

# ILLNESS CHILDREN POLICY

Children come into contact with many other children and adults in the early childhood environment increasing their exposure to others who may be sick or carrying an infectious illness. The National Quality Standard requires early childhood education and care services to implement specific strategies to minimise the spread of infectious illness and maintain a healthy environment for all children, educators and families. We acknowledge the difficulty of keeping children at home or away from childcare when they are sick and the pressures this causes for parents, however our Service aims to minimise the transmission of infectious diseases by adhering to regulations and policies protecting the health of all children, team members, families and visitors.

## NATIONAL QUALITY STANDARD (NQS)

QUALITY AREA 2: CHILDREN’S HEALTH AND SAFETY		
2.1	Health	Each child’s health and physical activity is supported and promoted.
2.1.1	Wellbeing and comfort	Each child’s wellbeing and comfort is provided for, including appropriate opportunities to meet each child’s needs for sleep, rest and relaxation.
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.

EDUCATION AND CARE SERVICES NATIONAL REGULATIONS	
77	Health, hygiene and safe food practices
85	Incident, injury, trauma and illness policies and procedures
86	Notification to parents of incident, injury, trauma and illness
87	Incident, injury, trauma and illness record
88	Infectious diseases
90	Medical conditions policy
92	Medication record
93	Administration of medication
168	Education and care service must have policies and procedures

<b>Document Title</b>	Illness Children Policy	<b>Page No.</b>	1 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1	<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024	<b>Revision Date</b>	July 2025

PURPOSE

We aim to maintain the health and wellbeing of all children, team members, and their families, ensuring a healthy and safe environment by minimising cross contamination and the spread of infectious illnesses by following best practice and a high standard of hygienic work practices and infection control procedures within our Service.

SCOPE

This policy applies to children, families, team members, management, and visitors of the Service.

IMPLEMENTATION

Our Service has adopted the *Staying healthy: Preventing infectious diseases in early childhood education and care services* (Fifth Edition) publication recommendations developed by the Australian Government National Health and Medical Research Council to guide our practices to help limit the spread of illness and disease. We aim to provide families with up to date information regarding specific illnesses and ways to minimise the spread of infection within the Service and at home. Our service operates to provide care for well children, and aims to ensure a safe and healthy environment for all children in our care. The service is not able to provide the 1:1 support that a sick child requires to ensure their wellbeing and has a responsibility not to compromise the health and safety of other children and staff members.

We are guided by decisions regarding exclusion periods and notification of infectious diseases by the Australian Government- Department of Health and local public health units in our jurisdiction as per the Public Health Act.

This policy must be read in conjunction with our other Quality Area 2 policies:

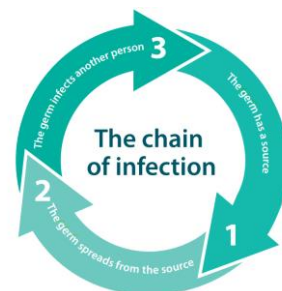
- Accident, emergency first aid and Fire policy
- Medication and medical condition Policy
- Health hygiene and infection control
- Staff illness

<b>Document Title</b>	Illness Children Policy		<b>Page No.</b>	2 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024	<b>Revision Date</b>	July 2025	

Staying Healthy: Preventing infectious diseases in early childhood education and care services (2013) explains how infections are spread as 'The Chain of Infection'.

There are three steps in the chain:

- The germ has a source
- The germ spreads from the source
- The germ infects another person



The chain of infection can be broken at any stage to help prevent and control the spread of diseases.

### The germ has a source

Germs can be picked up directly from an infected person or from the environment. It is important to understand that an infected person may not show any signs or symptoms of illness.

### The germ spreads from the source

Germs can spread in several ways, including through the air by droplets, through contact with faeces and then contact with mouths, through direct contact with skin, and through contact with other body secretions (such as urine, saliva, discharges or blood).

Some germs can spread directly from person to person, others can spread from the infected person to the environment. Many germs can survive on hands and on objects such as toys, door handles and bench tops. The length of time a germ can survive on a surface (including the skin) depends on the germ itself, the type of surface it has contaminated and how often the surface is cleaned. Washing hands and surfaces regularly with detergent and water is a very effective way of removing germs and preventing them spreading through the environment.

(Source: *Staying healthy: Preventing infectious diseases in early childhood education and care services*, 5<sup>th</sup> Edition, 2013 p: 7)

### The germ infects another person

When the germ has reached the next person, it may enter the body through the mouth, respiratory tract, eyes, genitals, or broken or abraded skin. Whether a person becomes ill after the germ has entered the body depends on both the germ and the person's immunity.

<b>Document Title</b>	Illness Children Policy	<b>Page No.</b>	3 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1	<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024	<b>Revision Date</b>	July 2025

Illness can be prevented at this stage by stopping the germ from entering the body (for example, by making sure that all toys that children put in their mouths are clean, by washing children’s hands, by covering wounds), and by prior immunisation against the germ.

Source: *Staying healthy: Preventing infectious diseases in early childhood education and care services*, 5<sup>th</sup> Edition, 2013 p: 7)

### Minimizing the spread of infections and diseases in early education and care services

We understand that it can be difficult for families to know when their child is sick. Families may experience problems taking time off work or study to care for their child at home. Obtaining leave from work or study can contribute to negative attitudes in the workplace which can cause stress on families. Families may also experience guilt when they send their child to care who is not well.

However, it is imperative that families maintain a focus not only on the well-being of their own child but also upon the well-being of other children and the early childhood professionals at the Service. To protect the health of children and staff within the Service, it is important that children and staff who are ill are kept away from the Service for the recommended exclusion period.

At times, an outbreak of a new or ‘novel’ virus or infection, such as COVID-19, may require exclusion from the Service that is not specified in general exclusion periods for common infectious illnesses. Information, education and recommendations regarding any ‘novel’ virus will be provided by the Australian Government Department of Health and/or local public health unit.

(see Excluding Children from the Service section)

The need for exclusion and the length of time a person is excluded depends on:

- how easily the infection can spread
- how long the person is likely to be infectious and
- the severity of the infectious disease or illness.

Our Educators and staff are not medical practitioners and are not able to diagnose whether or not a child has an infectious illness. However, if an infectious illness is suspected, our Service may ask the family to collect their child from care as soon as possible or not bring the child to care.

Management and educators *may* request families seek medical advice and provide a medical certificate stating that the child is no longer infectious prior to returning to care. **Please note: it is not always**

<b>Document Title</b>	Illness Children Policy		<b>Page No.</b>	4 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024	<b>Revision Date</b>	July 2025	

possible to obtain a doctor’s certificate or clearance for suspected cases of an illness. The decision to approve a child’s return is up to the Director/responsible person.

To help minimise the spread of illness and infectious diseases our Service implements rigorous hygiene and infection control procedures and cleaning routines including:

- effective hand washing hygiene
- cough and sneeze etiquette
- appropriate use of protective gloves
- exclusion of children, educators or staff when they are unwell or displaying symptoms of an infectious disease or virus
- effective environmental cleaning including toys and resources and bedding
- requesting parents and visitors to wash their hands with soap and water or hand sanitizer upon arrival and departure at the Service
- immunisation (monitoring staff and child immunisations and adhering to ‘No Jab, no play’ guidelines)
- physical distancing (when recommended by Australian Health Protection Principal Committee [AHPPC] and/or Safe Work Australia)

### Children arriving at the service who are unwell

Management will not accept a child into care if they:

- have a contagious illness or infectious disease
- have a temperature above 37.8°C when assessed prior to entry to the service (effective during a pandemic or outbreak of an infectious disease)
- are unwell and unable to participate in normal activities or require additional attention
- have had a temperature, vomiting in the last 24 hours- as reported by a parent
- have had diarrhea in the last 24 hours (unless there is an outbreak 48 hours)
- have started a course of anti-biotics in the last 24 hours
- have been given medication for a temperature or illness prior to arriving at the Service (for example: Panadol)

### Children who become ill at the Service

Children may become unwell throughout the day, in which case Management and educators will respond to children’s individual symptoms of illness and provide immediate comfort and care.

- Educators will closely monitor and document the child’s symptoms on the *Illness Record*

Document Title	Illness Children Policy		Page No.	5 of 7
National Quality Standard: Quality Area:	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		Document Version	V3. 2023
Last Revised	July 2024	Revision Date	July 2025	

- Children who are unwell at the Service will be able to rest in a supervised area away from other children until parents or the emergency contact person is able to collect them
- A child who has Diarrhoea and/or vomited whilst at the Service will be sent home and may only return 24 hours after the diarrhoea and/or vomiting has stopped. If we have a Gastro outbreak with more than 5 cases the exclusion will be 48 hours.
- Educators will take the child’s temperature. If the child’s temperature is 37.8°C or higher, management will contact the child’s parents/guardian/emergency contacts as soon as possible to have the child collected (within 45 minutes)
- Educators will monitor the child closely and be alerted to vomiting, coughing or high temperatures
- Educators will attempt to lower the child’s temperature by:
  - removing excessive clothing (shoes, socks, jumper, pants)
  - encouraging the child to take small sips of water
  - moving the child to a quiet area where they can rest whilst being supervised
- Accurate records (illness record form) will be kept of the child’s temperature, time taken, other signs and symptoms, staff member’s full name and name of staff member who witnessed the signs and symptoms
- Educators will continue to document any progressing symptoms
- Educators will complete the *Illness Record*, ensuring the form has been completed correctly and signed by the parent/guardian/emergency contact upon collection of their child
- Educators will thoroughly clean and disinfect any toys, resources or equipment that may be contaminated by a sick child.
- Educators will inform families of the minimum exclusion period before the child is able to return following the guidelines in Staying Healthy in child care.

Common colds and flu –

The common cold or flu (viral upper respiratory tract infections) are very common in children occurring 6-10 times a year on average with the highest number usually being during the first 2 years in childcare, kindergarten or school. Symptoms may include coughing, runny nose and a slight temperature.

In circumstances where a child appears to have cold or flu symptoms, management will determine if the child is well enough to continue at the Service or if the child requires parental care.

Our Service aims to support the family’s need for childcare however, families should understand that a child who is unwell will need one-on-one attention which places additional pressure on staff ratios and the needs of other children.

<b>Document Title</b>	Illness Children Policy		<b>Page No.</b>	6 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024		<b>Revision Date</b>	July 2025

Children who are generally healthy, will recover from a common cold in a few days. Keeping a child home and away from childcare, helps to prevent the spread of germs.

Influenza is a highly contagious illness and can spread to others for 24 hours before symptoms start. To prevent the spread of influenza our service encourages staff and children to be vaccinated once a year.

### Reporting outbreaks to the public health unit

Management is required to notify the local [Public Health Unit](#) (PHU) by phone (call 1300 066 055) as soon as possible after they are made aware that a child enrolled at the Service is suffering from one of the following vaccine preventable diseases, any confirmed case of COVID-19 or outbreak of gastroenteritis (considered to be five or more cases).

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenzae Type b (Hib)
- Meningococcal disease
- Rubella ('German measles')
- Measles
- Pertussis ('whooping cough')
- Tetanus
- A gastrointestinal or respiratory illness.

Management will closely monitor health alerts and guidelines from Public Health Units and the Australian Government- Department of Health for any advice and emergency health management in the event of a contagious illness outbreak such as coronavirus- COVID-19.

### Excluding children from the Service

When a child has been diagnosed with an illness or infectious disease, the Service will refer to information about recommended exclusion periods from the [Public Health Unit](#) (PHU) and *Staying healthy: Preventing infectious diseases in early childhood education and care services*.

- When an infectious disease has been diagnosed, the Service will display appropriate documentation and alerts for families including information on the illness/disease, symptoms, infectious period and

<b>Document Title</b>	Illness Children Policy		<b>Page No.</b>	7 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024		<b>Revision Date</b>	July 2025

the exclusion period. This reduces the risk during the infectious period of team members and children contracting the illness. (This information can be obtained from *Staying healthy: Preventing infectious diseases in early childhood education and care* and Public Health Unit, or Department of Health).

- Management will check all children’s Immunisation records and alert parents as required
- An educator can ask for a medical clearance from the child’s General Practitioner stating that the child is cleared to return to the childcare setting will also be required before the child returns to care
- Children that have had diarrhoea and vomiting will be asked to stay away from the Service for 24 hours after symptoms have ceased to reduce infection transmission as symptoms can develop again after 24 hours in many instances. (If there is a Gastro/vomiting outbreak exclusion will be 48 hours)
- In addition to this, if a child has two or more loose bowels or one vomit, they will need to be picked up immediately and excluded for at least 24 hours from their last vomit or loose bowels (If there is a Gastro/vomiting outbreak exclusion will be 48 hours)
- Conjunctivitis exclusion until discharge stops.
- Children who have a suspected case of COVID-19 and meet the criteria for testing (fever, cough, sore throat, shortness of breath) are required to contact their GP or be tested at a COVID-19 testing clinic. Exclusion periods will apply if they have a confirmed case.

Notifying families and emergency contact

- It is a requirement of the Service that all emergency contacts are able to pick up an ill child within a 45-minute timeframe
- If staff are concerned for the child’s welfare or the child becomes unresponsive, while waiting for parents/families to collect an ambulance will be called.
- In the event that the ill child is not collected in a timely manner, or should parents refuse to collect the child, the service will make contact with emergency contacts on your enrolment form.

MANAGEMENT AND EDUCATORS WILL ENSURE:

- effective hygiene policies and procedures are adhered to at all times to prevent the spread of illnesses
- they promote effective hand hygiene and cough etiquette
- effective environmental cleaning policies and procedures are adhered to all times
- all families are provided access to relevant policies upon enrolment which will be explained by management including: *Control of Infectious Diseases Policy, children who are ill Policy, Incident, Injury, Trauma and Illness Policy and Medical Conditions Policy.*

Document Title	Illness Children Policy		Page No.	8 of 7
National Quality Standard: Quality Area:	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		Document Version	V3. 2023
Last Revised	July 2024	Revision Date	July 2025	



- families are provided with relevant information from a trusted source about preventing the spread of illnesses
- that any child who registers a temperature of 37.8°C or above is collected from the Service and excluded for 24 hours after the last elevated temperature *or* until the Service receives a doctor’s clearance letter stating that the child is cleared of any infection and able to return to childcare
- families of a child with complex and chronic medical conditions will be notified in the event of an outbreak of an illness or infectious disease that could compromise their health
- families are notified to collect their child if they have vomited or had diarrhoea whilst at the Service.

THE APPROVED PROVIDER OR NOMINATED SUPERVISOR WILL ENSURE

- notification is made to the Regulatory Authorities within 24 hours of any incident involving serious injury or trauma to, or illness of, a child while being educated and cared for by an Education and Care Service, which:
  - (i) a reasonable person would consider required urgent medical attention from a registered medical practitioner *or*
  - (ii) for which the child attended, or ought reasonably to have attended, a hospital. For example: whooping cough, anaphylaxis reaction
- any incident or emergency where the attendance of emergency services at the Education and Care Service premises was sought, or ought reasonably to have been sought (eg: severe asthma attack, seizure or anaphylaxis)
- parents or guardians are notified as soon as practicable and no later than 24 hours of the illness, accident, or trauma occurring.

PARENT/FAMILY RESPONSIBILITY

In order to prevent the spread of disease, families are required to monitor their child’s health and not allow them to attend childcare if they have an infectious illness or display symptoms of an illness.

For children who have ongoing medical needs such as asthma or anaphylaxis, parents should regularly review their child’s health care action plans to ensure educators and other staff are able to manage their individual needs as required.

Families should implement effective hygiene routines at home such as regular handwashing and sneeze and cough routines (use of tissues, covering their mouth with coughing, sneezing into a tissue or elbow).

<b>Document Title</b>	Illness Children Policy		<b>Page No.</b>	9 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024	<b>Revision Date</b>	July 2025	

Families should notify the Service if their child has been unwell in the past 24 hours or someone in the family is/has been sick. This is particularly critical during a pandemic such as COVID-19 or an outbreak of other infectious illnesses such as influenza, gastroenteritis etc. *Please note- There is a separate document in regard to Covid-19 policies and procedures.*

Signs of illness in young children may include:

- runny, green nasal discharge
- high temperature
- diarrhoea
- red, swollen or discharging eyes (bacterial conjunctivitis)
- vomiting
- rashes (red/purple)
- irritability, unusually tired or lethargic
- drowsiness
- poor circulation
- poor feeding
- poor urine output
- a stiff neck or sensitivity to light
- pain
- mouth sores that cause drooling
- impetigo

Parents should seek medical attention should their child (or other family members) develop symptoms such as:

- high fever
- uncontrolled coughing or breathing difficulties

Families are required to keep up to date with their child’s immunisation, providing a copy of the updated AIR Immunisation History Statement to the Service following each immunisation on the National Immunisation Schedule.

[Returning to care after surgery/hospital/infectious illness/splints/casts](#)

<b>Document Title</b>	Illness Children Policy	<b>Page No.</b>	10 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1	<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024	<b>Revision Date</b>	July 2025

Children who have undergone any type of surgery, or has been admitted to hospital for other illnesses will need to take advice from their doctor/surgeon as to when it is appropriate and safe to return to childcare. A medical clearance statement Will be required to ensure the child is fit and able to return to the Service and participate in daily activities.

A medical clearance from a doctor or specialist will be required when children have ongoing and unexplained symptoms for example, loose bowels, rashes, cough, runny nose for the wellbeing of the child and for the wellbeing and duty of care to all who attend the centre.

*The service reserves the right to assess the child's fitness regardless of a medical clearance/certificate, and determine whether the child poses no risk to themselves or others within the service and can approve a child's return to care.*

PLEASE NOTE:-Staying healthy in Child care states the following on page 14

Education and care services should not be influenced by letters from doctors stating that the child can return to care, unless the child's condition fulfils the criteria for returning to care. Sometimes doctors can make different diagnoses for children in the same education and care service with illnesses that appear similar. It is the doctor's role to make the diagnosis, but education and care services can use the information in Staying healthy to decide on their response to an illness (e.g. the required exclusion time)

SOURCE

Australian Children's Education & Care Quality Authority. (2014).  
 Australian Government Department of Education, Skills and Employment *Belonging, Being and Becoming: The Early Years Learning Framework for Australia*. (2009).  
 Australian Government- Department of Health <https://www.health.gov.au/>  
 Australian Government Department of Health Australian Health Protection Principal Committee (AHPPC) Education and Care Services National Law Act 2010. (Amended 2018).  
[Education and Care Services National Regulations](#). (2011).  
 Guide to the National Quality Standard. (2020)  
 National Health and Medical Research Council (NHMRC): <https://www.nhmrc.gov.au/>  
 National Health and Medical Research Council. (2012) (updated June 2013). *Staying healthy: Preventing infectious diseases in early childhood education and care services*.  
*Public Health Act 2010*  
 Raising Children Network: <https://raisingchildren.net.au/guides/a-z-health-reference/fever>  
 Revised National Quality Standard. (2018).  
 The Sydney Children's Hospitals network (2020). <https://www.schn.health.nsw.gov.au/search/site?query=fever>  
 Safe Work Australia  
 Victoria Department of Education and Training (2020).  
<https://www.coronavirus.vic.gov.au/early-childhood-education-and-care>

<b>Document Title</b>	Illness Children Policy		<b>Page No.</b>	11 of 7
<b>National Quality Standard: Quality Area:</b>	2.1, 2.2, 5.1, 5.2, 6.1, 7.1		<b>Document Version</b>	V3. 2023
<b>Last Revised</b>	July 2024	<b>Revision Date</b>	July 2025	