

Health & Safety



Written by:	Ruth Liu	Job Role: Headteacher	Date: January 2019
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1. Aims

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 duty's 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

- Sections of this policy are also based on the [statutory framework for the Early Years Foundation Stage](#).

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

3. Roles and responsibilities

3.1 The governing board

The governing board has ultimate responsibility for health and safety matters in the school, but will delegate day-to-day responsibility to the Headteacher Ruth Liu.

The governing board has a duty to take reasonable steps to ensure that staff and pupils are not exposed to risks to their health and safety. This applies to activities on or off the school premises.

The governing board, as the employer, also has a duty to:

Assess the risks to staff and others affected by school activities in order to identify and introduce the health and safety measures necessary to manage those risks

Inform employees about risks and the measures in place to manage them

Ensure that adequate health and safety training is provided

The governor who oversees health and safety is Tom Lane.

3.2 Headteacher

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

Implementing the health and safety policy

Ensuring there is enough staff to safely supervise pupils

Ensuring that the school building and premises are safe and regularly inspected

Providing adequate training for school staff

Reporting to the governing board on health and safety matters

Ensuring appropriate evacuation procedures are in place and regular fire drills are held

Ensuring that in their absence, health and safety responsibilities are delegated to another member of staff

Ensuring all risk assessments are completed and reviewed

Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary

In the headteacher's absence, Lizzie Bell assumes the above day-to-day health and safety responsibilities.

3.3 Health and safety lead

The nominated health and safety lead within school is the Headteacher Ruth Liu.

3.4 Staff

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

Staff will:

Take reasonable care of their own health and safety and that of others who may be affected by what they do at work

Co-operate with the school on health and safety matters

Work in accordance with training and instructions

Inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken

Model safe and hygienic practice for pupils

Understand emergency evacuation procedures and feel confident in implementing them

3.5 Pupils and parents

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

3.6 Contractors

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

4. Site security

We aim to do to all we can to make the school site a secure and safe environment for all who work and learn here. All areas are enclosed within the dedicated school space and the children enter the school through designated entrances. All entrances and exits remain locked throughout the school day and are accessed by code only. Visitors use an intercom system to announce their arrival and visual face recognition cameras allow staff to see who is outside the school before they are let into the building.

Any visitors to the building must sign in and out, will wear a visitors badge at all times and will be escorted around the school building by a member of staff at all times.

The caretaker, Facilities Manager and Ruth Liu are responsible for the security of the school site in and out of school hours. The caretaker/Facilities Manager are responsible for visual inspections of the site.

The caretakers/Facilities Manager and Ruth Liu are key holders and will respond to an emergency.

5. Fire

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

Emergency evacuations are managed by undertaken on a termly basis.

The fire alarm is a loud continuous buzzer

Fire alarm testing will take place on Tuesdays at 8.30am.

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

In the event of a fire:

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

Copies of all evacuation plans with a layout of the school is placed in a fire safety bag attached to the bin store.

Each child within school has a Personal Emergency Evacuation Plan and this must be adhered to ensure the safe evacuation of all children.

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. A register of staff that have received Fire safety awareness training is kept in the school office. The majority of staff have had this training.

Staff and pupils will congregate at the assembly point. This is at the top corner of the car park at the rear of the building.

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

The fire wardens (Clare Atkinson, Kate Shepherd, Ruth Liu, Kimberley Donovan and the Caretaker) 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

A fire safety checklist can be found in appendix 1.

6. COSHH

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

Chemicals

Products containing chemicals

Fumes

Dusts

Vapours

Mists

Gases and asphyxiating gases

Germs that cause diseases, such as leptospirosis or legionnaires disease

Control of substances hazardous to health (COSHH) risk assessments are completed by the Facilities Manager and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary. All Staff who will come into contact with hazardous substances will complete basic COSHH training.

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 products are kept in locked cabinets and the children have no access to them at any point throughout the school day.

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.

All substances required to be used on site to be purchased by the admin assistants thus ensuring that no unassessed substances are bought on to site.

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

The Facilities Manager is responsible for ensuring that the identified operational controls are conducted and recorded to reduce the risk of Legionella.

The risks from legionella are mitigated by the following: temperature checks, heating of water and disinfection of showers.

6.3 Asbestos

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. No work to be carried out by contractors until they have had sight of and signed the asbestos register to reduce the likelihood of this occurring.

A record is kept of the location of asbestos is held by the school and can be requested at any time.

7. Equipment

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

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

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

All equipment linked to the moving and handling of pupils is tested every 6 months.

7.1 Electrical equipment

All staff are responsible for ensuring that they use and handle electrical equipment sensibly and safely

Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them

Any potential hazards will be reported the caretaker immediately

Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed

Only trained staff members can check plugs

Where necessary a portable appliance test (PAT) will be carried out by the caretaker.

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 Specialist equipment

All Conductive Education equipment will be checked regularly with regards to the safe use of it. Plinths will be tested to ensure that they remain sturdy and regular checks will be to tighten the screws etc.

Any equipment that is provided by the physiotherapist or occupational therapist e/g walking frames and standers are responsibility of these departments although staff will make regular checks when working with children using these pieces of equipment.

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

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

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.

See Lone working policy for additional information.

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
- Pupils are prohibited from using ladders
- Staff will wear appropriate footwear and clothing when using ladders
- Contractors are expected to provide their own ladders for working at height
- Before using a ladder, staff are expected to conduct a visual inspection to ensure its safety. All ladders will be identified, inspected and maintained at least annually. A record of these checks will be kept.
- Access to high levels, such as roofs, is only permitted by trained persons

10. Moving and Handling

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

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

Staff receive Moving and Handling training on an annual basis. This training is delivered by Lizzie Bell-Deputy Headteacher, who has responsibility for Moving and Handling across the school.

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

See Moving and Handling policy for additional information relating to the moving and handling of children in addition to each child's Moving and Handling plan and risk assessments.

11. Off-site visits

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

Risk assessments will be completed prior to each visit and where necessary a member of staff will visit the venue prior to the visit.

All off-site visits are appropriately staffed

Staff will take a school mobile phone, a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details

There will always be at least one first aider on school trips and visits

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

12. Lettings

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

13. 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.

14. Smoking/Vaping

Smoking/vaping is not permitted anywhere on the school premises. Staff must use the designated smoking area located at the front of the building to the right near the stairs to the café if they wish to smoke or vape. All staff are aware of this.

15. Infection prevention and control

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

15.1 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

15.2 Coughing and sneezing

Cover mouth and nose with a tissue

Wash hands after using or disposing of tissues

Spitting is discouraged

15.3 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

15.4 Cleaning of the environment

Clean the environment frequently and thoroughly

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

15.5 Cleaning of blood and body fluid spillages

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

When spillages occur, clean using a product that combines both a detergent and a disinfectant and use as per manufacturer's instructions. Ensure it is effective against bacteria and viruses and suitable for use on the affected surface

Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below

Make spillage kits available for blood spills

15.6 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.

15.7 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

15.8 Covid 19 Management

We will ensure adequate risk reduction measures are in place to manage the spread of COVID-19, and carry out appropriate risk assessments, reviewing them regularly and monitoring whether any measures in place are working effectively. We will continue to follow any advice set out on the government website.

15.9 Pupils vulnerable to infection

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

15.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 4.

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

16. 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

17. 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.

18. Accident reporting

18.1 Accident record book

An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. These forms can be found in each classroom and are located in the first aid cabinets.

As much detail as possible will be supplied when reporting an accident

Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of

18.2 Reporting to the Health and Safety Executive

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

The Headteacher 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

Near-miss events are recorded in our near-miss book. This is stored with our accident records.

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>

18.3 Notifying parents

The Conductor 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.

18.4 Reporting to Ofsted and child protection agencies

The Headteacher 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 Headteacher will also notify the child's placing local authority of any serious accident or injury to, or the death of, a pupil while in the school's care.

19. Training

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

All staff receive specific Moving and Handling training and First Aid training. These are updated regularly.

20. Monitoring

This policy will be reviewed by the Headteacher and Facilities Manager every year.

At every review, the policy will be approved by the governing body.

21. Links with other policies

This health and safety policy links to the following policies/documents:

- Moving and Handling Policy
- Risk assessments
- Fire risk assessment
- Eating and Drinking Policy and risk assessment.
- Educational Visits Policy
- Intimate Care Policy
- Medication and Accident policy

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- Fire blankets and fire extinguishers are available throughout the building.
Does fire-fighting equipment give details for the type of fire it should be used for?	Yes- information is on the both the extinguishers and blankets and these are checked regularly.
Are fire exits clearly labelled?	Yes
Are fire doors fitted with self-closing mechanisms?	Yes – these are tested regularly.
Are flammable materials stored away from open flames?	There are no open flames around the school building.

Do all staff and pupils understand what to do in the event of a fire?	Yes- fire safety training delivered to all staff and regular evacuations take place for children to practice.
Can you easily hear the fire alarm from all areas?	Yes- alarm tested weekly.

Appendix 2. Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from non-statutory guidance for schools and other childcare settings from Public Health England. For each of these infections or complaints, there [is further information in the guidance on the symptoms, how it spreads and some 'do's and don'ts' to follow that you can check.](#)

Infection or complaint	Recommended period to be kept away from school or nursery
Athlete's foot	None.
Campylobacter	Until 48 hours after symptoms have stopped.
Chicken pox (shingles)	<p>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.</p> <p>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.</p>
Cold sores	None.
Rubella (German measles)	5 days from appearance of the rash.
Hand, foot and mouth	Children are safe to return to school or nursery as soon as they are feeling better, there is no need to stay off until the blisters have all healed.
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
Measles	Cases are infectious from 4 days before onset of rash to 4 days after so it is important to ensure cases are excluded from school during this period.
Ringworm	Exclusion not needed once treatment has started.
Scabies	The infected child or staff member should be excluded until after the first treatment has been carried out.

Scarlet fever	Children can return to school 24 hours after commencing appropriate antibiotic treatment. If no antibiotics have been administered the person will be infectious for 2 to 3 weeks. If there is an outbreak of scarlet fever at the school or nursery, the health protection team will assist with letters and factsheet to send to parents or carers and staff.
Slapped cheek syndrome, Parvovirus B19, Fifth's disease	None (not infectious by the time the rash has developed).
Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
Diarrhoea and/or vomiting (Gastroenteritis)	<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>
Cryptosporidiosis	Until 48 hours after symptoms have stopped.
E. coli (verocytotoxigenic or VTEC)	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
Food poisoning	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
Salmonella	Until 48 hours after symptoms have stopped.
Typhoid and Paratyphoid fever	Seek advice from environmental health officers or the local health protection team.

Flu (influenza)	Until recovered.
Tuberculosis (TB)	Pupils and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. Pupils and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.
Whooping cough (pertussis)	A child or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so or 21 days from onset of illness if no antibiotic treatment.
Conjunctivitis	None.
Giardia	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).
Head lice	None.
Hepatitis A	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older children with good hygiene who will have been much more infectious prior to diagnosis.
Hepatitis B	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
Hepatitis C	None.
Meningococcal septicaemia	meningitis/ If the child has been treated and has recovered, they can return to school.
Meningitis	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
Meningitis viral	None.

MRSA (meticillin resistant Staphylococcus aureus)	None.
Mumps	5 days after onset of swelling (if well).
Threadworm	None.
Rotavirus	Until 48 hours after symptoms have subsided.

Appendix 3:

Guidance for working with food within school

Guidance on all matters relating to food hygiene to be found in the booklet 'Food Hygiene (England) Regulations 2006'

See generic risk assessment for working with food

All staff should know the following strategies when working with food and encourage students whenever possible to know them also:

- identify any potential hazards that may arise during the food work
- distinguish those risks which are critical in any given situation
- know the measures to control the risks
- take appropriate action

N.B. All staff involved in food activities need to know the policy and procedures for dealing with any accidents. Due to the condition of our students and that any accidents could place them into shock then we would ring 999 for advise and action –see PS/PD .09. However, those staff identified as first-aiders would be able to give appropriate first aid to any food related incidents, e.g. burns, scalds, electric shock, allergic reactions, cuts, choking, poisoning.

Preparing the classroom for food activity

Our school does not have a specialist room for food work, but uses the following established routines:

- remove any bags, equipment, other obstacles from pathways
- clean work surfaces with a multi-purpose cleaner, then wipe with an anti-bacterial cleaner
- clean and disinfect any sink area which is to be used for food work
- designate a separate bowl for washing hands from that which is used for food

Personal hygiene and safety

When working with food staff should ensure:

- that students wear protective clothing to prevent cross-contamination, i.e. clean aprons, rolled up sleeves, hair tied back
- that students wash hands and remove jewellery before beginning work
- that students **try to** avoid spreading bacteria by sneezing, coughing, etc
- (try to ensure) that students avoid touching their hair, nose or mouth when handling food
- that students have their hands washed after toilet visits
- that work areas are clean and organised
- that separate chopping boards and utensils are used and that hands are washed between handling raw and cooked foods to prevent cross-contamination
- that care is taken with any hot dishes/pans and sharp knives

All routines and procedures should include care with:

- washing up and cleaning, e.g. equipment and surfaces
- disposal of refuse
- the purchase of food for school use (e.g. checking the 'use by' and 'best before' dates)
- the storage of foods, including stock rotation that takes account of shelf-life

Food tasting

Obviously practical food work will involve tasting as part of the evaluation process but care should be taken with safety and hygiene when planning and carrying out activities

Rules to follow when tasting food:

- wash hands before handling and tasting food
- have plenty of clean spoons which should be dipped into food only once
- label and date any food samples
- discourage students from touching mixtures or finished foods that may be eaten by others
- do not let any students who are really ill join in food handling/tasting activities
- inform parents that food tasting is a part of food work. **N.B.** we already have details of any students who have any food intolerances, allergies, or dietary needs which need to be taken into consideration when carrying out food work
- students with feeding tubes should only taste food with guidance from SaLT or Feeding Therapist

Teaching nutrition

Nutrition is an important part of understanding food. Cooking and nutrition is an important element within the National Curriculum. These guidelines should always be a consideration when selecting foods to work with.

Wherever possible, students should be encouraged to:

- know that our food comes from a variety of sources
- group and name foods
- understand that foods contain nutrients which people need to stay alive and to maintain health
- know about nutrients and their food source

Guidelines to encourage our students towards balanced healthy eating:

- enjoy food (where it is appropriate, encourage students not to be worried/anxious about what is eaten)
- eat a variety of different foods
- eat the right amount to be a healthy weight for their height
- eat plenty of foods rich in starch and fibre

- don't eat too many foods that contain fat
- don't eat sugary foods and drinks too often
- store and prepare foods carefully so that their vitamins and minerals are not lost