

Yankalilla Community Children's Centre

Infection Control Policy

The health and wellbeing of young children and educators is central to the creation of a high quality early childhood environment. The primary challenge is to provide a safe environment where play based learning (involving all the senses), physical closeness and warm relationships are not compromised by over protection and unnecessary anxiety.

In order to eliminate or minimise the level of risk associated with exposure to infectious disease or illness the Yankalilla Community Children's Centre will abide by the 2013 DECD Infection Control procedure.

The five most important ways of preventing the spread of infectious disease in early childhood settings are:

1. Effective hand washing
2. Exclusion of sick children and staff
3. Immunisation
4. A high standard of Cleanliness
5. Standard precautions

1. Hand washing

Hand washing, rinsing and drying remains one of the most basic and important procedures for maintaining hygiene and preventing the spread of infection. However, to be effective, hand washing must be done properly.

Staff and children must wash, rinse and dry their hands:

- On arrival at the centre
- Before going home
- Before eating (for babies, before they are fed)
- Before preparing or handling any food – including babies bottles
- Before giving medications
- After nappy changes
- After going to the toilet or assisting a child to use the toilet
- After wiping or blowing noses (staff or child's)
- After coming into contact with any bodily fluids – blood, faeces, urine, vomit
- After touching animals

During outside play time, it may not be possible for staff to come inside to wash their hands. Staff will ensure they always apply gloves before handling blood or bodily fluids. After removing the gloves and placing them in the bin, staff will apply "Hands First" antibacterial sanitiser.

Hand washing procedure:

- Wash hands with soap and running water
- Dry hands thoroughly with a clean paper towel.
- Put paper towel in bin

2. Exclusion of children and staff who are sick

Exclusion helps to prevent transmission of infectious illnesses to others and also assists in the recovery of the sick child. Children and staff must be well enough to attend and participate fully in activities. Children requiring one to one attention need home care. Parents are required to notify the Director if their child has any contagious illness.

Exclusion will be handled in accordance with the SA Health exclusion period guidelines.

(See Appendix 2)

In addition, the centre has a 24 hour exclusion policy for children who have vomited more than once or who have excreted more than one loose bowel action. Exclusion for 24 hours gives the vomiting and diarrhoea time to subside and for normal activity and diet to be reintroduced. Children may return to the Centre after the prescribed exclusion period or upon receipt of a medical clearance certificate from a medical practitioner.

Parents will be given a copy of the Centre exclusion guidelines on enrolment.

The exclusion guidelines also apply to staff.

In the case of a confirmed infectious illness or disease, a notice will be displayed on the centre reception door. If more than three cases of the same illness or disease have been confirmed a notice will be distributed to all families via their message pockets.

Identifying symptoms of an excludable infectious illness and notifying families

The staff will be vigilant in identifying symptoms which may indicate an excludable infectious illness or disease. The Centre does not have the facilities or the staff to care for sick children: therefore, children who are unwell or who have infections or contagious illnesses are not able to be cared for at the centre. Parents will be advised on enrolment that children who are unwell should stay home from childcare or preschool.

If a child becomes ill while they are at the centre every effort will be made to contact the parent/guardian or emergency contact people.

Parents will be contacted when a child:

- Has difficulty breathing
- Refuses to drink fluids
- Vomits
- Is coughing uncontrollably
- Complains of headaches, earache or has a discharging ear
- Needs to be comforted constantly – has no interest in play
- Has a fever (temperature of 38.5° or higher)
- Develops a rash
- Is pale and sleepy
- Diarrhoea - 2 loose bowel actions on the same day

Unwell children will be isolated as much as practical until the child is able to be collected. If medical attention is required, children will be either taken to the Doctors surgery, or an ambulance called, depending on the severity of the illness. If an unwell child is collected from the centre and then returned to the centre on the same day a medical authority written by a medical practitioner stating the child is well enough to return and is not infectious will be necessary.

The centre will maintain a record of illnesses in the centre and an illness report form will be prepared for any child asked to be collected from the centre due to symptoms of illness.

3. Immunisation

Children

The most effective method of preventing certain infections is immunisation. Immunisation protects the person who has been immunised, children who are too young to be immunised and other people who have been vaccinated but did not respond to the vaccine.

As part of the enrolment process for every child, parents are asked to make immunisation records available for sighting. The enrolling staff person will initial the enrolment form to confirm that the immunisation record has been sighted. For subsequent vaccinations, parents are reminded and encouraged to provide a record of each vaccination within two weeks of the vaccination being administered or when next attending the service (whichever occurs first). Where an immunisation record is not provided or where the record is outdated when sighted, the child will be recorded as non-immunised. The Team leader (for joey's at 14 months), primary carers (for over 2's at transition to over 2's) and Director (for pre-schoolers at transition to preschool) will follow-up with parents who have not provided updated evidence of immunisation.

If there is an occurrence of an infectious vaccine preventable disease (VPD) covered by the Childhood Immunisation Program at YCCC, then children who are recorded as non-immunised will be excluded in accordance with the SA Health exclusion period guidelines. (see Appendix 2) Any occurrence of a communicable disease, including a vaccine preventable disease will be reported to on the DECD Incident Management Response System (IRMS) and relevant authorities notified in accordance with the DECD Injury Incident Reporting and Investigation Procedure. YCCC will notify all families if a case of an Immunisable illness is confirmed.

Staff

All staff will complete a Staff Immunisation Record at their commencement of work at YCCC. It is recommended that staff reduce their risk of transmission of infectious diseases by obtaining the following immunisations:

- Hepatitis A; Hepatitis B; Influenza; Tetanus
- Any childhood diseases they have not had (measles, mumps, rubella and chicken pox.)

The cost of the vaccinations will be covered in full by DECD for DECD employees.

YCCC will make a contribution of up to 50% toward the cost of these recommended vaccinations for YCCC employees.

4. Cleaning and Disinfection

Toys, surfaces and bedding will all be regularly cleaned to prevent the spread of infection. Baby's toys will be cleaned after use on a daily basis. Toys used in the over 2's program will be cleaned at the end of each week. A monthly cleaning schedule applies to the cleaning of all other toys. Toys will be cleaned in warm soapy water and dried outside in the sun (weather permitting). The centre will be cleaned every night. Only non-hazardous cleaning products (as classified according to criteria of Safe Work Australia) will be used.

The common use of personal care items ie: dummies face cloths or hats is not allowed.

5. Standard Precautions

Standard Precautions assumes that all body substances are potentially infectious. Standard Precautions (see Appendix 1) will be followed when handling:

- Blood, including dried blood
- Body substances including saliva, urine and faeces
- Broken skin (cuts and abrasions)
- Mucous membranes (lining of nose, mouth)

In the event that a child or staff member is exposed to blood or a body substance a Post Exposure Response (see Appendix 1) will be followed.

Notifiable Infectious diseases

The Director will report all instances of Notifiable Infectious Diseases on IRMS and to the Director Health and Safety Services on 82267555.

A list of Notifiable Infectious diseases is located in Appendix 3 of the DECD Infection Control Procedure.

Source:

Department for Education and Child Development (2013) *Infection Control Procedure*

National Health and Medical Research Council (2012). *Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th Ed.)*

DECD (2017). - *Protecting children from vaccine preventable diseases procedure.*

DECD (2016) *Injury, Incident reporting and investigation procedure.*

SA Health. *Exclusion from childcare, preschool and work.* Last updated 5th February 2017 from www.sahealth.sa.gov.au

Adopted: March 2004

Last Reviewed: August 2017 To be reviewed: November 2018

Appendix 1

Standard Precautions

Standard precautions are hygiene practices incorporating hand hygiene and the use of gloves, other appropriate PPE to eliminate or minimise the risk of exposure to an infectious disease.

1. Hands must be washed after contact with blood or a body substance before eating, drinking or smoking.
2. Water impermeable gloves must be worn when likely to be exposed to blood or a body substance, or contaminated materials.
3. Hands must be washed and dried immediately after removing gloves (gloves cannot be guaranteed to prevent skin contamination and may not remain intact during use).
4. Cuts or abrasions on any part of a child or staff members body must be covered with waterproof dressing at all times.

Routine Cleaning

Toilets, sinks, washbasins and surrounding areas will be cleaned at least once a day or more frequently if required. Floors will be vacuumed and mopped daily.

Routine surface cleaning will be carried out as follows:

1. Work surfaces will be cleaned with detergent and warm water before and after usage or when visibly soiled.
2. Spills should be dealt with immediately.
4. Where surface disinfection is required, use in accordance with manufacturer's instructions.
5. Clean and dry surfaces before and after applying disinfectants.

Post Exposure Response

If a child or staff member is exposed to or comes in contact with blood or a body substance the following measures will be taken:

1. Remove contaminated clothing.
2. If blood or a body substance comes in contact with the skin, irrespective of whether there are cuts or abrasions, wash the area well with soap and water.
3. If the eyes are splashed, rinse the area gently but thoroughly with water while the eyes are open.
4. If blood or a body substance enter the mouth, spit it out and rinse the mouth with water several times, spitting the water out each time.
5. Wash hands thoroughly with soap and warm water. Pat hands dry with paper towels or air dryer.

Waste Management

If blood or a body substance is spilled on surfaces, the following infection containment procedures are to be followed:

1. Deal with the spill as soon as possible.
2. Wear disposable gloves.
3. Remove as much of the spill as possible with a paper towel / cleaning cloth.
4. Clean area with warm water and detergent, using a disposable cleaning cloth or sponge. The area should be left clean and dry.
5. Disinfect the area with a solution of household bleach, diluted according to the manufacturer's instructions.
6. Remove and dispose of gloves, paper towels / cleaning cloth in a sealed plastic bag after use.
7. The plastic bag may then be thrown away with household waste.
8. Wash hands thoroughly with soap and warm water. Pat hands dry with paper towels or air dryer.

