



Carleton House

Preparatory School

HEALTH AND SAFETY POLICY

Written by Mrs Sandy Coleman

October 2020

To be reviewed October 2022



HEALTH AND SAFETY POLICY

MISSION STATEMENT

We live, love and learn with Jesus.

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1. Legislation

This policy is based on advice from the Department for Education on [health and safety in schools](#) and the following legislation:

- [The Health and Safety at Work etc. Act 1974](#), which sets out the general duties employers have towards employees and duties relating to lettings
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Control of Substances Hazardous to Health Regulations 2002](#), which require employers to control substances that are hazardous to health
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive and set out the timeframe for this and how long records of such accidents must be kept
- [The Health and Safety \(Display Screen Equipment\) Regulations 1992](#), which require employers to carry out digital screen equipment assessments and states users' entitlement to an eyesight test
- [The Gas Safety \(Installation and Use\) Regulations 1998](#), which require work on gas fittings to be carried out by someone on the Gas Safe Register
- [The Regulatory Reform \(Fire Safety\) Order 2005](#), which requires employers to take general fire precautions to ensure the safety of their staff
- [The Work at Height Regulations 2005](#), which requires employers to protect their staff from falls from height
- [Provision and Use of Work Equipment Regulations 1998](#), requires that any equipment provided for work, is suitable, maintained and safe to use
- [Public Health \(Control of Disease\) Act 1984 amended in 2020 to include The Health Protection \(Coronavirus\) Regulation 2020](#)

The school recognises that staff and pupils will suffer from various types of illness and infections. However, no-one knows exactly when the school will be faced with having to deal with a potentially contagious illness amongst its community and therefore, will work closely with The Health Protection Team (HPT) who have operational autonomy and provide government, local government, the NHS, Parliament, industry and public with evidence-based professional, scientific and delivery expertise and support.

The school follows [national guidance published by Public Health England](#) when responding to infection control issues.

2. Preface

This is the Health and Safety Policy for Carleton House Preparatory School, which will be referred to as 'the School'.

The document contains information which must be followed in order to ensure the continued health, safety and welfare of the School's employees and contractors whilst continuing to comply with the legislation which governs the work we undertake.

This is a comprehensive document that comprises the following three sections:

- The Health and Safety Policy Statement.
- The Organisational Duties.
- The Arrangements for Managing Health and Safety.

Health and Safety Policy Statement

This is a general statement of the intentions of the School with regard to Health and Safety. The policy statement is signed and dated by the Head Teacher and therefore indicates that Health and Safety is highly regarded, with full commitment to it from the most senior level of the School.

The Organisational Duties

This section commences with a chart showing the safety structure of the School. It is followed by a list of individual responsibilities of personnel and contractors.

Arrangements for Managing Health and Safety

This section will contain information that will need to be followed by all levels of management, to ensure that the School complies with current legislation and to reduce the risk to all persons who may be affected by the works carried out on the School's behalf.

In order to reduce accidents and incidents, all personnel and contractors must adhere to the policies whilst carrying out the School's undertakings.

Where help is needed, the School engages the Health and Safety support services of Compliance Health and Safety Ltd, for providing competent advice on safety matters, guidance on risk management, safety auditing, safety inspections, advice on training and, should the need occur, to investigate or advise on accidents.

The School	-	Carleton House Preparatory School
Compliance	-	Compliance Education Ltd
HSE	-	Health and Safety Executive
ACoP	-	Approved Code of Practice

3. Health and Safety Policy Statement

In accordance with its duty under section 2(3) of the Health and Safety at Work etc. Act 1974, DoE and the Independent School Inspectorate Regulation and in fulfilling its obligations to employees and members of the public who may be affected by its activities, the School has produced the following statement of policy in respect of Health and Safety:

It is our aim to achieve a working environment that is free of work-related accidents and ill health and to this end we will pursue continuing improvements from year to year.

The School recognises its Health and Safety duties under the Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999, and all concomitant legislation, to ensure, so far as is reasonably practicable, the health and welfare at work of all employees.

Particular attention will be paid to duties required, namely:

- Provision and maintenance of safe plant and systems of work. i.e. all statutory requirements are met.
- Safe and healthy use, handling and storage of articles and substances.
- Provision of necessary information, instruction, training and supervision.

We undertake to discharge our statutory duties by:

- Identifying hazards in the workplace, assessing the risks related to them, and implementing appropriate preventative and protective measures.
- Providing and maintaining safe plant and work equipment.
- Establishing and enforcing safe methods of work.
- Recruiting and appointing personnel who have the skills, abilities and competence commensurate with their role and level of responsibility.
- Ensuring that tasks given to employees are consistent with their skills, knowledge and ability to perform.
- Ensuring that technical competence is maintained through the provision of refresher training as appropriate.
- Promoting awareness of Health and Safety and of good practice through the effective communication or relevant information.
- Furnishing sufficient resources needed to meet these objectives.

A successful Health and Safety programme is dependent on the participation and co-operation of all employees. All employees are aware that they have a legal duty to:

- Exercise reasonable care for the Health and Safety of themselves and others who may be affected by their acts or omissions at work.
- Co-operate with and assist the employer in meeting statutory obligations.
- Not intentionally or recklessly interfere with anything provided in the interests of health, safety and welfare.

Our Health and Safety Policy will be reviewed annually as a minimum, to monitor its effectiveness and to ensure that it reflects changing needs and circumstances. The Policy will be subject to additional review to reflect changes to legislative requirements, changes to key personnel in the School, and advancement in technologies which affect the School's activities.

Copies of this Health and Safety Policy Statement will be displayed in the workplace and website. The full School Health and Safety Policy will be provided to all employees to read, and sign to say they have fully understood.

All Employees, external Consultants and Contractors employed by the School will be expected to comply with this Health and Safety Policy.

Signed: Head Teacher

Date:

Review Date: October 2022

4. Roles and Responsibilities

4.1 The Governing Body

The governing body has ultimate responsibility for health and safety matters in the school, but will delegate day-to-day responsibility to the Head Teacher.

The governing body has a duty to take reasonable steps to ensure that staff and pupils are not exposed to risks to their health and safety. This applies to activities on or off the school premises.

The governing body as the employer, also has a duty to:

- Assess the risks to staff and others affected by school activities in order to identify and introduce the health and safety measures necessary to manage those risks
- Inform employees about risks and the measures in place to manage them
- Ensure that adequate health and safety training is provided

Gareth Beck is the chair of the Buildings and health and safety committee.

4.2 Head Teacher

The Head Teacher is responsible for health and safety day-to-day. This involves:

- Implementing the health and safety policy
- Ensuring there is enough staff to safely supervise pupils
- Ensuring that the school building and premises are safe and regularly inspected
- Providing adequate training for school staff
- Reporting to the governing body on health and safety matters
- Ensuring appropriate evacuation procedures are in place and regular fire drills are held
- Ensuring that in their absence, health and safety responsibilities are delegated to another member of staff
- Ensuring all risk assessments are completed and reviewed
- Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary

In the Head Teacher's absence, the Deputy Head Teacher, Fiona Mintz assumes the above day-to-day health and safety responsibilities.

4.3 Health and safety lead

The nominated health and safety lead is Sandy Coleman, the Head Teacher.

Gillian Marshall from Compliance Education acts as our competent person and supports the Head Teacher in an advisory capacity.

4.4 Health and Safety Advisor

The School has appointed COMPLIANCE as their Health and Safety Advisor and source of competent advice, to assist in undertaking the measures required to comply with the requirements and prohibitions imposed by or under the relevant statutory provisions.

The Health and Safety Advisor advises the School management team on the implementation of this Health and Safety Policy, established schedules and safe working practices, and providing employees with information about precautions in general.

The Health and Safety Advisor has the responsibility for the following:

- Ensuring the School is aware of statutory obligations and recommended Codes of Practice.
- Advising the School management team of their responsibilities for accident prevention and avoidance of Health and Safety hazards.
- Interpreting and keeping the School management team and Employees informed of new and developing legislation and other standards.
- Advising where improvements in Health and Safety standards or practices are appropriate.
- Regular health, safety, and housekeeping inspections which cover buildings, plant, equipment, services, and fire arrangements, to ensure conformity with regulations.
- Maintaining statutory safety records and making statutory safety returns, in addition to maintaining Health and Safety records required by the School.
- Advising on possible hazards when considering the introduction of new machinery, new materials, new processes, or changes to existing ones.
- Overseeing and reviewing accident investigations and assisting in preparing statistics to enable monitoring of Health and Safety performance.
- Identifying Health and Safety training needs and advising on suitable training programmes.
- The provision of guidance regarding first aid, fire safety, and emergency procedures as required.

4.4 Staff

School staff have a duty to take care of pupils in the same way that a prudent parent would do so.

Staff will:

- Take reasonable care of their own health and safety and that of others who may be affected by what they do at work
- Co-operate with the school on health and safety matters
- Work in accordance with training and instructions
- Inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken
- Model safe and hygienic practice for pupils
- Understand emergency evacuation procedures and feel confident in implementing them

4.5 Pupils and parents

Pupils and parents are responsible for following the school's health and safety advice, on-site and off-site, and for reporting any health and safety incidents to a member of staff.

4.6 Contractors

The School may require, from time-to-time, the services of Contractors/Consultants to undertake specialist or non-routine work activities which School employees are unable to undertake. All Contractors/Consultants appointed by the School must be able to provide auditable evidence of their competency.

A summary of their duties is as follows:

- Will be required to show that they have the necessary expertise and equipment to carry out the particular tasks they have been employed for.
- Will be required to ensure that their work is carried out in a safe manner and that their operatives have been given adequate training.
- Where a Contractor/Consultant is bringing 10 persons or more onto the School premises, they will be required to nominate a 'Safety Supervisor'. This person is required to liaise with the Head Teacher and/or COMPLIANCE to ensure that all arrangements for safety, health and welfare are dealt with. The appointed Contractor/Consultant 'Safety Supervisor' will also be required to carefully monitor and supervise the personnel they are responsible for, ensuring compliance with all relevant regulations and the requirements of the School Health and Safety Policy.
- Contractors/Consultants are reminded of their responsibilities, not only to their own employees, but also to all other contractors' employees and others who may be affected by their works, including members of the public.
- They must ensure that the School is provided with any information available that may affect Health and Safety on site.
- Where any works of a hazardous or dangerous nature are contemplated, they must provide risk assessments and discuss and agree the most suitable method of carrying out the operation with the School prior to commencing work.
- All plant and equipment provided by the Contractor/Consultant for use by their own personnel, requiring regular inspection or testing, must be maintained and tested as required. Copies of all necessary certificates and registers must be available for review by the School. Where weekly inspections are required, copies of documentation must be provided to the School.
- Contractors/Consultants who will use any material or substances likely to jeopardise the Health and Safety of others must provide the School with specific risk assessments (as required by Control of Substances Hazardous to Health Regulations) that provide all necessary and adequate safety measures.
- Where equipment is to be used which is likely to exceed the levels permitted by the Control of Noise at Work Regulations 2005, the Contractor/Consultant should inform the School in order to ensure that adequate steps are taken to reduce exposure to School employees.
- Contractors/Consultants are requested to ensure that their employees make proper use of any welfare facilities provided by the School and that they co-operate fully with the Head Teacher.
- Contractors/Consultants are requested to ensure that all fire precautions are taken while working on site, that designated fire escape routes are kept clear at all times, that they provide adequate fire equipment suitable to their tasks, and that they co-operate fully with the site fire plan.
- Contractors/Consultants must inspect their working area at the beginning of every shift to ensure that it is safe to proceed with their task. They are responsible for briefing their personnel on all safety issues on site and providing documentary evidence to the School that this has taken place.
- Contractor/Consultants are required to provide evidence they have been DBS checked before they are allowed on site during term time.

5. Site Security

The school caretaker is responsible for the security of the school site in and out of school hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems. The Head Teacher, Caretaker and School Business Manager are key holders and will respond to an emergency.

6. Fire

Emergency exits, assembly points and assembly point instructions are clearly identified by safety signs and notices. Fire risk assessment of the premises will be reviewed regularly.

Emergency evacuations are practised at least once a term. The fire alarm is a loud continuous bell. Fire alarm testing will take place weekly. New staff will be trained in fire safety and all staff and pupils will be made aware of any new fire risks.

In the event of a fire:

- The alarm will be raised immediately by whoever discovers the fire and emergency services contacted. Evacuation procedures will also begin immediately
- Fire extinguishers may be used by staff only, and only then if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk
- Staff and pupils will congregate at the assembly points.
 - Relative safety: Main Playground – Ultimate Safety Calderstones Park
 - Relative safety: Early Years Foundation Stage Yard – Ultimate safety Bishop Eton School
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day
- The School Business Manager will take a register of all staff
- Staff and pupils will remain outside the building until the emergency services say it is safe to re-enter

The school will have special arrangements in place for the evacuation of people with mobility needs and fire risk assessments will also pay particular attention to those with disabilities. There are Personal Emergency Evacuation Plans in place for individuals requiring additional assistance.

Please see Fire Strategy for additional guidance. Fire Drill procedures can be found in appendix 1

7. COSHH

Schools are required to control hazardous substances, which can take many forms, including:

- Chemicals
- Products containing chemicals
- Fumes
- Dusts
- Vapours
- Mists
- Gases and asphyxiating gases
- Germs that cause diseases, such as leptospirosis or legionnaires disease

Control of substances hazardous to health (COSHH) risk assessments are completed by compliance education and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

Our staff use and store hazardous products in accordance with instructions on the product label. All hazardous products are kept in their original containers, with clear labelling and product information.

Hazardous materials are stored in restricted access cupboards or specific cabinets suitable for the substance. Petrol, solvents, paints are stored in a locked metal storage cabinet in an out building which is locked when not in use. Cleaning materials are kept in dedicated storage which is held shut with bolts at high level to prevent unauthorised access. Pupil access is prohibited to any material used in the cleaning or operation of machinery or mentioned in this paragraph. Substances used in teaching, i.e. paints and textiles are stored in the attic resource room and are used under the supervision of a staff member.

Any hazardous products are disposed of in accordance with specific disposal procedures.

Emergency procedures, including procedures for dealing with spillages, are displayed near where hazardous products are stored and in areas where they are routinely used.

7.1 Gas safety

- Installation, maintenance and repair of gas appliances and fittings will be carried out by a competent Gas Safe registered engineer
- Gas pipework, appliances and flues are regularly maintained
- All rooms with gas appliances are checked to ensure that they have adequate ventilation

7.2 Legionella

- A water risk assessment and management plan has been completed by Total Environmental Compliance. The school caretaker is responsible for weekly flushes of infrequently used outlets.
- TE Compliance complete monthly temperature checks and Deep cleaning of outlets identified through the Risk Assessment.
- This risk assessment will be reviewed when significant changes have occurred to the water system and/or building footprint.
- Both the Head Teacher and Caretaker have completed online Legionella Training module.
- The risks from legionella are mitigated by the following:
 - Temperature control and monitoring
 - flushing water system
 - heating is a closed system

7.3 Asbestos

- According to APEC Environmental report dated August 2018 there is no asbestos present in the school
- Contractors are provided with a copy of the asbestos survey and are asked to sign a declaration to acknowledge their understanding of the location of asbestos and the risk associated.
- A site specific asbestos survey will be undertaken before any evasive works are completed.
- Contractors will be advised that if they discover material which they suspect could be asbestos, they will stop work immediately and inform school.

8 Equipment

- All equipment and machinery, is maintained in accordance with the manufacturer's instructions. In addition, maintenance schedules outline when extra checks will take place
- When new equipment is purchased, it is checked to ensure that it meets appropriate educational standards. Equipment is purchased from reputable suppliers who can provide third party accreditations such as CE markings, which ensures product conforms to EU health and safety standards. Items will not be purchased from individual sellers where the history of items cannot be guaranteed.
- All equipment is stored in the appropriate storage containers and areas. All containers are labelled with the correct hazard sign and contents

8.1 Electrical equipment

- All staff are responsible for ensuring that they use and handle electrical equipment sensibly and safely
- Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them
- Any potential hazards will be reported to the Head Teacher immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed
- Only trained staff members can check plugs
- Where necessary a portable appliance test (PAT) will be carried out by a competent person
- All isolators switches are clearly marked to identify their machine
- Electrical apparatus and connections will not be touched by wet hands and will only be used in dry conditions
- Maintenance, repair, installation and disconnection work associated with permanently installed or portable electrical equipment is only carried out by a competent person

8.2 PE equipment / Outdoor play equipment

- Pupils are taught how to carry out and set up PE equipment safely and efficiently. Staff check that equipment is set up safely
- Any concerns about the condition of the gym floor or other apparatus will be reported to the caretaker.

8.3 Display screen equipment

- All staff who use computers daily as a significant part of their normal work have a display screen equipment (DSE) assessment carried out. 'Significant' is taken to be continuous/near continuous spells of an hour or more at a time
- Staff identified as DSE users are entitled to an eyesight test for DSE use upon request, and at regular intervals thereafter, by a qualified optician (and corrective glasses provided if required specifically for DSE use)

9 Lone working

Lone working may include:

- Late working
- Home or site visits
- Weekend working
- Caretaker duties
- Site cleaning duties
- Working in a single occupancy office

Potentially dangerous activities, such as those where there is a risk of falling from height, will not be undertaken when working alone. If there are any doubts about the task to be performed then the task will be postponed until other staff members are available.

If lone working is to be undertaken, a colleague, friend or family member will be informed about where the member of staff is and when they are likely to return.

The lone worker will ensure that they are medically fit to work alone.

10 Working at Height

We will ensure that work is properly planned, supervised and carried out by competent people with the skills, knowledge and experience to do the work.

In addition:

- The caretaker retains ladders for working at height
- Pupils are prohibited from using ladders
- Staff will wear appropriate footwear and clothing when using ladders
- Contractors are expected to provide their own ladders for working at height
- Before using a ladder, staff are expected to conduct a visual inspection to ensure its safety
- Access to high levels, such as roofs, is only permitted by trained persons

11 Manual Handling

It is up to individuals to determine whether they are fit to lift or move equipment and furniture. If an individual feels that to lift an item could result in injury or exacerbate an existing condition, they will ask for assistance.

The school will ensure that proper mechanical aids and lifting equipment are available in school, and that staff are trained in how to use them safely.

Staff and pupils are expected to use the following basic manual handling procedure:

- Plan the lift and assess the load. If it is awkward or heavy, use a mechanical aid, such as a trolley, or ask another person to help
- Take the more direct route that is clear from obstruction and is as flat as possible
- Ensure the area where you plan to offload the load is clear
- When lifting, bend your knees and keep your back straight, feet apart and angled out. Ensure the load is held close to the body and firmly. Lift smoothly and slowly and avoid twisting, stretching and reaching where practicable

12 Off-site visits

When taking pupils off the school premises, we will ensure that:

- Risk assessments will be completed where off-site visits and activities require them
- All off-site visits are appropriately staffed
- Staff will take a school mobile phone, a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details
- There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

- Please see Educational Visits policy for additional guidance

13 Lettings

This policy applies to lettings. Those who hire any aspect of the school site or any facilities will be made aware of the content of the school's health and safety policy, and will have responsibility for complying with it.

14 Violence at work

We believe that staff should not be in any danger at work, and will not tolerate violent or threatening behaviour towards our staff.

All staff will report any incidents of aggression or violence (or near misses) directed to themselves to their line manager/Head Teacher immediately. This applies to violence from pupils, visitors or other staff.

15 Smoking

Smoking is not permitted anywhere on the school premises or grounds.

16 Infection Prevention and Control

We follow national guidance published by Public Health England (PHE) when responding to infection control issues. We will encourage staff and pupils to follow this good hygiene practice, outlined below, where applicable.

Public Health (Control of Disease) Act 1984 amended in 2020 to include The Health Protection (Coronavirus) Regulation 2020

The school recognises that staff and pupils will suffer from various types of illness and infections. However, no-one knows exactly when the school will be faced with having to deal with a potentially contagious illness amongst its community and therefore, will work closely with The Health Protection Team (HPT) who have operational autonomy and provide government, local government, the NHS, Parliament, industry and public with evidence-based professional, scientific and delivery expertise and support.

16.1 Handwashing

- Wash hands with liquid soap and warm water, and dry with paper towels
- Always wash hands after using the toilet, before eating or handling food, and after handling animals
- Cover all cuts and abrasions with waterproof dressings

16.2 Coughing and sneezing

- Cover mouth and nose with a tissue
- Wash hands after using or disposing of tissues
- Spitting is discouraged

16.3 Personal protective equipment

- Wear disposable non-powdered vinyl or latex-free CE-marked gloves and disposable plastic aprons where there is a risk of splashing or contamination with blood/body fluids (for example, nappy or pad changing)
- Wear goggles if there is a risk of splashing to the face
- Use the correct personal protective equipment when handling cleaning chemicals

16.4 Cleaning of the environment

- Clean the environment frequently and thoroughly
- Clean the environment, including toys and equipment, frequently and thoroughly

16.5 Cleaning of blood and body fluid spillages

- Clean up all spillages of blood, faeces, saliva, vomit, nasal and eye discharges immediately and wear personal protective equipment
- When spillages occur, clean using a product that combines both a detergent and a disinfectant and use as per manufacturer's instructions. Ensure it is effective against bacteria and viruses and suitable for use on the affected surface
- Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below
- Make spillage kits available for blood spills

16.6 Laundry

- Wash laundry in a separate dedicated facility
- Wash soiled linen separately and at the hottest wash the fabric will tolerate
- Wear personal protective clothing when handling soiled linen
- Bag children's soiled clothing to be sent home, never rinse by hand

16.7 Clinical waste

- Always segregate domestic and clinical waste, in accordance with local policy
- Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins
- Remove clinical waste with a registered waste contractor
- Remove all clinical waste bags when they are two-thirds full and store in a dedicated, secure area while awaiting collection

16.8 Animals

- Wash hands before and after handling any animals
- Keep animals' living quarters clean and away from food areas
- Dispose of animal waste regularly, and keep litter boxes away from pupils
- Supervise pupils when playing with animals
- Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a pet

16.9 Pupils vulnerable to infection

Some medical conditions make pupils vulnerable to infections that would rarely be serious in most children. The school will normally have been made aware of such vulnerable children. These children are particularly vulnerable to chickenpox, measles or slapped cheek disease (parvovirus B19) and, if exposed to either of these, the parent/carer will be informed promptly and further medical advice sought. Advise these children to have additional immunisations, for example for pneumococcal and influenza.

16.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 4.

In the event of an epidemic/pandemic, we will follow advice from Public Health England about the appropriate course of action.

17 New and expectant mothers

Risk assessments will be carried out whenever any employee notifies the school that they are pregnant.

Appropriate measures will be put in place to control risks identified. Some specific risks are summarised below:

- Chickenpox can affect the pregnancy if a woman has not already had the infection. Expectant mothers should report exposure to antenatal carer and GP at any stage of exposure. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles
- If a pregnant woman comes into contact with measles or German measles (rubella), she should inform her antenatal carer and GP immediately to ensure investigation
- Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), the pregnant woman should inform her antenatal care and GP as this must be investigated promptly with advice followed

18 Occupational Stress

We are committed to promoting high levels of health and wellbeing and recognise the importance of identifying and reducing workplace stressors through risk assessment.

Systems are in place within the school for responding to individual concerns and monitoring staff workloads.

19 Accident Reporting

19.1 Accident record book

- An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. An accident form template can be found in appendix 2
- As much detail as possible will be supplied when reporting an accident
- Information about significant injuries will also be kept in the pupil's educational record or the member of staff's personnel file

- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of
- An overview of accidents will be prepared termly by the Head Teacher for the Buildings and Health and Safety Committee

19.2 Reporting to the Health and Safety Executive

The Head Teacher will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Head Teacher will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries. These are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding)
 - Any scalping requiring hospital treatment
 - Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days.
- Where an accident leads to someone being taken to hospital, however there is no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.
- Where something happens that does not result in an injury, but could have done.
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment.
 - The accidental release of a biological agent likely to cause severe human illness.
 - The accidental release or escape of any substance that may cause a serious injury or damage to health.
 - An electrical short circuit or overload causing a fire or explosion.

Information on how to make a RIDDOR report is available here: [How to make a RIDDOR report, HSE](http://www.hse.gov.uk/riddor/report.htm)
<http://www.hse.gov.uk/riddor/report.htm>

19.3 Notifying parents

The Head Teacher will inform parents of any significant accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

19.4 Reporting to Ofsted and child protection agencies

The Head Teacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident. The Head Teacher will also notify Social Services via Careline of any serious accident or injury to, or the death of, a pupil while in the school's care.

20 Slips, Trips and Falls

The school is committed to preventing or minimising the risk of slips, trips and falls to staff, service users and other stakeholders who visit or use Trust premises.

We aim to do this by:

- a) Providing a safe working environment which, as far as is reasonably practicable, is free from hazards that contribute to falls.
- b) Ensuring any slip and trip hazards are identified, reported and rectified.
- c) Ensuring, where deficiencies are identified, appropriate risk assessments and risk reduction action plans are in place to reduce falls and ensure the best practice principles are applied.

21 Training

Health and Safety at work training is included on our two year CPD cycle. All staff also are provided with health and safety training as part of their induction process. Staff who work in high risk environments are given additional health and safety training.

22 Monitoring

This policy will be reviewed by the Head Teacher every 2 years.
At every review, the policy will be approved by the Full Governing Body.

23 Links with other policies

This health and safety policy links to the following policies:

- First aid
- Risk assessment
- Supporting pupils with medical conditions
- Accessibility plan
- Educational Visits
- Emergency Management Plan
- Fire Strategy

FIRE DRILL

On hearing the fire alarm:-

*Immediately stand and **LISTEN TO YOUR TEACHER***

***Foundation Stage** - exit through double door to Early Years Foundation Stage (EYFS) Playground*

***Reception** - exit via the Reception cloakroom door onto EYFS Playground*

School Hall** - exit through the front door or conservatory cloak room. **LISTEN TO YOUR TEACHER FOR DIRECTION

***Years 1 & 2** - **WALK** to the exit through the front door*

***Year 3 & 4** - **WALK** to the exit via Year 3 external fire escape door*

***Years 5 & 6** - **WALK** to the exit down main staircase and front door*

***ICT** - exit down main staircase and front door*

***Learning Support** - exit down main staircase and front door*

***2nd Floor Resource** - exit onto first floor and down main stair case*

*When told **walk** in an orderly manner - **IN SILENCE** - following your teacher's instructions - to the assembly point on the **PLAYGROUND**.*

DO NOT RUN** - **REMAIN SILENT** - **LISTEN

***STAY IN LINE** - **UP IN SILENCE ON THE PLAYGROUND**.*

***ANSWER CLEARLY** when your name is called from the register.*

***Remain in your line** until the Head teacher, Deputy Head teacher, tell you it is time to move.*

LISTEN, WALK, STAY CALM

Appendix 2: Accident Report Form

Name of injured Person		Role/ Class
Date and Time of Incident		Location of incident
Incident details		
Describe in detail what happened, how it happened and what injuries the person incurred		
Action Taken		
Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.		
Follow-up action required		
Outline what steps the school will take to check on the injured person, and what it will do to reduce the risk of the incident happening again		
Name of person attending the incident	Signature	Date

Appendix 3: Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from [non-statutory guidance for schools and other childcare settings](#) from Public Health England (PHE).

Rashes and skin infections		
Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended.
Chickenpox	Until all vesicles have crusted over	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to chickenpox. Chickenpox can also affect pregnancy if a woman has not already had the infection.
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting.
German measles (rubella)*	Four days from onset of rash (as per " Green Book ")	Preventable by immunisation (MMR x2 doses). If a pregnant woman comes into contact with German measles she should inform her GP and antenatal carer immediately to ensure investigation.
Hand, foot and mouth	None	
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period.
Measles*	Four days from onset of rash	Preventable by immunisation (MMR x2 doses). Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to measles. Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed she should immediately inform whoever is giving antenatal care to ensure investigation.
Molluscum contagiosum	None	A self-limiting condition.
Ringworm	Exclusion not usually required	Treatment is required.
Roseola (infantum)	None	
Scabies	Child can return after first treatment	Household and close contacts require treatment.
Scarlet fever*	Child can return 24 hours after starting appropriate antibiotic treatment	Antibiotic treatment is recommended for the affected child.

Slapped cheek syndrome/fifth disease (parvovirus B19)	None (once rash has developed)	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to parvovirus B19. Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), inform whoever is giving antenatal care as this must be investigated promptly.
Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune, i.e. have not had chickenpox. It is spread by very close contact and touch. If further information is required, contact your local PHE centre. Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to shingles. Shingles can also affect pregnancy if a woman has not already had chickenpox.
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.
Diarrhoea and vomiting illness		
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting	
E. coli O157 VTEC Typhoid* [and paratyphoid*] (enteric fever) Shigella (dysentery)	Should be excluded for 48 hours from the last episode of diarrhoea. Further exclusion may be required for some children until they are no longer excreting	Further exclusion is required for children aged 5 years or younger and those who have difficulty in adhering to hygiene practices. Children in these categories should be excluded until there is evidence of microbiological clearance. This guidance may also apply to some contacts who may also require microbiological clearance. Please consult your local PHE centre for further advice
Cryptosporidiosis	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled
Respiratory infections		
Covid 19	10 days from first symptoms 14 days from contact with a positive person	Link to government guidance
Flu (influenza)	Until recovered	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.
Tuberculosis*	Always consult your local PHE centre	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.
Whooping cough*	Five days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local PHE centre will organise any contact tracing necessary.

Other infections		
Conjunctivitis	None	If an outbreak/cluster occurs, consult your local PHE centre.
Diphtheria*	Exclusion is essential. Always consult with your local HPT	Family contacts must be excluded until cleared to return by your local PHE centre. Preventable by vaccination. Your local PHE centre will organise any contact tracing necessary.
Glandular fever	None	
Head lice	None	Treatment is recommended only in cases where live lice have been seen.
Hepatitis A*	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)	In an outbreak of hepatitis A, your local PHE centre will advise on control measures.
Hepatitis B*, C*, HIV/AIDS	None	Hepatitis B and C and HIV are bloodborne viruses that are not infectious through casual contact. All spillages of blood should be cleaned up immediately (always wear PPE). When spillages occur, clean using a product that combines both a detergent and a disinfectant. Use as per manufacturer's instructions and ensure it is effective against bacteria and viruses and suitable for use on the affected surface. Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below. A spillage kit should be available for blood spills.
Meningococcal meningitis*/septicaemia*	Until recovered	Meningitis C is preventable by vaccination There is no reason to exclude siblings or other close contacts of a case. In case of an outbreak, it may be necessary to provide antibiotics with or without meningococcal vaccination to close school contacts. Your local PHE centre will advise on any action is needed.
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case. Your local PHE centre will give advice on any action needed.
Meningitis viral*	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case. Contact tracing is not required.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. If further information is required, contact your local PHE centre.
Mumps*	Exclude child for five days after onset of swelling	Preventable by vaccination
Threadworms	None	Treatment is recommended for the child and household contacts.
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic.

* denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control). In addition, organisations may be

required via locally agreed arrangements to inform their local PHE centre. Regulating bodies (for example, Ofsted/Commission for Social Care Inspection (CSCI)) may wish to be informed.