

ECECP Procedure 6.2

Illness Management

Controlled Document

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Reviewed by:	Project Officer – Early Childhood Education & Care				

Policy attached to this procedure	Incident, Injury, Trauma and Illness Policy Administration of First Aid Policy Dealing with Infectious Diseases Policy
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Educators have a duty of care to manage illnesses that occur at the Service to ensure the safety and wellbeing of children, educators and visitors. The health and safety of all staff, children, families and visitors to our Service is of the utmost importance. We aim to reduce the likelihood of incidents, injuries, illness and trauma through implementing comprehensive risk management, effective hygiene practices and the ongoing professional development of all staff to respond quickly and effectively to any incident or accident.

Our Service implements procedures as stated in the [Staying healthy: Preventing infectious diseases in early childhood education and care services](#) (6th Edition) developed by the Australian Government National Health and Medical Research Council as part of our day-to-day operation of the Service.

Working in conjunction with the *Administration of First Aid Policy*, *Dealing with Infectious Diseases Policy* and *Incident, Injury, Trauma and Illness Policy*, this procedure provides detailed steps for educators to follow to respond to a child who displays illness symptoms at the Service.

Education and Care Services National Law or Regulations (S. 165, 174. R.12, 77, 85, 86, 87, 88, 89, 90, 93, 95, 97, 103, 104, 161, 162, 168, 170, 171. 176, 177 and 183) NQS QA 2: Element 2.1.2, 2.2.1 and 2.2.2 Health practices and procedures

IN CASE OF EMERGENCY DIAL 000

ILLNESS MANAGEMENT	
1	The approved provider, nominated supervisor will review and update the <i>Incident, Injury, Trauma & Illness Policy</i> in consultation with children, families, staff, educators and management

2	During orientation and enrolment, the nominated supervisor will inform families about the Service's procedures and policies in relation to managing children with illness and preventing the spread of infectious diseases	
3	The service will provide families with clear information about any illness or disease via Factsheets from Staying healthy, 6th Edition .	
4	In the event the nominated supervisor is not available at the Service, the responsible person will be contacted and assume responsibilities within this procedure.	
5	In the event of any child requiring ambulance transportation and medical intervention, a serious incident will be reported to the regulatory authority (Reg. 12) by the approved provider	

STEP 1: IF A CHILD APPEARS UNWELL AT THE SERVICE

Educators will:

1	respond to the child immediately and implement first aid procedures as per <i>Administration of First Aid Policy and Procedure</i>	
2	closely monitor and document the child's symptoms on the <i>Incident, Injury, Trauma and Illness Record</i> . Symptoms may become serious or concerning quickly.	
3	move the child to allow them to rest in a supervised area away from other children	
4	contact the parent or emergency contact to collect the child as soon as possible if the child displays any concerning symptoms (lethargy, fever, poor feeding, new rash, poor urine output, irritation or pain or sensitivity to light).	
5	contact an ambulance immediately if the child displays serious symptoms (breathing, drowsiness or unresponsiveness, looking pale or blue or feeling cold) or if multiple symptoms develop or if symptoms rapidly get worse	
6	discuss with the parent any exclusion periods required.	

STEP 2: IF A CHILD HAS AN INFECTIOUS ILLNESS

1	Parents will be required to inform the Service if a medical practitioner determines the child has an infectious illness	
2	The nominated supervisor/responsible person will notify parents and visitors of an infectious disease or illness via the notice board, online app or email. Information may include: <ul style="list-style-type: none"> ○ Information about the illness/disease ○ Symptoms ○ Exposure date/s ○ Infectious period <i>and</i> ○ Exclusion periods 	
3	The approved provider/nominated supervisor/responsible person will notify the local Public Health Unit (PHU) within 24 hours of diagnosis or as soon as the Service	

	has been made aware of the any vaccine preventable diseases specific to your state/territory	
4	Educators will disinfect all toys that the children have played with during that week to minimise infection.	
5	The nominated supervisor/responsible person will document the illness on the <i>Illness Register</i>	

STEP 3: IF A CHILD DEVELOPS A HIGH TEMPERATURE WHILST AT THE SERVICE

1	If a child appears unwell at the Service, educators will take the child's temperature and record the child's temperature on the <i>Incident, Injury, Trauma and Illness Record</i> , including the time the temperature was taken	
2	Educators will check a child's temperature if they think the child has a fever. If it is between 37.5°C and 37.9°C educators will retest within 30 minutes (records will be kept of time, date and temperature)	
3	If the child has a temperature of 38°C or above, educators will contact parent/s or an emergency contact person and advise the family member they are required to come and pick up the child from the service as soon as possible	
4	Educators will closely monitor the child and be alert to changes in symptoms. An ambulance will be contacted immediately if the child displays serious symptoms (breathing, drowsiness or unresponsiveness, looking pale or blue, feeling cold or suffers a convulsion) or if multiple symptoms develop or if symptoms rapidly get worse.	
5	Educators will attempt to reduce the child's temperature by <ul style="list-style-type: none"> o removing excessive clothing (shoes, socks, jumper, pants) o encouraging the child to take small sips of water Educators will be mindful of cultural beliefs	
6	Educators may administer paracetamol or ibuprofen (Panadol or Nurofen) following a request from a parent or emergency contact in an attempt to reduce the temperature. (Written parental permission to administer paracetamol or ibuprofen must be in the child's enrolment record.) The parent or emergency contact person must still collect the child from the Service as soon as possible (ideally within the hour).	
7	Educators will check the medical history of the child for possible allergies before providing any medication including paracetamol or ibuprofen	
8	Educators will record the child's temperature, time of last dose of medication, time of this medication administered, name of medication, dosage, name of staff member administering the medication and the staff member witnessing the administration on the <i>Incident, Injury, Trauma and Illness Record</i>	
9	If paracetamol or ibuprofen has been administered to the child, the educator will continue to reassess the child's temperature every 10 minutes, documenting each time the temperature has been taken until the child is collected from the Service.	
10	Parents/guardians will be requested to sign and acknowledge the <i>Administration of Medication Form</i> when collecting their child	

11	Children are required to remain at home for a minimum of 24 hours following the last recorded temperature above 37.9°C, even if the child appears well or symptoms have improved (if the fever is not a symptom of an infectious illness). This period supports the child's comfort and wellbeing and helps reduce the risk of illness transmission to other children and staff at the service.
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STEP 4: VOMITING OR DIARRHOEA

1	If a child becomes unwell with vomiting and/or diarrhoea whilst at the Service, educators will respond to the child immediately and implement first aid procedures as per <i>Administration of First Aid Policy and Procedure</i>
2	The nominated supervisor or educator will notify parents or an emergency contact to collect the child immediately
3	Educators will move the child away from other groups of children and supervise them whilst waiting for collection by parents/guardian
4	The nominated supervisor or educator will remind parents that children will be excluded from the Service until the diarrhoea and/or vomiting has stopped and as per recommended guidelines
5	If the diarrhoea or vomiting are confirmed to be norovirus, they will be excluded until there has not been any diarrhoea or vomiting for at least 48 hours
6	Children should not participate in cooking activities for at least 48 hours following any illness involving diarrhoea. Adults should not handle food for at least 48 hours following any illness involving diarrhoea
7	Educators will wear personal protective equipment (PPE) to clean spills involving body fluids
8	Educators will clean the child using wipes and double bag child's contaminated clothing for families to take home and wash
9	Educators will encourage children to take small sips of water whilst waiting for collection from the Service
10	Educators will ensure all items touched by a child with a suspected illness are thoroughly cleaned and disinfected
11	Educators will adhere to the Service's cleaning procedures to minimise the spread of infectious diseases/illnesses as per NHMRC childcare cleaning guidelines
12	<p>Educators will wear PPE to:</p> <ul style="list-style-type: none"> • remove the bulk of the vomit/diarrhoea with disposable absorbent paper towel • clean surfaces and equipment with detergent and water before disinfecting with a bleach solution • ensure all items touched by a child with a suspected illness are thoroughly cleaned and disinfected • remove protective equipment carefully to not contaminate themselves or their clothing and then place in a plastic bag, seal and place in the bin • thoroughly wash hands and skin that was contaminated <p>shower in the event of contamination or contact with bodily fluids</p>

13	Educators will complete an <i>Incident, Injury, Trauma and Illness Record</i> . Educators are to ensure the parent, or a family member signs the <i>Incident, Injury, Trauma and Illness Record</i> before the child leaves the Service.	
14	In the event of an outbreak of viral gastroenteritis (two or more children or staff having a sudden onset of diarrhoea or vomiting in a 2-day period) the nominated supervisor/responsible person will notify the Public Health Unit within 24 hours and notify parents and families of the outbreak via the notice board, online app, email or other methods of communication.	
15	The nominated supervisor/responsible person will complete an <i>Illness Register</i> to record patterns of illness during outbreaks of infectious diseases	