Health, Hygiene and Infectious Diseases Policy

Policy Number: 20

Date Updated: 26/6/26

Rationale and Policy Considerations

The education and care service understands it has a duty of care to ensure that all persons are provided with a healthy and safe environment in which to play and work. To this end all educators will be fully informed about their responsibilities to implement and adhere to the service's health policies and procedures.

All children have the right to develop to their full potential in an environment which provides for their health, safety and wellbeing. Effective hygiene strategies and practices assist services to protect all persons from, and minimise the potential risk of, communicable diseases. Experiences that promote basic hygiene awareness assist children to become competent and independent, and develop valuable life skills.

The Education and Care Services National Law (WA) Act 2012 requires that approved provider/nominated supervisor/coordinators take reasonable care to protect children from foreseeable risk of harm, injury and infection.

Most relevant policies and procedures

- Incident, injury, illness and first aid policy
- Educator Immunisation policy
- Workplace health and safety policy
- Sun protection policy
- Maintaining a safe environment
- Hand washing procedure
- Nappy changing and toileting procedure

Links to ECA Code of Ethics

- **Create and maintain safe, healthy environments, spaces and places, which enhance children's learning, development, engagement, initiative, self-worth, dignity and show respect for their contributions.**
- **Acknowledge the rights of families to make decisions about their children.**

Scope

All educators, children and families of Lifestreamers Early Learning.

Policy Statement

Lifestreamers Early Learning aims to promote a healthy and safe environment in which children will grow and learn about the world around them. The service is committed to protecting its stakeholders through the implementation and monitoring of simple hygiene and infection control strategies. The application of preventative measures through an infection control program aims to prevent the spread of infections and will be always followed by all people in the education and care service.

Policy Principles

Hygiene

- All educators are required to observe and maintain high standards of hygiene.
- Educators will be provided with training on infection control.
- Educators role model personal hygiene and discuss hygiene practices with children.
- Hand washing is considered to be the most effective way of controlling infections within the centre. (Department of Human Services, Communicable Disease Control Branch, "You've Got What!, p.5)

- Educators and children should wash their hands:
  - When arriving at the centre to reduce the introduction of germs.
  - Before all clean tasks e.g. handling, preparing and eating food, giving medications.
  - After all dirty tasks e.g. nappy changes, toileting, cleaning up faeces, vomit or blood, wiping a nose, playing outside, handling animals, removing gloves and handling rubbish.
  - Before going home to prevent taking germs home.
- The correct handwashing procedure is:
  - Wet hands thoroughly and lather with soap.
  - Rub hands vigorously for at least 10-15 seconds as you wash them.
  - Pay attention to back of hands, wrists, between fingers and under fingernails.
  - Rinse hands well under running water.
  - Dry hands with a disposable paper towel.
  - Turn off tap with used paper towel.
  - Dispose of paper towel.
- The service has provided an adequate number and placement of hand-washing basins and is committed to maintaining these in a hygienic and serviceable condition.
- Notices which clearly explain effective hand-washing procedures will be displayed next to hand washing basins.
- The service has access to laundry facilities that are adequate and appropriate for the needs of the service and are located and maintained in a way that prevents unsupervised access by children.
- Items returned to a child's home for laundering will have soiling removed and will be placed in a leak proof plastic bag and not placed in the child's bag in contact with personal items. It is not recommended that educators rinse soiled clothes due to risk of contaminating their clothing which can then be a source for transporting germs.
- Educators will use separate cloths or tissues to wipe different children's faces and noses. Tissues will be disposed of immediately after wiping a child's nose. Hand hygiene will be performed between each child after wiping noses and disposing of tissues.
- Educators will use colour coded cloths for cleaning different areas (i.e. red for bathroom, yellow for kitchen, blue for craft, green for general cleaning).
- The service will use warm water and detergent to clean up except where the public health authority recommends a particular disinfectant for an outbreak of an infectious disease.
- Toys will be washed regularly unless an outbreak of an infectious disease occurs, whereby the toys will be washed daily.
- Surfaces, floors, bathrooms and kitchen will be cleaned daily using current cleaning practices.
- Hot soapy water to dislodge and clean. "Effective cleaning with detergent and warm water, followed by rinsing and drying removes the bulk of germs from surfaces" (Dept. of Human Services, "You've got what?", 1998)

Toileting and Nappy Changing

- Nappy changing will be done only in the nappy change area which will be properly stocked with gloves, paper towels, plastic bags, fresh nappies, clean clothes, rubbish bin with sealed lid lined with plastic. After each nappy change the child's and educator's hands will be washed and the change table or mat cleaned with detergent and warm water. At the end of each day the nappy change area will be washed with warm water and detergent and left to dry. The procedure for nappy changing will be displayed in the nappy change area.
- Nappy change procedure is:
  - Wash hands
  - Prepare plastic bag and nappy
  - Place a piece of paper towel on the change table.
  - Put gloves on.
  - Place child on change mat, remembering to always have one hand on the child.
  - Remove the child's nappy and place it in the nappy bin.
  - Place soiled clothing into a plastic bag to be sent home. Soiled clothing will not be rinsed or washed at the centre as it can spread germs (Staying Healthy in Childcare, 2005, p.26)
  - Wipe the child's bottom with wipes
  - Ask the child if they wish to sit on the toilet or potty (as appropriate).
  - Remove gloves, put them in the plastic bag with paper towel and apply a clean nappy to the child.

- Dress the child
- Take the child off the bench and encourage them to wash their hands.
- Educator to wash hands.
- Escort child back to play area.
- Wash bench with warm soapy water and a paper towel to dry.
- Place dirty nappy in plastic bag into the bin outside.
- Wash hands.

- Educators will discuss signs of toileting readiness with parents and work with families to develop a consistent approach to toilet training. Educators will not begin the toilet training of a child until there are definite indications that the child is developmentally and emotionally ready.
- The service will ask families whose children are toilet training to supply several changes of clothing. Educators will follow recommended procedures for assisting children during toilet training and dealing with children's soiled clothes.
- Educators will always encourage children's efforts to develop independence.
- Nappy changing and toileting procedures are displayed in the nappy change and toileting areas.
- Educators will interact with children in a relaxed and positive way during nappy changing and toileting as this is an excellent time to continue verbal interactions with children especially as it is a one-to-one time.
- The service will ensure that developmentally and age-appropriate toilets, hand washing facilities and products are easily accessible to children. Children will be supervised and encouraged to flush toilets and wash and dry their hands after use.
- Incontinent children will never be embarrassed by educators regarding toileting habits. Educators will discourage any negatives from families within a child's hearing.

Cleanliness of Toys and Equipment

- Toys, equipment and dress up clothes will be washed regularly (e.g. daily, after being mouthed by a child and after being handled by a child who is sick, at the end of the programming cycle before being put away) in warm water and detergent, and one criteria for selecting new toys will be their ease to clean.
- Surfaces will be cleaned with warm soapy water and all surfaces cleaned thoroughly daily. Areas contaminated with blood or body fluids from someone with a known or suspected infectious diseases will be cleaned as per Staying Healthy in Childcare, depending on the size and type of spill.
- Each child will be provided with their own drinking and eating utensils at each mealtime. These utensils will be washed and sanitised in the dishwasher after each use. Educators will encourage children not to use drinking or eating utensils which have been used by another child or dropped on the floor.
- Educators will ensure that children do not eat food that:
    - has been dropped on the floor or;
    - has been handled by another child, except where that child has followed hygiene procedures and been involved in the preparation of the food
- The rules of hygiene will be included in the children's program and educators will initiate discussion about these subjects with groups and individual children at appropriate times.
- Any animal or bird kept at the education and care service will be kept in an area that is separate and apart from any area used for preparation or consumption of food and it and its environment will be maintained in a clean and healthy condition.
- Children will be supervised by an adult during contact with animals and discouraged from putting their faces close to animals. Children will wash and dry their hands after touching animals.
- Children are not to eat and drink while interacting with animals.

Immunisation against Infectious Disease

- Parents/Guardians must immunise their child against all diseases appropriate to the child's age. A record of the child's current immunisation status will be kept at the service.
- Children who do not have a complete immunisation record, are immunosuppressed or are who are receiving medical treatment causing immunosuppression, such as chemotherapy, will be excluded from care during outbreaks of some infectious diseases in accordance with the National Health & Medical Research Council exclusion guidelines, even if their child is well.
- All children enrolled after July 22, 2019 must be immunised according to the National Health and Medical Research Council exclusion guidelines.

- The service will keep a stock of up-to-date information/pamphlets for parents and educators on immunisation and common infectious diseases and will contact their public health unit if they have any questions regarding infectious diseases.
- All workers at the education care service will be encouraged to have all immunisations recommended in the service's Educator Immunisation Policy.

Exclusion due to Infectious Disease

- Information about the service's exclusion policy is in accordance with the National Health and Medical Research Council's exclusion periods.
- Children and educators with infectious diseases will be excluded from the service in accordance with the National Health and Medical Research Council guidelines.
- A medical certificate is required after contracting an infectious disease, which must state that the child/educator is well enough to return and does not pose a health risk to other attendees before the adult or child can be re-admitted to the service.
- The service will display a notice at the entrance, or use email, to notify educators, families of enrolled children and visitors to the service of exclusion due to infectious disease.
- Families or emergency contacts will be notified as soon as possible if an infectious disease has been reported at the centre.
- If a child is unwell at home parents/guardians are asked not to bring the child to the service.
- If an educator is unwell they should not report to work. Educators should contact the nominated supervisor/coordinator before 7:00a.m. of their inability to report to work. Until an alternative arrangement has been confirmed, the educator is expected to report to work and will be released once a new plan has been set.
- If a child becomes unwell whilst at the service, the service's illness policy will be followed.
- In the case of serious ill health or hospitalisation, the child or educator will require a medical certificate, from their medical practitioner or specialist, verifying that their recovery is sufficient to enable their return to the service.
- Families are asked to respect these guidelines in order to prevent further outbreaks.
- Information about exclusion periods will be provided as requested.

Blood-Borne Viruses

- It is unlawful to discriminate against anyone infected with blood-borne viruses including HIV, hepatitis B and hepatitis C. As blood borne viruses are not transmitted through casual contact, a child with a blood borne illness or any other blood borne impairment shall be treated and comforted as any other child, i.e. by cuddling, giving hugs, holding hands etc.
- If an educator is notified that a child or the child's parent/guardian or any other educator is infected with a blood borne virus the information will remain confidential. Only with the consent of the person with the virus, or the parent/guardian, can this information be shared with other educators. Deliberate breaches of confidentiality will be a disciplinary offence preceding normal consultative action.
- Educator and management practices will adhere to the law under the Federal Disability Discrimination Act 1992 and the Equal Opportunity Act 1984 (WA), that no discrimination will take place based on a child/parent HIV status.
- If a child has an open wound, it will be covered with a waterproof dressing and securely attached. If this is not possible, a child should remain away from the centre until the lesions have healed or can be covered.

Head Lice

- Educators will examine the heads of children who scratch their heads a lot to look for eggs (nits) or lice near the scalp.
- Educators will ensure that a child suspected of being infested does not have close contact with other children for the rest of the day and will wear a hat.
- When families come to collect their child, they will be asked to commence treatment and keep the child away from the service until the day after appropriate treatment has been started, and the lice are removed. If they begin treatment prior to the next day exclusion is not necessary.

- The child may return to the service the day after treatment has commenced and all live head lice have been removed. A few remaining eggs are not a reason for continued exclusion. However, the family must continue treatment until all eggs and hatchlings have been removed, usually over the following ten days.
- When an incident of head lice occurs at the service, a notice will be displayed and/or email will be used to advise parents to check their children. A letter will be given to parents advising how to check hair effectively using hair conditioner. It is recommended that children with long hair have their hair tied back to reduce the chance of infestation.
- Educators with long hair will be required to wear their hair tied up whilst they are at the service. This will help to prevent them from becoming infected in the event of an outbreak.
- Where an educator becomes infected with eggs or lice, they will be required to commence treatment on their hair that evening.

Cleaning up spills of blood and other body fluids

It is considered that the best way to prevent infection is to always follow standard precautions. Standard precautions support the assumption that all blood and body fluids are potentially infectious; therefore, hygiene practices that promote infection control are adopted for all contact with blood and body fluids. Educators will follow recommended guidelines for dealing with spills of blood, faeces, vomit, urine, nasal discharge and other body fluids as explained in Staying Healthy in Child Care to protect the health and safety of all children and adults within the service. Disposable gloves will be readily available for use in dealing with spills and hands will be washed after removal of gloves.

Healthy Environment

- All educators will ensure that every effort is made to maintain a high standard of hygiene in the provision of the education and care service including supporting the Nominated Provider in the maintenance of all equipment and furnishings in a thoroughly safe, clean and hygienic condition and in good repair. In this regard educators will report any equipment and/or area that is not clean or in a safe condition or any evidence of vermin to the Health and Safety representative/officer.
- The service is a non-smoking environment. Passive smoking harms the lungs of young children and may trigger an asthma attack. Refer to Workplace Health and Safety policy.
- To ensure all children and educators attending the service are protected from skin damage caused by harmful ultraviolet rays of the sun, educators will consistently follow the service's Sun Protection policy.
- All rooms used within the education and care service will be well ventilated to prevent: reduced concentration span; lack of energy, tiredness and lethargy; increased risk of infection and possible asthma attacks.
- The educator will ensure that lighting, heating and noise levels are comfortable and consider specific activities (e.g. sleep time) and individual needs.

Related Legislation and Documents

- Federal and State Workplace Health and Safety Legislation
- Education and Care Services National Law (WA) Act 2012
- Education and Care Services National Regulations 2012

Document History

Version	Date updated
Health, Hygiene and Infectious Diseases Policy	11/13
Health, Hygiene and Infectious Diseases Policy	13/3/2014
Health, Hygiene and Infectious Diseases Policy	28/07/15
Health, Hygiene and Infectious Diseases Policy	1/5/16
Health, Hygiene and Infectious Diseases Policy	22/2/17
Health, Hygiene and Infectious Diseases Policy	5/11/18
Health, Hygiene and Infectious Diseases Policy	29/08/19
Health, Hygiene and infectious Diseases Policy	29/8/22

Health, Hygiene and infectious Diseases Policy	10/2/23
Health, Hygiene and infectious Diseases Policy	15/5/2024
Health, Hygiene and infectious Diseases Policy	23/4/2025