



Health and Safety Policy

2026-2027

Review date: September 2027

Policy Changes

Date	Actions
September 2021	Revised Policy implementation
July 2022	Review – no changes
July 2023	Review – no changes
July 2024	Review – 4 updates :
Sept 2025	1. H&S Provider updated to AW Safety Management Ltd
	2. Lancaster Maloney updated to Lancaster Maloney Martin
	3. Deputy Head of School changed
	4. Lyall Mew updated to Site Manager
Sept 2026	Review – no changes

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Mission Statement

At Red Lane we believe that all our children can achieve, becoming successful future citizens that contribute positively to a society in which all members are equally valued.

High aspirations, high motivation and high outcomes for all, ensure that achievement gaps wherever they exist are narrowed in order to improve pupils' life choices and future prospects.

We strive for all of our children to be safe, feel valued, develop resilience and continually learn within our nurturing and supportive community.

At Red Lane, our children BELIEVE, ACHIEVE and SUCCEED!

1. Aims

Our school aims are to:

- Provide and maintain a safe and healthy environment
- Establish and maintain safe working procedures amongst staff, pupils and all visitors to the school site
- Have robust procedures in place in case of emergencies
- 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

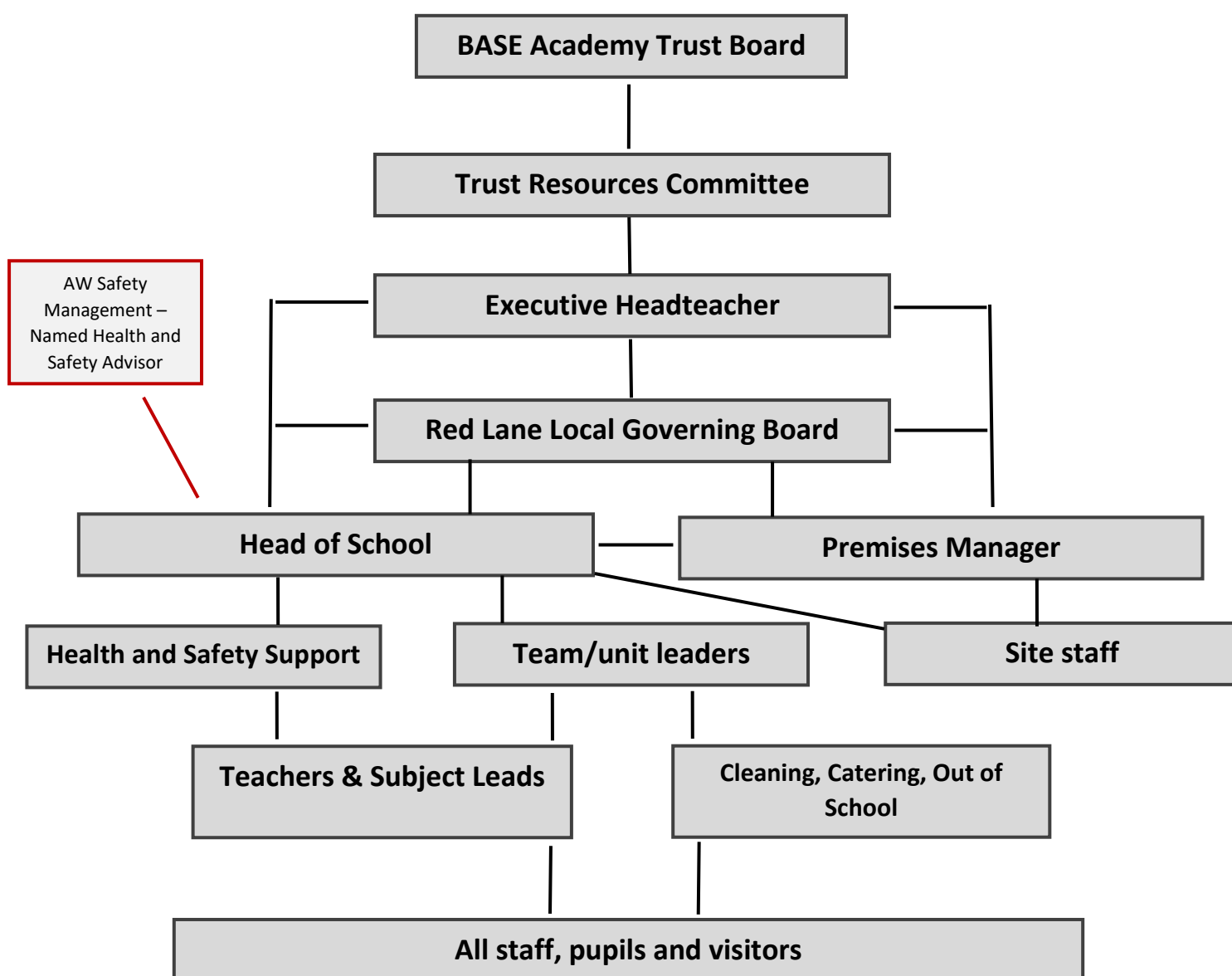
The school follows [national guidance published by Public Health England](#) when responding to infection control issues. Sections of this policy are also based on the [statutory framework for the Early Years Foundation Stage](#).

This policy complies with our funding agreement and articles of association.

3. Roles and Responsibilities

Red Lane Primary School is part of BASE Academy Trust. Overall and ultimate responsibility for schools within the Trust lies with the Trust Board and the Local Governing Board. Day to day responsibility for ensuring this policy is implemented is delegated to the Head of School, who is directly responsible to the executive Headteacher of the Trust and to the Local Governing Board. The Executive Headteacher reports to the Trust Board.

The diagram below illustrates the reporting processes throughout the organisation.



To ensure the continuous maintenance and improvement of standards of Health and Safety, the following people have responsibility in the following areas:

- **The Trust Board and its Trustees** shall, as far as is reasonably practicable:
 - Ensure compliance with all legal requirements
 - Ensure the implementation of policy and procedures which it is intended will achieve a consistently high standard of Health and Safety across the Trust.
 - Exercise reasonable care and skill along with knowledge and experience to ensure the Trust is well run and efficient

As the employer, the Trust will also:

- 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 Executive Headteacher** shall:
 - Direct and support the operation of each Academy within the Trust, assisting the Head of School, so far as is reasonably practicable, with all legal requirements and requirements of the Board
 - Specify management controls and reporting requirements, require the audit of associated processes, procedures and outcomes within each Academy
 - Report to the Trust board on progress and provide operational and management support to the Head of School and senior leadership teams within each Academy
- **The Local Governing Board:**
 - Are responsible for ensuring the day to day implementation of the Health and Safety Policy
 - Make recommendations to the Trust Board regarding Health and Safety matters within the school
 - Appointing a named link governor for Health and Safety who will ensure compliance and report to the Local Governing Board
- **The Head of School** is responsible for the day to day management of Health and Safety. 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
 - Be responsible for and direct the site team in conjunction with the premises manager
 - Working with the named Health and Safety Advisor – [AW Safety Management](#) - on the audit and improvement of school systems and procedures
 - Approve educational visits

In the Head of School's absence, the Assistant Heads of School, assume the above day-to-day health and safety responsibilities.

➤ **The Premises Manager will:**

- Work closely with the Head of School to ensure standards of Health and Safety within the school are maintained
- Be responsible for and direct the site team in conjunction with the Head of School
- Monitoring cleaning provision, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary
- Alongside the Head of School, work with the named Health and Safety Advisor on the audit and improvement of school systems and procedures
- Work alongside the school's premises management company – [Lancaster Maloney Martin](#) – to ensure that all statutory and recommended site checks and surveys are carried out and works implemented
- Report to the Executive Headteacher and Trust resource committee on matters concerning Health and Safety

➤ **The Health and Safety Support will:**

- Work with the Head of School, as directed, on matters concerning Health and Safety
- Produce analysis of minor injuries and accidents within school
- Support the Head of School in the reporting of serious/ RIDDOR reportable incidents
- Carry out the role of Educational Visits Coordinator

➤ **The Site Staff are responsible:**

- For carrying out checks identified as per the school schedule
- Updating site risk assessments in conjunction with the Head of School and the Health and Safety Support
- Addressing and making safe any areas of school where a hazard is identified
- Taking an active role in termly Health and Safety reviews and external audits
- Reporting any matters of Health and Safety immediately to the Head of School and Premises Manager
- Ensuring contractor safe working practices are in place before commencing work and discussing/ reporting and issues to the Head of School and Premises Manager

➤ **School 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
- Carry out and implement risk assessments within their own area of work e.g. classroom, subject, school visit
- Understand emergency evacuation and invacuation procedures and feel confident in implementing them

➤ **Pupils, Parents and visitors**

Pupils, parents and visitors 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.

➤ **Contractors**

Contractors will agree health and safety practices with the site manager 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

The Site Staff, [Mr Stephen Monks \(Site Manager\)](#) and [Mr Lyall Mew \(Site Manager\)](#) are responsible for the security of the school site in school hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems.

Security & Response through a service level agreement are key holders and will respond to an emergency out of normal hours.

5. Fire

Emergency exits, assembly points and assembly point instructions are clearly identified by safety signs and notices. Fire risk assessment of the premises is reviewed annually – this includes the external risk assessment and also the school's day to day risk assessment.

Emergency evacuations are practised at least once a term and the outcomes reported to Trustees and Local Governors.

The fire alarm is a loud intermittent buzzer.

Fire alarm testing takes place once a week as per the school's schedule of checks.

All staff receive a fire briefing at the start of each academic year which discusses the fire risk assessment and evacuation procedures. They also receive external fire awareness training every 2 years. 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 – the monitored alarm system will notify emergency services. Evacuation procedures will also begin immediately
- The school operates in general a no firefighting policy. 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 as detailed in the school fire evacuation plan.
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day. Teachers will signal via hands up that all pupils are accounted for.
- Staff and visitors will be accounted for via the electronic sign in system
- Staff and pupils will remain outside the building until the emergency services say it is safe to re-enter
- The school ensures 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. Individual needs for staff, pupils and visitors are detailed within the Personal, Emergency Evaluation Plans (PEEPs).

6. Invacuation and lockdown

As part of our commitment to safeguarding pupils, visitors and staff it is a requirement the school has a clear plan for what to do in the event of an external or internal incident which could be a threat.

As a result, the school's lockdown procedure can be activated in response to a number of scenarios. The list below gives some examples but is not a full list of all situations:

- an incident or disturbance in the local area
- an intruder on site with the potential to cause harm to others
- a risk of local air pollution, e.g. smoke plume, gas cloud etc.
- a major fire in the vicinity of the school
- a dangerous animal in close proximity

In order to warn of these dangers, an alarm system is activated which is distinct from the evacuation alarm. At this point any pupils, staff or visitors who are outside will enter the school by the nearest entrance and the school buildings will be 'locked down' by staff.

Full details can be found in the school's invacuation and lockdown policy. An overview of the principles of invacuation and lockdown is available on the school website but for safety purposes the specific arrangements are not published to the public.

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 [Stephen Monks and Lyall Mew \(site staff\)](#) and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary. Advice and monitoring of these assessments is taken by the school's name [Health and Safety Advisor – AW Safety Management.](#)

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

Hazardous products are stored in designated secure areas and are only accessible to site and cleaning staff. Any hazardous products are disposed of in accordance with specific disposal procedures.

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

7.1 Gas Safety

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

7.2 Legionella

- A water risk assessment has been, procured through Lancaster Maloney. [Mr Stephen Monks and Mr Lyall Mew \(Site Staff\)](#) are 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 annually and when significant changes have occurred to the water system and/or building footprint
- This risk assessment will be reviewed annually and when significant changes have occurred to the water system and/or building footprint.
- The risks from legionella are mitigated by the following:
 - Temperature checks
 - Weekly outdoor flushing
 - Monthly flushing

7.3 Asbestos

- 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 must view and sign that they have seen the asbestos register and that they 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.
- The school keeps an asbestos register which is reviewed annually which includes a record of the location of asbestos that has been found on the school site.

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.

8.1 Electrical equipment

- All staff are responsible for ensuring that they use and handle electrical equipment sensibly and safely
- Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them
- Any potential hazards will be reported to [Stephen Monks and Lyall Mew \(site staff\)](#) immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed
- Only trained staff members can check plugs
- Portable appliance test (PAT) is carried out by a competent person at least annually but sooner as required

8.2 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 gym floor or other apparatus will be reported to the PE coordinator – [Lee Nicholson](#)
- Sports equipment is inspected annually by an external inspection company.
- Subject risk assessments for PE detail specific factors for consideration such as the use of equipment

8.3 Display screen equipment

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

9. Lone working

Lone working may include:

- Late working
- Home or site visits
- Holiday 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. The school has a specific risk assessment in place for lone working.

10. Working at height

The school will ensure that work is properly planned, supervised and carried out by competent people with the skills, knowledge and experience to do the work. The school has a specific risk assessment in place for working at height.

In addition:

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

11. Manual handling

It is up to individuals to determine whether they are fit to lift or move equipment and furniture. If an individual feels that to lift an item could result in injury or exacerbate an existing condition, they will ask for assistance. The school has a specific risk assessment in place for manual handling.

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

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

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

12. Off-site visits

Off site visits are individually risk assessed and procedures detailed within the Educational Visits policy. When taking pupils off the school premises, the school will ensure that:

- All off-site visits are appropriately staffed
- Staff will take a mobile phone, a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details
- For trips and visits in EYFS and across the school there will always be at least one first aider with a current paediatric first aid certificate

The educational visits coordinator (EVC) is appropriately trained and ensures all procedures have been followed. The Head of School provides ultimate authorisation for any off -site visits.

13. Lettings

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

14. Violence at work

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

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

15. Smoking

Smoking is not permitted anywhere on the school premises.

16. 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.

16.1 Handwashing

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

16.2 Coughing and sneezing

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

16.3 Personal protective equipment

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

16.4 Cleaning of the environment

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

16.5 Cleaning of blood and body fluid spillages

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

16.6 Laundry

- Wash laundry in a separate dedicated facility
- Wear personal protective clothing when handling soiled clothing
- Bag children's soiled clothing to be sent home, never rinse by hand

16.7 Clinical waste

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

16.8 Animals

- Wash hands before and after handling any animals
- Keep animals' living quarters clean and away from food areas

- Dispose of animal waste regularly, and keep litter boxes away from pupils
- Supervise pupils when playing with animals
- Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a pet

16.9 Pupils vulnerable to infection

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

16.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 1. In the event of an epidemic/pandemic, we will follow advice from Public Health England about the appropriate course of action.

17. Infection prevention and control

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

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

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

18. Occupational stress

As a school, 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.

The school wellbeing policy provides further detail on the measure in place to support pupil and staff wellbeing. The named wellbeing lead is [Rob Hudson](#).

19. Supporting pupils with medical conditions and the administration of medication

Red Lane Primary is an inclusive community that welcomes and supports pupils with medical conditions. We provide all pupils with any medical condition the same opportunities as others at school. While teachers have a general legal duty of care to their pupils, this does not extend to a

requirement to routinely administer medicines. However, schools are required to ensure that policies and procedures are in place to support pupils who have medical conditions in order that they do not miss out on their education unnecessarily. The supporting pupils with medical conditions and the administration of medication policy details the school's procedures.

20. First Aid

The school operates a comprehensive first aid policy which details all relevant matters. The policy is designed to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes

21. Accident reporting

21.1 Accident record book

An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. An accident form template can be found in appendix 2

As much detail as possible will be supplied when reporting an accident

Information about 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 [You should check whether your insurer requires accident records to be retained for a longer period of time]

21.2 Reporting to the Health and Safety Executive

The Head of School, supported by the school's named advisor – [AW Safety Management](#), will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Head of School supported by the school's named advisor – [AW Safety Management](#), 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>

21.3 Notifying parents

The class teacher will inform parents 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.

19.4 Reporting child protection agencies

The Head of School will notify Bolton's safeguarding team 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.

19.5 Reporting to Ofsted

The Head of School 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.

22. Training

All school staff are provided with health and safety training as part of their induction process. Staff who work in high risk environments, such as with woodwork equipment, or work with pupils with special educational needs (SEN), are given additional health and safety training as required. Details of training can be found in the school's Health and Safety training matrix.

23. Monitoring and review

The school schedule of checks details the checks to ensure the implementation and compliance with this policy. Termly dedicated Health and Safety review audits also monitor implementation and compliance. The school commission and annual yearly external audit by the school's specialist Health and Safety Advisor – [AW Safety Management](#).

This policy will be reviewed by the Head of School annually or sooner if required by audit outcomes. Advice will be sought from the school's specialist Health and Safety Advisor – [AW Safety Management](#).

At every review, the policy will be approved by the Local Governing Board and the Trust Board.

24. Links with other policies and practices

This health and safety policy links to the following policies and practices:

- First aid policy
- Supporting pupils with medical conditions & administration of medication policy
- Accessibility plan
- Fire evacuation plan
- Invocation plan
- Educational visits policy
- Intimate care policy
- Safeguarding policy
- Risk assessments – see matrix overview
- Training matrix

APPENDIX 1 - 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)	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. 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.
Cold sores	None.
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 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 advisor 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.

APPENDIX 2 – Accident reporting



Pupil Minor **HEAD INJURY** form

ALL PARTS TO BE COMPLETED

Injured person	Class
Accident date	time
Accident location (class/upper yard/hall etc)	Footwear
If outdoor – weather conditions	
Description of accident	
Details of injury:	
Details of First aid treatment:	
Witness	Name of first aider
Time parent/guardian was contacted by phone:	
Or Parents signature upon collection or if taking early:	
If collected early, signature from parent/carer to confirm OK to return next day:	
Has the accident been investigated?	YES / NO
Any behavioural issues?	YES / NO
Does Risk Assessment require reviewing?	YES / NO
Details reviewed (office use):	

Department

Section/School/Establishment:

1. Injured Person

☐ Employee ☐ Public ☐ Agency ☐ Contractor ☐ Volunteer ☐ Service User
☐ Pupil

Forename: _____

Surname: _____

Address: _____

Age: _____

Contact No: _____

Postcode: _____

Occupation: _____

2. Accident/Incident Details

☐ Accident ☐ Incident (e.g. Violence & Aggression) ☐ Near Miss
☐ Cyber Abuse

Date: _____

Time: _____

Location (inc. address & postcode): _____

Description of accident/incident (please continue on separate sheet if needed):

Was the employee engaged in work at the time of the accident/incident? ☐ Yes ☐ No

Has the injured person been off or unable to do their normal work for more than 7 days, including weekends, as a result of the accident/incident? ☐ Yes ☐ No

Dates of absence: from: _____ to: _____ or still absent? ☐ Yes ☐ No

3. Injury Details

Nature of the injury (e.g. fracture, sprain, cut etc...): _____

Part of the body (Indicate L or R where necessary): _____

First aid given by (inc post): _____

First aid treatment given (i.e. compress, plaster): _____

Was the injured person taken to hospital from the scene? ☐ Yes ☐ No

Were they detained: ☐ Yes ☐ No If yes, how long for, in days? _____

4. Witnesses (if needed, ask witness(es) to complete a Witness Statement Form)

Name: _____

Name: _____

Address: _____

Address: _____

Contact _____

Contact No: _____

No: _____

5. Report Details

Accident reported to (i.e. Manager, supervisor, 1st Aider (inc name)): _____

Contact details of person reported to (dept & tel no): _____

Accident reported by (if different from section 1, inc post): _____

Reported on (date): _____

Time: _____

Signed by injured person: _____

For social care only CQC informed: ☐ Yes ☐ No Date: _____	
Name of Trade Union Safety Representative informed and date: -	
6. Signature of Manager/Supervisor/Responsible Person	
Signed: _____	Print: _____
Date: _____	_____

This page is CONFIDENTIAL to the Department and to the Health Safety and Wellbeing team (HSWT)

7. Accident Investigation (to be completed by manager/supervisor/responsible person)	
Carried out by: _____	
Position/occupation: _____	
Contact No: _____	
How did the accident/incident happen, and what has been done to prevent reoccurrence? 	
Does the risk assessment require updating? Do you need to provide additional information instruction or training to the member of staff? ☐ Yes ☐ No	
If Yes, what additional control measures are needed / recommended? 	
In cases of violence/aggression/threats or cyber abuse, has action been taken to support the individual / prevent a reoccurrence? ☐ Yes ☐ No	
If Yes, detail what action has been taken: 	
Signed: _____	Date: _____

8. For Internal HSWT use only			
Accident Code: Department	Division	Sub dept	Category
Reported to the HSE: ☐ Yes ☐ No		If Yes , report reference no: _____	
Reported by: Officer _____		Date: _____	Date: _____
Comments: 			
Signed by HSWP: _____		Date: _____	Date: _____
Background information			
Witness name: _____		Job title: _____	

Contact number:	Line managers name and contact number:
Work location:	Location of accident or incident:
Date of accident or incident:	Time of incident:
Details of the accident or incident	
Please ensure you fully describe the accident/incident. supply as much information as possible, including any possible injuries.	
Did anyone else witnesses this accident or incident? Please add details.	
Describe environmental conditions at the time of the accident or incident (weather, condition of the floor/work area, others present, equipment used etc.	
Please add any other comments or thoughts that might be relevant to this accident or incident.	
E signature.	Date this statement was completed.