

GUIDANCE NOTE

Reducing the Risk of Infectious Diseases in Child Care Workplaces



COMMISSION

WorkSafe
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COMMISSION

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Authority

This Guidance Note has been produced by the WorkSafe Western Australia Commission under section 14 of the *Occupational Safety and Health Act 1984*.

Scope

This Guidance Note applies to workplaces in Western Australia covered by the *Occupational Safety and Health Act 1984*. It provides information on key issues relating to the control of infectious diseases for managers, workers and volunteers in child care workplaces such as child care centres, home day care centres, before and after school care centres, kindergartens, preschools and in private residences.

Acknowledgement

The information in this Guidance Note is based on *Staying Healthy in Child Care (June 2002)* published by the Commonwealth Government and produced in partnership with the Commonwealth Department of Health and Aged Care, the National Health and Medical Research Council and the Commonwealth Child Care Program.

Preventing illness

When children are in situations where there is frequent contact with many other children for long periods of time, the risk of becoming ill with common infectious diseases increases. It is not possible to prevent the spread of all infections but some can be prevented.

Good hygiene and infection control procedures, that are part of the routine for everyone in child care workplaces, will reduce the risk of illness for children, workers, volunteers and visitors.

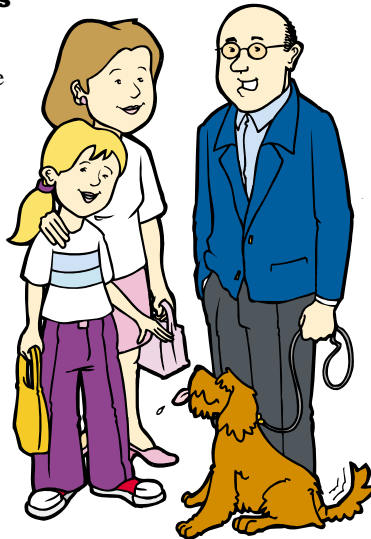
Causes of infectious diseases

Infectious diseases may be caused by micro-organisms or “germs” including viruses, bacteria, protozoa or fungi. These germs are too small to see with the naked eye, but they can survive in the air, on the surface of the skin, in body fluids and on objects such as toys and door handles. The length of time that germs can survive depends on the type of germ and the surface or substance that may be contaminated.

Washing hands and objects with detergent and water is a very effective way of killing and removing germs.

Spread of infectious diseases

Infectious diseases can be spread directly from person to person or they may be transferred from a person into the environment and then to another person. Animals may also carry infectious diseases that are transferred when the animal comes into contact with a person or when a person handles droppings and other body fluids from the animal.



The infection control process aims to prevent the spread of infections that are transferred directly and indirectly.

All body fluids, including blood, saliva, urine and vomit, should be treated as potentially infectious. Germs can be sprayed into the air through sneezing and coughing. Another person may breathe them in or they may enter the body through the eyes, mouth or skin. Some germs will enter through unbroken skin, but usually the risk is increased if the skin is broken and left open to the air. Sometimes the germs are passed indirectly onto hands that touch a contaminated surface and then into the eyes, nose or mouth.

Factors that may increase the risk of contracting infectious diseases

There are some situations where the body's defences are less able to resist infection. This may occur when a person is very young or very old, during pregnancy, when the person has no immunity to a particular disease, when the immune system is not working properly or when the body is poorly nourished or generally unwell.

The risk of infection in child care workplaces may also increase when infection control procedures are not in place or not followed by staff members and visitors to the workplace. This may result in poor personal hygiene, poor workplace design and lack of proper facilities or work practices that do not prevent the transfer of infection.

Pregnancy

A number of infectious diseases have the potential to cause injury to an unborn child. Women who work in the child care industry and are pregnant or planning a pregnancy, should contact their doctor for further information.

Parents and pregnant women visiting child care workplaces should also be provided with information by the employer if a child who usually attends the centre has an infectious disease that may cause injury to an unborn child. Examples are German Measles (Rubella), Cytomegalovirus (CMV) and Chicken Pox.

Controlling infectious diseases in child care workplaces

There are steps that can be taken in child care workplaces to reduce the risk of transferring infectious diseases. These include:

- Encourage immunisation for staff members and children to prevent infectious diseases;
- Establish policies to exclude animals and sick people;
- Provide adequate facilities for hand washing, cleaning and disposing of waste;
- Establish proper procedures for infection control, especially for:
 - Good personal hygiene including washing hands properly;
 - Safe work practices for high risk activities such as dealing with blood and body fluids, nappy changing and toileting, handling dirty linen and contaminated clothing and preparing and handling food;
 - Good management of toys, play clothing and play equipment (such as sand pits and wading pools); and
 - General cleaning of the child care workplace;
- Provide staff members and visitors with information on infection control policies and procedures;
- Provide training for staff members so they understand and can use the infection control procedures;
- Provide adequate supervision to ensure everyone follows the policies and procedures; and
- Provide adequate supplies of protective equipment such as disposable gloves.

Immunisation

Immunisation is an effective means of preventing some infectious diseases. However, some children and adults may have an adverse reaction to a vaccine. Encourage parents to

seek medical advice on immunising their children. Staff members should also be encouraged to seek medical advice on having immunisations for infectious diseases that they may come into contact with at work, including Hepatitis A and B, Measles, Mumps, German Measles (Rubella), Polio, Chicken Pox, Diphtheria and Tetanus.

A record of staff members' immunisations should be maintained in case there is an outbreak of an infectious disease at the child care workplace. The employer should also provide all staff members with information if a child who usually attends the centre has an infectious disease. Steps can then be taken to identify those staff members most at risk of contracting the disease.

Exclusion of sick children, employees and volunteer helpers

It is important to identify and record signs of ill health in children and staff members at child care workplaces. Encourage parents to tell the staff when their child or other family members have been ill.

If a child appears to be sick or if the child appears itchy or is scratching more than usual:

- Check the child for signs of fever, skin irritation or rashes;
- Record the symptoms;
- Notify the child's parents as soon as possible;
- Isolate the child from others;
- Monitor the child's temperature; and
- Wash your hands before touching another child.

Staff members should seek medical advice if they are concerned and have not been able to contact the sick child's parents.

When staff members are handling sick children, they should not place their fingers in their mouths, scratch themselves or rub their eyes and they should ensure that they have covered cuts or other broken skin that they may have.

Sick people should be excluded from the workplace to prevent the transfer of infectious diseases to others. The recommended action in relation to exclusion policies is covered in **Appendix One**. Each child care workplace should have a written policy stating the exclusion criteria that will apply when a child or a staff member is sick. Usually exclusion periods are based upon the time that a person with a specific disease or condition might be infectious to others.

Where there is no significant risk of infection to others, exclusion is not recommended. However, a person who is not excluded may still need to stay at home because they do not feel well.

Cross infection from animals

It is best that children in child care workplaces do not come into physical contact with animals. However, where there are pets in the workplace or in situations where children may come into contact with animals during excursions to parks or farms:

- Ensure interaction with animals is supervised;
- Ensure children wash their hands after handling animals;
- Ensure that children do not play in dirt that may be contaminated by animals, in particular ensure that children do not place the dirt or dirty hands in their mouths; and
- Exclude sick animals from child care workplaces.

Facilities for hand-washing, cleaning and disposal of waste

Employers should ensure that hand-washing facilities are provided with running water, soap and single-use towels. Personal protective clothing and equipment provided for staff members should include disposable gloves, and coveralls for staff members involved with food handling. If a spillage covers a large area or it is likely that a staff member's clothing will be splashed with cleaning products, waterproof aprons should be provided.

The first aid box should include waterproof dressings that will remain in place during hand-washing and water play activities.

When children are taken on an excursion out of the child care workplace, supplies, such as disposable gloves, disposable paper towels, clean clothing, plastic bags and a first aid kit, should be taken to ensure that staff have the equipment they need to deal with nappy changing, toileting activities, vomiting or bleeding.

Soiled items such as disposable gloves, paper towels, disposable nappies, dressings and used first aid items should be treated as “contaminated waste”. They should be disposed of in bins lined with a plastic bag and clearly marked to indicate that the bin is for a special purpose and the waste should not be handled. The bins for contaminated waste should be in areas where children will not be able to reach them.

Facilities should include locked storage areas for items such as cleaning chemicals and medicines.

Hand-washing

Hand-washing is one of the most important methods used to reduce the risk of transmitting infectious diseases.

Adults and children should wash their hands before handling food and eating, after changing a nappy, after assisting children in the toilet or going to the toilet and after cleaning up any body fluid or waste. Children’s faces and hands should be washed if they touch their own body fluid or waste or that from another person or animal.

As part of their safety induction, all staff members and parents or volunteer helpers in a child care workplace should be instructed in a proper procedure and supervised to ensure their hands are clean and dried after washing.



The procedure should cover the following points:

- Use soap;
- Wash hands vigorously for 10 seconds;
- Rinse hands well for 10 seconds;
- Turn off the tap with a piece of paper; and
- Dry hands well with paper towel or a dryer.

Dealing with blood and other body fluids

Direct contact with blood and other body fluids should be avoided. However, it is acknowledged that this is not always possible in a child care workplace where protective clothing is not worn at all times. Disposable gloves should be worn in situations where there may be contact with blood and other body fluids, such as during nappy changing and cleaning.

Unbroken skin is an effective barrier against infections from spilled blood. Cuts and abrasions should be covered with a waterproof dressing to reduce the risk of infection through the skin.

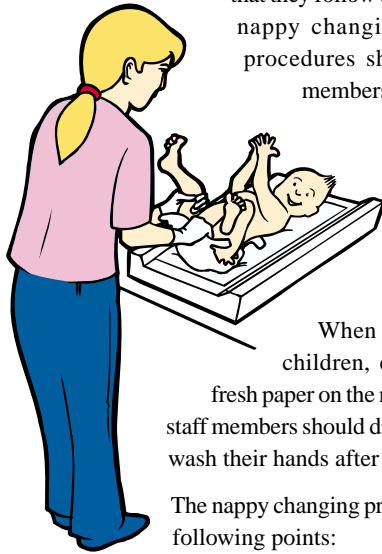
Child care workplaces should establish a procedure for cleaning up body fluid spills such as those associated with toileting accidents, vomiting or bleeding if a child suffers cuts or abrasions during play activity.

The procedure should cover the following points:

- Prevent children from entering the area until it is properly cleaned;
- Wear gloves and mop up spills with paper towels;
- Place paper towels in a bin that has been lined with a plastic bag and provided for the disposal of contaminated waste;
- Clean area with warm water and detergent;
- Disinfect the area where a spill has occurred using bleach (1 part bleach to 9 parts water); and
- Remove gloves and wash hands thoroughly.

Nappy changing and toileting

Staff members should be trained and supervised to ensure that they follow the proper procedures for nappy changing and toileting. The procedures should ensure that staff members do not come into direct contact with body fluids and children are protected from the risk of infections being transferred from another child.



When changing a number of children, each child should have fresh paper on the nappy changing table and staff members should dispose of their gloves and wash their hands after dealing with each child.

The nappy changing procedure should cover the following points:

- Wear disposable gloves;
- Use paper on the changing table;
- Clean the child and remove the paper;
- Remove gloves, dispose of paper and gloves in the bin;
- Dress the child;
- Wash the child's hands and take child away from table;
- Clean the change table with detergent and water; and
- Wash your hands.

When assisting children with toileting activities, staff members should wear disposable gloves. Children at the centre should have clean clothes available in case their clothing is soiled. The soiled clothing should be placed in a plastic bag ready for parents to collect with the child each day. Children may need assistance to wash their hands properly. At the end of the process, staff members should wash their own hands.

Potties should be avoided if possible. If used by a child, the potty should be emptied into a toilet then cleaned with disinfectant and rinsed in a sink that is not used for food preparation. Staff members should wear disposable gloves and wash their hands at the end of the cleaning process.

Handling dirty linen and contaminated clothing

All linen or clothing soiled with blood or body fluids should be treated as potentially infectious and placed in a plastic bag that is clearly marked. The plastic bag may then be placed in the standard linen laundry bag or taken home by parents for washing. It is not necessary to use disposable linen in child care workplaces. Washing linen in hot water usually destroys germs that may cause infection.

Food safety

Child care workplaces where staff members change nappies and prepare or serve food on a daily basis have three times as much diarrhoea as centres where staff members do not do both these jobs. For this reason, the person who prepares and serves food should not be the person who changes nappies or helps children go to the toilet on that day.



Staff members who work in the kitchen should have training in the proper procedures for handling raw and cooked food, food storage, cooking and reheating. They should also be trained in how to store and heat breast milk that is supplied for babies and the preparation of formula. Information on laws associated with food handling and preparation are available from your local government's Environmental Health section.

Tables used for meals should be washed with detergent and water before each meal and all children and adults should wash their hands before eating. Staff members assisting at meal times should make sure children do not share food,

plates or utensils and a separate spoon and bottle is used for each baby.

The kitchen should be fly and vermin proof and food that is waiting to be served should be covered. Staff members who work in the kitchen should be provided with coveralls to protect their clothing.

Cleaning toys, clothing and work areas

Employers should ensure that there is a cleaning routine that covers items that need to be cleaned on a daily or weekly basis.



Daily cleaning should include those items that are potentially contaminated, such as toys that have been placed in children's mouths. These items should be removed from the play area and only returned after they have been properly cleaned. The cleaning routine should include items which will need to be cleaned immediately before use, such as meal tables or immediately after use, such as toileting potties.

In situations where bleach is used, it should be diluted and applied to the surface after cleaning with water and detergent. Items should be thoroughly dried before they are stored.

Play clothing should be washed in hot water and detergent on a regular basis. If soiled, it should be removed from the play area immediately. Play clothing, especially play hats, should be properly treated as part of a procedure for dealing with an outbreak of head lice or "nits".

Children's sandpits

Sandpits may become contaminated with urine and faeces from children or from animals. It is sometimes difficult to detect when young children have urinated in a sandpit, especially when they are also playing with water.

Check sandpits regularly and ensure that they are kept clean. If the sand smells offensive, do not allow children to play in the sand until it is replaced.

Sandpits should be kept covered overnight or when not in use to keep animals out. Cats, in particular, are attracted to the soft sand for their toileting activities.

Children's wading pools

Wading pools require the same attention to cleanliness and disinfection as swimming pools. The water should be chlorinated and the pool should be emptied and cleaned every day.

Staff members will need to know the volume of the pool to work out how much chlorination chemical is required. Expert advice on the type of chemicals and the recommended quantities is available from your local government's Environmental Health section.

The chlorine levels in the pool should be tested hourly if the pool is in continuous use or before each group of children uses the pool. The rate of breakdown of chlorine in the water will be affected by the amount of sun and shade over the pool, the temperature and the weather. Testing the water regularly will ensure that chlorine levels are adequate and prevent the overuse of chemicals. Do not add chemicals to the water while children are in the pool and ensure the chemicals are mixed well with the water before children are allowed to enter the pool.

It is not necessary to chlorinate water for some play activities - for example, playing with sprinklers, buckets and water tables.

Children should be supervised at all times while using the pool. To keep the pool clean, all children should go to the toilet before entering the pool and they should wear clean bathers or a change of underwear. Children with diarrhoea, upset stomachs, open sores or nasal infections should not be allowed to use the pool.

If a child passes a bowel motion in the pool, remove all children from the pool immediately. Empty the pool, clean

it thoroughly and disinfect it using a chlorine based disinfectant.

Store pool chemicals away from children and use gloves and eye protection when handling the chemicals.

Information, training and supervision for infection control procedures

All staff members and volunteer helpers in child care workplaces should be provided with information and trained in the infection control procedures that are in place. Adequate supervision should then ensure that everyone follows the procedures.



Training should be provided as part of an induction program and be updated on a regular basis. It should relate to the specific activities undertaken by each member of staff and be provided in a way that enables the person to understand and apply the procedures. For example, there may need to be special arrangements for the training of workers from a non-English speaking background.

The training should include information on what infectious diseases are, how they are transmitted, the signs and symptoms of the diseases and the procedures used in the workplace to minimise the risk of spreading the diseases.

Child care workplaces may also need to provide information to parents and visitors. For example, parents should have information when a child who usually attends the centre has an infectious disease.

Employers' responsibilities for the provision of information, instruction, training and supervision are set out in Part III of the *Occupational Safety and Health Act 1984*.

Personal protective clothing and equipment

The procedures that are in place should reduce the risk of exposure to blood and body fluids that may be infectious. Personal protective clothing and equipment (PPE) should not be the only method used to reduce risk for staff members, visitors and children at the workplace. However, there are situations in child care workplaces where PPE should be used to increase the level of protection.

Other hazards in the child care industry

Staff members and children in child care workplaces may be exposed to many other hazards, including:

Manual handling

Lifting and carrying children and the equipment used in child care workplaces may lead to manual handling injuries such as sprains and strains. The activities undertaken by child care workers and volunteers should be assessed and modified if possible to reduce repetitive lifting and minimise the risk of injury.

Slippery surfaces

Floors and the surfaces of pathways, steps and ramps inside and outside child care workplaces should be slip resistant, especially around wet areas such as bathrooms and toilets.

The risk of slips, trips and falls can also be reduced by good housekeeping, keeping walkways clear of toys and other loose items and by ensuring that spills are cleaned up promptly.

Electricity

In situations where portable items of electric equipment, such as vacuum cleaners, electric frypans, portable stereos and CD players are used, electric circuits should be protected by Residual Current Devices (RCDs) to reduce the risk of electrocution.

Power cords and extension leads should be protected from damage by toys and equipment, chemicals and heat. It is a good idea to check cords and leads for nicks, cuts and other damage on a regular basis and to immediately remove a damaged item until it is properly repaired.

A licensed electrical contractor should always be used for repairs to electrical equipment and electrical installations at workplaces.

Children should not be left unsupervised in situations where they may cut electric cords, spill water onto electric equipment or pull cords and leads out of a power point. Unused power points should be covered with blank plugs to ensure that children do not poke small items into the empty holes.

Cleaning products and other chemicals

It is important that all chemicals are stored in locked cupboards or storerooms away from children. Everyone who uses the chemicals for work should be trained in procedures that ensure the chemicals are returned and locked away immediately after use. Supervision of staff members and volunteers should ensure that the procedures are followed.

There are legal requirements for the provision of information and for adequate instruction, training and supervision in the use of cleaning products and other chemicals. There are also requirements for child care workplaces to have a register of hazardous substances and a copy of the Material Safety Data Sheet (MSDSs) for each hazardous substance at the workplace and to reduce the risk of injury or harm that may occur by following the safety instructions on the label and in the MSDS for the product.

If chemicals are used for wading pools, your local government's Environmental Health section can provide further advice and information.

General requirements of occupational safety and health laws

The *Occupational Safety and Health Act 1984* sets out requirements for people in workplaces including employers and employees.

Employers

Employers have a duty to take reasonable care of their own safety and health at work and to provide and maintain a work environment where their employees are not exposed to hazards. Employers must also ensure, as far as practicable, that the health of other people who are not employees is not harmed by the work.

As part of the process, employers should identify hazards in their workplaces and assess and control risks associated with those hazards. Reducing the risk of exposure to infectious diseases in a workplace would be part of the general duty for employers to protect themselves and their employees. Employers must identify factors in their workplaces that may allow the spread of infectious diseases and make changes to prevent and control the spread of these diseases.

This includes providing safe and healthy systems of work with adequate information, instruction, training and supervision for employees. In situations where personal protective clothing and equipment is required, the employer should provide it at no charge to employees.

Employers must consult and cooperate with safety and health representatives, if any, and other employees at the workplace on safety and health matters, including infection control.

Employees

Employees should take reasonable care for their own safety and health at work. They should also avoid adversely affecting the safety and health of children, other staff members and visitors in the workplace.

Employees should follow the employer's safety instructions, cooperate with their employer on work related safety and health matters, use the protective clothing and equipment provided, and tell their employer about any work-related injuries or anything that they consider to be hazardous in their workplace.

Notification of certain infectious diseases

Employers are required to notify the WorkSafe Western Australia Commissioner if an employee is affected by certain diseases. The diseases include tuberculosis, viral hepatitis, Legionnaires' Disease and HIV. This requirement only applies if the employee was infected with the disease as a result of work involving exposure to blood and blood products, body secretions, excretions or other sources of infection. Employees in child care workplaces are involved in this type of work, so the requirement would apply to their employers.

Employers are also required to notify the Commissioner of certain diseases contracted following contact with animals and animal products. This is less likely to apply to workers in child care workplaces. More information is available in the *Occupational Safety and Health Regulations 1996*. (Regulation 2.5).

In a situation where an employee advises an employer that he or she has one of the diseases listed above, the employer can obtain the form required for the report to the Commissioner from WorkSafe or a copy of the form is available in the book of Regulations (refer to Form 2 in Schedule 2 of the Regulations).

This requirement to report certain diseases is in addition to the general requirement in the Act to report certain types of injuries, including work-related injuries that are likely to prevent an employee from being unable to work for ten days or more.

Appendix One Common infectious diseases

Specific diseases	Common name	Cause	Transmission	Prevention
Gastro-intestinal complaints	Diarrhoea and/ or vomiting	Bacteria parasite or virus	Faecal-oral	Exclusion until diarrhoea has ceased. Personal hygiene.
	Intestinal parasites including Giardia and worms	Parasite or worm	Faecal-oral	Exclusion if diarrhoea is present. Personal hygiene.
Skin complaints	Chicken pox	Virus	Airborne droplets and contact with moist rash	Exclusion. Personal hygiene. Vaccine available.
	Cold sores	Virus	Contact with the blisters, ie kissing and washing	Personal hygiene.
	Parvovirus	Virus	Airborne droplets	Personal hygiene.

Appendix One Common infectious diseases continued

Specific diseases	Common name	Cause	Transmission	Prevention
Skin complaints continued	Head lice	Parasite	Direct contact with scalp of infected person or their personal belongings	Exclusion from other children before treatment of infected person.
	Measles	Virus	Airborne droplets	Exclusion. Vaccine available.
	Hand, foot and mouth disease	Virus	Faecal-oral	Exclude until blisters dry. Personal hygiene.
	Ringworm (tinea)	Fungi	Contact with skin or surfaces	Personal hygiene.
	Rubella (German measles)	Virus	Airborne droplets	Exclusion. Vaccine available.
	Scabies and mites	Mites	Skin contact	Exclusion. Awareness and education.

Appendix One Common infectious diseases continued

Specific diseases	Common name	Cause	Transmission	Prevention
Skin complaints continued	School sores (impetigo)	Bacteria	Direct contact with sores or contaminated clothing	Exclusion. Cover sores. Personal hygiene.
	Warts	Virus	Direct contact	Avoid contact with lesions. Personal hygiene.
Respiratory complaints	Bronchiolitis	Virus	Airborne droplets, oral contact or contact with infected surface	Exclusion while unwell and respiratory complaints seek medical advice on returning.
	Common cold	Virus	Airborne droplets or contact with infected surface	Personal hygiene.
	Croup	Virus	Airborne droplets	Exclusion while unwell. Personal hygiene.

Appendix One Common infectious diseases continued

Specific diseases	Common name	Cause	Transmission	Prevention
Respiratory complaints continued	Influenza	Virus	Airborne droplets	Exclusion while unwell. Vaccine available.
	Sore throats	Virus or bacteria	Airborne droplets or contact with infected surfaces	Exclusion while unwell. Personal hygiene.
	Whooping cough	Bacteria	Airborne droplets	Exclusion. Vaccine available.
Other complaints	Conjunctivitis	Bacteria, virus, chemicals or allergies	Direct contact with eye secretions or infected objects	Exclusion while discharge from eye. Personal hygiene. Treatment of infected eyes.
	Cytomegalovirus	Virus	Airborne droplets. Infants may be infected by their mother. Infants excrete the virus in their urine for months	Personal hygiene.

Appendix One Common infectious diseases continued

Specific diseases	Common name	Cause	Transmission	Prevention
Other complaints continued	Ear infections (otitis)	Bacteria or viruses	Contact with infectious fluid from the ear	Exclusion if fluid from the ear. Personal hygiene.
	Hepatitis A	Virus	Faecal-oral route	Exclusion applies at stages of illness. Personal hygiene. Vaccine available.
	Hepatitis B	Virus	Sexually and through blood and body fluids	Vaccine available. Standard precautions.
	Hepatitis C	Virus	Blood	Standard precautions.

Appendix One Common infectious diseases continued

Specific diseases	Common name	Cause	Transmission	Prevention
Other complaints continued	HIV/AIDS	Virus	Sexually and through blood. Can be from mother to infant during birth	Standard precautions.
	Meningitis	Virus or bacteria	Direct contact with droplets or discharge from the nose and throat	Exclusion. Personal hygiene.
	Mumps	Virus	Airborne droplets	Exclusion. Vaccine available.

NOTE: The NHMRC recommends that children who are physically unwell should be excluded from attending school, preschool and child care centres.

Other relevant publications

Occupational Safety and Health Legislation

The *Occupational Safety and Health Act 1984* and the *Occupational Safety and Health Regulations 1996* can be purchased from WorkSafe, Westcentre, 1260 Hay Street, West Perth [Tel. (08) 9327 8777] or State Law Publisher, 10 William Street, Perth [Tel. (08) 9321 7688]. The legislation is also available from the State Law Publishers website [www.slp.wa.gov.au]. Copies are held in the WorkSafe Library, 5th floor, 1260 Hay Street, West Perth.

WorkSafe Western Australia Commission Publications

The following WorkSafe Western Australia Commission codes of practice, guidance notes and other publications can be purchased from WorkSafe, Westcentre, 1260 Hay Street, West Perth [Tel. (08) 9327 8777], or downloaded from the Safetyline website [www.safetyline.wa.gov.au]. Copies are also held in the WorkSafe Library.

Codes of Practice

- First Aid, Workplace Amenities and Personal Protective Equipment
- The Management of HIV/AIDS and Hepatitis at Workplaces
- Manual Handling

Guidance Notes

- Election of Safety and Health Representatives, Representatives and Committees and Resolution of Issues
- General Duty of Care in Western Australian Workplaces

New information that is produced by the Commission from time-to-time is usually available through the SafetyLine website [www.safetyline.wa.gov.au].

Infectious Diseases Reference

Staying Healthy in Child Care. Third edition. June 2002.
Commonwealth of Australia.

This document can be purchased from Australian
Commonwealth Government Bookshop (Tel: 9322 4737),
or at <http://www.health.gov.au/nhmrc/publications>

Contacts for further information

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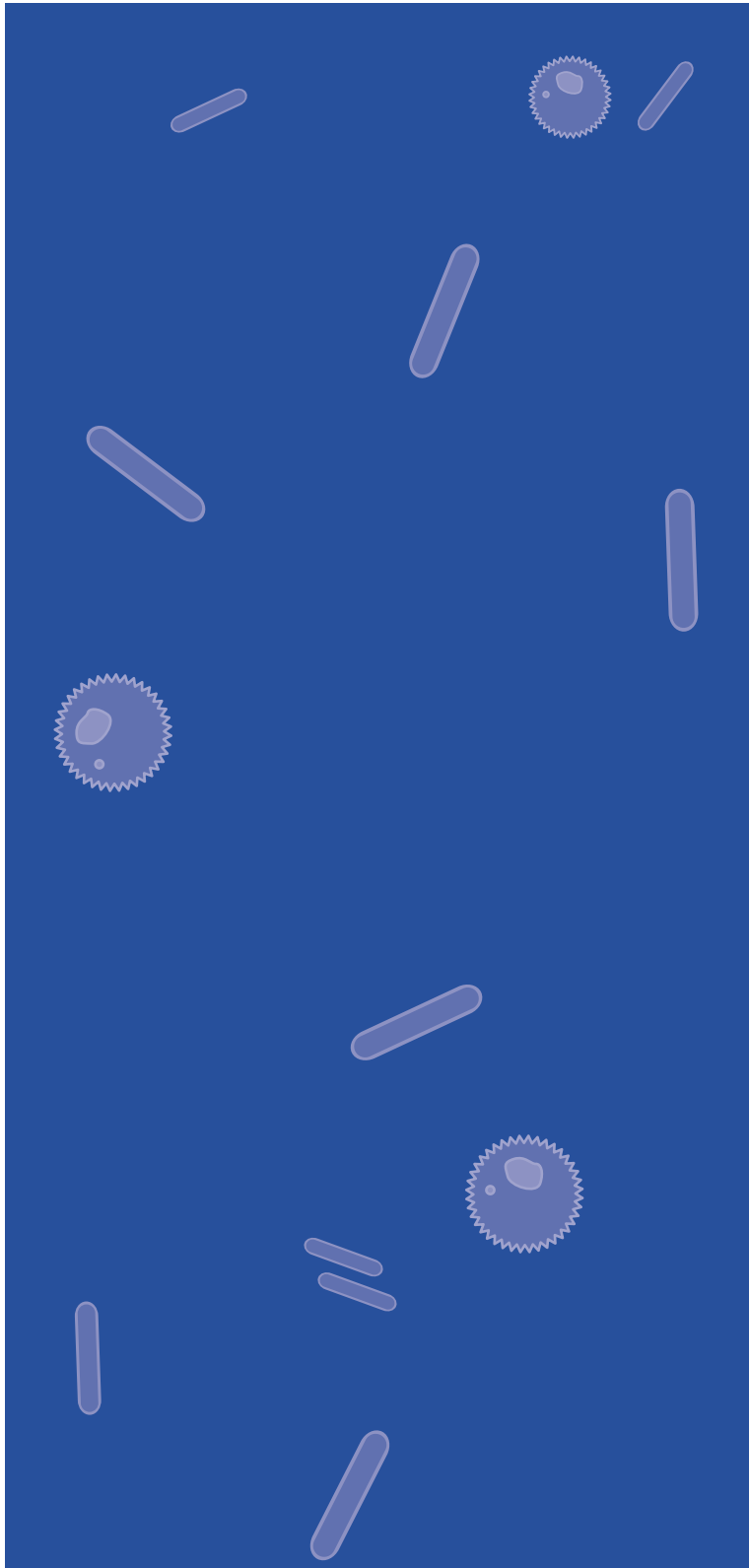
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Your local government's Environmental Health section





**WorkSafe
Western
Australia
COMMISSION**

March 2003

ISBN 0-7307-6125-8

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