

CHILDREN'S PROGRAMS SECTION 6

Illness and Infectious Disease

- Children's Immunisation

Policy Statement

Meerilinga will take reasonable steps to ensure that the health and wellbeing of every child is safeguarded. Maintaining a healthy, safe and inclusive environment for Educators, staff, children and families, is paramount for high quality education and care.

Policy Purpose

Children encounter many other children and adults within our Meerilinga community environments, which can result in the contracting of infectious illnesses.

We have a duty of care to ensure that children families, Educators, staff and visitors of the Centre are provided with a high level of protection. We aim to manage illnesses and prevent the spread of infectious diseases throughout the Centre. Immunisation is a simple, safe and effective way of protecting people against harmful diseases before they come into contact with them in the community. Immunisation not only protects individuals, but also others within the community, by reducing the spread of disease and illnesses.

Scope

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

Exclusions

Policy Review

At least annually or from time to time the organisation may make changes to this policy to improve the effectiveness of its operation.

Implementation

Families are informed upon enrolment and reminded not to bring sick children to the service. If a child is unwell at home, the family is not permitted to drop the child off at the service.

Families will notify staff if a child has been injured or has been unwell or sought medical advice since they last attended the service.

Meerilinga Educators and staff are not qualified to diagnose whether or not a child has an infectious illness. However, if an infectious illness is suspected, our service will contact the family to collect their child.

A child would be considered ill if they:

- Sleep at unusual times.
- Have a fever above 38°C and are lethargic
- Are crying from discomfort.
- Vomit or have diarrhoea.
- Have symptoms of an infectious disease eg: a rash.

The need for exclusion and the length of time a person is excluded depend on how easily the infection can spread, how long the person is likely to be infectious and how severe the disease can be. It is important that children and staff who are ill are kept away from the service for the recommended period.

Children arriving at the service who are unwell

A child will not be accepted into care if they:

- Are showing any obvious signs of being unwell.
- Have had a high temperature, vomiting and/or diarrhoea within the last 24 hours.
- Have started antibiotics in the last 24 hours.
- Have a contagious illness or disease.

Children who become ill at the service

Children may become unwell throughout the day. Management and educators will respond to children's individual symptoms of illness.

- Educators will monitor and document the child's symptoms on the Child Incident Report Illness.
- The parents or authorised nominee will be contacted and asked to collect the child from care.
- The child will be made comfortable and placed in a quiet area where they can rest, whilst being supervised. Every effort will be made to separate them from the other children until collected.
- Continue to document any progressing symptoms.
- Complete the Child Incident Report Illness, ensuring the parent/guardian or authorised nominee has signed the completed Child Incident Report upon collection of the child.
- Upon request, Families will be provided with information regarding exclusion periods as recommended by Staying Healthy 5th edition.

Infection Control

All Meerilinga community members will continuously promote healthy hygiene practices to minimise the risk of infection. Cleaning, hygiene and safety processes will be followed at all times and in accordance with documented processes and schedules to ensure the premises, furniture and equipment are safe, clean and well maintained.

Refer to: Health, Hygiene and Infection Control Policy and Processes

Infectious Disease and Exclusion

When a child has been diagnosed with an illness or infectious disease, the service will refer to Staying Healthy in Childcare (5th Edition) and the Communicable Disease Guidelines for teachers, child care workers, local government authorities and medical practitioners for recommendation on exclusion periods.

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 is obtained from Staying Healthy In Child Care 5th Edition)

The Responsible Person may request a medical clearance from a registered health practitioner when there are signs of illness eg: body rash. In order for the child to attend, a medical clearance will be required from a Registered Health Practitioner the stating the child is not contagious and fit for care.

Some of the common Infectious Diseases in children are:

High Temperature

Educators will take the child's temperature. If the child's temperature 38°C or higher and the child is showing other signs of being unwell, the Responsible Person at the time will contact the child's parents or authorised nominee and request that the child be collected.

Educators will take physical steps to try to reduce the child's temperature ie. removing excess clothing, laying child in a cool place, encouraging the child to drink cool water etc. until they are collected.

Vomiting and/or Diarrhoea

Children that have diarrhoea and/or vomiting at the service, the Responsible Person will contact the child's parents or authorised nominee and request that the child be collected as soon as possible. The child will be excluded until the symptoms have stopped for at least 24 hours.

Ear Infection

Children will be excluded if there is any fluid coming out of their ear.

Hand, Foot and Mouth

Hand foot and mouth disease is a common viral infection. The obvious signs include tiny blisters on various parts of the body. The virus is in the fluid of the blisters so children with the virus will be excluded until all blisters have dried.

Head Lice

If head lice is been detected, the family will be contacted and asked to collect the child for treatment. The child may return to the service as soon as 'effective treatment' has started. An effective treatment is when a treatment is used and all the lice are dead.

Reporting Notifiable Communicable Diseases

Upon notification of suspected or confirmed case of a notifiable illness at the service, the Nominated Supervisor/Director will notify the CEO or an Advisor.

The Health Department will be notified by the CEO or nominated delegate in accordance with the NHMRC recommended notifiable diseases. A-Z list of notifiable infectious diseases and related conditions: https://ww2.health.wa.gov.au/Articles/N_R/Notification-of-infectious-diseases-and-related-conditions

Upon confirmation of a notifiable illness the Director of the service will inform Educators, staff, families, visitors and information on the disease will be provided to them

Refer to: Process section of this Policy for Reporting Notifiable Infectious Diseases

Following advice from the Department of Health, the service may be required to exclude children that have an immunisation medical contraindication notice specified on their AIR History Statement. Children with medical contraindication may be at risk and would be considered non-immunised during a suspected and actual outbreak of a vaccine preventable disease. Fees are payable for children excluded for the period of time recommended by the Department of Health.

Refer to: Child Immunisation section of this Policy
Health, Hygiene and Infection Control Policy and Procedures.

Child Immunisation

The Public Health Act 2016 (WA) regulations require child care services to collect and report immunisation information about each child enrolled in the service.

In accordance with the regulations and the terms and condition of enrolment, Meerilinga will request and obtain each child's immunisation record from the parent/guardian at the time of enrolment or re-enrolment.

Meerilinga will only accept the following documentation to verify each child's immunisation status:

- Australian Immunisation Register **AIR Immunisation History Statement**, no more than two months old showing that a child is 'up to date' with their immunisations. including where a child has an approved medical contraindication or natural immunity to one or more vaccines *OR*
- **AIR Immunisation History Form**, no more than six months old, for a child who does not have a complete immunisation history on the AIR and may be on a recognised catch-up schedule, which has been certified by an immunisation provider *OR*
- A valid immunisation certificate issued or declared by the Chief Health Officer.

A copy of the document will be taken, the information recorded in the Child Care Management System and filed with the child's enrolment records.

Failure to provide a current immunisation status record will result in non-acceptance of the child's enrolment.

Until the child reaches the age of 4, families must provide an updated statement each time the child receives an immunisation.

Children must also meet the immunisation requirements for the parent/guardian to receive Child Care Subsidy (CCS) fee assistance.

Meerilinga will provide families with information on immunisation and other health issues relevant to immunisation at the time of enrolment and is regularly conveyed to families through various methods as outlined in the Centres Communication Plan.

Refer to the Relationships and Partnerships with Families Policy and Processes - Communication Plan.

Meerilinga will inform families of their closest immunisation clinic. This information will be gained as required by regular contact with the local Government shire and the Health Department.

Educators and staff will be provided with information and encouraged to receive immunisation from vaccine preventable diseases.

Vaccine exemption due to medical reasons or natural immunity

A Medical Exemption may be obtained for non-immunised children.

If a child cannot receive one or more vaccines for certain medical reasons or the child has natural immunity, the parent/guardian must contact their medical practitioner in the first instance.

The following medical practitioners can grant exemptions:

- General practitioners (GPs) that are vocationally registered, or a fellow of the Royal Australian College of General Practitioners (RACGP) or Australian College of Rural and Remote Medicine (ACRRM).
- General practice registrars on an approved 3GA training placement.
- Paediatricians.
- Public health physicians.
- Infectious disease physicians, or
- Clinical immunologists.

If a vaccine exemption is warranted, the medical practitioner will advise the AIR online or by completing and submitting the AIR – Immunisation Medical Exemption Form.

Children that have an approved medical contraindication to specified vaccines or natural immunity will have an immunisation status that is recorded as 'up to date' on their AIR Immunisation History Statement with notice/s outlining specific contraindication or natural immunity.

Children with medical contraindication may be at risk and would be considered nonimmunised during a suspected and actual outbreak of the specified vaccine preventable disease.

Refer to: Process section of this Policy for Reporting Notifiable Infectious Diseases

Overseas Immunisation Records

Overseas immunisation records will not be accepted.

Families who have moved to Australia from overseas need to take any information about their child's overseas immunisations to a registered immunisation provider, who will then update the child's AIR record. Following the update to the child's AIR record, parents can then access an updated AIR Immunisation History Statement.

Reporting under-vaccinated children

Under regulation 10C of the Public Health Regulations 2017, the Chief Health Officer may direct the Approved Provider to provide a report to the Chief Health Officer in respect of information given to that person about the immunisation status of children enrolled at service.

When to report at other times:

- If an existing enrolled child's immunisation status is 'not up to date'.
- The Chief Health Officer may request reports of the immunisation status of enrolled children during the outbreak of a vaccine-preventable disease.

How to report:

When requested by the Chief Health Officer, the Approved Provider is required to complete the Immunisation Status of a Child Reporting Form https://cdcwa.health.wa.gov.au/surveys/?s=KNRCK7KLCN. This information goes to the Department of Health, who will contact the families of these children to provide support in accessing local immunisation services.

Director / Nominated Supervisor/ Responsible person will ensure:

- A hygienic environment is maintained.
- Cleaning schedules are completed each day and signed by the Educators.
- Children are directed in their understanding of health and hygiene throughout the daily program and routine.
- Educators and Staff are aware of relevant immunisation regulations and quidelines for children and themselves.
- Information is collected on enrolment and maintained regarding each child's immunisation status, and any medical conditions.
- To provide families with relevant sourced materials and information on infectious diseases, health and hygiene including:
 - The current WA Immunisation Schedule for children.
 - Exclusion guidelines in the event of an infectious illness at the Centre for children that are not immunised.
 - Advice and information regarding any infectious diseases in general, and information regarding any specific infectious illnesses that are suspected/present in the service.
- To provide information to families about an infectious disease by displaying and emailing the Infectious Diseases Notification and details.
- Illness records are completed and signed no later than 24 hours of an illness occurring.
- All educators are mindful and preserve confidentiality of individual children's medical circumstances.

- Children's enrolment records are updated with regards to immunisation as required eg: as children reach age 4 for immunisation.
- To notify the CEO or Advisor upon notification of a notifiable infectious disease to ensure reporting compliance to relevant Authorities as required.
- To provide opportunities for staff, children and families to have access to health professionals by organising visits/guest speakers to attend the Centre to confirm best practice.
- Children do not attend the Centre if they are unwell. If a child has been sick they must be well for 24hrs before returning
- To complete the register of illness and/or document incidents of infectious diseases. Some diseases require your state authority to be notified.
- The organisations universal health and hygiene procedures for cleaning equipment and the environment are followed at all times eg: colour coded equipment and safe use of chemical.

Educators and Staff will:

- Ensure that any child suspected of having an infectious Illness are responded to and their health and emotional needs supported at all times.
- Implement appropriate health and safety procedures, when treating ill children.
- Advise families that they will need to alert the Centre if their child is diagnosed with an Infectious Illness.
- Maintain their own immunisation status, and advise the Director of any updates to their immunisation status.
- Provide diverse opportunities for children to participate in hygiene practices, including routine opportunities, and intentional practice.
- Adhere to the Centres Health, Hygiene and Infection Control Policy and Processes including:
 - Hand washing children and staff
 - Daily cleaning and safety checks of the indoor and outdoor environments
 - Wearing gloves (particularly when in direct contact with bodily fluids)
 - Appropriate handling and preparation of food
 - Cleaning up bodily fluid spills
 - Disposing of Foreign or Sharp objects
- Maintain up to date knowledge with respect to Health and Safety through on going professional development opportunities.
- All play dough is to be made fresh every week. If there is an outbreak of vomiting and/or diarrhoea, or any other contagious communicable disease, play dough is to be discarded at the end of each day and a new batch made during this time. Children are to wash their hands before and after using the play dough.

Process		
Process Owner	CEO	
Effective Date	22 July 2019	
Date of Last Revision	8 July 2019	

Process Details

Description

1. Children's Immunisation

- In accordance with the regulations and the terms and condition of enrolment or reenrolment, Meerilinga will only accept the following documentation to verify each child's immunisation status:
 - Australian Immunisation Register (AIR) Immunisation History Statement, no more than two months old.
 - AIR Immunisation History Form, no more than six months old, if the child is on a catch up schedule.
 - A valid immunisation certificate issued or declared by the Chief Health Officer.

The Director will take a hard copy of the document and record the information in the Smartfees Child Care Management System. A copy is scanned and emailed to the Enrolment and Inclusion Advisor. The document will be filed with the child's enrolment records.

Failure to provide a current immunisation statement record will result in non-acceptance of the child's enrolment.

- 2. A medical exemption for non-immunised children may be obtained by the parent/guardian through a registered medical practitioner. Children who have an approved medical contraindication to vaccination or natural immunity will have an immunisation status that is recorded as 'up to date' on their AIR Immunisation History Statement with notice/s outlining specific contraindication or natural immunity. The Director will record all children with medical contraindication on the Child Health and Wellbeing Register.
- 3. Children with medical contraindication may be at risk and would be considered non-immunised during a suspected and actual outbreak of the specified vaccine preventable disease. Following advice from the Department of Health, these children may be excluded from the service in the event of a reported and confirmed case of the specified disease. Fees will apply for the exclusion period.
- Overseas immunisation records will not be accepted. Families can have the child's overseas record verified by a registered immunisation provider who will then update the child's AIR record.
- 5. Reporting under vaccinated children:
 - The Chief Health Officer may direct the Approved Provider to provide a report to the in respect of the immunisation status of children enrolled at service, this may include during the outbreak of a vaccine-preventable disease.
 - The Enrolment and Inclusion Advisor will action all immunisation reporting to the Health Department as directed.

Reporting via Immunisation Status of a Child Reporting Form https://cdcwa.health.wa.gov.au/surveys/?s=KNRCK7KLCN. This information goes to the Department of Health, who will contact the families of these children to provide support in accessing local immunisation services.

Process Details Description 2. **Reporting Notifiable Communicable Diseases** Upon notification of suspected or confirmed case of a notifiable communicable disease at the service, the Nominated Supervisor/Director will notify the CEO or an Advisor. The Health Department will be notified by the CEO or nominated delegate in accordance with the NHMRC recommended notifiable diseases. A-Z list of notifiable infectious diseases and related conditions: https://ww2.health.wa.gov.au/Articles/N_R/Notification-of-infectious-diseases-andrelated-conditions Report all cases of notifiable infectious diseases and conditions residing in the Perth Metropolitan area to the: **Communicable Disease Control Directorate** Phone: 9222 0255 After hours emergency phone: 9328 0553

Associated Documents

Meerilinga Policy Manual

• Preface - Section 1 - Strategic and Business Planning Policies (Code of Ethics & Conduct)

Postal address: PO Box 8172, Perth Business Centre WA 6849

• Section 2 - Human Resources Policies

Fax: 9222 0254

- Section 3 Finance, Assets and Administration Policies
- Section 6 Children's Program Policies
 - Staffing
 - Enrolment and Orientation
 - Delivery and Collection of Children
 - Pets and Animals in the Environment
 - Relationships and Interactions with Children

Email: cdc@health.wa.gov.au

- Relationships and Partnerships with Families Communication Plan
- Child Safe Environment
- Supervision
- Emergency Management
- Health, Hygiene and Infection Control
- Toileting and Nappy Change
- Medical Conditions
- Medications
- Section 7 Workplace Health and Safety Policies
 - Environmental Protection
 - Workplace Health and Safety
 - Use and Storage of Dangerous Products
 - Safe Disposal of Dangerous Products
- Section 8 Guidelines

- Staying Healthy Preventing Infectious Diseases in Early Childhood Education and Care Services, 5th Edition.
- Communicable Disease Guidelines for teachers, child care workers, local government authorities and medical practitioners. Government of Western Australia - Department of Health – 2017 Version

Guidelines for Advisor

- Enrolment and Inclusion Advisor will monitor immunisation compliance at the time of enrolment and duration as well as manage reporting to relevant authorities as required.
- Inform CEO of notification of communicable disease within a service and action reporting to Communicable Disease Control Directorate as required.
- Action reporting Ensure information sought regarding the prevention of infectious diseases is sourced from recognised health authorities.
- Monitor document control to ensure the cleaning, safety checks and risk assessments of the environment are conducted and documented in accordance with relevant schedules and audits of the organisation.
- Ensure identified health and safety risks are managed and attended to promptly.
- Implement recommendations from Staying Healthy in Child Care Preventing the spread of Infectious Diseases in the early childhood environment.
- Ensure the Directors and Educator teams are protecting the Meerilinga community from harm by ensuring relevant policies and procedures are followed regarding health and safety within the Centre.
- Ensure the required enrolment documentation is collected, maintained and stored appropriately and in accordance with current legislation.

Records Management

Title	Location	Responsible Officer	Minimum Retention Period
Enrolment Form	CFC	Nominated Supervisor / Advisor Enrolment & Inclusion	3 years from exit
Child - Australian Immunisation History Statement	CFC	Nominated Supervisor / Advisor Enrolment & Inclusion	3 years from exit
Internal Cleaning Schedule	CFC	Nominated Supervisor	3 years
CFC Daily Checklist	CFC	Nominated Supervisor	3 years
CFC Grounds Checklist	CFC	Nominated Supervisor	3 years
Audit Summary & Report	CFC W/Leed	Community Advisor CEO	3 years
Medication Authorisation Form	CFC	Nominated Supervisor	3 years from exit

Medical Management Plan	CFC	Nominated Supervisor	3 years from exit	
Risk Minimisation and Communication Plan	CFC	Nominated Supervisor	3 years from exit	
Children's Health and Wellbeing Register	CFC	Nominated Supervisor	3 years	
Child Incident Report	CFC	Nominated Supervisor	Until the child is 25 years old	
Health / Hygiene / Safety Risk Assessment Plans	CFC W/Leed	CEO / Nominated Supervisor	3 years	
Notification to Regulatory Authority or Health Department	CFC W/Leed	Advisor CEO	3 years	

Reference

- Education and Care Services National Law Act (WA) 2012 October 2018
- Education and Care Services National Regulations (WA) 2012 October 2018
- ACECQA National Quality Standards February 2018
- ACECQA Belonging, Being & Becoming Early Years Learning Framework
- Code of Ethics Meerilinga
- Code of Conduct Meerilinga
- Children and Community Services Act 2004
- Immunisation Enrolment Requirements for Child Care Services. Public Health Act 2016 (WA)
- Privacy Act 1988
- Occupational Safety and Health Act 1984 and the Occupational Safety and Health Regulations 1996.
- Staying Healthy Preventing Infectious Diseases in Early Childhood Education and Care Services, 5th Edition. Australian Government National Health and Medical Research Council June 2013 https://nhmrc.gov.au/sites/default/files/documents/reports/clinical%20guidelines/ch55-staying-healthy.pdf
- Communicable Disease Guidelines for teachers, child care workers, local government authorities and medical practitioners. Government of Western Australia - Department of Health – 2017 Version https://www2.health.wa.gov.au/~/media/Files/Corporate/general%20documents/communicab le%20diseases/PDF/2101-communicable-disease-guidelines.pdf
- Department of Health, Western Australia. Immunisation Requirements Guidelines for persons in charge of child care services, community kindergarten and schools. file:///C:/Users/rhonda.hagan/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/28N5QKIH/Immunisation%20requirements%20for%20child%20care%20services%20kindergarten%20and%20schools%20(002).pdf

Definitions

Term	Definition
Universal	Relating to or done by all people within the organisation - Health & Hygiene
	Processes

Mapping Policy and Processes

Education and Care Services National Law (WA) Act 2012		
Section	165, 167, 173, 174(2)(a), 175.	

Education and Care Services National Regulations (WA) 2012				
Regulations	12, 73, 77, 78, 85, 86, 87, 88, 89, 90, 91, 94, 97, 103, 105, 106, 109, 110,			
	112, 136, 160, 161, 162, 165, 168(1)(2)(c), 170, 171, 172,			
173(g)(i),176(2)(a)(ii)(b), 177, 181, 183, 185.				

Standards for RTOs 2015

Vocational Education and Training is a significant contributor to Australia's economy domestically, being the primary mechanism to meet the skilling needs of the Australian community. The standards give the community confidence that RTOs are delivering quality training and assessment that is highly regarded both locally and overseas.

Policy Area	National Quality Standards Early Childhood	National Standards for Volunteering Involvement 2015	Standards to Community Services	Standards to Family Support
Children's Programs	QA 1 - 1.1, 1.1.3, 1.2, 1.2.1, 1.2.2, 1.2.3. QA 2 - 2.1, 2.1.1, 2.1.2, 2.2, 2.2.1, 2.2.2. QA 3 - 3.1.2, 3.2.3. QA 4 - 4.1.2, 4.2.2. QA 5 - 5.1, 5.1.2, 5.2.1 QA 6 - 6.1, 6.1.1, 6.1.2, 6.1.3, 6.2. QA 7 - 7.1, 7.1.1, 7.1.2, 7.1.3, 7.2, 7.2.1, 7.2.3.	N/A	N/A	N/A