

Health and Safety Policy

Hawthorn Primary School



Approved by: Finance, Staffing, Health and Safety

Last reviewed on: September 2024

Next review due by: September 2025

Contents

1. General Statement.....	
2. Legislation.....	
3. Roles and responsibilities	
4. Site security	
5. Fire (including evacuation procedure and routine testing)	
6. COSHH (including gas safety, asbestos management, legionella)	
7. Equipment (including electrical, playground and DSE)	
8. Lone working	
9. Working at height	
10. Manual handling.....	
11. Off-site visits	
12. Violence at work.....	
13. Smoking.....	
14. Infection prevention and control	
15. New and expectant mothers.....	
16. Occupational stress.....	
17. Accident reporting	
18. Training.....	
19. Monitoring	
20. Links with other policies	
Appendix 1. Fire safety checklist.....	
Appendix 2. Accident report	
Appendix 3. Recommended absence period period for preventing the spread of infection.....	
.....	

1. General Statement

The Health & Safety at Work Etc Act 1974 places a duty on employers to safeguard, so far as is reasonably practicable, the health, safety and welfare at work of all employees, pupils and other persons including visitors, contractors and the general public who may be affected by the school's activities.

All staff have a duty of care to carry out their work with due regard for the health and safety of themselves, other staff, pupils, contractors and visitors to the school and to observe the health and safety requirements relevant to their activities.

Suitable risk assessments of all foreseeable hazards with risk to staff, pupils and visitors will be carried out and communicated to all staff. Where significant risk is identified, appropriate control measures to reduce or eliminate the risk will be taken.

Consultation will take place with any union appointed safety representative and members of staff on matters that affect their health and safety and individuals will be consulted before allocating particular health and safety functions to them.

All staff are requested to support the school in achieving a safe environment for everyone. The necessary information, instruction and supervision in health and safety matters will be made available to achieve this, particularly to newly appointed staff or following a change of responsibility.

The policy will be regularly reviewed and updated as necessary, or at least annually.

Specifically, our school aims to:

- Provide and maintain a safe and healthy environment
- Establish and maintain safe working procedures amongst staff, pupils and all visitors to the school site
- Have robust procedures in place in case of emergencies
- Ensure that the premises and equipment are maintained safely, and are regularly inspected

2. Legislation

This policy is based on advice from the Department for Education on [health and safety in schools](#) and the following legislation:

- [The Health and Safety at Work etc. Act 1974](#), which sets out the general duties employers have towards employees and duties relating to lettings
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Control of Substances Hazardous to Health Regulations 2002](#), which require employers to control substances that are hazardous to health
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive and set out the timeframe for this and how long records of such accidents must be kept
- [The Health and Safety \(Display Screen Equipment\) Regulations 1992](#), which require employers to carry out digital screen equipment assessments and states users' entitlement to an eyesight test
- [The Gas Safety \(Installation and Use\) Regulations 1998](#), which require work on gas fittings to be carried out by someone on the Gas Safe Register
- [The Regulatory Reform \(Fire Safety\) Order 2005](#), which requires employers to take general fire precautions to ensure the safety of their staff
- [The Work at Height Regulations 2005](#), which requires employers to protect their staff from falls from height

The school follows [national guidance published by Public Health England](#) when responding to infection control issues.

3. Roles and responsibilities

3.1 The local authority and governing board

Newcastle City Council has ultimate responsibility for health and safety matters in school, but delegates responsibility for the strategic management of such matters to the school's governing board.

The governing board delegates operational matters and day-to-day tasks to the headteacher and staff members.

The governing board

Governors recognise the need to identify organisational arrangements in the school for implementing, monitoring, and controlling Health and Safety matters. It is the Governing Body's responsibility to ensure that they:

- implement the schools Health and Safety Policy and ensure it is reviewed at least annually
- take all reasonable steps are taken to reduce accidents and injuries to staff, pupils, visitors, members of the public and contractors
- provide sufficient funding in the school's finance budget necessary to implement Health and Safety matters
- regularly inspect the premises and ensure any recommendations are fed back to the Head Teacher and acted upon

3.2 Head Teacher

The Head Teacher is responsible and accountable to the Governors for implementing the school's safety policy and for all matters relating to Health and Safety within the establishment.

The Governors require the Head Teacher to ensure that the school's safety policy is implemented effectively and understood at all levels. The policy must be monitored regularly, controlled effectively, and revised as necessary.

The Head Teacher is a member of the school's Health and Safety Committee and is responsible for -

- ensuring that appropriate training has been or will be given to staff (including new staff, transferred and agency staff, students and helpers) to enable them to fulfil their responsibilities
- ensuring all foreseeable hazards are identified, and suitable and sufficient risk assessments are carried out
- seeking advice, where necessary, from outside agencies that are able to offer expert opinions
- undertaking inspections of the school premises
- preparing the annual Health and Safety Management report for the Board of Governors
- Making recommendations to the Governors about any funding required to improve health and safety within the school
- making arrangements for improvement to premises

- ensuring adequate Information, Instruction, Training and supervision are in place for both staff and pupils
- Ensure that any new projects, procurement, selection of contractors take health and safety matters into account during the early stages of the project e.g. design and planning stage
- consulting with approved Trades Union representatives on all Health and Safety matters and co-operate with them in the execution of the Safety Representative's functions.
- reviewing policies or procedures annually, or following any significant changes, and sharing these changes with staff.
- stopping what they consider unsafe practices, or the use of any unsafe plant, tools equipment, machinery etc.
- ensuring adequate first aid provision and accident reporting procedures are followed in accordance with Newcastle City Councils accident reporting procedure.
- providing all staff with the school's health and safety policy, and allowing staff with the time to familiarise themselves with the school's health and safety procedures.

The Head Teacher shall also consult regularly with the Safety Representative on Health and Safety matters;

3.3 School Business Manager / Premises Manager

The School Business Manager / Premises and Facilities Manager are responsible for –

- assisting in the development, implementation and monitoring of the Health and Safety policy
- co-ordinating all contractual work and maintenance carried out on the school premises
- liaising with the Head Teacher and others to ensure safety procedures and policy agreements are adhered to
- that relevant information is passed to contractors e.g. asbestos management plan
- attending appropriate training courses, such as asbestos awareness and legionella awareness
- promoting a positive and effective safety culture
- procedures are laid down for building work such as roofing, excavation and drainage, alterations to building structures, refurbishment and renovations or remodelling schemes
- that effective communication exists within the school
- Monitoring Health and Safety matters regarding 'Grounds Maintenance Service Contracts'
- compiling a 'Buildings Register' identifying known hazardous substances and materials (e.g. asbestos, lead, flammable substances etc.)
- emergency procedures, bomb warnings and evacuation of the school premises
- ensuring that competent person(s) or specialists are consulted as necessary to advise on Health and Safety matters. Areas of concern are likely to be technical issues, sampling, monitoring and auditing requirements
- ensuring that a property survey of The School buildings or premises is carried out and that regular termly inspections are completed with defects reported accordingly
- Keeping health and safety training records up to date

- Ensuring statutory inspections are completed and records kept
- Providing health and safety induction training for staff

The Head Teacher will delegate the operational responsibility to the Premises and Facilities Manager for:

- all contractors or other third parties entering the school or otherwise on site.
- ensuring that competent contractors are employed and to oversee the safe execution of the work
- Smaller scale projects which are managed internally, however specialist assistance from the council will be arranged for larger more complex projects
- ensuring that the agreed procedure for reporting all defects, hazards and problems regarding Health and Safety matters functions efficiently and effectively

3.4 Staff

All employees have responsibilities under the Health and Safety at Work etc. Act, 1974 including working in a safe manner and not putting others at risk.

All staff, including teaching staff are responsible for -

- making themselves familiar with Health and Safety policies and procedures, and any local or relevant job specific procedures or risk assessments operating within the school
- providing appropriate and effective supervision of pupils
- providing instruction to all students under their control and provide suitable training to enable them to operate in a safe and efficient manner
- report any possible hazards or defects to the Premises and Facilities Manager
- being aware of any known whereabouts of asbestos containing materials (ACMs) or presumed ACMs
- setting an example by following safe working practices
- seeking any specific safety measures to be implemented in their teaching area and ensure they are followed

4. Site security

Headteacher, school business manager and caretaker 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. If there is an issue the caretaker will record it and bring it to SLT.

Newcastle City Council are key holders and will respond to an emergency.

5. Fire – adhere to the Fire Evacuation Plan

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 once a term.

The fire alarm is a loud continuous sound.

Fire alarm testing 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 please refer to Hawthorn's Fire Evacuation Plan for full detail – in summary:

- 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. These are the MUGA and Ashfield Nursery
- Admin team will take a register of pupils absent, which will then be checked against the attendance register of that day to ensure accurate headcount
- The administrator will use the sign in app on mobile device to confirm all staff present
- Staff and pupils will remain outside the building until the emergency services confirm it is safe to re-enter

The school has special arrangements in place for the evacuation of people with mobility needs and fire risk assessments will also pay particular attention to those with disabilities (see individual PEEP plans).

A fire safety checklist can be found in appendix 1.

6. COSHH (Control of Substances Hazardous to Health)

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

Storage of any such substances, are clearly labelled, in locked cupboards, which are not accessible to children. Staff ensure the wearing of appropriate protective clothing when such substances are used e.g., rubber gloves and the following of COSHH regulations when using such substances

Any hazardous products are kept in their original containers, with clear labelling and product information. And are disposed of in accordance with specific disposal procedures.

6.1 Gas safety

- Installation, maintenance and repair of gas appliances and fittings will be carried out by a competent Gas Safe registered engineer
- Gas pipework, appliances and flues are regularly maintained

- All rooms with gas appliances are checked to ensure that they have adequate ventilation

6.2 Legionella

- Legionella is managed through a combination of in-house checks and that of a suitably qualified and competent person. Further, more detailed arrangements are set out in the Newcastle City Council Guidance to Schools on Buildings Inspection Maintenance
- A legionella risk assessment is organised by the School Business Manager every two years by a suitably qualified and competent person
- Monthly monitoring checks take place by a suitably qualified and competent person
- The caretaker is responsible for flushing of water systems following periods of inactivity (e.g. school holidays)

6.3 Asbestos

- Regular asbestos inspections take place by a suitable qualified and competent person
- Staff are briefed on the hazards of asbestos, the location of any asbestos in the school and the action to take if they suspect they have disturbed it
- Arrangements are in place to ensure that contractors are made aware of any asbestos on the premises and that it is not disturbed by their work
- Contractors will be advised that if they discover material which they suspect could be asbestos, they will stop work immediately until the area is declared safe
- A record is kept of the location of asbestos that has been found on the school site

7. 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
- Before 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

7.1 Electrical equipment

- All staff are responsible for ensuring they use and handle electrical equipment sensibly and safely
- Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them
- Any potential hazards will be reported to head teacher or school business manager immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed

- Only trained staff members can check plugs
- Portable appliance test (PAT) is carried out annually by a suitably qualified and competent person
- All isolator switches are clearly marked to identify their machine
- Electrical apparatus and connections will not be touched by wet hands and will only be used in dry conditions
- Maintenance, repair, installation and disconnection work associated with permanently installed or portable electrical equipment is only carried out by a competent person

7.2 PE and Playground 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 head teacher or school business manager
- Caretaker carries out routine daily outdoor maintenance checks which includes inspection of play equipment
- Annual inspection of outdoor playground equipment and indoor PE equipment are organised via SLA with the Local Authority

7.3 Display screen equipment

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

8. Lone working – anyone lone working will adhere to Hawthorn's Lone Working Policy

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.
Anyone working alone must adhere to Hawthorn's Lone Working Policy.

9. 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 and carries and records checks made
- Pupils are prohibited from using ladders
- Contractors are expected to provide their own ladders for working at height
- Access to high levels, such as roofs, is only permitted by trained persons

10. Manual handling

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

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

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

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

11. Off-site visits

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

- EVOLVE is completed and reviewed / approved by EVC and headteacher
- Risk assessments will be completed where off-site visits and activities require them
- All off-site visits are appropriately staffed
- Staff will take a 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 or ensure there is a trained first aider where they visit

12. 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.

13. Smoking

Smoking is not permitted anywhere on the school premises. This 'No Smoking Policy', including e-cigarettes, is applicable in all areas of the school. Notices to remind staff, parents and visitors to school are displayed throughout the building.

14. 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.

14.1 Handwashing

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

14.2 Coughing and sneezing

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

14.3 Personal protective equipment

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

14.4 Cleaning of the environment

- Clean the environment frequently and thoroughly

14.5 Cleaning of blood and body fluid spillages

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

14.6 Laundry

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

14.7 Clinical waste

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

14.8 Animals

- Wash hands before and after handling any animals

14.9 Pupils vulnerable to infection

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

14.10 Exclusion periods for infectious diseases

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

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

15. 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

16. 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. The school has Health and Wellbeing support via the school insurance and referrals can be made to Occupational Health where necessary.

17. Accident reporting

17.1 Accident recording:

- An accident form is completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. This is reviewed by the head teacher who completes corresponding health and safety checks. Signed accident records are saved down for future reference.
- As much detail as possible is supplied when reporting an accident
- Information about injuries will also be kept in the pupil's educational record
- School ensures adequate first aid provision and accident reporting procedures are followed in accordance with Newcastle City Councils accident reporting procedure

17.2 Reporting to the Health and Safety Executive

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

Newcastle City Council, headteacher or school business manager will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries. These are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding)
 - Any scalping requiring hospital treatment
 - Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours

- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days
- Where an accident leads to someone being taken to hospital
- Where something happens that does not result in an injury, but could have done
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here:

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

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

17.3 Notifying parents

The class teacher will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

17.4 Reporting to Ofsted and child protection agencies

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

The head teacher or family support coordinator will also notify Newcastle City Council child protection agencies of any serious accident or injury to, or the death of, a pupil while in the school's care.

18. Training

Our staff are provided with health and safety training as part of their induction process and refreshers at appropriate intervals.

19. Monitoring

This policy will be reviewed by the school business manager annually. At every review, the policy will be approved by the Finance, Staffing and Health and Safety Committee.

20. Links with other policies

This health and safety policy links to the following related policies and guidance:

- Whole School Risk Assessment and risk management guidance
- First Aid Policy
- Educational Visits Policy and risk assessments
- Business Continuity Plan
- Accessibility plan

- Safeguarding Policy
- Lone Working Policy
- Fire Evacuation Plan
- Asbestos Risk Assessment and Plan

Appendix 1. Fire safety checklist

Issue to check	Yes/No
Are fire regulations prominently displayed?	Yes
Is fire-fighting equipment, including fire blankets, in place?	Yes
Does fire-fighting equipment give details for the type of fire it should be used for?	Yes
Are fire exits clearly labelled?	Yes
Are fire doors fitted with self-closing mechanisms?	Yes
Are flammable materials stored away from open flames?	Yes
Do all staff and pupils understand what to do in the event of a fire?	Yes
Can you easily hear the fire alarm from all areas?	Yes

Appendix 2



ACCIDENT & NEAR MISS REPORT FORM

PART C: INVESTIGATION BY SUPERVISOR/LINE MANAGER/TEACHER/SLIO/OIC		
<i>Please answer the following questions on the basis of the information available to you:</i>		
	<i>(Delete as applicable)</i>	
<i>Are you satisfied that the accident occurred on the date, time and location given in Part B? If NO, please give reasons and state any discrepancies:-</i>		
	YES / NO	
<i>Are you satisfied that Part B accurately describes how the accident happened? If NO, please clarify:-</i>		
	YES / NO	
<i>Can you confirm the injuries and treatment stated in Part B? If NO, please state any discrepancies:-</i>		
	YES / NO	
<i>Was the injured person sent / taken directly to hospital from the scene of the accident?</i>		
	YES / NO	
<i>Was the injured person authorised to be in the place where the accident occurred?</i>		
	YES / NO	
<i>Was the activity permitted?</i>		
	YES / NO	
<i>Where applicable, was the injured person wearing the correct protective clothing/equipment at the time of the accident? If NO, please clarify:-</i>		
	YES / NO / N/A	
<i>Was accident due to possible defects in premises, equipment, tools or systems of work? If YES, please clarify: -</i>		
	YES / NO	
<i>Employee Absence:</i>	<i>Did the accident result in absence from work after the day of the accident?</i>	YES / NO
	<i>If YES, did the absence exceed 3 days (not counting the day of the accident but including any weekends and holidays if they were still unfit for work)?</i>	YES / NO
	<i>If YES, did the absence exceed 7 days (not including the day of the accident but including any weekends and holidays if they were still unfit for work)?</i>	YES / NO
<i>What immediate action have you taken to prevent a recurrence?</i>		
<i>If required please continue on separate sheet</i>		
<i>Supervisor's Signature: _____ Print Name: _____ Date: _____</i>		
<i>Position: _____ Location: _____ Tel. No. _____</i>		
PART D: SUPERVISOR & MANAGER'S ASSESSMENT		
<i>Proposed further action to prevent a recurrence:</i>		
<i>If required, please continue on a separate sheet</i>		
<i>Specific requests to Health and Safety Officer:</i>		
<i>Manager's Signature: _____ Print Name: _____ Date: _____</i>		
<i>Position: Head Teacher Location: Hawthorn Primary School Tel. No. 273 4237</i>		

PART E: HEALTH AND SAFETY OFFICER'S COMMENTS

If required, please continue on separate sheet.

Include on Accident database: YES/NO

Health & Safety

Print Name:

Date:

Officer's Signature:

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

This list of recommended absence periods for preventing the spread of infection is taken from [non-statutory guidance for schools and other childcare settings](#) from Public Health England (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 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.
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)	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.

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.
Corona – Covid19	Until recovered	Some children with underlying health conditions may be vulnerable to infections that would rarely be serious in most children, these include respiratory conditions treated for leukaemia or other cancers.
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 bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. 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.