Immunisation in early childhood education and care services

Staff working in early childhood education and care services can be exposed to vaccine-preventable diseases through contact with infectious children and their blood and body substances. Staff vaccination helps to protect staff, their families and the children they care for. **Recommended vaccinations** for non-immune staff who work with young children include:

- hepatitis A
- measles-mumps-rubella (MMR) (persons born during or since 1966 who have only received one dose of the MMR vaccine should have a second dose)
- chickenpox (if not previously infected)
- pertussis (whooping cough) (an adult booster dose)
- influenza (annual vaccination).

Outbreaks of these diseases in early childhood education and care services can result in serious illness in staff, children attending the service and family members. Some of these diseases, such as rubella, chickenpox and influenza can cause severe disease in pregnant women and/or harm their baby.

These diseases are generally very infectious and can spread before an infected person shows signs of illness. Vaccination and good hand and respiratory hygiene are the most effective ways to protect against infection.

For information on immunisation of children please refer to your doctor or Queensland Health.

Other diseases in early childhood education and care services, like **cytomegalovirus (CMV)**, cannot be prevented by immunisation and other approaches are required to manage the risks.

Managing the risks

The best protection for workers against diseases that are preventable by vaccination is an occupational **immunisation program** that:

- includes a staff immunisation policy which states:
  - the workplace’s vaccination requirements
  - how vaccine refusal, medical contraindication to vaccination (medical condition which makes vaccination inadvisable) and vaccine failure will be managed
  - how the risks to contract and labour hire workers, students, volunteers and others will be managed
- requires all at risk workers to complete an immunisation record for the relevant vaccine-preventable diseases
- identifies non-immune and incompletely immunised workers from the immunisation record and encourages them to be vaccinated in accordance with the immunisation policy
- provides workers with information about the relevant vaccine-preventable diseases and the availability of vaccination.
• updates each worker’s immunisation record following vaccination.

Although the risk is low, medical advice should be sought about hepatitis B vaccination for staff if the service provides care for children with intellectual disabilities and the children are not immunised.

Students who undertake vocational placements at early childhood education and care services are also at risk of exposure to diseases that are vaccine-preventable. Tertiary and vocational education institutions that offer early childhood education and care courses should implement a student immunisation program for the relevant vaccinations (as listed above). The person conducting the business or undertaking (PCBU) of the early childhood education and care service should ensure that students undergoing vocational placements are immunised.

Managing vaccination refusal

Where workers refuse vaccination, are unable to be vaccinated for medical reasons, or do not respond to vaccination, the PCBU should undertake a risk assessment to determine the most appropriate way to protect these workers against infection, giving consideration to the way in which the infectious disease is spread.

Control measures may include:
• appropriate work placement and adjustment (e.g. consider placing workers who have received the adult pertussis booster to care for the youngest infants).
• review of work practices to ensure safe systems of work for infection prevention and control
• additional information, instruction, training and supervision
• personal protective equipment.

In the event of an outbreak of a vaccine-preventable disease, it may be necessary to implement work exclusions, restrictions or adjustments to protect non-immune workers and prevent further spread of the disease. Contact Queensland Health for advice on how to manage an infectious disease outbreak.

Confirming immunity

If a worker is at significant risk of acquiring a vaccine-preventable disease and is unsure of their immunity, the worker should be encouraged to discuss their immunity with their doctor.

Who pays for vaccination?

Vaccination costs should be negotiated between the PCBU, workers and their representatives.

Vaccine uptake by workers is generally higher where the PCBU provides vaccination at no cost or at a subsidised cost.

Studies show that preventing illness through a comprehensive immunisation program is more cost effective than the costs associated with managing occupational exposures, outbreaks of disease and subsequent disruption of productivity and services.

Further information

For more information on communicable diseases, contact Queensland Health on 13HEALTH (13 43 25 84) or visit www.health.qld.gov.au.