



H010	Communicable Diseases Policy
<b>Purpose</b>	To help prevent and control the transmission of infectious diseases at JCSA and promote health within the community.
<b>Authority</b>	Criminal Code Disability Discrimination Act 1992 (Cth) Disability Standards for Education 2005 (Cth) Health Act 1986 Occupational Safety and Health Act 1984 and Occupational Safety and Health Regulations 1996 School Education Act 1999 and School Education Regulations 2000
<b>Policy</b>	The school is to promote good health outcomes through the prevention and control of the transmission of communicable diseases for all students and staff by applying the procedures outlined in this document.
<b>Delegation</b>	The Principal
<b>Related Policies</b>	Child Protection (CP001) Chronic Illness and Allergy (H001) First Aid (H008) Disability Criteria (R003) Mental Health, Suicide and Non-Suicidal Self-Injury (H006) Enrolment of Students (PC007)
<b>Date approved</b>	April 2011; May 2014, November 2018
<b>Next Review Due</b>	April 2023
<b>Review Authority</b>	Management
<b>Keywords</b>	Disease; sickness; Measles; Mumps; Rubella; Diphtheria; Tetanus; Whooping Cough; prevention; infection; immunisation; chicken pox; head lice
<b>Authorised by:</b>  <b>Chairman</b>	
<b>Date</b>	
<b>Author/Reviewer</b>	Aniek Olde – November 2018



## HP010

## Communicable Diseases Procedure

The health, safety and welfare of students and staff are of paramount concern when dealing with communicable and infectious diseases.

The school is to:

- Ensure that all staff members are aware of their responsibilities and available management options when dealing with communicable diseases
- Assist parents to access necessary health care for their children who attend school or engage in school-based activities
- Ensure that health care standards are met and that identified health risks are minimised.

Cases of suspected **meningococcal disease, measles, or hepatitis A** among students or staff will immediately be reported to the local Population Health Unit: **Great Southern Albany (08) 9842 7531**

### Parental Responsibilities

1. Parents are encouraged to have their children immunised, and are obliged to provide the school with details of all immunisations at enrolment and following. If children are not immunised, parents are also obliged to inform the school giving reasons (medical, etc.) for this.
2. When children are enrolled before they reach 4 years of age, details of later immunisations are to be made known to the school by presenting immunisation records for copying. For children less than 7 years of age, parents may request an immunisation record for their child from the Australian Childhood Immunisation Register (Free Call 1800 653 890).
3. Parents are responsible for informing the school if they suspect that their child has an infectious disease. If this is confirmed by a health professional, they are required to keep their child home avoiding his or her contact with fellow students for the prescribed period of time.
4. Should an outbreak of a communicable disease occur at school, parents are to understand that students who have not been immunised against that disease should not attend school or have contact with fellow students while the infection risk remains.
5. When a student is found to be showing signs of an infectious disease at school, parents/guardians will be asked to immediately collect their child and seek medical advice.

### School responsibilities

1. Ensure that immunisation status is recorded and maintained and reported to the relevant authorities.
2. At the beginning of each year, the school will publish immunisation advice to parents regarding the school's records requirements.
3. Where a teacher suspects, or where a parent indicates that a student has or may have a medical condition that could be infectious or otherwise require a speedy response, especially Measles, Mumps, Rubella, Diphtheria, Tetanus or Whooping Cough, the principal will seek further information in order to determine what school action may be required for the management of the condition and the maintenance of good health.
4. A letter and information will be sent to parents/guardians of students when there has been a report of an infectious disease at the school.
5. In cases of reported or identified head lice, students' hair will be checked for lice and eggs using the combing detection method. Head lice is treated in a sensitive manner and with confidentiality.



6. In the case of students with a medical condition, the Principal in collaboration with parents and, if necessary, health professionals will undertake planning to ensure that appropriate preventative and health management practices are identified so that agreed health care procedures can be put in place to maintain good health.
7. Should an outbreak of a communicable disease occur at school, the Principal may have to exclude students who have not been immunised for the duration of the infection risk.
8. When a member of staff is found to be showing signs of an infectious disease at school, they will immediately be released from work duties in order to seek medical attention and for the minimum exclusion period of the disease.

## Prevention of infection

To promote good hygiene practices and reduce the spread of infection, the school will establish agreed procedures that address the following practices:

- hand washing immediately after toileting and before eating;
- preventing contact with blood or body fluids by providing equipment, such as gloves, to reduce the risk of contact or exposure;
- regularly cleaning skin or environmental surfaces to reduce the risks of contamination or transmission of infectious disease;
- avoiding the sharing of eating and drinking utensils; and
- informing parents how to support the school in promoting good health practices and reducing the transmission of infectious diseases.

## Further information about infectious/communicable diseases may be obtained from the following:

*Code of Practice on the management of HIV/AIDS and Hepatitis at Workplaces, 2000* Available at:

[http://www.parliament.wa.gov.au/publications/tailedpapers.nsf/displaypaper/3810708ac9d08a1d4e32352ac825757500364fcb/\\$file/tp+708.pdf](http://www.parliament.wa.gov.au/publications/tailedpapers.nsf/displaypaper/3810708ac9d08a1d4e32352ac825757500364fcb/$file/tp+708.pdf)

*Communicable Disease Guidelines – for teachers, child care workers, local government authorities and medical practitioners, updated in 2017* Available at:

[https://ww2.health.wa.gov.au/~/\\_media/Files/Corporate/general%20documents/communicable%20diseases/PDF/2101-communicable-disease-guidelines.pdf](https://ww2.health.wa.gov.au/~/_media/Files/Corporate/general%20documents/communicable%20diseases/PDF/2101-communicable-disease-guidelines.pdf)

*Head lice information* Available at:

[http://healthywa.wa.gov.au/Articles/F\\_I/Head-lice](http://healthywa.wa.gov.au/Articles/F_I/Head-lice)



<b>School Attendance &amp; Communicable Diseases</b>		
<b>Disease</b>	<b>Students who have the disease</b>	<b>Unimmunised students normally in contact with the sick child</b>
<b>Chicken pox</b>	Exclude until fully recovered. Minimum exclusion: 7 days after first spots appear	Can attend school.
<b>School sores</b>	Re-admit when sores have healed. The child may be allowed to return provided that treatment is being supplied and those sores on exposed surfaces are properly covered with dressings.	Can attend school.
<b>TRACHOMA CONJUNCTIVITIS</b>	Re-admit when discharge from eyes has ceased.	Can attend school.
<b>RINGWORM</b>	Re-admit when appropriate treatment has commenced, supported by a medical certificate.	Can attend school.
<b>DIPHTHERIA</b>	Stay at home until a doctor has given a certificate of recovery.	No contact until diseased student is cleared
<b>TETANUS</b>	Stay at home until fully recovered.	Can attend school
<b>PERTUSSIS (WHOOPIG COUGH)</b>	Stay at home for 14 days from the start of illness or until 5 days of a 14 day course of antibiotics have been completed.	Keep unimmunised household contacts home for 14 days from exposure or until they have had 5 days of a 14 day course of antibiotics if they attend a childcare centre or pre-school. Unimmunised contacts in Primary School do not need to stay home.
<b>MEASLES</b>	Stay at home for at least 4 days from the appearance of the rash.	Unimmunised contacts should stay home for 14 days. If they are immunised within 72 hours of exposure to measles, they can return to school immediately.
<b>MUMPS</b>	Stay at home for 9 days after the appearance of the swelling.	Can attend school.
<b>RUBELLA</b>	Stay at home for at least 4 days after the rash appears.	Can attend school.
<b>POLIOMYELITIS</b>	Stay at home for at least 14 days from start of illness and until a doctor has issued a medical certificate of recovery.	Can attend school.