

OAKDALE PRIMARY SCHOOL



Health and Safety Policy

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Introduction

The governors recognise the importance of a practical and useful policy with regard to the health and safety of all those on the school site.

This statement is to be read in conjunction with the Peterborough City Council Health and Safety Policy and all other applicable establishment policies.

The Headteacher and Governors are required by the Health and Safety at Work etc Act 1974 (HSWA) to develop and monitor a policy and to consult with representatives of Trade Unions when necessary.

Our school is the working environment for many groups of individuals and plays host to many others. It is important, therefore, that a safe environment is established in which children and adults can work together with confidence. It is the responsibility of the Headteacher and Governing body to ensure this is the case.

In order to promote this, we must all take responsibility for being vigilant and be aware of possible risks. Children and adults should be encouraged to keep themselves and one another safe and share any concerns they may have swiftly and appropriately.

We must also, however, be aware of the need to keep a balance between security and safety and the maintenance of a comfortable, welcoming learning environment. This policy aims to address and provide guidance on this balance, identifying individual and group responsibilities.

Our requirements

The Governing Body expect the Headteacher and staff to -

- ensure that all foreseeable hazards are identified, monitored and reported as appropriate.
- put in place arrangements to eliminate(where possible), reduce and control risks by –
 - using appropriate warning or information signs;
 - ensuring equipment is used and maintained in accordance with manufacturer's instructions;
 - implementing safe systems for the use and storage of substances hazardous to health;
 - arranging for the supply of suitable safe protective clothing or apparatus and enforcing the use of these.
- refer to other established school policies if needed which also set out healthy and safe practices:
 - Safeguarding
 - Asthma
 - Educational Visits
 - Behaviour & Anti-bullying
 - Pupil illness
 - Supporting pupils at school with medical conditions
 - Whistleblowing

This policy is based on advice from the Department for Education on health and safety in schools and to comply with 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.

Roles and Responsibilities

It is the responsibility of the Governors and the Headteacher to ensure that the policy remains appropriate, meets the law and is operated effectively within the establishment.

The Health & Safety at Work Act makes it the legal duty of the Employer* and its employees to take reasonable care for the health, safety and general welfare of all persons on the site and to co-operate with others to do so. Every employee should set a personal example through safe behaviour and comply with safety warnings. They should do nothing by act or admission which will adversely affect themselves or others.

The Governors and Headteacher are responsible for the application of all relevant arrangements and the communication of information to all staff, pupils and visitors.

All staff are required to familiarise themselves with the necessary information.

The Governors and Headteacher will make staff and pupils (and where appropriate the parents) aware of their responsibilities for health and safety through induction procedures, direct instruction, notices and the school handbook.

*Employer - Peterborough City Council

Responsibilities of individual staff members

The Health and Safety at Work Act 1974 requires governors and employees, according to their particular roles, to take the initiative on certain matters. The following list is a guide to the particular responsibilities that individuals have.

Know the safety measures and arrangements to be adopted in their own working areas and ensure that they are applied.

Observe standards of dress consistent with safety and/ or hygiene.

Keep good standards of hygiene and cleanliness.

Know and apply the procedures in respect of emergencies eg fire evacuation and lockdown procedures.

Co-operate with other employees and the safety representative in promoting health and safety measures.

Report any hazard or breakage.

Follow health and safety instructions and use appropriate safety equipment and protective clothing.

Maintain safely tools and equipment.

Report any incidents, assaults or 'near misses'.

Set a good example to the children in their care.

Supervise pupils to keep them safe and ensure that they know about emergency procedures and safety measures.

Ensure that pupils' bags, coats and belongings are safely stowed away.

Include all relevant aspects of safety in the curriculum.

Make parents/ volunteers aware of safety procedures in the classroom/ work area.

Give clear instruction and warning as often as necessary.

Responsibilities of the Governing Body

Ensure the high profile of health and safety in relation to financial planning, personnel decisions and in-service training.

Ensure that policies relating to health and safety are in place and updated regularly.

Enable a member of the governing body to have a key monitoring role in relation to health and safety including a termly walk around the school building with the site supervisor and Headteacher.

Ensure that safety standards for purchased goods and equipment are met and that items offered for sale by the school are safe.

Responsibilities of the Headteacher

To ensure that the school meets as far as is reasonably practicable, the requirements of the health and safety legislation.

To regularly review the safety and security of the school building during an annual Governors' meeting.

To undertake risk assessments as and when required and review regularly.

To put into practice and monitor the procedures described in associated policies i.e. first aid, emergency, fire, reporting of defects.

To act upon referrals from employees.

To ensure staff and pupils comply with agreed procedures.

To record and inform relevant external agencies as and when appropriate.

To ensure access to this policy and other health and safety information as legally required.

Advise and inform the Governing Body as to health and safety practice, legislation and compliance.

To ensure that appropriate logs and records of incidents are completed and acted upon.

To ensure policies and employees are updated as to new legislation and guidance.

To ensure that employees have adequate training and information to enable them to act upon health and safety recommendations.

To ensure that temporary/ supply staff are informed of health and safety practice

To report matters of health and safety to the governing body.

To report on any audits/ inspections to the governing body and follow-up any necessary actions.

To ensure that procedures are in place to ensure the safety of contractors and hirers.

To make sure that fire drills are held at least once per term and cover a variety of situations including the blocking of an exit, a child not registering and lunchtime evacuation.

To ensure that escape routes are kept clear and monitor on a daily basis for hazards and emerging issues effecting the health and safety of staff, pupils and visitors, immediately acting with a view to the highest priority the safety of all on site.

Ensure adequate first aid cover is provided.

Responsibilities of the Site Manager

Undertake daily visual checks of the site and environment and address any issues that arise either by undertaking necessary action to resolve or repair or escalate any further issues via the premises Log/Office Manager.

Follow the agreed Health and Safety checks as defined by the Headteacher (see H&S file).

Conduct health and safety walks with; HT, Governors, contractors and FM as appropriate.

Identify any risks in the building or environment and in conjunction with the HT, compile appropriate risk assessments.

Ensure the building and environment is safe and secure following agreed processes.

Responsibilities of the Finance Manager

Facilitate and action external contractors responsible for health and safety checks of the building and premises.

Liaise with the Site Manager to prioritise logged issues and ensure these are actioned in a timely manner.

Identify source of problem and manage contractors for completion of any remedial action required.

Meet regularly with HT and site manger to ensure all H&S issues are addressed.

Maintain records of safety checks conducted by external contractors.

Responsibilities of visitors

Regular visitors and other users of the school will be required to observe the safety rules of the school. The Head teacher or Deputy Head will ensure that visitors are informed of health and safety matters which may affect them during their visit as part of our Induction procedures.

Contractors

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

Parents helping out in school will be made aware of the health and safety arrangements by the teacher who they are working with.

The Governing Body and Head teacher have agreed that the following procedures/ codes of practice shall be followed within the school:

Defects

Any member of staff finding a defect in the building, furniture or equipment will take steps to remove the hazard or ensure that the risk is minimised and report the details immediately to the Site Manager or Head teacher.

The Site Manager, in consultation with the Head teacher or Finance Manager, if necessary, will take steps to have the defect rectified, i.e. by contacting property services via the hotline, school technical services or other competent contractor. Minor defects to be rectified by the site manager.

Details of significant defects will be recorded by the site manager.

Any member of staff discarding a faulty item or electrical item must ensure this item is removed from the Electrical Appliance Inventory.

Health & Safety Arrangements

Site Security

The school caretaker 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 and fire alarm systems.

All visitors to the school are expected to sign in and out at main reception and be provided with Safeguarding information. When deemed necessary they will be accompanied around the school by a member of staff. Reception will also issue each visitor an ID badge for security purposes which must be worn at all times whilst on site.

Fire Safety

The Headteacher and Site Manager are our designated Fire Marshalls.

Fire alarm system is maintained by a competent contractor, fire extinguishers are tested regularly, a fire risk assessment is undertaken for the school and recommendations are implemented as advised by the Fire Officer, good house-keeping, no smoking site etc.

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 and the outcome is recorded.

Staff have annual fire safety training including the use of Fire extinguishers.

The fire alarm is a loud continuous bell.

Fire alarm testing will take place once a week.

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

In the event of a fire:

The alarm will be raised immediately by whoever discovers the fire and emergency services contacted. Evacuation procedures will also begin immediately.

Staff and pupils will congregate at the assembly points. These are clearly signposted on the playground.

Class teachers will take a register of pupils, which will then be checked against the attendance register of that day.

The Finance Manager 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.

All staff must wear High visibility jackets during Fire evacuations to support any emergency services.

The school will have special arrangements (PEEP) in place for the evacuation of staff or pupils with mobility needs and fire risk assessments will also pay particular attention to those with disabilities.

Lock down.

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
- Biological agents that cause diseases, such as leptospirosis or legionnaires disease

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

Our staff use and store hazardous products in accordance with instructions on the product label and manufacturers safety data sheet. All hazardous products are kept in their original containers, with clear labelling

and product information. Hazardous products are stored in the cleaner's cupboard which is kept locked. Any hazardous products are disposed of in accordance with specific disposal procedures.

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.

Water Hygiene Measures / Legionella

- These checks are undertaken by external contractors regularly, details are kept within school office.

Asbestos Containing Materials

- Arrangements are in place to ensure that contractors are made aware of any asbestos containing materials 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 containing materials throughout the school site and this is known as the Premises Asbestos Register.

Work 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.

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 the Caretaker or School Administrator immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed.
- Only trained staff members can check plugs.
- Portable appliance tests (PAT) are carried out on all portable appliances every year.
- 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.
- Fixed electrical installations within the school are inspected and tested periodically by a competent contractor.

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 Caretaker.
- PE equipment is checked annually by an external competent contractor.

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).

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.

Working at Height

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

In addition:

The caretaker retains ladders for working at height.

Pupils are prohibited from using ladders.

Staff will wear appropriate footwear and clothing when using ladders.

Contractors are expected to provide their own ladders for working at height.

Before using a ladder, staff are expected to conduct a visual inspection to ensure its safety.

Access to high levels, such as roofs, is only permitted by trained and competent persons.

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.

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.
- Where required, specific manual handling training will be provided.

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, 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.
- Risk Assessment are checked by the Headteacher and Educational visits lead and recorded on the Evolve system.

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.

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. Staff are also expected to record any incidents of violence at work on the PCC accident & incident reporting system.

Smoking

Smoking is not permitted anywhere on the school premises.

Infection prevention and control

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

Hand-washing

- 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

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

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

Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, as detailed in Appendix 1 – and in the School's Pupil Illness policy.

During the Covid Pandemic we will follow all procedures as detailed in the School Risk Assessment which is regularly updated and shared with all staff. This can be located on the school website.

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.

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. The school provides all staff with access to the Employee Assistance programme.

Systems are in place within the school for responding to individual concerns and monitoring staff workloads.

First Aid Procedures and Accident Reporting

The large majority of staff are trained in First Aid at work or Paediatric First Aid.

There are first aid kits in each classroom, held centrally for use at playtimes and for use on Educational visits.

First aiders are responsible for administering the accident reporting procedure.

Injuries requiring medical attention must be recorded in the accident book. In the case of any head injury, a Head Injury form must be completed. It is the duty of adults in school to ensure that the form is passed to parents or a phone call is made to inform them of a head injury.

Where a serious injury is suspected, parents will be contacted immediately. In cases where parents cannot be found, the Headteacher or her representative will take the steps necessary to secure expert medical assistance or an ambulance.

All work related accidents and incidents should be reported to PCC for employees, visitors, pupils, contractors etc.

All staff should be made aware of any health problems relating to any particular child and be kept informed of any vital changes in their condition. All classrooms have a health list that records any conditions for staff to access. Some children may have an individual Health Care Plan.

RIDDOR Reporting

The Health and Safety Representative/Headteacher 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).

This will be reported to the LA H&S team who will determine whether the accident or injury meets the requirements for reporting under RIDDOR and will submit the RIDDOR report to the HSE on behalf of the school.

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 in the school office. These will be made by the school administrator

Information, Instruction, Supervision and 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.

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 (PHE).

Rashes and skin infections

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended.
Chickenpox	Until all vesicles have crusted over	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to chickenpox. Chickenpox can also affect pregnancy if a woman has not already had the infection.
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting.
German measles (rubella)*	Four days from onset of rash (as per " Green Book ")	Preventable by immunisation (MMR x2 doses). If a pregnant woman comes into contact with German measles she should inform her GP and antenatal carer immediately to ensure investigation.
Hand, foot and mouth	None	
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period.
Measles*	Four days from onset of rash	Preventable by immunisation (MMR x2 doses). Some medical

		<p>conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to measles. Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed she should immediately inform whoever is giving antenatal care to ensure investigation.</p>
Molluscum contagiosum	None	A self-limiting condition.
Ringworm	Exclusion not usually required	Treatment is required.
Roseola (infantum)	None	
Scabies	Child can return after first treatment	Household and close contacts require treatment.
Scarlet fever*	Child can return 24 hours after starting appropriate antibiotic treatment	Antibiotic treatment is recommended for the affected child.
Slapped cheek syndrome/fifth disease (parvovirus B19)	None (once rash has developed)	<p>Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to parvovirus B19. Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), inform whoever is giving antenatal care as this must be investigated promptly.</p>

Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune, i.e. have not had chickenpox. It is spread by very close contact and touch. If further information is required, contact your local PHE centre. Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to shingles. Shingles can also affect pregnancy if a woman has not already had chickenpox.
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.

Diarrhoea and vomiting illness

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting	
E. coli O157 VTEC Typhoid* [and paratyphoid*] (enteric fever) Shigella (dysentery)	Should be excluded for 48 hours from the last episode of diarrhoea. Further exclusion may be required for some children until they are no longer excreting	Further exclusion is required for children aged 5 years or younger and those who have difficulty in adhering to hygiene practices. Children in these categories should be excluded until there is evidence of microbiological clearance. This guidance may also apply to some contacts who may also require microbiological clearance. Please consult your local PHE centre for further advice
Cryptosporidiosis	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled

Respiratory infections

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Flu (influenza)	Until recovered	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.
Tuberculosis*	Always consult your local PHE centre	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.
Whooping cough*	Five days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local PHE centre will organise any contact tracing necessary.

Other infections

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Conjunctivitis	None	If an outbreak/cluster occurs, consult your local PHE centre.

Diphtheria*	Exclusion is essential. Always consult with your local HPT	Family contacts must be excluded until cleared to return by your local PHE centre. Preventable by vaccination. Your local PHE centre will organise any contact tracing necessary.
Glandular fever	None	
Head lice	None	Treatment is recommended only in cases where live lice have been seen.
Hepatitis A*	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)	In an outbreak of hepatitis A, your local PHE centre will advise on control measures.
Hepatitis B*, C*, HIV/AIDS	None	Hepatitis B and C and HIV are bloodborne viruses that are not infectious through casual contact. All spillages of blood should be cleaned up immediately (always wear PPE). When spillages occur, clean using a product that combines both a detergent and a disinfectant. Use as per manufacturer's instructions and 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. A spillage kit should be available for blood spills.
Meningococcal meningitis*/ septicaemia*	Until recovered	Meningitis C is preventable by vaccination There is no reason to exclude siblings or other close contacts of a case. In case of an outbreak, it may be necessary to provide antibiotics with or without meningococcal vaccination to close school contacts. Your local PHE centre will advise on any action is needed.
Meningitis* due to other	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination.

Bacteria		There is no reason to exclude siblings or other close contacts of a case. Your local PHE centre will give advice on any action needed.
Meningitis viral*	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case. Contact tracing is not required.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. If further information is required, contact your local PHE centre.
Mumps*	Exclude child for five days after onset of swelling	Preventable by vaccination
Threadworms	None	Treatment is recommended for the child and household contacts.
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic.

* denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control). In addition, organisations may be required via locally agreed arrangements to inform their local PHE centre. Regulating bodies (for example, Ofsted/Commission for Social Care Inspection (CSCI)) may wish to be informed.



OAKDALE PRIMARY SCHOOL

POLICY APPROVAL FORM

Health and Safety Policy

Signed:

(Headteacher)

Printed name: Ilona Wrigley

Date approved:

Signed:

(Chairperson Oakdale Primary School) Diane Ward