



# PLC ARMIDALE

## Preventing Infectious Disease Protocol

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## **PREAMBLE**

PLC Armidale aims to promote a healthy environment in which both children and adults grow and learn about the world around them. The way students interact in education services can mean that infectious diseases can spread quickly. The Protocol aims to guide in controlling and managing the spread of infection. It is to be used concurrently with the PLC Armidale Handwashing Protocol.

## **SECTION 1.0 INFECTION**

### **CAUSES OF INFECTION**

Microscopic living things otherwise known as germs can cause infections and disease in humans. The major four types of germs include bacteria, viruses, fungi and protozoa. Infections can also be caused by parasites such as worms and mites.

### **HOW ARE GERMS SPREAD?**

Germs can spread by airborne, droplets in the air (including coughing or sneezing), contact with faeces then contact with mouth, direct contact with the skin, and contact with bodily secretions such as urine, saliva, discharges or blood. The length of time that a germ can survive on different surfaces depends on the germ itself. Whether a person becomes ill or not depends on the type of germ, the opportunity for transmission and the student immunity. There are three steps in the chain of infection in which prevention of the disease can occur at any stage. The three steps are:

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

### **WAYS TO PREVENT THE SPREAD OF INFECTION?**

The most important ways to stop the spread of infection and disease are:

- Effective hand hygiene: wash your hands with soap and water for 20 seconds or use an alcohol based hand rub (see PLC Armidale's Hand Washing Protocol)
- Exclusion of ill children to prevent spreading illness
- Immunisation

Other strategies include:

- Cough and sneeze etiquette: cover your nose and mouth with tissue, flexed elbow or sleeve with coughing or sneezing, clean your hands afterwards
- Appropriate use of gloves, masks and other personal protective equipment
- Effective environmental cleaning

### **WHEN TO EXCLUDE YOUR DAUGHTER FROM SCHOOL?**

The aim of exclusion is to reduce the spread of infections and disease. Exclusion times depend on how long the disease is infectious for, how easily it is spread and how severe the disease is. The minimum exclusion periods are indicated in [Appendix One Communicable Diseases Fact Sheet](#).

### **WHEN YOUR DAUGHTER IS A BOARDER?**

If your daughter is a Boarder at PLC Armidale and has been diagnosed with an infectious disease, the College will take measures for preventing the spread of infection and may require parents to collect their daughter and isolate them at home until they receive clearance from a medical professional they are safe to return to school.

### **USEFUL INFORMATION**

- Education and Care Services National Regulations 2016.  
<http://ncac.acecqa.gov.au/family-resources/factsheets/hygiene.pdf>
- National Health and Medical Research Council. (2012). Staying Healthy: Preventing infectious diseases in early childhood education and care services. 5th edition.  
[https://www.nhmrc.gov.au/files/nhmrc/publications/attachments/ch55\\_staying\\_healthy\\_5th\\_edition\\_150602.pdf](https://www.nhmrc.gov.au/files/nhmrc/publications/attachments/ch55_staying_healthy_5th_edition_150602.pdf)
- National Health and Medical Research Council  
[www.nhmrc.gov.au](http://www.nhmrc.gov.au)

## APPENDIX ONE – COMMUNICABLE DISEASES FACT SHEET

Students are at increased risk of some infectious diseases because they have not yet developed immunity to them, they tend to gather in groups, and they may have difficulty with some aspects of hygiene.

Exclusion is needed for students with infectious diseases that are infectious to others and would cause risk of serious illness or complications to others.

Non exclusion means that there is no significant risk to others however the student may need to stay at home if they feel unwell.

COMMON COLD	
Symptoms:	Do I need to keep my child home? (Exclude)
Sore throat, runny nose, sneezing	No exclusion necessary but students may need to stay at home until feeling better

CHICKEN POX			
Time from exposure to illness	Symptoms:	Do I need to keep my child home? (Exclude)	How can I help prevent spread?
10 to 21 days, usually 14 to 16 days.	Slight fever, runny nose, and a rash that begins as raised pink spots that blister and scab.	Yes, for 5 days from the onset of the rash and the blisters have dried.	Immunise your child at 18 months of age. Immunisation is recommended for children at 12 years if they are not immune.

CONJUNCTIVITIS			
Time from exposure to illness	Symptoms:	Do I need to keep my child home?	How can I help prevent spread?
1-3 days.	The eye feels scratchy, is red and may water. Lids may stick together on waking.	Yes, while there is discharge from the eye.	Careful hand washing; avoid sharing towels. Antibiotics may be needed.

GASTROENTERITIS OR DIARRHOEA ILLNESS			
Time from exposure to illness	Symptoms:	Do I need to keep my child home?	How can I help prevent spread?
Depends on the cause: several hours to several days.	A combination of frequent loose or watery stools,	Yes, at least for 24 hours after vomiting and/or	Careful hand washing with soap and water after using the toilet or handling

	vomiting, fever, stomach cramps, headaches.	diarrhoea and other symptoms have stopped.	nappies and before touching food.
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### GERMAN MEASLES (RUBELLA)

Time from exposure to illness	Symptoms:	Do I need to keep my child home?	How can I help prevent spread?
14 to 21 days.	Often mild or no symptoms: mild fever, runny nose, swollen nodes, pink blotchy rash that lasts a short time. Can cause birth defects if pregnant women are infected.	Yes, for at least 4 days after the rash appears.	Immunisation (MMR) at 12 months and 4 years of age.

### GLANDULAR FEVER

Time from exposure to illness	Symptoms:	Do I need to keep my child home?	How can I help prevent spread?
4 to 6 weeks.	Fever, headache, sore throat, tiredness, swollen nodes.	No, although they may need to stay at home if the student feels sick.	Careful hand washing, avoid sharing drinks, food and utensils, and kissing.

### HAND FOOT AND MOUTH DISEASE

Time from exposure to illness	Symptoms:	Do I need to keep my child home?	How can I help prevent spread?
3 to 5 days.	Mild illness, perhaps with a fever, blisters around the mouth, on the hands and feet, and perhaps the nappy area.	Yes, until the blisters have dried.	Careful hand washing especially after wiping nose, using the toilet and changing nappies.

### HEAD LICE

Time from infestation to eggs hatching	Symptoms:	Do I need to keep my child home?	How can I help prevent spread?
Usually 7 to 10 days.	Itchy scalp, white specks stuck near the base of the hairs; lice may be found on the scalp.	No, as long as head lice management is ongoing and starts before the next school day.	Family, friends and classroom contacts should be examined and treated if infested. Clothing and bedding

should be washed in hot water.

### HEPATITIS A

<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
About 4 weeks (can range from 2 to 7 weeks).	Often none in small children; sudden fever, loss of appetite, nausea, vomiting, jaundice (yellowing of skin and eyes), dark urine, pale stools.	Yes, for 2 weeks after first symptoms or 1 week after onset of jaundice.	Careful hand washing; those that have had close contact with an infected child may need to have an injection of immunoglobulin; immunisation is recommended for some people.

### IMPETIGO (SCHOOL SORES)

<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
1 to 3 days.	Small red spots change into blisters that fill up with pus and become crusted; usually on the face, hands or scalp.	Yes, until antibiotic treatment starts. Sores should be covered with watertight dressings.	Careful hand washing.

### INFLUENZA/FLU AND EPIDEMIC VIRAL ILLNESS/ FEBRILE ILLNESS

<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
1 to 3 days.	Fever, dry cough, muscle aches and fatigue.	Yes until they are well and symptom free, including no fever.	Careful hand washing, especially after coughing, sneezing or wiping your nose. Immunisation is recommended for children with chronic illnesses.

### MEASLES

<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
About 10 to 12 days until first symptoms, and 14 days until the rash develops.	Fever, tiredness, runny nose, cough and sore red eyes for a few days followed by a red blotchy rash that starts on the face and spreads down	Yes, for at least 4 days after the rash appears.	Immunisation (MMR) at 12 months and 4 years. Childcare/school attendees who are not immune may be excluded for 14 days after onset in

	the body and lasts 4 to 7 days.		the last case at the facility.
<b>MENINGOCOCCAL DISEASE</b>			
<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
Usually 3 to 4 days (can range from 2 to 10 days).	Sudden onset of fever and a combination of headache, neck, stiffness, nausea, vomiting, drowsiness or rash.	Seek medical attention immediately.	Individuals who have had close contact with the infected child should see their doctors urgently if symptoms develop, and may need to have a special antibiotic Immunisation with Meningococcal C vaccine at 12 months of age.

<b>MOLLUSCUM CONTAGIOSUM</b>			
7 days to 6 months.	Multiple small lumps (2-5mm) on the skin that are smooth, firm and round, with dimples in the middle. Lumps in children are mostly on the face, trunk, and upper arms and legs. Symptoms can last 6 months to 2 years without treatment.	No.	Avoid contact sports when a child has uncovered lumps.

<b>MUMPS</b>			
<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
Usually 16 to 18 days (can range from 12 to 25 days).	Fever, swollen and tender glands around the jaw.	Yes, for 9 days after onset of swelling.	Immunisation (MMR) at 12 months and 4 years of age.

<b>RINGWORM</b>			
<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
Varies (may be several days).	Small scaly patch on the skin surrounded by a pink ring.	Yes, until the day after fungal treatment has begun.	Careful hand washing.

<b>SCABIES</b>			
<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>



New infections: 2 to 6 weeks  Reinfection: 1 to 4 days.	Itchy skin, worse at night. Worse around wrists, armpits, buttocks, groin and between fingers and toes.	Yes, until the day after the treatment has begun.	Individuals who have had close contact with the infected child should be examined for infestation and be treated if necessary. Wash linen, towels and clothing worn in the past 2 days in hot water and detergent.
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**SCARLET FEVER**

<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
1 to 3 days.	Sudden onset sore throat, high fever and vomiting, followed by a rash in 12 to 36 hours.	Yes, until at least 24 hours of treatment has begun and the child is feeling better.	Careful hand washing. Sick contacts should see their doctor.

**SLAPPED CHEEK**

<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
1 to 2 weeks.	Mild fever, red cheeks, itchy lace-like rash, and possibly cough, sore throat or runny nose. Can cause foetal disease in pregnant women if they have not been previously infected.	No as it is most infectious before the rash appears.	Careful hand washing; avoid sharing drinks.

**WHOOPIING COUGH**

<b>Time from exposure to illness</b>	<b>Symptoms:</b>	<b>Do I need to keep my child home?</b>	<b>How can I help prevent spread?</b>
Usually 9 to 10 days (can range from 6 to 20 days).	Starts with a running nose, followed by persistent cough that comes in bouts. Bouts maybe followed by vomiting and a whooping sound as the child gasps for air.	Yes, until the first 5 days of a special antibiotic have been taken.	Immunisation at 2, 4, 6 months and 4 years of age. A particular antibiotic can be given for the patient and those that have been in close contact. The infected child should be excluded from childcare and school until 5 days after treatment begins. Unimmunised childcare

			attendees may be excluded from childcare unless they take the antibiotics.
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