

# INFECTIOUS DISEASES PROCEDURE

<b>Policy Hierarchy link</b>	Children (Education and Care Services National Law Application) Act 2010 Education and Care Services National Regulations 2011: 4.2 (77) Public Health (Amendment) Act, 1992 (NSW)		
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<b>Superseded Documents</b>			
<b>File Number</b>	Contact the <a href="#">Records &amp; Archives Office</a> .		
<b>Associated Documents</b>	Children's Health, Medication and Wellbeing Procedure		
<b>Version</b>	<b>Authorised by</b>	<b>Approval Date</b>	<b>Effective Date</b>
2.1	Early Years Management	August 2015	September 2015

## 1. Purpose and Scope

To minimize the spread of infectious diseases and ensure the health and well being of all the Centres' children, staff and families.

Refer to **Children's Health, Medication and Wellbeing Procedure**

## 2. Definitions

**24 hour exclusion:** a child is excluded from the centre for the entirety of the following day. The child may not return to the centre the following day. A child must be well and symptom free for at least 24 hours prior to return.

## 3. Procedure

Wherever possible it is recommended that a child receive their vaccination on a day when they will not be attending the centre. .

### 2.1 Immunisation / Vaccination

To comply with the Public Health (Amendment) Act, 1992 (NSW) and the Education and Care Services National Regulation (no.162) the Centres keep an immunisation register on all attending children. The Centres are required to maintain up to date written confirmation of vaccinations each time they are updated for every child. It is the family's responsibility to provide the updated information once their child's vaccinations are updated.

Parents of all newly enrolled children are required to provide the ACIR Immunisation History statement to show that their child is appropriately immunised in accordance with their age. New children to the centre will not be permitted to attend without the ACIR Immunisation History Statement.

If for any reason, a child has not been immunised, parents will be asked to produce an explanatory statement from their medical practitioner or statement of conscientious objection.

Upon the outbreak of any vaccine-preventable disease advice will be sought, from the Public Health Unit, regarding the exclusion (from the Centre) of any children who are not

age-appropriately, immunised. All children who are excluded will be required to pay their usual fees.

Advice will also be sought from the Public Health Unit on the exclusion of children too young to be immunized in the event of an outbreak.

The current NSW vaccination program can be found at the end of this procedure.

## 2.2 General Procedure for Infectious Diseases

- **A child or member of staff** suffering from an infectious disease will be excluded from the Centre for the period set out in the National Health and Medical Research Council (NHMRC) 'Staying Healthy' as well as the Centre's own specific guidelines.
- Exclusion periods are, at least, for the **minimum** period in which an infectious person should not be in contact with the Centre.
- It is always at the Centre's discretion if a child or staff member is well enough to be in attendance at the centre.
- Vaccination is not a guarantee that a person is immune from a disease. Some children will still contract a vaccine preventable disease after being medically vaccinated.
- A child that appears unwell will be isolated, where possible, from others. **Parents or emergency contacts will be notified to collect the child from the Centre within the hour.** If the child has not been collected within the hour, the next authorized emergency contact will be contacted and asked to collect the child.

### 2.2.1 Indicators of Infectious Diseases

**Diarrhea and vomiting** are both symptoms of disease, which may be contagious. Children, or staff, who display these symptoms shall be excluded from the centre for at least the following day and until the condition has cleared and the child has been well for 24 hours.

**Fever** - A child's body temperature often fluctuates markedly during the course of an infection. A common pattern is for a child to develop a high temperature during the course of the night and then to appear well the next morning. During the day, however, the child's temperature may once again rise.

## 2.3 Procedure for More Serious Infectious Diseases

**If a notifiable disease is present or suspected in the Centre staff will follow the above guidelines and:**

- Complete an Illness form.
- Inform the Nominated Supervisor or Responsible Person and present the appropriate documentation stated above.
- Inform all families of any infectious disease that has been present in the Centre's community as soon as practicable.
- Contact the Public Health Unit if there have been 2 confirmed cases: 9382 8333.
- Request information assistance from the Public Health Unit.
- Share all information to the families and the staff.

## **2.4 Informing Parents of Common Infectious Diseases**

- Families will be notified of any common infectious diseases in the Centre. Children with infectious diseases will be excluded from the centre based on the Exclusion Table below.
- Exclusion periods will be followed. In some cases a doctor's certificate will be required before the child can return to the Centre. A doctor's certificate does not override the Centre's discretion when deciding if a child is well enough to be in attendance at the centre.
- Minimising the spread of cross infection is important to all centre users.
- The wellbeing of pregnant women as well as children or family members with suppressed immunity is an additional consideration.

## **2.5 Parents Informing the Centre of Infectious Diseases**

- To minimize cross-infection, it is requested that families inform the Centre if their child is unwell and inform the centre of the nature of the illness as well as the length of anticipated absence.
- In the event of an infectious disease present in a child, a family member or a recent contact, the Centre should be informed immediately with the diagnosis. This will assist with identification of the illness, infection control and the Centre's reporting responsibilities. This information is also essential as it allows communication with vulnerable members of our centre's communities.

## **2.6 Health, Safety and Environments for staff**

- The Nominated supervisor will inform staff of possible risks to health upon commencement of employment.
- Information about vaccine preventable diseases, pregnancy risks and illness will be provided in writing to new staff and information regularly reviewed for all staff.
- Staff members will be required to complete the UNSW Early Years Vaccine and Infectious diseases form with their medical practitioner or UNSW Medical Services.
- Staff will be recommended to be vaccinated according to Staying Healthy NHMRC for their own safety; their colleagues and that of the children and families within the centre.

## **2.7 Epidemics and pandemics**

Please refer to UNSW Health services website for the most current information <http://www.healthservices.unsw.edu.au/>

## **CURRENT IMMUNISATION SCHEDULE**

(taken from the Medicare website)

Valid from 1<sup>st</sup> July 2013

### **The National Immunisation Program (NIP) Schedule (0 - 4 Years)**

<b>Birth</b>	Hepatitis B (hepB)
<b>2 months</b>	Diphtheria, Tetanus, Pertussis, Polio, Hib, Hepatitis B, Pneumococcal, Rotavirus
<b>4 months</b>	Diphtheria, Tetanus, Pertussis, Polio, Hib, Hepatitis B, Pneumococcal, Rotavirus
<b>6 months</b>	Diphtheria, Tetanus, Pertussis, Polio, Hib ( <b>refer to note 1</b> ), Hepatitis B ( <i>or at 12 months</i> ), Pneumococcal, Rotavirus ( <b>refer to note 2</b> )
<b>12 months</b>	Measles, Mumps Rubella, Hib, Hepatitis B ( <i>or at 6 months</i> ) Meningococcal C
<b>18 months</b>	Measles, Mumps Rubella, Varicella, Pneumococcal ( <b>refer to note 3</b> )
<b>4 years</b>	Diphtheria, Tetanus Pertussis, Polio, Measles ( <b>refer to note 4</b> ) Mumps ( <b>refer to note 4</b> ), Rubella ( <b>refer to note 4</b> )

#### **Notes:**

1. Four doses of Hib vaccine are due at 2, 4, 6 and 12 months of age when 'PRP-T Hib' containing vaccine is used.
2. Three doses of Rotavirus vaccine are due at 2, 4 and 6 months of age when RotaTeg vaccine is used.
3. Four doses of Pneumococcal vaccine are due at 2, 4, 6 and 18 months of age when Synflorix vaccine is used.
4. MMR vaccine is only to be given at 4 years if MMRV vaccine was not given at 18 months.

### **EXCLUSION PERIODS FOR INFECTIOUS DISEASES**

**Exclusion periods below are minimum guidelines and children must be well enough to participate in the usual activities within the centre. Return to the centre is always at the discretion of the Nominated Supervisor or responsible person.**

<b>Condition</b>	<b>Exclusion of case</b>	<b>Exclusion of contacts</b>
<i>Campylobacter</i> infection*	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded
Cytomegalovirus (CMV) infection	Not excluded	Not excluded
Conjunctivitis	Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis	Not excluded
Chryptosporidiosis ( <i>Cryptosporidium</i> parasite)	Exclude until there has not been a loose bowel motion for at least 24 hours	Not excluded

<b>Condition</b>	<b>Exclusion of case</b>	<b>Exclusion of contacts</b>
Diarrhoea (no organism identified) *	Exclude until there has not been a loose bowel motion for at least 24 hours	Not excluded
Fungal infections of the skin or nails (e.g. ringworm, tine)	Exclude until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis*	Exclude until there has not been a loose bowel motion for at least 24 hours	Not excluded
Glandular fever (mononucleosis, Epstein–Barr virus [EBV] infection)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
<i>Haemophilic influenza</i> type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded Contact a public health unit for specialist advice
Head lice (epiclesis)	Not excluded if effective treatment begins before the next attendance 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 a medical certificate of recovery is received and until at least 7 days after the onset of jaundice	Not excluded Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes simplex (cold sores, fever blisters)	Not excluded if the person can maintain hygiene practices to minimise the risk of transmission If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry.  Sores should be covered with a dressing, where possible	Not excluded
Human immunodeficiency virus (HIV)	Not excluded If the person is severely immune compromised, they will be vulnerable to other people's illnesses	Not excluded

<b>Condition</b>	<b>Exclusion of case</b>	<b>Exclusion of contacts</b>
Human parvovirus B19 (fifth disease, erythema erythematic infectiosum/infectious, slapped cheek syndrome)	Not excluded	Not excluded
Hydatid disease	Not excluded	Not excluded
Impetigo	Exclude until appropriate antibiotic treatment has started Any sores on exposed skin should be covered with a watertight dressing	Not excluded
Influenza and influenza-like illnesses	Exclude until person is well	Not excluded
Listeriosis	Not excluded	Not excluded
Measles	Exclude for 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 immuno-compromised children should be excluded until 14 days after the appearance of the rash in the last case
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment has been completed	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	Not excluded	Not excluded
Mumps	Exclude for 9 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
Pertussis (whooping cough)	Exclude until 5 days after starting appropriate 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
Pneumococcal disease	Exclude until person is well	Not excluded
Roseola	Not excluded	Not excluded
Ross River virus	Not excluded	Not excluded

<b>Condition</b>	<b>Exclusion of case</b>	<b>Exclusion of contacts</b>
Rotavirus infection*	Exclude until there has not been a loose bowel motion or vomiting for 24 hours	Not excluded
Rubella (German measles)	Exclude until the person has fully recovered or for at least 4 days after the onset of the rash	Not excluded
Salmonella*	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Scabies	Exclude until the day after starting appropriate treatment	Not excluded
Shigellosis	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
Toxoplasmosis	Not excluded	Not excluded
Tuberculosis (TB)	Exclude until medical certificate is produced from the appropriate health authority	Not excluded Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Varicella (chickenpox)	Exclude until all blisters have dried - this is usually at least 5 days after the rash first appeared in non-immunised 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 as they are at high risk of developing severe disease. Otherwise, not excluded
Viral gastroenteritis (viral diarrhoea)*	Exclude until there has not been a loose bowel motion for 24 hours	Not excluded
Worms	Exclude if loose bowel motions are occurring Exclusion is not necessary if treatment has occurred	Not excluded

\* If the cause of a possible infectious disease is unknown, there is a possibility that exclusion will be increased to 48 hours until the cause is identified. Educators and other staff who have a food-handling role should always be excluded from food handling duties until there has not been a loose bowel motion for 48 hours. *Adapted from SA Health Communicable Disease Control Branch <http://www.dh.sa.gov.au/pehs/ygw/index.htm>*

Note that exclusion advice is consistent with the Communicable Diseases Network Australia Series of National Guidelines (SoNGs), where available.

#### 4. Review & History

#### 5. Acknowledgements

Public Health (Amendment) Act, 1992 (NSW)

Staying Healthy, 5<sup>th</sup> Ed, National Health and Medical Research Council; 2013

Medicare

<http://www.healthservices.unsw.edu.au/> Accessed July 2015

#### Appendix A: History

The authorisation and amendment history for this document must be listed in the following table. Refer to information about [Version Control](#) on the Policy website.

Version	Authorised by	Approval Date	Effective Date	Sections modified
1.0	Vice President, University Services	11 November 2013	11 November 2013	
2.0	Early Years Management	26 September 2014	27 October 2014	2, 2.7
2.1	Early Years Management	August 2015	September 2015	