

### Background

Many children commence early childhood education and care programs at a time when their immune systems are developing. They may not have been exposed to many common germs that cause infections and they may be too young to be vaccinated against some diseases. In addition, the nature of children's play and interactions with one another means that illness can quickly spread.

The *Education and Care Services National Regulations* (Reg. 77) requires centres to take reasonable steps to prevent the spread of infectious illnesses. C&K centres consistently follow the recommended hygiene and exclusion due to illness guidelines outlined in *Staying Healthy and Preventing Infectious Diseases in Early Childhood Education and Care Services (5th Ed)* and current Qld Health *Timeout Poster*. C&K recognise the essential contribution of families in helping to prevent and minimise the spread of illnesses at centres.

### Minimising the spread of illness

Nominated Supervisor/Responsible Person in Charge will:

- Regularly inform and remind parents/guardians of their responsibilities outlined in this procedure. Outline the responsibilities of this procedure with families during their orientation. Work in partnership with families to implement this procedure.
- Outline the responsibilities of this procedure to teachers/educators during their induction. Continue to monitor and support teacher/educator understanding of, and compliance with this procedure.
- Implement *Immunisation Procedure* and promote the *Qld Immunisation Schedule*.
- Enforce and follow illness exclusion periods as outlined in *Staying Healthy and Preventing Infectious Diseases in Early Childhood Education and Care Services (5th Ed)* and current Qld Health *Timeout Poster*.
- When required/requested by C&K/Committee, undertake a review/audit of *centre hygiene* and exclusion due to illness practices, and promptly action identified gaps in practice.
- Maintain and track centre illnesses and exclusion time-frames via an *Infectious Illness Register*.

### Requesting medical clearances

Typically, medical clearances are not required for an unwell child to return to the centre. Medical clearances may be challenging for families to obtain. i.e. cost, ability to get a doctor's appointment and/or unable to travel to doctor etc.

The Public Health Unit may direct or recommend medical clearances be provided to centres during outbreaks of specific illnesses. It is at the discretion of the Nominated Supervisor/Responsible Person in Charge to request a parent/guardian provide a medical clearance upon a child's return when a child has been unwell and continues to display signs of an infectious illness.

When requested, a medical clearance must be from a medical practitioner/doctor and contain the following details: date, child's name, and state (or similar) '*child is not suffering from an infectious illness/no longer infectious and is able attend the centre*'.

Teachers/educators will:

- Wash their hands regularly as per *Hand Washing Procedure* and *Poster*.
- Guide and supervise children to wash their hands regularly as per *Hand Washing Poster*.
- Ensure there are adequate supplies of toilet paper, paper towel and soap available to children, staff, and visitors.
- Maintain a clean and hygienic centre environment by following the *Cleaning Procedure* and *Poster*.
- Practice effective personal hygiene (e.g. coughing into elbow, disposal of tissues) and support children to practice effective personal hygiene.
- Appropriately incorporate hygiene concepts into the learning program. Model health and personal hygiene practices with children and reinforce these messages with families.
- Inform and remind parents/guardians of their responsibilities outlined in this procedure.
- Not attend work when suffering from an infectious illness.
- Maintain understanding and knowledge of common childhood illnesses and their signs/symptoms.

Parents/guardians will:

- Keep their child at home when unwell and unable to fully participate in the program.
- When applicable, keep child at home for the required/requested exclusion period as outlined in *Staying Healthy and Preventing Infectious Diseases in Early Childhood Education and Care Services (5th Ed)* and current Qld Health *Timeout Poster*.
- Do not administer fever reducing medication (e.g. Paracetamol or Ibuprofen) to child prior to arrival at centre.
- Inform centre when child is unwell and will be absent from the centre. Inform centre immediately if child is diagnosed by a medical practitioner/doctor with an infectious illness.
- When requested, collect their child as soon as practical when they become ill at the centre.
- Follow health and hygiene posters displayed throughout centre, including washing hands and their child's hands upon arrival and departure.
- Upon and throughout enrolment (and when requested), provide evidence of their child's immunisation status.
- When requested by the Centre Director/Responsible Person in Charge, provide medical clearance for child when returning to centre after illness.

### Child becomes unwell at the centre

A single sign or symptom (as listed in appendix one of this procedure) may or may not indicate a child is ill. Teachers/educators will use their professional judgement and knowledge of a child to assess. For example:

- *What is the child's overall presentation and demeanor. Is the child behaving and participating in the program as they usually do?*
- *Information recently shared by parents/guardians about their child e.g., child is teething, child had a late night, sibling unwell etc.*
- *Does child have a known medical condition?*
- *Are there other children presenting with similar signs or symptoms?*

A child appears unwell and presents with one or more signs/symptoms of illness



Teachers/educators will:

1. Monitor, comfort and isolate unwell child in a safe, comfortable and supervised location.
2. If child has a known medical condition, refer to and follow child's Medical Management Plan.
3. If required, call Triple 0 (000). An educator may accompany a child in an ambulance when regulatory educator to child ratios can be maintained at the centre. As soon as practical after incident, complete a regulatory notification as per *Incident Reporting Procedure*.

Child continues to appear unwell AND Nominated Supervisor/Responsible Person In Charge has a reasonable suspicion child is unwell and unable to fully participate in the program



4. Promptly notify child's parent/guardian by telephone and direct them to collect their child as soon as possible. If child's parent/guardian cannot be contacted, telephone child's emergency contact(s).
5. Record illness signs and actions taken via *Centre Child Incident Record*.
6. Provide parent/guardian (or emergency contact) with the completed *Centre Child Incident Record* to review and sign. If requested, provide a copy to child's parent/guardian and/or ambulance officer.
7. Inform child's parent/guardian their child is unable to return to the centre until:
  - They are well and able to fully participate in the centre program **AND**
  - (if applicable) Have completed required exclusion period as per the current Qld Health *Timeout Poster* **OR**
  - They are no longer displaying signs or experiencing symptoms of an infectious illness, or a medical clearance is provided to the centre.
8. Enter details of illness in centre's *Infectious Illness Register*.
9. If more than one child presents with similar signs/symptoms of illness (yet to be formally diagnosed by a medical practitioner/doctor), inform families and staff (e.g. Kidsoft, Storypark, staff email) while ensuring child and family confidentiality e.g. *'Several children have become unwell and are presenting with the following signs/symptoms [XXXXXXXXX]. To minimise the spread of illness, please keep your child at home if unwell and let us know.'*

### Child has a fever

A high temperature may or may not be an indicator of illness. A child's normal temperature can be up to 38°C and will vary depending on their age and time of day. A child's temperature may be higher in the late afternoon, after waking from sleep, after physical activity or spending time outdoors. It is not always necessary to reduce a fever as it is the body's natural response to infection which may be viral or bacterial.

A child's temperature is recorded as above 38°C on a thermometer



Teachers/educators will:

1. Monitor child closely. Observe how child looks and behaves, level of alertness and other signs of illness. If concerned, continue to test child's temperature using a thermometer. Record signs and actions taken via *Child, Centre Incident Record*.
2. If child has a known medical condition, refer to and follow the child's Medical Management Plan.
3. Immediately telephone triple zero (000) for an ambulance, if child is struggling to breathe, their lips turn blue or experience a seizure. As soon as practical after incident, complete a regulatory notification as per *Incident Reporting Procedure*.

Child's temperature continues to be above 38°C and appears to be unhappy and experiencing discomfort



4. Isolate child in a safe, comfortable, and supervised location.
  - o Monitor and comfort the child.
  - o Provide child with fluids/water.
  - o Dress child in light comfortable clothing.
  - o Re-test child's temperature using a thermometer.
  - o Record signs and actions taken via *Child, Centre Incident Record*.
  - o Do not sponge down with cool water or bath the child.

Child's temperature continues to be above 38°C and child appears to be unhappy, experiencing discomfort AND Nominated Supervisor/Responsible Person In Charge has a reasonable suspicion child is unwell and unable to fully participate in the program



5. Promptly notify child's parent/guardian by telephone and direct them to collect their child as soon as possible. If child's parent/guardian cannot be contacted, telephone child's emergency contact(s). Advise parent/guardian to seek medical attention if their child is less than 3 months old OR appears to be very unwell e.g. drowsy, limp, crying a lot, drinking, or urinating less, appears to be in pain.
6. When written parent/guardian authorisation has been obtained via the *C&K Enrolment Booklet/Online Form* AND verbal parent/guardian (or emergency contact, child's nominated doctor OR Triple 0 operator) authorisation has been obtained via telephone, administer one dose of liquid paracetamol as per *Administration of Medication Procedure*.
10. Provide parent/guardian (or emergency contact) with completed *Centre Child Incident Record* to read and sign. If requested, provide a copy to parent/guardian and/or ambulance officer.
11. Inform child's parent/guardian their child is unable return to the centre until:
  - They are well and able to fully participate in the centre program **AND**
  - Have completed required exclusion period as per the current Qld Health Timeout Poster **OR**
  - (if applicable) They are no longer displaying signs or experiencing symptoms of an infectious illness, or a Medical Clearance is provided to the centre.
12. Enter details of illness in centre's *Infectious Illness Register*.
13. If more than one child presents with a fever (illness yet to be formally diagnosed by a medical practitioner/doctor), inform families and staff (e.g. Kidsoft, Storypark, staff email) while ensuring child and family confidentiality e.g. *'Several children have become unwell and are presenting with a fever. To minimise the spread of illness, please keep your child at home if unwell and let us know.'*

### Infectious illness diagnosis

A parent/guardian advises their child has been formally diagnosed (by a medical practitioner/doctor) with an infectious illness



Nominated Supervisor/Responsible Person In Charge will:

1. Enter details of diagnosed illness in centre's *Infectious Illness Register*.
2. As soon as practical, notify all families and staff of the occurrence of the infectious illness (Reg. 88(2)) using a range of communication methods while ensuring confidentiality of unwell child (and their family):
  - o In a prominent location(s) (e.g. front gate and near iCheckin), display '*Child with an infectious illness at centre*' poster (stating the name, signs and symptoms of the infectious illness) for the required duration (infectious period).
  - o Inform all current families by sending an email via Kidsoft AND Storypark with a hyperlink to relevant *Queensland Health Factsheet* OR PDF attachment of relevant page of *Staying Healthy and Preventing Infectious Diseases in Early Childhood Education and Care Services (5th Ed)*.
  - o Inform all current staff via email using the centre C&K email address.
  - o Keep families informed if the number of cases rises.

### Outbreak of an infectious illness

1 or more cases of a vaccine preventable illness  
2 or more cases of diagnosed Gastroenteritis occurring within 1-3 days  
More than 1 of the same illness and local Public Health unit has confirmed an outbreak is occurring



Nominated Supervisor/Responsible Person In Charge will:

1. Confirm outbreak with/notify local Public Health Unit and follow their direction. This may include distributing public health communication and implementing additional hygiene measures.
2. Notify your Early Childhood Education Manager (branch centres)/Committee (affiliate centres).
3. Enter details of illness/cases in centre's *Infectious Illness Register*.
4. Inform families and staff as per 'Infectious Illness Diagnosis' steps in this procedure. Advise families of additional measures taken by centre to minimise the spread of illness.
5. Contact local regulatory authority office to determine if a regulatory notification is required. If required, complete notification as per *Child, Centre Incident Reporting Procedure Branch/Affiliate*.
6. Promptly undertake a centre *Hygiene Audit* and promptly action identified gaps in practice.
7. Within 7 days (first case of illness), complete an *Incident Review*.

### Exclusion periods for infectious illnesses

Centre Director/Nominated Supervisor or Responsible Person in Charge will:

- Enforce exclusion periods as outlined in the current Qld Health *Timeout Poster*.
- Acknowledge and understand families may find exclusion periods difficult due to work and/or personal commitments.
- Contact Early Childhood Education Manager/Committee and/or local Public Health Unit for advice and guidance if a child's medical clearance certificate provided is unclear or inconsistent with a current situation at a centre.
- Upon written direction of Queensland Public Health, exclude unvaccinated children from attending the centre when there is an outbreak of a vaccine-preventable disease.

### Acknowledgements and references

- National Health and Medical Research Council (2013). *Staying Healthy: Preventing infectious disease in early childhood education and care services 5th edition* [ONLINE]
- National Health and Medical Research Council (2013). *Information for families. Exclusion periods explained*.
- Queensland Health (2018). *Fever in children Emergency Department factsheet*
- Queensland Health (2019). *Fever in Children*
- Queensland Health. *Public Health Regulations 2018* (Accessed November 2023)
- QLD Health (2018). *Information for Schools, Education and Care Services - Contagious Conditions*
- Raising Children. *Taking your child's temperature*.



## Appendix One – Possible signs/symptoms of illness

Signs and symptoms of illness	Consider - Other reasons for signs/symptoms
Fever i.e., temperature above 38°	A child's normal temperature can be up to 38°C and will vary depend on their age and time of day. A child's temperature may be higher in late afternoon, after physical activity, after waking from a sleep, after spending time outdoors.
Diarrhoea	Mild intolerance to new food, teething
Vomiting	Mild intolerance to new food, reflux, over consumption of food/drink, motion sickness
Lethargy - not interested in playing and interacting with others; does not want to participate in the program; wants to sleep and/or be cuddled	Late night, disturbed sleep, no/little sleep, teething
Blocked/runny nose (any colour), sneezing, coughing, red/watery eyes, sore throat	Hay Fever, post viral symptoms such as cough, reaction to a sudden change in temperature or very dry air
Noisy, rapid and/or shallow breathing; long pauses between breaths. Infant may make grunting sounds, or the ribs/breastbone may be sucked in with each breath	Asthma, allergic reaction
Reduced or no appetite	Not hungry/full, stress
Change in urine output/input	Uncomfortable to use toilet, dehydration
Rash or change of skin colour e.g., pale, mottled or cold hands and feet	Allergic reaction, sun burn, environmental temperature change, physical activity
Pain	An injury
Lumps, swelling, stiff neck	An injury, allergic reaction
Headache	Dehydration, extreme heat, loud noise, stress, eye or dental problem, an injury, concussion, food intolerance