



Tarralla Kindergarten Protocols and Procedures to Minimise and Manage Risks of COVID-19 Infection

Victorian Government Restrictions

Early childhood education and care update 23 August 2021

Please contact the kindergarten immediately if your kindergarten child or a family or household member (person in close contact) has a confirmed case of coronavirus (COVID -19) or if the kindergarten child or a family member is a confirmed '*close contact*' of a person who has a confirmed case of COVID-19.

Dear Tarralla Families,

The Victorian Government has announced new restrictions introduced from 1pm Saturday 21 August 2021 to help slow the spread of COVID-19. These updated protocols will apply to any person (child, staff or visitor) that attends the kindergarten from Monday 23 August, until a new update is provided by Tarralla Kindergarten.

Due to recent transmissions in young people and the recent addition of early childhood education and care (ECEC) services as exposure sites, the Victorian Government has advised that all ECEC services across Victoria will be closed except for children whose parents/carers are Authorised Workers and for vulnerable children.

A child may access ECEC where one parent is an authorised worker (working on site or from home) and there is no appropriate alternative care available in the home. A parent or carer must demonstrate their eligibility by producing a valid Authorised Worker Permit (Childcare/kindergarten version). Previously issued Authorised Worker Permits will need to be reissued for authorised workers eligible to use ECEC, with the childcare/kindergarten section completed. ECEC services must sight authorised worker permits. Parents/carers are required to carry permits to access kindergarten service.

Key changes / highlights

Visitors	Only visitors essential to operations are permitted on site. Visitors must comply with density limits, face mask requirements and electronic record keeping requirements by checking in using Service Victoria QR codes. Essential visitors must sign in via the visitors register.
Mask wearing	People aged 12 years and over must wear a fitted face masks when in public indoor and outdoor spaces unless there is lawful reason not to. Face masks must be carried at all times. Face masks must be worn during drop off and pick up time. Teachers, educators, and education support staff are not required to wear face masks when working with children.
Child drop off and pick up	To allow a smoother transition at drop off and pick up time, educators will sign your child in and out. Parents and carers being on time at the beginning and the end of session is important as it reduces disruption to the class and educators increased cleaning protocols at the end of session.
Unwell children	Teachers and educators will be vigilant with children and staff wellbeing. Any child who shows even the mildest of symptoms must stay at home. If a child becomes unwell during the day, they must be collected from kindergarten as soon as possible. If a child has any symptoms coronavirus, they must be tested and remain at home until they receive results
Incursions	Not allowed at this time
Excursions	Not allowed at this time
Onsite events and meetings	Not allowed.

On site orientation and transition programs	Not allowed.
Mental Health and Wellbeing	Your mental health and wellbeing is important. A list of support and resources to support you and your family through this time are attached to this document. See attachment 1.

Kindergarten attendance

To minimise the risk of exposure to COVID-19 for kindergarten children, staff and families the table below summaries the situations in which a child may or may not attend the kindergarten. Please note, our approach is more precautionary than current recommendations, and takes into consideration the unique characteristics of our kindergarten community.

Kindergarten Attendance Restrictions for COVID-19		
Situation	Child, family or household member has COVID-19 symptoms [#] but has not been tested*	Child must not attend Tarralla Kindergarten and must get tested immediately.
	Child, family or household member has COVID-19 symptoms [#] , has sought medical advice and been advised that testing is not required.	Child can return to Tarralla Kindergarten so long as they are symptom free and feeling well
	Child, family or household member has been tested, and is awaiting test results	Child must not attend Tarralla Kindergarten.
	Child, family or household member has been tested for COVID-19, and has a negative result	Child can return to Tarralla Kindergarten so long as they are symptom free and feeling well
	Child, family or household member has been tested for COVID-19, and has a positive result	Child must not attend Tarralla Kindergarten. Notify Tarralla Kindergarten and follow DHHS advice.
<p>If a child, family member or educator has a confirmed case of coronavirus (COVID-19) or has been in 'close contact' with someone with a confirmed case they cannot attend the kindergarten and must inform the kindergarten immediately. DHHS will provide further advice on processes to follow.</p> <p>DHHS defines 'close contact' as someone who has either a) had at least 15 minutes of face-to-face contact with someone with a confirmed case of COVID-19 or b) shared a close space for more than two hours with someone with a confirmed case.</p>		

COVID-19 symptoms include: loss or change in sense of smell or taste, fever, chills or sweats, cough, sore throat, shortness of breath, runny nose, headache, muscle soreness, stuffy nose, nausea, vomiting and diarrhoea.

* Advice from Victoria's Chief Health Officer is that anyone who exhibits symptoms of coronavirus (COVID-19), however mild, needs to get tested, stay home and not attend the service (Tarralla Kindergarten).

A doctor's letter stating a child can attend kindergarten does not overrule the Education and Care Services guidelines to decide on our response to an illness. The kindergarten may still request that the child be excluded from the Kindergarten as per the Kindergarten's policies and/or govt guidelines.

During this pandemic even slight symptoms consistent with coronavirus (COVID-19) must be considered as a possible positive case and therefore treated accordingly.

If in doubt, please stay at home.

Children who are unwell or exhibit COVID-19 symptoms while at kindergarten

If educators feel a child is unwell or has any of the above symptoms, they are required to call parents to collect their child from the Kindergarten immediately. If the parents are unable to collect their child immediately they must arrange for an authorised person to collect their child. This is consistent with the Kindergarten's *Dealing with Infectious Diseases Policy*

Children with complex medical needs

Parents/carers of children with **complex medical needs** (including those with compromised immune systems), should seek advice from the child's medical practitioner to support decision-making about whether on-site education and care is suitable, noting that this advice may change depending on the status of the pandemic in Victoria.

Risk minimisation

As required by the Victorian Government the kindergarten has developed a COVID Safe Plan. We require your assistance with implementing this plan. To manage and minimise risks relating to COVID-19 we will continue to implement the following.

- We will restrict attendance of children, staff and visitors at the Kindergarten to those that are well, and from families / households where all members are well. It is the responsibility of parents / carers to ensure they adhere to these restrictions.
- We will continue to require that when collecting or delivering children, people over the age of 12 years old, wear a face mask in the entrance and foyer where it is difficult to maintain social distancing.
- Staff will take a child's temperature if they are concerned about their wellbeing. Children will not be able to remain at the Kindergarten if they record two temperature readings of 37.5°C or above and/or show symptoms of coronavirus. Medical advice should be sought.
- Staff will maintain social distancing from other staff as much as practical.
- Staff will wear a face mask when greeting families at the beginning and end of session. Teachers, educators, and education support staff are not required to wear face masks when working with children.
- Parents, carers, and staff will adhere to safe social distancing rules at all times. **Physical distancing between adults remains important.**
- We will continue to have strict protocols for essential visitors. On arrival, visitors must register with the kindergarten's QR code, complete the visitors book and adhere to the Kindergarten's COVIDSafe Plan.
- We will continue to provide hand sanitiser at the entrance of the kindergarten and throughout the Kindergarten
- We will continue to maintain, and encourage with the children, good hand and cough hygiene.
- We will be vigilant and call families to collect their child if they show any signs of illness.
- We will continue to undertake our increased regime of environmental cleaning and disinfection.

Management of children who record high temperatures

Staff will take a child's temperature if they are concerned about their wellbeing. Children will not be able to attend the kindergarten if they record two temperature readings of 37.5° or above, or have had fever reduction medication in the last 12 hours. Children will not be able to attend if they are deemed as unwell or show any signs of coronavirus. Further detail is in the table below.

Temperature reading	Required action
Less than 37.5 °C	Child able to attend service, if otherwise well
Equal to or greater than 37.5 °C on first reading	The child should be asked to wait in a separate area and have their temperature re-checked in 15 minutes. If the child is wearing outerwear, the educator may suggest the child remove this once they are indoors.
Equal to or greater than 37.5 °C on second reading	The child should return home with their parent/carer. If their parent/carer is not present, the child will need to be isolated and the parent/carer contacted to collect them from the service as soon as possible. Families should be encouraged to seek the advice of their healthcare professional who can advise on next steps and coronavirus (COVID-19) testing.
Fever Reduction Medication	Children cannot attend kindergarten if they have taken fever reduction medication in the last 12 hours.

We are regularly reviewing our practices to ensure they are in line with AHPPC (Australian Health Protection Principal Committee), DHHS updates and Department of Education and Training recommendations. It is important that our protocols and procedures are not impeding on children's learning and development whilst maintaining a safe and protected environment.

If you have any feedback please speak to the teachers, educators or the Committee as we are all working together to ensure a smooth, safe and happy learning environment.

Kind regards

Chriss Ryan

Director

Attachments

1. Support Services Contact List
2. Dealing with Infectious Diseases Policy

Attachment 1

Support Services for Adults and Families

If you require support at this difficult time, please contact one of the following for 24 hour counselling services:

- Lifeline Australia | 13 11 14
- Kids Helpline | 1800 55 1800
- Mens Line Australia | 1300 78 99 78
- Suicide Call Back Service | 1300 659 467
- Beyond Blue | 1300 22 4636
- Open Arms – Veterans & Families Counselling | 1800 011 046
- EDVOS (<https://www.edvos.org.au/>) – Family Violence Support Service for Women and Children | 9259 4200
- Headspace
- Black Dog Institute

Attachment 2

DEALING WITH INFECTIOUS DISEASES POLICY

Mandatory – Quality Area 2

Important note: A pandemic is an epidemic of an infectious disease that has spread across a large region, for instance multiple continents or worldwide, affecting a substantial number of people. ELAA advises that the contents of this policy are relevant to a pandemic event. In considering what actions are required by an Approved Provider, information and guidance provided by the Australian Health Protection Principal Committee (AHPPC), Victorian Government, the Department of Health and Human Services (DHHS) and the Department of Education and Training (DET) should be followed and adhered to.

Purpose

This policy will provide clear guidelines and procedures to follow when:

- a child attending Tarralla Kindergarten shows symptoms of an infectious disease
- a child at Tarralla Kindergarten 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
- managing and minimising infections relating to epidemics (refer to *Definitions*) and pandemics (refer to *Definitions*) (e.g. coronavirus (COVID-19))

Policy statement

Values

Tarralla Kindergarten 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
- preventing the spread of vaccine-preventable diseases
- complying with current exclusion schedules and guidelines set by the Department of Health and Human Services (DHHS)
- complying with the advice of the Australian Health Protection Principal Committee (AHPPC), Victorian Chief Health Officer and DHHS
- providing up-to-date information and resources for families and staff regarding protection of all children from infectious diseases and blood-borne viruses, management of infestations and immunisation programs.

Tarralla Kindergarten supports 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 Tarralla Kindergarten are committed to preventing the spread of infectious diseases through simple hygiene practices such as hand washing, effective cleaning procedures and assessing acceptable immunisation documentation and complying with recommended exclusion guidelines and timeframes for children and educators/staff

Scope

This policy applies to the Approved Provider, Person with Management or Control, Nominated Supervisor, Person in day-to-day Charge, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Tarralla Kindergarten, including during offsite excursions and activities.

Background and legislation

Background

Infectious diseases are common in children. Infectious diseases such as the Chicken Pox, Common Cold, Measles and Mumps, are common in children and adults are also susceptible.

Children are at a greater risk of exposure to infections in a children's service than at home due to the amount of time spent with a large number of other children.

The DHHS publishes the *Minimum Period of Exclusion from Primary Schools and Children's Services Centres for Infectious Diseases Cases and Contacts*, to assist in protecting the public by preventing, or containing, outbreaks of infectious conditions common in schools and children's services and is regulated by the *Public Health and Wellbeing Regulations 2019*.

During an epidemic or pandemic, further instruction and guidance may be issued by the DHHS and the Australian Health Protection Principal Committee (AHPPC).

An approved service must take reasonable steps to prevent the spread of infectious diseases at the service, and ensure that the parent/guardian, authorised nominee or emergency contact of each child enrolled at the service is notified of the occurrence of an infectious disease as soon as possible. The service must have policies and procedures in place for dealing with infectious diseases (Regulation 88 of the *Education and Care Services National Regulations 2011*). The service has a duty of care to ensure that everyone attending the service is provided with a high level of protection during all hours that the service is in operation. Protection can include:

- notifying (as soon as practicable) children, families and educators/staff when an excludable illness/disease is detected at the service
- complying with relevant health department exclusion guidelines, advice and information
- increasing educator/staff awareness of cross-infection through physical contact with others.

The Victorian Government offers an immunisation program for children to assist in preventing the spread of infectious diseases. There is also 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.

Early childhood education and care services that are regulated under the *Education and Care Services National Law Act 2010* have obligations under No Jab No Play legislation (*Public Health and Wellbeing Act 2008*), including to request, assess and manage immunisation documentation and to assist parents/carers and families who may face difficulties in meeting the requirements (refer to *Enrolment and Orientation Policy*).

Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011*: Regulation 88
- *Family Assistance Legislation Amendment (Jobs for Families Child Care Package) Act 2017*
- *Health Records Act 2001*
- *National Quality Standard*, Quality Area 2: Children's Health and Safety
- *National Quality Standard*, Quality Area 6: Collaborative Partnerships with Families and Communities
- *No Jab No Play Law (Vic)*
- *Occupational Health and Safety Act 2004*
- *Privacy and Data Protection Act 2014 (Vic)*
- *Privacy Act 1988 (Cwlth)*
- *Public Health and Wellbeing Act 2008*

COVID-19 Practices and Procedures Letter to Families. Update 23 August 2021

- *Public Health and Wellbeing Regulations 2019*

Definitions

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of PolicyWorks.

Blood-borne virus (BBV): A virus that is spread when blood from an infected person enters another person's bloodstream. Examples of blood-borne viruses include human immunodeficiency virus (HIV), hepatitis B, hepatitis C and viral haemorrhagic fevers. Where basic hygiene, safety, infection control and first aid procedures are followed, the risks of contracting a blood-borne virus are negligible.

Communicable Disease Section: Responsibility for communication and advice in relation to infectious diseases on behalf of the Secretary of the Victorian DHHS.

Epidemic: is an outbreak of a contagious disease that spreads rapidly and extensively, and affects many individuals simultaneously in an area or population.

Exclusion: Inability to attend or participate in the program at the service.

Illness: Any sickness and/or associated symptoms that affect the child's normal participation in the program at the service.

Infection: The invasion and multiplication of micro-organisms in bodily tissue.

Infestation: The lodgement, development and reproduction of arthropods (such as head lice), either on the surface of the body of humans or animals, or in clothing.

Infectious disease: An infectious disease designated by the Communicable Disease Section (refer to *Definitions*), Victorian DHHS as well as those listed in Schedule 7 of the *Public Health and Wellbeing Regulations 2019*, the Minimum Period of Exclusion from Primary Schools, Education and Care Service Premises and Children's Centres for Infectious Diseases Cases and Contacts.

Medication: Any substance, as defined in the *Therapeutic Goods Act 1989* (Cwlth), that is administered for the treatment of an illness or medical condition.

Minimum exclusion period: The minimum period for excluding any person from attending a children's service to prevent the spread of infectious diseases as specified in Schedule 7: Minimum Period of Exclusion from Primary Schools and Children's Services for Infectious Diseases Cases and Contacts of the *Public Health and Wellbeing Regulations 2019*, the. An infringement penalty for failure to exclude a child with, or exposed to, a specified infectious disease applies (applicable to a person in charge). The exclusion period table, published by the DHHS, can be accessed at <https://www2.health.vic.gov.au/public-health/infectious-diseases/school-exclusion/school-exclusion-table>.

Pandemic: is an epidemic (refer to Definitions) occurring worldwide, or over a wide geographic area and affecting a large proportion of the population.

Pediculosis: Infestation of head lice that is transmitted by having head-to-head contact with another person who has head lice. Pediculosis does not contribute to the spread of any infectious diseases, and outbreaks of this condition are common in schools and childcare facilities.

Serious incident: A serious incident (regulation 12) is defined as any of the following:

- the **death of a child** while being educated and cared for at the service or following an incident while being educated and cared for by the service
- any **incident involving serious injury or trauma to a child** while the child is being educated and cared for, which:
 - a reasonable person would consider required urgent medical attention from a registered medical practitioner; or
 - the child attended or ought reasonably to have attended a hospital e.g. a broken limb*

- any **incident involving serious illness of a child** while that child is being educated and cared for by a service for which the child attended, or ought reasonably to have attended, a hospital e.g. severe asthma attack, seizure or anaphylaxis*

NOTE: In some cases (for example rural and remote locations) a General Practitioner conducts consultation from the hospital site. Only treatment related to serious injury, illness or trauma is required to be notified, not other health matters.

- any emergency for which **emergency services** attended

NOTE: This means an incident, situation or event where there is an imminent or severe risk to the health, safety or wellbeing of a person at an education and care service. It does not mean an incident where emergency services attended as a precaution.

- a child appears to be **missing or cannot be accounted for** at the service
- a child appears to have been **taken or removed** from the service in a manner that contravenes the National Regulations
- a child was mistakenly **locked in or out of the service** premises or any part of the premises.

Notifications of serious incidents should be made to the regulatory authority (DET) through the [NQA IT System](#). If this is not practicable, the notification can be made initially in whatever way is best in the circumstances.

NOTE: some of serious incidents above are also reportable incidents under the *Occupational Health and Safety Act 2004* and require notification to WorkSafe.

Sources and related policies, PROTOCOLS AND PROCEDURES

Sources

- Communicable Disease Section, Public Health Group, Victorian Department of Health & Human Services (2011), *The Blue Book: Guidelines for the control of infectious diseases*. Available at: <https://www2.health.vic.gov.au/about/publications/researchandreports/The-blue-book>
- Communicable Disease Section, Victorian Department of Health & Human Services (2019), *A guide to the management and control of gastroenteritis outbreaks in children's centres*. Victorian Government, Melbourne: <https://www2.health.vic.gov.au/about/publications/researchandreports/A-guide-to-the-management-and-control-of-gastroenteritis-outbreaks-in-childrens-centres>
- National Immunisation Program, Department of Health, Australian Government: <https://www.health.gov.au/initiatives-and-programs/national-immunisation-program>
- Department of Health & Human Services, Victoria (2012) *Head lice management guidelines*: <https://www2.health.vic.gov.au/about/publications/policiesandguidelines/Head-lice-management-guidelines>
- *Immunisation Enrolment Toolkit for early childhood services*: <https://www2.health.vic.gov.au/public-health/immunisation/vaccination-children/no-jab-no-play/immunisation-enrolment-toolkit>
- *Guide to the Education and Care Services National Law and the Education and Care Services National Regulations 2011* (2017), ACECQA: <https://www.acecqa.gov.au/sites/default/files/2018-01/NQF-Resource-02-Guide-to-ECS-Law-Regs.pdf>
- *Guide to the National Quality Standard* (2017), ACECQA: <https://www.acecqa.gov.au/sites/default/files/acecqa/files/National-Quality-Framework-Resources-Kit/NQF-Resource-03-Guide-to-NQS.pdf>
- National Health and Medical Research Council (2013) *Staying Healthy: Preventing infectious diseases in early childhood education and care services* (5th edition): <https://www.nhmrc.gov.au/about-us/publications/staying-healthy-preventing-infectious-diseases-early-childhood-education-and-care-services>
- Information about immunisations, including immunisation schedule, DHHS: www.health.vic.gov.au/immunisation
- *Tarralla Protocols and Procedures to Minimise and Manage Risks of COVID19 Infection*. A copy of this document can be requested from the Tarralla Kindergarten Director.
- WorkSafe, Victoria (2008) *Compliance code: First aid in the workplace*: <https://www.worksafe.vic.gov.au/resources/compliance-code-first-aid-workplace>
- Statements Section for statements on health emergencies, AHPPC. Available at: <https://www.health.gov.au/committees-and-groups/australian-health-protection-principal-committee-ahppc>

Service policies

- *Administration of First Aid Policy*
- *Administration of Medication Policy*
- *Dealing with Medical Conditions Policy*
- *Enrolment and Orientation Policy*
- *Hygiene Policy*
- *Incident, Injury, Trauma and Illness Policy*
- *Inclusion and Equity Policy*
- *Occupational Health and Safety Policy*
- *Privacy and Confidentiality Policy*

Procedures

The Approved Provider and Person with Management or Control are responsible for:

- ensuring that where there is an occurrence of an infectious disease at the service, reasonable steps are taken to prevent the spread of that infectious disease (Regulation 88(1))
- ensuring that 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 (Regulation 88(2))
- ensuring that information from the DHHS about the minimum exclusion periods (refer to *Definitions*) is displayed at the service and is available to all stakeholders including staff, parents/guardians, students and volunteers
- ensuring that a child is excluded from the service in accordance with the minimum exclusion periods (refer to *Definitions*) when informed that the child is infected with an infectious disease (refer to *Definitions*) or has been in contact with a person who is infected with an infectious disease (refer to *Definitions*) as required under Regulation 111(1) of the *Public Health and Wellbeing Regulations 2019*
- contacting the Communicable Disease Section, DHHS (refer to *Definitions*) if there is an outbreak of two or more cases of gastrointestinal illness in a 48-hour period
- ensuring obligations under No Jab No Play legislation (*Public Health and Wellbeing Act 2008*), including to request, assess and manage immunisation documentation and to assist parents/carers and families who may face difficulties in meeting the requirements are met (refer to *Enrolment and Orientation Policy*)
- ensuring when directed by the Chief Health Officer, that a child who is at material risk of contracting a vaccine-preventable disease is excluded until the Chief Health Officer directs that attendance can be resumed (Regulation 111(24) of the *Public Health and Wellbeing Regulations 2019*)
- notifying DET within 24 hours of a serious incident (refer to *Definitions*) via the [NQA ITS](#)
- supporting the Nominated Supervisor and the educators/staff at the service to implement the requirements of the minimum exclusion periods
- 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
- ensuring that the Nominated Supervisor, staff and everyone at the service adheres to the *Hygiene Policy* and the procedures for infection control relating to blood-borne viruses (refer to Attachment 3)
- ensuring that appropriate and current information and resources are provided to all staff and parents/guardians regarding the identification and management of infectious diseases, blood-borne viruses and infestations
- keeping informed about current legislation, information, research and best practice
- ensuring that any changes to the exclusion table or immunisation laws are communicated to all staff and parents/guardians in a timely manner
- complying with the advice of the Australian Health Protection Principal Committee (AHPPC), Victorian Chief Health Officer and DHHS in an epidemic or pandemic event (refer to Attachment 4).

The Nominated Supervisor and Person in Day-to-Day Charge are responsible for:

- ensuring that where there is an occurrence of an infectious disease at the service, reasonable steps are taken to prevent the spread of that infectious disease (Regulation 88(1))

- ensuring that 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 (Regulation 88(2))
- ensuring that information from the DHHS about the minimum exclusion periods (refer to *Definitions*) is displayed at the service and is available to all stakeholders including staff, parents/guardians, students and volunteers
- ensuring that a child is excluded from the service in accordance with the minimum exclusion periods (refer to *Definitions*) when informed that the child is infected with an infectious disease (refer to *Definitions*) or has been in contact with a person who is infected with an infectious disease (refer to *Definitions*) as required under Regulation 111(1) of the *Public Health and Wellbeing Regulations 2019*
- contacting the Communicable Disease Section (refer to *Definitions*) if there is an outbreak of two or more cases of gastrointestinal illness in a 48 hour period
- 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*).

As a demonstration of duty of care and best practice, ELAA recommends that **all educators** have current approved first aid qualifications and anaphylaxis management training and asthma management training

- establishing good hygiene and infection control procedures, and ensuring that they are adhered to by everyone at the service (refer to *Hygiene Policy* and Attachment 3 – Procedures for infection control relating to blood-borne viruses)
- ensuring the exclusion requirements for infectious diseases are adhered to as per the 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
- contacting the advising parents/guardians on enrolment that the minimum exclusion periods will be observed in regard to the outbreak of any infectious diseases or infestations (refer to: <https://www2.health.vic.gov.au/public-health/infectious-diseases/school-exclusion/school-exclusion-table>).
- 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
- ensuring that parents/guardians understand that they must inform the Approved Provider or Nominated Supervisor as soon as practicable if the child is infected with an infectious disease or infestation, or has been in contact with a person infected with a condition for which the exclusion of contacts is specified (Regulation 110, *Public Health and Wellbeing Regulations 2019*)
- providing information and resources to parents/guardians to assist in the identification and management of infectious diseases and infestations
- ensuring all families have completed the consent to conduct head lice inspections on the enrolment form
- conducting head lice inspections whenever an infestation is suspected, which involves visually checking children's hair and notifying the Approved Provider and parents/guardians of the child if an infestation of head lice is suspected
- providing a *Head lice action form* (Attachment 1) to the parents/guardians of a child suspected of having head lice
- providing a *Head lice notification letter* (Attachment 2) to all parents/guardians when an infestation of head lice has been detected at the service
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*)
- complying with the advice of the Australian Health Protection Principal Committee (AHPCC), Victorian Chief Health Officer and DHHS in an epidemic or pandemic event (refer to Attachment 4).

All 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 completed the *consent form to conduct head lice inspections* on the enrolment form

- 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 and the procedures for infection control relating to blood-borne viruses (refer to Attachment 3)
- maintaining confidentiality at all times (refer to *Privacy and Confidentiality Policy*)
- complying with the advice of the Australian Health Protection Principal Committee (AHPPC), Chief Health Officer and DHHS in an epidemic or pandemic event (refer to Attachment 4).

Parents/guardians are responsible for:

- keeping their child/ren at home if they are unwell or have an excludable infectious disease (refer to *Definitions*)
- informing the Approved Provider, Nominated Supervisor or Persons in Day-to-Day Charge as soon as practicable if their child has an infectious disease (refer to *Definitions*) or has been in contact with a person who has an infectious disease (Regulation 110 of the *Public Health and Wellbeing Regulations 2019*)
- complying with the minimum exclusion periods (refer to *Definitions*) or as directed by the Approved Provider or Nominated Supervisor after the Chief Health Officer directed them to exclude a child enrolled who the Chief Health Officer has determined to be at material risk of contracting a vaccine-preventable disease (Regulation 111(2) of the *Public Health and Wellbeing Regulations 2019*)
- 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* and the procedures for infection control relating to blood-borne viruses (refer to Attachment 3) when in attendance at the service.

Volunteers and students, while at the service, are responsible for following this policy and its procedures.

Evaluation

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- regularly seek feedback from educators, staff, parents/guardians, children, management and all affected by the policy regarding its effectiveness
- monitor the implementation, compliance, complaints and incidents in relation to this policy
- ensure that all information related to infectious diseases on display and supplied to parents/guardians is current
- keep the policy up to date with current legislation, research, policy and best practice
- revise the policy and procedures as part of the service's policy review cycle, or as required
- notify parents/guardians at least 14 days before making any change to this policy or its procedures, unless a lesser period is necessary because of a risk.

Attachments

- Attachment 1: Head lice action form
- Attachment 2: Head lice notification letter
- Attachment 3: Procedures for infection control relating to blood-borne viruses
- Attachment 4: Actions for early childhood and care services in an epidemic or pandemic event

Authorisation

This policy has been provided to the Committee of Management for endorsement on 11 August 2020.

Review date: 11 August 2022

ATTACHMENT 4

ACTIONS FOR EARLY CHILDHOOD AND CARE SERVICES IN AN EPIDEMIC OR PANDEMIC EVENT

Early childhood education and care services should consider a variety of strategies to support physical distancing and good hygiene practices to reduce the risk of infection transmission within the practical limitations of an early learning environment.

The following actions are to be considered, adapted and implemented as necessary according to the education setting and the individual needs of the staff, children and the wider service community.

- Display educational materials, which can be downloaded and printed from the [Department of Health and Human Services \(DHHS\) website](#)
- Comply with National Health and Medical Research Council (NHMRC) guidance [Staying healthy: Preventing infectious diseases in early childhood education and care services](#)
- Alert your approved provider about any child or staff absenteeism due to an infectious outbreak.
- Keep parents and staff informed of the actions you are taking.

Actions

Perhaps the most important action early childhood services can take to reduce the risk of infection transmission is to ensure that any unwell staff and children remain at home.

Staff or children most at risk of severe illness should individually assess appropriateness for on-site attendance at this time, with support from their medical practitioner.

It is important that visitors to early childhood services are limited to those delivering or supporting essential services and operations during a pandemic situation.

- All unwell staff and children must stay home.
- Parents/carers of children with complex medical needs (including those with compromised immune systems), should seek advice from the child's medical practitioner to support decision-making about whether on-site education and care is suitable, noting that this advice may change depending on the status of the pandemic in Victoria.
- Additional staff, including parent volunteers, should be discouraged from attending the service at this time. Ensure vigilance is maintained through the use of the visitor signing in and out record book including their contact details.
- Parent information sessions and interviews should meet physical distancing requirements of 1.5 metres between adults, or else be replaced with virtual alternatives.

Hygiene

Everyone can protect themselves and prevent the spread of infection by continuing effective hand hygiene.

- All staff and children should undertake regular hand hygiene, particularly on arrival to the service, before and after eating, after blowing their nose, coughing, sneezing or using the toilet. You are a good role model for the children and their parents/carers, so actively talk about why everyone needs to wash their hands and the importance of everyone doing this.
- Make sure liquid soap and running water, or alcohol-based hand sanitiser, is available at the entrance of the facility and throughout.
- Tissues should be readily accessible with bins provided in each room and in outdoor areas for easy disposal.
- It is recommended that children do not drink directly from drinking fountains at this time. Children should bring their own water bottle for use (and refilling) at the service.
- Ensure the highest hygiene practices amongst food handlers as per NHMRC guidance [Staying healthy: Preventing infectious diseases in early childhood education and care services](#). Sharing of food should not occur.
- Use of mobile phones by staff should be discouraged. Staff should be reminded to clean their phones regularly.

Arrival and departure

To assist in minimising the spread of infection, procedures to reduce close proximity between attendees at the service should be considered.

- Consider the arrival and departure procedures for children and, where possible, minimise opportunities for parents and carers to gather in groups, especially in foyers and in children's play areas.
- It may be possible, for example, for children to be dropped off and picked up in the service entrance or foyer.
- While staggered start and finish times occur naturally in some service types, early childhood education and care services will often have one arrival and pick up time. Consider how the arrival and pick up time could be spread out. One example may be to divide the group and allocate times, noting that it is not expected that session times are extended to accommodate additional arrival and departure procedures.
- Greeting parents and children at the front door in the morning and during pick up times will allow for one-on-one communication with families while practising physical distancing and providing opportunities to consider whether children are showing any signs of being unwell.

As at 9 July 2020, daily temperature checks were introduced for services in metropolitan Melbourne and Mitchell Shire to curb the spread of coronavirus (COVID-19).

As at 10 July 2020, the Victorian Chief Health Officer recommended that people in metropolitan Melbourne and Mitchell Shire wear face masks in situations where physical distancing cannot be maintained. These recommendations apply to adults over the age of 18. Face masks should not be placed on children under two.

Victoria's Chief Health Officer has confirmed that the use of face masks or coverings by adults or children is not recommended in early childhood settings at this time.

A single use facemask or cloth mask made to DHHS standards is recommended for staff performing temperature checks. Note that a cloth mask must be washed after each use before being worn again.

Considerations for teaching and learning environments

Maintaining a physical distance of 1.5 metres will not be practical in early childhood services. Physical distancing is most important between adults.

Reducing mixing between different age or room groups is recommended as a precautionary measure to minimise risk of spread of transmission and aid containment.

- Consider small group play, staggered mealtimes and indoor/outdoor play opportunities whenever possible.
- Windows should be open during the day to promote air flow where possible.
- Consider the setup of the room and the placement of the activities and limit the number of whole group activities.
- Rather than having group times where everyone is sitting on the mat, consider using informal opportunities to engage with the children/read books/do storytelling with small groups of children at a time.
- For younger children, particularly consider the rotation of toys more often and increase the frequency of cleaning toys. Sharing of toys that have been placed in mouths should be monitored and avoided.
- Wherever possible and where you have enough staffing for adequate supervision, consider operating an indoor/outdoor program.
- A greater range of activities will encourage children and staff to spread out more broadly.
- Mixing of staff and children between rooms should be minimised where possible. It is acknowledged that staff may need to move between rooms to support breaks and, in these situations, staff should be reminded of the importance of hand hygiene.
- Where multiple staff are in a room, remind staff to maintain physical distancing from each other as much as practical.

Considerations for offices and staff facilities

- Close proximity between staff should be avoided, where possible, and especially in offices and staff rooms.

- Workstations should be spaced out as much as possible, and the number of staff in offices limited. Where possible, staff should use separate offices.
- Remind staff to maintain physical distancing from each other as much as possible in the reception, staff room and offices.

Cleaning and facilities management

- Environmental cleaning, coupled with regular hand hygiene, remains important to reduce the risk of infection transmission.
- Services should maintain full adherence to the NHMRC childcare cleaning guidelines, in addition:
 - clean and disinfect high-touch surfaces at least daily (e.g. play gyms, tables, hard-backed chairs, doorknobs, light switches, phones, remotes, handles, desks, toilets, sinks, kitchenware).
 - wash and launder play items and toys including washable plush toys, as appropriate, in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely.
 - note, disinfecting and cleaning of toys and equipment is not required after every use.
- Hand hygiene before and after use of shared equipment is recommended. (For example, prior to a new activity).
- Excursions should not be undertaken other than to local parks.

Provision of routine care and first aid

Physical distancing is not practical when providing direct care. In this situation, standard precautions, including hand hygiene, are important for infection control.

- Standard precautions are advised when coming in to contact with someone for the purpose of providing routine care, assistance or first aid. Also see NHMRC guidance [Staying healthy: Preventing infectious diseases in early childhood education and care services](#).
- Always wash hands with soap and water or use a hand sanitiser before and after performing routine care or first aid.
- Additional Personal Protective Equipment (PPE), for example face masks, is not required to provide routine care or first aid for children who are well.

Management of an unwell child or staff member

It is important that any staff member or child who becomes unwell while at an early childhood service returns home. Sensible steps services can take while a child awaits collection by a parent or carer as a precaution.

- Staff or children should be isolated in an appropriate space with suitable supervision and collected by a parent/carer as soon as possible.
- Where staff or children are experiencing compatible symptoms important actions to take include hand hygiene, physical distance and where possible putting on a face mask.
- Face masks should not be used in situations where an individual is unable to safely or practically tolerate a mask (e.g. a child with complex medical needs, including existing respiratory needs, and younger children).
- Urgent medical attention should be sought where indicated.
- Health care plans, where relevant, should be updated to provide additional advice on monitoring and identification of the unwell child in the context of an epidemic or pandemic.
- If a staff member is unsure whether a child is unwell, it is advisable in the first instance to contact the parent/carer to discuss any concerns about the health status of the child and, taking a precautionary approach, request the parent/carer to collect their child if concerns remain. A trained staff member could take the temperature of the child, where appropriate, to support decision making. Gloves should be worn for the purpose of taking a temperature.
- Staff or children experiencing compatible symptoms with the infection should be encouraged to seek the advice of a healthcare professional who can advise on next steps. A medical certificate is not required to return to an early childhood setting after a period of illness, however staff and children should not return until symptoms resolve.
- Follow cleaning guidance according to the situation of the case. If a child spreads droplets (for example by sneezing, coughing or vomiting), clean surfaces immediately with disinfectant wipes while wearing gloves.

Source

[*Health and safety advice for early childhood education and care services in the context of coronavirus \(COVID-19\)*](#),
Department of Education and Training and DHHS.