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## Introduction

### Purpose

Immunisation is a reliable way to prevent some infections, and also protects other people who may not yet be immunised or who are unable to be immunised for medical reasons. In NSW, all children wishing to attend early education and care must be fully vaccinated (in accordance with the National Immunisation Program Schedule), or have an approved medical contraindication, or be on an approved catch-up schedule. There are a number of immunisations also recommended for educators who, in the course of their work, may be exposed to diseases that are preventable by vaccination.

Children brought to care with early signs or symptoms of illness or infection, or who suddenly become ill while in care, may be potentially infectious to others, or the illness may be potentially life threatening for the child.

Exclusion of children with contagious illness (and in some cases, family or household contacts of the infectious child or adult), significantly reduces the risk of the spread of disease to other healthy children, educators, staff & families. The length of time a disease remains contagious to children and adults forms the basis of exclusion periods recommended by the National Health and Medical Research Council.

Though an illness may not fit within the Department of Public Health exclusion criteria, in some circumstances, a child may be too ill to participate in normal care activities or an educator or staff member is too ill to work. Children, educators, or staff members need to stay home for treatment and recovery in these circumstances.

A number of diseases are notifiable to the NSW Public Health Unit. These diseases are notifiable so that public health staff can investigate and prevent further cases of rare and severe diseases, identify outbreaks and help implement control measures.

### Scope

This procedure outlines measures for assessing and responding to illness, including applying exclusion periods, and helping minimise the incidence and control further spread of infectious illness.

Practices for maintaining clean and hygienic environments and practices in the Educator FDC environment are covered in the 'Hygiene and infection control' procedure.

Practices for what to do in an emergency (including medical emergency) are covered in the 'Emergency, incident, injury, trauma and illness' Procedure.

### Procedures

Item	Practice	Resources
Vaccination	<p><b>Approved Service will:</b></p> <ol style="list-style-type: none"> <li>1. provide information to educators about recommended vaccinations to help protect against occupational risk of infectious diseases</li> <li>2. encourage annual influenza vaccination for educators</li> <li>3. circulate information for families on vaccinations for children that may be recommended by relevant health authorities from time to time</li> </ol>	

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	<p><b>Educators will:</b></p> <p>4. discuss recommended vaccinations with their medical practitioner prior to registering as an educator</p>	
Responding to illness	<p><b>Educators will:</b></p> <p>5. inform families of the need to notify the educator if a child is displaying symptoms of illness, or has sought medical attention or been hospitalised, before bringing them in to care, so that they may assess the appropriateness of the child attending</p> <p>6. monitor, share and exchange information about children's health and wellbeing with families each day</p> <p>7. at their discretion, seek diagnosis/explanation from the child's medical practitioner if the child has allergies or seasonal condition that may have similar symptoms to an infectious illness</p> <p>8. consider that a child may be ill or developing an illness if the child:</p> <ul style="list-style-type: none"> <li>a) is irritable, agitated, fretful, crying, not able to be comforted, behaving unusually</li> <li>b) is listless, quiet, inactive, has no interest in usual play activities</li> <li>c) does not want to eat or drink</li> <li>d) has an excessive number of wet or soiled nappies / toileting</li> <li>e) is not having the usual number of wet nappies / toiletings</li> <li>f) has an unusual colour or smell to urine or faeces</li> <li>g) has <i>changes</i> in usual symptoms, if the child has allergies or seasonal condition that have similar symptoms to an infectious illness</li> </ul> <p>9. consider that a child may be developing a serious or infectious illness, and refer them for medical advice, if they are suffering from:</p> <ul style="list-style-type: none"> <li>a) Diarrhoea (2 or more unexplained loose bowel motions)</li> <li>b) Vomiting</li> <li>c) Fever (temperature over 38C – high fever 38.5C or above)</li> <li>d) Conjunctivitis</li> <li>e) Mouth ulcers (not yet treated)</li> <li>f) Unusual spots or rashes, especially if purple or haemorrhaging or blistering</li> <li>g) Severe persistent or prolonged coughing</li> <li>h) Headache</li> <li>i) Stiffness of the neck</li> <li>j) Aversion to light</li> <li>k) Severe pain anywhere (including toothaches)</li> <li>l) Swelling of the lips, mouth, tongue, throat, neck, or airways</li> <li>m) Unexplained hives</li> <li>n) Wheezing or any difficulty breathing (other than a child with a recognised diagnosis of asthma)</li> <li>o) Drowsiness or any unusual state of consciousness or behaviour</li> <li>p) Convulsion or seizure</li> </ul> <p>10. maintain strict hygiene practices at all times and take reasonable steps to prevent the spread of infectious disease if there is an occurrence of an infectious disease at their premises or venue</p>	

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	<p>(Regulation 88)</p> <ol style="list-style-type: none"> <li>11. separate children who may be ill as far as practicable to maintain the dignity of the child and minimise risk of transmission, while maintaining adequate supervision, until they can be collected</li> <li>12. administer any medication in accordance with LMFDC procedure</li> </ol> <p><b>Parents will:</b></p> <ol style="list-style-type: none"> <li>13. inform their educator if their child is displaying signs or symptoms of illness, or has sought medical attention or been hospitalised, before bringing them in to care</li> <li>14. provide details, if requested, from the child's medical practitioner if the child has allergies of seasonal conditions that may have similar symptoms to an infectious illness.</li> </ol>	
Applying exclusion	<p><b>Approved Service will:</b></p> <ol style="list-style-type: none"> <li>15. request a clearance from the public health unit for children who have had diphtheria, hepatitis A, polio, tuberculosis, typhoid or paratyphoid, prior to allowing them to return to care.</li> <li>16. assist if possible to arrange alternate care for a child if they are otherwise well but; <ol style="list-style-type: none"> <li>a) require treatment that their educator is unable, unwilling or untrained to provide, and</li> <li>b) the parent requires it, and</li> <li>c) if suitable vacancy exists with an alternate educator</li> </ol> </li> <li>17. consult with the public health unit in any difficult situations relating to infectious disease.</li> </ol> <p><b>Educators will:</b></p> <ol style="list-style-type: none"> <li>18. not provide education and care if <ol style="list-style-type: none"> <li>a) they have a diagnosed contagious illness, for the exclusion period recommended by the NHMRC or other relevant health authority</li> <li>b) they are required to be excluded as a contact of a person with a contagious disease under NHMRC recommended exclusion periods or other relevant health authority</li> <li>c) they have symptoms of a contagious illness</li> <li>d) they are too ill to interact with children and provide education and care</li> <li>e) a household member is ill and requires the educator attention and care that will compromise the educator ability to care for and supervise children in care</li> <li>f) they have commenced a course of medication within the past 24 hours prescribed by a Doctor to treat a contagious illness</li> <li>g) directed/mandated by a relevant health authority (eg, in the incidence of a pandemic)</li> </ol> </li> <li>19. only provide an education and care service when a household member is unwell on a risk-assessed basis according (but not necessarily limited) to:</li> </ol>	<p><a href="#">NHMRC recommended minimum exclusion periods poster</a> – go to downloads, Staying Health in Child Care</p>

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	<ul style="list-style-type: none"> <li>a) the ability to completely isolate the FDC areas, facilities and equipment from the remainder of the residence</li> <li>b) the ability of the unwell person to manage their own care needs</li> <li>c) the ability of the unwell person to implement effective hygiene practices</li> <li>d) the ability to abide by any measures advised by a relevant health or other authority</li> <li>e) any vulnerabilities of others attending the service</li> </ul> <p>20. not charge a parent fees if the parent refuses care due to feeling the educator is too ill to provide care</p> <p>21. advise families of circumstances in which they may exclude a child from care</p> <p>22. at their discretion, not allow a child (and in some instances the child's siblings) to attend care if;</p> <ul style="list-style-type: none"> <li>a) The symptoms of illness suggest a serious or contagious disease may be present</li> <li>b) The illness is not easily identified and they request the illness be diagnosed by a Doctor</li> <li>c) The child has commenced a course of medication within the past 24 hours, prescribed by a registered medical practitioner to treat a contagious illness,</li> <li>d) The child requires treatment that the educator is unable, unwilling or untrained to provide (eg, invasive procedures requiring specialised training or equipment)</li> <li>e) The child is too ill to participate in normal care activities, or is unduly distressed by the illness</li> <li>f) The child will require extra care, supervision or facilities that will compromise the educator's ability to care for and supervise other children in care</li> </ul> <p>23. exclude children with a diagnosed infectious illness (and their contacts if applicable) (<i>Regulation 85, 88</i>)</p> <ul style="list-style-type: none"> <li>a) for the minimum exclusion period recommended by the National Health and Medical Research Council (NHMRC), and</li> <li>b) until the child has recovered, and is well enough to participate in normal care activities</li> </ul> <p>24. at their discretion seek written clearance from a registered medical practitioner (other than the child's parent) prior to allowing a child to attend care if</p> <ul style="list-style-type: none"> <li>a) a child is displaying symptoms of a possibly infectious illness, to confirm the child is not contagious and able to attend care</li> <li>b) the educator is concerned the child has not recovered enough from illness to return to care and participate in normal activities</li> </ul>	<p><a href="#">NHMRC exclusion periods explained - for families</a> – go to downloads, Staying Healthy in Child Care</p>
Additional protective measure in the event of pandemic	<p><b>Approved Service will:</b></p> <p>25. Provide information from recognised authorities in regard to any practices recommended in the event of specific pandemic or outbreak of infectious illness, including but not necessarily limited to:</p> <ul style="list-style-type: none"> <li>a) Social distancing</li> </ul>	

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or outbreak of infectious disease	<ul style="list-style-type: none"> <li>b) Wearing masks</li> <li>c) Particular hygiene protocols</li> <li>d) Ventilation</li> <li>e) Isolation and exclusion</li> <li>f) Visitation/check-in registers</li> <li>g) Vaccination</li> <li>h) Safety risk assessment and plans</li> </ul> <p><b>Educators will:</b></p> <p>26. Follow any advice provided by the approved service in relation to pandemic or outbreak of infectious disease</p>	
notifications	<p><b>Approved Service will:</b></p> <p>27. Notify the Regulatory Authority within 24 hours of becoming aware of any serious illness of a child while a child is attending FDC, for which the child attended, or ought reasonably to have attended, a hospital (<i>Law 174.2, Regulation 12, Regulation 175, 176</i>)</p> <p>28. Notify the Public Health Unit (PHU) as soon as possible after becoming aware that a child enrolled at the service has one of the following vaccine-preventable diseases, including:</p> <ul style="list-style-type: none"> <li>- Diphtheria</li> <li>- Mumps</li> <li>- Poliomyelitis</li> <li>- Hib – Haemophilus Influenzae type b</li> <li>- Meningococcal disease</li> <li>- Rubella (German measles)</li> <li>- Measles</li> <li>- Pertussis (Whooping cough)</li> <li>- Tetanus</li> </ul> <p>or is reasonably suspected to have come in to contact with a person who has one of these diseases and has no evidence of immunisation lodged to show that the child is immunised against, or acquired immunity from infection from, that disease</p> <p>29. Consult with the Public Health Unit, and notify the Regulatory Authority within 7 days, of suspecting an infectious disease outbreak (illness in 2 or more people within 2 days) may be affecting an educator FDC service (<i>Regulation 175, 176</i>)</p> <ul style="list-style-type: none"> <li>- food-borne illness, diarrhoea or gastroenteritis in 2 or more people within 2 days</li> <li>- respiratory illness</li> <li>- any other areas of infectious illness concern</li> </ul> <p>30. Seek advice from the Public Health Unit, if applicable, on</p> <ul style="list-style-type: none"> <li>a) The consequences of an infection to children, parents and those working in the education and care service</li> <li>b) Particular measures to control further spread of infection</li> </ul> <p><b>Educators will:</b></p> <p>31. Notify the parent if their child is involved in any illness while being</p>	<p><a href="#">National Quality Agenda IT System</a> – or call NSW Regulatory Authority 1800 619 113</p> <p>Public health unit 1300 066 055</p> <p><a href="#">Vaccine preventable disease notification form</a> – NSW Health</p> <p><a href="#">webpage on disease notification</a> – NSW Health</p>

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	<p>cared for, as soon as practicable and within 24 hours (<i>Regulation 86</i>)</p> <p>32. complete an incident/illness record with the details of any child becoming ill while attending care (<i>Regulation 87</i>), including documenting</p> <ul style="list-style-type: none"> <li>a) any action taken, including first aid and request for the child to be collected from care</li> <li>b) any decision taken regarding excluding a child from care</li> <li>c) advice given to the parent about the length of the exclusion period</li> <li>d) any other action, including requirements for returning to care</li> </ul> <p>33. Notify the Coordination Unit as soon as practicable if a child becomes unwell with a serious illness for which the child attended, or ought reasonably to have attended, a hospital (<i>Law 174A, Regulations 12, 175</i>)</p> <p>34. Notify families of any incidence of infectious disease/illness occurring at their premises or venue as soon as practicable, maintaining the confidentiality of the unwell person/s (<i>Regulation 88</i>)</p> <p>35. Display a notice of an occurrence of an infectious disease at the service, so it is visible from the entrance to the service or venue (<i>Law 172, Regulation 173</i>)</p> <p>36. Notify the Coordination Unit and provide details of any known or suspected cases of infectious disease of persons normally resident in the FDC educator premises (<i>Regulation 88</i>)</p> <p>37. Ensure all persons residing in the home implement all infectious disease procedures (<i>Regulation 170</i>)</p>	
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## Review and evaluation

Recommendations of the National Health and Medical Research Council (NHMRC - Staying Healthy in Child Care), NSW Health Public Health, and source documents have been referenced in developing this Procedure. Feedback and input from staff, educator and parent stakeholders is considered.

FDC staff evaluate implementation of this procedure when discussing situations and advising educators in regard to illness in the FDC setting, and reviewing submitted Illness/incident records.

This Procedure will be reviewed at least every 4 years, and when there are changes in regulatory requirements or recommended practices.



## WHS Management System Information

### Record Keeping Requirements

Records associated with, and generated in compliance with this document include:-

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All records will be managed in accordance with **WHS Module 10 - Records**.

### Training Requirements

Specific training required to carry out the requirements of this document includes:-

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Training requirements will be managed in accordance with **WHS Module 12 – Training**.

### Auditing Requirements

Auditing of this process will be managed in accordance with **WHS Module 11 – Auditing**.

### Corrective Actions

Corrective actions are to be managed in accordance with **WHS Module 09 – Corrective Actions** whenever it is identified that the requirements of this document and its references are not being met.

### Review

This document will be reviewed in accordance with **WHS Module 04 – Document Control** and whenever there is a relevant change to applicable legislation, industry standards, Codes of Practice, the WHS Management System, or the process.

### Responsibilities, Authorities & Accountabilities

Responsibility, authority, and accountabilities for all positions within Council are outlined in **WHS Module 01 – WHS Responsibilities** and in the **WHS Responsibilities, Authorities and Accountabilities (RAA) Table** associated with **WHS Module 01**. The RAA table includes responsibility, authority, and accountabilities for employees, managers, supervisors, contractors, visitors, and persons with specialist roles within the organisation.

In addition to **WHS Module 01 – WHS Responsibilities**, the following positions have responsibilities, authorities and accountabilities associated with this document:

Position	Responsibilities, Authorities & Accountabilities



## Controlled Document Information

### Authorisation Details

<b>Folder No:</b>	F2004/12276	<b>TRIM Record No:</b>	D10915956
<b>Audience:</b>	Departmental - Family Day Care Staff Educators and Stakeholders		
<b>Department:</b>	Community Partnerships	<b>Officer:</b>	Service Manager Family Day Care - Kim Hartmann
<b>Key focus area(s):</b>	Family Day Care		
<b>Review Timeframe:</b> Max < 4 years	4 years	<b>Next Scheduled Review Date:</b>	December 2026
<b>Authorisation:</b>	Manager Community Partnerships - Andrew Bryant - 19 December 2022		
<b>Authorisation Date:</b>	19 December 2022		

### Related Document Information, Standards & References

<b>Related Legislation:</b>	Public Health Act 1991 – Public Health Act 2010 Public Health (Amendment) Act (NSW) 1992 Food Act (NSW) 2001 – Food amendment Act 2010 Work Health & Safety Act 2011 No 10 The National Quality Framework	
<b>Related Policies:</b>		
<b>Related Procedures, Guidelines, Forms, WHS Modules/PCD's, Risk Assessments, Work Method Statements:</b>	Administering Medication Procedure Hygiene and Infection Control	
<b>Standards, COP's &amp; Other References</b>	National Health and Medical Research Council 2010, <i>Australian guidelines for the prevention and control of infection in healthcare</i> NHMRC <a href="http://www.nhmrc.gov.au/publications">www.nhmrc.gov.au/publications</a> 5 <sup>th</sup> Edition Staying Healthy Preventing infectious diseases in early education and care services	

### Definitions

Term / Abbreviation	Definition
<b>Nominated Supervisor</b>	Nominated Supervisor of Lake Macquarie Family Day Care, responsible (along with the Approved Provider) for ensuring the service is following the Law and the Regulations, Certified Supervisor – a person with a supervisor certificate placed in day to day charge of an education and care service.
<b>Educator</b>	(a) a person actually involved in educating, minding or caring for children at his or her residence or venue and whose name appears on a current Lake Macquarie Family Day Care Register of Educators (a primary educator) ; and  (b) a person whose name appears on a current Lake Macquarie Family Day Care Register of Educators and who is engaged as a relief educator to educate, mind or

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	care for children in the residence or venue of a primary educator  (c) a person whose name appears on a current Lake Macquarie Family Day Care Register of Educators and who is engaged as an educator assistant to educate, mind or care for children in the residence or venue of a primary educator for no more than 4 hours
<b>Family or household contacts</b>	a child or adult living, or being cared for in a family or domestic relationship with the person who has contracted an infectious or contagious illness
<b>Parent</b>	The parent of a child registered for care with Lake Macquarie Family Day Care and includes:  (a) guardian of the child, and/or  (b) a person who has the custody of the child
<b>Regulatory requirement</b>	State and Federal government regulations that are relevant to the provision of Family Day Care services in NSW
<b>Staff</b>	an employee or employees of Lake Macquarie City Council for service within Lake Macquarie Family Day Care
<b>Infectious/Contagious disease</b>	A disease that is caused by an infectious agent or that can be passed on (transmitted) by an infectious agent. It may affect humans and/or animals. A disease that can be passed from one person to another.
<b>The National Quality Framework</b>	Includes:  <ul style="list-style-type: none"> <li>a national legislative framework that consists of the Education and Care Services National Law Act 2010 and Education and Care Services National Regulations 2011</li> <li>a National Quality Standard</li> <li>an assessment and rating system</li> <li>a Regulatory Authority in each State and Territory who will have primary responsibility for the approval, monitoring and quality assessment of services in their jurisdiction in accordance with the national legislative framework and in relation to the National Quality Standard.</li> <li>The Australian Children's Education and Care Quality Authority (ACECQA)</li> </ul>
<b>Work Health and Safety</b>	Includes:  Work Health and Safety Act 2011 No 10 Work Health & Safety Regulations LMCC Work Health and Safety Information

### Consultation (update for each version created)

<b>Key Departments, Teams, Positions, Meetings:</b>	Family Day Care staff, educators and stakeholders
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### Version History

Version No	Date Changed	Modified By	Details and Comments
2	13/3/2006	J. Wade	Updated reference to Children's Services Regulations 2004, included reference to relief educator in definitions
3	2/1/2009	J. Wade	Update references, amend list of notifiable diseases by child care facilities
4	29/09/2010	J Morgan	Update references, Update Carer to Educator in accordance with Early Years Learning Framework recommendations, updated definitions to include Infectious/Contagious disease.

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5	21/10/2011	J Morgan	Update reference, Children's Services Regulations 2004, to Children's Services Regulations 2004 and Amendment 2010
6	1/12/2011	S. Vickers	Update reference, childcare to education and care, Occupational Health & Safety to Work Health and Safety, Children's Services Regulations 2004 and Amendment 2010 to The National Quality Framework, add definition of The National Quality Framework, updated definition of Authorised Supervisor
7	2/08/2013	J Morgan	Update references to include National Health and Medical Research Council 2010, <i>Australian guidelines for the prevention and control of infection in healthcare</i> Include the Public Health Unit 1300 contact number and details on accessing information regarding exclusion periods Updated to 5 <sup>th</sup> Edition Staying Healthy
8	9/06/2015	J Morgan	Minor grammatical changes only
9	10/11/2018	J Morgan	Minor change to standards and references
10	07/06/2022	K Hartmann	Redefined Scope. Reformatted to consolidate information in to key action areas. Included hyperlinks to source/resource material to support implementation. Added: <ul style="list-style-type: none"> <li>- information to support assessing a child's wellbeing / illness.</li> <li>- Risk-assessing operation when household-member unwell with infectious illness</li> <li>- Managing allergies and seasonal illness</li> <li>- information to recognise instance of pandemic or outbreak of infectious disease.</li> </ul> Reviewed and updated diseases advising consultation with Public Health Unit. Outlined record-keeping and notification obligations.
11	16/12/2022	K Hartmann	Updated diseases that are to be notified to the Public Health Unit and applicable links to NSW Health notification form, and disease notification webpage (as advised in DoE Weekly Update 22/11/22).