

Tenterfield Preschool Kindergarten Inc

Parent handbook

2024



Approved Provider: **Tenterfield Preschool Kindergarten Inc.**

Provider Approval Number: **PR -00004950** No conditions apply

Approved Service: **Tenterfield Preschool**
90 Wood Street Tenterfield NSW 2372

Service Approval Number: **SE - 00009215** No conditions apply

Nominated Supervisor: **Jules Hennessy**

Service Rating: **Meeting National Quality Standards**
No Service or temporary waivers

Days & Hours of Operation:

<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>	<u>THURSDAY</u>	<u>FRIDAY</u>
8am to 3.30pm	8am to 3.30pm	8am to 3.30pm	8am to 3.30pm	8am to 3.30pm

Closed Public Holidays

Closed School Holidays

Person in charge: **Julianne Hennessy** **Phone:0437675034**

Complaint Contact: **Jules Hennessy** **Phone: 02 67361616**

Educational Leader: **Jules Hennessy** **Phone: 02 67361616**

Regulatory Authority: **NSW Early Childhood Education & Care Directorate**
Department of education & Communities
Locked Bag 5107
PARRAMATTA NSW 2124
Phone: (02) 9716 2100 or 1800 619 113
Fax: (02) 9716 2162
Email: ececd@det.nsw.edu.au
Website: www.educationandcommunities.nsw.gov.au

The Preschool opens at 8.00am and closes at 3.30pm.

Remember to support your child to wash his/her hands-on arrival and departure to reduce the risk of cross-infection, also support child's siblings to was hands.

A sign in/out sheet is located in the foyer of the Preschool. Children must be signed 'in' stating the actual time of arrival and 'out' each day the child attends as required by the Regulations governing all NSW Centre-based facilities. Signing in is also an important safety measure as the sign in sheets are used as the roll in an emergency.

Grievances and Complaints

Parents with concerns are asked to speak with the Nominated Supervisor. The Nominated Supervisor will then investigate the matter. The Nominated Supervisor will arrange a quiet place and time for consultations between parents and staff members; it is our policy that any issues that may be distressing are not discussed in the hearing of the children. Every attempt will be made to achieve an outcome that is satisfactory to all parties. Should you feel that your concerns have not been adequately addressed at a Preschool level please contact:

Nominated Supervisor

Julianne Hennessy
6736 1616 or 0437 675 034

Management Committee

President - Alison Lawrence
C/PO Box 249
Tenterfield NSW 2372
0413 307 433

If you are still dissatisfied with the outcome please contact:

1800 619 113
Email: ececd@det.nsw.edu.au
New England Office Armidale
02 6772 2106

<https://education.nsw.gov.au/early-childhood-education>

Or our Regulatory Authority

ACECQA
1300 422 327
enquiries@acecqa.gov.au

<https://www.acecqa.gov.au/>

<https://www.acecqa.gov.au/nqf/national-law-regulations>

The Preschool Team

Jules Hennessy

Director/Nominated Supervisor / Educational Leader

Diploma of Children's Services

Leonie Crowe

Educator/ Compliance and WH&S Officer.

Diploma of Children's Services

Janene Wright

ECT Educator

Bachelor of Early childhood Teaching

Chloe Horn

Working towards ECT Educator

Diploma of Children's Services

Candice Potter

Diploma of Children's Services

Educator

Diploma of Children's Services

Karyn Giammichele

Educator

Diploma of Children's Services.

Brittney Wehman

Working towards ECT Educator

Diploma of Children's Services

Chloe Dowd

Trainee Educator

Working towards Diploma in
Children's Services.

Talen Kelly

Trainee Educator

Working towards Cert 111 in
Children's Services.

Megan Donges

Casual Support Worker/Volunteer

Department of Education Fee relief funding 2024.

The Start Strong for Community Preschools program provides funding to deliver affordable quality preschool education for 3 to 5 year old children enrolled in eligible community and mobile preschools in NSW.

From 2024, fee relief for families announced as “Affordable Preschool” in the context of the NSW Government's Early Years Commitment will be integrated into Start Strong and provide community and mobile preschools with sustainable long-term funding to deliver at least 600 hours of low, or no cost preschool to eligible children.

Start Strong for Community Preschools funding is provided for children in the two years before school and supports enrolment of at least 600 hours per year or 15 hours per week. Evidence shows that this level of participation in a quality early childhood education program in the two years before school is associated with better outcomes for children.

Full fee relief will be passed onto families in 2024 which means children who attend 2 days will be fee free. You will receive an invoice at the beginning of each term stating the days your child attends, the daily rate and the fee relief applied.

Tenterfield Preschool Kindergarten Philosophy

We acknowledge the traditional custodians of the land, we are grateful for the Ngarabal country and promise to care for the land, water and animals on which we learn and play.

At Tenterfield Preschool we are mindful to develop meaningful connections with children, families, each other, and the community as we establish our sense of belonging. Our Preschool was established in 1958 when parents and the local community saw the need to create a service to educate and care for their children. We show respect and appreciation by continuing to strengthen our foundations in the Tenterfield community and strive to build a community that values every child and that respects their rights to feel safe and supported as they prepare for their transition to school and, more importantly, supports their readiness for life.

We respect the rights of children, recognise them as individuals and believe children are social capable learners. We encourage children to follow their interests, explore, discover, experiment, create, investigate problem solve, develop their independence and sense of self identity, influence their world, think critically, express their ideas and opinions, take and balance risks though play. We believe children have the right to simply “be” and to learn in a way that suits their development and unique learning style.

Children learn best within an inclusive environment with secure relationships, those with their families, friends, cultural group and community using our uniqueness and diversity as our strengths. Experienced educators work in partnership with families to develop open and trusting reciprocal relationships and communicate to co-construct learning through surveys, daily verbal conversations, and via Storypark. Educators are mindful to develop quality documentation and reflect what is best for children and why when implementing play spaces and experiences to offer holistic inspiring learning through play. We understand that play based learning should be fun, hands on, challenging, messy, spontaneous whilst offering a balance for the need of stimulation and moments of calm throughout their day.

Our service respect children, family and educators’ cultures, language, family dynamic, and potential. We believe it is our responsibility to advocate on behalf of children, support families, and educators embracing cultural celebrations and actively engaging in partnerships with community to maintain a sense of belonging, connection to the land and pride in our shared history and cultures. We embed our Reconciliation action plan in daily practices in the classroom, wound the school and in our community.

Children have the right to come into a world that is respected and sustainable. By investing in sustainable practices promoting recycling by reducing and repurposing resources, we provide an environment for children to have a strong connection with their planet. We provide opportunities to explore to nature, the rhythms of our seasons and engage in their natural environment, the feel of grass, the sun on our skin, the fresh air we breathe, are essential for everyone’s development and wellbeing, as well as for the future of our planet.

What to bring to Preschool

Appropriate sun safe clothing.

Bucket or Legionnaire-style

T-shirts or dresses with sleeves that cover the shoulders

Longer length shorts

Spare clothes suitable to season.

Appropriate footwear that covers the top of the foot suitable for fundamental movement and physical development.

What NOT to wear...

Tank-tops

Strappy Dresses

Short Length Shorts

Long Dresses & Skirts

Loose Cords or belts

Jewellery that can get caught while playing

Thongs, cowboy boots or gumboots.

Nude food lunchbox...

Reusable, sustainable containers

Tortilla Wraps or sandwiches. They can be filled with your child's favourite salad items and ham, tuna, salmon, cheese, vegemite, honey, cheese spread etc.

Yoghurt

Cheese

Fresh Fruit (you will need to wash and cut your child's fruit and pack it in easily opened containers)

Mini Muffins (avoid chocolate)

Rice Crackers, Rice Cakes, Vitawheats or Corn Thins

Water Bottle

WHAT NOT TO CHOOSE:

Packaged or pre-wrapped food

Nuts or nut products.

Lollies

Chocolate/ Nutella/ chocolate custards/drinks.

Sweet Biscuits

Desert snacks (these are full of sugar, preservatives, artificial colours and flavours)

Chips

Muesli bars and other snack bars (contain large amounts of sugar and fat)

Keep it Cool...

Pack in a good quality insulated bag

Add a small ice brick (purchased from any departed store or supermarket)

Include a small drink bottle containing water only

Lunchbox to be put in the Preschool room fridge.

Label EVERYTHING!

Use permanent markers on packaging, small containers or zip lock bags

Use labels purchased from "Stuck on You or "Identity Direct"

Use a label marker to print your own labels

EYLF (Early Years Learning Framework)

Learning Outcome 1: Children have a strong sense of identity

- 1.1 Children feel safe, secure, and supported.
- 1.2 Children develop their emerging autonomy, inter-dependence, resilience and sense of agency.
- 1.3 Children develop knowledgeable and confident self identities.
- 1.4 Children learn to interact in relation to others with care, empathy and respect.

Learning Outcome 2: Children are connected with and contribute to their world

- 2.1 Children develop a sense of belonging to groups and communities and an understanding of the reciprocal rights and responsibilities necessary for active community participation.
- 2.2 Children respond to diversity with respect.
- 2.3 Children become aware of fairness.
- 2.4 Children become socially responsible and show respect for the environment.

Learning Outcome 3: Children have a strong sense of wellbeing

- 3.1 Children become strong in their social and emotional wellbeing.
- 3.2 Children take increasing responsibility for their own health and physical wellbeing.

Learning Outcome 4: Children are confident and involved learners

- 4.1 Children develop dispositions for learning such as curiosity, cooperation, confidence, creativity, commitment, enthusiasm, persistence, imagination and reflexivity.
- 4.2 Children develop a range of skills and processes such as problem solving, inquiry, experimentation, hypothesising, researching and investigating.
- 4.3 Children transfer and adapt what they have learned from one context to another.
- 4.4 Children resource their own learning through connecting with people, place, technologies and natural and processed materials.

Learning Outcome 5: Children are effective communicators

- 5.1 Children interact verbally and non-verbally with others for a range of purposes.
- 5.2 Children engage with a range of texts and gain meaning from these texts.
- 5.3 Children express ideas and make meaning using a range of media.
- 5.4 Children begin to understand how symbols and pattern systems work.
- 5.5 Children use information and communication technologies to access information, investigate ideas and represent their thinking.

Our Daily Routine

8.00 - 9.00	Meet and greet children, unpack lunches and folders. Free Play activities following the weekly curriculum plan.
9.00 - 9.30	Welcome Group Time. Days of the week, months of the year, Star of the Day, indoor/outdoor helpers, group activity discussions
9.30 - 9.45	Fruit Break.
9.45 - 10.45	Activities – Intentional and free play following the weekly curriculum plan.
10.45 - 11.05	Morning Tea – Choices empower children to make decisions which affect them. This time also provides a social event for the children and Educators who model healthy eating habits. These routines provide an introduction to school life and the responsibilities involved. Educators will interact with children intentionally teaching nutrition principles from the 'Munch and Move curriculum'.
11.05 - 11.30	Morning Group Time (Language and Literacy) Book of the week.
11.30 - 12.45	Outdoor Education Program. Physical activity, connecting with nature and fundamental movement skills
12.45 - 1.00	Pack Away.
1.00 - 1.30	Reflection and Sharing, Lunch. Reflection and Sharing has educational value and provide the opportunity for the child to speak in front of their peers in a relaxed atmosphere which nourishes self-esteem, confidence, improves expressive language skills and extends their vocabulary. We encourage children to talk about (reflect upon) their day at Preschool. What they would like to play with or do, who they like to play with or what was their favourite part of their Preschool day.
1.30 - 2.30	Quiet time and rest areas made available. Children are then given the opportunity to move to quiet activities, relax and rest during the afternoon. This structure allows us to effectively meet the needs of individuals and groups.
2.30 - 3.15	Free play, intentional workbook activities, music and movement, spontaneous activities.
3.15 - 3.30	Quiet story or puzzle Preschool day concludes.

Times are approximate and will change during the Summer and Winter months and as the year progresses and the UV index checked and recorded daily.

Parent Participation

We are a committee operated Preschool with all families members. We encourage all families to be involved in our parent committee. Our AGM is held in March each year and a monthly meeting held to make all decisions for the best interest of the Children, families ad the community.

Allergy Aware Zone

Tenterfield Preschool is Allergy aware. This means we are aware of intolerances and medical conditions, and we **do not encourage nuts or nut products**. While we understand the nutritional value of nuts we want you to keep them for home, meaning, **NO Nuts or nut products are encouraged at Preschool**.

Accident Insurance Policy

Personal Accident Insurance cover is arranged for each child. The policy covers ambulance, dental, optical, medical and incidental expenses not covered under Medicare. The policy covers children traveling to and from Preschool. Your child is automatically covered once enrolled at Preschool.

HEALTH AND SAFETY

Children suffering from an infectious disease should be excluded from Preschool for the duration of the infection. It is also important to notify Preschool Educators of any health or home activities that may affect your child's behavior at Preschool. When a child is injured an Educator will administer first aid immediately, comfort the child and notify you, (depending on the nature of the injury). All permanent Educators have current first aid certificates.

All injuries are recorded, and parents are requested to read and sign the form. A copy of the form will be handed back to you and the original kept on file in your child's file.

Please keep your child at home when suffering a heavy cold or possible infectious disease or virus and notify the Preschool immediately if your child contacts a contagious illness as this is your responsibility.

Medication

Educators will only administer medication **prescribed by a doctor**. Over the counter medication must also be accompanied by written documentation from the doctor.

Medications must be handed to an Educator along with a completed Medication Authority Form. **Under no circumstances should medication be left in a child's bag**. Please remember to collect medication before departing. Two Educators will administer the medication after checking the dosage and expiry date. After administering the medication each Educator will sign the form.

Sun safety

Sunscreen applications are applied on arrival as part of our morning routine. We use Cancer Council 50+ and when the UV is 5 or above we head to shade then indoors. If you do not wish for your child to use this sunscreen, please let us know and or you can provide your own.

Storypark

Storypark is exclusive to our Preschool community. We do not share information with other services who use the same platform. You will receive daily reflections, observations and updates via Storypark. The photos used on storypark cannot be shared or used on other social media platforms. We take our confidentiality seriously and if this occurs, you will be asked to remove and or delete such posts on social media.

Fact Sheet

HEALTHY LUNCHBOXES



There are many foods that can be used to pack a healthy lunchbox.

Fruit & Vegetables

Fruit and vegetables will provide a good daily source of vitamins, minerals and dietary fibre.

All chopped fruit and vegetables can be easily packed into small containers for the lunchbox, making them quick and easy to eat.

LUNCHBOX IDEAS:

- cucumber, carrot and celery sticks (steam carrot and celery until tender for younger children), corn cob, snow peas, green beans, cherry tomatoes, capsicum strips.
- fresh fruit eg apple, pear, kiwi fruit, strawberries, orange, grapes and bananas
- tub of diced fruit in natural juice
- dried fruit *occasionally* – eg mini box of sultanas or a few dried apricots or apple rings
- salad filling in a sandwich, wrap or roll (eg lettuce, grated carrot, avocado, cucumber)



Meat & other protein foods

Meat and other protein foods provide protein and iron. Limit the use of sausages and processed luncheon/deli meats (eg devon and salami) as they are high in saturated fat and salt.

LUNCHBOX IDEAS:

- cold roast beef, lamb, pork, chicken, tuna or salmon as a filling in sandwiches, rolls and wraps or added to salad
- hardboiled egg in salad, sandwiches or for a snack
- baked beans, lentil patty
- left-over casserole, rissoles, meatballs, bolognaise sauce, stirfry with tofu

Dairy Food

Dairy foods, such as milk, yoghurt, custard and cheese are an important source of protein and calcium. Reduced fat milk and dairy foods (approx. 2% fat) are suitable for most children over 2 years of age.

LUNCHBOX IDEAS:

- cheese slice, cheese stick or cubes of cheese as a snack with cucumber slices and cherry tomatoes
- cheese in sandwiches, rolls and wraps or on crackers or rice cakes
- yoghurt or custard (small tub or pouch)
- plain milk (small UHT poppers of plain milk are easy to add to lunchboxes)
- calcium-enriched soy alternatives (soy milk, soy yoghurt)

Breads & Cereals

Bread, grains and cereal foods provide important nutrients and energy for busy, growing children. Wholegrain or wholemeal varieties are the best choices.

LUNCHBOX IDEAS:

- sandwiches, rolls, wraps, pita bread
- fruit bread, scone, pikelets
- crackers, corn and rice cakes, breadsticks
- rice, noodles, pasta



For more information and ideas on healthy eating and physical activity go to www.healthykids.nsw.gov.au



Lunchbox Checklist for Food Brought from Home for Preschool (services open for less than 8 hours a day)

A Guide for Families

Use this checklist to help provide nutritious food each day if your child is in care for less than eight hours. This usually includes morning tea and lunch.

The recommended number of serves from each food group, while in care, is provided below.

Food Group	How much food should I pack for my child at preschool
	Meal/snack breaks: morning tea and lunch only
Wholegrain cereal foods and breads <i>Each of the following is 1 serve:</i> ★ 1 slice of bread ★ ½ cup cooked rice ★ ¾ cup breakfast cereal ★ ½ cup cooked pasta	2 serves <input type="checkbox"/>
Fruit <i>Each of the following is 1 serve:</i> ★ 1 cup chopped fruit ★ 30g dried fruit ★ 2 small pieces of fruit <i>(only occasionally)</i> ★ 1 medium size piece of fruit	1 serve <input type="checkbox"/>
Salad, vegetables or legumes <i>Each of the following is 1 serve:</i> ★ ½ cup cooked or raw vegetables ★ 1 cup salad ★ ½ cup baked beans or lentils	1 serve <input type="checkbox"/>
Dairy foods or high calcium alternatives <i>Each of the following is 1 serve:</i> ★ 250ml milk ★ ¼ cup yoghurt ★ 40g cheese ★ 2 slices cheese ★ 250ml calcium fortified soy milk <i>Choose mostly reduced fat milk and dairy products for children over 2 years of age</i>	½ a serve <input type="checkbox"/>
Lean meats, chicken, fish, eggs and alternatives <i>Each of the following is ¼ of a serve:</i> ★ 50g cooked red meat ★ 60g cooked chicken ★ 75g fish ★ 2 medium eggs ★ 1 cup cooked legumes	¼ a serve <input type="checkbox"/>

NSW Immunisation Schedule

Funded October 2021



Childhood vaccines			
Age	Disease	Vaccine	Information
Birth	Hepatitis B	H-B-VAX II OR ENGERIX B (IM)	Within 7 days of birth (ideally within 24 hours)
6 weeks	Diphtheria, tetanus, pertussis, <i>Haemophilus influenzae</i> type b, hepatitis B, polio	INFANRIX HEXA (IM)	ROTARIX: Dose 1 limited to 6-14 weeks of age BEXSERO: Prophylactic paracetamol recommended. Catch up available for Aboriginal children <2 until 30/06/2023
	Pneumococcal	PREVENAR 13 (IM)	
	Rotavirus	ROTARIX (Oral)	
	Meningococcal B (Aboriginal# children only)	BEXSERO (IM)	
4 months	Diphtheria, tetanus, pertussis, <i>Haemophilus influenzae</i> type b, hepatitis B, polio	INFANRIX HEXA (IM)	ROTARIX: Dose 2 limited to 10-24 weeks BEXSERO: Prophylactic paracetamol recommended. Catch up available for Aboriginal children <2 until 30/06/2023
	Pneumococcal	PREVENAR 13 (IM)	
	Rotavirus	ROTARIX (Oral)	
	Meningococcal B (Aboriginal children only)	BEXSERO (IM)	
6 months	Diphtheria, tetanus, pertussis, <i>Haemophilus influenzae</i> type b, hepatitis B, polio	INFANRIX HEXA (IM)	Children ≥6 months with at risk conditions for IPD‡ are recommended to receive an additional dose of PREVENAR 13 – see AIH* Aboriginal children ≥6 months with certain at risk conditions may require an additional dose of Bexsero – see AIH*
12 months	Meningococcal ACWY	NIMENRIX (IM)	Bexsero: Prophylactic paracetamol recommended. Catch up available for Aboriginal children <2 until 30/06/2023
	Pneumococcal	PREVENAR 13 (IM)	
	Measles, mumps, rubella	MMR II OR PRIORIX (IM or SC)	
	Meningococcal B (Aboriginal children only)	BEXSERO (IM)	
18 months	Diphtheria, tetanus, pertussis	INFANRIX OR TRIPACEL (IM)	
	Measles, mumps, rubella, varicella	PRIORIX TETRA OR PROQUAD (IM or SC)	
	<i>Haemophilus influenzae</i> type b	ACT-HIB (IM OR SC)	
4 years	Diphtheria, tetanus, pertussis, polio	INFANRIX-IPV OR QUADRACEL (IM)	Children with at risk conditions for IPD‡ are recommended to receive an additional dose of PNEUMOVAX 23 – see AIH*

At risk groups, adolescents and adults			
Age/group	Disease	Vaccine	Information
All people with asplenia, hyposplenia, complement deficiency and treatment with eculizumab	Meningococcal ACWY	NIMENRIX (IM)	See AIH* for required doses and timing Additional groups are recommended to receive these vaccines but these are not funded
	Meningococcal B	BEXSERO (IM)	
>5 years with asplenia or hyposplenia	<i>Haemophilus influenzae</i> type b	ACT-HIB (IM or SC)	If incompletely vaccinated or not vaccinated in childhood
Year 7	Diphtheria, tetanus, pertussis	BOOSTRIX OR ADACEL (IM)	
	Human papillomavirus	GARDASIL 9 (IM)	
Year 10	Meningococcal ACWY	NIMENRIX (IM)	
Pregnant	Influenza	INFLUENZA	Influenza: Any trimester
	Pertussis	BOOSTRIX OR ADACEL (IM)	Pertussis: each pregnancy between 20-32 weeks
Aboriginal people ≥50 years	Pneumococcal	PREVENAR 13 (IM) then PNEUMOVAX 23 (IM)	Prevenar 13: ≥50 years Pneumovax 23: 2-12 months later Pneumovax 23: at least 5 years later
70 years	Pneumococcal Zoster	PREVENAR 13 (IM) ZOSTAVAX (SC)	Pneumococcal funded for people ≥70 Zoster: Catch up available for 71-79 year olds until 31/10/2023
People with at risk conditions for IPD‡	See the online AIH* for conditions recommended to receive PREVENAR 13 and PNEUMOVAX 23		

Influenza		
Age/at risk condition	Recommendation	Information
All children 6 months <5 years	ANNUAL INFLUENZA VACCINATION	For vaccine brands and eligibility see: www.health.nsw.gov.au/immunisation/Pages/flu.aspx
Aboriginal people ≥ 6 months		
People with at risk conditions ≥6 months		
≥65 years		
Pregnant women		

The term Aboriginal is inclusive of Aboriginal and Torres Strait Islander people.

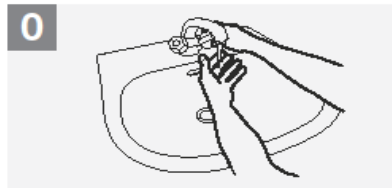
‡ IPD: Invasive pneumococcal disease. *AIH: Online Australian Immunisation Handbook.

October 2021 © NSW Health.
SHPN (HPNSW) 210933.

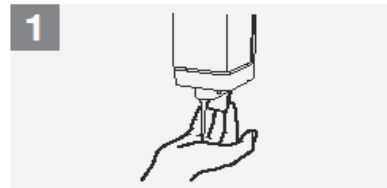
How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

 Duration of the entire procedure: 40-60 seconds



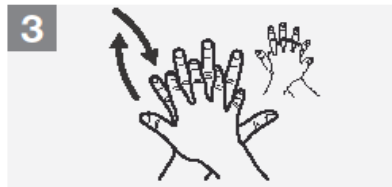
Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



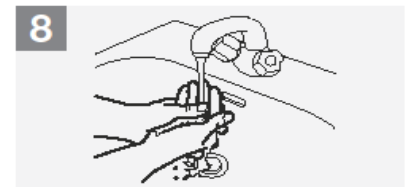
Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



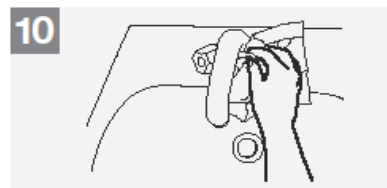
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



World Health
Organization

Patient Safety

A World Alliance for Better Health Care

SAVE LIVES
Clean Your Hands

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WHO acknowledges the Hôpitaux Universitaires de Genève (HUG), in particular the members of the Infection Control Programme, for their active participation in developing this material.

May 2009

Recommended minimum exclusion periods

ADAPTED FROM STAYING HEALTHY | 5TH EDITION | 2013

Condition	Exclusion of case	Exclusion of contacts ^a
Campylobacter infection	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded
Cytomegalovirus (CMV) infection	Not excluded	Not excluded
Conjunctivitis	Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis	Not excluded
Cryptosporidium	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Diarrhoea (No organism identified)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Fungal infections of the skin or nails (e.g. ringworm, tinea)	Exclude until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Glandular fever (mononucleosis, Epstein Barr virus (EBV) infection)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
Haemophilus influenzae type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded. Contact a public health unit for specialist advice
Head lice (pediculosis)	Not excluded if effective treatment begins before the next day at the education and care service. The child does not need to be sent home immediately if head lice are detected	Not excluded
Hepatitis A	Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice	Not excluded. Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes simplex (cold sores, fever blisters)	Not excluded if the person can maintain hygiene practices to minimise the risk of transmission. If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry. Sores should be covered with a dressing, where possible	Not excluded
Human immunodeficiency virus (HIV)	Not excluded. If the person is severely immune compromised, they will be vulnerable to other people's illnesses	Not excluded
Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)	Not excluded	Not excluded
Hydatid disease	Not excluded	Not excluded
Impetigo	Exclude until appropriate antibiotic treatment has started. Any sores on exposed skin should be covered with a watertight dressing	Not excluded
Influenza and influenza-like illnesses	Exclude until person is well	Not excluded
Listeriosis	Not excluded	Not excluded
Measles	Exclude for 4 days after the onset of the rash	Immunised and immune contacts are not excluded For non-immunised contacts, contact a public health unit for specialist advice. All immunocompromised children should be excluded until 14 days after the appearance of the rash in the last case
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case
Molluscum contagiosum	Not excluded	Not excluded
Mumps	Exclude for 9 days or until swelling goes down whichever is sooner ¹	Not excluded
Norovirus	Exclude until there has not been a loose bowel motion or vomiting for 48 hours	Not excluded
Pertussis (whooping cough)	Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing	Contact a public health unit for specialist advice about excluding non-vaccinated and incompletely vaccinated contacts, or antibiotics
Pneumococcal disease	Exclude until person is well	Not excluded
Roseola	Not excluded	Not excluded
Ross River virus	Not excluded	Not excluded
Rotavirus infection	Exclude until there has not been a loose bowel motion or vomiting for 24 hours ^b	Not excluded
Rubella (German measles)	Exclude until fully recovered or for at least 4 days after the onset of the rash	Not excluded
Salmonellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Scabies	Exclude until the day after starting appropriate treatment	Not excluded
Shigellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Toxoplasmosis	Not excluded	Not excluded
Tuberculosis (TB)	Exclude until medical certificate is produced from the appropriate health authority	Not excluded. Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Varicella (chickenpox)	Exclude until all blisters have dried—this is usually at least 5 days after the rash first appeared in non-immunised children, and less in immunised children	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise, not excluded
Viral gastroenteritis (viral diarrhoeal)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Worms	Exclude if loose bowel motions are occurring. Exclusion is not necessary if treatment has occurred	Not excluded

^a The definition of 'contacts' will vary according to the disease—refer to the specific fact sheet for more information.

^b If the cause is unknown, possible exclusion for 48 hours until cause is identified. However, educators and other staff who have a food handling role should always be excluded until there has not been a loose bowel motion for 48 hours.
Adapted from SA Health Communicable Disease Control Branch: <http://www.dh.sa.gov.au/pubs/branches/branch-communicable.htm>. Note that exclusion advice is consistent with Series of National Guidelines (SNGs) where available.

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