Sick Children Policy

Children come into contact with many other children and adults in the early childhood environment causing them to contract infectious illnesses. National Quality Standards require early childhood services to implement specific strategies to minimise the spread of infectious illness.

**National Quality Standards (NQS)**

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<thead>
<tr>
<th>Quality Area 2: Children’s Health and Safety</th>
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<tbody>
<tr>
<td>2.1.1 Each child’s health needs are supported.</td>
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<td>2.1.4 Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines.</td>
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<td>2.2.1 Healthy eating is promoted and food and drinks provided by the service are nutritious and appropriate for each child.</td>
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<td>2.3.1 Children are adequately supervised at all times.</td>
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<td>2.3 Every child is protected.</td>
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<td>2.3.2 Every reasonable precaution is taken to protect children from harm and any hazard likely to cause injury.</td>
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<td>2.3.3 Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented.</td>
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**Education and Care Services National Regulations**

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<tr>
<th>Children (Education and Care Services) National Law VIC</th>
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<tr>
<td>77 Health, hygiene and safe food practices</td>
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<td>88 Infectious diseases</td>
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<td>90 Medical conditions policy</td>
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<td>92 Medication record</td>
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PURPOSE
We aim to maintain the health of all children, staff and their families, ensuring a healthy environment and minimising cross contamination and the spread of infectious illnesses.

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

IMPLEMENTATION
This policy should be used in conjunction with the following Service policies

- Control of Infectious Diseases
- Incident, Illness, Accident and Trauma Policy
- Medical Emergency Policy
- Administration of Medication Policy

Our Service has adopted the Staying Healthy in Child Care – Preventing Infectious disease in child care Fifth Edition) publication, developed by the National Health and Medical Research Council. We aim to provide families with up to date information regarding specific illnesses and ways to minimise the spread of infection within the Service.

We understand that it can be difficult for families to know when their child is sick. Families may experience problems taking time off work or study to care for their child at home. Obtaining leave from work or study can enhance negative attitudes in the workplace which can cause stress on families. Families may also experience guilt when they send their child to care who is not well. However, it is imperative that families preserve a focus not only on the well-being of their own child but also upon the well-being of other children and the child care professionals at the Service.

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. To protect the health of children and staff within the Service, it is important that children and staff who are ill are kept away from the Service for the recommended period.
Our Educators and Staff are not medical practitioners and are not able to diagnose whether or not a child has an infectious illness. However, if an infectious illness is suspected, our Service may ask the family to collect their child from care as soon as possible or not bring the child to care. Management and Educators may request families seek medical advice and provide a medical certificate stating that the child is no longer infectious prior to returning to care.

Children arriving at the Service who are unwell

Management will not accept a child into care if they

- Are unwell and unable to participate in normal activities or require additional attention.
- Have had a temperature, vomiting and/or diarrhoea 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, in which Management and Educators will respond to children’s individual symptoms of illness.

- Educators will monitor and document the child’s symptoms on the illness record
- A child who has passed two runny stools/vomited whilst at the Service will be sent home and may only return once no vomiting or runny stools for 24hrs
- Educators will take the child’s temperature. If the child’s temperature is 38°C or higher, management will contact the child’s parents/guardian/emergency contacts as soon as possible to have the child picked up and provide verbal authorisation to administer paracetamol.
- Educators will attempt to lower the child’s temperature by
  - Taking off their shoes and socks
  - Applying a cool washer behind their neck and on their forehead
  - Removing extra clothing layers (jumpers etc)
  - Place the child in a lukewarm bath
- Place the child in a quiet area where they can rest, whilst being supervised
- Continue to document any progressing symptoms
- Complete Illness Record, ensuring the form has been completed correctly and signed by the parent/guardian/emergency contact
Reporting Outbreaks to the Public Health Unit

Outbreaks of communicable diseases represent a threat to public health. To prevent outbreaks it is important to monitor the number of people who contract certain infectious diseases and their characteristics, and to work with patients and their doctors to help prevent spread to other people.

The VIC Public Health Act 2010 lawfully requires and authorises doctors, hospitals, laboratories, school principals and child care centre directors to confidentially notify VIC Health of patients with certain conditions, and to provide the information delineated on the notification forms. Specialist trained public health staff review this information and if necessary contact the patient’s doctor, and sometimes the patient, to provide advice about disease control and to complete the collection of information.

All information is held confidentially in order to protect the patient’s privacy. Both the VIC and Commonwealth Privacy Acts contemplate the release/disclosure of patient information where it is lawfully required or authorised.

Management is required to notify the local public health unit (PHU) by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the school or facility is suffering from one of the following vaccine preventable diseases:

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella ("German measles")
- Measles
- Pertussis ("whooping cough")
- Tetanus
- An outbreak of gastrointestinal or respiratory illness

Common Colds and Flu

The common cold (Viral upper respiratory tract infections) are very common in children occurring 6-10 times a year on average with the highest number usually being during the first 2 years in child care, kindergarten or school. Symptoms may include coughing, runny nose and a slight temperature.

In circumstances where a child appears to have a cold or flu symptoms, management will determine if the child is well enough to continue at the service or if the child requires parental care.
Our Service aims to support the family’s need for child care, however families should understand that a child who is unwell will need one-on-one attention which places additional pressure on staff ratios and the needs of other children.

**Excluding children from the Service**

- When a child has been diagnosed with an illness or infectious disease, the Service will refer to Staying Healthy in Childcare (5th Edition) to find the recommended exclusion period and also request a medical clearance from the GP stating that the child is cleared to return to the childcare setting.

- 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 can be obtained from Staying Healthy In Child Care 5th Edition)

- Children that have had diarrhoea and vomiting will be asked to stay away from the Service for 24 hours after symptoms have ceased to reduce infection transmission as symptoms can develop again after 24 hours in many instances.

**Notifying families and Emergency Contact**

- It is a requirement of the Service that all emergency contacts are able to pick up an ill child as quickly as possible

- In the incident that the ill child is not collected in a timely manner or should parents refuse to collect the child a warning letter will be sent to the families outlining Service policies and requirements. The letter of warning will specify that if there is a future breach of this nature, the child’s position could be terminated.

**Management and Educators will ensure**

- Effective hygiene policies and procedures are adhered to at all times

- Effective environmental cleaning policies and procedures are adhered to all times

- All families will have access to relevant policies upon enrolment which will be explained by management including; Control of Infectious Diseases Policy, Sick Children policy, Injury and Accident policy and Medical Emergency Policy.

- Any child who registers a temperature of 39°C or above will need to be collected from the Service and will be excluded for 24 hours since the last elevated temperature or until the Service receives a doctors clearance letter stating that the child is cleared of any infection and able to return to child care.
• A child who has not been fully immunised will be excluded from the Service if; an infectious disease is reported within the Service community and that child is deemed to be in danger of contracting the illness. Please refer to our Control of Infectious Diseases Policy.

Families Responsibility

In order to prevent the spread of disease, families are required to monitor their child’s health, in particular:

• Runny, green nose
• High temperature
• Diarrhoea
• Red, swollen or discharging eyes
• Vomiting
• Rashes
• Irritability, unusually tired or lethargic

Returning to care after surgery

• Children who have undergone any type of surgery will need to take advice from their doctor/surgeon as to when it is appropriate to return to care.
• Children will require a medical clearance stating the child is fit and able to return to the Service and participate in daily activities.

Source

- The Business of Childcare, Karen Kearns 2004
- Education and Care Services National Regulation 2015
- National Quality Standards
- Early Years Learning Framework
- Staying Healthy in Child Care 5th Edition
- National Health and Medical Research Council
- VIC Health

Review

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