



# PRINCE REGENT

## STREET TRUST

# Health & Safety Policy

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## **Contents:**

### Statement of intent

1. [Legal framework](#)
  2. [Roles and responsibilities](#)
  3. [Training and first aid](#)
  4. [Contacting the emergency services](#)
  5. [Accident reporting and investigation](#)
  6. [Active monitoring system](#)
  7. [Risk assessment](#)
  8. [Slips and trips](#)
  9. [Fire safety](#)
  10. [Sharps](#)
  11. [Evacuation, invacuation, lockdown and bomb threat procedure](#)
  12. [Visitors and contractors](#)
  13. [Construction and maintenance](#)
  14. [Work-related hazards](#)
  15. [Maintaining equipment](#)
  16. [Hazardous materials](#)
  17. [Asbestos management](#)
  18. [Cleaning](#)
  19. [Infection control](#)
  20. [New and expectant mothers](#)
  21. [Occupational stress](#)
  22. [Allergens and anaphylaxis](#)
  23. [Medication](#)
  24. [Violence at work](#)
  25. [Smoking](#)
  26. [Security and theft](#)
  27. [Severe weather](#)
  28. [School trips and visits](#)
  29. [Near misses](#)
  30. [Monitoring and review](#)
- [Appendix A. Recommended absence period for preventing the spread of infection](#)

## Statement of intent

At **Prince Regent Street Trust**, we are committed to the health and safety of our staff, pupils, and visitors. Ensuring the safety of our community is of paramount importance and this policy reflects our dedication to creating a safe learning environment.

We are committed to:

- Providing a productive and safe learning environment.
- Preventing accidents and any work-related illnesses.
- Compliance with all statutory requirements.
- Minimising risks via assessment and policy.
- Providing safe working equipment and ensuring safe working methods.
- Including all staff and representatives in health and safety decisions.
- Monitoring and reviewing our policies to ensure effectiveness.
- Setting high targets and objectives to develop the school's culture of continuous improvement.
- Ensuring adequate welfare facilities are available throughout our school.
- Ensuring adequate resources are available to address health and safety issues, so far as is reasonably practicable.

## 1. Legal framework

This policy has due regard to all relevant legislation including, but not limited to, the following:

- Health and Safety at Work etc. Act 1974
- The Workplace (Health, Safety and Welfare) Regulations 1992
- The Management of Health and Safety at Work Regulations 1999
- The Control of Substances Hazardous to Health Regulations 2002
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- The Construction (Design and Management) Regulations 2015
- The Personal Protective Equipment at Work Regulations 1992
- The Education (School Premises) Regulations 1999
- The Ionising Radiation Regulations 2017 (IRR17)
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)

This policy has due regard to national guidance including, but not limited to, the following:

- DfE (2022) 'Health and safety: responsibilities and duties for schools'
- DfE (2017) 'Safe storage and disposal of hazardous materials and chemicals'
- HSE (2024) 'Sensible health and safety management in schools'
- DfE (2022) 'First aid in schools, early years and colleges'
- UK Health Security Agency (2024) 'Health protection in children and young people settings, including education'

This policy operates in conjunction with the following trust and school policies:

- First Aid Policy
- Risk Management Policy



- School Uniform Policy
- Invacuation, Lockdown and Evacuation Policy
- Personal Emergency Evacuation Plan (PEEP)
- Lockdown Procedures
- Visitor Policy
- Contractors Policy
- Manual Handling Risk Assessment
- Manual Handling Policy
- Working at Heights Policy
- Lone Worker Policy
- Staff Wellbeing Policy
- Allergen and Anaphylaxis Policy
- Supporting Pupils with Medical Conditions Policy
- Administering Medication Policy
- Data Protection Policy
- Educational Visits and School Trips Policy
- Evacuation Procedures

## 2. Roles and responsibilities

The Board of Trustees, in conjunction with the [Local Governing Bodies](#), will:

- Ensure it provides a safe place for all users of the sites, including staff, pupils and visitors.
- Oversee that staff receive training and instruction so that they can perform their duties in a healthy and safe manner.
- Ensure whole-school familiarity with the requirements of the appropriate legislation and codes of practice.
- Create and monitor a management structure responsible for health and safety in the school.
- Ensure there is a detailed and enforceable policy for health and safety, and that the policy is implemented by all.
- Assess the effectiveness of the policy and ensure any necessary changes are made annually.
- Identify the risks relating to possible accidents and injuries and make reasonable adjustments to prevent them occurring.
- Ensure the schools have secured safe means of entry and exit for all site users.
- Ensure the schools can provide equipment, grounds and systems of work which are safe.
- Ensure safe arrangements are made for the handling, storage and transportation of any articles and substances.
- Ensure staff have safe and healthy working conditions that comply with statutory requirements, codes of practice and guidance.
- Where necessary, ensure the schools can provide protective equipment and clothing, along with any necessary guidance and instruction for safe use.



The Headteacher will:

- Have overall responsibility for the day-to-day development and implementation of safe working practices and conditions for all staff, pupils and visitors.
- Set the direction for effective health and safety management.
- Support staff with any queries or concerns regarding health and safety.
- Introduce management systems and practices that ensure risks are dealt with sensibly, responsibly and proportionately.
- Take all reasonably practicable steps to ensure this policy is implemented across all areas of the school and by other members of staff.
- Consult with North Yorkshire Risk Safety Advisor (SLA) to ensure the school meets its health and safety duties.
- Be responsible for investigating accidents and incidents, to understand causes and amend risk assessments as required.
- Be the designated contact with the Local Authority and the HSE where necessary.
- Identify hazards by conducting risk assessments.

All members of 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.
- Cooperate with their employers on health and safety matters.
- Carry out their work in accordance with training and instructions.
- Inform the employer of any work situation representing a serious and immediate danger, so that remedial action can be taken.
- Familiarise themselves with the Health and Safety Policy and aspects of their work related to health and safety.
- Avoid any conduct which puts themselves or others at risk.
- Be familiar with all requirements laid down by the governing board.
- Ensure that all staff, pupils and visitors are applying health and safety regulations and adhering to any rules, routines and procedures in place.
- Ensure all machinery and equipment is in good working order and safe to use, including adequate guards, and ensure such equipment is not used improperly.
- Use the correct equipment and tools for the job and any protective clothing supplied.
- Ensure any toxic, hazardous or flammable substances are used correctly, and stored and labelled as appropriate.
- Report any defects in equipment or facilities to the designated health and safety officer.
- Take an interest in health and safety matters and suggest any changes that they feel are appropriate.
- Make suggestions as to how the school can reduce the risk of injuries, illnesses and accidents.
- Exercise good standards of housekeeping and cleanliness.
- Adhere to their common law duty to act as a prudent parent would when in charge of pupils.

Pupils will:

- Exercise personal responsibility for the health and safety of themselves and others.



- Dress in a manner that is consistent with safety and hygiene standards.
- Respond to instructions given by staff in an emergency.
- Observe the health and safety rules of the school.
- Not misuse, neglect or interfere with items supplied for their, and other pupils', health and safety.

The Trust's Chief Operating Officer and Estates Manager will work closely with each Headteacher and Site Manager to ensure all aspects of Health & Safety are addressed and maintained within each school site. Members of staff with responsibilities for particular areas of Health & Safety, such as Fire Wardens and First Aiders will be displayed in each school and an up-to-date list uploaded by the school's Office Manager onto Every Compliance Platform for all staff to access. The North Yorkshire Education Services (NYES) carry out Health & Safety audits across the trust and provide advice on Health & Safety issues.

### 3. Training and first aid

The Trust will ensure that staff are provided with the health and safety training they need for their job. This may not always mean attendance at training courses; it may simply involve providing staff with basic instructions and information about health and safety in the school.

Staff will be provided with regular training opportunities and have access to support where needed. Staff are expected to undertake appropriate CPD in order to further contribute to the running and success of the school.

Staff will be trained on how to:

- Assess risks specific to their role.
- Meet their roles and responsibilities identified within this policy.

Where relevant to their role, staff will receive specific training in:

- Using industrial machinery.
- Managing asbestos.
- Having responsibility for the storage and accountability for potentially hazardous materials.

#### First aid

The schools will act in accordance with the First Aid Policy at all times. The schools will ensure that ample provision is made for both trained personnel and first-aid equipment on-site.

The Headteacher will ensure that there is an appropriate number of first aid trained staff members working within in each classroom.

### 4. Contacting the emergency services

The Headteacher will certify that procedures for ensuring safety precautions are properly managed are discussed, formulated and effectively disseminated to all staff.



Staff will contact the emergency services in an emergency. Staff will alert their colleagues to the incident, if it is safe and appropriate to do so.

Where an ambulance is called for a pupil, office staff will contact the pupil's parent. Where necessary, all pupils will be evacuated from the building and taken to the designated emergency assembly point. Staff will be aware of any pupils who have a Personal Emergency Evacuation Plan (PEEPs). Staff will be responsible for the safety of pupils and responding to any questions from the emergency services, as best they can.

## 5. Accident reporting and investigation

All accidents and incidents, including near-misses or dangerous occurrences, will be reported as soon as possible to the Headteacher.

More in-depth information concerning reporting accidents and near-misses can be found in the following sections of this policy.

Schools will always record and report work-related injuries to staff members or pupils. They should be recorded in the **Evolve Accident Book**.

### Reporting significant accidents

Significant accidents, as defined in the **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013**, will be reported to the HSE at the earliest opportunity.

Schools will always report 'specified injuries' to the HSE without delay. These injuries include the following:

- Accidents to employees causing either death or major injury
- Accidents resulting in employees being away from work or being unable to perform their normal work duties for more than seven consecutive days (this seven-day period does not include the day of the accident)
- Fractures, other than to fingers, thumbs and toes
- Amputation of an arm, hand, finger, thumb, leg, foot or toe
- Any injury likely to lead to permanent loss of sight or reduction in sight in one or both eyes
- Any crush injury to the head or torso, causing damage to the brain or internal organs
- Serious burn injuries (including scalding) which cover more than 10 percent of the whole body's surface area or cause significant damage to the eyes, respiratory system or other vital organs
- 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 that requires resuscitation or admittance to hospital for more than 24 hours

Additional reportable occurrences include the following:

- The collapse, overturning or failure of any load-bearing part of any lifting equipment



- The explosion, collapse or bursting of any closed vessel or pipe work
- Electrical short circuit or overload resulting in a fire or explosion
- Unintentional explosion, misfire or failure of demolition to cause the intended collapse, projection of material beyond a site boundary, or injury caused by an explosion
- Any accidental release of a biological agent likely to cause severe human illness
- Any collapse or partial collapse of scaffolding over five metres in height
- When a dangerous substance being conveyed by road is involved in a fire or is released
- The unintended collapse of any building or structure under construction, alteration or demolition, including walls or floors
- Any explosion or fire resulting in the suspension of normal work for over 24 hours
- Any sudden, uncontrolled release in a building of: 200kg or more of flammable liquid, 10kg or more of flammable liquid above its boiling point, 10kg or more of flammable gas, or 500kg or more of these substances if the release is in the open air
- Accidental release of any substances which may damage health
- Serious gas incidents
- Poisonings
- Skin diseases including, but not limited to: occupational dermatitis, skin cancer, chrome ulcer, or oil folliculitis/acne
- Lung diseases including, but not limited to: occupational asthma, farmer's lung, asbestosis, or mesothelioma
- Infections including, but not limited to: leptospirosis, hepatitis, anthrax, legionellosis, or tetanus
- Other conditions such as occupational cancer, certain musculoskeletal disorders, decompression illness and hand-arm vibration syndrome

Schools will also report occupational diseases upon receipt of a written diagnosis from a doctor that a staff member has a reportable disease linked to occupational exposure. These include the following:

- Carpel tunnel syndrome
- Severe cramp of the hand or forearm
- Occupational dermatitis, e.g. from work involving strong acids or alkalis
- Hand-arm vibration syndrome
- Occupational asthma, e.g. from wood dust and soldering using rosin flux
- Tendonitis or tenosynovitis of the hand or forearm
- Any occupational cancer
- Any disease attributed to an occupational exposure to a biological agent

Work-related stress and stress-related illnesses will not be reported since they are not usually just one distinct event. RIDDOR stipulates that to be reportable, an injury must have resulted from an accident arising out of or in connection with work.

Schools will only report accidents that are:

- Discrete
- Identifiable
- Unintended incidents which cause physical injury





## Reporting procedures

Should an incident require reporting to the **Incident Control Centre (ICC)** (part of the HSE), the Headteacher will file a report as soon as is reasonably possible. They will complete the relevant report on the HSE website: <http://www.hse.gov.uk/riddor/report.htm>. The schools will not submit written accident reports to the HSE, except for in exceptional circumstances. The schools will report all accidents and injuries online where possible using the above web address. Fatal and specified injuries, as outlined in section 9, may only be reported using the telephone service on 0845 300 9923, open Monday to Friday 8.30am to 5pm.

## Reporting hazards

Staff, pupils, contractors and visitors have a legal duty to report any condition or practice they deem to be a hazard. **All hazards should be reported to the Site Manager, Office Manager or Headteacher as soon as possible. They should then record the hazard as an Issue on Every Compliance Platform and address immediately to minimise the risk.**

## Accident investigation

All accidents, however minor, will be investigated by the Headteacher and the outcomes recorded in the **Evolve Accident Book**. The length of time dedicated to each investigation will vary on the seriousness of the accident. After an investigation takes place, a risk assessment will be carried out, or the existing assessment amended, to avoid reoccurrence of the accident.

The Headteacher will undertake regular evaluations of all reported incidents. They will then identify patterns and trends in order to take corrective action and minimise the reoccurrence of any incident or illness.

## 6. Active monitoring system

The Trust's procedure for actively monitoring its system will include:

- Annual audits, including fire risk assessments and health and safety audits.
- Examination of documents to ensure compliance with standards.
- Regular inspection of premises, plants and equipment.
- Regular reports and updates to the headteacher.
- External measures, such as surveys by contractors and service providers, along with visits from Environmental Health and Ofsted.

## 7. Risk assessment

The Headteacher has overall responsibility for ensuring potential hazards are identified and risk assessments are completed for all areas in the school. The Headteacher and Estates Manager will be consulted when risk assessments are being carried out.

Risk assessments will consider the needs of staff, pupils, visitors and contractors. Risk assessments will identify all defects and potential risks along with the necessary solutions or control measures.



Risk assessments will be reviewed if:

- There is any reason to suspect that they are no longer valid.
- There has been a significant change in related matters.
- The Board of Trustees will be informed of risk assessments, allowing issues to be prioritised and actions to be authorised, along with funds and resources.

The school will record any significant findings of any risk assessments, including the following:

- The identified hazards
- How people might be harmed by them
- What the school has implemented to control the risk

The schools will appoint an educational visits coordinator (EVC) and ensure they receive the training necessary to carry out the role. Where there is no educational visits coordinator, the headteacher will perform this duty. The educational visits coordinator will ensure risk assessments are completed by staff leading day trips or residential stays.

## 8. Slips and trips

In line with HSE guidance, control measures are in place to effectively control slip and trip risks. Schools utilise the following procedure:

- Identify the hazards – risk factors considered include:
  - Environmental (floor, steps, slopes, etc.)
  - Contamination (water, food, litter, etc.)
  - Organisational (task, safety, culture, etc.)
  - Footwear (footwear worn for evening events may not be in line with the School Uniform Policy)
  - Individual factors (rain, supervision, pedestrian behaviour, etc.)
- Decide who might be harmed and how
- Consider the risks and decide if existing precautions are sufficient, or if further measures need to be introduced
- Record the findings
- Review the assessment regularly and revise if necessary

Schools will remain especially vigilant to the following hazards:

- Members of staff or pupils running or carrying heavy or awkward items
- Wearing unsuitable footwear
- Poor lighting – particularly where there are uneven surfaces and level changes
- Contamination
- Obstructions, e.g. bags and trailing cables

## 9. Fire safety

All staff fully understand and effectively implement the fire evacuation plan, which will be implemented in the event of a fire.



The Headteacher is responsible for certifying that procedures for ensuring that safety precautions are properly managed will be discussed, formulated and effectively disseminated to all staff. Staff will receive fire safety training to ensure they understand the procedure for fire drills and the use of fire extinguishers.

The school will test evacuation procedures on a **termly** basis. Firefighting equipment will be checked on an **annual** basis by an approved contractor. Fire alarms will be tested **weekly** and records will be maintained and held on **Every Compliance Platform**. Emergency lighting will be tested on a **monthly** basis, and records will be maintained and held on **Every Compliance Platform**.

The evacuation of visitors and contractors will be the responsibility of the person they are visiting or working for.

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 points. See maps in schools.
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day.
- The Headteacher 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 (PEEPs) and fire risk assessments will also pay particular attention to those with disabilities.

## 10. Sharps

For the purposes of this policy, “**sharps**” is defined as sharp objects such as needles, scalpels, razor blades and broken glass which pose a risk of an accidental penetrating injury or laceration or puncture to skin.

Sharps are not likely to be found commonly on school premises; however, staff will be vigilant towards the following circumstances in which sharps may be found:

- During school-based vaccination programmes
- Where an individual within the school requires injections to manage a health condition
- Where a pupil brings a sharp into the school
- Where glass is broken within the school, or broken glass is found on or around the school premises
- Where drug paraphernalia, e.g. heroin needles, is found on or around the school premises



In the context of this policy, offensive weapons are not considered sharps.

Where an individual brings a sharp onto the school premises, e.g. a needle to manage a health condition, they will be responsible for its disposal. The use of needles for medication for an individual on the school premises will be managed in line with the Administering Medication Policy.

The Headteacher will ensure that all pupils are informed that, where they see a sharp, they must alert the nearest staff member immediately and avoid touching the sharp.

Where a sharp is found, the nearest staff member will move all pupils away from the area in order to prevent accidental injuries and will guard the sharp while alerting another staff member to bring the sharps retrieval kit. Sharps retrieval kits will contain:

- Protective gloves.
- A pair of long-stemmed tongs.
- A pincer tool, e.g. tweezers.
- Brush and pan.
- Sharps box for disposal.

Sharps boxes will be marked 'Danger: Contaminated Sharps' and 'Destroy by Incineration'. They will be kept off the floor and out of the reach of pupils. Sharps boxes must not be filled above the designated fill line on the outside of the box. Once filled, boxes will be sealed immediately and removed by a clinical waste contractor or a specialist collection service.

The staff member will check the surrounding area carefully to ensure that no other sharps are in the vicinity. Where the sharp cannot be removed immediately, e.g. due to a delay in obtaining the sharps retrieval kit, the nearest staff member will place a cone or box on top of the sharp to prevent anyone from touching or finding it.

The following procedure will be followed in the event that sharps are found on the school premises:

- Staff will wear protective gloves and will not handle sharps with bare hands.
- Staff will not handle sharps while barefoot or wearing open shoes, as injury may occur if the sharp is dropped on feet.
- Only one sharp will be handled at a time and, where there are multiple, sharps will be carefully separated using the pair of tongs.
- Sharps will be picked up using the relevant equipment, e.g. pair of tongs or brush and pan for broken glass, and place it into the sharps box, which will be brought to the sharp rather than the other way around.
- The appropriate staff, including the headteacher and site manager, will be informed.
- The incident will be recorded, with details of when, where and by whom the sharp was found.
- Sharps will be disposed of quickly and safely into the school's sharps bin.

### **Sharps injury**

First aid staff will be trained in handling sharps injuries, and will adhere following guidelines in case of injury from a contaminated sharp:

- Encourage the wound to bleed gently, ideally by holding it under running water
- Wash the wound using water and soap



- Avoid scrubbing the wound while washing
- Avoid sucking the wound
- Dry the wound and cover it with a waterproof dressing
- Seek medical advice

Injuries will be handled in line with the First Aid Policy.

## **11. Evacuation, invacuation, lockdown and bomb threat procedure**

The schools will follow the procedure outlined in their Invacuation, Lockdown and Evacuation Policy and in Personal Emergency Evacuation Plans (PEEPs) in the event of a crisis.

In the event of an emergency, the procedures outlined in the school's Invacuation, Lockdown and Evacuation Policy, the Evacuation Procedure, and the appropriate Lockdown Procedure will be followed.

## **12. Visitors and contractors**

The procedures outlined in the Visiting Speakers Policy and the Volunteers Policy will be implemented by relevant staff when receiving visitors to the school.

Anyone hiring the premises will be made aware of their health and safety obligations when making the booking.

Contractors will be responsible for the health and safety of their employees and for ensuring safe working practices. They will not constitute a hazard to staff, pupils or visitors to the school.

## **13. Construction and maintenance**

When undertaking construction or maintenance work, the trust will do so in accordance with The Construction (Design and Management) (CDM) Regulations 2015. Construction work means the carrying out of any building, civil engineering or engineering construction work, including:

- The construction, alteration, conversion, fitting out, commission, renovation, repair, upkeep, redecoration, or other maintenance, decommissioning, demolition or dismantling of a structure.
- The preparation for an intended structure, including site clearance, exploration, investigation (but not site survey) and excavation (but not pre-construction archaeological investigations), and the clearance or preparation of the site or structure for use or occupation at its conclusion.
- The installation, commission, maintenance, repair or removal of mechanical, electrical, gas, compressed air, hydraulic, telecommunications, computer or similar services which are normally fixed within or to a structure.



- The assembly on site of prefabricated elements to form a structure or the disassembly on site of the prefabricated elements which, immediately before such disassembly, formed a structure.
- The removal of a structure, or of any product or waste resulting from demolition or dismantling of a structure, or from disassembly of prefabricated elements which immediately before such disassembly formed such a structure.

The Estate Manager / Headteacher will ensure that all construction and maintenance projects have a formally appointed principal designer and principal contractor. The Estate Manager / Headteacher will liaise with the principal contractor to identify if the scope of the project means that it should be notified to the HSE. The Estate Manager / Headteacher will also ensure that:

- The principal designer and principal contractor are provided with a 'client brief/CDM pre-construction information' at the earliest opportunity, to contain relevant information which should, as a minimum, include the following:
  - What the school wants built or maintained
  - The site and existing structures
  - Information about hazards, such as asbestos
  - Timescales and budget for the build
  - How the school expects the project to be managed
  - CDM appointments of the principal contractor and/or principal designer
  - Welfare arrangements
  - Details of the nearest A&E department
- The principal contractor draws up a Construction Phase Plan that explains how health and safety risks will be managed – permission will not be given for construction or maintenance work to begin until this is in place.
- The principal designer prepares a health and safety file containing information that will help the school manage risks associated with any future maintenance, repair, construction or demolition work.
- The roles, functions and responsibilities of the project team are clearly defined in writing, e.g. in the project plan.
- Sufficient time and resources are allocated, and effective mechanisms are in place to ensure good communication, cooperation and coordination between all members of the project team.
- The principal contractor has made arrangements for adequate welfare facilities for their workers before the construction or maintenance work starts.
- Following completion of the project, the health and safety file is handed over to the headteacher, and is made available to anyone who needs to alter or maintain the building.

The Estate Manager will hold **weekly** progress meetings with the project team to ensure that all members are carrying out their roles as required. Where the project is for a new workplace or alterations to an existing workplace, it must also meet the standards set out in The Workplace (Health, Safety and Welfare) Regulations 1992.



## **14. Work-related hazards**

### **Manual handling**

Manual handling can prove hazardous when it has the potential to cause a musculoskeletal disorder. This can be due to repetition of the action, the force and/or posture involved in the completion of a handling task, and/or a person's ability to hold or grasp the particular item in a safe and balanced manner.

The schools will, as far as practicable, will reduce the need for members of staff to carry out any manual handling tasks that involve a risk of injury. Where manual handling tasks are necessary, the school's Manual Handling Risk Assessment, will be implemented. The control measures will be monitored to ensure they are reducing the risk of injury and being implemented correctly.

The capability and circumstances, e.g. age, of staff will be taken into account where manual handling tasks are required. Where there is an unacceptable risk of injury or harm, no manual handling tasks will take place.

All members of staff will receive manual handling information and training as needed.

In order to manage these risks, the school will implement and follow its Manual Handling Policy.

### **Working at heights**

Policy and procedures concerning employees working at heights will be addressed in the Working at Heights Policy. Staff members are required to sign statements confirming that they have received, read and understood the policy, prior to being allowed to work at heights.

### **Lone working**

Policy and procedures concerning employees' lone working will be addressed in the Lone Worker Policy. Staff members will be required to sign statements confirming that they have received, read and understood the relevant policies, prior to being allowed to undertake lone working.

### **Stress management**

Staff will be aware of the symptoms of stress, including sleeping problems, dietary problems, mood swings, feeling lethargic, fatigue, emotional problems, chest pains and elevated heart rate, lack of focus, inability to concentrate and increased sweating. Staff members who suffer from any of these symptoms are advised to consult their GP as soon as possible.

### **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).





## 15. Maintaining equipment

The school will ensure that staff and pupils can expect that any equipment they use is suitable for its intended use and is properly maintained. Inspectors, or a trained health and safety technician, will inspect the following equipment for health and safety issues **annually**:

- All electrical appliances
- All fixed gymnasium equipment

It will be the responsibility of the Headteacher to ensure new equipment meets the appropriate standards and conforms to all health and safety requirements.

Where necessary, a portable appliance test (PAT) will be carried out by a competent person at intervals suitable for the type of equipment and its frequency of use.

## 16. Hazardous materials

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

- Chemicals
- Products containing chemicals
- Fumes
- Dusts
- Vapours
- Mists
- Gases and asphyxiating gases
- Germs that cause diseases, such as leptospirosis or legionnaires disease

Control of substances hazardous to health (COSHH) risk assessments are completed by the Estates Manager/**Office Manager** 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.

All hazardous materials are stored in locked cupboards, accessible only by Site Manager and cleaning staff.

Any hazardous products are disposed of in accordance with specific disposal procedures.

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

No staff member or pupil will ever be put at risk through exposure to any hazardous substance used in our practical curriculum. No potentially hazardous materials will be used in lessons.

Where a substance has a workplace exposure limit, control measures will ensure that exposure is below the limit.





The Site Manager / Office Manager will keep an up-to-date inventory of all the hazardous chemicals and materials held at the school. Unwanted or surplus chemicals and materials, including those that have become unsafe, will be disposed of by a registered waste carrier, in accordance with school procedures.

## 17. Asbestos management

In accordance with HSE guidance, asbestos management surveys have been carried out on each site.

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 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. Any identified or suspected ACMs (asbestos-containing material) are regularly re-inspected to ensure they remain in a safe condition.

## 18. Cleaning

Contract cleaners and in-house cleaners will be monitored by the site manager. The standard required will be clear in the service level agreement held with the contracted cleaners. Special consideration will be given to hygiene areas.

Waste collection services will be monitored by the site manager. Special consideration will be given to the disposal of clinical waste.

The Headteacher is responsible for ensuring that the school is at a safe temperature for staff and pupils to work in. The school will adhere to the provisions as outlined in The Education (School Premises) Regulations 1999, which state the following:

Areas	Temperature
Where there is a below-normal level of physical activity due to ill health or a physical disability, e.g. isolation rooms; however, this does not include sleeping accommodation	21°C
Where there is a normal level of physical activity associated with teaching, private study or examinations	18°C
Where there is a high level of physical activity, e.g. PE sports halls, washrooms, sleeping accommodation and circulation spaces	15°C



## 19. Infection 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 COVID-19 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

### Laundry

- Wear personal protective clothing when handling soiled linen
- Bag children's soiled clothing to be sent home, never rinse by hand



### **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**

- 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

### **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.

### **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 2.

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

## **20. 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 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
- COVID-19 may affect pregnancy, especially if the mother is not vaccinated. Pregnant women are considered part of the moderate risk group (clinically vulnerable) by the NHS

## 21. 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.

## 22. Allergens and anaphylaxis

The Trust's Allergies Policy will be implemented consistently to ensure the safety of those with allergies.

Parents will be required to provide the school with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required. Staff will also be required to provide the headteacher with a list of their allergies. **Information regarding pupils' and staff members' allergies will be collated and stored securely.**

Information regarding pupils' and staff members' allergies are shared with the catering team to ensure all meals prepared on-site are safe. **The headteacher and catering team will ensure that all pre-packed foods for direct sale (PPDS) made on the school site meet the requirements of Natasha's Law, i.e. the product displays the name of the food and a full, up-to-date ingredients list with allergens emphasised, e.g. in bold, italics or a different colour. The catering team will also work with any external catering providers to ensure all requirements are met and that PPDS is labelled in line with Natasha's Law.**

Staff will receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

**Under The Human Medicines (Amendment) Regulations 2017, the school is able to purchase adrenaline auto-injector (AAI) devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working. The schools will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy. Further information relating to the trust's policies and procedures addressing allergens and anaphylaxis can be found in the Allergen and Anaphylaxis Policy.**



## **23. Medication**

The Trust's Supporting Pupils with Medical Conditions Policy will be read, understood and adhered to at all times. Staff will receive training in supporting pupils with medical conditions.

Schools will obtain notification from parents regarding any medication that pupils are required to take. Only trained staff will administer medication. The Trust's Administering Medication Policy will be followed at all times. A record will be kept of any medication that pupils take.

## **24. 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.

## **25. Smoking**

The schools are non-smoking premises, and no smoking will be permitted on the grounds.

## **26. Security and theft**

The Site Manager and Estates Manager 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.

SBC are key holders and will respond to an emergency.

Staff and pupils will be responsible for their personal belongings and the schools accept no responsibility for loss or damage. Thefts will be reported to the police and staff will be expected to assist police with their investigation.

All staff will be expected to take reasonable measures to ensure the security of school equipment being used. Missing or believed stolen equipment will be reported immediately to a senior staff member.

The school will install access control and security measures to ensure the safety of the school, e.g. security glazing on windows. The school will ban individuals from the premises if they pose a risk to any member of the school community. The school will consider any risks that are posed by their local context, e.g. recent arson attacks.



## 27. Severe weather

The Headteacher, in liaison with the governing board, will make a decision on school closure due to severe weather on the grounds of health and safety. If a closure takes place, the CEO and Board of Trustees will be promptly informed.

## 28. School trips and visits

Health and safety policy and procedures concerning school trips and visits, including trips abroad, are contained in the Trust's Educational Visits Policy.

## 29. Near misses

A 'near miss' is an event not causing harm but has the potential to cause injury or ill health.

If staff members, pupils, contractors, or visitors see or are involved in a near miss, they will report it in order to allow consideration of how to prevent a possible accident happening in the future.

In addition to being recorded on **Evolve Accident Book**, the Headteacher will be informed verbally as soon as possible.

The schools will report near misses that constitute as dangerous occurrences to the HSE. A 'dangerous occurrence' includes any incident which results in requiring hospital treatment or further attention.

All accidents and near misses, however small, will be reported and investigated by the Headteacher and the outcomes recorded. The length of time dedicated to each investigation will vary depending on the seriousness of the accident.

After the investigation takes place, a risk assessment will be carried out, or the existing assessment amended, to avoid reoccurrence of the accident.

## 30. Monitoring and review

The effectiveness of this policy will be monitored continually by the Headteacher and the Board of Trustees. Any necessary amendments will be made immediately.



## Appendix A. 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 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
<b>Athlete's foot</b>	None.
<b>Campylobacter</b>	Until 48 hours after symptoms have stopped.
<b>Chicken pox (shingles)</b>	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.
<b>Cold sores</b>	None.
<b>Rubella (German measles)</b>	5 days from appearance of the rash.
<b>Hand, foot and mouth</b>	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.
<b>Impetigo</b>	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
<b>Measles</b>	Cases are infectious from 4 days before onset of rash to 4 days after, so it is important to ensure cases are excluded from school during this period.
<b>Ringworm</b>	Exclusion not needed once treatment has started.
<b>Scabies</b>	The infected child or staff member should be excluded until after the first treatment has been carried out.
<b>Scarlet fever</b>	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.



<b>Slapped cheek syndrome, Parvovirus B19, Fifth's disease</b>	None (not infectious by the time the rash has developed).
<b>Bacillary Dysentery (Shigella)</b>	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
<b>Diarrhoea and/or vomiting (Gastroenteritis)</b>	<p>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.</p> <p>For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health advisor or environmental health officer will advise.</p> <p>If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.</p>
<b>Cryptosporidiosis</b>	Until 48 hours after symptoms have stopped.
<b>E. coli (verocytotoxigenic or VTEC)</b>	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
<b>Food poisoning</b>	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
<b>Salmonella</b>	Until 48 hours after symptoms have stopped.
<b>Typhoid and Paratyphoid fever</b>	Seek advice from environmental health officers or the local health protection team.
<b>Flu (influenza)</b>	Until recovered.
<b>Tuberculosis (TB)</b>	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.
<b>Whooping cough (pertussis)</b>	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.





<b>Conjunctivitis</b>	None.
<b>Giardia</b>	Until 48 hours after symptoms have stopped.
<b>Glandular fever</b>	None (can return once they feel well).
<b>Head lice</b>	None.
<b>Hepatitis A</b>	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older children with good hygiene who will have been much more infectious prior to diagnosis.
<b>Hepatitis B</b>	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
<b>Hepatitis C</b>	None.
<b>Meningococcal meningitis/ septicaemia</b>	If the child has been treated and has recovered, they can return to school.
<b>Meningitis</b>	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
<b>Meningitis viral</b>	None.
<b>MRSA (meticillin resistant Staphylococcus aureus)</b>	None.
<b>Mumps</b>	5 days after onset of swelling (if well).
<b>Threadworm</b>	None.
<b>Rotavirus</b>	Until 48 hours after symptoms have subsided.

