

NQS2 Children's Health and Safety Procedure Exclusion Due to Illness (children)

Immediately telephone 000, ask for an ambulance and follow operator instructions, if a child displays signs or symptoms of a serious illness or injury, including but limited too:

- respiratory/breathing difficulties - quick or noisy breathing, pale or blue around the mouth, muscles between ribs or at base of neck drawn with each breath, blueish or grey skin
- unresponsive or unconsciousness
- seizure
- child swallowed an unidentified or hazardous item
- child displays signs of an allergic reaction

After a head injury:

- confusion, memory loss, drowsiness or appears less responsive
- vision loss or double vision
- body weakness or numbness/tingling
- neck pain or tenderness
- vomits more than once
- severe or increasing headache
- restlessness, agitation, combative behaviour

Background

Excluding children who are unwell, minimises the transmission of illness in a centre. Exclusion periods are based on how long an unwell child is likely to be infectious and outlined in *Staying Healthy Preventing Infectious Diseases in Early Childhood Education and Care Services (Staying Healthy 6th Edition)* and *Qld Health Timeout Poster* publications.

Minimising the spread of illness

Parents/Guardians will:

- Keep child at home when unwell; until they are no longer infectious as outlined *Staying Healthy 6th Edition* and *Qld Health Timeout Poster*.
- Not administer medication to their child to reduce fever prior to their centre arrival. Keep child home, if they wake with a fever.
- Promptly inform centre when their child is unwell, will be absent, and when their child is medically diagnosed with an infectious illness.
- When requested, collect child as soon as practical when they become unwell at the centre.
- Wash hands and support their child to wash their hands upon centre arrival and departure.
- When requested by the Centre Director/Nominated Supervisor or Responsible Person in Charge (RPIC), provide a medical clearance for child when returning to centre after illness.

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

- Outline parent/guardian responsibilities of this procedures at and throughout enrolment.
- Outline this procedure during teacher/educator induction.
- Periodically monitor and assess teacher/educator compliance with this procedure.
- Implement the *Immunisation Procedure* and promote the *Qld Immunisation Schedule* with families.
- When required/requested by C&K/Committee, undertake an audit of *centre hygiene* and exclusion due to illness practices, and promptly action identified gaps.
- Maintain and track centre illnesses and exclusion time-frames via an *Infectious Illness Register*.

Teachers and educators will:

- Wash hands, and guide and supervise children to wash their hands as per *Hand Washing Procedure*.
- Ensure there are adequate supplies of toilet paper, paper towel and soap.
- When cleaning bodily fluids refer to *Safe Management of Bodily Fluids Procedure*.
- Maintain a clean and hygienic centre environment.
- Practice and support children to practice personal hygiene e.g. coughing into elbow, disposal of tissues, washing hands.
- Appropriately incorporate hygiene concepts into the learning program.
- Not attend work when suffering from an infectious illness.
- Maintain an understanding of common childhood illnesses and their signs/symptoms. When required, refer to *Staying Healthy 6th Edition* fact sheets.

Exclusion periods

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

- Enforce exclusion periods as outlined in *Staying Healthy 6th Edition* and *Qld Health Timeout Poster* publications.
- 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 is unclear or inconsistent with a current situation at a centre.

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- Upon written direction of Public Health Unit, exclude unvaccinated children from attending the centre when there is an outbreak of a vaccine-preventable disease.

Requesting medical clearances

- It is at the discretion of the Centre Director/Nominated Supervisor or RPIC to request a parent/guardian, however in most circumstances a medical clearance is 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, cost and/or unable to travel to doctor etc.
- The Public Health Unit may direct or recommend Medical clearances/certificates during an outbreak of 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'*.

Child becomes unwell at the centre

To form a reasonable suspicion a child is unwell, **teachers and educators will:**

- Utilise their professional knowledge of common childhood illnesses (and their signs/symptoms) and understanding of a child's typical/normal demeanour AND
- Refer to Staying Healthy 6th Edition publication and Appendix 1 of this procedure AND
- Consider:
 - What is the child's overall presentation and demeanour? Is the child behaving as they usually do?*
 - What information has been shared by child's parent/guardian? e.g. child is teething, child had a late night, family member unwell etc.*
 - Does the child have a known medical condition?*
 - Are other children (or team members) presenting with similar signs or symptoms?*

When a child appears unwell, **teachers and educators will:**

- Promptly inform centre Director/Nominated Supervisor or RPIC.
- Closely monitor child and provide comfort and appropriate care:
 - Within the licenced space/child's room, when possible, separate child from other children in a safe location, comfortable and supervised location.
 - If child has a known medical condition, follow their Medical Management Plan.
- Complete *Centre Child Incident Record*.

When a reasonable suspicion has been formed that a child is unwell, the **Nominated Supervisor/Centre Director or RPIC will:**

- Promptly telephone child's parent/guardian (or authorised emergency contact) and instruct them to collect child as soon as possible. Refer to page 3 of this procedure if child has a fever above 38°C.
- Upon centre arrival, provide parent/guardian (or emergency contact) with completed *Child, Centre Incident Record* to review and sign. If requested, provide a copy. Share details of child's signs and symptoms illness, how rapidly they developed/progressed and what care and comfort was provided.
- Inform parent/guardian their child is unable to return to the centre until they:
 - Have completed the required exclusion period if diagnosed with an illness AND
 - Are well AND able to fully participate in the centre program.
- Record Keeping:** Record details of illness in centre *Infectious Illness Register*. If unwell child is later hospitalised, complete 'serious incident' regulatory authority notification as per *Child, Centre Incident Reporting Procedure*.
- Communicate:** If more than one child presents with similar signs/symptoms of illness, without comprising the confidentiality of unwell child, notify all enrolled families and staff via KidSoft email and/or Storypark post e.g. *'Several children have become unwell and are presenting with the following signs/symptoms [XXXXXXXXXX]. To minimise the spread of illness, please keep your child at home if unwell and inform the centre.'*

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Child develops a fever while attending the centre

It is important to recognise that in some circumstances a child's body temperature may temporarily rise above 38 °C, including after waking from a sleep or after participating in physical activity or outdoor play. These circumstances do not necessarily indicate illness or fever. To determine whether a child is unwell with a fever, educators will assess their overall demeanour in conjunction with measuring their temperature.

When a child appears unwell (e.g. hot to touch, lethargic, sweating, shivering, muscle aches or a headache) **teachers and educators will:**

1. Measure a child's temperature using a thermometer. If temperature is between 37.5 °C and 38°C, retest within 30 mins.
2. When a child's temperature is above 38°C, promptly notify Centre Director/Nominated Supervisor or RPIC and complete *Child, Centre Incident Record*.
3. Closely monitor child and provide comfort and appropriate care.
 - When possible, separate child from other children in a safe location, comfortable and supervised location within the licenced space/child's room.
 - If child has a known medical condition, follow their Medical Management Plan.
 - Give child frequent small drinks.
 - Wipe child's forehead with a face washer soaked in slightly warm water. It's important child does not become too cold. Do not give child a cold bath or shower.
 - Dress child in enough clothing so that they are not too hot or cold. If child is shivering, add another layer of clothing or a blanket until they stop.

When there is a reasonable suspicion a child is unwell with a fever (over 38°C) the **Centre Director/Nominated Supervisor or RPIC will:**

4.
 - Unwell infant (3mths and under) with fever
 - Unwell infant or child with fever AND one or more of following sign/symptom: ■ stiff neck, light is hurting their eyes ■ lethargic ■ vomiting ■ refusing to drink ■ rash ■ less urine output, passing less or not at all
 - Unwell child (over 3mths) with fever → Promptly telephone parent/guardian. Instruct them to collect their child as soon as possible.
5. If child is experiencing discomfort, appears miserable AND prior parent/guardian written authorisation has been previously provided (check child's KidSoft record):
 - Obtain child's parent/guardian verbal authorisation (via telephone) to administer one dose of liquid Paracetamol. If child appears to be happy, there is no need to administer paracetamol.
 - If parent/guardian written AND verbal authorisation has been obtained, authorise teacher/educator to administer one dose of liquid paracetamol to child as per procedure on page 5 of *Administration Medication Procedure*.
6. Upon centre arrival, provide parent/guardian (or emergency contact) with completed *Child, Centre Incident Record* (and if liquid Paracetamol was administered, *completed Medication Authorisation Record*) to review and sign. If requested, provide a copy. Share details of child's signs and symptoms illness, how rapidly they developed/progressed and what care and comfort was provided.
9. Inform parent/guardian their child is unable to return to the centre until they:
 - Are no longer experiencing a fever (above 38°C) AND
 - Are well and able to fully participate in the centre program AND
 - Have completed the required exclusion period if diagnosed with an illness.

→ Promptly telephone parent/guardian and instruct them to collect their child as soon as possible AND recommend they seek medical treatment for their child.

As per Staying Healthy 6th Edition, the child is unable to return to the centre until they are well and their temperature remains normal. If the child wakes in the morning with a fever, they should stay home until their temperature remains normal. If a doctor diagnoses the cause of the fever, the child is unable to return to the centre until they have completed the required exclusion period.

7. **Record Keeping:** Record details of illness in centre *Infectious Illness Register*. If child is later hospitalised, complete 'serious incident' regulatory authority notification as per *Child Centre Incident Reporting Procedure*.
8. **Communicate:** If more than one child presents with a fever within 24hrs, without comprising the confidentiality of unwell children, inform all enrolled families and staff via KidSoft email and/or Storypark post 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 inform the centre. Please refer to Fever Fact Sheet - Staying Healthy 6th Edition.'*

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When a child has been diagnosed by a registered medical practitioner with an infectious illness

Centre Director/Nominated Supervisor or RPIC will:

1. Inform parent/guardian their child is unable to return to the centre until they:
 - Have completed the required exclusion period for that diagnosed illness AND
 - Are well and able to fully participate in the centre program.
2. Enter details of diagnosed illness in centre's Infectious Illness Register.
3. As soon as practical, without comprising the confidentiality of unwell child, notify all enrolled families and staff:
 - In a prominent location(s) display 'Child with an infectious illness at centre' poster detailing the name, signs, symptoms and required exclusion period AND
 - Send KidSoft email and/or Storypark post with attached relevant Staying Healthy 6th Edition Fact Sheet.

Outbreak of an infectious illness

For the purposes of this procedure, an outbreak of an infectious illness is:

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

Centre Director/Nominated Supervisor or RPIC will

1. Confirm outbreak with and/or notify local Public Health Unit.
2. Follow Public Health Unit direction such as distributing health communication and implementing additional hygiene measures.
3. Promptly notify your Early Childhood Education Manager/Committee.
4. Record details of illness in centre's Infectious Illness Register. Record details of each case.
5. As soon as practical, without comprising the confidentiality of unwell child, notify all enrolled families and staff:
 - In a prominent location(s) display 'Child with an infectious illness at centre' poster detailing the name, signs, symptoms and required exclusion period AND
 - Send KidSoft email and/or Storypark post with attached relevant Staying Healthy 6th Edition Fact Sheet.
6. Complete 'circumstance posing risk to children's health and safety' regulatory authority notification as per Child, Centre Incident Reporting Procedure. If a child is hospitalised, complete serious incident regulatory authority notification as per Child Centre Incident Reporting Procedure.
7. Promptly undertake a Centre Hygiene Assessment Childcare/ Kindergarten & OHSC and action identified gaps in practice.

Acknowledgements and references

- Australian Government. Fever in children.
- Australian Government. Managing illnesses in Services.
- National Health and Medical Research Council. Information for families. Exclusion periods explained.
- National Health and Medical Research Council. Staying Healthy Preventing infectious disease in early childhood education and care services 6th edition
- Queensland Health. Information for Schools, Education and Care Services - Contagious Conditions
- Queensland Health. Fever in Children
- Queensland Health. Public Health Regulations 2018 (Accessed November 2023)
- Royal Children's Hospital Melbourne. Fever in children

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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, sunburn, 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