

# Coronavirus Policy

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## NQS

QA2	2.1.2	Health practices and procedures Effective illness and injury management and hygiene practices are promoted and implemented.
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## National Law

Section	167	Offence relating to protection of children from harm and hazards
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## National Regulations

Reg	77	Health, hygiene and safe food practices
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## Aim

To ensure all employees and families implement appropriate risk management procedures to prevent the spread of coronavirus or reduce the potential for the illness to spread.

## Related Policies

- Excursion Policy
- Fees Policy
- Food, Nutrition and Beverage Policy
- Health Hygiene and Safe Food Policy
- Incident, Injury, Trauma and Illness Policy
- Infectious Diseases Policy
- Medical Conditions Policy
- Relationships with Children Policy
- Sleep, Rest, Relaxation and Clothing Policy
- Transport Policy
- Work, Health and Safety Policy

## Implementation

Coronavirus (COVID-19) can cause illnesses similar to the common cold, but it can also cause more serious respiratory diseases. Most people displaying symptoms such as fever, cough, sore throat, tiredness or shortness of breath are likely suffering with a cold or other respiratory illness—not coronavirus. People at higher risk of catching the virus include older people, those with underlying medical problems and Indigenous Australians. The threats posed by the virus mean serious steps must be taken to stop the spread of the disease.

As outlined in our Infectious Disease and Health, Hygiene and Safe Food Policies, the Approved Provider, Nominated Supervisor, educators and staff implement strict hygiene and infection control procedures at all times to prevent or minimise the spread of contagious illnesses. Hygiene measures and exclusion principles outlined in these policies continue to apply, and will be informed by current guidance on coronavirus issued by relevant Commonwealth and State/Territory Governments including:

- [Federal Department of Health coronavirus health alerts](#) which are updated daily
- [State/Territory Education Departments](#) which may issue coronavirus updates directly to service providers. Latest updates and resources can also be reviewed online
- [Federal Department of Education, Skills and Employment Information](#) including [Frequently Asked Questions](#) and email updates [Federal Department of Education, Skills and Employment](#)
- [Federal Department of Health](#) coronavirus Information Sheets which include:
  1. [Use of masks by the public in the community](#)
  2. [Environmental Cleaning and Disinfection Principles for COVID-19](#)
  3. [COVID-19-Frequently Asked Questions](#)
  4. [‘Information for employers’](#) which covers when staff cannot go to work, what to tell staff, cleaning precautions and how to help prevent spread of Coronavirus.

If in doubt about current coronavirus guidance, the Approved Provider or Nominated Supervisor will contact the **Federal coronavirus hotline on 1800 020 080** or their State/Territory health Department.

The Approved Provider and Nominated Supervisor will also implement a COVID Safe Plan to ensure the service can provide an environment that’s as safe as possible for children, staff and visitors.

## **What must employees and families do?**

### **Comply with government guidance**

The Approved Provider, employees and volunteers and families must:

- **comply with guidance issued by Government agencies, including in relation to attendance, quarantine and self-isolation.** This includes requirements relating to close contacts, secondary close contacts, and casual contacts
- **seek medical attention** if they develop symptoms of coronavirus including fever, cough, sore throat or shortness of breath. Call ahead before visiting the doctor/hospital to advise them of your symptoms, and wear a surgical mask when visiting the medical facility. Employees/families must advise the Approved Provider or Nominated Supervisor immediately if they are being tested for coronavirus. They and their close contacts including enrolled children must not come to the service until they return a negative coronavirus test and meet the Government’s quarantine and self-isolation requirements or advice as outlined in the point above
- **comply with all service policies including Infectious Diseases Policy** which requires ill children and adults to remain at home and comply with relevant Exclusion periods. Note employees, volunteers and families must comply with any isolation/exclusion periods in relation to coronavirus implemented by the Approved Provider or Nominated Supervisor including periods which exceed government requirements

- **agree to have their temperature tested** before entry to the service if the Nominated Supervisor or staff reasonably believe a child or adult may have a fever or it's one of the control measures in our COVID Safe Plan
- **advise the service** if they develop symptoms of the virus or are confirmed to have the virus. This is particularly important if they have been at the service before a positive test
- **provide evidence of a negative covid test** if requested, including after a period of isolation or quarantine
- **complete a Health Declaration** if requested by staff declaring they are healthy and do not have any symptoms of coronavirus before entering the service
- **comply with guidance issued by the Government in relation to the wearing of face masks at the Service.** Where the wearing of masks is not mandatory, it is recommended that parents, visitors and staff not educating and caring for children wear masks at the service in situations where physical distancing cannot be maintained. Note it is not safe to use a mask on children under two years due to the risk they may choke
- **comply with Government requirements for vaccination against COVID-19.** This includes vaccination requirements for ECEC staff as outlined on State Government websites and contained in Public Health Orders.

The Approved Provider and Nominated Supervisor will ensure staff, parents and visitors are familiar with best practice infection control measures for wearing masks including:

- washing hands for at least 20 seconds with soap and water or alcohol-based hand sanitiser with at least 60% alcohol before touching mask
- not touching the front of the mask or the face while it's on or when removing it – grasping the ear loops or ties instead
- disposing of single use surgical masks responsibly and putting reusable masks directly into the laundry or a disposable/washable bag for laundering.

#### **Implement effective hygiene process**

The coronavirus is most likely to spread from person-to-person through droplets of saliva produced when a person coughs or sneezes. Droplets cannot go through skin and people can only be infected if they touch their mouth, nose or eyes once their skin (ie hands) is contaminated. Droplets usually travel no farther than 1 metre through the air. This means the transmission of droplets can occur when people:

- have direct close contact with a person while they are infectious
- have close contact with an infected person who coughs or sneezes
- touch objects or surfaces like door handles or tables contaminated from a cough or sneeze from a person with a confirmed infection, and then touch their mouth or face.

The Approved Provider will ensure all staff complete the online [COVID-19 Infection Control Training](#) made available by the Federal Department of Health. Certificates of completion will be displayed.

Employees and volunteers will ensure they continue to implement hygiene processes outlined in the Health, Hygiene and Safe Food Policy to ensure high standards of hygiene and infection control at all times. This includes ensuring they and where relevant children:

- wash hands frequently with soap and water including before and after eating or handling food, going to the toilet, changing a nappy, handling play dough, using gloves, and after wiping or touching nose and cleaning up spills of body fluids
- wash hands in ways that meet the principles recommended by the World Health Organisation in the following videos [wash hands with soap and water](#) and [wash hands with alcohol based sanitiser](#)
- cough and sneeze into their inner elbow, or use a tissue to cover their mouth and nose and placing tissues in the bin immediately after use

If using alcohol-based hand sanitiser in place of soap it will contain 60-80% alcohol and antibacterial soap/gel will never be used.

In addition the Approved Provider and Nominated Supervisor will ensure educators engage in regular handwashing with children and cleaning requirements are documented and completed more frequently than usual. This includes regularly cleaning and disinfecting frequently touched surfaces like door knobs, bathrooms (eg taps, toilets), tables and chairs, phones, tablets, keyboards. Cleaning staff, including contracted cleaning staff, will implement the procedures outlined in the '[Information for employers](#)' and [Environmental Cleaning and Disinfection Principles for COVID-19](#) Information Sheets including:

- wearing gloves and using alcohol-based hand sanitiser before and after wearing gloves
- wearing surgical masks and eye protection if person with the virus or in isolation has been in the area being cleaned or there are spills of body fluids which could be infected with the virus
- disinfecting surfaces with an anti-viral disinfectant after cleaning with detergent and water.

The Approved Provider and Nominated Supervisor will ensure hand hygiene posters are displayed in areas which can easily be seen by families, including the front entrance, and require all employees and families to use hand sanitiser provided at service entrances. They will also place signs and posters about physical distancing around the Service like those from [Safework Australia](#).

### **Social distancing**

We're also implementing the following social distancing strategies where possible to limit the potential spread of the infection:

- complying with current public gathering limits and numbers of people allowed in indoor or outdoor spaces (see State Government websites eg Coronavirus and Health sites)
- maintaining physical distancing and current gathering limits during any excursions
- ensuring families maintain at least 1.5 metres between each other as far as practical, including at the start and end of the program
- restricting parents entering the service eg by asking parents to drop an pick up at the front door
- putting marks on the floor so families and visitors stand at least 1.5 metres away from the counter and from each other
- avoiding situations where children are required to queue, assemble in large groups or hold hands
- staggering lunch /snack times to reduce number of children playing outside at one time and number of staff in staff room if attendance is high or at capacity
- staggering children's attendance where possible
- arranging for deliveries to be dropped away from main entrance

- requiring visitors to sign a COVID-19 declaration that they are healthy and do not have any symptoms of the virus
- increasing the use of technology like Zoom to ensure children can continue to communicate with absent children and community members in a protected environment
- maintaining 1.5 metres between cots, stretchers, floor cushions etc and between furniture and seating arrangements in staff common rooms
- ceasing activities which may have a higher risk of infection including play dough, cooking and dress up activities
- providing children with resources rather than letting children select from communal resources
- serving food to children rather than providing sharing plates
- increasing supervision in bathrooms and only allowing 1 child at tap at a time to wash hands
- opening windows and adjusting air-conditioning for more fresh air
- conducting more learning and activities outside
- requiring staff to travel directly to and from work, and avoid public transport where possible

### **Information and notification requirements**

The Approved Provider or Nominated Supervisor will:

- report instances of (suspected) coronavirus to the local state/territory health department immediately and follow all guidance
- comply with notification requirements for serious incidents which include:
  - any incident involving serious illness of a child at the service where the child attended, or should have attended, a hospital
  - any emergency where emergency services attended ie there was an imminent or severe risk to the health, safety or wellbeing of a person at the service
- comply with other notification requirements including:
  - notifying the Regulatory Authority within 24 hours if directed to close or closing voluntarily because of coronavirus. Note where possible the Approved Provider or Nominated Supervisor will contact the Authority before making decision to close because of low numbers. (If closing voluntarily, children cannot be reported as absent and CCS will not be paid unless the closure is determined as a local emergency by State/Territory Education Departments)
  - notifying the Regulatory Authority within 7 days about any changes to service days or operating hours
  - notifying any third party software provider or via operational details in the Provider Entry Point
- apply for waivers from ratio and qualification requirements if required where staff are required to self-isolate
- provide families with current information about the coronavirus including relevant information and Fact Sheets from Federal or State Health and Education Departments.

### **Interactions with Children**

Where appropriate, educators will speak with children about the coronavirus in ways that do not alarm them or cause unnecessary fear or distress. Educators may, for example, discuss with children their feelings in relation to the virus, remind children that the risk of catching the illness is very low, review hygiene measures they can take to reduce the risk of infection, discuss some of the good

things happening in the world, or implement other strategies outlined in our Relationships with Children Policy. Educators will be careful not to speak to others in an alarmist way about the coronavirus if children are present or within hearing.

### **What else should families do?**

Asthma Australia has advised doctors to ensure all patients with asthma have a current Asthma Action plan and to update it if needed via a phone consultation, with any new plan delivered electronically. If their child has an Asthma Plan, families must consult their doctor and provide the Nominated Supervisor with an updated Plan or written confirmation from the doctor that the current Plan can continue. The Nominated Supervisor will distribute any updated Plans to relevant educators.

### **Fees**

The Approved Provider or Nominated Supervisor will advise families of any relevant fee support which may be provided by the Government to assist families impacted by COVID-19. Without any Government fee support families must pay fees as outlined in our Fees Policy. Please note families approved for Child Care Subsidy may be eligible for Additional Child Care Subsidy (temporary financial hardship) where their income has dropped because of COVID-19.

### **Staff Entitlements - Employees are ill or need to care for family member**

Permanent employees are entitled to paid sick leave if they're ill with coronavirus. Employees must provide a medical certificate confirming they have the virus. Permanent employees who need to look after a family member or someone in their household who's sick with the virus are also entitled to paid carer's leave, or unpaid carer's leave if they have no paid sick or carer's leave left. Casual employees are entitled to 2 days unpaid carer's leave per occasion. Employees must provide evidence supporting an application to take carer's leave if requested. Permanent employees who want to stay at home as a precaution against exposure to coronavirus must apply for paid or unpaid leave.

### **Staff Entitlements - Employees required to self-isolate or wish to stay home as precaution**

The Approved Provider or Nominated Supervisor will discuss available employment options with permanent employees who can't return from overseas or are required to enter quarantine or isolation but aren't sick. Options include taking annual leave or other leave eg long service leave, and taking unpaid leave.

### **Staff Entitlements - Employees directed not to work**

Permanent employees will be paid if they are directed not to work to prevent the spread of the illness, cannot work because numbers of children have declined or the centre is voluntarily closed by the Approved Provider.

In cases where service viability is threatened, for example because enrolments have significantly reduced, the Approved Provider will discuss the situation with all permanent and seek their views on possible changes to staffing arrangements eg reductions in hours. Employees' written consent to any new arrangements will be obtained.

### **Staff Entitlements - Stand downs**

Under the Fair Work Act, an employee can only be stood down without pay if:

- there's a stoppage of work
- the employees can't be usefully employed (not limited to an employee's usual work)
- the cause of the stoppage is one the employer cannot reasonably be held responsible for (eg service is directed to close by Government).

Note employees may use paid leave entitlements if the Approved Provider agrees. During stand down periods there is no interruption to continuity of service and leave accruals continue. The Approved Provider may seek legal advice to confirm payment of salaries is not required under the 'stand down' provision of the Fair Work Act if directed to close by the Government.

During this time employees may engage in activities which don't involve children, for example, training, deep cleaning or administration.

## Source

**Education and Care Services National Law and Regulations**

**Fair Work Act 2009**

**Fair Work Ombudsman 'Coronavirus and Australian Workplace laws'**

**Federal Department of Health coronavirus information sheets**

**Federal Department of Education, Skills and Employment coronavirus information sheets**

**National Quality Standard**

**Work, Health and Safety Laws and Regulations**

## Review

The policy will be reviewed annually by the Approved Provider, Supervisors, Employees, Families and any committee members.

**Last reviewed: September 2021**

**Date for next review: September 2021**