

Preventing Infectious Disease

Children who are unwell should stay home from schools, pre-schools and child care centres.

Different exclusion periods will apply to people whose work involves food handling: if they have vomiting and or diarrhoea they should not return to pre-school until they have been symptom-free for 48 hours and do not have loose bowel actions. For some conditions such as *Campylobacter* and *Giardia*, even though the organism may still be found in the bowel actions, children may be able to return to the child care centre 24 hours after the diarrhoea has ceased. This is because the number of organisms will be less and it will be possible for good hygiene to be effectively maintained.

If your child is sent home throughout the day whilst at pre-school an illness report will be filled out stating: Medical certificate needed to return to centre? Yes/No

Upon returning to pre-school a medical certificate will be required to verify clearance to return back into care. Example below

Certificate of Sickness/Illness
 This is to certify that I examined:
 In my opinion he/she was suffering from.....
 Is fit and healthy to return back to pre-school on (date)
 Signed (By doctor) must have a doctors stamp or medical centres details

Recommended minimum exclusion periods for infectious conditions for schools, pre-schools and childcare centres

CONDITION	EXCLUSION OF CASES	EXCLUSION OF CONTACTS
Amoebiasis (<i>Entamoeba histolytica</i>)	Exclude until diarrhoea ceases 24hrs.	Not excluded.
Campylobacter	Exclude until diarrhoea has ceased 24hrs.	Not excluded.
Chicken pox	Exclude for at least 5 days AND until all blisters have dried.	Any child with an immune deficiency (e.g. leukemia) or receiving chemotherapy should be excluded for their own protection. Otherwise not excluded.
Conjunctivitis	Exclude until discharge from eyes has ceased.	Not excluded.
Cytomegalovirus Infection	Exclusion not necessary.	Not excluded.
Diarrhoea/Vomiting	Exclude until diarrhoea has ceased 24 hrs.	Not excluded.
Diphtheria	Exclude until medical certificate of recovery is received following at least two negative throat swabs, the first not less than 24 hours after finishing a course of antibiotics and the other 48 hours later.	Exclude family/household contacts until cleared to return by an appropriate health authority.
Glandular fever (mononucleosis)	Exclusion is not necessary.	Not excluded.
Hand, Foot and Mouth disease	Until blisters have dried.	Not excluded.
Haemophilus influenzae type b (Hib)	Exclude until medical certificate of recovery is received.	Not excluded.
Hepatitis A	Exclude until medical certificate of recovery is received, but not before 7 days after the onset of jaundice or illness.	Not excluded.

CONDITION	EXCLUSION OF CASES	EXCLUSION OF CONTACTS
Hepatitis B	Exclusion is not necessary.	Not excluded.
Hepatitis C	Exclusion is not necessary.	Not excluded.
Herpes (cold sores)	Young children unable to comply with good hygiene practices should be excluded while the lesion is weeping. Lesions to be covered by dressing, where possible.	Not excluded.
Hookworm	Exclusion is not necessary.	Not excluded.
Human immune-deficiency virus infection (HIV/AIDS virus)	Exclusion is not necessary unless the child has a secondary infection.	Not excluded.
Impetigo	Exclude until appropriate treatment has commenced. Sores on exposed surfaces must be covered with a watertight dressing.	Not excluded.
Influenza and influenza like illnesses	Exclusion is not necessary.	Not excluded.
Leprosy	Exclude until approval to return has been given by an appropriate health authority.	Not excluded.
Measles	Exclude for at least 4 days after onset of rash.	Immunised contacts not excluded. Unimmunised contacts should be excluded until 14 days after the first day of appearance of rash in the last case. If unimmunised contacts are vaccinated within 72 hrs of their first contact with the first case they may return to school.
Meningitis (bacterial)	Exclude until well.	Not excluded.
Meningococcal infection	Exclude until adequate carrier eradication therapy has been completed.	Not excluded if receiving rifampicin.
Molluscum contagiosum	Exclusion is not necessary.	Not excluded.
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner).	Not excluded.

Any infection should be assessed by a doctor and an effective treatment should begin such as anti-biotics.

Children who start anti-biotics are only permitted back to care after 24hours from the 1st dose.

Any infectious illnesses will require a practicing doctor's clearance

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Parvovirus (erythema infectiosum fifth disease)	Exclusion is not necessary.	Not excluded.
Poliomyelitis	Exclude for at least 14 days from onset. Re-admit after receiving medical certificate of recovery.	Not excluded.
Ringworm, scabies, pediculosis (lice), trachoma	Re-admit the day after appropriate treatment has commenced.	Not excluded.
Rubella (german measles)	Exclude until fully recovered or for at least 4 days after the onset of rash.	Not excluded.
Salmonella, Shigella	Exclude until diarrhoea ceases.	Not excluded.
Streptococcal infection (including scarlet fever)	Exclude until the child has received antibiotic treatment for at least 24 hrs and the person feels well.	Not excluded.
Tuberculosis	Exclude until a medical certificate from an appropriate health authority is received.	Not excluded.
Typhoid fever (including paratyphoid fever)	Exclude until approval to return has been given by an appropriate health authority.	Not excluded unless considered necessary by public health authorities.
Whooping cough/ Croup	Exclude the child for 5 days after starting antibiotic treatment.	Exclude unimmunised household contacts aged less than 7 years for 14 days after the last exposure to infection or until they have taken 5 days of a 14-day course of antibiotics. (Exclude close child care contacts until they have commenced antibiotics).
Worms (intestinal)	Exclude if diarrhoea present 24hrs	Not excluded.

Note: The NHMRC recommends that children who are physically unwell should be excluded from attending school, pre-school and child care centres. This list should be read in conjunction with the National Health and Medical Research Council's publication: National Health and Medical Research Council. June, 2001. *Staying Healthy in Child Care*. 3rd edition, Canberra, AGPS. Available at: <http://www.health.gov.au/nhmrc/>

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