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### Purpose

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Victor Harbor Community Kindergarten aims to provide a healthy and safe environment for the staff and children in their care. This policy follows the recommendations highlighted in the publication 'Staying Healthy in Child Care - Preventing Infections Diseases in Child Care'.

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### Risk Factors

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Children are particularly at risk of infection due to the following reasons:

1. They have close physical contact with a wide range of children and adults in closed spaces for a long period of time.
2. They may not have had previous exposure to many common infectious diseases.
3. They have prolonged contact with materials and objects that may carry infectious microorganisms.
4. Infectious diseases are presenting in children at an earlier age than in the past, with young children more susceptible to various complications.
5. They are continually being introduced to new children who have their own set of pathogens.
6. Due to their age, children in kindergarten often contribute to the spread of infection. Difficulty with toilet training, lack of control over bodily secretions and the inability to correctly wash hands all provide a breeding ground for infectious diseases.
7. Some infectious agents pose a higher risk in a group care environment.
8. The risk of infection is increased in a group situation and strict hygiene practices need to be implemented, more so than in the home environment.

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### Procedures – Controlling Infectious Diseases

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#### Exclusions

1. Victor Harbor Community Kindergarten has a 24 hour exclusion policy for general illnesses. This enables the symptoms to subside, ensuring normal activity and diet can be reintroduced.
2. 24 hour exclusion after vomiting, diarrhoea or stomach upset means 24 hours clear from the symptoms, after the reintroduction and tolerance of a full diet.
3. 24 hour exclusion after a fever / temperature means the child's temperature has stayed at a normal level (36°C - 37°C) for 24 hours without the use of Panadol or any other agent.
4. 24 hour exclusion after medication means that the child is excluded for 24 hours after commencing a course of antibiotics or antifungal treatment. This will ensure the medication has begun taking effect.
5. Exclusion prevents transmission of disease and assists in the recovery of the sick child.
6. Each child and staff member must be well enough to attend and participate fully in normal activities.
7. Children requiring one on one care will need to remain at home until normal activities can be resumed.
8. Exclusion applies even if it has not been possible to provide a specific diagnosis for the illness.
9. Children who attend the centre with discharge from the nose or ears may be a source of infection. Staff will contact the parent / caregiver to discuss the issue and may request the child be excluded and medical advice sought.

## Assessing Serious or Potentially Serious Infectious Disease

1. The centre has the right to exclude any child or staff member who has an illness that may affect the health of others.
2. As a general principle, children should not be brought to the centre unless they are able to cope adequately with normal routines and activities.
3. The child should not be brought to the centre if they will expose others to unnecessary infection.
4. If a child does not have an infectious disease but exhibits any of the following signs they will be excluded:
  - a. Sleeps at unusual times during the day
  - b. Has a raised temperature that remains above 37.5°C or continues to rise further
  - c. Is crying constantly as a result of discomfort due to illness
  - d. Is reacting badly to medications
  - e. Is in need of constant one to one care
5. If a child is sick or exhibits any of the above signs, staff need to be notified of the child's absence by 10am.
6. It is essential that infectious diseases are reported to the Director as soon as possible so that other parents / caregivers can be notified.
7. Children are to be excluded in accordance with this health policy, the final decision rests with the Director as to whether the child is in a fit state to attend the centre or not.
8. Parents are required to collect their child within half an hour of being notified of the exclusion. If parents are unable to be contacted, the emergency contact will be called to collect the child.
9. Until the child is collected, staff will aim to exclude that child from the general play areas.

## Hygiene and Infection Control

The centre has a comprehensive Policy that deals with the following issues:

1. Education of the children in hygiene practices
2. General hygiene procedures include the cleaning of the centre, correct disposal of rubbish, the universal precautions when dealing with bodily fluids and the covering of wounds.
3. Hand washing procedures are taught and encouraged
4. Basic guidelines in the provision of First Aid

## Notification Procedures in Infectious Disease Cases

1. All parents will be notified of any common infectious diseases in the centre by signs placed on the noticeboards near the sign in sheet.
2. Infectious diseases that are notifiable to the Chief Health Officer of the Department of Health include:
  - a. Diphtheria
  - b. Haemophilias Influenza Type B (Hib)
  - c. Measles
  - d. Mumps
  - e. Poliomyelitis
  - f. Rubella
  - g. Pertussis (Whooping Cough)

## Specific Guidelines for the Exclusion of Sick Children

Condition	Exclusion of Case	Exclusion of Contacts
Amoebiasis (Entamoeba histolytica)	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Campylobacter	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Candidiasis	See 'Thrush'	

<b>Condition</b>	<b>Exclusion of Case</b>	<b>Exclusion of Contacts</b>
Chickenpox (Varicella)	Exclude until all blisters have dried. This is usually at least 5 days after the rash first appeared in unimmunised children and less in immunised children.	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise, not excluded.
CMV (Cytomegalovirus infection)	Exclusion is NOT necessary	Not excluded
Cryptosporidium infection	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Diarrhoea (No organism identified)	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Diphtheria	Exclude until medical certificate of recovery is received following at least 2 negative throat swabs, the first swab not less than 24 hours after finishing a course of antibiotics followed by another swab 48 hours later.	Exclude contacts that live in the same house until cleared to return by an appropriate health authority
German measles	See 'Rubella'	
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Glandular fever (Mononucleosis, EBV infection)	Exclusion is NOT necessary	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
Haemophilus influenzae type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded
Head lice (Pediculosis)	Exclusion is NOT necessary if effective treatment is commenced prior to the next day at child care (i.e. the child doesn't need to be sent home immediately if head lice are detected)	Not excluded
Hepatitis A	Exclude until a medical certificate of recovery is received, but not before seven days after the onset of jaundice.	Not excluded
Hepatitis B	Exclusion is NOT necessary	Not excluded
Hepatitis C	Exclusion is NOT necessary	Not excluded
Herpes simplex (cold sores, fever blisters)	Exclusion is not necessary if the person is developmentally capable of maintaining hygiene practices to minimise the risk of transmission. If the person is unable to comply with these practices they should be excluded until the sores are dry. Sores 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 illnesses.	Not excluded
Hydatid disease	Exclusion is NOT necessary	Not excluded

<b>Condition</b>	<b>Exclusion of Case</b>	<b>Exclusion of Contacts</b>
Impetigo (school sores)	Exclude until appropriate to return has been given by an appropriate health authority	Not excluded
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
Measles	Exclude for 4 days after the onset of the rash	<p>Immunised and immune contacts are not excluded.</p> <p>Non-immunised contacts of a case are to be excluded from child care until 14 days after the first day of appearance of rash in the last case, unless immunised with 72 hours of first contact during the infectious period with the first case.</p> <p>All immunocompromised children should be excluded until 14 days after the first day of appearance of rash in the last case</p>
Meningitis (bacterial)	Exclude until well and has received appropriate antibiotics	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded
Molluscum contagiosum	Exclusion is NOT Necessary	Not excluded
Mumps	Exclude for nine days or until swelling goes down (whichever is sooner)	Not excluded
Norovirus	Exclude until there has not been a loose bowel motion or vomiting for 48 hours	Not excluded
Parvovirus infection (fifth disease, erythema infectiosum, slapped cheek syndrome)	Exclusion is NOT necessary	Not excluded
Pertussis	See 'Whooping Cough'	
Respiratory Syncytial virus	Exclusion is NOT necessary	Not excluded
Ringworm/tinea	Exclude until the day after appropriate antifungal treatment has commenced	Not excluded
Roseola	Exclusion is NOT necessary	Not excluded
Ross River virus	Exclusion is NOT necessary	Not excluded

<b>Condition</b>	<b>Exclusion of Case</b>	<b>Exclusion of Contacts</b>
Rotavirus infection	Children to be excluded from the centre until there has not been a loose bowel motion or vomiting for 24 hours	Not excluded
Rubella (German measles)	Exclude until fully recovered or for at least four days after the onset of the rash	Not excluded
Salmonella infection	Exclude until the day after appropriate treatment has commenced	Not excluded
Scabies	Exclude until the day after appropriate treatment has commenced	Not excluded
Scarlet fever	See 'Streptococcal sore throat'	Not excluded
School sores	See 'Impetigo'	
Shigella infection	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received 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 an appropriate health authority	Not excluded
Typhoid, Paratyphoid	Exclude until medical certificate is produced from appropriate health authority	Not excluded unless considered necessary by public health authorities
Varicella	See 'Chickenpox'	
Viral gastroenteritis (viral diarrhoea)	Children are to be excluded from the centre until there has not been a loose bowel motion or vomiting for 24 hours	Not excluded
Warts	Exclusion is NOT necessary	Not excluded
Whooping cough (pertussis)	Exclude until five days after starting appropriate antibiotic treatment or for 21 days from the onset of coughing	Contacts that live in the same house as the case and have received less than three doses of pertussis vaccine are to be excluded from the centre until they have had 5 days of an appropriate course of antibiotics. If antibiotics have not been taken, these contacts must be excluded for 21 days after their last exposure to the case while the person was infectious.
Worms	Exclude if loose bowel motions present	Not excluded

Please see the Director if you require further information regarding the Exclusion Policy.

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## Roles and Responsibilities

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1. The Director is to ensure the control measures listed in this policy are effectively implemented.
2. The Director must ensure that all staff are consulted and provided with the necessary instruction, training and supervision to ensure that the control measures are being effectively implemented.
3. The centre must review and evaluate the effectiveness of the control measures annually.
4. Staff are to implement proactive strategies and follow compulsory procedures.

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## Approved and Checked By

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Review 2019

Approved and Checked By:

Centre Director

.....Date .....

Governing Council Representative

.....Date .....