WESTFIELD SCHOOL

Health & Safety Policy

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1. Statement of Intent

Westfield School believe that excellence in the management of Health and Safety is an essential element within its overall business plan – a good health and safety record goes hand in hand with high achievement in academic and quality standards.

People are the most important asset to this school, whether they are staff members or pupils, therefore we are totally committed to ensuring their health, safety and welfare at all times.

From an economic point of view, the school believes that prevention is not only better, but cheaper than cure. There is no necessary conflict between humanitarian, educational and commercial considerations. Achievement and safety are not in competition.

On the contrary, safety is good academic business.

From a legal perspective, the School is committed to ensuring that it complies with all relevant health and safety legislation. Where it is reasonably practicable to do so, the School will strive to go beyond the requirements of legislation.

The School is committed to on-going monitoring and review processes, so that continual improvement in the management of health and safety can be achieved.

Our general intentions are:

- To provide adequate control of the Health and Safety risks arising from our School activities;
- To consult with our employees on matters affecting their Health and Safety;
- To provide safe plant and equipment;
- To ensure safe handling and use of substances;
- To provide information, instruction and supervision for employees and pupils;
- To ensure all employees are competent to do their tasks and to give them adequate training;
- To prevent accidents and cases of work related ill health;
- To maintain safe and healthy working conditions: and
- To review and revise this policy at regular intervals.

2. Organisational Responsibilities

2.1 The Local Authority & governing body

Herefordshire Council has ultimate responsibility for the health and safety matters in school, but delegates its responsibility for the strategic management of such matters to the school's governing body. The governor that oversees health & safety is ???

The governing body delegates management of operational matters and day-to-day tasks to the head teacher, Nicki Gilbert and the school business manager, Zoe Burge.

The attached organisational diagram shows how Health & Safety responsibilities flow through the School.

To ensure that health and safety standards are maintained and improved, the following people have responsibility:

Kazimierz Szostak - Assistant Health, Safety & Wellbeing Advisor

The process of application of Health & Safety at Westfield:

This is achieved by the creation of arrangements in the key Health & Safety areas i.e. Manual Handling, Lone Working, Display Screen Equipment and Accident Reporting etc.

2.2 Head Teacher

The head teacher is responsible for health and safety day-to-day. This involves:

- Implementing the health and safety policy
- Ensuring there are enough staff to safely supervise pupils
- Ensuring that the school building and premises are safe and regularly inspected
- Providing adequate training for school staff
- Reporting to the governing board on health and safety matters
- Ensuring appropriate evacuation procedures are in place and regular fire drills are held
- Ensuring that in their absence, health and safety responsibilities are delegated to another member of staff
- Ensuring all risk assessments are completed and reviewed
- Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary

In the head teacher's absence, Julie Newcombe, deputy head teacher, assumes the above day-to-day health and safety responsibilities.

2.3 Health and safety lead
The nominated health and safety lead is Emma Jenkins, School Business Manager

2.4 Staff
School staff have a duty to take care of pupils in the same way in which a prudent parent would do so.

Staff will:

- Take reasonable care of their own health and safety and that of others who may be affected by what they do at work
- Co-operate with the school on health and safety matters
- Work in accordance with training and instructions
- Inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken
- Model safe and hygienic practice for pupils
- Understand emergency evacuation procedures and feel confident in implementing them

2.5 Pupils and parents
Pupils and parents are responsible for following the school's health and safety advice, on-site and off-site, and for reporting any health and safety incidents to a member of staff.

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

3. 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, two tone, electronic siren
Fire alarm testing will take place once a week

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 them if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk. There is no expectation for staff to tackle a fire, and should only do so to allow safe passage to evacuate the building.
- Staff and pupils will congregate at the assembly points. This is located on the top playground, by the polytunnel
- Class teachers will take a register of their pupils
- The school business manager/ admin will take a register of all staff
- Staff and pupils will remain outside the building until the emergency services say it is safe to re-enter

The school will have special arrangements in place for the evacuation of people with mobility needs and fire risk assessments will also pay particular attention to those with disabilities. These are recorded on individual pupil PEEPs which are held in class. Class teachers are responsible for reviewing these at least annually and class based staff are responsible for making themselves familiar with these.

4. 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 Emma Jenkins 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.

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.

4.1 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

4.2 Legionella

- A water risk assessment has been completed on 24th April 2018 by Dakro Environmental Limited. Our site security attendant 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 3-5 years and when significant changes have occurred to the water system and/or building footprint
- The risks from legionella are mitigated by the following: monthly temperature checks, weekly flushing on unused outlets and quarterly disinfection of showers etc.

4.3 Asbestos

- An asbestos survey report was completed on 2nd July 2021 by EMS. The survey will be reviewed every 3-5 years and when significant changes have occurred to the building.
- 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

5. Risk Assessment

In accordance with the Management of Health and Safety at Work Regulations 1999, the School will carry out risk assessments of all activities that present a risk to employees or others. These risk assessments will be carried out in line with Health and Safety Executive guidance and the procedure for doing so is as follows:

- Identify the significant hazards involved in our work activity, or off-site visits, including residential trips and adventure activities;
- Decide who might be harmed and how;
- Evaluate the level of risk and decide if existing precautions are sufficient, or if more needs to be done;
- Record the significant findings of the assessment;
- Review the assessment when things change, or there is reason to believe that it is no longer valid.

Risk assessments will be undertaken by/ kept at:
Central Risk Register accessible to all staff on Common Staff drive

List of Risk Assessments:
A Central list of Risk Assessments is always available via Staff access to Common Staff where staff can easily access information on Risks and the necessary Control Measures. Risk Assessments will be reviewed annually by the appropriate Teacher.

Approval for the required action to remove or control risks will be given by:
Nicki Gilbert

6. 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

6.1 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 Emma Jenkins, school business 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 isolators switches are clearly marked to identify their machine
- Electrical apparatus and connections will not be touched by wet hands and will only be used in dry conditions
- Maintenance, repair, installation and disconnection work associated with permanently installed or portable electrical equipment is only carried out by a competent person

6.2 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 Emma Jenkins, school business manager.

6.3 Display screen equipment

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

6.4 Specialist equipment

- Parents are responsible for the maintenance and safety of their children’s wheelchairs.

- Physiotherapists and Occupation Therapists access each child and prescribe the use of specialist equipment as appropriate and train the staff to use the equipment correctly.
- Physiotherapists and Occupational Therapists continually access the equipment and will trigger and servicing and maintenance through their contractor.
- Staff check the equipment is safe to use before each use and report any issues to the therapy team accordingly.
- In school, staff promote the responsible use of wheelchairs, standing frames etc.

7. Lone working

Lone working may include:

- Late working
- Home or site visits
- Weekend working
- Site manager duties
- Site cleaning duties
- Working in a single occupancy office

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

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

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

8. 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 security attendant retains 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 rooves, is only permitted by trained persons

9. 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:
The school has adopted the **AAPEE** approach to safer manual handling:

- **Avoid** any unnecessary manual handling.
- If unavoidable **Asses** the load and move.
- **Plan** and **Prepare** the area, gather anything you may need to complete the move.
- Once everything is ready **Execute** the move in a safe manner
- Once completed **Evaluate** the move, what went well and what didn't, seek advice from Manual Handling trainer or SLT's for any near misses.

If it is awkward or heavy, use a mechanical aid, such as a trolley, or ask another person to help. All hoisting of students must be carried out by 2 staff. Westfield is a no lift school with exception to those classed as small children (nursery aged children) after a review to reduce risk has been carried out by Manual handling trainer.

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 carrying out any manual handling task staff to follow base to face approach. Create a stable base, feet shoulder width apart with one foot slightly in front of the other. Soft knees no more than 90 degrees over the foot. Spine in line with relaxed shoulder. Lead all moves with the face. Look and face in the direction you are going and carrying out the move to reduce twisting as much as possible. Test the load by tipping it towards you before lifting when ever possible. Do not twist with a load move you whole body with the load. Hold load as close to your centre of gravity as possible.

10. Consultation with Employees

The School will consult with its employees in accordance with the Safety Representative and Safety Committees Regulations 1977 and the Health and Safety (Consultation with Employees) Regulations 1996.
Consultation with employees over Health and Safety matters will be provided by:

- Emails
- Memos
- Staff Meetings
- Direct consultation

11.Training and Competency

Induction training for all new employees is the responsibility of:
Nicki Gilbert

Job specific training will be provided by:
Nicki Gilbert or the relevant qualified company/ individual depending upon need/specialism

Training records and Planner will be kept at/by:
Zoe Burge and Cara Lewis

Training will be identified, arranged and monitored by:
Nicki Gilbert and arranged by school administration - monitored by Zoe Burge

A First Aid Needs Risk Assessment detailing risk and provision of equipment and suitable trained staff has been undertaken.

We have currently have 19 qualified First Aiders on site and 8 who are also paediatric first aid trained. We have more than required for the number of staff and students

All Accidents/Incidents and work-related ill-health are recorded on Medical Tracker:

- https://www.medicaltracker.co.uk/

Responsibility for reporting accidents, diseases and dangerous occurrences under the RIDDOR regulations to the enforcing authorities is that of:

12. Site Security – Monitoring and security

The site security attendant is responsible for the security of the school site, in and out of school hours. He is responsible for visual inspections of the site, and for the intruder alarms and fire alarm systems.

Nicki Gilbert (head teacher), Julie Newcombe (deputy head teacher) and Emma Jenkins (school business manager) are additional key holders and will respond to an emergency.

To check our working conditions, and ensure our safe working practices are being followed, we will:

- Office and Administration areas – conduct regular audits and inspection, cross referencing with relevant Risk Assessments - these will be regularly reviewed and action taken where necessary
- Classrooms & Teaching areas – conduct regular audits and inspection, cross referencing with relevant Risk Assessments - these will be regularly reviewed and action taken where necessary
- Outdoor areas including car parking areas, pathways, vehicle movement etc. – conduct regular inspections, cross referencing with relevant Risk Assessments with the results recorded for actions taken for audit purposes
- Workplace safety for Teaching staff, pupils and visitors – conduct regular inspections, cross referencing with relevant Risk Assessments with the results recorded for actions taken for audit purposes. A Behaviour Management Plan for pupils as required and ensuring Student Safety Policy is reviewed annually.

Management of Contractors – The Admin Assistant/ Site Security Attendant will ensure that every Contractor working upon the Westfield School site is made aware of the visitors and contractors fire procedure and also of the asbestos register.

Responsibility for investigating accidents is that of:
Nicki Gilbert with advice from Local Authority

Responsibility for investigating work-related causes of sickness absence is that of:
Nicki Gilbert and/ or Human Resources

Responsibility for acting on investigation findings to prevent a reoccurrence is that of:
Nicki Gilbert, Governors with advice from the LA.

13. Off-site Safety

Westfield School have an Off-site visits and Residential Trip Policy. All relevant trips, visits and adventure activities will be booked through the EVOLVE system. Local visits will be Risk Assessed prior to the activity and an Off Site form completed.

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
- There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

EVOLVE Co-Ordinator (EVC) – Zoe Burge

Responsible for local visits – Zoe Burge & Nicki Gilbert

Risk Assessments retained for audit purposes

14. Lettings

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

15. Violence at work

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

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

16.Smoking

Smoking is not permitted anywhere on the school premises.

17.Infection prevention and control

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

17.1 Handwashing

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

17.2 Coughing and sneezing

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

17.3 Personal protective equipment

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

17.4 Cleaning of the environment

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

17.5 Cleaning of blood and body fluid spillages

- Clean up all spillages of blood, faeces, saliva, vomit, nasal and eye discharges immediately and wear personal protective equipment

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

17.6 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

17.7 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

17.8 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

17.9 Pupils vulnerable to infection

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

17.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 1.

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

18. 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

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.

In addition the school holds a staff wellbeing insurance that all staff can access. Details are displayed in both staffrooms and further information can be sought from Emma Jenkins, school business manager.

20.Emergency Procedures

21.1 Fire and Evacuation

Responsibility for ensuring the fire risk assessment is undertaken and completed is that of:

Escape routes are checked by the Site Security Attendant every day

Fire Extinguishers are maintained by Herefordshire Fire Protection Services Ltd and checked by the site security attendant each month:

External Contractors - Herefordshire Fire Protection Services Ltd

Emergency evacuation will be tested half termly and Fire Alarms will be tested every week

Responsibility for checking that the Emergency Lighting operates effectively:

Offices and Administration areas, Classrooms and Teaching areas – Monthly/ Complete discharge every 6 months to prevent battery memory. Refer to Fire Risk Assessment for final details – Barry Cartwright will undertake the monthly checks and Tann Synchronome will continue with the 6 monthly full discharge testing

Emergency Health & Safety situations – procedures and contacts:
The Admin Team will maintain a contact record of students and it will be held securely in the safe. The contact list will be reviewed termly by the Admin Team. This procedure will be reviewed annually.

21.Accident reporting

21.1 Accident record book

Medical Tracker will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it.

21.2 Reporting to the Health and Safety Executive

The school business manager will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The school business manager will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries. These are:
- Fractures, other than to fingers, thumbs and toes
- Amputations
- Any injury likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding)
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days
- Where an accident leads to someone being taken to hospital
- Where something happens that does not result in an injury, but could have done
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
- The collapse or failure of load-bearing parts of lifts and lifting equipment
- The accidental release of a biological agent likely to cause severe human illness
- The accidental release or escape of any substance that may cause a serious injury or damage to health
- An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here:
How to make a RIDDOR report, HSE
http://www.hse.gov.uk/riddor/report.htm

21.3 Notifying parents

The first aider will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day.

21.4 Reporting to Ofsted and child protection agencies

The head teacher 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.

The head teacher will also notify HCSB of any serious accident or injury to, or the death of, a pupil while in the school's care.

22. Monitoring

This policy will be reviewed by the school business manager every 3 years.

At every review, the policy will be approved by the head teacher and ratified by the full governing body

23. Links with other policies

This health and safety policy links to the following policies:

- First aid
- Risk assessment
- Supporting pupils with medical conditions
- Accessibility plan

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.

References & Bibliography

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.