routines including:

- effective hand washing hygiene
- cough and sneeze etiquette
- use of protective 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 and bedding
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the Service
- physical distancing (when recommended by Australian Health Protection Principal Committee [AHPPC] and/or Safe Work Australia)

Children arriving at the service who are unwell

Management will not accept a child into care if they:

- have a contagious illness or infectious disease
- have been in close contact with someone who has a positive confirmed case of COVID-19
- have a temperature above **38°C when assessed prior to entry to the service (effective during a pandemic or outbreak of an infectious disease)**
- are unwell and unable to participate in normal activities or require additional attention
- have had a temperature, vomiting in the last 24 hours- as reported by a parent
- have had diarrhoea in the last 24 hours
- have started a course of anti-biotics in the last 24 hours
- have been given medication for a temperature prior to arriving at the Service (for example: Panadol)

Children who become ill at the service

Children may become unwell throughout the day, in which case Management and Educators will respond to children's individual symptoms of illness and provide immediate comfort and care.

- Educators will closely monitor and document the child's symptoms on the Illness Register
- Children who are unwell at the Service will be able to rest in a supervised area away from other children until parents or the emergency contact person is able to collect them
- A child who has passed 2 runny stools or vomited whilst at the Service will be sent home.
- Educators will take the child's temperature. If the child's temperature is 38°C or higher, management will contact the child's parents/guardian/emergency contacts as soon as possible to have the child collected (within 60 minutes)
- For infants under three months old with a temperature/fever over 38°C, parents will be immediately notified and requested to seek medical assistance. If the parent cannot take the child to a GP immediately, permission will be required for the Service to seek medical assistance urgently.
- Educators will monitor the child closely and be alerted to vomiting, coughing or convulsions
- Educators will attempt to lower the child's temperature by:
 - removing excessive clothing (shoes, socks, jumper, pants)
 - encouraging the child to take small sips of water
 - moving the child to a quiet area where they can rest whilst being supervised
- Educators will continue to document any progressing symptoms.
- Educators will complete the *Incident, Illness, Accident and Trauma Record*, ensuring the form has been completed correctly and signed by the parent/guardian/emergency contact.
- Educators will thoroughly clean and disinfect any toys, resources or equipment that may be contaminated by a sick child.

Common colds and flu

The common cold or flu (viral upper respiratory tract infections) are very common in children occurring 6-10 times a year on average with the highest number usually being during the first 2 years in childcare, kindergarten or school. Symptoms may include coughing, runny nose and a slight temperature.

In circumstances where a child appears to have cold or flu symptoms, management will determine if the child is well enough to continue at the Service or if the child requires parental care.

Our Service aims to support the family's need for childcare however, families should understand that a child who is unwell will need one-on-one attention which places additional pressure on staff ratios and the needs of other children.

Children who are generally healthy, will recover from a common cold in a few days. Keeping a child home and away from childcare, helps to prevent the spread of germs.

Influenza is a highly contagious illness and can spread to others for 24 hours before symptoms start. To prevent the spread of influenza our service encourages staff and children to be vaccinated once a year.

Teething

Teething, the emergence of the first primary (baby) teeth through a baby's gum, is a normal part of every child's development. Teething can begin as early as 3 months and continue until a child is 3 year of age. The first teeth appear are usually the bottom two front teeth, typically between the ages of 4-7 months, although it is not unusual for teeth to appear as late as 12-14 months of age.

Whenever teething begins, parents may notice that their child seems to drool more and wants to chew on things. For some babies teething is painless; others may experience brief periods of irritability. The gums may appear red and swollen and, if pressed, may feel hard and pointed.

Parents may consider giving the baby something to chew on, such as a clean chilled teething ring, toothbrush or clean moist face cloth, or rubbing gums with a clean finger can help to relieve symptoms.

SA Health no longer recommend the use of teething gels for young children. Conyngham St Community Children's centre will not administer teething gels but will provide children with practical and alternative options that can help alleviate teething pain.

Parents are required to keep children home if they have been administered Panadol or any other over-the-counter medication (eg Nurofen, antihistamine or cough medicine). Educators have an obligation to inform parents that they are required to take their child home.

Note: Teething does not cause fever or diarrhoea. If a child has these symptoms, investigate other possible causes and treat as you would at any other time.

Reporting outbreaks to the public health unit

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, any confirmed case of COVID-19 or outbreak of gastroenteritis.

- 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 such as coronavirus- COVID-19.

Excluding children from the service

When a child has been diagnosed with an illness or infectious disease, the Service will refer to information about recommended exclusion periods from the [Public Health Unit \(PHU\)](#) and *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

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

- When an infectious disease has been diagnosed, the Service will display appropriate documentation and alerts for families including information on the illness/disease, symptoms, infectious period and the exclusion period. (This information can be obtained from *Staying healthy: Preventing infectious diseases in early childhood education and care and Public Health Unit, or Department of Health*).
- If a vaccine preventable disease occurs in the Service, children who have not been fully immunised will be excluded from care.
- Management will check all children's Immunisation records and alert parents as required.
- Children that have had diarrhoea and vomiting will be asked to stay away from the Service for **24 hours** after symptoms have ceased to reduce infection transmission.
- Children who have a suspected case of COVID-19 and meet the criteria for testing (fever, cough, sore throat, shortness of breath) are required to contact their GP or be tested at a COVID-19 testing clinic. Exclusion periods will apply if they have a confirmed case.

Notifying families and emergency contact

- It is a requirement of the Service that all emergency contacts are able to pick up an ill child within a 60-minute timeframe.
- In the event that the ill child is not collected in a timely manner, or should parents refuse to collect the child, a warning letter will be sent to the families outlining Service policies and requirements. The letter of warning will specify that if there is a future breach of this nature, the child's position may be terminated.

MANAGEMENT AND EDUCATORS WILL ENSURE:

- effective hygiene policies and procedures are adhered to at all times to prevent the spread of illnesses
- they promote effective hand hygiene and cough etiquette
- effective environmental cleaning policies and procedures are adhered to all times
- all families are provided access to relevant policies upon enrolment which will be explained by management including: *Control of Infectious Diseases Policy, Sick Children Policy, Incident, Illness, Accident and Trauma Policy and Medical Conditions Policy.*
- families are provided with relevant information from a trusted source about preventing the spread of illnesses
- that any child who registers a temperature of 38°C or above is collected from the Service and excluded for 24 hours after the last elevated temperature.
- a child who has not been immunised due to medical reasons will be excluded from the Service if a vaccine preventable disease is reported within the Service community and that child is deemed to be in danger of contracting the illness. Please refer to our *Control of Infectious Diseases Policy.*
- families of a child with complex and chronic medical conditions will be notified in the event of an outbreak of an illness or infectious disease that could compromise their health
- families are notified to collect their child if they have vomited or had diarrhoea whilst at the Service.

THE APPROVED PROVIDER OR NOMINATED SUPERVISOR WILL ENSURE

- notification is made to the Regulatory Authorities within 24 hours of any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an Education and Care Service, which:

(i) a reasonable person would consider required urgent medical attention from a registered medical practitioner or

(ii) for which the child attended, or ought reasonably to have attended, a hospital. For example: whooping cough, broken limb and anaphylaxis reaction

- any incident or emergency where the attendance of emergency services at the Education and Care Service premises was sought, or ought reasonably to have been sought (eg: severe asthma attack, seizure or anaphylaxis)
- parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, accident, or trauma occurring.
- notification is made to the Public Health Unit on 1800 020 080 of any confirmed cases of COVID-19
- notification is made to the Regulatory Authority within 24 hours of any confirmed cases of COVID-19

PARENT/FAMILY RESPONSIBILITY

In order to prevent the spread of disease, families are required to monitor their child's health and not allow them to attend childcare if they have an infectious illness or display symptoms of an illness.

For children who have ongoing medical needs such as asthma or anaphylaxis, parents should regularly review their child's health care action plans to ensure educators and other staff are able to manage their individual needs as required.

Families should implement effective hygiene routines at home such as regular handwashing and sneeze and cough routines (use of tissues, covering their mouth with coughing, sneezing into a tissue or elbow).

Families should notify the Service if their child has been unwell in the past 24 hours or someone in the family is/has been sick. This is particularly critical during a pandemic such as COVID-19.

Signs of illness in young children may include:

- runny, green nasal discharge
- high temperature
- diarrhoea
- red, swollen or discharging eyes (bacterial conjunctivitis)
- vomiting
- rashes (red/purple)
- irritability, unusually tired or lethargic

- drowsiness
- poor circulation
- poor feeding
- poor urine output
- a stiff neck or sensitivity to light
- pain
- mouth sores that cause drooling
- impetigo

Parents should seek medical attention should their child (or other family members) develop symptoms such as:

- high fever
- uncontrolled coughing or breathing difficulties

Families are required to keep up to date with their child's immunisation, providing a copy of the updated AIR Immunisation History Statement to the Service following each immunisation on the National Immunisation Schedule. Children cannot attend the Service unless they are up to date with their immunisations.

Returning to care after surgery

Children who have undergone any type of surgery will need to take advice from their doctor/surgeon as to when it is appropriate and safe to return to childcare.

A medical clearance statement will be required to ensure the child is fit and able to return to the Service and participate in daily activities.

SOURCE

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

Australian Government Department of Education, Skills and Employment *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).

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

Australian Government Department of Health Australian Health Protection Principal Committee (AHPPC)

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

Guide to the National Quality Standard. (2020)

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

National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services.*

Public Health Act 2010

Raising Children Network: <https://raisingchildren.net.au/guides/a-z-health-reference/fever>

Revised National Quality Standard. (2018).

The Sydney Children’s Hospitals network (2020). <https://www.schn.health.nsw.gov.au/search/site?query=fever>

Safe Work Australia

REVIEW

POLICY REVIEWED	DECEMBER 2020	NEXT REVIEW DATE	JANUARY 2022
DECEMBER 2020	<ul style="list-style-type: none"> Minor changes to include strategies for a COVID-19-safe environment adjustments to requesting families to produce a medical certificate each time their child has symptoms of an illness (due to COVID-19 infection prevention strategies, this is not always possible to contact GPs for clearance) influenza vaccination recommendations children with complex and/or chronic medical conditions are notified in the event of illness in the service 		JANUARY 2022
MARCH 2020	<ul style="list-style-type: none"> Changed position of colds and flu section Additions to infectious diseases/illnesses Additions for reporting outbreaks to Public Health Additional section for Approved Provider notification Exclusion period recommendation resources added Inclusion of Department of Health information Additional information for parents and families 		JUNE 2021
JUNE 2019	<ul style="list-style-type: none"> Some sentences reworded/refined. Additional information added to points. Rearranged the order of points for better flow Sources/references updated, and alphabetised. Policies added to ‘Related Policies’ 		JUNE 2020

	<ul style="list-style-type: none"> • Minor formatting (line spacing & paragraph spacing) for consistency throughout policy. 	
MAY 2018	<ul style="list-style-type: none"> • Included the 'Related Policies' section • Included information from 'Staying Healthy in Childcare' about the Chain of Infection. Updated the exclusion period in respect of a vomiting and expanded the 'Families Responsibilities' section. 	JUNE 2019
OCTOBER 2017	<ul style="list-style-type: none"> • Updated references to comply with the revised National Quality Standard 	JUNE 2018
AUGUST 2017	<ul style="list-style-type: none"> • Updated to meet the National Law and/or National Regulations in respect of a serious incidents and notification purposes. 	JUNE 2018
JUNE 2017	<ul style="list-style-type: none"> • Minor changes made to the policy terminology to ensure best practice 	JUNE 2018