



# Guliyali Preschool Procedure

## Dealing with infectious diseases / Nappy Changing / Toilet Training



Reviewed: 27/03/2019

Education and care services regulation/s	NSW Department of Education policy, procedure or guidelines	<a href="#">Preschool Handbook</a> reference	School policy or procedure, where applicable
<u>Regulation 88</u>  <u>Regulation 168 (2)(c)</u>	The following department policies and relevant documents can be accessed from the preschool section of the department's <a href="#">website</a> ;  <ul style="list-style-type: none"> <li>• Student Health in NSW Public Schools: A summary and consolidation of policy PD/2004/0034/V01</li> <li>• Infection Control Procedure</li> </ul> Infectious diseases information	Page 32	N/A

*Resources:*

Staying healthy: Preventing infectious diseases in early childhood education and care services, 5<sup>th</sup> edition, 2013. Australian Government National Health and Medical Research

➤ **PHYSICAL HEALTH IMPACTS ON CHILDREN'S LEARNING AND DEVELOPMENT. ALL GULIYALI PRESCHOOL STAFF HAVE A RESPONSIBILITY TO:**

- Support the development of safe and healthy habits
- Encourage physical activity
- Promote eating nutritional and interesting food
- Instil healthy eating habits
- Promote daily living habits, attitudes and skills that encourage children to take responsibility for the wellbeing of themselves and others.

Guliyali Preschool staff is responsible for helping children who have health support needs. This may include giving them prescribed medications, first aid (including emergency care), temporary care when they are sick, performing health care procedures and developing individual health care plans if required.

➤ **INFECTION CONTROL:**

When children attend preschool their exposure to infectious conditions may increase simply because they have age-characteristic behaviours that help spread infection. They may also be exposed to children who are contagious without recognisable symptoms. Therefore children need guidance and support to develop good hygiene habits such as hand washing.

When required the use of wearing gloves and using vinegar and water when doing basic cleaning such as wiping table and shelf surfaces, yoga mats and/or beds and detergent and water when cleaning the toys, puzzles and art equipment can reduce the risk of spreading infection amongst children, staff and visitors.

The Regulations highlight the need to minimise health risks for young children by using appropriate health and hygiene practices. Regulation 77 (2)- The nominated supervisor of an education and care service must implement, and ensure that all staff members of and volunteers at the service implement – (a) adequate health and hygiene practices and (b) safe practices for handling and storing food – to minimise risks to children being educated and cared for by the service.

➤ **THE NATIONAL HEALTH AND MEDICAL RESEARCH COUNCIL AND THE DEPARTMENT'S STANDARD PRECAUTIONS FOR INFECTION CONTROL RECOMMEND WAYS TO REDUCE HEALTH RISKS WHICH ARE EXERCISED AT GULIYALI PRESCHOOL:**

- Use of colour-coded cleaning cloths for different areas and cleaning uses (such as bathroom basins – GREEN, toilets – BLUE, lunch tables – YELLOW, craft tables – PINK, floors - ORANGE) ensuring the colour-coded cleaning cloths labelled sign is visible in the bathroom, lunchroom, kitchen, creative arts area and laundry of Guliyali Preschool and that all staff are aware of where these signs are located in the Preschool and of the code (refer to Cleaning Cloth Code attached and marked 'A').
- Tissues, face cloths or cloth towels are not used for more than one child.
- Gloves and tissues are used when wiping a child's nose, after wiping a child's nose, wash hands thoroughly with soap and warm water, or use an alcohol-based hand rub.
- Gloves, paper towels and tissues are disposed of immediately after use into a container with a disposable lining.
- Children do not share food, water bottles, sheets and pillowcases, cloth towels or other personal items.
- Hand basins are not used for food and drink preparation or rinsing soiled clothing.
- Care is taken with all bodily fluids, secretions and excreta.
- Use of disposable gloves at all times when dealing with bodily fluids, secretions or excreta.
- Display hygiene procedures in bathroom/toilet areas, lunchroom and kitchen.

➤ **HANDWASHING:**

Hand washing including drying hands is one of the most effective ways of preventing the spread of infections.

Hand washing at Guliyali Preschool will occur:

- At arrival to Preschool
- After going to the toilet
- Before and after helping children with toileting (which may include nappy changing)
- Before and after giving first aid
- Before and after giving medication
- After wiping a child's nose
- Before and after eating or handling food

- After patting or touching animals
- Before and after preparing or cooking food
- Before and after using play dough
- Before and after applying sunscreen
- After contact with any bodily fluids for example when toileting accidents occur or a child is sick

When teaching children to wash their hands we exercise the following points:

- Use soap and running water
- Wash hands thoroughly while counting slowly from one to fifteen (or sing a song such as the ABC song)
- Wash all parts of the hands including sides and between the fingers
- Rinse hands well to remove soap
- Dry hands with warm automatic hand-dryer

➤ **INFECTIOUS DISEASES:**

The *Education and Care Services National Regulations* (regulation 88) requires that an infectious diseases policy is in place that outlines the practices to be followed. Children suffering from certain infectious diseases will be excluded from attending preschool. Staff always refers to the current NSW Health guidelines on exclusion and follows standard infection control procedures. If a child is suspected of having an infectious disease, for example chicken pox they will be isolated from other children, made comfortable and supervised by a staff member until collected.

If a child contracts a vaccine-preventable disease, preschool staff should tell the principal who will contact parents and the nearest public health unit if necessary. All parents must be told of any outbreak of an infectious disease at the preschool and asked to keep children with infectious diseases at home for the appropriate timeframe. This information can be found in the NSW Health fact sheet, Infectious Diseases of Children

<http://health.nsw.gov.au/factsheets/infectious/childhoodillness.html>. The child must also get a medical clearance from a doctor before they return to preschool.

Parents and Carers should be encouraged to tell the class teacher if a family member has an infectious disease, as this can help reduce the risk of the infection spreading to others. Preschool staff will ensure that parents from culturally and linguistically diverse backgrounds are given information in their first language if necessary.

➤ **STANDARD PRECAUTIONS FOR INFECTION CONTROL:**

Standard Precautions for Infection Control should be used by all staff, students, visitors, volunteers and contractors to reduce the risk of transmission of infectious diseases during care procedures.

*What are standard precautions?*

Standard Precautions in the workplace involve the use of safe work practices and protective barriers for the control of the spread of infection from both recognized and unrecognized sources of infection. It is not possible to reliably identify sources of infections or communicate diseases therefore it is necessary to presume that the blood including dried blood and body substances of

all persons be considered as potential sources of infection independent of diagnosis or perceived risk.

*When do I use standard precautions?*

Standard Precautions must be used before and after care procedures, when providing first aid, when handling and disposing of sharps and contaminated material and when handling animals and potentially infectious agricultural substances.

*There is a potential risk of infection when exposed to:*

- Blood including dried blood
- All other body fluids, secretions and excretions including saliva and mucous but excluding sweat
- Broken skin
- Mucous membranes e.g. mouth and nose

*What so I need to do?*

**1. Use good hygiene practices**

- Wash your hands after any contamination following any care procedure and after any activity which involves contaminated substances whether or not gloves are worn.

**2. Take care of your skin**

- Take care of skin as it is the first barrier to disease and protect damaged skin by covering with a waterproof dressing or by gloves.

**3. Use good handling and disposal procedures**

- Minimise contact with potentially infectious substances by using personal protective equipment such as gloves, aprons, masks or goggles.
- Ensure that reusable equipment such as that used in first aid provision is cleaned after use and single use items are discarded after use.
- Follow the Department's procedures when handling and disposing of sharps and use a suitable sharps container.
- Dispose of other contaminated or infectious waste such as from first aid or care procedures, in a plastic bag which is tied securely and placed inside a second plastic bag and tied securely then placed in the workplace garbage hopper.
- Contain all blood and body fluids i.e. confining spills, splashes and contamination of the environment.
- Clean up spills promptly.

**4. Take prompt action if contact is made with blood or body fluids**

- Wash skin with mild soap and water, rinse eyes with water, rinse your mouth and spit out.

➤ **CARE FOR KIDS EARS:**

- At Guliyali Preschool, the educators ensure that intentional teaching occurs around ear health, effective hygiene practices and the prevalence of otitis media particularly in Aboriginal children.
- During preschool and primary school years many children suffer middle ear infections (Otitis Media) and mild hearing loss. Some studies suggest that up to 91% of Aboriginal and Torres Strait Islander children in rural communities present with Otitis Media (OM).
- Left untreated, ear infections can lead to hearing loss which may limit a child's capacity to develop socially and emotionally. Ear infections can also adversely affect educational outcomes.
- The Care for Kids' Ears kit for early childhood and community groups has been created to raise awareness of ear disease and hearing loss in Aboriginal and Torres Strait Islander communities. Featuring the characters Kathy and Ernie, the kit aims to deliver positive and consistent ear health messages to young children whilst also helping you, one of the most influential care providers of children, understand the ear health message.

*A sample of this intentional teaching involves;*

- Say 'Good Morning/Hello' in an Aboriginal language; 'Yaama' of Gamilaraay, 'Ngara' of Gubbi Gubbi and more recently 'Yandandji' of Biri.
- Shared reading experience 'Healthy Ears, Happy Kids Story Book' by NSW Health.
- Yarning circle using the 'message stick', allow children to discuss the importance of looking after our ears; washing face/hands, blow your nose, eat fruit/veggies, keep away from cigarette smoke and get your ears checked regularly.
- Examine an ear model.
- 'Process of Hearing Animation' via YouTube.
- Demonstrate what happens if we don't use a tissue when blowing our nose using glitter.
- Demonstrate and instruct children through the correct nose blowing techniques to keep passage clear, blowing nose into elbow when sneezing and explain process at the 'nose blowing station'.
- Complete a listening task to check children's level of hearing by asking students to lie on the floor and close their eyes whilst the educator plays a variety of musical instruments, children to determine the sound via YouTube.
- Complete learning experience with a memory card game based on 'Care for Kids' Ears'.

➤ **NAPPY CHANGING AND OTHER TOILETING PROCEDURES:**

*Equipment for nappy changing should include:*

- Disposable gloves
- Storage space for clean nappies and other necessary supplies
- Disposable wipes
- Paper towels
- Plastic bags for soiled clothes
- Separate bin for disposal of nappies (available from contractors supplying sanitary napkin disposal units. The choice of contractor is a school-based decision)

*When changing nappies, the following procedures are to be used:*

- Disposable gloves should be worn
- Children should be wiped with disposable wipes
- Paper wipes and gloves should be disposed of in a plastic-lined bin
- Nappies should be disposed of into an appropriate bin

- Children's hands should be washed after each nappy change
- Children should not be left unattended
- Adult's hands should be washed before putting on and after taking off gloves

**NOTE:** If children are still wearing nappies parents should provide nappies, disposable wipes and any creams that the child needs. Disposable nappies should be used to aid in infection control.

*A good practice guide for spilt urine or faeces and cleaning children after wetting or soiling themselves when cleaning spilt urine or faeces:*

- Wear gloves
- Place paper towel over the spill and carefully remove paper towel and contents
- Place the paper towel and gloves in a plastic bag, seal the bag and put in the rubbish bin
- Put on new gloves and clean the surface with warm water and detergent and allow to dry
- Use disinfectant after cleaning if the spill came from a child suspected of having an infectious disease
- Remove and discard gloves
- Wash hands thoroughly with soap and warm water

*If a child needs cleaning after wetting or soiling themselves the following procedures apply:*

- Wear gloves and use pre-moistened disposable wipes
- Wet paper towels may be used as an alternative
- Ensure running water is used to wet the towels (not a bowl or sink full of water) and that towels are only used once
- Dispose of paper towels
- Place soiled clothes in a sealed plastic bag for parents to take home
- Remove gloves, discard them and wash hands thoroughly with soap and warm water

*The Toilet Cleaning Steps are clearly displayed in the children's bathroom (Attachment A). The Toilet Cleaning Register is clearly displayed next to the Toilet Cleaning Steps (Attachment B) and the Nappy Changing Steps are clearly displayed above the Nappy Changing Table (Attachment C).*

*For further information, please refer to the DoE Handbook;*

- Wellbeing Appendix 2.1 *Standard precautions for infection control*
- Wellbeing Appendix 2.3 *Nappy changing and other toileting procedures*
- Wellbeing Appendix 2.4 *A good practice guide for spilt urine or faeces and cleaning children after wetting or soiling themselves*

#### ➤ **Toilet Training:**

Guliyali Preschool accepts enrolments of children who have not yet been toilet trained. Toileting occurs at any time of the day and is specific to individual needs. Educators will communicate with parents/guardians to develop consistency with their child's toileting habits. Educators must be aware of and consider any special requirements related to culture, religion or privacy needs. Decisions about when to begin toilet training will be made by families, or may occur through shared decision making between families and early childhood professionals. This decision is based on mutual respect and open communication, which is crucial for a good outcome. Families may have strong views and preferences about when and how their child learns to use the toilet, which may come from their cultural background or individual preferences which must be respected by Educators and Staff.

The priority of the individual child's wellbeing is paramount, and the decision to begin assisting the child to learn to use the toilet should be based on signs of readiness from the child and discussion with families.

Early signs of readiness, will often start to appear when children are around 18-24 months old and may include:

- Showing interest in the toilet, including having an interest in others using the toilet.
- Indicating a need to go to the toilet either before, or while they are passing urine or doing a poo.
- Staying dryer for longer.
- Begins to dislike wearing a nappy and perhaps tried to pull it off when it's wet or soiled Indicating a desire to sit on the toilet.
- Indicating a desire to sit on the toilet.

It is important to keep the process subdued and not place unnecessary attention and pressure on the child to prosper. Acknowledging children's successes, no matter how infrequent or small is vital for their self-esteem and confidence. Families and Educators can expect accidents, which should be treated respectfully and with a supportive manner.

Educators and families will collaborate and communicate how the toilet learning is going, both in care and at home. This will support children to become more familiar and comfortable with the toilet training process. Children should be given the opportunity to complete the toileting procedure, such as toileting, washing hands, flushing the toilet, keeping the bathroom environment clean independently, while at the same time keeping in mind the importance of hygiene and providing assistance when needed.

During this milestone, children should be empowered and encouraged to be successful. Toilet training varies for individual children, as Educators we can take advantage of the child being in a group and the many opportunities that provides for learning from each other. Educators and Families need to remember that comparing children is inappropriate and unacceptable behaviour.