



# Health and Safety Policy

Beam County Primary School

**Approved by:**

**Date:** 22 July 2024

**Last reviewed on:**

24 November 2021, 22 July 2024

**Next review due by:**

November 2027

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# 1. Aims

Our school aims to:

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

# 2. Legislation

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

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

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

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

London Borough of Barking and Dagenham 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 staff members.

## 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; and
- delegating responsibility to the Site Manager to ensure cleaners are appropriately trained and have access to personal protective equipment, where necessary.

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

### **3.3. Health and safety lead**

The nominated health and safety lead is the Caretaker

### **3.4. Staff**

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

Staff will:

- take reasonable care of their own health and safety and that of others who may be affected by what they do at work;
- co-operate with the school on health and safety matters;
- work in accordance with training and instructions;
- inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken;
- model safe and hygienic practice for pupils; and
- understand emergency evacuation procedures and feel confident in implementing them.

### **3.5. Pupils and parents**

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

### **3.6. Contractors**

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

## **4. Site security**

The Caretaker and Assistant Caretaker in school hours along with our SLA Alarm Monitoring Service are responsible for the security of the school site out of school hours. They are responsible for visual inspections of the site and for the intruder and fire alarm systems.

Caretaker and, in the absence of the Caretaker, the Assistant caretaker together with the Headteacher 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 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 points. These are assembly points KS1 playground and KS2 field at the rear of the school. Kitchen staff to assemble by the car park bin compound.
- Class teachers will take a register of pupils which will then be checked against the attendance register of that day. They will visually hold up a red or green card to signal pupil numbers.
- The Fire Marshalls will use Inventory to take register staff in their area.
- Staff and pupils will remain outside the building until the emergency services or fire marshalls 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. These pupils have their own individual plan.

Lifts are not to be used.

A fire safety checklist can be found in Appendix 1: Fire Safety Checklist.

## **6. Control of Substances Hazardous to Health Regulations (“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; and/or
- germs that cause diseases, such as leptospirosis or legionnaires disease.

COSHH risk assessments are completed by the Catering 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.

Hazardous substances/cleaning products are stored in locked cupboards which are separate to pupil equipment. Pupil access to substances are restricted.

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 that they have adequate ventilation.

### **6.2. Legionella**

- A water risk assessment has been completed on September 2018 by IWS who are 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 year and when significant changes have occurred to the water system and/or building footprint
- The risks from legionella are mitigated by the following: Temperature checks, sanitisation of taps, showers, etc.

### 6.3. Asbestos

- Staff are briefed on the hazards of asbestos, the location of any asbestos in the school and the action to take if they suspect they have disturbed it.
- Arrangements are in place to ensure that contractors are made aware of any asbestos on the premises and that it is not disturbed by their work.
- Contractors will be advised that if they discover material which they suspect could be asbestos, they will stop work immediately until the area is declared safe.
- 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 that it meets appropriate educational standards.
- All equipment is stored in the appropriate storage containers and areas. All containers are labelled with the correct hazard sign and contents.
- All passenger lifts and hoists for disabled pupils are inspected by a competent engineer on a six monthly basis.
- Playground equipment and its use is supervised during all breaks during the school day.
- If the equipment is used during lesson time, supervision is again maintained.
- A decision is made and enforced if inclement weather means that equipment becomes unsafe to use on a particular day.
- Appropriate levels of supervision will be maintained in playgrounds as described in the playground risk assessment.

### 7.1. Electrical equipment

- All staff are responsible for ensuring that they use and handle electrical equipment sensibly and safely.
- Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them.
- Any potential hazards will be reported to Site Manager 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's 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 Finance Manager.

### 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 would be responsible for the maintenance and safety of their children's wheelchairs. In school, staff promote the responsible use of wheelchairs.

## 8. Lone working

Lone working may include:

- late working;
- home or site visits;
- weekend working;
- site manager duties;
- site cleaning duties; and/or
- working in a single occupancy office.

Potentially dangerous activities, such as those where there is a risk of falling from height, will not be undertaken when working alone. If there are any doubts about the task to be performed then the task will be postponed until other staff members are available.

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

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

## 9. Home Working

You're a home worker if you permanently work from your home or split your working time between the workplace and home (sometimes called hybrid working).

Beam County Primary School has the same health and safety responsibilities for you whether you are working at home or in a workplace.

Like any worker, you must take care of your own health and safety and that of others who may be harmed by your actions while you are working.

You must cooperate with your employers and other workers to help everyone meet their duties under the law.

### 9.1. Stress and mental health

There are some things you can do to help prevent stress and look after your mental health when working from home.

- Stay in regular contact with your manager and colleagues
- Talk to your manager about workloads and be open about how you're feeling
- Take regular breaks during the day and use your annual leave
- Set and stick to a routine – don't revisit your computer outside your regular hours

If you think your work is affecting your mental health or wellbeing, please contact the Headteacher who will make a referral to Occupational Health for you or you can call the Employee Assistance Programme.

### 9.2. Working on a computer

You should take simple steps to protect your health when working on a computer.

Try to find a suitable area to work in, avoiding uncomfortable positions and making sure you move around regularly.

### 9.3. Your work environment

Wherever you work in your home, there are some things you can do to keep yourself healthy and safe:

- arrange equipment and furniture to avoid trailing leads and cables
- check that your plugs, leads, wires and cables are in good condition
- keep your work area tidy and free from obstructions that could cause slips or trips

- check you have adequate lighting in your work area to avoid eyestrain

Further information can be found on the HSE website here [HSE Home Working](#)

## 10. 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. The caretaker and assistant caretaker retain ladders for working at height.

In addition:

- 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; and
- access to high levels, such as roofs, is only permitted by trained persons.

## 11. Manual handling

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

The school will ensure that proper mechanical aids and lifting equipment are available in school and that staff are trained in how to use them safely. The lifting equipment will be inspected on an annual basis.

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.

## 12. 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, a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details.
- Early Years Foundation Stage: At least one first aider with a current paediatric first aid certificate
- All other trips, at least one qualified first aider will be in attendance.

## 13. 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.

## 14. Violence at work

We believe that staff should not be in any danger at work and will not tolerate violent or threatening behaviour towards our staff.



All staff will report any incidents of aggression or violence (or near misses) directed to themselves to their line manager/headteacher immediately. This applies to violence from pupils, visitors or other staff.

## **15. Smoking**

Smoking is not permitted anywhere on the school premises.

## **16. Infection prevention and control**

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

### **16.1. 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.

### **16.2. Coughing and sneezing**

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

### **16.3. Personal protective equipment PPE**

- 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.

### **16.4. Cleaning of the environment**

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

### **16.5. 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.

### **16.6. 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.

### **16.7. 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.

## **16.8. 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 pet

## **16.9. Pupils vulnerable to infection**

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

## **16.10. Exclusion periods for infectious diseases**

The school will follow recommended exclusion periods outlined by Public Health England, summarised in Recommended absence period for preventing the spread of infection.

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

# **17. New and expectant mothers**

Risk assessments will be carried out whenever any employee or pupil notifies the school that they are pregnant.

Appropriate measures will be put in place to control risks identified. Some specific risks are summarised below:

- Chickenpox can affect the pregnancy if a woman has not already had the infection. Expectant mothers should report exposure to antenatal carer and GP at any stage of exposure. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles.
- If a pregnant woman comes into contact with measles or German measles (rubella), she should inform her antenatal carer and GP immediately to ensure investigation.
- Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), the pregnant woman should inform her antenatal care and GP as this must be investigated promptly.

# **18. Mental health and Wellbeing**

We are committed to promoting high levels of mental health and wellbeing and recognise the importance of identifying and reducing workplace stressors.

Systems are in place within the school for responding to individual concerns and monitoring staff workloads. Staff have access to support available in school and within the local authority.

See Wellbeing Policy, Appendix D.

# **19. Accident reporting**

## **19.1. Accident record book**

An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. An accident form template can be found in

- Appendix 2: Accident Report.
- As much detail as possible will be supplied when reporting an accident.
- Information about injuries will also be kept in the pupil's educational record.
- Records held in the first aid and accident book will be retained by the school for a minimum of three years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

### **19.2. Reporting to the Health and Safety Executive**

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

The office will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death;
- Specified injuries. These are:
  - fractures, other than to fingers, thumbs and toes;
  - amputations;
  - any injury likely to lead to permanent loss of sight or reduction in sight;
  - Any crush injury to the head or torso causing damage to the brain or internal organs
  - Serious burns (including scalding)
  - Any scalping requiring hospital treatment
  - Any loss of consciousness caused by head injury or asphyxia
  - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days.
- Where an accident leads to someone being taken to hospital.
- Where something happens that does not result in an injury, but could have done
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
  - The collapse or failure of load-bearing parts of lifts and lifting equipment
  - The accidental release of a biological agent likely to cause severe human illness
  - The accidental release or escape of any substance that may cause a serious injury or damage to health
  - An electrical short circuit or overload causing a fire or explosion

Information on [How to make a RIDDOR report, HSE](#)

### **19.3. Notifying parents**

The office will inform parents/carers of any accident or injury sustained by a pupil in the Early Years Foundation Stage, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

### **19.4. Reporting to child protection agencies**

The Assistant Headteacher or Headteacher will notify the Local Authority of any serious accident or injury to, or the death of, a pupil in the Early Years Foundation Stage while in the school's care.

### **19.5. Reporting to Ofsted**

The Assistant Headteacher or Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil 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.

## **20. Risk Assessments**

Risk Assessments are part of the schools planning procedure for activities. The aim of risk assessments is to reduce risk and severity of consequences.

Where possible risk assessments will be compiled in collaboration with the person who will be undertaking the activity.

Responsibility is shared across stakeholders, including:

- site and catering staff - maintenance, cleaning, construction work and catering areas;
- Curriculum leaders and Phase group leaders - in their areas of responsibility where specialist knowledge will be vital e.g. PE, science, technology etc;
- SLT - check the risk assessments to ensure they are appropriate and relevant.

### **20.1. Our Risk assessment process**

We will answer these questions during the learning pathway.

- What is the activity in hand?
- What dangers/problems arise as a result of this?
- Who will be affected if something goes wrong?
- What is the likelihood of something going wrong?
- How severe are the consequences of something going wrong?
- What steps can we take to reduce the possibility of something going wrong?
- What steps can we take to reduce the severity of the consequences if something goes wrong?
- Are we prepared to accept the remaining risk?

Until we can answer yes to this final question you should not regard the control measures as adequate.

When identifying hazards we will consider both unsafe conditions and unsafe acts - this also includes unsafe omissions, such as not wearing personal protective equipment (PPE).

Carry out the same exercise for your own risk assessment scenario. Consider:

- how you might reduce risk
- where on the scale your scenario might sit when reassessed with these controls in mind.

We keep records of risk assessments for future reference or use – this is a record of what precautions have been taken.

Our Risk Assessments will be regularly reviewed especially if there has been an accident/incident or near miss situation.

A Risk Assessment folder is kept and includes a list of Risk Assessments.

## **21. Training**

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

Staff who work in high risk environments, such as in the kitchen, store cupboards or working with cleaning equipment or tools, or work with pupils with special educational needs (SEN), are given additional health and safety training.

## **22. Monitoring**

This policy will be reviewed by the SLT every three years.

At every review, the policy will be approved by the Governing Body or delegated sub-committee.

## **23. Links with other policies**

This health and safety policy links to the following policies:

- First aid
- Supporting pupils with medical conditions
- Accessibility 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

### Accident/Incident Report Form

Please call 020 8724 5233 for a Larger Font

Any serious accident/incident must be reported immediately to your manager and to HR Services on 020 8724 5233.

This form is to be used for all types of hazardous incidents including work related illness, disease, violence and aggression, race/hate and motor vehicle accidents. When completed your manager should submit the form via the HR Portal

[https://lbbd.sharepoint.com/sites/HRSD/SitePages/Request\\_picker.aspx?Cat=9](https://lbbd.sharepoint.com/sites/HRSD/SitePages/Request_picker.aspx?Cat=9) (ideally within 24 hours). Should access to above link not be available, please contact HR Services on 020 8724 5233. Violent or aggressive incidents should also be reported to the Security section.

### Part A — To be completed by or on behalf of the person involved.

Please print in block capitals and complete all relevant sections.

#### 1. Injured/involved person

Full Name (Print):		Address: (Include post code)	
Date of birth:			
Male/Female:		Contact number(s):	
Department:		Job Title:	
Division:		Non employee status:	
Section/School:		Relating to the above, please choose from: member of public/visitor, service user, residential care user, tenant, pupil/student, agency/contractor (give name of company)	
Employee/Non Employee:			

#### 2. Where and when did it happen

Site address: (Including postcode)		Where at the site:	
		Date:	
		Time (24 hour clock):	

#### 3. What happened

Please give a brief description of what happened:	
If a fall from height, how high was the fall?	(To the nearest metre)

#### 4. Injury Details

Injury Type: e.g. fracture/bruise/burn/cut		Part of body: Left/right or upper/lower	
If the injury or condition changes please notify HR Services on 020 8724 5233			

#### 5. Treatment

Taken directly to hospital: (yes/no)		First aid given: (yes/no)	
		Name of first aider:	
Outcome of any hospital visit if known:		Treatment given:	

#### 6. Witness Details

Name:		Address:	
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Contact number:		(include postcode)	
Email address:			

Person completing part A			
Name (block capitals):		Date:	
Signature or email address if sending via email:		Contact Number(s):	

### Part B – To be completed by Manager/Supervisor/Head Teacher.

Please ensure senior management are notified of serious accidents, incidents or dangerous occurrences.

Please print in block capitals and complete all relevant sections. Please give as much information as possible. It is important that information is captured at the time of investigation.

#### 1. Investigation

Are you satisfied that the incident occurred at the date, time and location stated in part A?		Was the involved person authorised to be doing this?	
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#### 2. Risk assessment, procedures, safe systems of work

Is there a suitable and sufficient risk assessment?		Is there a current safe system of work such as code of practice, procedure, etc?	
If no you may need to consider developing a risk assessment or reviewing the assessment if one is already in place. Please give details:		Please yes please state name of the safe system of work such as procedure, operation manual, etc and the date it was given:	Name:  Date issued:

#### 3. Employees – to be completed only if the involved person is an employee including agency

Has instruction/training been given for the task/equipment, give details?		Was personal protective equipment being used please give details? Such as gloves, safety goggles.	
Did the injured person finish their shift?		Did the injured person report to work the following day? If not and if known how long will they be absent from work?	
If the employee is absent from work for 7 days or more (including non working days) you must contact HR Services on 020 8724 5233.			

#### 4. Violence and Aggression – to be completed only if a violent or aggressive incident. Violent and aggressive incidents also need to be sent to Security - [SecurityAccessandID@lbbd.gov.uk](mailto:SecurityAccessandID@lbbd.gov.uk).

Give details of the support offered, including if referred for Counselling and when:		Do you feel this incident needs to be addressed by the LBBd security section?	
Name of the perpetrator:		Did the police arrive?	
Were the police involved?		Time of call:	
Crime reference number?		Time of arrival:	

#### 5. When was the incident reported

Date:		To whom:	
Time:		Their role:	

#### 6. Investigation finding – this section must be completed.

State your existing control measures and further actions	
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required to prevent reoccurrence: Include whether or not any defects were identified including to the environment or equipment.	
Weather condition if incident occurred outside:	

Person completing part B			
Name (block capitals):		Date:	
Signature or email address if sending via email:		Contact Number(s):	



## Appendix 3: Recommended absence period for preventing the spread of infection

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

### Rashes and skin infections

Infection or complaint	Recommended period to be kept away from school or nursery
<b>Athlete's foot</b>	None
<b>Bacillary Dysentery (Shigella)</b>	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
<b>Campylobacter</b>	Until 48 hours after symptoms have stopped.
<b>Chickenpox (Shingles)</b>	<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>
<b>Cold sores</b>	None
<b>Conjunctivitis</b>	None.
<b>Cryptosporidiosis</b>	Until 48 hours after symptoms have stopped.
<b>Diarrhoea and/or vomiting (Gastroenteritis)</b>	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.

Infection or complaint	Recommended period to be kept away from school or nursery
	<p>For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health advisor or environmental health officer will advise.</p> <p>If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.</p>
<b>E. coli (verocytotoxigenic or VTEC)</b>	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
<b>Flu (influenza)</b>	Until recovered.
<b>Food poisoning</b>	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
<b>German measles (rubella)*</b>	Five days from onset of rash.
<b>Giardia</b>	Until 48 hours after symptoms have stopped.
<b>Glandular fever</b>	None (can return once they feel well).
<b>Hand, foot and mouth</b>	Children are safe to return to school or nursery as soon as they are feeling better, there is no need to stay off until the blisters have all healed.
<b>Head lice</b>	None.

Infection or complaint	Recommended period to be kept away from school or nursery
<b>Hepatitis A</b>	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older children with good hygiene who will have been much more infectious prior to diagnosis.
<b>Hepatitis B</b>	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
<b>Hepatitis C</b>	None.
<b>Impetigo</b>	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment
<b>Measles*</b>	Cases are infectious from 4 days before onset of rash to 4 days after so it is important to ensure cases are excluded from school during this period.
<b>Meningitis</b>	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
<b>Meningitis viral</b>	None.
<b>Meningococcal meningitis/ septicaemia</b>	If the child has been treated and has recovered, they can return to school.
<b>MRSA (meticillin resistant Staphylococcus aureus)</b>	None.
<b>Mumps</b>	5 days after onset of swelling (if well).
<b>Ringworm</b>	Exclusion not needed once treatment has started.
<b>Rotavirus</b>	Until 48 hours after symptoms have subsided.

Infection or complaint	Recommended period to be kept away from school or nursery
<b>Salmonella</b>	Until 48 hours after symptoms have stopped.
<b>Scabies</b>	The infected child or staff member should be excluded until after the first treatment has been carried out.
<b>Scarlet fever*</b>	Children can return to school 24 hours after commencing appropriate antibiotic treatment. If no antibiotics have been administered the person will be infectious for 2 to 3 weeks. If there is an outbreak of scarlet fever at the school or nursery, the health protection team will assist with letters and factsheet to send to parents or carers and staff.
<b>Slapped cheek syndrome, Parvovirus B19, Fifth's disease</b>	None (not infectious by the time the rash has developed).
<b>Threadworm</b>	None.
<b>Tuberculosis (TB)</b>	Pupils and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. Pupils and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.
<b>Typhoid and Paratyphoid fever</b>	Seek advice from environmental health officers or the local health protection team.
<b>Whooping cough</b>	A child or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so or 21 days from onset of illness if no antibiotic treatment.