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| Melton logo colour - low res | **Dealing with Infectious Diseases Procedure** |
| **Linked Policy Document** | This procedure details actions and processes pursuant to the *Dealing with Infectious Diseases Policy*. |
| **Version No.** | Version 3.0 November 2021 (approved) |
| **Authorisation** | General Manager Community Services |
| **Expiry Date** | Policy to be reviewed by 1 December 2024 |
| **Responsible Officer** | Manager Families and Children |
| **Policy Owner** | Early Childhood Coordinator |

# Purpose

This procedure will provide a process to follow when:

* a child who attends Melton City Council children’s services shows symptoms of an Infectious Disease
* a child at Melton City Council children’s services has been diagnosed with an Infectious Disease
* managing and minimising the spread of Infectious Diseases, Illnesses and Infestations (including head lice)
* managing and minimising Infections relating to Blood-Borne Viruses (BBV).

# Scope

This procedure applies to the Approved Provider, Nominated Supervisor, Person in day to day charge/Responsible person educators, staff, students on placement, volunteers, parents/guardians, children and others attending the service, including during offsite excursions and activities of Melton City Council

# Definitions

For terms that relate specifically to this procedure refer to the *Dealing with Infectious Diseases Policy*. For commonly used terms e.g. Approved Provider, Regulatory Authority etc. refer to the Glossary of Terms.

# Procedure

# In terms of Illness and Exclusion

* It is in the best interests of all of the children and families using services, that those attending are healthy and free from Infection.
* Children will be excluded from children’s services when they have developed an Infectious Condition.
* Parents are asked to comply with the information found in the Exclusion Table (see *Sources*) to reduce the spread of Infection within Services.
* If it is believed that a child is suffering from an infectious condition, the parents/guardians or emergency contact will be phoned and asked to collect the child.
* A clearance from a medical practitioner will be required prior to the child returning to the care environment.

# In terms of if a child comes into care and is unwell or becomes unwell while in care:

If the child feels unwell and isn’t able to participate in the activities or if the child requires ongoing one on one attention from the educator, which limits the educators ability to care for and supervise the other children in care.

* The educator will document all relevant information e.g. temperature, not eating, pale, unable to participate in normal activities.
* The educator will monitor the child’s condition, if there is no improvement within an hour or the child’s condition worsens, the educator will contact the parent and ask them to collect the child.
* If parent is unavailable the educator will proceed to the emergency contacts provided by the parent.

Throughout the above process the child’s best interests are paramount.

# In terms of HIV/aids and Hepatitis B

HIV/AIDS is a health issue that concerns everyone and has aroused community anxiety often because of misinformation and ignorance.

This procedure aims to:

* endorse a caring and supportive approach to this issue
* help to inform parents and staff about the facts of HIV/AIDS
* assure users of the service that the service is aware of its responsibilities in providing a safe environment for staff, children and parents
* assure the community that the service is carrying out its responsibilities in relation to Government legislation concerning HIV/AIDS in particular, the *Occupational Health and Safety Act* and the *Health Act* which protect against discrimination and ensures confidentiality for staff and users
* fulfil obligations under the Children's Services in Victoria Policy & Procedures General Guidelines and to comply with all relevant Commonwealth legislation.

# Anti-discrimination

No employee, prospective employee, parent or child will be discriminated against on the grounds of having, or assumed to have, HIV Infection.

Being infected with HIV is not grounds for Exclusion of a child, parent, or staff member.

# Confidentiality

Information regarding HIV/AIDS status of any child, parent, or staff member will remain confidential and all reasonable steps will be taken to develop and implement systems to protect the privacy of that person.

# Occupational Health and Safety

* Management will ensure that all staff and educators are aware of their responsibilities towards service users and people in their care.
* The service shall at all times follow proper Infection control procedures to prevent the risk of the transmission of HIV.
* The service or educator will ensure that First Aid equipment for protection against the risk of Infection from HIV/AIDS will be available at all times.
* Management and educators will provide as far as practicable a healthy and safe environment.

Staff and educators are required to take reasonable care to protect their own health and safety and the health and safety of others in the workplace.

# Information and education

Management will ensure that all staff and educators have access to education about the basic facts on HIV/AIDS and preventative measures and access to further information and support services as required.

# Procedures for infection control

There will be a two-tiered approach to Infection control, which includes:

* standard precautions, which will be implemented at all times
* additional precautions when the standard precautions are insufficient to stop transmission of Infection occurring.

The following statements are based on the principle that all people are potentially infectious, and that Infection control will be universally practised.

* Staff, educators and users will have access to materials as required that will enable them to implement Infection control procedures. This will include disposable gloves etc. and the First Aid cabinet will be equipped at all times with disposable gloves.
* The service will have access to information outlining Infection control procedures.

# For responding to incidents

Full details of the incident must be recorded. Any incident, which a staff member or educator believes may have resulted in exposure to HIV/AIDS, should be reported to an appropriate representative of Council Management with appropriate confidentiality controls.

The staff member/educator should be informed to immediately consult a qualified medical practitioner or an accredited counsellor to assess need for testing.

# For confidentiality

There is no obligation, legal or otherwise for anyone to inform an employer, service provider, or service of their HIV status, consequently:

* such information must not be disclosed without informed consent of the individual (or parent/guardian of a person under the age of 18 years)
* the only reason a parent/guardian would inform the teacher of the child at the centre of the child’s HIV/AIDS status would be for the benefit of the child themselves who may have specific requirements
* all such information must be kept securely (under lock and key) within the centre and access to this information must only be by the person who has been informed
* no routine or mandatory HIV testing may be carried out on the service users or staff
* no testing may be carried out without the informed consent of the individual and provision of pre and post-test counselling, by an accredited counsellor or qualified medical practitioner.

# Hepatitis

The above confidentiality procedure also applies to Hepatitis B, with the following differences:

* Hepatitis B is a notifiable disease under the *Health Act* and therefore parents are obliged to inform the service if their child is infected with Hepatitis B
* the child must be excluded if they are displaying the active symptoms of the disease.

# In terms of Pediculosis/head lice

Education material will be provided to families in the case of an episode of head lice in their child. Material outlines the importance of regular inspection of hair and discourages the sharing of personal items such as combs, hats, smocks and all types of hair ties.

Any child in care who presents with symptoms of head lice will be separated from close contact with the other children, and the parent /guardian or emergency contact will be contacted to collect the child from care.

The child will be excluded from care in accordance with the Exclusion table outlined in the Staying Healthy in Childcare manual.

Parents/guardians need to check the child’s hair for both lice and eggs on the day of returning to the service and prior to arrival at the service.

All families in the care environment during this period will be advised that there is a case of head lice. The confidentiality of the child(ren) involved will be maintained at all times.

The Environmental Health Services Unit at the Melton City Council is available to discuss head lice concerns.

Parents/guardians who do not consent for staff or educators to check their child’shair will be required to attend the centre upon request and check their child’s hair with staff/educators.

# Melton City Council children’s services is committed to:

* providing a safe and healthy environment for all children, staff and any other persons attending the service
* responding to the needs of the child or adult who presents with symptoms of an Infectious Disease or Infestation while attending the service
* complying with current Exclusion schedules and guidelines set by the Department of Health
* If required, providing up-to-date information and resources for families and staff regarding protection of all children from Infectious Diseases and BBV, management of Infestations and immunisation programs.

Melton City Council children’s services support the Immunise Australia Program and National Immunisation Program (NIP), which is currently recommended by the National Health and Medical Research Council (NHMRC) and supported by the Commonwealth Government. All educators/staff at Melton City Council are committed to preventing the spread of vaccine-preventable diseases through simple hygiene practices such as hand washing, effective cleaning procedures, monitoring immunisation records and complying with recommended Exclusion guidelines and timeframes for children and educators/staff.

# Responsibility/Accountability

# The Approved Provider, according to Regulations is responsible for the implementation of the *Dealing with Infectious Diseases Policy*. This will be achieved through the Leadership Group and their service staff:

* where there is an occurrence of an Infectious Disease at the service, reasonable steps are taken to prevent the spread of that Infectious Disease (National Regulations 88)
* where there is an occurrence of an Infectious Disease at the service, a parent/guardian or authorised emergency contact of each child at the service is notified of the occurrence as soon as is practicable (National Regulations 88)
* information from the Department of Health about the Recommended Minimum Exclusion Periods (refer to *Definitions*), is available to all stakeholders and is adhered to in the event of an outbreak of an Infectious Disease (as designated by the Department of Health – refer to *Definitions*)
* Parent/guardian and DET are informed within 24 hours of becoming aware that an enrolled child is suffering from:
* Pertussis
* Poliomyelitis
* Measles
* Mumps
* Rubella
* Meningococcal C

as required under Regulation 84(1) of the *Public Health and Wellbeing Regulations* 2009

Note: The Department of Health also recommends that services inform the Communicable Disease Prevention and Control Unit if there is an outbreak of three or more cases of respiratory or Gastrointestinal Illness at the service within a 72-hour period.

* a child who is not immunised against a vaccine-preventable disease does not attend the service when an Infectious Disease is diagnosed, and does not return until there are no more occurrences of that disease at the service and the Recommended Minimum Exclusion Period (refer to *Definitions*) has ceased (Regulation 85 of the *Public Health and Wellbeing Regulations* 2009)
* notifying DET within 24 hours of a Serious Incident (refer to *Definitions*), including when a child becomes ill at the service or medical attention is sought while the child is attending the service
* supporting the Nominated Supervisor, Person in day to day charge/Responsible person and the educators/staff at the service to implement the requirements of the Recommended Minimum Exclusion Periods
* information about the NIP immunisation schedule is displayed and is available to all stakeholders (refer to *Sources*)
* conducting a thorough inspection of the service on a regular basis, and consulting with educators/staff to assess any risks by identifying the hazards and potential sources of Infection
* the Nominated Supervisor, Person in day to day charge/Responsible person educators, staff and everyone at the service adheres to the *Hygiene Policy*
* appropriate and current information and resources are available to educators/staff and parents/guardians regarding the identification and management of Infectious Diseases, BBV and Infestations
* keeping informed about current legislation, information, research and best practice
* any changes to the Exclusion table are communicated to educators/staff and parents/guardians in a timely manner.

# The Nominated Supervisor, Person in day to day charge / Responsible Person’s is responsible for:

* notifying the Approved Provider immediately on becoming aware that an enrolled child is suffering from:
* Pertussis
* Poliomyelitis
* Measles
* Mumps
* Rubella
* Meningococcal C
* contacting the parents/guardians of a child suspected of suffering from an infectious or vaccine-preventable disease, or of a child not immunised against a vaccine-preventable disease that has been detected at the service, and requesting the child be collected as soon as possible
* notifying a parent/guardian or authorised emergency contact person when a symptom of an excludable infectious Illness or disease has been observed
* ensuring that a minimum of one educator with current approved First Aid qualifications is in attendance and immediately available at all times the service is in operation (refer to *Administration of First Aid Policy*)
* establishing good hygiene and Infection control procedures, and ensuring that they are adhered to by everyone at the service (refer to *Hygiene Policy*)
* ensuring the Exclusion requirements for Infectious Diseases are adhered to as per the Recommended Minimum Exclusion Periods (refer to *Definitions*), notifying the Approved Provider and parents/guardians of any outbreak of Infectious Disease at the service, and displaying this information in a prominent position
* advising parents/guardians on enrolment that the Recommended Minimum Exclusion Periods will be observed in regard to the outbreak of any Infectious Diseases or Infestations (refer to Department of Health Exclusion table in *Sources*)
* advising the parents/guardians of a child who is not fully immunised on enrolment that they will be required to keep their child at home when an Infectious Disease is diagnosed at the service, and until there are no more occurrences of that disease and the Exclusion period has ceased
* requesting that parents/guardians notify the service if their child has, or is suspected of having, an Infectious Disease or Infestation
* providing information and resources to parents/guardians to assist in the identification and management of Infectious Diseases and Infestations
* on enrolment ensuring all families have authorised a consent to conduct head lice inspections
* maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

# All staff / educators are responsible for:

* encouraging parents/guardians to notify the service if their child has an Infectious Disease or Infestation
* observing signs and symptoms of children who may appear unwell, and informing the Nominated Supervisor
* providing access to information and resources for parents/guardians to assist in the identification and management of Infectious Diseases and Infestations
* monitoring that all parents/guardians have authorised a consent to conduct head lice inspections
* monitoring any symptoms in children that may indicate the presence of an Infectious Disease and taking appropriate measures to minimise cross-Infection
* complying with the *Hygiene Policy* of the service
* maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*).

# Parents/guardians are responsible for:

* keeping their child(ren) at home if they are unwell or have an excludable Infectious Disease
* keeping their child(ren) at home when an Infectious Disease has been diagnosed at the service and their child is not fully immunised against that Infectious Disease, until there are no more occurrences of that disease and the Exclusion period has ceased
* informing the service if their child has an Infectious Disease or has been in contact with a person who has an Infectious Disease
* providing accurate and current information regarding the Immunisation Status of their child(ren) when they enrol, and informing the service of any subsequent changes to this while they are enrolled at the service
* complying with the Recommended Minimum Exclusion Periods
* regularly checking their child’s hair for head lice or lice eggs, regularly inspecting all household members, and treating any Infestations as necessary
* notifying the service if head lice or lice eggs have been found in their child’s hair and when treatment was commenced
* complying with the *Hygiene Policy* when in attendance at the service.

# Volunteers and students, while at the service, are responsible for following the *Dealing with Infectious Diseases Policy* and its procedures.

# References, Sources, Links to Legislation and Other Documents

# Please refer to Reference and Sources page located on the Melton City Council Website.

<http://www.melton.vic.gov.au/Services/People/Children/Childrens-Services-policies-and-procedures/Sources-and-References>

# Related service policies:

* *Administration of First Aid Policy*
* *Administration of Medication Policy*
* *MCC Child Safe Policy, Procedure and Code of Conduct*
* *Dealing with Medical Conditions Policy*
* *Hygiene Policy*
* *Incident, Injury, Trauma and Illness Policy*
* *Inclusion and Equity Policy*
* *Occupational Health and Safety Policy*
* *Privacy and Confidentiality Policy*.