

HEALTH AND SAFETY POLICY

BROCKWOOD PARK SCHOOL

Last Review Date	10 Aug 2026
Policy endorsed by	Trustees
Policy is maintained by	SMC Health & Safety Liaison
Next review date	August 2027
Review body	School Management Committee and Estates and Maintenance Manager

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Health and Safety Policy Statement

As trustees of Brockwood Park School we fully recognise our collective responsibility for providing, so far as is reasonably practicable, a safe and healthy school for all of our employees, pupils, contractors, visitors (including parents) and others who could be affected by our activities. In our role as employer we attach high priority to ensuring that all the operations within the school environment, both educational and support, are delivered in an appropriate manner. The trustees are committed to promoting the welfare of all in our community so that effective learning can take place.

We fulfil our responsibility as trustees of Brockwood Park School by appointing Rob Beddow, the Estate and Maintenance Manager (EMM), with responsibility for overseeing health and safety as part of his general responsibilities for the upkeep and maintenance of the fabric of the estate and buildings.

Day-to-day responsibility for the operation of health and safety at the school is vested with the School Management Committee (SMC). However, as trustees, we have specified that that the school should adopt the following framework for managing health and safety:

All trustees review the work of the school's health and safety trust committee (HSTC) termly and receive copies of all relevant paperwork.

A report on health and safety covering:

- statistics on accidents to pupils, staff and visitors
- staff training
- fire drills
- all new or revised policies and procedures

is tabled at each term's trustees meeting.

The external fabric of the school, its plant, equipment and systems of work are surveyed and inspected regularly by competent professionals.

These reports (as per point above) are considered by the EMM whose recommendations (together with other defects and in discussion with the trustees) form the basis of the school's routine maintenance programmes.

The school's adherence to health and safety in catering and cleaning of the food preparation and eating areas is subject to external inspection by the Environmental Health Officer (EHO). In addition, the EMM arranges for an independent hygiene and safety audit of food storage, meal preparation and food serving areas regularly, together with regular external deep cleaning and pest control services, and reports on all these aspects to the HSTC.

The school has fire risk assessments, carried out by a competent person which are reviewed every year, and updated every three years, more frequently if significant changes are made to the interior of buildings or new buildings are bought or added. The Health and Safety Committee should review this risk assessment every time it is amended and submit a report to the trustees.

The school has a competent person undertake a risk assessment for legionella every two years and monthly temperature water testing for legionella control is undertaken. In addition, deadlegs are removed or flushed when found.

The school has a comprehensive policy in place for the training and induction of new staff in health and safety related issues which should include basic 'manual handling' and 'working at height training'. Health and safety training that is related to an individual member of staff's functions, such as science technician, will be provided in addition to the 'standard' induction training. First aid training and minibus driver training are provided to any member of the teaching staff who is involved with trips and visits.

All members of staff are responsible for taking reasonable care of their own safety, that of pupils, visitors, temporary staff, volunteers and contractors. They are responsible for co-operating with the SMC and EMM in order to enable the trustees to comply with health and safety duties. Finally, all members of staff are responsible for reporting any significant risks or issues to the EMM.

All employees are briefed on where copies of this statement can be obtained on the school's intranet. They will be advised as and when it is reviewed, added to or modified.

Signed:

Chair of Trustees, for and on behalf of the Board

Date:

Legislation

This policy meets the Education (Independent School Standards) Regulations 2014 (Schedule, Part 3, paragraph 11) and Standard 9 of the National Minimum Standards for Boarding Schools. This policy is based on advice from the Department for Education on [health and safety in schools](#), guidance from the Health and Safety Executive (HSE) on [incident reporting in schools](#), and the following legislation:

- [The Health and Safety at Work etc. Act 1974](#), which sets out the general duties employers have towards employees and duties relating to lettings
- [The Management of Health and Safety at Work Regulations 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 the current guidance published by the UK Health Security Agency, "Health protection in children and young people's settings, including education," when responding to infection control issues.

Data Retention

This Health & Safety Policy applies to Brockwood Park School specifically. Health and safety records (including accident/incident reports, risk assessments and related correspondence) are retained in accordance with the KFT Records Retention and Disposal Policy — a Foundation-wide document covering the School, Inwoods Small School and the Centre — which sets differentiated retention periods by record type (e.g. minimum 10 years for records of accidents to children, minimum 7 years for risk assessments, and insurer-specified periods for insurance-related correspondence). Staff should refer to that policy, and to the school's insurer's requirements, for the applicable period for a specific record.

Responsibility for Health and Safety

The Board of Trustees

The board of trustees has ultimate responsibility for health and safety matters in the school, but will delegate day-to-day responsibility to the SMC.

The board of trustees 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 board of trustees, 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 School Management Committee

The Co-Chairs are responsible for the implementation of this policy. They do this by appointing Rob Beddow as Health and Safety Officer. To support Rob, Tom Power has been appointed as the SMC H&S Liaison. Tom and Rob meet regularly and review Health and Safety compliance and provision across the schools.

Health and Safety Lead

Mr Robert Beddow, Estate and Maintenance Manager, has the overall responsibility for the day to day Health and Safety as delegated by Thomas Lehmann and Mina Masoumian, Co-Chairs and Tom Power, H&S Liaison to the School Management Committee.

The day-to-day activities of the Health and Safety Lead include:

- 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 board of trustees 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.

To monitor, review and establish Health and Safety procedures and practices, we have a robust monthly health and safety inspection check-list which is available to review on request. These inspections are undertaken by:

- At Brockwood Park School
 - Members of the maintenance team

Health and Safety Trust Committee (HSTC)

The Health and Safety Lead works with the SMC Health and Safety Liaison Tom Power and the Krishnamurti Centre manager Eva Booth to manage health and safety matters. This group is called the health and safety trust committee (HSTC). There are termly HSTC meetings where the H&S monthly checklists are reviewed and priorities assigned.

The HSTC will be responsible for implementing this policy within the organisation which may include:

- Monitoring the effectiveness of the Health and Safety Policy, and the safe working practices described within it, and revising and amending it as necessary on a regular basis.
- Identifying any other manager having direct responsibility for particular safety matters and anyone who is specifically delegated to assist him in the management of health and safety matters.
- Monitor general advice on Health and Safety matters given by relevant bodies and advise on its application.
- Coordinate arrangements for the design and promulgation of safe working practices and be aware of their implementation.
- Investigate any specific Health and Safety problem identified and take or recommend appropriate remedial action.
- Order that a method of working ceases on Health and Safety grounds.
- Carry out regular safety inspections and make recommendations on methods of resolving any problems identified.
- Coordinate arrangements for the dissemination of information and for the instruction of employees on safety matters and to make recommendations on the extent to which employees are trained, or to be trained.
- Ensure the nomination of the person or persons to deputise for them in respect of Health and Safety matters.
- Ensure that responsibilities are allocated to and understood by members of staff who have specific duties for Health and Safety matters.
- Exercise effective supervision over all those for whom they are responsible.
- Be aware of, and implement safe working practices and to personally set a good example.

- Ensure that any equipment or tools used are appropriate to that use and meet accepted safety standards.
- Provide written job instructions, warning notices and signs as appropriate.
- Provide adequate protective clothing and safety equipment as necessary and ensure that these are used as required.
- Minimise the occasions when an individual is required to work in isolation, particularly in a hazardous situation or on a hazardous process.
- Promptly evaluate and, where appropriate, take action on criticism of Health and Safety arrangements.
- Provide the opportunity for discussion of Health and Safety arrangements.
- Investigate any accident (or incident where serious personal injury could have arisen) and take appropriate corrective action.

Staff and Volunteers

Staff will be functionally responsible to the relevant members of the management committees for the establishment and operation of the Organisation's Health and Safety Policy within their departments. They will:

- Take reasonable care for the Health and Safety of themselves and of any person who might be affected by their acts or omissions at work.
- Refer any Health and Safety problems to their own immediate supervisor.
- Cooperate with their supervisor and others in meeting satisfactory requirements.
- Not interfere with or misuse anything provided in the interests of health, safety and welfare.
- Make themselves aware of all safety rules, procedures and safe working practices applicable to their positions; where in doubt they must seek immediate clarification from their supervisor.
- Ensure that their tools and equipment are in good condition and that they report any defects to their superior. Ensure all tools and machinery are serviced regularly.
- Use protective clothing and safety equipment provided and ensure that these are kept in a good condition.
- Ensure that offices, general accommodation, working areas, workshops etc. and vehicles are kept clean and tidy. These are monitored monthly by the H&S inspection.
- Ensure that any accidents, whether or not any injury occurs, and potential hazards are reported to their superior.
- Ensure all workstations are clear, clean and tidy throughout the working day and left in good condition at all times regularly remove rubbish and waste materials. These are monitored monthly by the H&S inspection.
- Keep the access to and from your place of work free from obstruction and slipping and tripping hazards at all times. This is monitored monthly by the H&S inspection.
- Never leave cables trailing across floors unless absolutely necessary and then only if the appropriate warning sign is used. These are monitored monthly by the H&S inspection.

- Clean up any spillage immediately or, if you are unable to do so, segregate the area with barriers or barrier tape. In the case of hazardous substances, refer to the health and safety data sheet and the specific risk assessment.
- Only use equipment that they have received training/instruction for and which they are authorised to use.

N.B. It is realised that newly appointed employees could be particularly vulnerable to any risk and should pay particular attention to the above requirements.

Students

- Receive health and safety awareness training and any additional training specific to the hazards associated with a particular activity as necessary.
- Are encouraged to play an active role in the implementation of the Brockwood Park Health and Safety Policy.
- Students must act with due care for the health, safety and welfare of themselves and others.
- Students must report any health and safety incidents to a member of staff.

All Other Persons on the Organisation Premises

- Observe the organisation's health and safety policy.
- Ensure that they avoid putting themselves, staff and members of the general public at risk on organisation premises.
- Contractors will agree health and safety practices with the EMM before starting work. Before work begins, the contractor will provide evidence that they have completed an adequate risk assessment of all their planned work.

Site security

Our primary aim is to provide a secure environment in which our students can learn and our staff and volunteers can work. Our second objective is to protect our buildings and grounds, together with the equipment belonging to the school and the personal possessions of everyone in our community. The duty person ensures that the premises are locked and secure each evening and staff lock any lockable doors and cabinets when they have finished work.

The HSTC including the EMM 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.

Rob Beddow and Thomas Lehmann are key holders and will respond to an emergency. A specific *Site Security Risk Assessment* is carried out for the school at least annually to support this.

Fire

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

Emergency evacuations are practised at least once a term.

The fire alarm is a loud continuous bell or buzzer.

Fire alarm testing will take place once a week.

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

In the event of a fire:

- The alarm will be raised immediately by whoever discovers the fire and emergency services contacted. Evacuation procedures will also begin immediately
- Fire extinguishers may be used by staff only, and only then if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk
- Staff and pupils will congregate at the assembly point on the north lawn.
- Assigned staff will take a register of pupils and staff, which will then be checked against the attendance register of that day
- Staff and pupils will remain outside the building until the emergency services say it is safe to re-enter

For the evacuation of people with mobility needs and those with disabilities, a personal emergency evacuation plan (PEEP) will be written. For residential students, this will be included in their care plan.

A comprehensive fire risk assessment by an approved assessor is carried out periodically for all school buildings. These are reviewed annually and renewed every 3 years. For more detail see our Fire Safety Policy. Pupil access to potentially hazardous areas of the site is dealt with separately in the Risky Areas Policy.

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 EMM, SMC H&S Liaison and the housekeeper and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

Our staff use and store hazardous products in accordance with instructions on the product label. All hazardous products are kept in their original containers, with clear labelling and product information. Additional detail can be found in the risk assessments.

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.

Location and situation specific management of COSHH is supported by various risk assessments including:

- *Generic COSHH Risk Assessment*
- *Housekeeping Risk Assessment*
- *School Kitchen Risk Assessment*
- *Life Skills: Kitchen Risk Assessment*
- *Maintenance Shed Risk Assessment*
- *Woodshed Risk Assessment*
- *Photography Risk Assessment*
- *Art Risk Assessment*
- *Pottery Risk Assessment*

Gas safety

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

Legionella

The water pipework in and around buildings needs to be assessed for risk of legionella disease. It is a serious disease and has to be treated in accordance with regulations set out by HSE. The risk assessing, sampling and water plant servicing is conducted by an outside contractor and the monitoring/prevention is done in house. Staff are to be trained in the awareness of legionella and the measures taken to monitor and prevent.

Existing measures

Comprehensive legionella risk assessments are conducted by external contractors which identify areas of concern to act upon. The 'Actions Arising' document is stored on the facilities drive. Ongoing assessments are also made by the maintenance team as the actions are worked through or any new works reveal issues.

Records and monitoring

There are measurements and records kept of temperature testing of outlets. The student showers/outlets are obviously unused in school holidays so it is important during the holidays to run outlets to prevent issues. There is also monitoring of TMVs although these kinds of taps are being phased out so we will soon not have any.

Further measures reviewed regularly include:

- Refresher training
- Fresh Risk Assessment
- New testing regime by external contractors

Longer term the moving of the CWST has been a significant measure in reducing risk and we are now moving on to looking at water pipework in general throughout the main house. The approximate service life expectancy of water pipework is 70 years but needs evaluating visually to establish condition. In future we may seek to surface mount pipework so it is visible/accessible apart from in feature rooms/locations. The presence of asbestos also makes for a costly long term job.

Asbestos

- 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 that 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 a re-inspection survey is conducted periodically by an approved inspector. Onsite monthly H&S checks include monitoring of asbestos in plain sight.

The management of Asbestos is detailed in a combination of our *Asbestos Survey* and then individual risk assessments which are written for each specific job involving asbestos.

Equipment

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

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

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

Electrical equipment

- All staff are responsible for ensuring they use and handle electrical equipment sensibly and safely
- Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them
- Any potential hazards will be reported to the EMM 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. This is done annually for all portable appliances by a professional contractor
- 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

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 or other apparatus will be reported to the EMM
- More detail can be found in the *Gym and Sports Risk Assessments*

Display screen equipment

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

Specialist equipment

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

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
- Remote working, self-isolation and/or remote learning

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 they are medically fit to work alone.

A Lone Working Risk Assessment is carried out at least annually.

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. Working at height risk assessments are carried out and reviewed annually or sooner if necessary.

In addition:

- The maintenance team keeps ladders locked up and they are inspected by an approved inspector periodically.
- Pupils are prohibited from using ladders
- Staff need to 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
- Regular training in the use of ladders and working at height is carried out for all relevant staff

A Working at height Risk Assessment is carried out at least annually.

Manual handling

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

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

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

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

A *Manual Handling Risk Assessment* is carried out at least annually to support this.

Educational visits

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

- Risk assessments will be completed where off-site visits and activities require them
- All off-site visits are appropriately staffed
- Staff will take a school mobile phone, an appropriate portable first aid kit, information about the specific medical needs of pupils, along with the parents/carers' contact details
- There will always be at least one first aider on school trips and visits.

More details can be found in our *Educational Visits Policy*.

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 the SMC immediately. This applies to violence from pupils, visitors or other staff.

Smoking

Smoking is not permitted anywhere on the school premises.

Infection prevention and control

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

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

Coughing and sneezing

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

Personal protective equipment

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

Cleaning of the environment

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

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

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
- The commercial Miele washing machines are serviced regularly which involves 4 pre programmes with a maintenance wash or a 95°C hotwash.
 - These programmes are then used at least once a week by the Housekeeping Team

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

Animals

There are currently no pets on site but, should this change, the following guidelines will come into force. In addition, these points will come into force should any school trip involve animal contact:

- 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

Infectious disease management

We will ensure adequate risk reduction measures are in place to manage the spread of acute respiratory diseases, including COVID-19, and carry out appropriate risk assessments,

reviewing them regularly and monitoring whether any measures in place are working effectively.

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

- Following good hygiene practices
 - We will encourage all staff and pupils to regularly wash their hands with soap and water or hand sanitiser, and follow recommended practices for respiratory hygiene. Where required, we will provide appropriate personal protective equipment (PPE)
- Implementing an appropriate cleaning regime
 - We will regularly clean equipment and rooms, and ensure surfaces that are frequently touched are cleaned at least twice a day
- Keeping rooms well ventilated
 - We will use risk assessments to identify rooms or areas with poor ventilation and put measures in place to improve airflow, including opening external windows, opening internal doors and mechanical ventilation

Pupils vulnerable to infection

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

In addition, all students with specific disabilities or serious diagnosed conditions will have an individual care plan written for them which will include specific measures relating to vulnerability to infection.

Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by the UK Health Security Agency and other government guidance, summarised in [Appendix 1](#).

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

New and expectant mothers

Risk assessments will be carried out whenever any employee or pupil notifies the school that they are pregnant. Details can be found in the *New and Expectant Mothers Risk Assessment*.

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

- Chickenpox can affect the pregnancy if a woman has not already had the infection. Expectant mothers should report exposure to an antenatal carer and GP at any stage of exposure. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles
- If a pregnant woman comes into contact with measles or German measles (rubella), she should inform her antenatal carer and GP immediately to ensure investigation
- Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), the pregnant woman should inform her antenatal care and GP as this must be investigated promptly
- Some pregnant women will be at greater risk of severe illness from COVID-19

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. More detail can be found in our *Stress Risk Assessment*.

Accident reporting

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.

- 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 after 10 years.

Reporting to the Health and Safety Executive

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

School staff: reportable injuries, diseases or dangerous occurrences

These include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding) which:
 - Covers more than 10% of the whole body's total surface area; or
 - Causes significant damage to the eyes, respiratory system or other vital organs
 - Any scalding requiring hospital treatment
 - Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the EMM will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
 - Carpal tunnel syndrome
 - Severe cramp of the hand or forearm
 - Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
 - Hand-arm vibration syndrome
 - Occupational asthma, e.g. from wood dust
 - Tendonitis or tenosynovitis of the hand or forearm
 - Any occupational cancer
 - Any disease attributed to an occupational exposure to a biological agent
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness

- The accidental release or escape of any substance that may cause a serious injury or damage to health
- An electrical short circuit or overload causing a fire or explosion

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

These include:

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

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

- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip)
- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors)

Information on how to make a RIDDOR report:

[How to make a RIDDOR report, HSE](http://www.hse.gov.uk/riddor/report.htm)

<http://www.hse.gov.uk/riddor/report.htm>

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.

All our Health and Safety training is logged and monitored in our *Health and Safety Trained Staff* sheet.

Monitoring

This policy will be reviewed by the EMM every year.

At every review, the policy will be approved by the SMC H&S Liaison and the board of trustees.



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

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

Infection or complaint	Recommended period to be kept away from school or nursery
Athlete's foot	None.
Campylobacter	Until 48 hours after symptoms have stopped.
Chicken pox (shingles)	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.
Respiratory infections including coronavirus (COVID-19)	Children and young people should not attend if they have a high temperature and are unwell. Anyone with a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.

Rubella (German measles)	5 days from appearance of the rash.
Hand, foot and mouth	Children are safe to return to school or nursery as soon as they are feeling better, there is no need to stay off until the blisters have all healed.
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
Measles	Cases are infectious from 4 days before onset of rash to 4 days after, so it is important to ensure cases are excluded from school during this period.
Ringworm	Exclusion not needed once treatment has started.
Scabies	The infected child or staff member should be excluded until after the first treatment has been carried out.
Scarlet fever	Children can return to school 24 hours after commencing appropriate antibiotic treatment. If no antibiotics have been administered, the person will be infectious for 2 to 3 weeks. If there is an outbreak of scarlet fever at the school or nursery, the health protection team will assist with letters and a factsheet to send to parents or carers and staff.
Slapped cheek syndrome, Parvovirus B19, Fifth's disease	None (not infectious by the time the rash has developed).

Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
Diarrhoea and/or vomiting (Gastroenteritis)	Children and adults with diarrhoea or vomiting should be excluded until 48 hours after symptoms have stopped and they are well enough to return. If medication is prescribed, ensure that the full course is completed and there is no further diarrhoea or vomiting for 48 hours after the course is completed. For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health adviser or environmental health officer will advise. If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.
Cryptosporidiosis	Until 48 hours after symptoms have stopped.
E. coli (verocytotoxigenic or VTEC)	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
Food poisoning	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
Salmonella	Until 48 hours after symptoms have stopped.

Typhoid and Paratyphoid fever	Seek advice from environmental health officers or the local health protection team.
Flu (influenza)	Until recovered.
Tuberculosis (TB)	Pupils and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. Pupils and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.
Whooping cough (pertussis)	A child or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so, or 21 days from onset of illness if no antibiotic treatment.
Conjunctivitis	None.
Giardia	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).
Head lice	None.
Hepatitis A	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older children with good hygiene who will have been much more infectious prior to diagnosis.

Hepatitis B	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
Hepatitis C	None.
Meningococcal meningitis/ septicaemia	If the child has been treated and has recovered, they can return to school.
Meningitis	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
Meningitis viral	None.
MRSA (meticillin resistant Staphylococcus aureus)	None.
Mumps	5 days after onset of swelling (if well).
Threadworm	None.
Rotavirus	Until 48 hours after symptoms have subsided.

