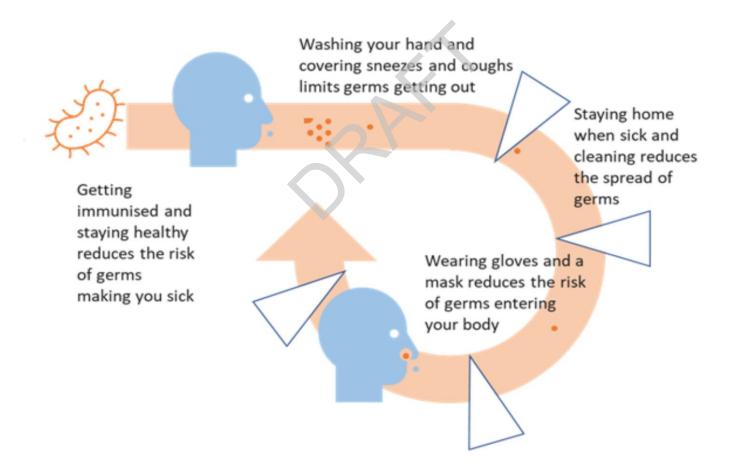
Breaking the chain of infection



Changing a nappy without spreading germs Nappy change procedure

Preparation

- Bring your supplies to the changing area. This includes a clean nappy, wipes, baby cream labelled with the child's name (if applicable), gloves, plastic or waterproof bag for soiled clothing, and extra clothes.
- Perform hand hygiene. When changing a nappy, it is very important to wash your hands or use hand sanitiser before you put on gloves. This is so that when you have finished changing the child, you can remove the dirty gloves and dress the child without needing to interrupt the nappy-changing procedure to clean your hands before dressing the child.
- Put on disposable gloves.
- Place paper towel or plain paper on the change table if desired, to reduce mess.
- If the child can walk, walk with them to the changing area. If the child cannot walk, pick them up and carry them to the changing area. If there are faeces on the child's body or clothes, hold the child away from your body if you need to carry them.

Changing

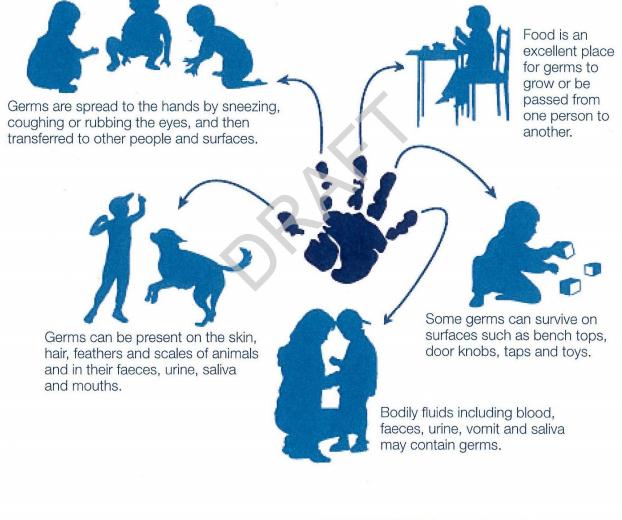
- Place the child on the change table and unfasten the nappy.
- Clean the child's bottom with disposable nappy wipes. Always wipe front to back.
- For disposable nappies, place dirty wipes in the nappy, remove the nappy from the child and put it in a plastic bag. Place the bag in the designated bin.
- For cloth nappies, put the liner in the toilet, and the disposable wipes in the designated bin. Put the used nappy in a plastic bag and put it in the sealed container that you have for that child.
- Remove the paper from the change table and put in the designated bin.
- Remove your gloves and dispose of them so you will not touch the clean child with dirty gloves. For details on how to remove gloves properly, see Using disposable gloves.
- Place a clean nappy under the child and apply nappy cream if needed before fastening the nappy.
- Dress the child.
- Wash your hands and the child's hands before placing the child back into a supervised area.

Cleaning

- After every nappy change, clean the nappy change surface (see section 3.2 Nappy change area for details on the best methods of cleaning for this area).
- Perform hand hygiene using soap and water or hand sanitiser. If your hands are visibly dirty or you have just removed gloves, wash your hands with soap and warm water.

Staying Healthy public consultation draft, National Health and Medical Research Council, July 2023

The role of hands in the spread of infection



You can prevent the spread of disease by performing **hand hygiene** by:

Hand hygiene



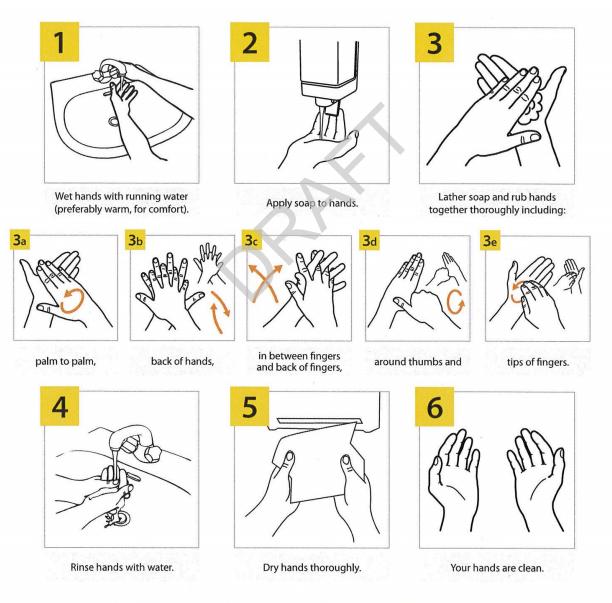


washing hands with soap and water or using an alcohol-based hand rub

How to wash hands



A hand wash should take around 30 seconds.





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How to use hand sanitiser

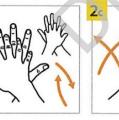


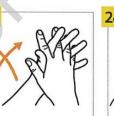
A hand rub should take 20–30 seconds or until your hands are dry.



hands, then rub











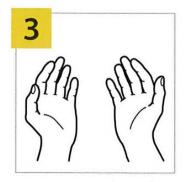
palm to palm,

back of hands,

in between fingers and back of fingers,

around thumbs and

tips of fingers.



Once dry, your hands are clean.

THIS POSTER REFRENCES THE WORLD HEALTH ORGANIZATION'S 'HOW TO HANDRUB?' POSTER

Recommended exclusion periods

Recommended minimum exclusion periods based on symptoms

Not excluded	Excluded ir	
Symptom	Should the child or staff member go home as soon as the symptom appears	Exclusion of person who is sick
Diarrhoea and vomiting	Yes, go home as soon as possible	Exclude until there has not been any diarrhoea or vomiting for 24 hours If the diarrhoea and vomiting are confirmed to be due to norovirus, exclude for 48 hours Staff members with these symptoms should not handle food until they have not vomited or had diarrhoea for 48 hours (they can be assigned to other duties after 24 hours, or stay away from the service for 48 hours) Check if your state or territory has different requirement for gastroenteritis
Eye discharge (pus or severe wateriness)	Yes, go home as soon as possible	Exclude until discharge from the eyes has stopped (unles a doctor has diagnosed a non-infectious cause for the ey discharge)
Fever	Yes, go home as soon as possible	Exclude until the temperature is normal, unless the feve has a known non-infectious cause Fever on its own may not be cause for concern, but feve is usually combined with other symptoms If a doctor later diagnoses the cause of the child's fever, follow the exclusion guidance for that disease
Rash	 No, stay at the service unless: it develops rapidly it is combined with fever or other concerning symptoms 	Rash on its own may not be cause for concern, but rash can often be combined with other symptoms In cases of rapidly developing rash or when rash is combined with other concerning symptoms, exclude unt the concerning symptoms have gone
Respiratory symptoms (cough, runny or blocked nose, sore throat)	No, stay at the service unless the symptoms are getting worse or are combined with concerning symptoms such as fever, rash, vomiting, severe tiredness or difficulty in breathing or speaking	 Exclude based on symptoms; otherwise not excluded If a person has respiratory symptoms (cough, sneezing, runny or blocked nose, sore throat), exclude them if: the respiratory symptoms are new and getting worse (more frequent or severe), or they also have concerning symptoms (fever, rash, tiredness, pain, poor feeding) A person can often have an ongoing cough after they have recovered from a respiratory infection. If their othe symptoms have gone and they are feeling well, they can return to the service

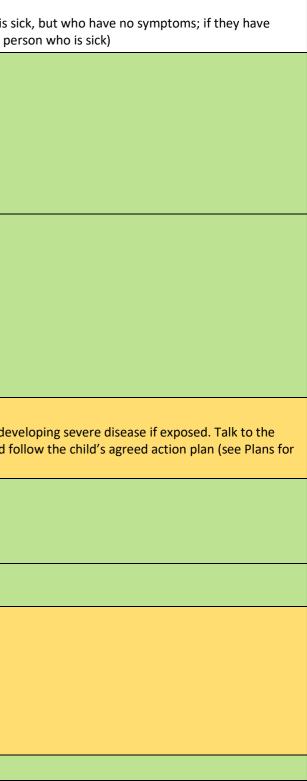
Recommended minimum exclusion periods for specific diagnosed conditions

Not excluded

Excluded in some cases

Excluded

Condition	Exclusion of person who is sick	Exclusion of contacts (people who have been in contact with the person who is s symptoms, they should follow the same guidance as the pe
Bronchiolitis, Bronchitis, Common cold, Croup, Flu (influenza), Pneumonia, RSV (respiratory syncytial virus)	 Exclude based on symptoms; otherwise not excluded If a person has respiratory symptoms (cough, sneezing, runny or blocked nose, sore throat), exclude them if: the respiratory symptoms are new and getting worse (more frequent or severe), or they also have concerning symptoms (fever, rash, tiredness, pain, poor feeding) A person can often have an ongoing cough after they have recovered from a respiratory infection. If their other symptoms have gone and they are feeling well, they can return to the service 	Not excluded
Campylobacter infection, Cryptosporidiosis, Giardia infection (giardiasis), Rotavirus infection, Salmonella infection (salmonellosis), Shigella infection (shigellosis)	Exclude until there has not been any diarrhoea or vomiting for 24 hours Staff members with these symptoms should not handle food until they have not vomited or had diarrhoea for 48 hours (they can be assigned to other duties after 24 hours, or stay away from the service for 48 hours) Check if your state or territory has different requirements for gastroenteritis	Not excluded
Chickenpox (varicella)	Exclude until all blisters have dried – this is usually at least 5 days after the rash first appeared in unvaccinated children, and less in vaccinated children	Not excluded Any child who is immunocompromised is at high risk of dev parents about the child's potential risk and exposure and for immunocompromised children)
Cold sores (herpes simplex)	Not excluded if the person can maintain hygiene practices to minimise the risk of transmission If the person cannot maintain these practices (for example, because they are too young), exclude until the sores are dry Cover sores with a dressing, if possible	Not excluded
Conjunctivitis	Exclude until discharge from the eyes has stopped (unless a doctor has diagnosed non-infectious conjunctivitis)	Not excluded
COVID-19	 Refer to state or territory advice Exclude based on symptoms; otherwise not excluded If a person has respiratory symptoms (cough, sneezing, runny or blocked nose, sore throat), exclude them if: the respiratory symptoms are new and getting worse (more frequent or severe), or they also have concerning symptoms (fever, rash, tiredness, pain, poor feeding) A person can often have an ongoing cough after they have recovered from a respiratory infection. If their other symptoms have gone and they are feeling well, they can return to the service 	Not excluded Refer to state or territory advice
Ear infection	Not excluded unless associated with other concerning symptoms	Not excluded



Condition	Exclusion of person who is sick	Exclusion of contacts (people who have been in contact with the person who is symptoms, they should follow the same guidance as the p
Fifth disease (slapped cheek syndrome, erythema infectiosum, human parvovirus B19)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
Head lice	Not excluded, as long as effective treatment begins before the next attendance at the service The child does not need to be sent home immediately if head lice are detected	Not excluded
Hepatitis A	Exclude until at least 7 days after jaundice starts, or if there is no jaundice, until 2 weeks after onset of other symptoms	Not excluded Talk to your public health unit for advice
Hepatitis E	Exclude until at least 7 days after jaundice starts, or if there is no jaundice, until 2 weeks after onset of other symptoms	Not excluded Talk to your public health unit for advice
Hib (<i>Haemophilus</i> <i>influenzae</i> type b)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded Talk to your public health unit for advice
Impetigo (school sores)	Exclude until appropriate antibiotic treatment has started Cover any sores on exposed skin with a watertight dressing	Not excluded
Measles	Exclude for 4 days after the rash appeared	Vaccinated and immune contacts are not excluded For unvaccinated contacts, talk to your public health unit for Exclude all immunocompromised children until 14 days after
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until the person has completed appropriate antibiotic treatment	Not excluded Talk to your public health unit for advice about antibiotics a same room as the case
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner)	Not excluded
Norovirus infection	Exclude until there has not been any diarrhoea or vomiting for 48 hours	Not excluded
Pneumococcal disease	Exclude until person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Rubella (German measles)	Exclude until the person has fully recovered or for at least 4 days after the rash appears	Not excluded
Scabies and other mites causing skin disease	Exclude until the day after starting appropriate treatment	Not excluded
Shingles (zoster infection)	Exclude children until blisters have dried and crusted Adults who can cover the blisters are not excluded (they are excluded if blisters cannot be covered)	Talk to your public health unit for advice about pregnant we
Staph infection (Staphylococcus aureus)	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Streptococcal sore throat	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Whooping cough (pertussis)	Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing if they don't receive antibiotics	Talk to your public health unit for advice about excluding un

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s sick, but who have no symptoms; if they have person who is sick)
or advice ter the rash appears in the last case at the service
and/or vaccination for people who were in the
vomen and anyone who is immunocompromised