

13 Premises Management and Health & Safety at Work Policy



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Approval from Headteacher: Mike Gunston

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This policy was reviewed and agreed by the FRA Committee

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Changes since last version:

- Full overhaul
- Use of model policy on The Key
- First Aid policy added as an appendix

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1. Aims

The school's Governing Body and Head Teacher recognise and accept their responsibilities under law. As responsible employers and/or persons in control of premises, the requirement to provide a safe and healthy working environment for all employees and others affected by its activities is acknowledged.

The school is committed to managing risks by ensuring that risk assessments are undertaken, control measures implemented and systems are continuously monitored and reviewed led by the school's Governing Body and Head Teacher, assisted by the School Business Manager.

In particular the Governing Body and Head Teacher are responsible for:

- providing a safe and healthy working and learning environment and ensuring that the premises are maintained in a safe condition
- maintaining safe access to and egress from the premises
- preventing accidents and work-related ill health
- assessing and controlling risks from curriculum and non-curriculum work activities including offsite visits
- complying with statutory requirements as a minimum
- ensuring safe working methods and providing safe equipment
- providing effective information, instruction and training
- monitoring and reviewing systems to make sure they are effective
- developing and maintaining a positive health and safety culture through communication and consultation with employees and their representatives on health and safety matters
- setting targets and objectives to develop a culture of continuous improvement
- ensuring a healthy working environment is maintained including adequate welfare facilities
- ensuring adequate resources are made available for health and safety issues, so far as is reasonably practicable
- ensuring safe use, handling and storage of substances at work.

In addition to the above commitment, the Governing Body and Head Teacher also recognise their obligations to non-employees and provide trainees, members of the public, pupils, contractors, etc, or anyone who is or may be affected by the school's activities with the necessary information, instruction, training and supervision available to ensure the safety of those affected.

The Governing Body and Head Teacher will ensure adequate resources, including finance to implement the Policy.

The Governing Body and Head Teacher are committed to the arrangements stated in this Policy Document and all members of staff are required to comply. They are encouraged to support the Governing Body and Head Teachers commitment to continuous improvement in the school's health and safety performance. For the Policy Document to be effectively implemented, the school requires the full co-operation of employees and others who use the premises.

This Policy Statement and the accompanying organisation and arrangements will be reviewed at least annually and revised as and when necessary. This Policy Statement, together with the organisational structure and the following arrangements and procedures, has been approved by the school's Governing Body.

2. Legislation

This policy is based on advice from the Department for Education (DfE) on health and safety in schools, guidance from the Health and Safety Executive (HSE) on incident reporting 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 visitors on your premises

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 (HSE) 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 require 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.

This policy complies with our funding agreement and articles of association.

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 Headteacher.

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 appointed by the FRA Committee.

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, the Deputy Headteacher assumes the above day-to-day health and safety responsibilities.

3.3 Health and safety lead

The nominated health and safety lead is the School Business Manager.

The nominated competent person is the Health and Safety Manager.

3.4 Staff

School staff have a duty to take care of pupils in the same way that a prudent parent/carer 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/carers

Pupils and parents/carers 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

The Site Manager, Assistant Site Manager and Site Operative 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 Manager, Assistant Site Manager and Site Operative 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 practiced at least once a term.

The fire alarm is a loud continuous bell.

Fire alarm testing will take place once a week.

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

In the event of a fire:

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

- 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 point. This is the Astro Pitch.

- Form tutors/class teachers will take a register of pupils, which will then be checked against the attendance register of that day

- The School Business Manager will take a register of all staff

- Staff and pupils will remain outside the building until the emergency services say it is safe to re-enter

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 disabilities. Any student, staff member or visitor to the school may require their own personal emergency evacuation plans (PEEPs). These will be completed by the administration team or Medical Room Supervisor.

6. COSHH

Schools are required to control hazardous substances, which can take many forms, including but not limited to:

- 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 Health and Safety Manager and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

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

COSHH Data sheets for cleaning materials are passed to the Health and Safety Manager and copies given to the Cleaner in Charge. The Science Technicians keep copies of all the data sheets in respect of chemicals for the department. All chemicals are kept under strict key control within suitable designated areas. The Science Technicians and the Health and Safety Manager undertake and regularly review risk assessments. Any concerns are advised to the School Business Manager or the Head Teacher. 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 has been completed on 30th October 2025 by Ligtas Consultancy and Training Ltd is responsible for ensuring that the identified operational controls are conducted and recorded in the school's water log book

This risk assessment will be reviewed every two years and when significant changes have occurred to the water system and/or building footprint

The risks from legionella are mitigated by the following the written scheme that was provided as part of the risk assessment.

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 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 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 the Site Manager, Assistant Site Manager or Site Operative 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 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

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 Site Manager, Assistant Site Manager or Site Operative

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)

7.4 Specialist equipment

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

Oxygen cylinders are stored in a designated space, and staff are trained in the removal, storage and replacement of oxygen cylinders.

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 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 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 skills, knowledge and experience to do the work.

We will ensure that there is a suitable and sufficient working at height risk assessment in place and that any person working at height follows the control measures identified in the risk assessment to minimise the risk of harm from the work activity.

In addition:

- The Site Manager, Assistant Site Manager retains ladders for working at height
- Pupils are prohibited from using ladders
- Staff will wear appropriate footwear and clothing when using ladders
- Contractors are expected to provide their own ladders for working at height
- Before using a ladder, staff are expected to conduct a visual inspection to ensure its safety
- Access to high levels, such as a roof, is only permitted by trained and competent persons

10. Manual handling

The procedures related to manual handling apply to activities where there is a foreseeable risk of injury.

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 must seek further assistance.

We will ensure that a risk assessment is undertaken to identify the nature of manual handling in the school, and that those who may be involved in manual handling activities are required to read it. We will make sure proper mechanical aids and lifting equipment are available in the 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:

Risk assessments will be completed where off-site visits and activities require them

All off-site visits are appropriately staffed

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

There will always be at least 1 first aider on school trips and visits

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 at themselves to their line manager/headteacher immediately. This applies to violence from pupils, visitors or other staff.

14. Smoking and vaping

Smoking and vaping 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 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 (e.g. nappy or pad changing)

Wear goggles if there is a risk of splashing to the face

Use the correct personal protective equipment when handling cleaning chemicals

Use personal protective equipment (PPE) to control the spread of infectious diseases where required or recommended by government guidance and/or a risk assessment

15.4 Cleaning of the environment

Clean the environment 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 Animals

Wash hands before and after handling any animals
Keep animals' living quarters clean and away from food areas
Dispose of animal waste regularly, and keep litter boxes away from pupils
Supervise pupils when playing with animals
Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a school 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 staff and pupils 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 daily.

Keeping rooms well ventilated

We will use risk assessments 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 Pupils vulnerable to infection

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

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.

In addition to general cleaning guidance:

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 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.

Staff absences are managed by the HR Manager who will report any worrying trends or known situations to the Head Teacher. If there are any health and wellbeing concern the Head Teacher will interview (or telephone if absent) any teaching staff and if he wishes to do so, members of the support staff.

All Staff undertake a return-to-work interview with their Line Manager after a sickness absence. Any concerns are raised by the Line Manager to the Business Manager for monitoring and referral where appropriate.

The school buys in the services of Worcestershire CC Occupational Health Department and a local occupational health care Provider. When felt appropriate the Head Teacher or Business Manager will refer cases to them, including any need to help with staff work-related stress. The Head Teacher will also ensure the Governing Body are aware of any relevant cases.

18. Accident reporting (see First Aid Policy)

19. Training

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

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

20. Monitoring

This policy will be reviewed by the School Business Manager every year.

At every review, the policy will be approved by the Finance, Risk and Audit Committee.

21. Links with other policies

This health and safety policy links to the following policies:

30. Medical Conditions Policy

15. Off-site Visits Policy

Appendix 1. First Aid Policy

1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes

2. Legislation and guidance

This policy is based on advice from the Department for Education on first aid in schools and health and safety in schools, and guidance from the Health and Safety Executive (HSE) on incident reporting in schools, and the following legislation:

- The Health and Safety (First-Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- 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 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- Social Security (Claims and Payments) Regulations 1979, which set out rules on the retention of accident records
- The Education (Independent School Standards) Regulations 2014, which require that suitable space is provided to cater for the medical and therapy needs of pupils

: This policy complies with our funding agreement and articles of association.

3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed person is the Medical Room Supervisor. They are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role (see section 7) and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending pupils home to recover, where necessary

- Filling in the accident book on the same day as, or as soon as is reasonably practicable after, an incident
- Keeping their contact details up to date

Our school's appointed persons and first aiders are listed in appendix 1. Their names will also be displayed prominently around the school site.

3.2 The Governing Body

The governing board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the headteacher and staff members.

3.3 The Head Teacher

The headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary (see section 6)

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders and/or appointed person in school are
- Completing accident reports for all incidents they attend to where a [first aider/appointed person is not called
- Informing the headteacher or their manager of any specific health conditions or first aid needs

4. First aid procedures

4.1 In-school procedures

- If a person is unwell or has an accident, the closest member of staff present will assess the seriousness of the injury or illness
- If the issue is not a major illness or injury, the member of staff will send them to the front office for assistance. The Medical Room Supervisor will then manage their first aid needs. If the Medical Room Supervisor is not present, the office will call for the nearest first aid trained member of staff. If needs be, the member of staff could send someone to accompany the ill or injured person

- If a person has suffered a significant accident or is very unwell, the member of staff must alert the first aid team. This can be done by radio or telephone. Any of the first aiders on the list will be available to manage the situation
- When attending the incident, the first aider will assess the illness or injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on the scene until help arrives
- If the first aider judges that the person is too unwell to remain in school, or they have suffered a major accident, they will ask the office to contact parents or emergency contact and inform them of the accident. Where necessary, they may ask them to collect the person who is unwell or injured. Upon their arrival, the first aider will recommend next steps to the parents or emergency contact
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If emergency services are called, the Schools Administration Team will contact parents or emergency contact immediately
- The first aider/relevant member of staff must complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

4.2 Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit including, at minimum:
 - A leaflet giving general advice on first aid
 - 6 individually wrapped sterile adhesive dressings
 - 1 large sterile unmedicated dressing
 - 2 triangular bandages – individually wrapped and preferably sterile
 - 2 safety pins
 - Individually wrapped moist cleansing wipes
 - 2 pairs of disposable gloves
- Information about the specific medical needs of pupils
- Parents' contact details

When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings
- 3 large sterile unmedicated ambulance dressings (not less than 15cm x 20 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustproof blunt-ended scissors

Risk assessments will be completed by the educational visits lead prior to any educational visit that necessitates taking pupils off school premises.

5. First aid equipment

A typical first aid kit in our school will include the following:

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads
- 2 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium-sized individually wrapped sterile unmedicated wound dressings
- 2 large sterile individually wrapped unmedicated wound dressings
- 3 pairs of disposable gloves

No medication is kept in first aid kits.

6. Record-keeping and reporting

6.1 First aid and accident record book

- The accident book will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury
- As much detail as possible should be supplied when reporting an accident, including all of the information included in the accident form
- 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.

6.2 Reporting to the HSE

The First Aider 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 School Business Manager will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e., by telephone) and followed up in writing within 10 days.

School staff: reportable injuries, diseases or dangerous occurrences

These include:

- Death
- Specified injuries, which 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) which:
 - Covers more than 10% of the whole body's total surface area; or
 - Causes significant damage to the eyes, respiratory system or other vital organs
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the School Business Manager will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
 - Carpal tunnel syndrome
 - Severe cramp of the hand or forearm
 - Occupational dermatitis, e.g., from exposure to strong acids or alkalis, including domestic bleach
 - Hand-arm vibration syndrome
 - Occupational asthma, e.g from wood dust
 - Tendonitis or tenosynovitis of the hand or forearm
 - Any occupational cancer
 - Any disease attributed to an occupational exposure to a biological agent
- 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

Pupils and other people who are not at work (e.g., visitors): reportable injuries, diseases or dangerous occurrences

These include:

- Death of a person that arose from, or was in connection with, a work activity*
- An injury that arose from, or was in connection with, a work activity* and where the person is taken directly from the scene of the accident to hospital for treatment

*An accident "arises out of" or is "connected with a work activity" if it was caused by:

- A failure in the way a work activity was organised (e.g., inadequate supervision of a field trip)
- The way equipment or substances were used (e.g., lifts, machinery, experiments etc); and/or

- The condition of the premises (e.g., poorly maintained or slippery floors)

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>

7. Training

All school staff are able to undertake first aid training if they would like to.

All first aiders must have completed a training course, and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received and when this is valid until.

The school will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the school will arrange for staff to retake the full first aid course before being reinstated as a first aider.

List of Appointed persons and First Aiders

STAFF MEMBER'S NAME	ROLE	CONTACT DETAILS
Esther Hayman	Medical Room Supervisor	306/370
Sue Chapman	Librarian	312
Charlotte Payne	Attendance/Admin Assistant	359
Anita Davies	Exams Officer	338
Michele Palmer	HR/Office Manager	307
Oonagh Rasile	Pastoral Manager	214
Karen Brakes	Careers Lead	219
Vaughan Perkins	Head of Geography	
Beth Miller	Teaching Assistant	
Adam Defelice	Site Assistant	
Liana Higgins	PE Teacher	

First Aid Training Log

NAME/TYPE OF TRAINING	STAFF WHO ATTENDED (INDIVIDUAL STAFF MEMBERS OR GROUPS)	DATE ATTENDED	DATE FOR TRAINING TO BE RENEWED (WHERE APPLICABLE)
First Aid at Work	Richard Cupper	17.08.23	16.08.26
First Aid at Work	Esther Hayman		Aug 2026
First Aid at Work	Sue Chapman		Feb 2028
First Aid at Work	Charlotte Payne		Apr 2028
First Aid at Work	Anita Davies		Apr 2028
First Aid at Work	Michele Palmer		Aug 2026
First Aid at Work	Oonagh Rasile		Oct 2026
First Aid at Work	Karen Brakes		Oct 2026
Outdoor First Aid	Vaughan Perkins		Mar 2027
First Aid at Work	Beth Miller		Mar 2027
First Aid at Work	Adam Defelice		Aug 2026
First Aid at Work	Liana Higgins		June 2027

Defibrillator Locations

LOCATION	TYPE OF KIT	PUBLIC ACCESS
School Medical Room	Full Kit	No
Sports Centre	Full Kit	Yes

Appendix 2. Risk Assessment Policy

1. Aims

The school aims to ensure that:

All risks that may cause injury or harm to staff, pupils and visitors are identified, and all control measures that are reasonably practicable are in place to avoid injury or harm

Risk assessments are conducted and reviewed on a regular basis

2. Legislation and statutory requirements

This policy is based on the following legislation and Department for Education (DfE) guidance:

Paragraph 16 of part 3 of The Education (Independent School Standards) Regulations 2014, which requires proprietors to have a written risk assessment policy

Regulations 3 and 16 of The Management of Health and Safety at Work Regulations 1999 require employers to assess risks to the health and safety of their employees, including new and expectant mothers

Regulation 4 of The Control of Asbestos Regulations 2012 requires that employers carry out an asbestos risk assessment

Employers must assess the risk to workers from substances hazardous to health under regulation 6 of The Control of Substances Hazardous to Health Regulations 2002

Under regulation 2 of The Health and Safety (Display Screen Equipment) Regulations 1992, employers must assess the health and safety risks that display screen equipment pose to staff

Regulation 9 of The Regulatory Reform (Fire Safety) Order 2005 says that fire risks must be assessed

Regulation 4 of The Manual Handling Operations Regulations 1992 requires employers to conduct a risk assessment for manual handling operations

The Work at Height Regulations 2005 say employers must conduct a risk assessment to help them identify the measures needed to ensure that work at height is carried out safely

DfE guidance on first aid in schools says schools must carry out a risk assessment to determine what first aid provision is needed

DfE guidance on the Prevent duty states that schools are expected to assess the risk of pupils being drawn into terrorism

The Health and Safety Executive (HSE) say schools that manage their own pools must conduct a risk assessment

A table of all the risk assessments schools are required to have in place can be found in appendix 1 of this policy.

This policy complies with our funding agreement and articles of association.

3. Definitions

Risk assessment	A tool for examining the hazards linked to a particular activity or situation, and establishing whether enough precautions have been
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	taken in order to prevent harm from them based on their likelihood and their potential to cause harm
Hazard	Something with the potential to cause harm to people, such as chemicals or working from height
Risk	The chance (high or low) that people could be harmed by hazards, together with an indication of how serious the harm could be
Control measure	Action taken to prevent people being harmed

4. Roles and responsibilities

4.1 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.

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

4.2 The Headteacher

The headteacher, or in the headteacher's absence the Deputy Headteacher is responsible for ensuring that all risk assessments are completed and reviewed.

4.3 School staff and volunteers

School staff are responsible for:

- Assisting with, and participating in, risk assessment processes, as required
- Familiarising themselves with risk assessments
- Implementing control measures identified in risk assessments
- Alerting the headteacher to any risks they find that need assessing

4.4 Pupils and parents/carers

Pupils and parents/carers are responsible for following the school's advice in relation to risks, on-site and off-site, and for reporting any hazards to a member of staff.

4.5 Contractors

Contractors are expected to provide evidence that they have adequately risk assessed all their planned work.

5. Risk assessment process

When assessing risks in the school, we will follow the process outlined below.

We will also involve staff, where appropriate, to ensure that all possible hazards have been identified and to discuss control measures, following a risk assessment.

Step 1: identify hazards – we will consider activities, processes and substances within the school and establish what associated hazards could injure or harm the health of staff, pupils and visitors.

Step 2: decide who may be harmed and how – for each hazard, we will establish who might be harmed, listing groups rather than individuals. We will bear in mind that some people will have special requirements, for instance pupils with special educational needs (SEN) and expectant mothers. We will then establish how these groups might be harmed.

Step 3: evaluate the risks and decide on control measures (reviewing existing ones as well) – we will establish the level of risk posed by each hazard and review existing control measures. We will balance the level of risk against the measures needed to control the risks and do everything that is reasonably practicable to protect people from harm.

Step 4: record significant findings – the findings from steps 1 to 3 will be written up and recorded in order to produce the risk assessment. A risk assessment template can be found in appendix 2 of this policy.

Step 5: review the assessment and update, as needed – we will review our risk assessments, as needed, and the following questions will be asked when doing so:

Have there been any significant changes?

Are there improvements that still need to be made?

Have staff or pupils spotted a problem?

Have we learnt anything from accidents or near misses?

Step 6: retaining risk assessments – risk assessments are retained for 3 years after the length of time they apply. Risk assessments are securely disposed of.

6. Monitoring arrangements

Risk assessments are written as needed and reviewed by The School Business Manager and health & Safety Manager.

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 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 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.
Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
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.
Conjunctivitis	None.
Cryptosporidiosis	<p>Until 48 hours after symptoms have stopped.</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>
Diarrhoea and/or vomiting (Gastroenteritis/norovirus)	<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 adviser or environmental health officer will advise.</p>

Infection or complaint	Recommended period to be kept away from school or nursery
Diphtheria	Exclusion is essential. Contact your local UKHSA health protection team about any cases in your setting. For toxigenic Diphtheria, only family contacts must be excluded until cleared to return by your local UKHSA health protection team.
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.
Flu (influenza)	Until recovered.
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).
Giardiasis (giardia)	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).
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.
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.

Infection or complaint	Recommended period to be kept away from school or nursery
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.
Meningitis	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
Meningitis viral	Until recovered.
Meningococcal meningitis/ septicaemia	If the child has been treated and has recovered, they can return to school.
Mpox	Until recovered and deemed safe to return by their clinician or in line with current guidance.
MRSA (meticillin resistant Staphylococcus aureus)	None.
Mumps	5 days after onset of swelling (if well).
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.
Ringworm	Exclusion not needed once treatment has started.
Rotavirus	Until 48 hours after symptoms have stopped.
Rubella (German measles)	5 days from appearance of the rash.
Salmonella	Until 48 hours after symptoms have stopped.
Scabies	The infected child or staff member should be excluded until after the first treatment has been carried out.

Infection or complaint	Recommended period to be kept away from school or nursery
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).
Threadworm	None.
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.
Typhoid and Paratyphoid fever	Inform your local health protection team as soon as possible. Seek advice from environmental health officers or the local health protection team on required exclusion periods.
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.