

# The Constance Bridgeman Centre

Knowledge, Understanding, Opportunity

## Health & Safety Policy

Written by

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# 1. Governing Body's Statement of Intent

The school aims to provide a healthy and safe environment for its pupils, staff and visitors. The school recognises that effective health and safety management is an essential element of its activities and is committed to an ongoing programme of upkeep and improvement of its premises.

The school works to achieve the standards as outlined in the Health and Safety at Work Act 1974, its regulations and associated legislation.

As far as is reasonably practical, the school seeks to:

- Provide and maintain equipment and systems of work that are safe to use and so not risk the health of our employees.
- Ensure that there are no risks from using, handling, storing and transporting articles and substances.
- Provide information, instruction, training and supervision to ensure a healthy and safe working environment.
- Keep the school in a healthy and safe condition and to provide safe means of access and use for all staff, pupils and visitors.
- Provide adequate facilities and arrangements for employee welfare at work.

The school fully endorses the Local Authority's Corporate Health & Safety at Work Policy

**SIGNED:**

**(Chair of PRU Management Committee)**

**DATE:**

## 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.

## 3. Roles and responsibilities

### 3.1 The local authority and the PRU Management Committee

The London Borough of Redbridge 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 PRU Management Committee.

The Management Committee delegates operational matters and day-to-day tasks to the Headteacher and staff members.

### 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 PRU Management Committee 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, including all risk assessments relating to COVID-19.
- Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary.

In the Headteacher's absence, a member of the Senior Team assumes the above day-to-day health and safety responsibilities.

### 3.3 Health and Safety Co-ordinator

The nominated Health and Safety Co-Ordinator is the Headteacher.

- Establishing arrangements for dealing with health and safety such as
  - Dissemination health and safety information to all staff.
  - First aid.
  - Accident reporting and ensuring accidents are investigated
  - Emergency evacuation procedures.
  - Ensuring health and safety matter raised by staff are dealt with.
  - Maintaining a central file of health and safety information relevant to the school.
- Co-ordinating all aspects of Health and Safety Policy and practice, including the implementation of risk assessments.
- Liaising with safety representatives or other means of consulting employees.
- Ensuring the implementation of the Health and Safety Policy is monitored.
- Ensuring 'reportable' accidents are referred to the Local Authority.
- Ensuring the COVID-19 Risk Assessment is disseminated to all staff and implemented across all areas of the school

### 3.4 Caretaker

The Caretaker is responsible for ensuring the health, safety and welfare of the site services team including cleaning staff. Caretaking staff have a major role in HAS and must consider their own HAS when carrying out their duties. In particular the SM is responsible for:

- Fire alarms – undertaking the weekly test of the fire alarm system.
- Fire exits - ensuring that all fire exits are clear from obstruction and unlocked prior to the building being occupied.
- Emergency lighting - undertaking the weekly test of the emergency lighting system.
- Hazard reporting - checking emails for any reported hazards at least daily, rectifying those issues within their authority and notifying the Headteacher/DH of any unresolved issues.
- Inspections - undertake inspections of the communal areas of the school to identify hazards.

- Lettings - liaising with those hiring the premises to ensure that they are aware of evacuation procedures and accident reporting procedures.
- Paths and Grounds - remove any obstacles and litter, 'grit' when icy.
- Manual Handling - use proper equipment and follow sensible procedures. Divide loads where possible; ask for extra help when needed.
- Climbing – only use Local Authority approved steps. **Do not** use scaffold towers unless you are trained and certified to do so.
- Substances – Have signed COSHH assessments readily available and ensure they are read and acted on by SM/caretaking staff.
- Protective Equipment – Must be worn as required for the job i.e. steel capped boots, eye protection, overalls etc. PPE should also be worn in accordance with the COVID-19 Risk Assessment.
- Equipment – ensure that your equipment is properly maintained and that electrical equipment is checked by local authority recommended contractors. **Do not** bring your own equipment or tools into school as this is prohibited.
- Contractors – Issue emergency procedure leaflet to all contractors. Do not allow hazardous work to proceed.
- Cleaners – School cleaned thoroughly, particularly high traffic areas, with anti-bacterial substances to reduce the spread of viruses such as COVID-19.

### 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 and follow department and whole school risk assessments.
- 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
- There is an online training course through Educare called 'Health & Safety in Education: Staff Awareness', which is available to all staff and should be completed.

### 3.6 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.

### 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

Everyone is expected to be actively involved in security in our School and should as far as is reasonably possible carry out the procedures set out in this document.

The Caretaker and the Headteacher are 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 Site Manager and Headteacher are key holders and will respond to an emergency.

## 5. First Aid and Administration of Medication

Several members of staff have been trained in first aid. Should you require first aid, contact the school office who will locate a first aider.

Some pupils may need medication during school hours. In circumstances where children need medication regularly a health care plan should be drawn up to ensure the safety and protection of pupils and staff. With the permission of Parents/Carers, and where this is age appropriate, pupils should be encouraged to self-administer medication or treatment including, for example any ointment, sun cream or use of inhalers.

If a member of staff is concerned or uncertain about the amount or type of medication being given to a pupil, this should be discussed with the Senior Leadership Team at the earliest opportunity. When administering first aid, wherever possible, staff should ensure that another adult is present, or aware of the action being taken. Parents/Carers should always be informed when first aid has been administered.

## 6. 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 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 at 7am on a Thursday morning.

New staff will be trained in fire safety and all staff and pupils will be made aware of any new fire risks.

There is an online training course through Educare called 'Fire Safety in Education', which is available to all staff and should be completed.

The Schools Emergency Evacuation Plan can be found in Appendix 1.

## 7. COSHH

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

- Chemicals, products containing chemicals, fumes, dusts, vapours, mists, gases and asphyxiating gases, germs that cause diseases, such as leptospirosis or legionnaires disease.

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

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

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 completed on the 18<sup>th</sup> December Hygiene Contracts. The Caretaker 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 every year and when significant changes have occurred to the water system and/or building footprint.
- The risks from Legionella are mitigated by the following: regular temperature checks, flushing through of u-bends and dead legs, heating of water, disinfection of showers, etc.

### 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 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 and the asbestos register is reviewed annually.

## 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 labeled 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.
- All staff who are issued with a school laptop will be required to take full responsibility for it and sign a Loan Form.
- Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them.
- Any potential hazards will be reported to the Office Manager immediately.



- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed.
- Only trained staff members can check plugs.
- Where necessary a portable appliance test (PAT) will be carried out by a competent person.
- All 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.

## 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 Site Manager.

## 8.3 Display screen equipment

- All staff who use computers daily as a significant part of their normal work will be asked to complete a DSE Assessment.
- Staff identified as DSE users are entitled to an eyesight test for DSE use upon request, and at regular intervals thereafter, by a qualified optician (and corrective glasses provided if required specifically for DSE use).

## 9. Lone working

The school has its own Lone Working Policy, which should be read and understood by all staff.

Lone working may include:

- Late working.
- Home or site visits
- Weekend working.
- Site Manager/Site Staff duties
- Site cleaning duties.
- Working in a single occupancy office

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

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

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

## 10. Working at height

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

In addition:

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

## 11. Manual handling

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

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

There is an online training course through Educare called 'Moving and Handling', which is available to all staff and should be completed.

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.

## 12. Off-site visits

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

- Risk assessments will be completed where off-site visits and activities require them.
- All off-site visits are appropriately staffed.
- Staff will take a school mobile phone, a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details.
- There will always be at least one first aider on school trips and 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/headteacher 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 and Department for Education when responding to infection control issues. We will encourage staff and pupils to follow this good hygiene practice, outlined below, where applicable.

The school has detailed procedures to try and minimise the risk of spread of infectious diseases. The school will provide additional sanitiser and cleaner in all classrooms, offices and toilets and PPE when appropriate. Staff and pupils will also expect to adhere to social distancing measures.

There is a robust Risk Assessment in place, available to all staff, held on the shared drive in the Health & Safety Folder.

### 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.
- Use hand sanitiser regularly.
- Cover all cuts and abrasions with waterproof dressings.

### 16.2 Coughing and sneezing

- Cover mouth and nose with a tissue or cough into your elbow.
- Wash hands after using or disposing of tissues.
- Spitting is discouraged.

### 16.3 Personal protective equipment

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

### 16.4 Cleaning of the environment

- Clean the environment frequently and thoroughly.

### 16.5 Cleaning of blood and body fluid spillages

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

## 16.6 Laundry

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

## 16.7 Clinical waste

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

## 16.8 Animals

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

## 16.9 Pupils vulnerable to infection

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

## 16.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 3.

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

## 17. New and expectant mothers

Risk assessments will be carried out whenever any employee 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

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.

Our Insurance provider, Schools Advisory Service, offer a lot of support in this area and can be contacted on 01773 814 403 or [nurse@uk-sas.co.uk](mailto:nurse@uk-sas.co.uk)

## 19. Accident reporting and Risk Assessments

### 19.1 Accident recording

- 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.
- Details of the accident will be uploaded onto Safesmart Smart Log our health and safety and maintenance management system.
- Information about injuries will also be kept in the pupil's educational record or on the staff 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.

### 19.2 Reporting to the Health and Safety Executive

The Office 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 Office Manager will report these to Health & Safety Advisor at the London Borough of Redbridge who will then report 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.
  - An electrical short circuit or overload causing a fire or explosion.

### **19.3 Notifying parents**

Parents/Carers will be informed if there has been an accident involving a pupil they have responsibility for.

### **19.4 Reporting child protection agencies**

The Headteacher will notify the relevant Local Authority's Safeguarding and Child Protection Team of any serious accident or injury to, or the death of, a pupil while in the schools care.

### **19.5 Reporting to Ofsted**

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

### **19.6 Risk Assessments**

Under the Management of Health and Safety at Work Regulations, there is a requirement for all risks to health and safety to be assessed and for the significant findings to be recorded.

Risk assessments are important as they enable those responsible to identify and mitigate risk.

Each department maintains its own risk assessment records covering their work activities. School-wide risk assessments are kept by the HASCo and can be found on the shared drive.

## 20. 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 and safety training.

## 21. Monitoring

This policy will be reviewed every two years.

At every review, the policy will be approved by the Headteacher, PRU Management Committee and the Statement of Intent signed by the Chair of the PRU Management Committee.

The school works in partnership with SafetyMARK – The National Safety Certification Scheme for Schools, to ensure that we are fully compliant. They carry out an audit every two years and the Office Manager and Federation Business Manager together with the Headteacher and Caretaker regularly carry out internal audits and review actions raised in the school's action plan.

## 22. Links with other policies

This health and safety policy links to the following policies:

- Accessibility Plan
- Lone Working Policy
- Risk Register
- First Aid Policy
- Supporting pupils with Medical Conditions

## Appendix 1. Emergency Evacuation Plan

### **EVACUATION PROCEDURE**

#### **Background**

- Evacuation is based on a 'compartment sweep' system.
- Each area of the school has designated Fire Marshals.
- It is the responsibility of the Fire Marshal to ensure the department is clear of all people before exiting, checking every office, room, classroom and toilet.
- After exiting, the Marshal confirms to the Fire Marshal in the fluorescent jacket at the assembly point that their department is clear.
- The assembly point is the Car Park.

#### **IN CASE OF FIRE:**

##### **Discovering a Fire**

- Sound the alarm at the nearest call point by breaking the glass
- Fight the fire if safe to do so ensuring that your back is to an exit.

##### **On hearing the alarm**

- Teachers escort pupils and leave the building calmly, along the corridors to the nearest Fire Exit, marked by the green running man sign.
- Do not stop to collect belongings.
- Other staff members leave by the nearest exit, ushering out others out with you.
- Assemble at the front of the car park in the furthest corner.
- Office staff to check registers and then inform the Fire Marshal of any irregularities.
- All staff must have registered whether they are on or off site through ereception.
- If a visitor is on site please ensure they report to the Fire Marshal confirming they are safely out of the building.
- Those with mobility problems should be assisted to evacuate via the nearest appropriate exit.
- A member of the Senior Leadership Team will call the fire brigade once the site team have identified the zone and assessed the risk.

##### **Do not:**

- Stay in the building if the alarm is sounding.
- Put yourself or others at risk.
- Re-enter the building until told to do so by a member of the SLT.
- Wedge fire doors open – this is how fires spread.
- Assemble anywhere other than the rear of the school playing field.
- Leave the school premises without signing out and anytime.
- Leave or enter site at all when the alarm is sounding.

In case of Bomb alert assemble at Car Park



## Appendix 2. Accident report

Name of injured person		Role/class	
Date and time of incident		Location of incident	
<b>Incident details</b>			
<i>Describe in detail what happened, how it happened and what injuries the person incurred.</i>			
<b>Action taken</b>			
<i>Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.</i>			
<b>Follow-up action required</b>			
<i>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</i>			
Name of person attending the incident			
Signature		Date	

### Appendix 3. Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from non-statutory guidance for schools and other childcare settings from Public Health England. 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
<b>Athlete's foot</b>	None.
<b>Campylobacter</b>	Until 48 hours after symptoms have stopped.
<b>Chickenpox (shingles)</b>	<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 pupils return to 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>
<b>Cold sores</b>	None.
<b>Rubella (German measles)</b>	5 days from appearance of the rash.
<b>Hand, foot and mouth</b>	Pupils 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.
<b>Impetigo</b>	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
<b>Measles</b>	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.
<b>Ringworm</b>	Exclusion not needed once treatment has started.
<b>Scabies</b>	The infected pupil or staff member should be excluded until after the first treatment has been carried out.
<b>Scarlet fever</b>	Pupils 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.

<b>Slapped cheek syndrome, Parvovirus B19, Fifth's disease</b>	None (not infectious by the time the rash has developed).
<b>Bacillary Dysentery (Shigella)</b>	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
<b>Diarrhoea and/or vomiting (Gastroenteritis)</b>	<p>Pupils 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 pupil has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.</p>
<b>Cryptosporidiosis</b>	Until 48 hours after symptoms have stopped.
<b>E. coli (verocytotoxigenic or VTEC)</b>	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.
<b>Food poisoning</b>	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).
<b>Salmonella</b>	Until 48 hours after symptoms have stopped.
<b>Typhoid and Paratyphoid fever</b>	Seek advice from environmental health officers or the local health protection team.
<b>Flu (influenza)</b>	Until recovered.
<b>Tuberculosis (TB)</b>	<p>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.</p> <p>Pupils and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.</p>
<b>Whooping cough (pertussis)</b>	A pupil 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.

<b>Conjunctivitis</b>	None.
<b>Giardia</b>	Until 48 hours after symptoms have stopped.
<b>Glandular fever</b>	None (can return once they feel well).
<b>Head lice</b>	None.
<b>Hepatitis A</b>	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 pupils in with good hygiene who will have been much more infectious prior to diagnosis.
<b>Hepatitis B</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.
<b>Hepatitis C</b>	None.
<b>Meningococcal meningitis/ septicaemia</b>	If the pupil has been treated and has recovered, they can return to school.
<b>Meningitis</b>	Once the pupil has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
<b>Meningitis viral</b>	None.
<b>MRSA (meticillin resistant Staphylococcus aureus)</b>	None.
<b>Mumps</b>	5 days after onset of swelling (if well).
<b>Threadworm</b>	None.
<b>Rotavirus</b>	Until 48 hours after symptoms have subsided.
<b>Coronavirus</b>	<p>If you have been in close contact with someone who has tested positive with COVID-19 you should stay at home for 10 days if unvaccinated. If vaccinated you should take a daily LFT test for the following 5 days (pending 2 negative LFT's).</p> <p>If you have a high temperature, new continuous cough or a loss or change to your sense of taste and smell you should go and get tested immediately for the virus. Stay at home and do not have visitors until you get your test results.</p>

	If you test positive you should isolate for 14 days after illness onset
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