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|--------------------------|--------------|---------------------------------------|---|----------------|
| <input type="checkbox"/> | ALBANY CREEK | 2 Narrabeen Road, Albany Creek Q 4035 | ☎ | (07) 3325 5143 |
| <input type="checkbox"/> | PADDINGTON | 24 Guthrie Street, Paddington Q 4064 | ☎ | (07) 3217 5233 |
| <input type="checkbox"/> | TARINGA | 11 Rokeby Terrace, Taringa Q 4068 | ☎ | (07) 3719 5544 |

MEDICAL CLEARANCE

NAME: _____

ADDRESS: _____

.....

It is the policy of the Centre to exclude children from the programme who show signs of contagious illness or are generally unwell. Please find attached the Centre's Illness Policy which details exclusion procedure.

This child whilst at the Centre has displayed symptoms and signs of illness which have caused concern to centre staff. To enable your patient to return to the Centre, it is necessary for a doctor's clearance to be given.

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In your opinion, does the child have a communicable illness or infection requiring exclusion (as per attached policy)?

If so, on what date is the child able to return to the centre? _____

In your opinion, is the child fit and well enough to attend the Centre and fully participate in the Centre's activities?

If not, on what date will the child able to return to the centre? _____

DOCTOR'S DETAILS

NAME: _____

ADDRESS: _____

PHONE: _____

SIGNED: _____

DATE: _____

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Exclusion Due to Illness

Despite the implementation of strict hygiene and infection control practices at the Centre, when groups of children play and learn together, illness and disease can spread from one child to another.

Chatterbox is committed to preventing the spread of infectious illnesses and excluding children and staff members who display symptoms of illness from the Centre is an important way of preventing the introduction or re-introduction of infection. The exclusion period is the minimum period to be away from the Centre, however a child or staff member may need to stay at home longer than the exclusion period to recover from an illness.

While recommended non-exclusion means there is not a significant risk of infection to others, a child or staff member who is not excluded may still need to stay at home because they do not feel well.

Symptoms

It may be necessary to exclude those who have the following symptoms:

Appearance/Behaviour: Looks or acts differently: unusually tired, pale, lacking appetite, irritable, confused, difficult to awaken.

Conjunctivitis: tears, eyelid lining is red, irritated eyes, followed by swelling and discharge of pus from eyes.

Diarrhoea: An increase in the frequency, runniness or volume of the faeces. **Eye/Nose Drainage:** Thick mucus or pus draining from the eye or nose.

Fever/Axillary or Oral Temperature: Temperature has exceeded 38 C in the past 12 hours.

Grey or very pale faeces.

Headache and/or stiff neck.

Infected Skin: crusty skin or discharging yellow area of skin.

Itching: Persistent itching (or scratching) of body and scalp.

Loss of Appetite.

Respiratory Symptoms: Difficult or rapid breathing or severe coughing: high-pitched croupy or whooping sound after coughing, or if child or staff member is unable to lie comfortably due to continuous cough.

Sore Throat or difficulty swallowing.

Unusual spots or rashes.

Unusually dark, tea coloured urine.

Vomiting: Two or more episodes of vomiting within the previous 24 hours.

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Yellowish skin or eyes.

Staff members are responsible for identifying when children display symptoms of illness and notify the Director immediately.

Where a child or staff member displays any of the above symptoms, the Director may request a Medical Clearance from a doctor clearing the person of any contagious illness, prior to a return to the Centre.

Conditions

Exclusion may also be necessary when the child or staff member are suffering from certain illnesses and conditions. Exclusion rules are outlined below:

Minimum exclusion periods for Infectious Diseases (Based on the National Health and Medical Research Council Guidelines and “Time Out” recommendations from Queensland Health)

Condition	Child with the Infection	Persons exposed to the child with the Infection
*Varicella(Chickenpox)& Shingles	Exclude for at least 5 days after the rash first appeared AND until all blisters have scabbed over.	Exclude any child with an immune deficiency (eg leukaemia or on chemotherapy), otherwise not excluded (Female staff of childbearing age should check their immunity to chickenpox with their GP).
Cold Sores	Young children unable to comply with good hygiene practices should be excluded while sores are weeping. (Sores should be covered with a dressing where possible).	Not excluded
Conjunctivitis	Exclude until discharge from eyes has ceased	Not excluded
Cytomegalovirus	Exclusion not necessary	Not excluded (Female staff of childbearing age should check their immunity to CMV with their GP).
Diarrhoea (campylobacter, cryptosporidium, Giardia, rotavirus, salmonella, shigella)	Exclude until diarrhoea has ceased for 24 hours	Not excluded
Glandular Fever (mononucleosis)	Exclusion not necessary	Not excluded
*Haemophilus type B (Hib)	Exclude until the person has received appropriate antibiotic treatment for 4 days	Not excluded
Hand, Foot and Mouth Disease	Exclude until all blisters have dried	Not excluded
Head Lice	Exclude until approved treatment	Not excluded

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	has commenced and all live eggs have been removed from the hair.	
* Hepatitis A	Exclude until 7 days after the onset of illness or jaundice. Readmit with a medical certificate of recovery	Not excluded
Impetigo (“school sores”)	Exclude until treatment has started. Sores on exposed skin should be covered with a water tight dressing	Not excluded
Influenza and influenza like illness	Exclude until well	Not excluded
* Measles	Exclude for at least 4 days after the rash first appears.	Immunised children not excluded. Non immunised children and staff should be excluded until 14 days after the first day the rash appears in the last infected person. Excluded children or staff may return to the centre if immunised within 72 hours of contact with the first infected person
* Viral Meningitis	Exclude until well	Not excluded
* Meningococcal Infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded
Mumps	Exclude for 9 days or until swelling goes down.	Not excluded
Parvovirus (erythema infectiosum, slapped check or “Fifth Disease”)	Exclusion not necessary	Not excluded
Ringworm	Exclude until approved treatment has commenced	Not excluded
Rubella (German Measles)	Exclude for at least 4 days after the rash first appears.	Not excluded (Female staff of childbearing age should check their immunity to rubella with their GP).
Scabies	Exclude until the day after approved treatment has commenced	Not excluded
Streptococcal Infection (including scarlet fever)	Exclude until child has received antibiotic treatment for at least 24 hours and feels well.	Not excluded
* Tuberculosis	Exclude until well and approval to return has been given by a Public Health Unit Physician or delegate	Not excluded
* Typhoid Fever (including paratyphoid fever)	Exclude until well and approval to return has been given by a Public Health Unit Physician or delegate	Not excluded unless advised by public health authority
*# Whooping Cough (pertussis)	Exclude for 21 days from onset of coughing or until child has taken 5	Household contact who have received < 3 doses of

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	days of a 7-day course of antibiotics (Erythromycin).	pertussis vaccine should be excluded from the centre until they have taken 5 days of a 7-day course of erythromycin, or from 21 days after their last exposure to the infection.
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#Recommendations for exclusion of persons exposed to Pertussis are specific to Queensland Health and may differ slightly from recommendations in “Staying Healthy in Childcare”.

* The Centre will notify the nearest Public Health Unit as soon as possible if attending children or staff are diagnosed with any of these condition.

Note: For full details of common infectious diseases, please refer to the NHMRC’s publication “Staying Healthy in Childcare”.

The Director may request that the staff member or parent obtain a Medical Clearance from a doctor clearing the person of any contagious illness, prior to a return to the Centre.

It must be understood by all members of the Chatterbox community, including staff, parents and management, that there is a shared responsibility between all parties to accept and implement the infection control policies of the Centre as a high priority.

It must be stressed that the primary concern of both Chatterbox and families is the wellbeing of children.

Related Forms

- Medical Clearance

Sources

- Staying Healthy in Child Care: Preventing Infectious Disease in Child Care (4th ed.). National Health and Medical Research Council (2005). Canberra.
- “Managing Children in Child Care”. Retrieved 1st December 2009 from <http://www.ncac.gov.au>