



Health and Safety Policy

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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 school colleagues, learners 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 UK Health Security Agency (formerly Public Health England) and government guidance on living with COVID-19 when responding to infection control issues.

- Sections of this policy are also based on the statutory framework for the Early Years Foundation Stage.

3. Roles and responsibilities

3.1 The local authority and governing board

Bracknell Forest Local Authority has ultimate responsibility for health and safety matters in the 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 school colleagues.

3.2 Headteacher

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

- Implementing the health and safety policy
- Ensuring there are enough colleagues to safely supervise learners
- Ensuring that the school building and premises are safe and regularly inspected
- Providing adequate training for school colleagues
- 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 school based colleague
- 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, an Assistant Headteacher assumes the above day-to-day health and safety responsibilities.

3.3 Health and safety lead

The school has a nominated Health and Safety Leader, who works within our school's Administration Team.

3.4 Staff

School colleagues have a duty to take care of all learners in the same way that a prudent carers or parent would do so.

School colleagues 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 learners
- Understand emergency evacuation procedures and feel confident in implementing them

3.5 Learners and carers and parents

Learners (where appropriate) and carers 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 school colleague.

3.6 Contractors

Contractors will agree health and safety practices with either the Headteacher, Site Team Leader or Health and Safety Leader 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

The Site Team Leader and his team 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.

The Site Team Leader and his team 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 practised at least once a term. The fire alarm is a loud continuous electronic noise.

Fire alarm testing will take place at least once a week.

Fire Wardens will be trained in fire safety and all school colleagues and learners will be made aware of any new fire risks.

In the event of a fire (not a practice):

- 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 colleagues only, and only then if colleagues are trained in how to operate them and are confident, they can use them without putting themselves or others at risk
- Colleagues and learners will congregate at the assembly points. These are the Primary playground, Secondary playground, Woodlands Hub playground and Admin carpark
- Tutors/class teachers (or a suitable member of the class team) will take a register of learners, which will then be checked against the attendance register of that day
- The HR/School Business Manager and/or Admin Team will take a register of all colleagues
- Colleagues and learners will remain outside the building until the emergency services say it is safe to re-enter

The school will have special arrangements in place for the evacuation of people with mobility needs and fire risk assessments will also pay particular attention to those with additional disabilities and/or find transition difficult. These individuals have their own personal emergency evacuation plans.

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 either the Health and Safety Leader or the Site Team Leader and circulated to all colleagues who work with hazardous substances. Colleagues will also be provided with protective equipment, where necessary.

Our colleagues 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.

The Site Team are responsible for the safe storage of all cleaning materials used by the cleaning contractors.

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.

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 they have adequate ventilation

6.2 Legionella

- A water risk assessment is completed annually by the Local Authority and is arranged by the Site Team Leader, pool testing is on a regular basis as part of internal checks. The Site Team Leader is responsible for ensuring that the identified operational controls are conducted and recorded in the school's waterlog book
- This risk assessment will be reviewed every 3 years and when significant changes have occurred to the water system and/or building footprint
- The risks from legionella are mitigated by the following: cleaning of relevant areas by the cleaning contractors, termly water testing, ½ termly running of the systems to flush through pipework.

6.3 Asbestos

- Colleagues 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

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.

When new equipment is purchased, it is checked to ensure 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 colleagues are responsible for ensuring they use and handle electrical equipment sensibly and safely
- Any learner or volunteer who handles electrical appliances does so under the supervision of a school-based colleague who so directs them
- Any potential hazards will be reported to our Health and Safety Leader and Site Team Leader immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed
- Only trained colleagues can check plugs
- Where necessary, a portable appliance test (PAT) will be carried out by a 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 equipment

- Learners, where appropriate, are taught how to carry out and set up PE equipment safely and efficiently. Colleagues check that equipment is set up safely
- Any concerns about the condition of the gym floor or other apparatus will be reported to the Site Team

7.3 Display screen equipment

- Colleagues 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
- Colleagues 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)

7.4 Specialist equipment

Parents and carers are responsible for the maintenance and safety of their child's/young person's wheelchairs. In school, colleagues promote the responsible use of wheelchairs.

When needed/necessary, oxygen cylinders would be stored in a designated space, and appropriate colleagues would be trained in the removal, storage and replacement of oxygen cylinders.

Some learners have access to specific specialist equipment, measures have been put in place to support the safe use of this equipment.

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
- Remote working, self-isolation and/or remote learning

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 colleagues are available.

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

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

9. Working at height

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

In addition:

- The Site Team retains ladders for working at height
- Learners are prohibited from using ladders
- Colleagues 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, colleagues are expected to conduct a visual inspection to ensure its safety
- Access to high levels, such as roofs, is only permitted by trained persons

10. Manual handling (not people 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 colleagues are trained in how to use them safely.

Colleagues and learners (where appropriate) 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

People handling, for example, hoisting will only be carried out by trained individuals.

11. Off-site visits

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

- Risk assessments will be completed where off-site visits and activities require them
- All off-site visits are appropriately staffed
- Colleagues will take a mobile phone (preferably the school's), an appropriate portable first aid kit, information about the specific medical needs of learners, and when appropriate the parents' and/or carers' contact details
- For trips and visits with learners in the Early Years Foundation Stage, there will always be at least one first aider with a current paediatric first aid certificate
- For other trips, there will be first aid provision on school trips and visits, this may not be via school colleagues

12. Lettings

This policy applies to lettings. Those who hire any aspect of the school's 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 colleagues should not be in any danger at work and will not tolerate violent or threatening behaviour towards colleagues.

All colleagues will report any incidents of aggression or violence (or near misses) directed to themselves to their Key Stage Leader/Department Leader/Headteacher immediately. This applies to violence from learners (outside of their SEN profiles), visitors or other colleagues.

14. Smoking

Smoking is not permitted anywhere on the school premises.

15. Infection prevention and control

We follow national guidance published by the UK Health Security Agency when responding to infection control issues.

We will encourage colleagues and learners 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, including pool chemicals
- Use personal protective equipment (PPE) to control the spread of infectious diseases where required or recommended by government guidance and/or a risk assessment

15.4 Cleaning of the environment

- 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 learner'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 specific 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 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 learners
- Supervise learners when playing/working/engaging with animals
- Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a pet

15.9 Infectious disease management

We will ensure adequate risk reduction measures are in place to manage the spread of acute respiratory diseases, including COVID-19, and carry out appropriate risk assessments, reviewing them regularly and monitoring whether any measures in place are working effectively.

We will follow local and national guidance on the use of control measures including:

Following good hygiene practices

- We will encourage all colleagues and learners to regularly wash their hands with soap and water or hand sanitiser, and follow recommended practices for respiratory hygiene. Where required, we will provide appropriate personal protective equipment (PPE)

Implementing an appropriate cleaning regime

- We will regularly clean equipment and rooms, and ensure surfaces that are frequently touched are cleaned

Keeping rooms well ventilated

- We will use risk assess to identify rooms or areas with poor ventilation, and put measures in place to improve airflow, including opening external windows, opening internal doors and mechanical ventilation

15.10 Learners vulnerable to infection

Some medical conditions make learners vulnerable to infections that would rarely be serious in most children or young people. The school will normally have been made aware of such vulnerable learners. Where learners 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 learners, if directed on the advice of medical professionals, to have additional immunisations, for example for pneumococcal and influenza.

15.11 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 4.

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

16. New and expectant mothers

Risk assessments will be carried out whenever any colleague or learner 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
- Some pregnant women will be at greater risk of severe illness from COVID-19

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.

Colleagues can access various services, such as, counselling, CBT, self-help resources, financial advice and lifestyle savings through the following organisations:

Vivup – Employee Assistance Programme

- Telephone service is 24/7, 365 days a year, colleagues need to call 03303 800658 or 0800 023 9324
- Colleagues can create an account and access the service offered through the link provided by our HR/School Business Manager, this is regularly sent out and can be requested at anytime

EAP

- Colleagues can access the services through the following link: www.educationsupport.org.uk/onlinesupport
- The HR/School Business Manager regular sends out reminders of the organisational username and password to all colleagues, in addition this can be requested at anytime
- Telephone services can be accessed on 0800 0856148

The Safeguarding Team and ELSAs have regular access to 'supervision' sessions

The school has recently appointed a Wellbeing Leader

18. Accident reporting

18.1 Accident record book

- An accident form will be completed as soon as possible after the accident occurs by a colleague or first aider who deals with it. An accident form template can be found in Appendix 2
- 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 Health and Safety Leader will keep a record of any accident that results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Health and Safety Leader 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.

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

How to make a RIDDOR report – <http://www.hse.gov.uk/riddor/report.htm>

18.3 Notifying parents

The class team, Key Stage Leader or Department Leader will inform parents or carers of any accident or injury sustained by a learner in the Early Years Foundation Stage, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

18.4 Reporting to child protection agencies

The Headteacher or Designated Safeguarding Leader will notify the relevant child protection agency of any serious accident or injury to, or the death of, a learner in the Early Years Foundation Stage while in the school's care.

18.5 Reporting to Ofsted

The Headteacher or Designated Safeguarding Leader will notify Ofsted of any serious accident, illness or injury to, or death of, a learner in the Early Years Foundation Stage while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

19. Training

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

Colleagues who work in high-risk environments, such as in science labs or with woodwork equipment, or work with learners with special educational needs (SEN), are given additional health and safety training.

20. Monitoring

This policy will be reviewed by the Health and Safety Leader every 3 years.

At every review, the policy will be approved by the Headteacher, Site Team Leader, HR/School Business Manager and the Full Governing Body.

21. Links with other policies and/or documents

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

- First aid
- Risk assessment
- Supporting learners with medical conditions
- Accessibility plan
- Remote learning
- Emergency or critical incident plan

Appendix 1. Fire safety checklist

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

Appendix 2. Accident report

Incident Report Form (IRF 03/19)

Input data into Online Incident Form at: <https://www.reportincident.co.uk/bracknell>

If for any reason the Online Form is inaccessible send a hard copy (retain original) to: Corporate H&S, 4th Floor, Time Square, RG12 1JD. Certain workplace incidents are reportable under RIDDOR to the HSE. For more information on RIDDOR contact a H&S Adviser: 01344 352000 or go to: <http://www.hse.gov.uk/riddor/index.htm>.



Was a Person Involved in the Incident? Yes / No (Yes will include: a near miss, threatening behaviour, verbal abuse, racial abuse etc.)																												
Your Details (Person completing this form)? Title/First Name/Surname..... Tel No:																												
Address where the incident occurred? Building: Street: Postcode: Where on the premises did the incident occurred? (E.g. stairs, playground, etc.):																												
The Incident Date of Incident..... Time of Incident:																												
Incident Type? (tick box): <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Slip/Trip/Fall <input type="checkbox"/></td> <td style="width: 33%;">Contact with Machinery <input type="checkbox"/></td> <td style="width: 33%;">Exposure: fire <input type="checkbox"/></td> </tr> <tr> <td>Fall From Height <input type="checkbox"/></td> <td>Contact with Electricity <input type="checkbox"/></td> <td>Exposure: explosion <input type="checkbox"/></td> </tr> <tr> <td>Handling / Lifting <input type="checkbox"/></td> <td>Struck by vehicle <input type="checkbox"/></td> <td>Verbal Abuse <input type="checkbox"/></td> </tr> <tr> <td>Trapped by Object <input type="checkbox"/></td> <td>Exposure Hot Surface <input type="checkbox"/></td> <td>Racial Incident <input type="checkbox"/></td> </tr> <tr> <td>Struck against fixed <input type="checkbox"/></td> <td>Contact Harmful Substance <input type="checkbox"/></td> <td>Sexual Harassment <input type="checkbox"/></td> </tr> <tr> <td>Struck by Object <input type="checkbox"/></td> <td>Physical Violence <input type="checkbox"/></td> <td>Medical issue/ill-health <input type="checkbox"/></td> </tr> <tr> <td>Drowning <input type="checkbox"/></td> <td>Road Traffic Collision <input type="checkbox"/></td> <td>Near Miss <input type="checkbox"/></td> </tr> <tr> <td>Injured by Animal <input type="checkbox"/></td> <td>Asbestos Exposure <input type="checkbox"/></td> <td>Runaway child <input type="checkbox"/></td> </tr> <tr> <td>Finger Traps <input type="checkbox"/></td> <td>Self Harm <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> </table>		Slip/Trip/Fall <input type="checkbox"/>	Contact with Machinery <input type="checkbox"/>	Exposure: fire <input type="checkbox"/>	Fall From Height <input type="checkbox"/>	Contact with Electricity <input type="checkbox"/>	Exposure: explosion <input type="checkbox"/>	Handling / Lifting <input type="checkbox"/>	Struck by vehicle <input type="checkbox"/>	Verbal Abuse <input type="checkbox"/>	Trapped by Object <input type="checkbox"/>	Exposure Hot Surface <input type="checkbox"/>	Racial Incident <input type="checkbox"/>	Struck against fixed <input type="checkbox"/>	Contact Harmful Substance <input type="checkbox"/>	Sexual Harassment <input type="checkbox"/>	Struck by Object <input type="checkbox"/>	Physical Violence <input type="checkbox"/>	Medical issue/ill-health <input type="checkbox"/>	Drowning <input type="checkbox"/>	Road Traffic Collision <input type="checkbox"/>	Near Miss <input type="checkbox"/>	Injured by Animal <input type="checkbox"/>	Asbestos Exposure <input type="checkbox"/>	Runaway child <input type="checkbox"/>	Finger Traps <input type="checkbox"/>	Self Harm <input type="checkbox"/>	Other <input type="checkbox"/>
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Describe what happened? 																												
If the incident involved a person circle as appropriate: Employee Pupil (Schools Only) Member of Public Contractor Volunteer																												
Was there an injury? (includes verbal abuse and a near miss) Yes/No																												
Injuries? (tick box): <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Aches/Pains <input type="checkbox"/></td> <td style="width: 25%;">Bruises <input type="checkbox"/></td> <td style="width: 25%;">Cuts <input type="checkbox"/></td> <td style="width: 25%;">Fracture <input type="checkbox"/></td> <td style="width: 25%;">Spinal Injury <input type="checkbox"/></td> </tr> <tr> <td>Amputation <input type="checkbox"/></td> <td>Burns/Scalds <input type="checkbox"/></td> <td>Dislocation <input type="checkbox"/></td> <td>Head Injury <input type="checkbox"/></td> <td>Sprain/Strain <input type="checkbox"/></td> </tr> <tr> <td>Asphyxiation <input type="checkbox"/></td> <td>Crushed <input type="checkbox"/></td> <td>Electric Shock <input type="checkbox"/></td> <td>Nausea <input type="checkbox"/></td> <td>Unconscious <input type="checkbox"/></td> </tr> <tr> <td>Back Injury <input type="checkbox"/></td> <td>Chest Pains <input type="checkbox"/></td> <td>Eye Injury <input type="checkbox"/></td> <td>Poisoning <input type="checkbox"/></td> <td>No Injury <input type="checkbox"/></td> </tr> </table>		Aches/Pains <input type="checkbox"/>	Bruises <input type="checkbox"/>	Cuts <input type="checkbox"/>	Fracture <input type="checkbox"/>	Spinal Injury <input type="checkbox"/>	Amputation <input type="checkbox"/>	Burns/Scalds <input type="checkbox"/>	Dislocation <input type="checkbox"/>	Head Injury <input type="checkbox"/>	Sprain/Strain <input type="checkbox"/>	Asphyxiation <input type="checkbox"/>	Crushed <input type="checkbox"/>	Electric Shock <input type="checkbox"/>	Nausea <input type="checkbox"/>	Unconscious <input type="checkbox"/>	Back Injury <input type="checkbox"/>	Chest Pains <input type="checkbox"/>	Eye Injury <input type="checkbox"/>	Poisoning <input type="checkbox"/>	No Injury <input type="checkbox"/>							
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Body part(circle as appropriate): Ankle / Arm / Back / Ear / Elbow / Eye / Finger / Foot / Hand / Head / Hip / Knee / Leg / Neck / Shoulder / Trunk / wrist / Other																												

Severity of Injury? (circle as appropriate)	
Minor injury / Major injury / Fatality / Taken to Hospital / Dangerous Occurrence / Other Incident	
Has the Incident been Reported to the HSE? Yes / No	
Did the Person? (tick relevant boxes):	
Go to Hospital <input type="checkbox"/>	Go home <input type="checkbox"/> Receive First Aid <input type="checkbox"/>
Go for treatment elsewhere <input type="checkbox"/>	Remain at work/school <input type="checkbox"/> None of above <input type="checkbox"/>
If yes who administered First Aid?	
What treatment was given.....	
If referred to Hospital by what means(circle as appropriate):	
Ambulance / Member of staff's car / Made own way / Taxi / Other	
Time off Work (Employees Only):	
Number of days off work were:	
Details of the Person Involved:	
Forename & Surname.....Address.....	
.....Town.....Post Code..... Tel No	
Gender: Male / Female	Age:
If a minor has the parent/guardian been informed Yes/No.	
Was there any property damage? Yes / No	
Description of item damaged:	
How did the damage occur?	
Have repairs been carried out Yes/No Have repairs been ordered Yes/No By whom.....	
If no why not	
Were there any witnesses? Yes / No	
Name:	Name:
Address:	Address:
..... Tel No: Tel No:
Remedial action taken by Headteacher / Manager to prevent reoccurrence?	
Manager Please Print Name:	

Appendix 4. 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 infectious disease, including 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
Athlete's foot	None.
Campylobacter	Until 48 hours after symptoms have stopped.
Chicken pox (shingles)	Cases of chickenpox are generally infectious from 2 days before the rash appears to 5 days after the onset of rash. Although the usual exclusion period is 5 days, all lesions should be crusted over before children return to nursery or school. A person with shingles is infectious to those who have not had chickenpox and should be excluded from school if the rash is weeping and cannot be covered or until the rash is dry and crusted over.
Cold sores	None.
Respiratory infections including coronavirus (COVID-19)	Children and young people should not attend if they have a high temperature and are unwell. Anyone with a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.
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 a factsheet to send to parents or carers and staff.
Slapped cheek syndrome, Parvovirus B19, Fifth's disease	None (not infectious by the time the rash has developed).

Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
Diarrhoea and/or vomiting (Gastroenteritis)	Children and adults with diarrhoea or vomiting should be excluded until 48 hours after symptoms have stopped and they are well enough to return. If medication is prescribed, ensure that the full course is completed and there is no further diarrhoea or vomiting for 48 hours after the course is completed. For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health adviser or environmental health officer will advise. If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.
Cryptosporidiosis	Until 48 hours after symptoms have stopped.
E. coli (verocytotoxigenic or VTEC)	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
Food poisoning	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
Salmonella	Until 48 hours after symptoms have stopped.
Typhoid and Paratyphoid fever	Seek advice from environmental health officers or the local health protection team.
Flu (influenza)	Until recovered.
Tuberculosis (TB)	Pupils and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. Pupils and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.
Whooping cough (pertussis)	A child or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so, or 21 days from onset of illness if no antibiotic treatment.
Conjunctivitis	None.
Giardia	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).
Head lice	None.

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