
 <p>YMCA We build strong PEOPLE strong FAMILIES strong COMMUNITIES</p>	Management Area: CHILDREN'S SERVICES	Pages: [03] Version No: [03] Date: [01/01/2011]
	Sub section (if applicable):	Signed: 
Policy Title: STAFF IMMUNISATION		Author: CHILDCARE TASKFORCE

1. Scope

- 1.1. Staff, management

2. Policy Statement

YMCA of Sydney staff should see their local doctor or have medical records in order to review their immunisation status. (Most staff should be up to date with their childhood immunisations: Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus and Pertussis).

3. Related Policies & Procedures/Guidance Notes

- 3.1. Conditions of Employment Policy
- 3.2. Illness and infectious diseases Policy
- 3.3. Immunisation Policy
- 3.4. Occupation Health and Safety Policy

4. Responsibilities & Delegations



- 4.1. The Childcare Taskforce is responsible for the review of this policy.
- 4.2. The Childcare staff & management are responsible for the implementation of this policy.
- 4.3. The families and children are responsible for the support of this policy.

5. Considerations

- 5.1. National Standards
- 5.2. Q&A Principles

6. Records Maintenance



- 6.1. This policy is to be reviewed annually.

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PROCEDURES

- Rubella – especially important in relation to women of childbearing age (staff and parents/carers) if contracted it can cause congenital birth defects in unborn children.
- Tetanus – booster immunisation required every 5-10 years.
- Hepatitis A – this is more serious in adults than children. Children may have the disease, but may show no signs or mild signs. It is transmitted by the faeces of an infected person coming into contact with another person's mouth e.g. Food, drink or utensils handled by an infected person, touching linen, towels, toys etc. or the infected person's hands. Therefore, it is recommended that childcare workers be immunised.
- Hepatitis B – this is a serious and potentially life threatening disease that is passed on via blood contact. Whilst it is not compulsory, staff should seek medical advice regarding immunisation. Potential risk factors –children infected that have cuts or who bite.
- Tuberculosis – while there is no need for routine immunisation in general in Australian communities, any staff who plan travelling to areas where tuberculosis is prevalent should consider immunisation and staff returning from such areas overseas.
- Chicken Pox – there is currently a vaccine in development and testing. Those people who have already had chicken pox have an immune status. Those who develop shingles can spread the virus to susceptible people, and as in chicken pox, the individual is still contagious until all sores have crusted. This disease is important to women of childbearing age, as like rubella, it can cause congenital birth defects in the unborn child.
- Meningococcal C – is an uncommon life-threatening infection caused by bacteria that live at the back of the throat or in the nose in about 10% of the community at any given time. Although most people who carry this bacteria remain well, they can spread them to others, who in some cases can become very ill. There are different strains of meningococcal disease, with strains B and C the most common in Australia. Currently there is a free Meningococcal C immunisation program for people under the age of 19; however it is recommended that all staff be immunized against this disease.

In all cases of immunisation, it is advised and necessary that immunisation or assessment of immunisation status be done by your doctor.


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7. Version History

Version	Description of changes	Author	Effective Date
2	Review and update. New format	M. Rupnik	December 2009
3	New structure	AM. Nolan	January 2011

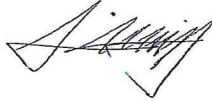
I endorse the Staff Immunisation Policy.

Name: Anne-Mary Nolan
Children's Services Program Manager

Signature: 

Date: 10 January 2011

Name: Liam Whitley
General Manager Children's Services

Signature: 

Date: 10 January 2011

