

## **Illness and Infectious Disease**

### *- Child Immunisation*

#### **Policy Statement**

Meerilinga will take reasonable steps to ensure that the health and wellbeing of every child is safeguarded. Maintaining a healthy, safe and inclusive environment for Educators, staff, children and families, is paramount for high quality education and care.

#### **Policy Purpose**

Children encounter many other children and adults within our Meerilinga community environments, which can result in the contracting of infectious illnesses.

We have a duty of care to ensure that children families, Educators, staff and visitors of the Centre are provided with a high level of protection. We aim to manage illnesses and prevent the spread of infectious diseases throughout the Centre. Immunisation is a simple, safe and effective way of protecting people against harmful diseases before they come into contact with them in the community. Immunisation not only protects individuals, but also others within the community, by reducing the spread of disease and illnesses.

#### **Scope**

This policy applies to children, families, staff, management and visitors of the service.

#### **Exclusions**

#### **Policy Review**

At least annually or from time to time the organisation may make changes to this policy to improve the effectiveness of its operation.

#### **Implementation**

Families are informed upon enrolment and reminded not to bring sick children to the service. If a child is unwell at home, the family is not permitted to drop the child off at the service.

Families will notify staff if a child has been injured or has been unwell or sought medical advice since they last attended the service.

Meerilinga Educators and staff are not qualified to diagnose whether or not a child has an infectious illness. However, if an infectious illness is suspected, our service will contact the family to collect their child.

A child would be considered ill if they:

- Sleep at unusual times.
- Have a fever above 38°C and are lethargic
- Are crying from discomfort.
- Vomit or have diarrhoea.
- Have symptoms of an infectious disease eg: a rash.

The need for exclusion and the length of time a person is excluded depend on how easily the infection can spread, how long the person is likely to be infectious and how severe the disease can be. It is important that children and staff who are ill are kept away from the service for the recommended period.

### ***Children arriving at the service who are unwell***

A child will not be accepted into care if they:

- Are showing any obvious signs of being unwell.
- Have had a high temperature, vomiting and/or diarrhoea within the last 24 hours.
- Have started antibiotics in the last 24 hours.
- Have a contagious illness or disease.

### ***Children who become ill at the service***

Children may become unwell throughout the day. Management and educators will respond to children's individual symptoms of illness.

- Educators will monitor and document the child's symptoms on the Child Incident Report - Illness.
- The parents or authorised nominee will be contacted and asked to collect the child from care.
- The child will be made comfortable and placed in a quiet area where they can rest, whilst being supervised. Every effort will be made to separate them from the other children until collected.
- Continue to document any progressing symptoms.
- Complete the Child Incident Report - Illness, ensuring the parent/guardian or authorised nominee has signed the completed Child Incident Report upon collection of the child.
- Upon request, Families will be provided with information regarding exclusion periods as recommended by Staying Healthy in Childcare (5th Edition).

### **Infection Control**

All Meerilinga community members will continuously promote healthy hygiene practices to minimise the risk of infection. Cleaning, hygiene and safety processes will be followed at all times and in accordance with documented processes and schedules to ensure the premises, furniture and equipment are safe, clean and well maintained.

*Refer to: Health, Hygiene and Infection Control Policy and Processes*

## **Infectious Disease and Exclusion**

When a child has been diagnosed with an illness or infectious disease, the service will refer to Staying Healthy in Childcare (5th Edition) and the Communicable Disease Guidelines for teachers, child care workers, local government authorities and medical practitioners for recommendation on exclusion periods.

When an infectious disease has been diagnosed, the service will display appropriate documentation and alerts for families including information on the illness/disease, symptoms, infectious period and the exclusion period. (This information is obtained from Staying Healthy In Child Care 5th Edition)

The Responsible Person may request a medical clearance from a registered health practitioner when there are signs of illness eg: body rash. In order for the child to attend, a medical clearance will be required from a Registered Health Practitioner the stating the child is not contagious and fit for care.

### ***Some of the common Infectious Diseases in children are:***

#### ***High Temperature***

Educators will take the child's temperature. If the child's temperature 38°C or higher and the child is showing other signs of being unwell, the Responsible Person at the time will contact the child's parents or authorised nominee and request that the child be collected.

Educators will take physical steps to try to reduce the child's temperature ie. removing excess clothing, laying child in a cool place, encouraging the child to drink cool water etc. until they are collected.

#### ***Vomiting and/or Diarrhoea***

Children that have diarrhoea and/or vomiting at the service, the Responsible Person will contact the child's parents or authorised nominee and request that the child be collected as soon as possible. The child will be excluded until the symptoms have stopped for at least 24 hours.

#### ***Ear Infection***

Children will be excluded if there is any fluid coming out of their ear.

#### ***Hand, Foot and Mouth***

Hand foot and mouth disease is a common viral infection. The obvious signs include tiny blisters on various parts of the body. The virus is in the fluid of the blisters so children with the virus will be excluded until all blisters have dried.

#### ***Head Lice***

If head lice is been detected, the family will be contacted and asked to collect the child for treatment. The child may return to the service as soon as 'effective treatment' has started. An effective treatment is when a treatment is used and all the lice are dead.

## Reporting Notifiable Communicable Diseases

Upon notification of suspected or confirmed case of a notifiable illness at the service, the Nominated Supervisor/Place Administrator will notify the CEO or an Advisor.

The WA Department of Health will be notified by the CEO or nominated delegate in accordance with the NHMRC recommended notifiable diseases. A-Z list of notifiable infectious diseases and related conditions:

[https://ww2.health.wa.gov.au/Articles/N\\_R/Notification-of-infectious-diseases-and-related-conditions](https://ww2.health.wa.gov.au/Articles/N_R/Notification-of-infectious-diseases-and-related-conditions)

Upon confirmation of a notifiable illness the Place Administrator of the service will inform Educators, staff, families, visitors and information on the disease will be provided to them.

*Refer to: Process section of this Policy for Reporting Notifiable Infectious Diseases*

Following advice from the Department of Health, the service may be required to exclude children if they have an:

- Immunisation medical contraindication and/or natural immunity notice specified on their current AIR History Statement or
- Approved and active catch-up schedule or
- Exemption because of particular family circumstances with supporting evidence and completed Exemption Eligibility Form (family circumstances).

Children enrolled under the above conditions may be at risk and would be considered non-immunised during a suspected and actual outbreak of a vaccine preventable disease. Fees are payable for these children excluded for the period of time recommended by the WA Department of Health.

*Refer to: Child Immunisation section of this Policy  
Health, Hygiene and Infection Control Policy and Procedures.*

## Child Immunisation

The Public Health Act 2016 (WA) regulations require child care services to collect and report immunisation information about each child enrolled in the service.

In accordance with the regulations and the terms and condition of enrolment, Meerilinga will request and obtain each child's immunisation record from the parent/guardian at the time of enrolment or re-enrolment.

Meerilinga will accept the following documentation to verify each child's immunisation status:

- Australian Immunisation Register - **AIR Immunisation History Statement**, no more than two months old showing that a child is:
  - ✓ 'Up to date' with their immunisations *OR*
  - ✓ 'Up to date' and includes notice/s that the child has an approved medical contraindication or natural immunity to one or more vaccines *OR*
  - ✓ 'Not up to date' and includes an approved catch-up schedule that is active at the time of enrolment.
  - ✓ 'Not up to date'
- A valid **Immunisation Certificate** issued or declared by the Chief Health Officer.

A copy of the document/s will be taken, the information recorded in the Child Care Management System and filed with the child's enrolment records.

Failure to provide a current immunisation status record or will result in non-acceptance or cancellation of the child's enrolment.

Until the child reaches the age of 4, the enrolling parent/guardian must provide an updated AIR statement each time the child receives an immunisation.

Children must meet the immunisation requirements for the parent/guardian to receive Child Care Subsidy (CCS) fee assistance.

Meerilinga will provide families with information on immunisation and other health issues relevant to immunisation at the time of enrolment and is regularly conveyed to families through various methods as outlined in the Centres Communication Plan.

*Refer to the Relationships and Partnerships with Families Policy and Processes - Communication Plan.*

Meerilinga will inform families of their closest immunisation clinic. This information will be gained as required by regular contact with the local Government and the Health Department.

Educators and staff will be provided with information and encouraged to receive immunisation from vaccine preventable diseases.

### **Vaccine exemption due to medical reasons or natural immunity**

A Medical Exemption may be obtained for non-immunised children.

If a child cannot receive one or more vaccines for certain medical reasons or the child has natural immunity, the parent/guardian must contact their medical practitioner in the first instance.

The following medical practitioners can grant exemptions:

- General practitioners (GPs) that are vocationally registered, or a fellow of the Royal Australian College of General Practitioners (RACGP) or Australian College of Rural and Remote Medicine (ACRRM).
- General practice registrars on an approved 3GA training placement.
- Paediatricians.
- Public health physicians.
- Infectious disease physicians, or
- Clinical immunologists.

If a vaccine exemption is warranted, the medical practitioner will complete and submit an AIR Immunisation Medical Exemption Form if certain vaccines require exemption on the basis of a medical condition.

Children that have an approved medical contraindication to specified vaccines or natural immunity will have an immunisation status that is recorded as 'up to date' on their AIR Immunisation History Statement with notice/s outlining specific contraindication or natural immunity.

Children with medical contraindication may be at risk and would be considered non-immunised during a suspected and actual outbreak of the specified vaccine preventable disease.

*Refer to: Process section of this Policy for Reporting Notifiable Infectious Diseases*

### **Vaccine exemption due to particular family circumstances**

A child may be exempt because of particular family circumstances. This is any child who meets the description of a class of children prescribed in regulation 10AB of the Public Health Regulations 2017.

Upon enrolment, the Enrolments Advisor and Place Administrator will determine eligibility and use the Exemption Eligibility Form (family circumstance) only in a situation where:

- The child's immunisation status is not up-to-date according to their AIR immunisation history statement; and
- The child is not following an approved catch-up schedule prescribed by the Public Health Regulations 2017; and
- The child does not have immunisation certificate issued or declared by the Chief Health Officer.
- The child meets at least one exemption category with supporting evidence in the description class of children prescribed in the regulation.

Child's AIR Statement, Completed Exemption Eligibility Form together with a supporting evidence is filed in the child's individual enrolment folder.

The enrolling parent/guardian will be informed that under the Regulations, and as an approved service provider, Meerilinga must report the child as non-immunised to the WA Department of Health.

Meerilinga reports under vaccinated child to the WA Department of Health.

Children with an exemption due to family circumstances may be at risk and would be considered non-immunised during a suspected and actual outbreak of the specified vaccine preventable disease.

*Refer to: Process section of this Policy for Reporting Notifiable Infectious Diseases*

### **Overseas Immunisation Records**

Overseas immunisation records will not be accepted.

Families who have moved to Australia from overseas need to take any information about their child's overseas immunisations to a registered immunisation provider, who will then update the child's AIR record. Following the update to the child's AIR record, parents can then access an updated AIR Immunisation History Statement.

### **Reporting under-vaccinated children**

Under regulation 10C of the Public Health Regulations 2017, the Chief Health Officer may direct the Approved Provider to provide a report to the Chief Health Officer in respect of information given to that person about the immunisation status of children enrolled at service.

*When to report at other times:*

- If an existing enrolled child's immunisation status is 'not up to date'.
- The child meets exemption eligibility due to family circumstances.
- The Chief Health Officer may request reports of the immunisation status of enrolled children during the outbreak of a vaccine-preventable disease.

*How to report:*

When requested by the Chief Health Officer, the Approved Provider is required to complete the Immunisation Status of a Child Reporting Form. This information goes to the Department of Health, who will contact the families of these children to provide support in accessing local immunisation services.

***Place Administrator / Nominated Supervisor/ Responsible person will ensure:***

- A hygienic environment is maintained.
- Cleaning schedules are completed each day and signed by the Educators.
- Children are directed in their understanding of health and hygiene throughout the daily program and routine.
- Educators and Staff are aware of relevant immunisation regulations and guidelines for children and themselves.
- Relevant and current documentation on each child's immunisation status, and any medical conditions is collected on enrolment and maintained.
- End date calendar reminder set where enrolled children are on an approved and active catch-up schedule. Request updated AIR Statement from parent/guardian.
- Enrolled children with an exemption or on an approved catch-up schedule will be considered non-immunised and added to the Children's Health and Wellbeing Register. Educators informed accordingly.
- To provide families with relevant sourced materials and information on infectious diseases, health and hygiene including:
  - The current WA Immunisation Schedule for children.
  - Exclusion guidelines in the event of an infectious illness at the Centre for children that are not immunised.
  - Advice and information regarding any infectious diseases in general, and information regarding any specific infectious illnesses that are suspected/present in the service.
- To provide information to families about an infectious disease by displaying and emailing the Infectious Diseases Notification and details.
- Illness records are completed and signed no later than 24 hours of an illness occurring.
- All educators are mindful and preserve confidentiality of individual children's medical circumstances.
- Children's enrolment records are updated with regards to immunisation as required eg: as children reach age 4 for immunisation.
- To notify the CEO or Advisor upon notification of a notifiable infectious disease to ensure reporting compliance to relevant Authorities as required.



- To provide opportunities for staff, children and families to have access to health professionals by organising visits/guest speakers to attend the Centre to confirm best practice.
- Children do not attend the Centre if they are unwell. If a child has been sick they must be well for 24hrs before returning
- To complete the register of illness and/or document incidents of infectious diseases. Some diseases require your state authority to be notified.
- The organisations universal health and hygiene procedures for cleaning equipment and the environment are followed at all times eg: colour coded equipment and safe use of chemical.

***Educators and Staff will:***

- Ensure that any child suspected of having an infectious illness are responded to and their health and emotional needs supported at all times.
- Implement appropriate health and safety procedures, when treating ill children.
- Advise families that they will need to alert the Centre if their child is diagnosed with an Infectious Illness.
- Maintain their own immunisation status, and advise the Place Administrator of any updates to their immunisation status.
- Provide diverse opportunities for children to participate in hygiene practices, including routine opportunities, and intentional practice.
- Adhere to the Centres Health, Hygiene and Infection Control Policy and Processes including:
  - Hand washing – children and staff
  - Daily cleaning and safety checks of the indoor and outdoor environments
  - Wearing gloves (particularly when in direct contact with bodily fluids)
  - Appropriate handling and preparation of food
  - Cleaning up bodily fluid spills
  - Disposing of Foreign or Sharp objects
- Maintain up to date knowledge with respect to Health and Safety through on going professional development opportunities.
- All play dough is to be made fresh every week. If there is an outbreak of infectious disease, or any other contagious communicable disease, play dough is to be discarded after each use. Children are to wash their hands before and after using the play dough.



Process	
Process Owner	CEO
Effective Date	6 April 2021
Date of Last Revision	22 July 2019

Process Details	
	Description
1.	<p><b>Children’s Immunisation</b></p> <p>1. In accordance with the regulations and the terms and condition of enrolment or re-enrolment, Meerilinga will only accept the following documentation to verify each child’s immunisation status:</p> <ul style="list-style-type: none"> <li>• Australian Immunisation Register - AIR Immunisation History Statement, no more than two months old showing that a child is: <ul style="list-style-type: none"> <li>- ‘Up to date’ with their immunisations OR</li> <li>- ‘Up to date’ and includes notice/s that the child has an approved medical contraindication or natural immunity to one or more vaccines OR</li> <li>- ‘Not up to date’ and includes an approved catch-up schedule that is active at the time of enrolment.</li> <li>- ‘Not up to date’.</li> </ul> </li> <li>• A valid Immunisation Certificate issued or declared by the Chief Health Officer.</li> </ul> <p>The Place Administrator will take a hard copy of the documents and record the information in the Smartfees Child Care Management System. A copy is scanned and emailed to the Enrolment and Inclusion Advisor. The documentation filed with the child’s enrolment records.</p> <p>Failure to provide a current an approved immunisation status record will result in non-acceptance of the child’s enrolment.</p> <p>2. A <b>medical exemption</b> for non-immunised children must be obtained by the parent/guardian through a registered medical practitioner. Children who have an approved medical or natural immunity exemption will have an immunisation status that is recorded as ‘up to date’ on their AIR Immunisation History Statement with notice/s outlining specific contraindication or natural immunity.</p> <p>3. An immunisation <b>exemption for family circumstances</b> may apply for any child meeting the description of a class of children prescribed in regulation 10AB of the Public Health Regulations 2017. <i>Refer to Process 2 of this Policy</i></p> <p>4. End date calendar reminder set where enrolled children are on an approved and active catch-up schedule. Request updated AIR Statement from parent/guardian.</p> <p>5. Enrolled children with an approved exemption or catch-up schedule may be at risk, therefore they will be recorded on the Children’s Health and Wellbeing Register to inform all Educators. These children will be considered non-immunised and following advise from the WA health Department, may be excluded during a suspected and actual outbreak of the specified vaccine preventable disease. Fees will apply for the exclusion period.</p>

## Process Details

	Description
	<p>6. Overseas immunisation records will not be accepted. Families can have the child's overseas record verified by a registered immunisation provider who will then update the child's AIR record.</p>
2.	<p><b>Immunisation Exemption (Family Circumstances)</b></p> <p>Upon receipt of AIR statement where child immunisation states 'Not up to date', the child may be exempt because of particular family circumstances.</p> <p>Before enrolment acceptance, the Enrolments Advisor and Place Administrator will determine if the child meets at least one exemption category in the description of a class of children prescribed in regulation 10AB of the Public Health Regulations 2017 such as where the child is:</p> <ul style="list-style-type: none"><li>- Aboriginal or Torres Strait Islander;</li><li>- In need of protection;</li><li>- Living in crisis accommodation;</li><li>- Evacuated from ordinary place of residence;</li><li>- In care of an adult, other than their parent or guardian;</li><li>- In the care of a responsible person who holds a valid Health Care card, Pensioner Concession Card, Veteran's Affairs Card (White or Gold) or</li><li>- First entered Australia not more than 6 months before enrolment on specified Visa as defined in the Migration Act 1958.</li></ul> <p>Once determined, the <b><u>Exemption Eligibility Form (family circumstances)</u></b> to be completed by the Place Administrator and enrolling parent/guardian.</p> <p>The supporting evidence for family circumstance provided by the parent and filed in the child's individual enrolment folder together with the child's AIR Statement and completed Exemption Eligibility Form.</p> <p>The enrolling parent/guardian informed that under the regulations and as an approved service provider, Meerilinga must report the child as non-immunised to the WA Department of Health.</p> <p>Report under vaccinated child – refer to next process point 3.</p>
3.	<p><b>Reporting Under Vaccinated Children</b></p> <p>The Chief Health Officer may direct the Approved Provider to provide a report in respect of the immunisation status of all children enrolled at service</p> <p><i>When to report at other times:</i></p> <ul style="list-style-type: none"><li>- If an existing enrolled child's immunisation status is 'not up to date'.</li><li>- The child meets exemption eligibility due to family circumstances.</li><li>- The Chief Health Officer may request reports of the immunisation status of enrolled children during the outbreak of a vaccine-preventable disease.</li></ul> <p>The Enrolment and Inclusion Advisor will action all immunisation reporting to the WA Department of Health as directed.</p> <p><i>How to report:</i></p> <p>Reporting via <b><u>Immunisation Status of a Child Reporting Form</u></b>. This information goes to the Department of Health, who will contact the families of these children to provide support in accessing local immunisation services.</p>

## Process Details

	Description
4.	<p><b>Reporting Notifiable Communicable Diseases</b></p> <p>Upon notification of suspected or confirmed case of a notifiable communicable disease at the service, the Nominated Supervisor/Director will notify the CEO or an Advisor.</p> <p>The Health Department will be notified by the CEO or nominated delegate in accordance with the NHMRC recommended notifiable diseases.</p> <p>A-Z list of notifiable infectious diseases and related conditions: <a href="https://ww2.health.wa.gov.au/Articles/N_R/Notification-of-infectious-diseases-and-related-conditions">https://ww2.health.wa.gov.au/Articles/N_R/Notification-of-infectious-diseases-and-related-conditions</a></p> <p>Report all cases of notifiable infectious diseases and conditions residing in the Perth Metropolitan area to the:</p> <p><b>Communicable Disease Control Directorate</b> Phone: 9222 0255 After hours emergency phone: 9328 0553 Fax: 9222 0254 Postal address: PO Box 8172, Perth Business Centre WA 6849 Email: <a href="mailto:cdc@health.wa.gov.au">cdc@health.wa.gov.au</a></p>

## Associated Documents

### Meerilinga Policy Manual

- Preface - Section 1 - Strategic and Business Planning Policies (Code of Ethics & Conduct)
  - *Coronavirus (COVID-19) Pandemic Management*
- Section 2 - Human Resources Policies
- Section 3 - Finance, Assets and Administration Policies
- Section 6 - Children's Program Policies
  - *Staffing*
  - *Enrolment and Orientation*
  - *Delivery and Collection of Children*
  - *Pets and Animals in the Environment*
  - *Relationships and Interactions with Children*
  - *Relationships and Partnerships with Families - Communication Plan*
  - *Child Safe Environment*
  - *Supervision*
  - *Emergency Management*
  - *Health, Hygiene and Infection Control*
  - *Toileting and Nappy Change*
  - *Medical Conditions*
  - *Medications*
- Section 7 - Workplace Health and Safety Policies
  - *Environmental Protection*
  - *Workplace Health and Safety*
  - *Use and Storage of Dangerous Products*
  - *Safe Disposal of Dangerous Products*
- Section 8 - Guidelines

- Staying Healthy - Preventing Infectious Diseases in Early Childhood Education and Care Services, 5th Edition.
- Communicable Disease Guidelines for teachers, child care workers, local government authorities and medical practitioners. Government of Western Australia - Department of Health – 2017 Version

### Guidelines for Advisor

- Enrolment and Inclusion Advisor will monitor immunisation compliance at the time of enrolment and duration as well as manage reporting to relevant authorities as required. This includes setting end date reminder in calendar where enrolled children are on an approved and active catch-up schedule.
- Inform CEO of notification of communicable disease within a service and action reporting to Communicable Disease Control Directorate as required.
- Action reporting, ensure information sought regarding the prevention of infectious diseases is sourced from recognised health authorities.
- Monitor document control to ensure the cleaning, safety checks and risk assessments of the environment are conducted and documented in accordance with relevant schedules and audits of the organisation.
- Ensure identified health and safety risks are managed and attended to promptly.
- Implement recommendations from Staying Healthy in Child Care – Preventing the spread of Infectious Diseases in the early childhood environment.
- Ensure the Place Administrators and Educator teams are protecting the Meerilinga community from harm by ensuring relevant policies and procedures are followed regarding health and safety within the Centre.
- Ensure the required enrolment documentation is collected, maintained and stored appropriately and in accordance with current legislation.

### Records Management

Title	Location	Responsible Officer	Minimum Retention Period
Enrolment Form	CFC	Place Administrator / Nominated Supervisor / Advisor Enrolment & Inclusion	3 years from exit
Child - Australian Immunisation History Statement	CFC	Place Administrator / Nominated Supervisor / Advisor Enrolment & Inclusion	3 years from exit
CFC Internal Cleaning Schedule	CFC	Place Administrator / Nominated Supervisor	3 years
CFC Daily Checklist	CFC	Place Administrator / Nominated Supervisor	3 years
Audit Summary & Report	CFC W/Leed	Community Advisor CEO	3 years
Medication Authorisation Form	CFC	Place Administrator / Nominated Supervisor	3 years from exit
Children's Health and Wellbeing Register	CFC	Place Administrator / Nominated Supervisor	3 years

Medical Management Plan	CFC	Place Administrator / Nominated Supervisor	3 years from exit
Risk Minimisation and Communication Plan	CFC	Place Administrator / Nominated Supervisor	3 years from exit
Child Incident Report	CFC	Place Administrator / Nominated Supervisor	Until the child is 25 years old
Health / Hygiene / Safety Risk Assessment Plans	CFC W/Leed	CEO / Place Administrator / Nominated Supervisor	3 years
Notification to Regulatory Authority or Health Department	CFC W/Leed	Advisor CEO	3 years

## Reference

- Education and Care Services National Law Act (WA) 2012 - January 2019
- Education and Care Services National Regulations (WA) 2012 - October 2020
- ACECQA - National Quality Standards - September 2020
- ACECQA - Belonging, Being & Becoming - Early Years Learning Framework
- ECA Code of Ethics 2016
- Code of Conduct - Meerilinga
- Children and Community Services Act 2004
- Public Health Act 2016 (WA)
- Public Health Regulations 2017
- Privacy Act 1988
- Occupational Safety and Health Act 1984 and the Occupational Safety and Health Regulations 1996.
- Emergency Management Act 2005
- Social Security Act 1991
- Veterans' Affairs Entitlements Act 1986
- [Staying Healthy - Preventing Infectious Diseases in Early Childhood Education and Care Services, 5th Edition](#). Australian Government National Health and Medical Research Council - June 2013
- [Communicable Disease Guidelines for teachers, child care workers, local government authorities and medical practitioners](#). Government of Western Australia - Department of Health – 2017 Version
- [Department of Health, Western Australia. Immunisation Requirements - Guidelines for persons in charge of child care services, community kindergarten and schools](#). - February 2021

## Definitions

Term	Definition
Universal	Relating to or done by all people within the organisation - Health & Hygiene Processes

## Mapping Policy and Processes

Education and Care Services National Law (WA) Act 2012	
<b>Section</b>	165, 167, 173, 174(2)(a), 175.

  

Education and Care Services National Regulations (WA) 2012	
<b>Regulations</b>	12, 73, 77, 78, 85, 86, 87, 88, 89, 90, 91, 94, 97, 103, 105, 106, 109, 110, 112, 136, 160, 161, 162, 165, 168(1)(2)(c), 170, 171, 172, 173(g)(i), 176(2)(a)(ii)(b), 177, 181, 183, 185.

## Standards for RTOs 2015

Vocational Education and Training is a significant contributor to Australia's economy domestically, being the primary mechanism to meet the skilling needs of the Australian community. The standards give the community confidence that RTOs are delivering quality training and assessment that is highly regarded both locally and overseas.

<b>Policy Area</b>	<b>National Quality Standards Early Childhood</b>	<b>National Standards for Volunteering Involvement 2015</b>	<b>Standards to Community Services</b>	<b>Standards to Family Support</b>
Children's Programs	QA 1 - 1.1, 1.1.3, 1.2, 1.2.1, 1.2.2, 1.2.3. QA 2 - 2.1, 2.1.1, 2.1.2, 2.2, 2.2.1, 2.2.2. QA 3 - 3.1.2, 3.2.3. QA 4 - 4.1.2, 4.2.2. QA 5 - 5.1, 5.1.2, 5.2.1 QA 6 - 6.1, 6.1.1, 6.1.2, 6.1.3, 6.2. QA 7 - 7.1, 7.1.1, 7.1.2, 7.1.3, 7.2, 7.2.1, 7.2.3.	N/A	N/A	N/A