

# **ILLNESS POLICY**

Quality Areas: NQS 2 - Children's Health and Safety

**Policy Owner: Safety** 

# Why this is important

## 1.0 Introduction and Purpose

We are committed to preventing the spread of illnesses through the implementation and monitoring of strategies including, effective handwashing, cleaning procedures, exclusion of unwell team members and children.

To ensure our environments are safe, clean, and hygienic, the Manager / Nominated Supervisor (NS) reserves the right to exclude a person displaying symptoms of being unwell or an illness from the centre to prevent the potential spread to other children and team members. The unwell / ill team member or child also needs time to rest, recover and if necessary, seek medical treatment for their illness.

Excluding ill or unwell children and team members is an effective way to limit the spread of illness. (Staying Healthy, NHMRC).

#### 2.0 Who does this policy apply to:

All Team Members, Children, Families, Students and Contractors

## 3.0 What is our Policy:

If children are unwell and displaying any of the following, they are not able to remain at the centre:

- Has a temperature over 37.5°C when using a contactless infrared thermometer or over 38°C using a digital thermometer and child appears unwell with other symptoms
- Has two or more episodes of diarrhoea and/or vomiting within the day/24-hour period
- Is unable/unwilling to actively participate in learning experiences
- Requires dedicated one-to-one care and attention
- Has an unexplained rash that impacts the health and wellbeing of themselves and others
- Has symptoms of any of the recognised infectious diseases

If a child becomes unwell during the day, the child's behaviour changes or symptoms are seen team members will respond by undertaking first aid and contacting the family. Families will be asked to collect their child within 1 hour (or as soon as practical) of the call or arrange for an authorised nominee to collect. If there is no one able to collect the child within this time, the child's condition will be monitored and if it worsens and it becomes an emergency, an ambulance will be called.

Team members should not attend if they are unwell and if they become unwell while at work will be provided with first aid and supported to be collected or to go home until they are recovered. If their conditions worsens and it becomes an emergency situation an ambulance will be called.

## 3.1 Administering one dose of Centre provided Paracetamol

In children, a temperature over 37.5°C when using a contactless infrared thermometer or over 38°C using a digital thermometer indicates an elevated temperature. An elevated temperature may be caused by an infection somewhere

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in the body. You should begin cooling methods and take the temperature again in fifteen minutes or sooner if other symptoms appear or the conditions worsens.

In the event of an emergency where the parent or emergency contact person is uncontactable, and the child's temperature reaches 38.50°C with a digital thermometer (38°C with a contactless infrared thermometer) or higher and after attempts to cool down the child fails, if the parent has signed the paracetamol permission in the Terms and Conditions of the child's enrolment form, the Nominated Supervisor can administer one dose of Paracetamol in the appropriate dose only. The Nominated Supervisor will check that permission has been signed in the terms and conditions prior to giving the one dose of Paracetamol.

If permission to administer Paracetamol was not given on the enrolment form, call the national health line (Healthdirect 1800 022 222) or your state health line for advice. You can follow the advice provided and administer Paracetamol if requested. Please record on the BeSafe record who you contacted and the advice that was provided.

#### 3.2 Signs of being unwell or illness

Symptoms indicating a suspected illness may include (but are not limited to):

- behaviour that is unusual for the individual child (for example, a child who is normally active who suddenly becomes lethargic or drowsy
- a temperature over 37.5°c when using a contactless infrared thermometer or over 38°c using a digital thermometer
- sudden discoloration of skin or red or purple rash that does not turn white when pressed. This may be meningococcal – an emergency
- difficulty in breathing or erratic breathing or coughing or wheezing or vomiting
- appearing sleepy at unusual time, difficult to rouse, confused, not alert & responsive
- irritable, fretful, easily agitated, crying and unable to be comforted
- listless, inactive, unusually quiet, not interested in normal play activities, wants to lie down or be held
- excess number of soiled nappies and or an unusual colour or odour of urine or faeces
- loose bowel motions
- reduced urine output particularly fewer wet nappies
- poor feeding, reduced appetite and drinks less than usual, an important sign in infants
- · discharge from eye or ear
- sensitivity to light
- persistent, prolonged or severe coughing
- skin with a rash, blisters, spots, crusty or weeping sores
- · continual scratching of skin or scalp
- poor circulation or colour changes of the lips/mouth or skin
- headaches
- persistent, prolonged, or severe coughing
- stiff neck or other muscular and joint pain
- continuous scratching of scalp or skin
- reluctance to use or protecting a part of the body eg hand, arm, leg
- pain

#### 3.3 Returning to the centre after being unwell or ill

The Manager or Nominated Supervisor has a duty of care to everyone at the centre and therefore has ultimate responsibility for deciding if a team member or child is well enough to be at and/or return to the centre. The Manager or Nominated Supervisor is guided by professional documents as a reference for their decision making including Staying Healthy in Child Care(5thEd.), State based Health Departments or advice from the Safety Team.

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Children/Team members returning to the centre after illness may return:

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- If they have not had an episode of vomiting/ diarrhoea for a minimum of 24 hours from their last episode eg If
  you had your last bout of vomiting at 1pm on Wednesday, you can only return to the centre after 1pm on
  Thursday (this extends to 48hrs when in gastro outbreak)
- If symptoms have resolved, and child/team member is now well
- If the child has not had Panadol/Nurofen in the previous 12 hours before arrival

If the centre is not able to determine if the symptoms may be related to an infectious disease, they can request the child or team members obtain a medical certificate stating that the symptoms (list them) are not related to an infectious disease and that the person can return to childcare as they are not infectious.

Young children are susceptible to the risk of infectious diseases. It is imperative that educators and children implement infection control measures to minimise any transfer or impact to anyone else's health and safety.

## 3.4 A space for an unwell child

Have prepared an appropriate space for children who become ill whilst at the centre and is waiting for collection to minimise the risk of the spreading any illness.

#### Selecting the Space

- Ensure that the space is comfortable for the child
- Make sure the space does not have any soft furniture or pillows that are too large to be machine washed and appropriately cleaned
- Select a well-ventilated space away from the other children
- Ensure the space includes handwashing or sanitising facilities nearby

## Preparing the Space

- Have a cot or bed/mattress and extra clean sheets available
- Ensure cot or bed/mattress is positioned for effective supervision
- Prepare a fully stocked hygiene station for the space which includes tissues, hand sanitiser, gloves and a small, lidded bin
- Ensure cleaning supplies are readily available nearby
- · Prepare a collection of play resources which can be easily cleaned and disinfected

#### Using the Space

- Maintain physical distance of 1.5 metres from others when using the space, where possible
- Ratios must still be maintained, and children in this space must be effectively supervised at all times
- When a child becomes ill, ask the parent or emergency contact to pick up the child as soon as possible. The expectation is this should be within 1 hour
- Tell the family that sick children are to be excluded in line with medical advice
- Team members who are not the Nominated Supervisor inform the Nominated Supervisor immediately.
   Remember it is important to make sure the unwell child feels safe, cared for and supported while they are waiting to be collected
- When a parent or authorised nominee arrives to pick up an unwell child, a team member should bring the child out to them
- If there are multiple unwell children in the area, seek support from another team member to bring the child to the parent whilst ensuring the other children are adequately supervised

#### 3.5 Reporting to Public Health and/or a Regulatory Authority

They safety team will determine if an illness or infectious disease requires reporting to an external party. The only illness managed by the centre and where the centre reports directly to public health is when there is a suspected gastro outbreak. Refer to the Infectious Diseases Policy for more information.

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Note: A suspected gastro outbreak is two or more cases (team members or children) who each have had two or more bouts of vomiting and/ or diarrhoea occurring within 48 hours.

#### 3.6 Hygiene and Cleaning

When caring for an ill child, remember the main ways to break the chain of infection:

- remind a child who is coughing or sneezing to cough or sneeze into their elbow
- if the child covers their mouth with their hands, ask them to wash their hands
- if team member wipes a child's nose, dispose of tissue in a plastic-lined lidded bin, then wash hands
- if team member touches a child who might be ill, ensure they wash their hands before doing other dasks
- clean the environment where the child was unwell

Undertake the twice daily clean during operating hours as described in Staying Healthy and undertake the cleaning requirements outlined in your food safety program.

#### 4.0 Responsibilities

## 4.1 The Approved Provider will:

- 1. Ensure that the premises are kept clean, hygienic and in good repair
- 2. Ensure that completed medication records are kept until the end of 3 years after the child's last attendance
- 3. Ensure the illness records are kept and stored securely until the child is 25 years old
- 4. Ensure that there is a minimum of one educator with a current approved first aid qualification (including CPR, emergency asthma and anaphylaxis training) on the premises at all times
- 5. Ensure that children's enrolment forms provide authorisation for appointed Responsible Persons to seek emergency medical treatment by a medical practitioner, hospital or ambulance service
- 6. Ensure that children's enrolment form includes provision for administering one initial does of paracetamol
- 7. Ensure that documents are reviewed and updated in line with any legislation or departmental advice changes

## 4.2 The Centre Manager / Nominated Supervisor (NS) will:

- 1. Call an ambulance immediately if the situation requires more than first aid or the persons condition is deteriorating
- 2. Ensure all new families know how to access this policy
- 3. Implement to required exclusion periods
- 4. Notify parents/emergency contacts immediately after an onset of an illness and continue to keep family updated of their condition
- 5. Notify other person/s as authorised on the child's enrolment form when the parent/ guardians are not contactable
- 6. Implement the actions as described above in section 3.1 Administering one dose of Centre provided Paracetamol
- 7. Consult with the Safety Team to determine whether an illness or medical emergency requires notification to families, the Public Health Unit, or a Regulatory Authority
- 8. Maintain all enrolment, health and medical records in a confidential manner
- 9. Be aware of individual children's medical conditions, allergies and immunisation status and use this knowledge when attending/responding to any illness
- 10. Ensure that an Illness form is completed and recorded on the Illness Register and any suspected /confirmed infectious disease is entered onto BeSafe
- 11. Ask family to sign completed Illness form and offer a copy for their records
- 12. Discuss centre's expectations about the child's exclusion and return and note this on Illness form to ensure this expectation is clearly outlined
- 13. Contact family, by phone, at the end of the day to check on child's wellbeing and continue contact with family until child returns

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- 14. Ensure that in their absence or otherwise, only an appointed Responsible Person who holds a current first aid certificate will administer medication with a second qualified educator to witness this
- 15. Review the cause of any illness and take appropriate actions to minimise the spread or the cause if possible
- 16. Ensure team members are following Guardian's hygiene, handwashing and cleaning procedures
- 17. Ensure team members follow the nappy change procedures

#### 4.3 Team Members will ensure that:

- Notify the Manager / Nominated Supervisor of any illness or potential medical emergency as soon as practical
- 2. Record details of illness on the Illness form as soon as is practicable but not later than 24 hours after the occurrence
- 3. Enter onto BeSafe and suspected infectious disease for children or team members
- 4. Seek further medical attention if required
- 5. Be aware of the signs and symptoms of illness and infectious diseases
- 6. Be aware of individual children's medical conditions, allergies and immunisation status and use this knowledge when attending/responding to any illness
- 7. Respond to children showing signs of being unwell and begin monitoring the symptoms of the child and record on the Illness form
- 8. Contact the child's authorised person to inform them of the signs of illness to request the collection of the child
- 9. Implement the actions as described above in section 3.1 Administering one dose of Centre provided Paracetamol
- 10. Complete the Illness register
- 11. Ensure an appointed Responsible Person will administer the medication to children, witnessed by a second qualified educator
- 12. Ensure medication is only be given by appointed Responsible Persons who have a current first aid certificate
- 13. Ensure effective handwashing, cleaning and hygiene practices are followed for both children and adults
- 14. Ensure a cleaning schedule of all equipment, resources and materials is maintained. When several cases are present in a short space of time, ensure the centre has additional cleaning strategies in place throughout the day

## 4.4 Families will ensure that:

- 1. Be informed of policies and procedures upon enrolment with regards to first aid and illness whilst at the centre, and exclusion practices, including immunisation status and illnesses at the centre
- 2. Collect their child from the centre within 1 hour (or soon as practical) of the call or arrange for an authorised nominee to collect and adhere to the recommended minimum exclusion periods
- 3. Inform the centre of their child's requirements, and provide all current and relevant paperwork to the centre, such as immunisation status,
- 4. If required ensure medication is on the centre's premises at all times their child is in attendance
- 5. Notify the centre of any changes to their child's health requirements
- 6. Be notified of any illness or possible symptoms, and provided with a copy of the Illness form

## 5.0 Definitions

**Centre Manager** (Nominated Supervisor) is the Team Member appointed into the Centre Manager (Nominated Supervisor) role with the alternative being the Responsible Person who is in charge.

**Children** are those children potentially enrolling or currently enrolled in Guardian's Early Learning Programs as distinct from those under 18yrs old who may be present at our facilities or events.

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Families also means parent or guardian

First Aider is a Team Member who has completed relevant First Aid training within 3 years plus annual CPR training

## 6.0 Tools and Resources

The most important documents I need are: Infectious Diseases Policy

infectious Diseases Folicy

Administration of Medication Procedure

Whereabouts of medication

Illness Form

Other supporting documents will include:

Medication Record

Nappy Change Procedure

Handwashing, Glove and Hygiene Station Procedure

Centre Cleaning Checklist
Centre Cleanliness Guidelines
Weekly Kitchen Cleaning Check
Cleaning Equipment Colour Codes

Cleaning Requirements from Staying Healthy

<u>Health and Hygiene</u> Guardian Way page <u>Infectious Diseases</u> Guardian Way page

#### 7.0 Additional Information

Act Section 165

NHMRC. Staying Healthy -Preventing Infectious Diseases in Early Childhood Education and Care Services 5th edition Safe Work Australia

Occupational Health and Safety Act 2004 Work Health and Safety Act

## 8.0 Source

Act Section 165	Offence to inadequately supervise children
Act Section 174	Offence to fail to notify certain information to Regulatory Authority
Act Section 167	Offence relating to protection of children from harm and hazards
Regulation 85	Incident, injury, trauma and illness policies and procedures
Regulation 86	Notification to parents of incident, injury, trauma and illness
Regulation 87	Incident, injury, trauma and illness record
Regulation 89	First aid kits
Regulation 95	Procedure for administration of medication
Regulation 97	Emergency and evacuation procedures
Regulation 103	Premises, furniture and equipment to be safe, clean and in good repair
Regulation 161	Authorisations to be kept in enrolment record
Regulation 168	Education and care service must have policies and procedures
Regulation 169	Additional policies and procedures – family day care service
Regulation 170	Policies and procedures to be followed
Regulation 171	Policies and procedures to be kept available
Regulation 172	Notification of change to policies or procedures
Regulation 177	Prescribed enrolment and other documents to be kept by approved provider
Regulation 183	Storage of records and other documents

Offence to inadequately supervise children



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