

## ILLNESS POLICY

Quality Areas: NQS 2 – Children’s Health and Safety

Policy Owner: Safety and Compliance

Why this is  
*important*

### 1.0 Introduction and Purpose

We are committed to keeping everyone healthy by preventing the spread of illnesses. We follow strategies like regular and effective handwashing, thorough cleaning procedures, and excluding unwell children and team members when necessary.

To maintain a safe and hygienic environment, anyone showing signs of illness should not be at the centre. This helps protect others from getting sick and allows the unwell person time to rest, recover, and seek medical treatment if needed. Excluding those who are unwell is a proven way to reduce the spread of illness and keep our community safe.

This policy relates to managing short term or acute illnesses. For information about long term or diagnosed medical condition management and medications refer to the *Medical Conditions Policy* and *Medical Condition Procedure*.

### 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 symptoms, their parents should be called for collection, these include:

- Has a temperature over 38°C using a digital thermometer or over 37.5°C when using a contactless infrared thermometer (due to the accuracy of the 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- Is withdrawn and or unable/unwilling to actively participate in learning experiences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 any symptoms of a recognised infectious illness

Where a child arrives to the centre and is ill in accordance with the symptoms of 3.4 of this policy, the Responsible Person or Centre Manager should be notified. A discussion should be undertaken with the parent outlining the symptoms that they are observing and that the child should not be in care. A parent should update team members if their child has been unwell overnight or the preceding days since care so that team members can actively monitor the child throughout the day.

If a child becomes unwell during the day, an educator will respond by administering 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 (**‘approved person’**) to collect. During this time the child’s condition will be monitored and if it worsens and it becomes an emergency, an ambulance will be called. Children should never be driven in a team members private vehicle to gain medical attention.

An *Illness Form* should be completed for all children’s illnesses. If the child receives urgent medical attention, is transported in an Ambulance or is diagnosed with a reportable Illness as outlined in the *Notification Reporting Table* then a Be Safe form must be completed.

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. The Centre Manager or Responsible Person should be immediately notified so that they can be removed from the learning space and working with children.

If their conditions worsens and it becomes an emergency an ambulance will be called. A Be Safe Report must be completed for all team members that become unwell at work.

### 3.1 High temperatures and First-aid

A fever is defined as a temperature that is 38 degrees or higher using a digital thermometer or over 37.5°C when using a contactless infrared thermometer (due to the accuracy of the thermometer). An elevated temperature may be caused by an infection somewhere in the body. Where a child registers a high temperature cooling methods should be administered immediately and continue to record the temperature again on the *Illness Form* in ten to fifteen minutes or sooner if other symptoms appear. A family should immediately be notified if their child has a high temperature and are also showing any signs of being unwell or ill.

First aid should be administered that includes

- Dress them in light clothing to keep them cool.
- Cover them with a sheet if they are shivering.
- Keep the room at a comfortable temperature approximately 20 to 23 degrees by adjusting the heating or opening a window.
- Give them plenty of cool, clear fluids to drink. Give extra feeds, formula or cool boiled water if your baby is under 6 months.
- Wipe their head with a warm sponge or facecloth.

If the child has a *Medical Management Plan* where a symptom is a high temperature the medical management plan should be immediately followed.

### 3.2 Administration of Centre Paracetamol

Where a child has a high temperature, first-aid will be administered as outlined above. In the event the child's temperature remains high after the administration of first aid and where the parent or emergency contact person is uncontactable, the Nominated Supervisor or Responsible Person will seek medical advice by calling an ambulance or state-based Health Direct Service as listed on the *Emergency Phone Number* poster.

Where instructed by the ambulance officer or a member of the state-based Health Direct Service, the centre will administer one dose of Paracetamol in accordance with the instructions. This directive will be confirmed by two team members and documented on the *Administration of Medication Form*.

### 3.3 Administration of Medication at the Centre

From time-to-time children may require medication whilst at the centre, this can be due to an infection, illness or long-term condition.

Prescribed medication will only be administered in accordance with the medication label. The medication must be in its original container, be not past its use-by-date, detail specific administration requirements and the child's full name (first and last names). Educators are only permitted to administer topical (applying medication to the skin) or oral medications (including spacers). Other medications can only be administered as part of the *Medical Conditions Policy* and educators must be sufficiently trained to do so. For more information refer to the *Medical Conditions Policy and Medical Conditions Procedure*.

Over the counter medication can be administered but it must be in its original container with the directions of use intact and visible. It will only be administered in accordance with the manufacturer's instructions.

All medications must be administered in accordance with the *Administration of Medication Procedure* excluding nappy change creams. Medications must be administered by a trained first-aid educator who is a Responsible Person and knows the child and is also verified by one other person. If the child has not had the medication previously then they must have had one dose administered at least 2 hours before attending the centre to ensure that they do not have any adverse reactions. Children should not be in attendance during this two-hour period without direct parent/guardian oversight/ approved person. Parents must disclose if their child has had any medication in the past 12 hours before attending the centre including Panadol or Nurofen.

The *Medication Record* must be completed for each medication for each day. Medication will be stored in accordance with manufacturer's instructions, and this will be inaccessible to children and accessible to the team members. All team members should know the storage location of medications. The *Medical Conditions Policy* and *Medical Conditions Procedure* provides specific information about the storage of medications related to medical conditions.

For Team Members who suffer from an acute illness and requires medication such as anti-biotics, (Panadol etc) must always store this medication inaccessible to children. Administration of this medication should be away from the children.

### 3.4 Signs of being unwell or illness

A child or Team Member may be unwell if they show any of the following symptoms:

- Unusual behaviour, such as sudden lethargy, drowsiness, or confusion
- Fever
- Skin discoloration or rashes, especially red or purple ones that don't fade when pressed (may indicate meningococcal disease – seek emergency help)
- Breathing difficulties, wheezing, persistent coughing, or vomiting
- Sleepiness at unusual times, being difficult to wake, or showing a lack of alertness
- Irritability, excessive crying, or inability to be comforted
- Unusual quietness, lack of interest in play, or wanting to lie down
- Increased or unusual bowel movements, changes in urine or stool colour/odour, or fewer wet nappies
- Poor appetite, reduced feeding, or drinking less than usual, especially in infants
- Discharge from the eyes or ears, or sensitivity to light
- Persistent coughing, rash, blisters, or sores
- Changes in skin colour, lips, or poor circulation
- Stiff neck, headaches, joint or muscle pain
- Continuous scratching or reluctance to use certain body parts (e.g. arms or legs)
- Signs of pain or discomfort
- Signs of a reaction after administration of medication such as a rash, laboured breathing, vomiting and swelling

If a child, Team Member or visitor exhibits any of these symptoms, they may need to rest, recover, or seek medical attention.

### 3.5 Returning to the centre after being ill

The Centre Manager or Nominated Supervisor has a duty of care to ensure the health and safety of everyone at the centre. They are responsible for deciding if a team member or child is well enough to attend or return to the centre. This decision is guided by professional resources, including *Staying Healthy in Child Care* (6th Ed.), state health department guidelines and medical advice.

Children or team members may return to the centre when:

- They have been free of vomiting or diarrhea for at least 24 hours since the last episode (48 hours during a gastro outbreak) as outlined in the *Infectious Disease Policy*.

- Symptoms have resolved, and they are well again
- The child has not had Panadol or Nurofen in the six hours before arrival unless used for pain relief after immunization within the last 48 hours

If symptoms may be related to an infectious disease or illness, the centre may request a medical certificate confirming the symptoms are not contagious and that the person is fit to return.

### 3.6 A space for an unwell child

Where a child becomes ill at the centre a designated space will be prepared for children, ensuring that they are comfortable while minimizing the risk of spreading illness.

Selecting the Space:

- Choose a well-ventilated area away from other children still within the learning space
- Ensure it is comfortable and try and avoid furniture or surfaces that are difficult to clean
- Ensure that handwashing or sanitising facilities nearby

Preparing the Space:

- Provide a cot or mattress with clean sheets, positioned for effective supervision
- Set up a hygiene station with tissues, gloves, hand sanitiser, and a lidded bin
- Keep cleaning supplies and easily disinfected play items nearby

Using the Space:

- Every attempt will be made to maintain physical distancing of 1.5 metres where possible whilst always supervising the child
- Ask the parent or emergency contact to collect the child, preferably within one hour
- Inform families that unwell children must be excluded as per medical advice
- Ensure the child feels safe and supported while waiting for collection. When the parent arrives, bring the child to them. The person assigned to the child should be a regular educator of the child that they know
- If multiple children are unwell, ensure all children are adequately supervised while assisting with pickups
- Clean the space thoroughly after use and before other children use this space/equipment

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

The centre will refer to the *Notification Reporting Table* and or *Staying Healthy in Child Care* to understand whether an illness or infectious disease requires reporting to the Public Health Unit. Centres will report directly to public health unless the illness or infectious disease has the real potential to cause permanent disability or death such as meningococcal, HIV or during a pandemic.

In these cases, the centre will be supported, and reporting will be defined as part of critical incident management. For further information about serious infectious diseases and reporting refer to the *Infectious Diseases Policy*. For further information about pandemic related reporting and critical incidents refer to the *Incident Management Policy*.

The Centre will enter the illness on Be Safe and write a *Third-Party Contact Log* once the illness has been reported and attach this information to the Be Safe Form.

All reportable illnesses to the Public Health Unit must be classified as Moderate or above. Refer to the *Infectious Diseases Policy* for more information. All reportable, excludable and vaccination illnesses are recorded on the *Illness Register*. Where the centre has a confirmed outbreak families must be alerted of the outbreak. For further details refer to the *Infectious Disease Policy*.

**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.

### 3.8 Hygiene and Cleaning

When caring for an ill child or adult, remember the main ways to break the chain of infection are by following health and hygiene procedures consistently such as nappy changing, handwashing and cleaning up spills. For more detailed information review *Staying Healthy in Child Care*.

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 document retention and storage is consistent with legal frameworks and that these requirements are documented in the *Record Retention and Management Policy*
2. 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
3. Ensure that the enrolment form template documents the authorisation for appointed Responsible Persons to seek emergency medical treatment by a medical practitioner, hospital or ambulance service

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

1. Ensure that the premises are kept clean, hygienic and in good repair
2. Call an ambulance immediately as part of the first-aid plan as required in accordance with the *Illness Policy*
3. Implement any required exclusion periods as outlined by the Medical Practitioner and or *Staying Healthy in Child Care*
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. Ensure that a team member with current first-aid qualifications is rostered on at all times that the centre is in operation in accordance with the *First-aid Policy*
7. Implement 3.1 *High temperatures and First-aid* as required and ensure that where parents or emergency contacts cannot be contacted that health / medical advice is sought
8. Maintain current enrolment, health and medical records
9. Be aware of individual children's medical conditions, allergies and immunisation status and consider this information when attending/responding to any illness
10. Ensure that the *Illness Register* is used to track reportable, excludable and vaccinatable illnesses as such as gastro, hand foot and mouth, measles etc
11. Complete an *Illness Form* for all illnesses and ask family to sign completed *Illness form* on departure
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
14. Review the cause of any illness and take appropriate actions to minimise the spread or the cause if possible
15. Ensure team members are following hygiene, handwashing and cleaning procedures as well as the nappy change procedures
16. Talk with families where they are notified that a child arrives at the centre with symptoms and is ill. An assessment will be made if they are well enough to attend the centre on that day

### 4.3 Team Members will:

1. 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 on the same day, but not later than 24 hours after the occurrence
3. Enter onto BeSafe any suspected infectious disease for children or team members
4. Seek further medical attention if required
5. Be aware and respond to the signs and symptoms of illness and infectious diseases and document these symptoms on the *Illness Form*
6. Be aware of individual children's medical conditions, allergies and immunisation status and use this knowledge when attending/responding to any illness
7. Contact the child's authorised person to inform them of the signs of illness to request the collection of the child
8. Maintain a current *Illness Register* as directed by the Centre Manager, in the case of reportable, excludable and vaccinatable illnesses
9. Ensure that only a First aid qualified and or Responsible Person who knows the child administers medication to children, witnessed by a second educator
10. Ensure effective handwashing, cleaning and hygiene practices are followed for both children and adults
11. Ensure a cleaning schedule of all equipment, resources and materials is maintained. When a reportable, excludable or contagious illness, implement cleaning practices as directed

#### 4.4 Families will:

1. Understand first aid and illness procedures at the centre, including exclusion practices, and provide the centre with up-to date information related to your child's care
2. Make every endeavour to collect your child from the centre within 1 hour (or soon as practical) of the call or arrange where a child is ill and unable to be at the centre
3. Ensure that the centre is provided with up-to-date and current information about their child, including up-to-date contact details, immunisation status and notify the centre of any changes to their child's health requirements
4. Ensure that prescribed medication is on the centre's premises at all times that the child is in attendance
5. Parents must disclose if their child has had any medication in the past 12 hours before attending the centre including Panadol or Nurofen
6. Not bring their child to the centre if they have administered any medication such as Panadol or Nurofen in the previous six hours, where this has been administered due to a specific illness
7. Families must notify the centre, on arrival if their child is unwell or ill including if their child has been unwell overnight or the preceding days since care
8. Exclude their child for 2 hours post administering a new medication to ensure that they do not experience any adverse reactions from the medication

## 5.0 Definitions

**First Aid Trained** is a Team Member who has completed relevant First Aid training within 3 years plus annual CPR training and that their qualifications are recognized by ACECQA

**Illness Outbreak** is defined as the occurrence of multiple cases of the same infectious disease within a short period, beyond what is typically expected. This may include:

- Two or more children or staff with the same symptoms (e.g., vomiting, diarrhea, fever, rash) within 48 hours.
- A confirmed case of a contagious disease (e.g., measles, whooping cough, gastroenteritis) with potential exposure to others.
- An increase in absences due to similar symptoms among children or staff.

## 6.0 Tools and Resources

The most important documents I need are:

Other supporting documents will include:

<p>Infectious Diseases Policy</p> <p>Steps to managing high temperatures Information Sheet</p> <p>Administration of Medication Procedure</p> <p>Whereabouts of medication</p> <p><a href="#">Illness Form</a> – capturing details on an unwell child</p> <p><a href="#">Illness Register</a> is the centre register</p> <p><a href="#">Illness</a> Guardian Way page</p>	<p>Medication Record</p> <p>Nappy Change Procedure</p> <p>Handwashing, Glove and Hygiene Station Procedure</p> <p>Centre Cleaning Checklist</p> <p>Centre Cleanliness Guidelines</p> <p><a href="#">Weekly Kitchen Cleaning Check</a></p> <p><a href="#">Cleaning Equipment Colour Codes</a></p> <p><a href="#">Cleaning Requirements from Staying Healthy</a></p> <p><a href="#">Health and Hygiene</a> Guardian Way page</p> <p><a href="#">Infectious Diseases</a> Guardian Way page</p>
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## 7.0 Additional Information

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 174	Offence to fail to notify certain information to Regulatory Authority
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 95	Procedure for administration of medication
Regulation 103	Premises, furniture and equipment to be safe, clean and in good repair
Regulation 161	Authorisations to be kept in enrolment record
Regulation 170	Policies and procedures to be followed
Regulation 183	Storage of records and other documents

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