Barlu Kurli Preschool Procedure

Dealing with infectious diseases

Reviewed: Feb 2019



Education and care services regulation/s	NSW Department of Education policy, procedure or guidelines	Preschool Handbook reference	School policy or procedure, where applicable
Regulation 88 Regulation 168 (2)(c)	Student Health in NSW Public Schools: A summary and consolidation of policy PD/2004/0034/V01 Infection control information and support document Infection Control Procedure (PDF 452.69KB) Infectious diseases information		

Resources:

Staying healthy: Preventing infectious diseases in early childhood education and care services, 5thedition, 2013. Australian Government National Health and Medical Research

Physical health impacts on children's learning and development.

All Barlu Kurli Preschool staff, have a responsibility to: -

- Support the development of safe and healthy habits;
- Encourage physical activity;
- Promote eating nutritional and interesting food;
- Instil healthy eating habits;
- Promote daily living habits, attitudes and skills that encourage children to take responsibility for the wellbeing of themselves and others.
- Promote community health messages and make available space for breastfeeding mothers.

Barlu Kurli Preschool staff are responsible for helping children who have health support needs. This may include giving them prescribed medications, first aid (including emergency care), temporary care when they are sick, performing health care procedures and developing individual healthcare plans and risk assessments.

Barlu Kurli Preschool Procedure - Dealing with Infectious Diseases

Infection Control

- When children attend preschool their exposure to infectious conditions may increase simply because they have age-characteristic behaviours that help spread infection. They may also be exposed to other children who are contagious without recognisable symptoms. Therefore, children need guidance and support to develop good hygiene habits such as handwashing.
- The use of detergent or soap and water when doing basic cleaning such as wiping table surfaces and/or toys, and wearing gloves when required can reduce the risk of spreading infection amongst children, staff and visitors.
- The Regulations highlight the need to minimise health risks for young children by using appropriate health and hygiene practices. Regulation 77 (2) The nominated supervisor of an education and care service must implement, and ensure that all staff members of, and volunteers at, the service implement (a) adequate health and hygiene practices; and (b) safe practices for handling and storing food to minimise risks to children being educated and cared for by the service.
- The National Health and Medical Research Council and the Department's Standard Precautions for Infection Control recommend ways to reduce health risks which are exercised at Barlu Kurli Preschool: -
- Use of colour-coded cleaning cloths for different areas and cleaning uses (such as blue in the kitchen and red in the bathroom) ensuring all staff are aware of the code.
- Tissues, face cloths or cloth towels are not used for more than one child.
- Tissues are used when wiping a child's nose, after wiping a child's nose, wash hands thoroughly with soap and warm water, or use an alcohol-based hand rub.
- Gloves, paper towels and tissues are disposed of immediately after use into a container with a disposable lining.
- Children do not share sheets and pillowcases, cloth towels or other personal items.
- Hand basins are not used for food and drink preparation or rinsing soiled clothing.
- Care is taken with all bodily fluids, secretions and excreta.
- Use of disposable gloves at all times when dealing with bodily fluids, secretions or excreta.
- Display hygiene procedures in bathrooms, staff room and toilet areas.

- Parents should be encouraged to tell the class teacher if a family member has an
 infectious disease, as this can help reduce the risk of the infection spreading to
 others. Preschool staff will ensure that parents from culturally and linguistically
 diverse backgrounds are given information in their first language if necessary.
- Standard Precautions for Infection Control
- Standard Precautions for Infection Control should be used by all staff, students, visitors, volunteers and contractors to reduce the risk of transmission of infectious diseases during care procedures.

What are standard precautions?

- Standard Precautions in the workplace involve the use of safe work practices and protective barriers for the control of the spread of infection from both recognised and unrecognised sources of infection.
- It is not possible to reliably identify sources of infections or communicable diseases, therefore it is necessary to presume that the blood (including dried blood) and body substances of all persons be considered as potential sources of infection independent of diagnosis or perceived risk.

When do I use standard precautions?

 Standard Precautions must be used before and after care procedures, when providing first aid, when handling and disposing of sharps and contaminated material and when handling animals and potentially infectious agricultural substances.

There is a potential risk of infection when exposed to:

- Blood, including dried blood;
- All other body fluids, secretions and excretions, including saliva and mucous but excluding sweat;
- Broken skin;
- Mucous membranes e.g. mouth and nose.

Handwashing

Handwashing, including drying hands, is one of the most effective ways of preventing the spread of infection. Handwashing at Barlu Kurli Preschool will occur:

- On arrival at the centre
- After going to the toilet
- Before and after helping children with toileting (which may include nappy changing)
- Before and after giving first aid
- Before and after giving medication
- After wiping a child's nose

- Before and after eating or handling food
- After patting or touching animals
- Before and after preparing or cooking food
- Before and after using playdough
- Before and after applying sunscreen
- After contact with any bodily fluids, for example when toileting accidents occur or a child is sick

When teaching children to wash their hands we exercise the following points: -

- Use soap and running water
- Wash hands thoroughly while counting slowly from one to 10
- Wash all parts of the hands including sides and between the fingers
- Rinse hands well to remove soap
- Dry hands with warm automatic hand-dryer

Infectious Diseases: -

• The Education and Care Services National Regulations (regulation 88) requires that an infectious diseases policy is in place that outlines the practices to be followed. Children suffering from certain infectious diseases will be excluded from attending preschool. Staff always refer to the current NSW Health guidelines on exclusion and follow standard infection control procedures. If a child is suspected of having an infectious disease, for example chicken pox, they will be isolated from other children, made comfortable and supervised by a staff member until collected. If a child contracts a vaccine-preventable disease, preschool staff should tell the principal who will contact parents and the nearest public health unit if necessary. All parents must be told of any outbreak of an infectious disease at the preschool and asked to keep children with infectious diseases at home for the appropriate timeframe. This information can be found in the NSW Health fact sheet, Infectious Diseases of Children at http://www.health.nsw. gov.au/factsheets/infectious/chilldhoodillness.html. The child must also get a medical clearance from a doctor before they return to preschool.

What do I need to do?

Use good hygiene practices -

- Wash your hands after any contamination, following any care procedure and after any activity which involves contaminated substances whether or not gloves are worn.
- Take care of your skin as it is the first barrier to disease and protect damaged skin by covering with a waterproof dressing or by gloves.
- Use good handling and disposal procedures

- Minimise contact with potentially infectious substances by using personal protective equipment such as gloves, aprons, masks or goggles.
- Ensure that reusable equipment such as that used in first aid provision is cleaned after use and single use items are discarded after use.
- Follow the Department's procedures when handling and disposing of sharps and use a suitable sharps container.
- Dispose of other contaminated or infectious waste, such as from first aid or care procedures, in a plastic bag which is tied and inside a second bag, tied again and directly into skip bin.
- Contain all blood and body fluids i.e. confining spills, splashes and contamination of the environment.
- Clean up spills promptly.

4. Take prompt action if contact is made with blood or body fluids

 Wash skin with mild soap and water, rinse eyes with water, rinse your mouth and spit out.

Breathing, Blowing, Coughing, Chew Program (BBCC Program)

The BBCC program was developed by Ruth Barker, a physiotherapist from Alice Springs. It is a strategy used in schools throughout Australia. This program is effective as it actually reduces the causes of Otitis Media such as a cold, flu and asthma by improving the health of the respiratory tract.

Using the Valsva Method (holding nose and blowing air in mouth with the lips shut until the ears pop) assists in exercising the Eustachian tube. This method will improve the Eustachian tubes ability to drain any fluid in the middle-ear space.

Our 'Healthy Kids'- Blowing, Breathing, Coughing (BBC) Program;

- First I blow my nose. One side, then the other side
- Then I check if it's empty
- Then I hold my nose and blow my nose to pop my ears
- Then I take 5 deep breaths and have 2 big coughs
- I do 10 star jumps
- Then I take 5 deep breaths and 2 big strong coughs again
- I run around the big tree in the playground
- Then, last of all, I empty my nose, I pop my nose and have a big cough. That's all.

Care for Kids Ears

- At Barlu Kurli Preschool, educator ensures that intentional teaching occurs around ear health, effective hygiene practices and the prevalence of otitis media particularly in Aboriginal children.
- During preschool and primary school years many children suffer middle ear infections (Otitis Media) and mild hearing loss. Some studies suggest that up to 91% of Aboriginal and Torres Strait Islander children in rural communities present with Otitis Media (OM).
- Left untreated, ear infections can lead to hearing loss which may limit a child's capacity to develop socially and emotionally. Ear infections can also adversely affect educational outcomes.
- The Care for Kids' Ears kit for early childhood and community groups has been created to raise awareness of ear disease and hearing loss in Aboriginal and Torres Strait Islander communities. Featuring the characters Kathy and Ernie, the kit aims to deliver positive and consistent ear health messages to young children whilst also helping you, one of the most influential care providers of children, understand the ear health message.

A sample of this intentional teaching involves;

- Say 'Good Morning/Hello' in a local Aboriginal language; Paakindji
- 'Shared reading experience 'Healthy Ears, Happy Kids Story Book' by NSW Health.
- Yarning circle using the 'message stick', allow children to discuss the importance
 of looking after our ears; washing face/hands, blow your nose, eat fruit/veggies,
 keep away from cigarette smoke and get your ears checked regularly.
- Examine an ear model.
- 'Process of Hearing Animation' via YouTube.
- Demonstrate what happens if we don't use a tissue when blowing our nose using alitter.
- Demonstrate and instruct children through the correct nose blowing techniques to keep passage clear, blowing nose into elbow when sneezing and explain process at the 'nose blowing station'.
- Complete a listening task to check children's level of hearing by asking students to lie on the floor and close their eyes whilst the educator plays a variety of musical instruments, children to determine the sound via YouTube.
- Complete learning experience with a memory card game based on 'Care for Kids' Ears'.

Nappy changing and other toileting procedures: -

Equipment for nappy changing should include:

- Dispenser with disposable gloves
- Storage space for clean nappies and other necessary supplies
- Disposable wipes
- Paper towels
- Plastic bags for soiled clothes
- Foot-operated, plastic-lined bin for disposal of paper wipes, paper towel and disposable gloves
- Separate bin for disposal of nappies (available from contractors supplying sanitary napkin disposal units)

When changing nappies, the following procedures are to be used:

- Disposable gloves should be worn
- Children should be wiped with disposable wipes
- Paper wipes and gloves should be disposed of in a plastic-lined bin
- Nappies should be disposed of into an appropriate bin
- Children's hands should be washed after each nappy change
- Children should not be left unattended
- Adult's hands should be washed before putting on and after taking off gloves

NOTE: If children are still wearing nappies parents should provide nappies, disposable wipes and any creams that the child needs. Disposable nappies should be used to aid in infection control.

Our practice guide for urine or faeces and cleaning children after wetting or soiling themselves:

- Wear gloves
- Place paper towel over the spill and carefully remove paper towel and contents
- Place the paper towel and gloves in a plastic bag, seal the bag and put in the rubbish bin
- Put on new gloves and clean the surface with warm water and detergent and allow to dry
- Use disinfectant after cleaning if the spill came from a child suspected of having an infectious disease
- Remove and discard gloves
- Wash hands thoroughly with soap and warm water

If a child needs cleaning after wetting or soiling themselves the following procedures apply:

- Wear gloves and use pre-moistened disposable wipes
- Wet paper towels may be used as an alternative

- Ensure running water is used to wet the towels (not a bowl or sink full of water) and that towels are only used once
- Dispose of paper towels
- Place soiled clothes in a sealed plastic bag for parents to take home
- Remove gloves, discard them and wash hands thoroughly with soap and warm water

User guide for annual review and updating of this LP - Some points to address are;

- How will educators teach and model hygiene practices, particularly effective hand washing and nose blowing?
- Will you teach cough and sneeze etiquette?
- Method for displaying these practices as visual "cues" for children and families
- When and how will the children, educators and any visitors wash their hands?
- How will table-tops, mouthed toys, dirty linen, cleaning cloths, loaned hats etc. be cleaned?
- How do educators support children with their toileting?
- How and where are children with wet or soiled clothing changed into clean clothes?
- How are bodily fluid spills dealt with? ie. urine on a chair, vomit on the carpet
- Procedure for when a child arrives at preschool, obviously unwell
- Procedures staff will take if a child is suspected of having head lice
- Situations where a parent will be asked to collect their child, eq. if they have diarrhoea
- How will a child be isolated if they are suspected of having an infectious disease?
- How long will a child with an infectious disease be excluded from preschool (refer to exclusion periods in Staying Healthy in Childcare V. 5)?
- How will other families be notified if a child has an infectious disease?
- If this is a vaccine preventable disease, what will the process be for requesting unimmunised children stay home?
- How will educators implement Standard Precautions for Infection Control?

For further information, please refer to the DoE Handbook;

- Wellbeing Appendix 2.1 Standard precautions for infection control
- Wellbeing Appendix 2.3 Nappy changing and other toileting procedures
- Wellbeing Appendix 2.4 A good practice guide for spilt urine or faeces and cleaning children after wetting or soiling themselves