

Health and Safety Policy

The Grange Primary School



Approved by:	Draft
Date:	September 2023
Next review due by:	September 2025

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1. Statement of Intent

The Headteacher and Governors recognise that on behalf of the employer they have overall responsibility for certain aspects of the organisation and implementation of a Health and Safety Policy, and that key personnel in the management structure such as the Headteacher and the School Business Manager are identified and their health and safety roles defined within the area appropriate to their contract of employment. The duty to co-operate with the employer is recognised, the employer having responsibility for ensuring that at any given time, necessary detailed arrangements for safe working are drawn up, implemented and maintained

- The school recognises the importance of health, safety and welfare in the successful operation of its activities, and believes that the active participation of all members of staff is essential to maintain the highest practical standards of accident prevention.

- All activities will be conducted with due regard to all statutory requirements with appropriate safeguards being instituted to minimise the risk to the health and safety of our employees, pupils and all others who may be affected by our activities and operations.

- These aims will be achieved as far as is reasonably practical within the framework of the school's organisational structure and in accordance with the health and safety policy detailed herein.

- This policy will be brought to the attention of all employees, and will be subject to review and revision as necessary.

Headteacher

Signature: F Mawson (Acting Headteacher) Date: 16.09.23

Chair of Governors:

Signature: draft - policy to be approved in next Governor meeting Date: 19.10.23

2. Legislation

This policy is based on advice from the Department for Education on [health and safety in schools](#), guidance from the Health and Safety Executive (HSE) on [incident reporting 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

The school follows [national guidance published by UK Health Security Agency \(formerly Public Health England\)](#) and government guidance on [living with COVID-19](#) when responding to infection control issues.

Sections of this policy are also based on the [statutory framework for the Early Years Foundation Stage](#).

3. Roles and responsibilities

3.1 The local authority and governing board

North Lincolnshire Council has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the school's governing board.

The governing board delegates operational matters and day-to-day tasks to the headteacher and staff members.

3.1 The governing board

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

The governing board 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 board 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

The governor who oversees health and safety is Jamie Rowbotham (Acting Chair of Governors).

3.2 Headteacher

The Headteacher 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 board 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
- Ensure the contents of this policy are brought to the attention of all members of staff, and that all staff will be notified of any changes.
- All students, helpers etc. undertaking a placement at school will be asked to familiarise themselves with the School Handbook

In the Headteacher's absence, Francesca Mawson, Acting Head Teacher assumes the above day-to-day health and safety responsibilities.

3.3 Health and safety lead

The nominated health and safety lead is Emma Sands, Business Manager.

3.4 Staff

School staff have a duty to take care of pupils in the same way that a prudent parent/carer 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
- Any member of staff, regardless of their position or status, who is found to be deliberately or consistently negligent in the performance of their duty with relation to the school's Health and Safety Policy, will be subject to disciplinary action.

3.5 Pupils and parents/carers

Pupils and parents/carers 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.

On entry to school all parents/carers are asked to complete a Data Collection Sheet, and Medical Conditions form. The forms provide the school with any relevant information about health problems, family doctors and contact numbers, should their child have an accident or illness whilst at school.

Parent/carers to provide information regarding dietary requirements for their child. They will fill in the "Medical Diet: Request Form" and "Medical Diet: Supporting Evidence Form" provided by Chartwells the School Catering company.

Regular medicals, dental inspections, hearing and sight checks take place throughout the year. Parents are then given advice on any follow up treatment required at the local clinic, dentist, doctors etc.

In the event that any pupil is deliberately or consistently negligent with respect to the safety of themselves or others, the Headteacher and governors of the school shall at their discretion and following due consultation with the pupil's class teacher and/or parent/carers exercise their right to exclude that pupil from further participation in lessons if that pupil's continued participation is held to be a threat to the health and safety of themselves or others.

3.6 Supporting Children with Medical Needs in School

This school is aware and sympathetic to children with medical needs. This document is to clarify the circumstances under which medication will be administered by school staff.

- The school is committed to assisting pupils with long term or complex medical needs.
- Parents need to keep school fully informed about their child's medical needs and will need to work with the school to draw up a Health Care Plan for individual pupils where necessary.
- When deemed necessary for particular medical needs, staff will be offered relevant training by appropriate agencies and records will be kept of this training.
- **In an emergency, the emergency services will be called. In the unlikely event that this is not considered appropriate and the Head teacher or member of the Senior Leadership Team decide that they need to take the child to hospital themselves, another member of staff will accompany them.**
- When a doctor has prescribed medicine, and the child is fit to attend school, certain medicines may be administered with written prior agreement with the head teacher. These will be administered by the office staff IF THEY ARE PREPARED to accept the responsibility – **school staff cannot be ordered/authorised to administer medication by the Head teacher or any other person, the decision of a staff to administer any medication is at their own discretion.** If medicines are to be administered 3 times a day parents are advised to give this before school, after school and before bedtime. If NO STAFF is prepared to administer medication then parents (or any authorised adult) WILL HAVE TO come into school during the lunch break and give their child the medicine themselves. Before any medication is administered, an authorisation form is to be completed.
- Documentation exists to ensure a record is kept of all medicine administered
- Staff must not accept responsibility for the administration of medication to pupils unless a written request has been received beforehand from the parent or carer. All written requests must be sent to the school office.
- All medication is stored in the school office. Asthma inhalers are kept in the classrooms and may be kept with the child in order to be used as required. Children are encouraged to use them sensibly and only when needed. The school does not accept responsibility for any inhalers or other medication loss. They are also asked to have a spare inhaler at school which is kept in the office and sent home every half term for cleaning or renewing.
- Medicine, which has not been prescribed by a doctor, will not be allowed or administered in school. This includes cough mixture, throat sweets, aspirins etc.
- Children who are unwell are not able to participate and benefit from the range of learning and social activities in and out of school and therefore parents are asked to send their children only if they are fit and able to take part in school activities within the scope of their medical needs.

3.7 Contractors

Contractors will agree health and safety practices with the headteacher before starting work. Before work begins, the contractor will provide evidence that they have completed an adequate risk assessment of all their planned work.

4. Site security

It is the responsibility of the Headteacher in consultation with the Governing Body to ensure the security of the school building and grounds.

Shield Security are responsible for the security of the school site out of school hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems.

4.1 Visitors

- There are two entrances to the school site. The gates to the main entrance gates on Cornwall Road are controlled electronically. Automatic entry is programmed between 8:40am – 9:15am and 14:40pm – 15:15pm. Outside of these hours, access to the school is controlled by the office through the intercom system. The second entrance on Southfield Road is opened between 8:40am – 9:15am and 14:40pm – 15:15pm only and is locked outside of these hours.
- All visitors to the school must be clearly identifiable and their presence on the premises known and recorded on the InVentry System which is located in the entrance. Visitors will be required to wear the school's identification badge. Any unauthorised visitors should be reported immediately to the Headteacher, or Business Manager.
- All visitors must have a current DBS certificate if seeing children and will be given a blue visitor lanyard with identification badge. Those who have not shown a current DBS certificate will have a red visitor lanyard with identification badge.
- The school has an access control system in operation which requires the use of a fob. Visitors who have the use of a fob must sign to acknowledge receipt and return of the fob.
- All contractors, delivery persons, inspectors and other trades people will be expected to comply with the visitors section of the policy and its arrangements. In addition, all contractors and trades people involved in repair, maintenance or installation work, which involves the building, grounds or other facilities, will be asked to provide written or other evidence of their competence to complete such work. (See Section 3.7).

5. Fire

The Headteacher has overall responsibility for ensuring the statutory fire precautions in relation to Health and Safety at Work Act 1974 are adhered to. This will include formal certification, staff training and coordinating the actions of staff and pupils in the event of a fire. See Appendix 1

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 practiced at least once a term.

The fire alarm is a loud continuous bell.

Fire alarm testing will take place once a week.

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. These are the KS1 and KS2 Playgrounds
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day
- The 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.

The school has an Evac Chair. All staff training is up to date and the Evac Chair is maintained yearly by Evac+Chair International Limited.

6. 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

No product is to be used in school by the Caretaker/ Handyman, the contracted cleaning agency staff or any outside organisation without a Control of Substances Hazardous to Health (COSHH) risk assessment having been carried out on that product, and without a product information sheet being logged in this policy.

Our staff use and store hazardous products in accordance with manufacturer's instructions. All hazardous products are kept in their original containers, with clear labelling and product information.

If any hazardous products are used they are kept locked in an area where there is no pupil access.

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.

6.1 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 they have adequate ventilation

6.2 Legionella

- A water risk assessment is completed regularly, at least quarterly, by Acumen Solutions. Acumen Solutions is responsible for ensuring that the identified operational controls are conducted and recorded in the school's water log book
- This risk assessment will be reviewed when significant changes have occurred to the water system and/or building footprint
- The risks from legionella are mitigated by monthly temperature checks.

7. Equipment

All equipment and machinery is maintained in accordance with the manufacturer's instructions. In addition, maintenance schedules outline when extra checks should take place.

When new equipment is purchased, it is checked to ensure it meets appropriate educational standards.

All equipment is stored in the appropriate storage containers and areas. All containers are labelled with the correct hazard sign and contents.

7.1 Electrical equipment

- All staff are responsible for ensuring 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 North Lincolnshire Council Maintenance Services immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed
- Each item will be permanently marked with a unique identification number or identified by a manufacturer's serial number
- Only trained staff members can check plugs
- Where necessary, a portable appliance test (PAT) will be carried out by a competent person
- All isolator 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

7.2 PE 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 hall floor or other apparatus will be reported to Paul Toner, Handyman.
- All sports equipment is checked yearly and maintained by Sports and Playground Services UK Limited.

7.3 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)

7.4 Specialist equipment

Parents/carers are responsible for the maintenance and safety of their children's wheelchairs. In school, staff promote the responsible use of wheelchairs.

Oxygen cylinders, for specific medical needs are stored in a locked cupboard in the office. Staff are trained for these particular needs.

8. 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

9. Safety Around The School

9.1 Classroom Safety

- Children are encouraged at all times to move around the room responsibly and in such a way as to ensure their own safety and that of others. They are taught the correct and safe way to use and carry any tools or equipment that they may need for their work e.g. scissors.
- All classrooms are carpeted and have non-slip floors fitted in wet areas.
- Children have daily access to electrical equipment, e.g. Laptops, iPads, Chromebooks, all of which are used with circuit breaker plugs. All school electrical equipment is checked for safety in accordance with the current Health and Safety Regulations.

9.2 Safety in Corridors, Stairs, Cloakroom and Toilets

- Children are encouraged to walk sensibly on the left in the corridors and up and down the stairs, at all times.
- During transition periods children are supervised by an adult, e.g. in and out from playtime when several classes may be using the corridor/toilets at the same time.

9.3 Safety in the Hall for PE

In accordance with LA and National Guidelines for Physical Education:

- Children wear T shirts and shorts and have bare feet for movement if they do not have any plimsolls.

- **All** jewellery must be removed;
- Large apparatus work takes place in silence to ensure the safety of our children
- Mats are only used on certain pieces of apparatus to enable safe dismounts and not to create a false sense of security.

9.4 Safety in the Hall for Dinner time

Our children adhere to a strict set of rules:

- We wait sensibly in the dinner queue
- We are polite to the servers
- We say please and thank you
- We listen to the lunchtime supervisors and do as we are asked
- We sit properly
- We don't speak with our mouths full
- We use our knife and fork
- We finish our food before we stand up
- We talk quietly and only to the people on our table
- We pick up any food we drop

9.5 Science Lessons

- Hazards associated with working with a range of materials will be reduced to an acceptable level recognising that many of the tools and materials used by the pupils and staff can be found in many domestic environments.
- All staff will be given relevant medical/emergency information on those pupils who are likely to suffer allergic reaction to any of the materials or processes used in these areas.
- Staff will make sure each pupil is physically fit for any activity or experiment they may undertake.
- Staff will avoid situations that could result in stress to pupils.
- The class teacher will make sure that children know how to use the tools/equipment available to them and that they keep the working areas tidy. Where appropriate, pupils will be required to wear the provided personal protective equipment (P.P.E.)
- The school will monitor the safe working practices of pupils and staff.

The following tools, materials and processes are considered by the Headteacher to have the potential to cause injury. Appropriate risk assessments will determine in each case safe working procedures. All activities will be monitored accordingly:

- Craft knives- These will not be allowed to be used by any pupils, not even under close teacher supervision
- Disposable Scalpels- To only be used for dissection and will be used under close teacher supervision, then disposed of in clinical waste bags
- Low melt glue guns- These will only be used under teacher supervision by responsible pupils.
- Hot melt glue guns- These are potentially more dangerous and will therefore only be used by teachers.
- Super glues- These will not be used by pupils
- Power Hand tools- These will not be used by pupils.
- Wood/plastic/metal/clay/modelling materials- All materials used will be checked for suitability.
- Pupils involved in activities which produce excessive quantities of dust/particles/chippings will be required to wear face masks and goggles.

- When working with wire, face masks or goggles will be provided. When working with thin sheet metals, rough wood and certain other materials, gloves will be provided.
- Food preparation equipment- This should be carefully stored in a secure cupboard. Strictest hygiene procedures will be followed at all times
- Cookers and microwave ovens- These will only be used under teacher supervision. Cookers and microwave ovens will be sited and maintained as per manufacturer's instructions.
- Hot oil and boiling sugar- These will not be used by pupils. All heating activities will only take place as teacher demonstration activities.
- Personal Hygiene when working with food- All pupils will be taught the need for personal hygiene
- Chemicals- Before using any chemicals or process involving hazardous substances, staff will refer to the appropriate C.O.S.H.H. data sheets (see Section 6). Chemicals will not be stored in any container other than that in which they were supplied. Mains electricity- This will not be used by pupils.
- Battery power- Pupils will be taught to use batteries correctly and know the differences between mains and battery power.
- Caring for animals- Before any animal is kept in the School, reference will be made to appropriate documentation (See Section 13.9) and the R.S.P.C.A.
- Plants, fruits and seed- Staff will ensure that any plant, fruit or seed used in an activity is safe
- Micro-organisms- Staff will refer to appropriate documentation before undertaking activities involving micro-organisms.

9.6 Outdoor Activities

- Pupils will be adequately supervised at all times when working 'out of doors' P.E. Activities.
- Only those staff who have been appropriately trained will offer pupils the full range of activities.
- Staff will check that all equipment is in a safe working condition before engaging pupils in P.E. activities.
- Staff will check that individual pupils are physically and medically able to participate before engaging pupils in P.E. activities.
- All P.E. equipment will be stored in such a way so as to reduce any potential hazards that may occur from pupils gaining unauthorised access.
- The P.E. stores will be arranged in such a way as to minimise possible manual handling injuries and be kept in a safe and tidy manner. Care will be taken to ensure that any access/egress routes are kept clear.
- All P.E. equipment will be checked regularly, and any defective equipment removed from service until maintenance has been completed.

9.7 Safety in the Playground

- Children will not be allowed to be unsupervised before school, during morning or lunchtime.
- At playtimes members of the teaching and non-teaching staff are on duty. Details of the Staff Playground Rota are displayed on the Staff Notice Board. At Lunchtimes the children are supervised by the Lunchtime Supervisors.
- Accidents that occur outside are dealt with by the Teaching staff on duty (at playtimes) and the Lunchtime Supervisors (at Lunchtime). They are referred to the nominated first aiders where necessary.
- At the end of playtime, a whistle is blown instruct the children that playtime is over and to stand still. The children then line up in the playground in class lines. Each class is then collected by their teacher and taken back to the classroom.

The school has a set of 4 Rules displayed in school, which the children follow:

- Be **SAFE**
- Be **HAPPY**

- Be **RESPECTED**
- **LEARN**

10. Off-site visits

10.1 General 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, an appropriate portable first aid kit, information about the specific medical needs of pupils, along with the parents/carers' contact details
- For trips and visits with pupils in the Early Years Foundation Stage, there will always be at least one first aider with a current paediatric first aid certificate
- For other trips, there will always be at least one first aider on school trips and visits; and any medication and first aid forms are taken
- Staff must be aware of implementation the procedures for out of school visits laid down by the LA (see LA Guidelines for out of school visits available from the Headteacher and the School Business Manager)

10.2 Swimming Lessons

- Swimming lessons will only take place at pools with adequate lifesaving personnel and facilities. All staff instructors delivering practical lessons at the swimming pool used by the school will hold the appropriate qualifications. As a minimum at least one person will hold an appropriate lifesaving proficiency certificate and resuscitator, pole and ropes will be readily available. The location of an alarm and telephone will be noted.
- To ensure the safety of pupils during swimming lessons, The Pods will provide trained observers, capable of recognising and reacting immediately to any situation which they feel constitutes a danger to the well-being of any pupil. The observer must not be the instructor; however, he or she can be life saver or resuscitator.
- Before any swimming takes place, teaching staff, supervisors, observers and pupils must be aware of what to do in an emergency. All accompanying staff must have appropriate accreditation. At regular intervals this emergency procedure must be practiced.
- When pools are being used by more than one school, standardised emergency procedures must be established and practiced at regular intervals.
- All observers must be in position before pupils enter the pool and throughout their swimming session. Observers must take account of any reflected glare. This may necessitate the observer moving around the pool side.

11. 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/ Headteacher immediately. This applies to violence from pupils, visitors or other staff.

12. Smoking

Smoking is not permitted anywhere on the school premises.

13. Infection prevention and control

We follow national guidance published by the UK Health Security Agency when responding to infection control issues. We will encourage staff and pupils to follow this good hygiene practice, outlined below, where applicable.

13.1 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

13.2 Coughing and sneezing

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

13.3 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
- Use personal protective equipment (PPE) to control the spread of infectious diseases where required or recommended by government guidance and/or a risk assessment

13.4 Cleaning of the environment

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

13.5 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

13.6 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

13.7 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
- Correct disposal of needles for diabetic use in a sharps bin. The sharps bin is kept in a safe place out of sight and reach of children when it is not being used.

13.8 Animals

- Wash hands before and after handling any animals
- Keep animals' living quarters clean and away from food areas
- If hatching chicks make sure appropriate risk assessment is done and provided for by the company
- Dispose of animal waste regularly, and keep litter boxes away from pupils
- Supervise pupils when playing with animals, or reading to the therapy dog

13.9 Infectious disease management

We will ensure adequate risk reduction measures are in place to manage the spread of acute respiratory diseases, including COVID-19, and carry out appropriate risk assessments, reviewing them regularly and monitoring whether any measures in place are working effectively.

We will follow local and national guidance on the use of control measures including:

Following good hygiene practices

- We will encourage all staff and pupils to regularly wash their hands with soap and water or hand sanitiser, and follow recommended practices for respiratory hygiene. Where required, we will provide appropriate personal protective equipment (PPE)

Implementing an appropriate cleaning regime

- We will regularly clean equipment and rooms, and ensure surfaces that are frequently touched are cleaned everyday

Keeping rooms well ventilated

- We will use risk assessments to identify rooms or areas with poor ventilation and put measures in place to improve airflow, including opening external windows, opening internal doors and mechanical ventilation

13.10 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 any of these, the parent/carer will be informed promptly and further medical advice sought. We will advise these children to have additional immunisations, for example for pneumococcal and influenza.

13.11 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by the UK Health Security Agency and other government guidance, summarised in appendix 2.

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

14. 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 an 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
- Some pregnant women will be at greater risk of severe illness from COVID-19

15. 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.

16. First Aid and Accident reporting

The person responsible for First Aid, Injuries and Dangerous Occurrences will ensure that provisions conform to the Health and Safety (First Aid) regulations 1981 and the revised approved code of practice issued by the H.S.E. in 1990.

The person responsible for First Aid will ensure that first aid boxes are available and stocked with approved standard items. The First Aid Box is located in the Medical Room. Travel First Aid kits for use on Out of School Visits are kept in the Medical Room.

16.1 Accident record book

- The first aid stock is located in the medical room cupboard. All injuries must be recorded on the accident log book as soon as the injury has occurred.
- The accident log books are kept in the medical room cupboard. New ones are obtained from the office. Documentation for LA accident reporting is kept in the main school office.
- As much detail as possible will be supplied when reporting an accident
- Information about injuries will also be kept in the pupil's educational record
- 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.
- The Head teacher is responsible for conforming to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1985. (R.I.D.D.O.R.)

16.2 In the Event of an Accident

- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in ac
- As all circumstances involving accidents are very different it is impossible to give a detailed plan of action in the event of an accident. The following is intended to be a guideline only.
- Minor playground cuts and bruises are dealt with by staff on duty in the playground and referred to the first aiders where necessary. All injuries **must** be recorded on an Accident Book.
- Do not attempt to move anyone who could be injured until a first aid assessment can be made.
- If the accident occurs during a P.E. lesson (in particular, Large Apparatus), the teacher should move swiftly to the injured child while giving instructions to the rest of the class to stop work. An emergency message should be sent to the Office for assistance.
- If the accident occurs elsewhere on school premises the action will be the same but with the other children being sent to another part of the playground/room while the member of staff deals with the injured child.
- The Headteacher/Head of School or Head of Pastoral Care and Inclusion should be informed immediately of any accident with any serious implications e.g.
 - A sprain
 - A possible fracture
 - A bump to the head
 - Any major loss of blood

16.3 Notifying parents/carers

- The teacher or first aider will inform parents/carers of any accident or injury sustained by a pupil in the Early Years Foundation Stage, and any first aid treatment given, on the same day, or as soon as reasonably practicable.
- All medical incidents such as fainting and epileptic seizure will be recorded. In all cases parents/carers will be informed and asked to collect their child.
- The office must be informed about any child who bumps his/her head so that parents/carers can be notified by the text messaging system. Children should be given a letter to take home too, giving guidance on how to monitor the child.
- Pupils Home addresses and telephone numbers are kept on file in the office. Emergency numbers are also listed. Staff home addresses and telephone numbers are kept in the Stock cupboard along with emergency numbers as well as on the school's information management system.

16.4 Reporting to the Health and Safety Executive

The Business Manager 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 Business Manager will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within 10 days.

School staff: reportable injuries, diseases or dangerous occurrences

These include:

- Death

- Specified injuries, which 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) which:
 - Covers more than 10% of the whole body's total surface area; or
 - Causes significant damage to the eyes, respiratory system or other vital organs
 - Any scalding 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
- Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the Business Manager will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
 - Carpal tunnel syndrome
 - Severe cramp of the hand or forearm
 - Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
 - Hand-arm vibration syndrome
 - Occupational asthma, e.g. from wood dust
 - Tendonitis or tenosynovitis of the hand or forearm
 - Any occupational cancer
 - Any disease attributed to an occupational exposure to a biological agent
- 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

Pupils and other people who are not at work (e.g. visitors): reportable injuries, diseases or dangerous occurrences

These include:

- Death of a person that arose from, or was in connection with, a work activity*
- An injury that arose from, or was in connection with, a work activity* and the person is taken directly from the scene of the accident to hospital for treatment

*An accident "arises out of" or is "connected with a work activity" if it was caused by:

- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip)

- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors)

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>

16.5 Reporting to child protection agencies

The Safeguarding Lead, or Deputy Safeguarding Lead will notify relevant Local Child Protection agencies of any serious accident or injury to, or the death of, a pupil in the Early Years Foundation Stage while in the school's care.

16.6 Reporting to Ofsted

The Business Manager will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil in the Early Years Foundation Stage while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

17. Training

Our staff are provided with health and safety training as part of their induction process.

Staff who work with pupils with special educational needs (SEN), are given additional health and safety training.

18. Monitoring

This policy will be reviewed by the Larissa Thorpe, Head Teacher, every 2 years.

At every review, the policy will be approved by Larissa Thorpe, Head Teacher.

19. Links with other policies

This health and safety policy links to the following policies:

- First aid
- Risk assessment
- Accessibility plan
- Remote learning
- Emergency or critical incident plan

Appendix 1.Risk Assessment- Regulatory Reform (Fire Safety) Order 2005

Fire Emergency Procedures

In the event of a FIRE emergency the following procedures should be adhered to:

- Teachers should take the pupils to the nearest available exit in an orderly manner. Children should be lined up at the assembly point.
- Learning Assistants should assist the Teachers, check the area and close any windows and doors.
- The Business Manager will ring the Fire Brigade and leave the building and proceed to **Assembly Point 2**. Mrs Sands will take a walkie talkie, print out from the Entry Sign System, the contact forms and Fire Health and Safety Manual with her.
- A member of the administrative team will go to **Assembly Point 1** will go straight to the assembly point with the class registers for F1 and F2 with a walkie talkie to communicate with **Assembly Point 2**
- All remaining of the administrative team will proceed to **Assembly Point 2** with the class registers for KS1 and KS2 and distribute them as soon as possible.
- The Headteacher will coordinate at the **Assembly Point 2**, ensuring that all persons are accounted for.
- The Cook will be responsible for the kitchen and the kitchen staff.
- All members of staff will ask any visitors to leave the premises.
- All authority will be delegated to the Chief Fire Officer upon their arrival.
- No person will re-enter the building until the Chief Fire Officer gives their permission.

Summary

A member of the Administrative staff will bring a copy of the class registers, and a record of visitors for checking. Children should remain in class lines until they have all been checked against the register and classes have been dismissed by the Headteacher. Teaching staff will also account for the ancillary staff and volunteers working in their classroom. All visitors will be asked to leave the premises along with the rest of the school.

When the premises have been pronounced safe, instructions will be given by the Head teacher regarding re-occupation.

Procedures for when pupils are NOT in class (except lunchtimes, see below)

Should the alarm be raised during playtimes, assemblies or clubs all staff will go to where the main group of their class will be. Whistles will be blown and children will line up in class lines before being escorted by their class supervisor (or class teacher if present) to the main assembly point in the large playground. All other procedures will remain as previously described.

Lunchtime Fire Procedures

- Whistles will be blown as detailed in the above paragraph and children will line up in class lines. Lunchtime supervisors will exit the children from the hall using main entrance and assemble them in their class lines at the Fire Assembly Point. During wet lunchtimes (when children are in the classrooms) the Lunchtime Supervisors will exit with the children (as per procedures for when children are in class as

detailed above) and assemble at the Fire Assembly Point. Staff should go straight to the fire assembly point.

- The School Business Manager will take the InVentry record, contact forms and Health and Safety manual to the fire assembly point.
- The Admin Officer will take the Registers, First Aid Box to the fire assembly point.
- The kitchen and office staff will evacuate using the nearest exit and assemble on the large playground.
- Any children in lunchtime clubs or working in classrooms with staff will be led out to join the other children at the Fire Assembly Point.

Catering, Cleaning and Caretaking Staff

The Cook-in-Charge and Caretaker will ensure that the catering and cleaning staff are aware of the evacuation procedures. **Catering, Cleaning and Catering staff** should assemble on the large playground. The Cook-in-Charge will account for the staff he/she is responsible for and report to the member of the School Business Manager.

Evacuation Drills will be arranged each term and the Business Manager/Site Supervisor will check the Alarms on a weekly basis.

The persons nominated to act as competent for supervising evacuation are the Headteacher, Deputy Headteacher, School Business Manager, and Fire Wardens (if the school has these).

Any fire incidents will be reported to the LA using the appropriate form.

Bomb Procedures/Emergency Evacuation

Any suspicious package found in the school or the school grounds should be reported immediately to the Head teacher and the building will be evacuated as if for a fire.

No-one must re-enter the building unless given permission to do so by the Chief Fire Officer, or in the case of a small fire dealt with by staff, the Head teacher.

Appendix 2. 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 the UK Health Security Agency. For each of these infections or complaints, there [is further information in the guidance on the symptoms, how it spreads and some 'dos and don'ts' to follow that you can check](#).

In confirmed cases of infectious disease, including COVID-19, we will follow the recommended self-isolation period based on government guidance.

Infection or complaint	Recommended period to be kept away from school or nursery
Athlete's foot	None.
Campylobacter	Until 48 hours after symptoms have stopped.
Chicken pox (shingles)	<p>Cases of chickenpox are generally infectious from 2 days before the rash appears to 5 days after the onset of rash. Although the usual exclusion period is 5 days, all lesions should be crusted over before children return to nursery or school.</p> <p>A person with shingles is infectious to those who have not had chickenpox and should be excluded from school if the rash is weeping and cannot be covered or until the rash is dry and crusted over.</p>
Cold sores	None.
Respiratory infections including coronavirus (COVID-19)	<p>Children and young people should not attend if they have a high temperature and are unwell.</p> <p>Anyone with a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.</p>
Rubella (German measles)	5 days from appearance of the rash.
Hand, foot and mouth	Children are safe to return to school or nursery as soon as they are feeling better, there is no need to stay off until the blisters have all healed.
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
Measles	Cases are infectious from 4 days before onset of rash to 4 days after, so it is important to ensure cases are excluded from school during this period.
Ringworm	Exclusion not needed once treatment has started.
Scabies	The infected child or staff member should be excluded until after the first treatment has been carried out.
Scarlet fever	Children can return to school 24 hours after commencing appropriate antibiotic treatment. If no antibiotics have been administered, the person will be infectious for 2 to 3 weeks. If there is an outbreak of scarlet fever at the school or nursery, the health protection team will assist with letters and a factsheet to send to parents or carers and staff.

Slapped cheek syndrome, Parvovirus B19, Fifth's disease	None (not infectious by the time the rash has developed).
Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
Diarrhoea and/or vomiting (Gastroenteritis)	Children and adults with diarrhoea or vomiting should be excluded until 48 hours after symptoms have stopped and they are well enough to return. If medication is prescribed, ensure that the full course is completed and there is no further diarrhoea or vomiting for 48 hours after the course is completed. For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health adviser or environmental health officer will advise. If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.
Cryptosporidiosis	Until 48 hours after symptoms have stopped.
E. coli (verocytotoxigenic or VTEC)	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
Food poisoning	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
Salmonella	Until 48 hours after symptoms have stopped.
Typhoid and Paratyphoid fever	Seek advice from environmental health officers or the local health protection team.
Flu (influenza)	Until recovered.
Tuberculosis (TB)	Pupils and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. Pupils and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.
Whooping cough (pertussis)	A child or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so, or 21 days from onset of illness if no antibiotic treatment.
Conjunctivitis	None.
Giardia	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).

Head lice	None.
Hepatitis A	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older children with good hygiene who will have been much more infectious prior to diagnosis.
Hepatitis B	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
Hepatitis C	None.
Meningococcal meningitis/ septicaemia	If the child has been treated and has recovered, they can return to school.
Meningitis	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
Meningitis viral	None.
MRSA (meticillin resistant Staphylococcus aureus)	None.
Mumps	5 days after onset of swelling (if well).
Threadworm	None.
Rotavirus	Until 48 hours after symptoms have subsided.