

QA2 – UNWELL CHILDREN AND SUSPECTED INFECTIOUS DISEASE

INFORMATION

When groups of children play and learn together, illness and disease can spread from one child to another, even when effective hygiene and infection control practices are in place. The health and safety of all persons entering the centre is of paramount importance to our centre and it is understood that there is a shared legal responsibility, commitment and accountability by all persons to implement this and other related procedures.

Children, Educators and visitors who enter the centre must be well enough to fully participate in the activities of the day. To ensure the health of those who come to the centre, and to minimise the spread of illness, those who are sick will be asked to stay away from or leave the centre until they are well.

The purpose of this procedure is to guide Educators to manage illness and the spread of illness and describes the steps to be implemented if a child becomes ill at the Centre.

RESPONSIBILITIES

All staff, visitors, students and volunteers must comply with this procedure.

PROCEDURE

WHEN A CHILD IS UNWELL AT THE CENTRE

If a child becomes unwell while at the centre, team members will:

- Inform the Nominated Supervisor
- Notify the parent/guardian, or the emergency contact if the parent/guardian is not contactable, to collect the child
- Monitor the child
- Keep a record of the child's temperature and document any other symptoms (eg: diarrhoea, vomiting) on the 'Illness observation / emergency paracetamol record'
- Support and assist the child to rest
- Keep the child well-hydrated
- Notify the Nominated Supervisor if the child's symptoms increase or worsen
- Follow first aid and medication administration procedures if first aid, paracetamol or medication is required
- When the parent/guardian, or emergency contact, collects the child they will be informed of the symptoms the child presented with and whether the child will need to be excluded from the centre
- Complete the 'Illness Register', once the child has been collected.

WHEN A CHILD IS UNWELL AT HOME

- If a child becomes unwell at home, whether after leaving the centre, or before coming, families are asked to advise the centre.
- Being aware of illnesses occurring amongst the centre community will assist the staff in working to minimise the spread of illnesses and infections.

IDENTIFYING SIGNS AND SYMPTOMS OF ILLNESS

Symptoms indicating illness may include:

- Behaviour that is unusual for the child
- High temperature or fevers
- Loose bowels
- Faeces that are grey, pale or contain blood
- Vomiting
- Discharge from the eye or ear
- Green runny noses
- Skin that display rashes, blisters, spots, crusty or weeping sores
- Loss of appetite
- Dark urine
- Headaches
- Stiff muscles or joint pain
- Continuous scratching of scalp or skin
- Difficulty swallowing or complaining of a sore throat
- Persistent, prolonged or severe coughing
- Difficulty breathing

Please note: Educators and management are not doctors and are unable to diagnose an illness or infectious disease. To ensure the symptoms are not infectious and minimise the spread of an infection, Educators will contact parents/guardians to collect their child and will also recommend that medical advice is sought when children present with symptoms indicating they are unwell.

HIGH TEMPERATURES/FEVERS

- The normal temperature for a child is up to 38°C.
- Fevers are common in children.
- In some cases, a child may have febrile convulsion, which are physical seizures caused by the fever. They usually last only a few seconds or minutes. Staff will call an ambulance if a child experiences a convulsion.
- Educators will **attempt to** notify parents/guardians **or authorised persons** when a child registers a temperature of 38°C or higher, and the child may need to be collected from the service. Permission may also be sorted at this time to administer paracetamol. **If no contact is gained, Educators may administer a once-only dose of paracetamol if the parent/guardian has given permission in the child's enrolment form.**
- The temperature will be monitored and if continues to escalate an ambulance may be called.
- Any child with a high fever or temperature reaching 38°C or higher will not be permitted to attend the service until 24 hours after the temperature/fever has subsided.

- Educators will complete an 'Illness observation / emergency paracetamol record and note down any other symptoms that may have developed along with the temperature (for example, a rash, vomiting, etc.).

Strategies Educators may use to support children with high temperatures/fevers until their parent/guardian collects them include:

- Encouraging the child to drink plenty of water (small sips), unless there are reasons why the child is only allowed limited fluids.
- Removing excessive clothing (shoes, socks, jumpers, pants etc.), whilst being mindful of privacy and cultural beliefs.
- Sponging lukewarm water on the child's forehead, back of neck and exposed areas of skin.
- Administering Paracetamol, if written permission has been provided by the parent/guardian and the child has been in attendance at the centre for longer than 4 hours, to try and reduce the fever. The child may still be required to be collected. If this occurs, the child's temperature, along with the time of administering, the specific medication, the dosage and the staff member's name will be recorded on the " Illness observation / emergency paracetamol record' as well as a 'Medication record' and the parent/guardian asked to sign the relevant documentation on arrival.
- Once the child has been collected, staff will complete the 'Illness Register'.

COLDS/INFLUENZA/RUNNY NOSE

- People with colds are most infectious from about 1 day before symptoms begin, and while they have a runny nose with clear nasal discharge.
- Children who appear to have a cold, or are unwell, may be sent home to ensure they can rest and recover, and to reduce the likelihood of spreading the illness.
- For runny noses, Educators will support children to blow and clear the discharge, ensuring both their, and the child's, hands are washed afterwards, and the tissues disposed of appropriately.

DIARRHOEA AND VOMITING (GASTROENTERITIS)

- Gastroenteritis (or 'gastro') is a general term for an illness of the digestive system. Typical symptoms include abdominal cramps, diarrhoea and vomiting.
- If a child experiences diarrhoea and/or vomiting it will be discussed with the Nominated Supervisor or Responsible Person to make a decision and then the parents/guardians may be contacted to collect the child immediately.
- Educators will offer fluids to prevent dehydration and will make the child as comfortable as possible until the child's parent/guardian arrives.
- Children and staff with infectious diarrhoea and/or vomiting will be excluded until the diarrhoea and/or vomiting has stopped for at least 24 hours.
- If there are 3 or more cases of gastroenteritis, as per Time Out (QLD Health), the Nominated Supervisor will report the outbreak to the local health department. In this instance, children and staff will be excluded from the service until the diarrhoea and/or vomiting has stopped for 48 hours.

SUSPECTED INFECTIOUS DISEASE

- Infectious diseases are those conditions that are notifiable under the National Immunisation Program (NIP) as recommended by the National Health and Medical Research Council (NHMRC).
- The NHMRC sets our exclusion periods based on the disease – please refer to the latest version of [“Staying healthy: Preventing infectious disease in early childhood education and care services, 5th edition”](#) for the exclusion recommendations.
- State/territory government health departments may also have specific illnesses that they recommend exclusion for – contact your local public health unit for support and advice if a suspected or confirmed infectious disease is, or has been, present in the centre.
- If a suspected or confirmed infectious disease is, or has been, present in the centre, all families and staff will be notified as soon as possible, without identifying who is ill.
- The infectious disease will be appropriately documented on the Illness Register, and the Regulatory Authority notified if the illness meets the regulatory requirements for notification.

PREVENTION OF TRANSMISSION

- The following three steps are considered to be most effective in preventing the transmission of infectious diseases:
 - Effective hand washing
 - Exclusion of ill children and Educators, and
 - Immunisation
- If a child or staff member presents with a suspected or confirmed infectious disease, they will be excluded as per the NHMRC’s recommendations.

IMMUNISATION

Please refer to the ‘Immunisation Procedure’ for direction and advice regarding immunisations.

ACKNOWLEDGEMENTS, REFERENCES AND RESOURCES

ACECQA. (2018). *Guide to the National Quality Framework*. Retrieved 24 April 2019 from <http://files.acecqa.gov.au/files/NQF/Guide-to-the-NQF.pdf>

Department of Health and Ageing. 2012. *Immunise Australia Program*. [ONLINE] Available at: <http://www.immunise.health.gov.au/>

National Health and Medical Research Council. (2005). *Staying healthy Preventing infectious diseases in early childhood education and care services. Fifth edition*. Retrieved 15 May 2019 from <https://www.nhmrc.gov.au/sites/default/files/documents/reports/clinical%20guidelines/ch55-staying-healthy.pdf>

DOCUMENT CONTROL

Date Reviewed	Modifications
June 2019	Created new policy document and format.
December 2021	Added statement about administering one-dose paracetamol
15 February 2022	No changes

4 April 2023

Clarification of contacting parents and Qld Health