



HOPE ISLAND MONTESSORI

COVID -19 OPERATIONAL PLAN
HEALTH + HYGIENE PRACTICES

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OVERVIEW & PURPOSE

This operational plan outlines the health and hygiene measures that Hope Island Montessori has undertaken to prepare for and respond to COVID-19.

NQS STANDARDS

- [Quality Area 2 - Children's health and safety](#)
- [Quality Area 3 - Physical environment](#)

OBJECTIVES

- To minimise the risk of exposure to COVID-19 for children, families, visitors and employees of Hope Island Montessori.
- To review existing procedures, policies and risk assessments and employ additional strategies to ensure appropriate responses to COVID-19.

ACTIVITY

- Distribute to all staff by 18 April, 2020
- Staff must sign confirming receipt
- Revise at least monthly during the COVID-19 pandemic
- Revise every 12 months thereafter

KEEPING OUR COMMUNITY SAFE

CHILDREN

Existing hygiene practices should extend to prevent the spread of COVID-19 including:

- ensuring sick children, staff and visitors stay at home if unwell and seek medical advice from a GP or by phoning 13 HEALTH (13 43 25 84)
- reduce mixing of children by separating cohorts (including the staggering of meal and play times)
- decreasing group sizes and increasing distance between children where-ever possible
- enhancing personal hygiene for children through:
 - promoting a regular and rigorous handwashing schedule
 - encouraging practices such as covering coughs and sneezes, not touching the face, and ensuring tissues are safely disposed of
 - using a familiar song or rhyme to support children to hand wash for the prescribed length of time
- checking with family members for any changes in a child's health, particularly signs of fever, cough or shortness of breath
- regularly monitoring all children and staff throughout the day for any symptoms
- immediately isolating a child showing signs of illness and contacting their family to arrange collection of the child
- considering children with medical conditions and reviewing minimisation plans in case additional precautionary actions are needed
- ensuring that children who are self-quarantining for 14 days after returning to Queensland from overseas or interstate do not attend the service
- staggering meal and play times and avoiding transition activities such as queuing
- avoiding children self serving food, drinks and snacks
- planning for experiences that avoid mixing groups of children
- avoiding external excursions or experiences
- using the service's outdoor areas more regularly wherever possible
- cleaning and disinfecting high-touch surfaces regularly
- promoting strict hygiene when preparing food
- considering opening the windows and adjusting air conditioning to maximise ventilation
- temperature checks will be performed where elevated temperature is suspected or other signs of illness are present

Alternative care arrangements should be considered for those children highly vulnerable to adverse outcomes should they be infected with COVID-19. AHPPC recommends parents seek medical advice for these children.

Sick Children

Should a child display signs of illness whilst at the centre, they must be immediately isolated from other staff and children. If ratio permits, the child will remain with one caregiver in the staff room or alternatively, with the Director or nominated supervisor in the reception area.

Signs of illness include:

- Cough
- Sneezing
- Runny nose
- Fever above 38c
- Headache
- Sore throat
- Chest pain/wheezing
- Laboured breathing
- Ear Pain
- Rash
- Malaise
- Diarrhea
- Nausea
- Vomiting

Families must be contacted as soon as the symptom is observed and collection must occur within 30 minutes. Children cannot attend care within 48 hours from the first symptom and must obtain a medical clearance from a licenced doctor to return.

We understand that children often recover from being unwell but can have lingering coughs or runny noses for some time after which are not contagious. During the COVID-19 period, additional precautions will be taken to ensure the safety of all children and staff as follows:

- Where a child appears to have fully recovered and displays no symptoms of illness, a general medical clearance will be accepted to return to care.
- Where a child appears to have recovered but continues to display symptoms such as lingering cough or runny nose or any other symptom associated with COVID-19, a detailed medical clearance identifying the illness and confirming that there is no risk of transmission to others is required before being able to return to care. Medical Clearance Forms can be

found [here](#) .

At any time, irrespective of a Medical Clearance, the Approved Provider, Director or any other person nominated to act on their behalf may still refuse to allow a child who is demonstrating signs of illness to attend the centre, as per the School + Early Childhood Service Exclusion Direction outlined below.

School and Early Childhood Service Exclusion Direction

The Qld Minister for Health and Qld Minister for Ambulance Services has put in place a Direction called the “[School and Early Childhood Service Exclusion Direction](#)”. This Direction applies in school and early childhood services, and came into effect as of 29 March 2020, and will remain in place until the end of the declared public health emergency for COVID 19.

The Direction applies to children attending schools and approved early childhood services, and if an educator or staff member suspects a child in their care is unwell with a contagious illness, they must notify the parent or guardian.

If a staff member reasonably suspects that a child in our care is unwell and decides that because of the reasonable suspicion the child must go home, we must notify the parent or guardian. We will isolate the child as far as possible until they are able to be collected, whilst still ensuring their safety and wellbeing, and we will also maintain effective supervision of all children in care.

The child’s parents/guardians are required to collect the child as soon as possible, and the child cannot return to the early childhood service until:

- if the child had, or was suspected of having a contagious condition, the prescribed period for the contagious condition has ended as per the National Health and Medical Research Council’s Staying Healthy in Child Care, or
- when the child is no longer exhibiting symptoms of illness.

Under this new Direction, there is no requirement that we obtain a medical opinion to exclude a child who we believe is unwell. More information can be found [here](#).

Hand Sanitiser

Alcohol-based hand sanitiser is dangerous if ingested, particularly for children. While hand sanitiser is an important tool in stopping the spread of COVID-19, even a small amount can be harmful for young children and babies. Washing hands with soap and water for at least 20

seconds is a safe and effective option to help combat COVID-19.

All hand sanitiser products in the centre should be stored safely and out of reach of children. At the entry gate and in reception, hand sanitiser will be available for families and visitors only. If offered to young children it should be under the supervision of an adult with safety directions displayed in these areas as follows:

- Always supervise your child when they use hand sanitizer.
- A small amount of hand sanitiser is recommended.
- Teach your child to rub their hands together immediately until most or all of the hand sanitiser is dry. If their hands are still wet, then air dry.
- Remind your child to keep their hands out of their mouths after the hand gel is applied.
- Do not buy hand sanitizers that smell sweet.
- Keep all hand sanitisers locked up at home or away from your child.
- If you think your child has ingested any amount of hand sanitiser, call your poison control center immediately 131126.

Staff should be aware of imported products and home made sanitiser which may not be clearly labelled and may contain more toxic alcohols such as methanol that make the product more dangerous. Products may also be packaged in a range of container types, including beverage containers, which can increase the risk of accidental ingestion and poisoning.

Should a child ingest any quantity of hand sanitiser, contact the Poisons Information Centre for first aid and monitoring advice and ensure the container of the ingested product is available.

FAMILIES

A number of Hope Island Montessori families have chosen to self isolate their child for some or all of the COVID-19 crisis period. Remaining families who are attending care are required to follow all processes to avoid the spread of COVID-19.

The service will:

- make sure liquid soap and running water, or alcohol-based hand sanitiser is available at the entrance of the facility and throughout for adult use only
- display signage to encourage good hygiene practices
- limit access to centre to children and staff only
- ensure families are kept informed of COVID-19 information and updates
- encourage self isolation of children at home where-ever possible

STAFF, CONTRACTORS + VOLUNTEERS

The model Work Health and Safety (WHS) laws require all employers to take care of the health and safety of their staff (staff, contractors, volunteers) and others (children, parents and visitors) at the workplace. This includes:

- providing and maintaining a work environment that is without risk to health and safety
- providing adequate facilities for staff to carry out their work

The service will:

- identify risks at the workplace, and where possible eliminate or minimise those risks so far as is reasonably practicable
- allow staff to work from home in isolation from others where possible (e.g. book keeper)

Physical Distancing

The service will aim to maintain physical proximity between people to at least 1.5 metres apart with practical measures to encourage [physical distancing](#):

- calculate the area of each room, and the number of staff and children in attendance each day, and directing staff to space an appropriate distance apart to continue performing their duties, acknowledging that staff will have to come into contact with children
- encourage staff and visitors to physically distance themselves through increased [signage](#) and information
- encourage the use of outdoor space as much as possible
- stagger staff breaks and encouraging staff to physically distance themselves in break rooms and when using shared spaces
- limit the number of visitors to the centre including non essential visitors such as volunteers, students or other guests
- cancel incursions and non-essential training
- discourage use of public transport by staff if possible, or if not feasible, recommending that staff:
 - travel at off peak times
 - wash hands with soap and water for at least 20 seconds, or sanitise hands with an alcohol-based hand sanitiser before and after travelling on public transport, and
 - maintain physical distancing measures during any trip.

Health checks and quarantine

Staff should be reminded that they have a duty to take reasonable care for their own health and safety and to not adversely affect the health and safety of others. Staff are expected to observe, both at and outside work, all **recommendations/directions by public authorities** in relation to the maintenance of personal hygiene and social distancing.

Staff should have a clear understanding of the following:

- when to stay away from the workplace
- what action to take if they become unwell
- what symptoms to be concerned about

Staff employed by the service will be:

- monitored for key symptoms of COVID-19, such as fever.
- stopped from working if they are displaying symptoms.
- stopped from returning to the workplace if they have contracted COVID-19 until they provide evidence they are clear of the virus.

Staff must report the following, whether attending the centre or not:

- experiencing any symptoms
- have been, or have potentially been, exposed to a person who has been diagnosed with COVID-19 or is suspected to have COVID-19 (even if the person who is suspected to have COVID-19 has not yet been tested), or
- have undertaken, or are planning to undertake, any travel
- observing another worker displaying any symptoms

APPROVED PROVIDER

The Approved Provider is responsible for the following:

- Maintain current knowledge of the COVID-19 situation
- Follow advice from authoritative sources such as the Australian Government Department of Health and check daily for any updates to safety advice
- Relay relevant COVID-19 information to the staff and community accurately and in a timely manner
- Ensure clear, transparent and timely communication to families, staff, suppliers, creditors, investors and regulatory authorities.
- Ensure the service is properly resourced to manage WHS risks during the COVID-19 outbreak, and check that the resources are being used
- Assess potential financial and operational risks and respond quickly
- Investigate and utilise all methods of practical and financial support and funding available through Government and other support agencies throughout the COVID-19 crisis.
- Ensure staff and children do not have unnecessary exposure to COVID-19 by limiting visitors to the centre including postponing tours and new enrolments where-ever possible
- Review centre policies, procedures and reporting processes to ensure they remain current for any incidents, hazards and other WHS issues that arise during this time
- Ensure centre policies, procedures and reporting processes are communicated clearly and processes are being followed to reduce the spread of COVID-19
- Consult with staff and ensure there is a means to raise any concerns about the steps being taken to manage risks
- Maintain knowledge and follow correct processes and procedures relating to provision of Job Keeper Package to eligible staff

COVID-19 INFORMATION

The signs and symptoms of COVID-19 infection

These include fever, cough, sore throat and shortness of breath. Other early symptoms can include chills, body aches, headache and runny nose, muscle pain or diarrhoea.

Staff are required to self-identify/report signs of potential infection to the Director and/or Approved Provider at the first sign of illness or symptom. The service will actively manage (see below) those who report potential infection.

The currently recommended self-isolation period is 14 days, unless symptoms appear (in which event further medical advice should be sought). Staff cannot return to work without a medical clearance.

Known risks of infection

According to the reported science at the time of writing:

- A person with the virus can be **infectious before showing symptoms** and for an indeterminate period after recovery. The virus appears to have an incubation period of between five and 14 days after exposure and before symptoms appear. The risk of an infected person passing on the virus to a close contact (see below, [4c](#)) appears to be very low until the 48-hour period before they become symptomatic.
- A person who has contracted the virus and is not symptomatic is unlikely themselves to be infectious until, at the earliest, about the third day after their own exposure. However, it would be prudent to seek specific medical advice about the risk of infection in individual situations.
- COVID-19 spreads from person to person in a similar way to the flu:
 - from **close contact** (see below) with an infected person (this appears to be the primary risk of infection); and
 - from **touching objects or surfaces contaminated** by the sneeze or cough of an infected person and then touching your eyes, nose or mouth.
- A **close contact** is someone who has been face to face for at least 15 minutes or been in

the same closed space for at least two hours, as someone who has tested positive for COVID-19 when that person was infectious.

- The current scientific consensus is that this virus can be spread within two-four metres if somebody coughs. Otherwise, the droplets fall to the ground and don't infect you.
- The virus can survive up to nine days on some **industrial surfaces** (metal, ceramics and plastics) such as doorknobs, tables, handrails, desks or lift/elevator buttons.

The service will seek to **identify workers at high risk of infection** and, where appropriate, ask or direct them to self-isolate in accordance with Government advice/directives.

These are:

- staff who have come into close contact (see above) with people diagnosed with the virus;
- staff who have recently travelled internationally; and
- staff who have come into close contact with people in either of these categories, including via people with whom they live (partners, housemates, children) and/or for whom they have caring responsibilities.

The service will communicate with staff in relation to the risks.

Staff must self-identify/report potential exposure via telephone call to the Approved Provider or Director only. The service will actively manage those who report potential exposure.

The currently recommended self-isolation period is 14 days, unless symptoms appear (in which event further medical advice should be sought). Staff cannot return to work without a medical clearance.

Testing criteria (updated 15 April 2020)

A person will generally be tested if they have a fever (or history of fever) or acute respiratory symptoms, and, in the last 14 days:

- they were a close contact or a household contact of a confirmed case
- they had been overseas, including on a cruise.

Testing may also be done for people who have a fever (or history of fever) or acute respiratory symptoms, AND:

- work in vulnerable settings such as healthcare, aged or residential care, police, military, a school or child care, correction facilities, detention centres and boarding schools.
- live in:
 - Brisbane (residents within the Metro North and Metro South [Hospital and Health Services boundaries \(PDF\)](#))
 - Gold Coast or
 - Cairns (the area bounded by and including Palm Cove to the north, Mareeba to the west, and Gordonvale to the south)
- live in or travelled from a [COVID-19 hotspot](#)
- live in or travelled from another state
- live in a First Nations community.

If you are unwell and haven't been overseas or in contact with a confirmed case, you may not be tested for coronavirus (COVID-19). Your doctor will make this assessment based on your symptoms and things like where you live or work.

If you are unwell and you meet the above criteria, you should contact a doctor immediately. Before your appointment, please call ahead and tell them about your symptoms and recent travel so they can prepare for your visit.

Testing process

Testing for COVID-19 involves collecting nasal (inside your nose) or throat swabs, and/or sputum (mucus coughed up). These samples are then transferred to the nearest laboratory that is set up to test for COVID-19.

If you aren't really sick, you will usually be sent home to self-isolate while you wait for the results. This may take several days.

If you are really sick you may be admitted to hospital for treatment. If you become sicker while you are waiting for results, please contact your doctor or call an ambulance. Make sure you let them know you are waiting for test results for COVID-19.

If the result is positive, you will receive a call from a public health unit which will tell you what to do next. If you are well enough to take care of yourself, you will need to stay at home in self-isolation until you recover. If you get sicker, you may be admitted to hospital in an isolation area.

If the result is negative, the doctor who tested you will let you know. If you have been issued with a notice telling you to self-quarantine, you must stay in self-quarantine until the end date written on the notice, even if you get a negative result. This is because you may still develop COVID-19 infection.

If you are waiting on a test result, the people you live with and other close contacts do not need to be in quarantine unless the local public health unit tells them to. They should stay away from the sick person

as much as possible. If the test result is positive, they may be assessed as a close contact and will then need to be in quarantine.

Fever clinics

Fever clinics are specialist clinics for people who may be infected with COVID-19. These clinics help to keep people who may be contagious away from other areas of hospitals and health centres. This helps to reduce the potential spread of the virus and keeps the emergency department available for emergencies.

Fever clinics are managed by Hospital and Health Services. For details of your closest clinic please contact your GP or [local hospital](#).

To support Queensland's response to COVID-19, people who do not have adequate insurance coverage and are not eligible for Medicare will not be charged out of pocket expenses if they present to any Queensland Health facility for assessment in relation to COVID-19 infection.

Medical Clearance

Staff thought to be at risk of infection may be asked to obtain a medical clearance to return to work to ensure they do not present an infection risk.

Current information at the time of writing indicates:

- testing is not being offered or made available except in predefined circumstances (e.g. potential exposure to a confirmed case of COVID-19); however, those who are employed within a high risk environment such as child care and experience a high fever are urged to seek further medical advice
- absent those circumstances, some doctors will certify employees, variously, as fit for work, uninfected by COVID-19 and/or as not requiring testing;
- employees in either of those situations seeking a test to support a medical clearance to return to work may simply be unable to obtain a test-based clearance – they may be required to self-isolate, without symptoms, for 14 days;
- testing is not determinative for people who are not symptomatic. Employees who have had potential exposure, who are not symptomatic and who return a negative test may still be required to complete a 14-day period of self-isolation without symptoms; and
- presently it is uncertain when a person recovering from COVID-19 infection ceases to be infectious. Further medical advice should be sought in relation to people recovering from the virus about when it is safe for them to return to work and other social situations.

SUSPECTED OR CONFIRMED COVID-19 CASES

If a staff member believes that a child or staff member at the service is a confirmed case of COVID-19:

- Immediately report to the Director and/or Approved Provider.
- Contact the [local Department of Health](#) for advice.
- Report the case to the [local Regulatory Authority](#).

The Department of Health will instruct on the next steps. The decision on whether to close the service should be made in consultation with health officials.

If a parent is diagnosed with COVID-19:

Any member of that parent's household should be denied entry to the service within 14 days of exposure (including the 24 hours before the case became symptomatic). This applies to children, families, staff and any other visitors.

If a parent or carer using the service is diagnosed with COVID-19, their 'close contacts' will be advised by health authorities to begin immediate self-isolation. A 'close contact' is someone who has been face to face for at least 15 minutes, or been in the same closed space for at least 2 hours, as someone who has tested positive for COVID-19, while that person was infectious (including the 24 hours before their symptoms appeared).

Anyone who believes they have had direct close contact with someone diagnosed with COVID-19 should contact their [local Department of Health](#). Health officials will provide further advice.

Privacy

While the privacy of individuals should be both protected and respected as far as possible, there will be many 'need to know' situations in which the service will likely need to disclose, for safety reasons, the identity of people who have contracted the virus or have been exposed to that possibility e.g. to warn others that they may have been exposed to a person who is infected or at risk of infection.

In the scenario of a confirmed case of COVID-19, the Approved Provider or Centre Director will handle all enquiries, both internal and external, to ensure appropriate privacy and disclosure requirements are met.

HYGIENE

ENVIRONMENTAL HYGIENE

The amount of time the COVID-19 virus survives on inanimate objects and surfaces will vary. Environmental cleaning is one way to remove the virus that causes COVID-19. The following practices will be followed to reduce the risk of spreading COVID-19.

General Hygiene for All Areas:

- clean and disinfect frequently touched surfaces and objects such as gates, locks, doors, windows, tables, benchtops, play gyms, tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks
- clean and disinfect through at least daily washing and laundering of play items and toys including washable plush toys as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely
- nappy change areas will be cleaned and disinfected frequently using appropriate detergent and disinfectant solutions
- people cleaning the workplace will wear gloves and use alcohol based hand sanitiser before and after wearing gloves
- only use alcohol based hand sanitiser only **if used and stored safely around children**

- personal items such as phones and glasses and work station equipment such as keyboards will be cleaned and disinfected frequently (e.g. using isopropyl alcohol wipes)
- amenities including kitchens, lunch rooms, common areas, change rooms, toilets, showers and drink fountains will be cleaned thoroughly and more frequently
- staff will be provided with cleaning agents and trained to clean down and disinfect equipment immediately after use.
- closed bins will be available for staff to hygienically dispose of waste and rubbish such as used tissues, immediately after use
- alcohol-based hand sanitiser and anti-bacterial hand wash will be available for staff to use after they dispose of their waste.
- gloves, hand sanitiser and antibacterial hand wash will be made available throughout the workplace
- reduce the number of touch points for staff, for example, leaving access doors open, where appropriate.

- limit or reduce recirculated air-conditioning in common areas.

Refer to the Department of Health information sheet on [environmental cleaning and disinfection-principles for COVID-19](#) for further information.

Bathroom facilities for staff and visitors will:

- have adequate facilities for good hygiene such as adequate supply of soap, water, hand towels and toilet paper
- be kept clean, properly stocked and in good working order
- have all high touch surfaces such as entry door, tap, toilet flush button and cupboard doors/handles wiped at least daily with appropriate cleaners
- have closed bins
- display signage encouraging good hand washing practices

Staff room facilities will:

- be accessed by no more than one person at a time
- not be used for meetings
- be kept clean, properly stocked and in good working order
- have closed bins
- have all high touch surfaces wiped at least daily with appropriate cleaners
 - light switch
 - printer/copier
 - Bundy clock
 - staffroom chairs/table
 - remote controls/iPads/phone
 - entry door
 - sign on area
 - window handles
 - cupboard doors/handles
- display signage encouraging good hygiene practices
- display relevant and current COVID-19 information

Kitchen facilities will:

- be accessed by no more than one person at a time
- have adequate facilities for good hygiene such as adequate supply of soap, water,

sanitiser and hand towels

- be kept clean, properly stocked and in good working order
- have all high touch surfaces wiped at least daily with appropriate cleaners
 - light switch
 - counter tops
 - printer/copier
 - bain marie
 - fridge handle
 - oven handle/buttons/controls
 - entry door
 - window handles
 - cupboard doors/drawers/handles

- have closed bins
- have dish cloths, tea towels and other reusable cleaning cloths laundered after each use
- display signage encouraging good hygiene practices
- display relevant and current COVID-19 information

Reception Area will:

- be accessed by no more than three persons at a time
- have adequate facilities for good hygiene such as adequate supply of hand sanitiser
- only use alcohol based hand sanitiser only **if used and stored safely around children**
- be kept clean and in good working order
- have all high touch surfaces wiped at least daily with appropriate cleaners
 - light switches
 - alarm control panel
 - counter tops
 - keyboard
 - phone
 - entry door
 - window handles
 - cupboard doors/drawers/handles

- have closed bins
- display signage encouraging good hygiene practices

Classroom environments will:

- have adequate facilities for good hygiene such as adequate supply of soap, water, hand sanitiser and hand towels
- only use alcohol based hand sanitiser only **if used and stored safely around children**
- be kept clean, properly stocked and in good working order
- discontinue use of high touch activities such as sensory trays, play doh, indoor sand play, and those involving food such as apple slinky and other shared snacks
- have all high touch surfaces wiped at least daily with appropriate cleaners
 - light switch
 - counter tops
 - materials, activities, learning resources
 - cushions
 - water servery
 - taps
 - oven handle/buttons/controls
 - entry door + handles
 - window handles
 - cupboard doors/drawers/handles
 - staff chairs and stools
 - children's tables and chairs
 - story books
 - hat hooks
- Additionally:
 - wash work cycle table mats daily on hot cycle
 - place Work Cycle floor mats in the Sun at rest time
 - all work cycle materials are to be placed in the dishwasher daily
 - all wooden work cycle materials are to be sprayed daily after use
- have closed bins
- display signage encouraging good hygiene practices

Outdoor garden environments will:

- have adequate facilities for good hygiene such as adequate supply of sanitiser and tissues
- only use alcohol based hand sanitiser only **if used and stored safely around**

children

- be kept clean and in good working order
- have all high touch surfaces wiped at least daily with appropriate cleaners
 - light switch
 - counter tops
 - printer/copier
 - bain marie
 - sand toys
 - ride on or push along toys
 - games, materials, activities + resources
 - mud kitchen and garden tools
 - musical instruments
 - window handles
 - cupboard doors/drawers/handles
- have closed bins
- have sandpit sanitised daily
- display signage encouraging good hygiene practices

Centre entry/drop off area will:

- have adequate facilities for good hygiene such as hand sanitiser and tissues
- only use alcohol based hand sanitiser only **if used and stored safely around children**
- be kept clean and in good working order
- avoid use of items with high touch surfaces such as iPad
- have all high touch surfaces wiped at least daily with appropriate cleaners
 - well ness station
 - ramp railing
 - garden entry door and handle
 - bell
 - menus
 - pens
- have closed bins
- display signage encouraging good hygiene practices
- provide current information regarding restricted access for families and visitors

STAFF HYGIENE

Staff are required to practice [good hygiene](#), including:

- covering coughs and sneezes with an elbow or a tissue
- disposing of tissues properly
- avoid touching their face
- avoid handshakes or any other close physical contact
- washing hands often for at least 20 seconds with soap and water, including before and after eating and after going to the toilet
- frequently using alcohol-based hand sanitisers with at least 60% ethanol or 70% isopropanol as the active ingredient
- only use alcohol based hand sanitiser only **if used and stored safely around children**
- cleaning and disinfecting surfaces
- washing body hair and clothes thoroughly every day
- staying more than 1.5 metres away from others where possible, and
- reporting and staying home if experiencing any symptoms.
- ensuring a clean apron is worn each day. (Aprons can be left at the centre for washing)

DELIVERIES + CONTRACTORS

- Non-essential visits to the workplace will be cancelled or postponed.
- Deliveries and other contractors who need to attend the workplace should be given clear instructions of requirements while they are on site via signage or prior arrangement.
- Minimise the number of staff attending to deliveries and contractors as much as possible.
- Make hand sanitiser available for staff after physically handling deliveries.
- Direct visiting truck drivers to remain in vehicles and use contactless methods such as mobile phones to communicate with your staff wherever possible.
- Use, and ask deliveries and contractors to use, electronic paper work where possible, to minimise physical interaction. Where possible, set up alternatives to requiring signatures.

GENERAL HYGIENE

- Avoid touching mouth, eyes, and nose with unwashed (or gloved) hands.
- Clean hands thoroughly for at least 20 seconds using soap and water, or alcohol based hand rub.
- Cover nose and mouth when coughing and sneezing with a tissue or a flexed elbow.
- Put tissues in the bin.
- Avoid close contact with anyone with cold or flu-like symptoms.
- **Physical distancing**- maintain a 1.5 metre distance to others (two arms length).
- Stay home if sick, even if mild.
- Seek medical advice if experiencing fever, cough, sore throat or shortness of breath (call your doctor or [healthdirect](#) on [1800 022 222](#)).

FURTHER INFORMATION

- **The Department of Health**
<https://www.health.gov.au/health-topics/novel-coronavirus-2019-ncov>
- **World Health Organisation updates**
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>
- **QLD Health:**
<https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19>
- For general advice for employers on managing risks to exposure to the COVID-19 virus, go to [COVID-19 Information for workplaces](#).
- For further information on risk management, see the [model Code of Practice: How to manage work health and safety risks](#).
- Further information is also available in each jurisdiction on managing risks to exposure to the COVID 19 virus, including the following information for early childhood education and care services: [COVID-19 and service operation](#)