ARMIDALE & DISTRICT FAMILY DAY CARE

Dealing with Infectious Diseases and Illnesses

Related documentation Policy/policies:	Assist with First Aid, Dealing with Medical Condition & Incident, Injury, Trauma and Illness, Enrolment, and orientation,
Regulation/s/ Standards:	NQS- 2.1, 2.1.2, Regulation 88
Related procedures:	Administering medication, Inflection Control and Hand Washing, Nappy Changing
References:	Staying Healthy in Child Care (5th Edition NSW), Health Education and Care Services National Regulation 2011, www.health.gov.au/health-topics/immunisation/immunisation-services/flu-influenza-immunisation-service & www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/what-you-need-to-know-about-coronavirus-covid-
Date effective	19#symptoms April 2022
Date for review	April 2024
Purpose	To provide guidelines for the effective control of illness in Family Day Care environments in order to safeguard good health.
Responsibility/applies	Educators, Families, Staff

Key information:

Armidale & District Family Day Care and registered AFDC Educators retain the right to exclude children from care if they appear to be unwell and appear to pose a health risk to others.

AFDC and registered Educators are obliged to adhere to Department of Human Services and Staying Healthy in Child Care guidelines regardless of conflicting advice that may be obtained from a Medical Practitioner.

Educators must advise the Co-ordination Unit of any infectious disease that occurs within their service (affecting either themselves, their family, or a child in care).

Once AFDC is advised of the occurrence of infectious disease, we will comply with Education and Care Services National Regulation 88 and notify families of the occurrence.

Non-compliance with this Regulation could result in a penalty of \$2,000

Educators are to comply with recommended health and hygiene practices (handwashing, cleaning, nappy changing and cough and sneeze etiquette) to ensure effective infection control within their care environments.

Parents should keep their child at home if they have any of the following:

- a high temperature or fever the night before care or on the morning of care.
- a rash or unexplained skin condition not diagnosed by a Medical Practitioner.
- vomiting or diarrhoea within the past 24 hours
- if family members have had vomiting or diarrhoea in the past 24 hours
- a common cold that makes them generally not well enough to join in the day's regular activities or if,
- they seem unwell without any obvious symptoms i.e., they are unusually pale or flushed, tired, irritable, or lethargic
- they have been prescribed antibiotics (they must not attend care for 24 hours after commencing this medication)
- they have an identified infectious disease (refer to the exclusion recommendations attached)

Educators should not provide care if they or a member of their family have any of the health issues described above.

Immunisation:

For families using AFDC to receive the Child Care Subsidy and Family Tax Benefit (FTB) Part A, their child must meet the immunisation requirements.

If the child has not been medically vaccinated ('not medically vaccinated' includes children who may have been naturopathically or homoeopathically vaccinated), a child will be excluded from care during outbreaks of some infectious diseases (such as measles and pertussis), even if the child is well.

Parents must provide Armidale & District Family Day Care with an AIR (Australian Immunisation Register History Statement) when enrolling and after each immunisation.

Children who are on a catch- up schedule can be enrolled upon provision of an AIR, however, if they haven't had all the recommended immunisations for their age, they may need to stay at home during a disease outbreak.

If a child has been vaccinated overseas, their immunisation schedule will need to be checked by a GP or nurse who will transfer the information to the AIR so parents can then request an Immunisation History Statement.

The Australian Department of Health recommends that all adults who work in Early Childhood education and care, and children over the age of 6 months, should have yearly influenza vaccinations.

Medical Emergencies:

In the event of a medical emergency, Educators will attempt to contact either the child's parent or person listed as emergency contact on the child's enrolment form.

If contact cannot be achieved immediately the Educator will act in the child's best interests and arrange transport to hospital by ambulance.

They will then advise the parent (and AFDC) as soon as practicable.

Parents will be responsible for any emergency services costs incurred.

A Medical Certificate may be required for the following reasons:

To verify that the child / Educator is well enough to return to care after an illness.

To ensure that absences which are the result of illness, are recognised as "additional absences" and not deducted from the child's 42 allowable absences for CCS purposes.

Recommendations for Common Infectious Diseases and Illnesses in Childcare

<u>Unexplained Temperatures</u> While it is accepted that a child can have a raised temperature for no apparent reason, a child with a temperature must be excluded from care for at least a day. It is recommended that a child sees a Medical Practitioner if the high temperature persists.

<u>Bronchiolitis and Bronchitis Incubation</u>: Usually 5 days but can range between 2 and 8 days **Infectious:** Shortly before the onset of symptoms and during the active stage of the disease (1 week in total) **Exclusion:** Exclude until appropriate medical treatment has been given and the child is feeling well.

<u>Common Colds Incubation</u>: About 1-3 days Infectious: 2-4 days after the cold starts **Exclusion**: There is no need to exclude, however it is at the discretion of the Educator if the child appears unwell. Strict hygiene must be maintained (gloves or a barrier used to assist child to blow their nose, handwashing, teaching children to cough into their upper arm).

Chicken Pox (Varicella) Incubation: 14 -15 days on average Infectious: From 2 days before the rash appears and until all blisters have formed scales or crusts. Exclusion: Until all blisters have dried. Usually up to 5 days after the rash first appears.

<u>Conjunctivitis</u> Incubation: 24 -72 hours Infectious: While there is discharge from the eye. (Conjunctivitis caused by chemicals or allergies is not infectious) Exclusion: Until discharge from eye has stopped unless a medical practitioner has diagnosed non-infectious conjunctivitis.

Coronavirus This is a large family of viruses causing respiratory infections. It is extremely infectious, spread from person-to-person contact, through coughs and sneezes. Symptoms range from mild illness to pneumonia. Others including fever, cough, sore throat, fatigue, shortness of breath, aches, and pains, diarrhoea. Incubation: Average time 5 days. **Exclusion:** Exclusion will be in line with the NSW Government at the time.

Croup Incubation: Difficult to define (2 to 4 days) Infectious: Shortly before the onset of symptoms and during active stage of the disease. With severe croup, hospitalisation, may be required. Exclusion: Exclude until feeling well (3 to 4 days usually).

Diarrhoea & Vomiting (and all other related illnesses including Gastroenteritis, Rotavirus, Giardiasis etc.)

Incubation: Viral and bacterial 1-3 days. Parasitic infections 5-15 days. **Infectious:** For as long as organisms are present in faeces, whether they still cause symptoms. Exclusion: Until there has been no diarrhoea or vomiting for 24 hours. Where it is considered a mini epidemic by the Health Department, exclusion from care should be at least 48 hours.

Ear infections (Otitis) Incubation: A few days Infectious: Ear infections are NOT contagious, but the cold or other infection causing them is. Germs from ear infections can only be passed on if there is infectious fluid draining out of the ear. Exclusion: While there is an infectious discharge from the ear and until the child is feeling well.

Hand, Foot and Mouth Incubation: Usually 3 – 5 days. Infectious: If there is fluid in the blisters Faeces can remain infectious for several days. Exclusion: Exclude until all blisters have dried.

<u>Head Lice</u> Incubation: At the presence of eggs (nits) which hatch in 7-10 days. Hatched nits mature quickly and are capable of laying eggs after 6- 10 days. Exclusion: Until the day after appropriate treatment has commenced.

Herpes Simplex (Cold Sores) Incubation: 2 – 12 Days. Infectious: When fluid is present in blister, however people with a history of cold sores may shed virus through saliva. **Exclusion:** Exclude until sores have completely dried.

<u>Human Parvovirus (slapped cheek syndrome)</u> Incubation: 4-20 days Infectious: Until the rash appears **Exclusion**: Not Necessary

<u>Impetigo (School Sores)</u> Incubation: 1 – 3 days (strep), 4-40 days (staph). Infectious: While there is fluid weeping from the sore. Exclusion: Until antibiotic treatment has been received for at least 24 hours. Sores on exposed skin must be kept covered with watertight dressing.

Influenza Incubation: 1-3 days Infectious: 3 – 5 days from onset of symptoms in adults, 7 -10 days in young children. **Exclusion:** Exclude until feeling well.

Measles Incubation: 7-18 days. Infectious: 4 – 5 days before the rash appears. Exclusion: For at least 4 days after the appearance of the rash.

Meningococcal Incubation: Usually 3 – 4 days. Infectious: If organisms are present in nose and throat. Less than 24 hours if treated with effective antibiotics. Exclusion: Exclude until a course of an appropriate antibiotic has been completed.

Meningitis (Viral) and Meningitis (Bacterial) Incubation: Varies according to the specific infectious virus. Infectious: Varies according to the specific infectious virus. Exclusion: Exclude until a Medical Practitioner certifies child is well and non-infectious.

Mumps Incubation: 12 – 25 days, but usually 16 – 18 days. Infectious: Up to 6 days before swelling of the glands begins and up to 9 days after the onset of the swelling. **Exclusion:** Exclude from care for 9 days after onset of swelling.

Ringworm Incubation: 4 – 10 days. Infectious: If the condition persists. Exclusion: Until the day after treatment has commenced.

Roseola Incubation: Around 10 days. Infectious: A few days before and several days after the rash appears through saliva, nasal discharge, and other respiratory secretions. **Exclusion:** Exclusion is not necessary if the child is feeling well.

Rubella (German Measles) Incubation: 14 – 21 days. Infectious: Up to 7 days before and at least 4 days after the rash appears. **Exclusion:** At least 4 days after the rash appears and until the child feels well.

<u>Scabies (and other mites)</u> Incubation: Initial infestation, 2 – 6 weeks; further infestations within 1 - 4 days. Infectious: Until day after treatment has commenced. Exclusion: Until the day after treatment has commenced.

<u>Streptococcal Sore Throat Incubation:</u> 1 – 3 weeks if untreated, or 24 hours after antibiotic treatment commenced. Viral: While the organisms are being spread by coughing and sneezing incubation may last several days. Exclusion: Until 24 hours after antibiotic treatment (bacterial), and until feeling well.

<u>Thrush (Candida)</u> Incubation: 2 – 5 days in infants. Infectious: If white spots or flakes are present. Exclusion: Exclusion not necessary. Wash all mouthed toys in hot soapy water. Prevent sharing of dummies, cups, bottles or eating utensils.

Whooping Cough (Pertussis) Incubation: Commonly 9 – 10 days but can range between 6 and 20 days. Infectious: from the beginning of cold like symptoms for up to 3 weeks if untreated, less with antibiotic treatment Exclusion: for 21 days from onset (if untreated) or 5 full days if treated with the appropriate antibiotic.

Worms (Pin, Round, Hook, Tape and Hydatid) Incubation: Several weeks to years. Please refer to Staying Healthy in Childcare fact sheets. Infectious: Infection will continue until person is treated **Exclusion**: Not necessary if treatment has occurred.