



Minimum Exclusion Periods for Infectious Disease Cases and Contacts

Policy

- 1.1 Cheltenham Community Centre (CCC) Children's Services is committed to:
 - a) Providing a safe and healthy environment for all children, educators, staff and others attending the service
 - b) Taking reasonable steps to prevent the spread of infectious diseases at the service and complying with recommended Department of Education and Training exclusion guidelines, and
 - c) Ensuring that unwell children do not attend the centre.
- 1.2 This policy will provide clear guidelines and procedures to follow when a child attending CCC shows symptoms of, or has been diagnosed with, an infectious disease, and for managing and minimising the spread of infectious diseases and illnesses, infections relating to blood-borne viruses, and epidemics and pandemics (e.g. COVID-19).
- 1.3 This policy applies to the Approved Provider, Nominated Supervisor, Early Childhood Educators, staff and parents/guardians who wish to enrol or have already enrolled at CCC and is to be used in conjunction with our Illness and Injury policy.
- 1.4 In order to assess whether the values and purposes of this policy have been achieved, we will:
 - a) Welcome feedback from everyone affected by this policy regarding its effectiveness
 - b) Monitor the implementations, compliance, complaints and incidents in relation to this policy
 - c) Keep the policy up to date with current legislation, research, policy and best practice
 - d) Revise the policy and procedures as part of the service's policy review cycle, or as required, and
 - e) Notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

Procedure

Infectious diseases

- 2.1 Any child suffering an Infectious Disease will not be permitted to attend the Children's Service.
- 2.2 If there is an occurrence of an infectious disease at the service, reasonable steps will be taken to prevent the spread of that infectious disease.
- 2.3 If there is an occurrence of an infectious disease at the service, a parent/guardian or authorised emergency contact of each child at the service will be notified of the occurrence as soon as is practicable.

- 2.4 Information from the DHHS about the minimum exclusion periods is displayed at the service.
- 2.5 A child will be excluded from the service in accordance with the minimum exclusion periods, when informed that the child is infected with an infectious disease or has been in contact with a person who is infected with an infectious disease.
- 2.6 The Communicable Disease Section (DHHS) will be contacted if there is an outbreak of two or more cases of gastrointestinal illness in a 48-hour period.
- 2.7 Staff will ensure that Children attending have an up-to-date Australian Childhood Immunisation Register (ACIR) statement as per our conditions of admission and enrolment policy.
- 2.8 If there is a recorded vaccine preventable disease case at CCC, and we have children enrolled who are not immunised against a vaccine preventable disease (VPD), these children cannot attend the centre until CCC has been directed that such attendance can be resumed. (Note—VPDs are marked in the table with an asterisk [*]; contact the Department on 1300 651 160 for further advice about exclusion and these diseases.)
- 2.9 Educators and staff at CCC will be aware of the requirements and able to implement the recommended minimum exclusion periods.
- 2.10 Staff at the service are aware of and adhere to the Hygiene Policy and the procedures for infection control relating to blood-borne viruses.
- 2.11 Appropriate and current information and resources are provided to educators and staff and parents/guardians regarding the identification and management of infectious diseases, blood-borne viruses and infestations.
- 2.12 Staff and educators will be kept informed about current legislation, information, research and best practice and will ensure that any changes to the exclusion table or immunisation schedule are communicated to other educators/staff and parents/guardians in a timely manner.
- 2.13 Staff, educators and parents are recommended to comply with the advice from the Australian Health Protection Principal Committee (AHPPC), Victorian Chief Health Officer and DHHS in an epidemic or pandemic event.

Procedures for infection control relating to blood-borne viruses:

This procedure is based on information available from the Department of Education and Training (DET), the Victorian Government's Better Health Channel and the National Health and Medical Research Council.

- 3.1 For the child/ren's benefit, parents should inform the early childhood educators of these infections. This information will remain confidential.
- 3.2 A person responding to an incident involving blood at the service must first cover any cuts, sores or abrasions on their own hands and arms with waterproof dressings.
- 3.3 Equipment to be used when cleaning and removing a blood spill:
 - Disposable gloves
 - Disposable plastic bags/zip lock bags
 - Detergent/bleach
 - Disposable towels
 - Access to warm water

- 3.4 Steps to be taken when cleaning and removing a blood spill:
- a) Put on disposable gloves
 - b) Cover the spill with paper towels
 - c) Carefully remove the paper towel and contents
 - d) Place the paper towels in an appropriate disposable plastic bag/zip lock bag
 - e) Clean the area with warm water and detergent/bleach, then rinse and dry
 - f) Remove and place gloves in an appropriate disposable plastic bag/zip lock bag, seal, and place it in a rubbish bin inaccessible to children
 - g) Wash hands in warm, soapy water and dry.

Actions for Early Childhood and Care Services in an epidemic or pandemic

- 4.1 Early childhood settings should consider a variety of strategies to support physical distancing and good hygiene practices to reduce the risk of coronavirus (COVID-19) transmission within the practical limitations of an early learning environment.
- 4.2 The following guidelines are based on, and aimed at ensuring compliance with, the National Health and Medical Research Council (NHMRC) guide: Staying healthy: Preventing infectious diseases in early childhood education and care services
- 4.3 Display educational materials, which can be downloaded and printed from the Department of Health and Human Services (DHHS) website.
- 4.4 Keep parents and staff informed of the actions you are taking.
- 4.5 The most important action early childhood services can take to reduce the risk of transmission of coronavirus (COVID-19) is to ensure that any unwell staff and children remain at home.
- 4.6 Parents/carers of children with complex medical needs (including those with compromised immune systems) should seek advice from the child's medical practitioner to support decision-making about whether on-site education and care is suitable, noting that this advice may change depending on the status of the pandemic.
- 4.7 Visitors to early childhood services are limited to those delivering or supporting essential services and operations and the service must maintain a visitor record to maintain details of any visitors (if necessary) entering the service, including their contact details.
- 4.8 While it is not a requirement of entry to these settings for visitors to have been vaccinated against influenza, staff in these settings should encourage visitors to get vaccinated beforehand.

Arrival and departure

- 4.9 As the main risk of introducing coronavirus (COVID-19) to the early childhood environment is from adults, close proximity between adults should be avoided, particularly during drop-off and pick-up.
- 4.10 Where possible, minimise opportunities for parents and carers to gather in groups, especially in foyers and in children's play areas. It may be possible, for example, for children to be dropped off and picked up in the service entrance or foyer, or to stagger start and finish times of some service types. Greeting parents and children at the front door in the morning and during pick up times will allow for one-on-one communication with families while practising physical distancing and providing opportunities to consider whether children are showing any signs of being unwell.

- 4.11 If practical have allocated arrival and pick up times spaced out to minimise all families arriving at the same time, noting that it is not expected that session times are extended to accommodate additional arrival and departure procedures

Physical distancing measures:

- 4.12 Parent information sessions and interviews should meet physical distancing requirements of 1.5 metres between adults, or else be replaced with virtual alternatives.
- 4.13 Where multiple staff are in a room, remind staff to maintain physical distancing from each other as much as practical.
- 4.14 Allow for small group play, staggered mealtimes and indoor/outdoor play opportunities whenever possible. Consider the setup of the room and the placement of the activities and limit the number of whole group activities. Wherever possible, and where you have enough staffing for adequate supervision, consider operating an indoor/outdoor program.
- 4.15 Excursions should not be undertaken other than to local parks.

Improved hygiene measures:

- 4.16 Educators should actively talk about why everyone needs to wash their hands and the importance of everyone doing this.
- 4.17 All staff and children should undertake regular hand hygiene, particularly on arrival to the service, before and after eating, after blowing their nose, coughing, sneezing or using the toilet.
- 4.18 Liquid soap and running water, or alcohol-based hand sanitiser, is available at the entrance of the facility and throughout.
- 4.19 Tissues should be readily accessible with bins provided in each room and in outdoor areas for easy disposal.
- 4.20 Children should bring their own water bottle for use (and refilling) at the service. Sharing of food should not occur.
- 4.21 Use of mobile phones by staff should be minimised, and staff reminded to clean their phones regularly.
- 4.22 Rotation of toys more often and increasing the frequency of cleaning toys. Sharing of toys that have been placed in mouths should be monitored, avoided, removed from play to be cleaned and returned once cleaning has occurred.

Cleaning and facilities management

- 4.23 Environmental cleaning, coupled with regular hand hygiene, remains important to reduce the risk of coronavirus (COVID-19) transmission. Services should maintain full adherence to the NHMRC childcare cleaning guidelines, and in addition:
- a) Clean and disinfect high-touch surfaces at least daily (e.g. play gyms, tables, hard backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks).
 - b) Wash and launder play items and toys including washable plush toys, as appropriate, in accordance with the manufacturer's instructions. If possible, launder items using the

warmest appropriate water setting for the items and dry items completely. – note, disinfecting and cleaning of toys and equipment is not required after every use.

- 4.24 Windows should be open during the day, where possible, to promote airflow.

Provision of routine care and first aid

- 4.25 Physical distancing is not practical when providing routine care, assistance or first aid. In these situations, standard precautions, including hand hygiene, are important for infection control. See also NHMRC guidelines *Staying healthy: Preventing infectious diseases in early childhood education and care services*.
- 4.26 Always wash hands with soap and water or use a hand sanitiser before and after performing routine care or first aid.
- 4.27 Personal Protective Equipment (PPE), for example face masks, is not required to provide routine care or first aid for children who are well.

Management of an unwell child or staff member

- 4.28 It is important that any staff member or child who becomes unwell while at an early childhood service returns home. While it is unlikely that a staff member or child who is unwell with flu-like symptoms will have coronavirus (COVID-19), there are some sensible steps services can take while a child awaits collection by a parent or carer as a precaution.
- 4.29 Staff or children experiencing compatible symptoms with coronavirus (COVID-19), such as fever, cough or sore throat, should be isolated in an appropriate space with suitable supervision and collected by a parent/carer as soon as possible.
- 4.30 Where staff or children are experiencing symptoms compatible with coronavirus (COVID-19), important actions to take include hand hygiene, physical distance and where possible putting on a face mask.
- 4.31 Face masks should not be used in situations where an individual is unable to safely or practically tolerate a mask (e.g. a child with complex medical needs, including existing respiratory needs, and younger children).
- 4.32 Urgent medical attention should be sought where indicated. Health care plans, where relevant, should be updated to provide additional advice on monitoring and identification of the unwell child in the context of coronavirus (COVID-19).
- 4.33 If a staff member is unsure whether a child is unwell, it is advisable in the first instance to contact the parent/carer to discuss any concerns about the health status of the child and, taking a precautionary approach, request the parent/carer to collect their child if concerns remain. The temperature of the child can be taken, where appropriate, to support decision making. Gloves should be worn for the purpose of taking a temperature.
- 4.34 Follow cleaning guidance according to the situation of the case. If a child is spreading droplets (for example by sneezing, coughing or vomiting), clean surfaces immediately with disinfectant wipes while wearing gloves.
- 4.35 Staff or children experiencing symptoms compatible with coronavirus (COVID-19) should be encouraged to seek the advice of a healthcare professional who can advise on next steps. A medical certificate is not required to return to an early childhood setting after a period of illness, however staff and children should not return until symptoms resolve.

4.36 If staff or children have a positive result to a COVID test they must remain in their home or accommodation as advised by Public Health officers. The state or territory public health unit will identify close contacts of a confirmed COVID-19 case and provide them with instructions, for example, in relation to quarantine requirements.

5.1 Legislation and regulations

- *Children's Service Regulations 2020*
 - *Regulation 57(1); Regulation 57(2)*
- *Public Health and Wellbeing Regulations 2019*
 - *Regulation 111 (a) & (b)*

Other relevant legislation and standards include, but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011: Regulation 88*
- *Health Records Act 2001*
- *Privacy and Data Protection Act 2014 (Vic)*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
- *National Quality Standard, Quality Area 6: Collaborative Partnerships with Families and Communities*
- *Occupational Health and Safety Act 2004*
- *Privacy Act 1988 (Cth)*
- *Public Health and Wellbeing Act 2008*
- *Public Health and Wellbeing Regulations 2019*

The most current amendments to listed legislation can be found at:

- Victorian Legislation – Victorian Law Today: <http://www.legislation.vic.gov.au/>
- Commonwealth Legislation - Federal Register of Legislation: <https://www.legislation.gov.au>

Definitions

- 6.1 **Blood-borne virus (BBV):** A virus that is spread when blood from an infected person enters another person's bloodstream. Examples of blood-borne viruses include human immunodeficiency virus (HIV), hepatitis B, hepatitis C and viral haemorrhagic fevers. Where basic hygiene, safety, infection control and first aid procedures are followed, the risks of contracting a blood-borne virus are negligible.
- 6.2 **Communicable Disease Section:** Responsibility for communication and advice in relation to infectious diseases on behalf of the Secretary of the Victorian DHHS.
- 6.3 **Epidemic:** is an outbreak of a contagious disease that spreads rapidly and extensively, and affects many individuals simultaneously in an area or population.
- 6.4 **Exclusion:** Inability to attend or participate in the program at the service.

- 6.5 **Illness:** Any sickness and/or associated symptoms that affect the child's normal participation in the program at the service.
- 6.6 **Immunisation:** an effective means of reducing the risk of vaccine-preventable diseases. Early childhood education and care services which are regulated under the Education and Care Services National Law Act 2010 have legislative responsibilities under the Public Health and Wellbeing Act 2008 to only offer a confirmed place in their programs to children with acceptable immunisation documentation.
- 6.7 **Infection:** The invasion and multiplication of microorganisms in bodily tissue.
- 6.8 **Infectious disease:** An infectious disease designated by the Communicable Disease Section (refer to Definitions), Victorian DHHS as well as those listed in Schedule 7 of the Public Health and Wellbeing Regulations 2019, the Minimum Period of Exclusion from Primary Schools, Education and Care Service Premises and Children's Centres for Infectious Diseases Cases and Contacts.
- 6.9 **Medication:** Any substance, as defined in the Therapeutic Goods Act 1989 (Cwlth), that is administered for the treatment of an illness or medical condition.
- 6.10 **Minimum exclusion period:** The minimum period for excluding any person from attending a children's service to prevent the spread of infectious diseases as specified in Schedule 7: Minimum Period of Exclusion from Primary Schools and Children's Services for Infectious Diseases Cases and Contacts of the Public Health and Wellbeing Regulations 2019. An infringement penalty for failure to exclude a child with, or exposed to, a specified infectious disease applies (applicable to a person in charge). The exclusion period table, published by the DHHS, can be accessed at Effective Date: 24th July 2020 Approved Date: 24th July 2020 Next Review Date: July 2021 Version No.: 2 ©2019 Early Learning Association Australia Page 4 of 14
<https://www2.health.vic.gov.au/public-health/infectious-diseases/school-exclusion/schoolexclusion-table>
- 6.11 **Pandemic:** is an epidemic (refer to definition) occurring worldwide, or over a wide geographic area and affecting a large proportion of the population.

Sources and related policies

7.1 Sources:

ACECQA <https://www.acecqa.gov.au/nqf/national-law-regulations/national-regulations>

Australian Government - Department of Health.

https://www.health.gov.au/sites/default/files/documents/2020/03/coronavirus-covid-19-information-for-people-with-a-suspected-case_0.pdf#:~:text=You%20must%20remain%20in%20your,after%20your%20symptoms%20end.

Communicable disease management - Health.vic <https://www2.health.vic.gov.au/hospitals-and-health-services/quality-safety-service/infection-prevention/communicable-diseases>

Department of Education and Training (DET) <https://www.education.vic.gov.au/Pages/default.aspx>

Education & Care Services National Regulations

<https://www.legislation.nsw.gov.au/view/whole/html/inforce/current/sl-2011-0653>

Information about immunisations, including immunisation schedule, DHHS:

www.health.vic.gov.au/immunisation

Health and Safety Advice for Early Childhood Education and Care Services in the Context of Coronavirus (COVID19) <https://www.education.vic.gov.au/Documents/about/department/covid-19/ec-health-and-safety-advice.pdf>

Information about immunisations, including immunisation schedule, DHHS:

www.health.vic.gov.au/immunisation

Immunisation Enrolment Toolkit for early childhood services: <https://www2.health.vic.gov.au/public-health/immunisation/vaccination-children/no-jab-noplay/immunisation-enrolment-toolkit>

National Health and Medical Research Council. <https://www.nhmrc.gov.au/>

National Immunisation Program, Department of Health, Australian Government:

<https://www.health.gov.au/initiatives-and-programs/national-immunisation-program>

Reform of Children's Services Law & Regulations

<https://www.education.vic.gov.au/childhood/providers/regulation/Pages/csareform.aspx#:~:text=Children's%20Services%20Regulations%202020,-The%20new%20Children's&text=There%20will%20be%20a%20two%20year%20transition%20period%20for%20existing%20services.&text=The%20new%20Regulations%20reflect%20the,child%20ratios%2C%20and%20educator%20qualifications>

Safe work Australia. <https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/office/covid-19-your-workplace>

Victorian Consolidated Regulations

http://classic.austlii.edu.au/au/legis/vic/consol_reg/phawr2019331/

Victorian Government's Better Health Channel. <https://www.betterhealth.vic.gov.au/>

7.2 Services policies

- Conditions of admission and enrolment procedure
- Confidentiality Policy and Guidelines
- Dealing with medical conditions (including anaphylaxis, allergies, asthma & diabetes)
- Illness or Injury policy
- Parent complaint procedure
- Workplace Health and Safety policy

Revision History

Date	Revision	Revised by
10/10/2013	Created	Tammy Rowed
25/09/2020	Updated	Leanne Le-Ack
17/11/2020	Reviewed for consistency with CCC Policy & Procedure Manual	Catriona O'Neill

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