

Policy on Health and Safety



Next review: Spring 2024

Bussage Primary School is a Church of England Voluntary Aided Primary School and this policy is written within the context of the Christian faith, practice and values which underpin our ethos, and which are in keeping with our Trust Deed.

Our school's Christian ethos is that all pupils, whatever their ability or talents, are created in the image of God, and are loved equally by him.

Our school's mission is to provide a learning and development environment in which all pupils and staff can make the most of their God given potential and aspire to "be the best that they can be".

Our school vision is built upon the four cornerstones of WISDOM, HOPE, COMMUNITY and DIGNITY.

Statutory	Yes	Delegation and Review	
Web-Site	Optional	Max. Permitted	Committee
Owner	Resources (Prem)	Determined	Committee
Principle Author	Resources (Prem)	Review	Governors decide
Committee	Resources (Prem)	Frequency	3 Years

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1. Aims

The Governing Body accepts that it has responsibility to take all necessary and reasonable practicable steps to secure the health of pupils, staff and others using the school premises or participating in school sponsored activities.

Our school aims to:

- Provide and maintain a safe and healthy environment for staff, pupils and visitors
- Establish and maintain safe working procedures amongst staff, pupils and all visitors to the school site
- Provide a framework for responding to an incident and recording and reporting the outcomes
- Ensure that the premises and equipment are maintained safely, and are regularly inspected

2. 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,
- [The Provision and Use of Work Equipment Regulations 1998](#), which place duties on people and companies who own, operate or have control over work equipment. PUWER also places responsibilities on organisations whose employees use work equipment, whether owned by them or not.
- [The Personal Protective Equipment at Work Regulations 1992](#), which is enforced by the Personal Protective Equipment (Enforcement) Regulations 2018.
- [2012 Control of Asbestos Regulations](#), which set out the framework for controlling exposure to asbestos and managing asbestos in buildings.
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records

- [The School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils
- [The Health and Safety \(First Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel

The school follows [national guidance published by Public Health England](#) 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 governing board

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

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 Mr M. Symons.

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, and ensuring they hold appropriate, in date qualifications and remain competent to perform their H&S duties
- 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

In the headteacher's absence, the Deputy 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 the head teacher, Mr A Ferguson.

3.4 Appointed Person(s)

The Appointed Person (First Aid) is Mr S Mills, who is responsible for

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, replenishing the contents of these kits and ensuring they are in date
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

3.5 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

3.6 Volunteer and Parent Helpers

Volunteer and Parent Helpers are provided with information and guidance which includes health and safety, fire and emergency procedures etc. Volunteer and Parent Helpers are directly accountable to the teacher in charge whilst on the school site or supporting an off-site activity.

3.7 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.

3.8 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 in a risk and method statement (RAMS).

GENERAL ARRANGEMENTS

4. Site security

The School Business Manager 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 code for the intruder alarm will be changed at the beginning of each academic year and immediately if it believed the code may have been compromised.

The School Business Manager is responsible for managing the key register. Keys are to be signed out by the recipient and signed back in by the school business manager. A physical audit of the key register is to be conducted annually

The Head Teacher and School Business Manager are key holders and will respond to an out-of-hours emergency.

4.1 Lockdown procedure

The lockdown procedure specifies the actions to be taken if there is an imminent risk to the staff and children. The current procedure is listed at Appendix 1; although as an operational procedure can be revised at the discretion of the head teacher without requirement for further approval.

5. Fire

As stated above, the School Business Manager is responsible the fire alarm systems. Details of Bussage Primary School's Fire Safety Management and Procedures is contained with the [Policy on Fire Safety](#).

6. First Aid

The requirements for the management of First Aid with the school are embedded within the wider remit of this policy. The head teacher will regularly review the school's first aid needs (at least annually), and particularly after any changes, to ensure the provision is adequate. First aid provision must be available at all times while people are on school premises, and also off the premises whilst on school visits. Specific procedures are listed in Appendix 2.

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 the school business manager and circulated to all employees who work with hazardous substances. Staff will also be provided with personal protective equipment PPE, where necessary, which they must use.

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.

All COSHH substances are to be stored in the COSHH cabinet.

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 in accordance with the requirements of The Gas Safety (Installation and Use) Regulations 1998, the manufacturers' guidance and guidance received within inspection reports. Gas appliances are to be serviced at least annually.
- All rooms with gas appliances are checked to ensure that they have adequate ventilation

7.2 Legionella

An appropriate water hygiene management plan is in place to control the risk of legionellosis to anyone on site.

- A water risk assessment has been conducted and will be reviewed every two years, or following a related issue or when significant changes have occurred to the water system and/or building footprint. The School Business Manager is responsible for ensuring that the identified operational controls are conducted and recorded in the school's water log book
- The risks from legionella are mitigated by the operational checks, maintenance tasks and management processes listed in Appendix A – Routine Control Measures – to the school's legionella risk assessment.

7.3 Asbestos

- An asbestos site survey has been conducted, and a risk management plan with risk assessments produced
- Asbestos in locations where it might be disturbed is condition monitored at a frequency based upon the assessment of risk and not less than annually
- Staff are briefed on the hazards of asbestos, the location of any asbestos in the school and the action to take if they suspect they have disturbed it
- Arrangements are in place to ensure that contractors are made aware of any asbestos on the premises and that it is not disturbed by their work
- Contractors will be advised that if they discover material which they suspect could be asbestos, they will stop work immediately until the area is declared safe
- A record is kept of the location of asbestos that has been found on the school site in the school office (See template at Appendix 4)

8. 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 that 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
- The fixed wiring will be subject to inspection by competent person every 5 years. Any remedial actions arising from that inspection will be progressed on a prioritised basis [note inspection reports will contain a priority C1, C2, C3]

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 (such as defects) 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

- All portable electrical equipment will be subject to a portable appliance test (PAT) annually, which will be conducted 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

- PE equipment will be subject to annual inspection by a competent person, and damaged equipment will be taken out of use.
- The use of PE equipment is risk assessed. Pupils may carry and set up PE equipment where that risk assessment deems it appropriate and pupils will be taught how to do so safely and supervised appropriately.
- Any concerns about the condition of the gym floor or other apparatus will be reported to the Head Teacher or the Deputy Head Teacher and the PE Coordinator (Miss Sullivan)

8.3 Display screen equipment

- The Health and Safety (Display Screen Equipment) Regulations apply to workers who use DSE daily, for an hour or more at a time. All such staff will have a display screen equipment (DSE) assessment carried out.
- Staff identified as DSE users are entitled to a free eyesight test for DSE use upon request, and at regular intervals thereafter, by a qualified optician (and a contribution to the cost of corrective glasses provided if required specifically for DSE use)

8.4 Pupil's specialist equipment

Parents are responsible for the maintenance and safety of their children's mobility and specialist equipment. In school, staff will promote the responsible use of such equipment when it is present in school.

Individual risk assessments will be conducted for specialist equipment, and training and other mitigations implemented.

9. Vehicles on site

Car parking is provided for staff and visitors only, including a designated disabled space. There is appropriate access for emergency vehicles which must never be blocked. The site speed limit is 5mph.

Parents are to be reminded annually via newsletter of this rule, and of the need to exercise extreme care when collecting and dropping off children on the school roundabout.

During special events where other vehicles are permitted on site, (eg PTA events), separation between people and vehicles must be maintained and supervised using marshals as required.

10. Lone working

Lone working may include:

- Late working
- Home or site visits
- Weekend working

- Site manager 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.

11. 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 and step-ladders for working at height
- Pupils are prohibited from using any ladders
- Staff will wear appropriate footwear and clothing when using ladders and step-ladders
- Contractors are expected to provide their own ladders for working at height
- The caretaker (or school business manager in their absence) will retain a ladder log (schedule of ladders and stepladders) and conduct recorded physical condition inspections every 6 months
- 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

12. Manual handling

A risk assessment is in place for the routine movement and lifting of items. For the occasional, light lifting, the basic manual handling procedure is to be applied. **Within the bounds of these constraints**, it is up to individuals to determine whether they are then 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

13. Off-site visits

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

- Risk assessments will be completed for off-site visits and activities

- All off-site visits are staffed in accordance with the GCC SHE OV manual guidance
- Staff will take a school mobile phone Fully charged and with charging cable), a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details
- A record will be kept of those pupils who attended the visit
- 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

14. 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 the relevant sections of it.

15. 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.

16. Smoking

Smoking, vaping and the use of e-cigarettes is not permitted anywhere on the school premises, including in the grounds, at any time, including public events.

17. Infection prevention and control

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

17.1 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

17.2 Coughing and sneezing

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

17.3 Personal protective equipment

- PPE is to be worn as determined by the CoSHH risk assessments and or identified on the substance's packaging
- 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

17.4 Cleaning of the environment

- Clean the environment, including toys and equipment, thoroughly in accordance with the risk assessment / cleaning regime

17.5 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
- The school will make available spillage kits for blood spills

17.6 Laundry

- Wear personal protective clothing when handling soiled linen
- Bag children's soiled clothing to be sent home, never rinse by hand

17.7 Clinical waste

- Always segregate domestic and clinical waste, in accordance with this policy
- Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins
- The School Business manager is to remove all clinical waste bags when they are two-thirds full and store in a safe, dedicated, secure area (the boiler room) while awaiting collection.
- Clinical waste will be removed from site by a registered waste contractor, Citron Ltd, coordinated by the school business manager.

17.8 Animals

There must be a risk assessment in place in advance for all animals attending the site. Therapy and assistance animals, as well as working animals are permitted on the premises with the prior permission of the head teacher. The owners of all such animals are to ensure the animal is insured with a policy that covers third parties. Owners will be liable for any injury or damaged caused. The school may also have class / school animals (eg tortoise / chicks) under the control of the school, for which there will be a separate risk assessment.

Other animals are not routinely permitted on the premises. An exception to this is during PTA events or similar, where animals are permitted onto the grounds but not within any building. For such events, the animal is to be kept in direct control at all times (ie, on a lead) and not left unattended at any time. The owner is responsible and liable for the animal at all times; must clean up after the animal; and must remove the animal from site immediately if instructed by a member of the school staff or an organiser of the event. These terms are to be made clear to anyone attending the event.

Where animals are present:

- 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

17.9 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. We will advise these children to have additional immunisations, for example for pneumococcal and influenza.

17.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in Appendix 5.

In the event of an epidemic/pandemic, we will follow advice from Public Health England and subsequently The National Institute for Health Protection about the appropriate course of action.

18. 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:

- Low blood pressure and the increased risk of fainting
- Constraints in manual handling
- 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

19. 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.

Stress is recognised as being strongly associated with the teaching profession. All staff members should be aware of the symptoms of stress so that if they feel that they are being adversely affected by stress they should come at once and talk to a senior member of staff. If staff feel that a colleague is exhibiting symptoms of stress, they should bring this discreetly to the notice of a senior member of staff.

The school buys into the Health and Wellbeing Hub as part of our staff insurance through The Education Broker. A confidential helpline is available for all staff and their families: the number is **0800 030 5182**. There is also a website www.healthassuredeap.com; the current login and password are communicated to all staff individually on an annual basis, and available from the school business manager and head teacher.

The Health and Wellbeing Hub provides a range of services that are offered to support all the school's staff. This includes health checks for all of insured staff members, which consist of a visit from a registered nurse or qualified health technician to our school to perform a variety of checks on insured staff.

20. Accident reporting

20.1 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 report template can be found at Appendix 3
- 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.

20.2 Reporting to the Health and Safety Executive

The school 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 school business manager 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
- 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 – <http://www.hse.gov.uk/riddor/report.htm>

20.3 Notifying parents

The class teacher, teaching assistant or school business manager will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable. Foundation Stage parents and those with children in Key Stage 1 also receive a 'Mr Bump' note to take home for any minor accidents.

20.4 Reporting child protection agencies

The head teacher will notify the Gloucestershire Safeguarding Children's Executive 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.

20.5 Reporting to Ofsted

The head teacher 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.

21. Alcohol and Drugs

In accordance with the guidelines issued by both the LEA and the Diocese no persons is to be at work if they are under the influence of either alcohol or drugs.

22. Training

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

Staff who work in high-risk environments, such as in science labs or with woodwork equipment, or work with pupils with special educational needs (SEN), are given additional health & safety training.

23. Monitoring

This policy will be reviewed by the head teacher every three years.

At every review, the policy will be approved by The Resources Committee.

24. Links with other policies

This health and safety policy links to the following policies:

- Policy on Fire Safety
- Risk assessment
- Supporting pupils with medical conditions
- Accessibility plan

Appendix 1. Lockdown Procedures

- In the event of an emergency a signal of a pulsing bell (e.g three short, three long, three short intermittent bells (SOS)) will be rung continuously.
- This means the school will carry out the lockdown procedure
- Staff will ensure that all pupils are inside the school buildings
- If children are outside, staff will bring them back into their classrooms
- All outside doors will be locked and all windows closed that may be open
- The registers will be taken and any child/adult not present will be notified to the head/teacher in charge and office staff. Who, via the internal phones, will arrange for a search for the missing child/adult.
- Staff will ensure all outside doors are locked and all key-pad doors have the key pads engaged
- In the event of the need to call emergency services the head/teacher in charge and office staff will dial 999 and request the emergency service required. If there is any doubt, it is better to call twice than to assume the call has been made by someone else.
- The all-clear signal will be given by the head/teacher in charge and /or office staff in person to each class
- A parent mail message will be sent to advise parents/carers of the emergency.
- If we are still under a warning at 3.15 the children will only be released from school front door to their parents or a nominated representative. Any children that are not collected will be taken to the hall and be supervised until parents come to collect them and take them home. It is unlikely that parents will be required before the usual end of day.

Appendix 2. First Aid Procedures

A1.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, the Headteacher or if not available the School Administrator team will contact parents immediately
- The relevant member of staff will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

A1.2 Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Access to parents' contact details

Risk assessments will be completed by the lead member of staff prior to any educational visit that necessitates taking pupils off school premises.

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.

There will always be at least one first aider on school trips and visits in Key Stage 1 and 2

A1.3 First aid equipment

A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.


First aid kits are stored in:

- The main office
- The cupboard adjacent to the hall
- Every classroom

Appendix 3. Accident Report

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 4. Asbestos Record

Item	Level	Building Name / Location / Room Number	Survey Type	Sample Reference	Quantity			
1	Ground Floor	Year 2 Classroom	Management	Visual Inspection	-			
			Material Description / Location		Material Risk			
			No suspect materials observed within surveyed area including ceiling void		Product Type	Extent of Damage	Surface Treatment	Asbestos Type
			Additional Information		-	-	-	-
			Loose MMMF insulation atop ceiling tiles. Non asbestos slip flooring. Non asbestos sink pad. UPVC windows. Non asbestos timber door sets.		Score - Material Risk			
					-		-	
			Recommendations		Accessibility			
-		-						
		Review Period						
		-						
Inspection Level		Analysis Result		Product Type		Licensed / Non-Licensed		
-		-		-		-		

Appendix 5. 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. For each of these infections or complaints, there [is further information in the guidance on the symptoms, how it spreads and some 'do's and don'ts' to follow that you can check](#).

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.
COVID-19	<p>If you develop symptoms of COVID-19, stay at home and self-isolate immediately. If you are notified of a positive test result you must complete your full isolation period. Your isolation period starts immediately from when your symptoms started, or, if you do not have any symptoms, from when your test was taken. Your isolation period includes the day your symptoms started (or the day your test was taken if you do not have symptoms), and the next 10 full days.</p> <p>You can return to your normal routine and stop self-isolating after 10 full days if your symptoms have gone, or if the only symptoms you have are a cough or anosmia, which can last for several weeks. If you still have a high temperature after 10 days or are otherwise unwell, stay at home and seek medical advice.</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.

Infection or complaint	Recommended period to be kept away from school or nursery
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 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)	<p>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.</p> <p>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 advisor or environmental health officer will advise.</p> <p>If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.</p>
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.

Infection or complaint	Recommended period to be kept away from school or nursery
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.