

Health and Safety Policy
Norton CEVC Primary School



Approved by: Norton CEVC Primary School
Governing Body

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Statement of Intent

The Governors and Headteacher acknowledge and accept that:

Suffolk County Council has the prime responsibility for safety, health and wellbeing, and that the Governing Body and Headteacher have specific responsibilities to manage this at school level. These responsibilities must be laid out in the scheme of delegation for the school, and are covered in general terms in the County Council's scheme of delegation.

They also have responsibilities to fulfil the duties contained in the scheme of delegation and shall

- support the published policies and aims of the County Council, and
- promote continuous improvement in the health and safety performance, and
- learn from the experiences of others with the overall aim of updating procedures and arrangements to meet high standards of health and safety management and risk control.

The headteacher, as Local Health and Safety Coordinator, will ensure that guidance, codes of practice and other advice from Suffolk County Council are implemented.

The governing body will ensure that the headteacher is supported and assisted in implementing the policy, advice and guidance of Suffolk County Council and will fulfil its own responsibilities for safety, health and wellbeing of all those who may be affected by the way the school is managed.

This duty extends to ensuring that:

- working conditions and environment
- substances used
- equipment provided, and
- working methods adopted

do not impair the well-being of any employee, or any other person including pupils, clients, contractors, visitors, volunteers and any member of the public who may be affected by the conduct of its work.

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.

This policy has due regard to national guidance including, but not limited to, the following:

- DfE (2022) 'Health and safety: responsibilities and duties for schools'
- DfE (2017) 'Safe storage and disposal of hazardous materials and chemicals'
- HSE (2021) 'Sensible health and safety management in schools'
- DfE (2022) 'First aid in schools, early years and colleges'
- UK Health Security Agency 'Health protection in children and young people settings, including education'

This policy operates in conjunction with the following school policies:

- First Aid Policy
- Supporting Pupils with Medical Conditions Policy
- Infection Control Policy
- Educational Trips and Visits Policy
- Lone Working Policy
- School Security Policy
- Fire Risk Assessment
- Staff Wellbeing Policy

3. Roles and responsibilities

3.1 The Local Authority and Governing Body

Suffolk County Council 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 body.

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

The governor who oversees health and safety is **Rebecca Mabbitt**

The governing body in conjunction with the headteacher, will:

- Ensure they provide a safe place for all users of the site including staff, pupils and visitors.
- Oversee that staff receive training and instruction so that they can perform their duties in a healthy and safe manner.
- Ensure whole-school familiarity with the requirements of the appropriate legislation and codes of practice.
- Create and monitor a management structure responsible for health and safety in the school.
- Ensure there is a detailed and enforceable policy for health and safety, and that the policy is implemented by all.
- Annually assess the effectiveness of the policy and ensure any necessary changes are made.
- Identify the risks relating to possible accidents and injuries and make reasonable adjustments to prevent them occurring.
- Ensure the school has secured safe means of entry and exit for all site users.
- Ensure the school can provide equipment, grounds and systems of work which are safe.
- Ensure safe arrangements are made for the handling, storage and transportation of any articles and substances.
- Ensure staff have safe and healthy working conditions that comply with statutory requirements, codes of practice and guidance.
- Where necessary, ensure the school can provide protective equipment and clothing, along with any necessary guidance and instruction for safe use.

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 body 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, **Peter Mabbitt, 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 **Lisa Sparkes (Headteacher)**

The Health and Safety Lead will:

- Assist with the creation and implementation of this policy.
- Be responsible for investigating accidents and incidents, to understand causes and amend risk assessments as required.

- Be the designated contact with the LA and the HSE where necessary.
- Support staff with any queries or concerns regarding health and safety.
- Identify hazards by conducting risk assessments.
- Supervisory staff/department heads will:
- Be familiar with the requirements of health and safety legislation.
- Be responsible for the implementation and operation of the school's Health and Safety Policy in their department, and for areas of responsibility delegated by the headteacher.
- Be responsible for adhering to the aspects of health and safety that are outlined in their job descriptions.
- Take a keen interest in the Health and Safety Policy and assist in ensuring all staff, pupils and visitors comply with its requirements.

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 (This is a legal obligation under Health and Safety at Work Act 1974 (s.7))
- 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
- Familiarise themselves with the Health and Safety Policy and aspects of their work related to health and safety.
- Avoid any conduct which puts themselves or others at risk.
- Be familiar with all requirements laid down by the governing body
- Ensure that all staff, pupils and visitors are applying health and safety regulations and adhering to any rules, routines and procedures in place.
- Ensure all machinery and equipment is in good working order and safe to use, including adequate guards. They will also not allow improper use of such equipment.
- Use the correct equipment and tools for the job and any protective clothing supplied.
- Ensure any toxic, hazardous or flammable substances are used correctly, and stored and labelled as appropriate.
- Report any defects in equipment or facilities to the designated health and safety officer.
- Take an interest in health and safety matters, and suggest any changes that they feel are appropriate.
- Make suggestions as to how the school can reduce the risk of injuries, illnesses and accidents.
- Exercise good standards of housekeeping and cleanliness.
- Adhere to their common law duty to act as a prudent parent would when in charge of pupils.

3.5 Organisation of School Safety, Health and Well Being Tasks

Task	Name of person responsible	Job Title of person responsible
School Safe Health and Wellbeing System and Policy Review	Lisa Sparkes	Headteacher

Health and safety committee and/or governor committees	Lisa Sparkes Rebecca Mabbitt	Headteacher Health and Safety Governor
Communication and information management	Lisa Sparkes Fiona Rapley Paul Marshall	Headteacher Office Manager Chair of Governors
Critical Incident Management	Lisa Sparkes Fiona Rapley Paul Marshall	Headteacher Office Manager Chair of Governors
H&S Training, induction and refreshers	Lisa Sparkes	Headteacher
Personal safety – to include challenging behaviour and lone working	Lisa Sparkes	Headteacher
Planned checks / procedures on premises / equipment	Fiona Rapley	Office Manager
Risk assessments for managed moves, EOTAS and excluded pupils	Lisa Sparkes Peter Mabbitt	Headteacher Deputy Head/SENCO
Infection Control	Lisa Sparkes	Headteacher
Incident reporting /investigation	Lisa Sparkes	Headteacher
Coordination of risk assessment work	Lisa Sparkes	Headteacher
Fire procedures including personal emergency evacuation plans	Lisa Sparkes Fiona Rapley	Headteacher Office Manager
Locally organised premises maintenance, repair and improvement	Lisa Sparkes Fiona Rapley	Headteacher Office Manager
First Aid (training organisation and equipment)	Lisa Sparkes Fiona Rapley	Headteacher Office Manager

Vehicle control and pedestrian safety on site	Lisa Sparkes Fiona Rapley	Headteacher Office Manager
Educational visits coordinator (EVC)	Lisa Sparkes	Headteacher
Stress, Mental Health and Wellbeing	Lisa Sparkes	Headteacher
Child Protection Co-ordinator	Lisa Sparkes	Headteacher
Supporting pupils with medical conditions in school	Lisa Sparkes Rebecca Miles	Headteacher Deputy Head/SENCO
Premises Security	Lisa Sparkes Fiona Rapley	Headteacher Office Manager
Contractors on site	Lisa Sparkes Fiona Rapley	Headteacher Office Manager
Outside lettings	Lisa Sparkes Fiona Rapley	Headteacher Office Manager

3.6 Finance/Premises Personal and Communication Committee

The headteacher and Health and Safety Governor, who is part of the above committee carry out a termly health and safety check on the school site. A checklist is completed and actions noted. This action plan is then reviewed prior to the next inspection. The outcome of the visit is shared in the Headteacher's report during the termly Full Governor's Meeting.

Any reports, recommendations about the school site are shared with the Finance/Premises Personal and Communication Committee and relevant action taken.

3.6 Pupils

Pupils will:

- Exercise personal responsibility for the health and safety of themselves and others.
- Dress in a manner that is consistent with safety and hygiene standards.
- Respond to instructions given by staff in an emergency.
- Observe the health and safety rules of the school.
- Not misuse, neglect or interfere with items supplied for their, and other pupils', health and safety.

4. Contractors

When undertaking construction or maintenance work, the school will do so in accordance with The Construction (Design and Management) (CDM) Regulations 2015.

Construction work means:

- The carrying out of any building, civil engineering or engineering construction work and includes:
- The construction, alteration, conversion, fitting out, commission, renovation, repair, upkeep, redecoration or other maintenance, decommissioning, demolition or dismantling of a structure;

- The preparation for an intended structure, including site clearance, exploration, investigation (but not site survey) and excavation (but not pre-construction archaeological investigations), and the clearance or preparation of the site or structure for use or occupation at its conclusion;
- The installation, commission, maintenance, repair or removal of mechanical, electrical, gas, compressed, air, hydraulic, telecommunications, computer or similar services which are normally fixed within or to a structure;
- The assembly on site of prefabricated elements to form a structure or the disassembly on site of the prefabricated elements which, immediately before such disassembly, formed a structure;
- The removal of a structure, or of any product or waste resulting from demolition or dismantling of a structure, or from disassembly of prefabricated elements which immediately before such disassembly formed such a structure.

The headteacher will ensure that all construction and maintenance projects have a formally appointed principal designer and principal contractor.

The headteacher will liaise with the principal contractor to identify if the scope of the project means that it should be notified to the HSE.

The headteacher will ensure that:

- The principal designer and principal contractor are provided with a 'client brief/CDM pre-construction information' at the earliest opportunity, to contain relevant information which should, as a minimum, include the following:
 - What the school wants built or maintained
 - The site and existing structures
 - Information about hazards, such as asbestos
 - Timescales and budget for the build
 - How the school expects the project to be managed
 - CDM appointments of principal contractor/principal designer
 - Welfare arrangements
 - Details of the nearest A&E department

The principal contractor draws up a Construction Phase Plan that explains how health and safety risks will be managed – permission will not be given for construction or maintenance work to begin until this is in place.

The principal designer prepares a health and safety file containing information that will help the school manage risks associated with any future maintenance, repair, construction or demolition work.

The roles, functions and responsibilities of the project team are clearly defined in writing, e.g. in the project plan.

Sufficient time and resources are allocated, and effective mechanisms are in place to ensure good communication, cooperation and coordination between all members of the project team.

The principal contractor has made arrangements for adequate welfare facilities for their workers before the construction or maintenance work starts.

Following completion of the project, the health and safety file is handed over to the headteacher, kept up-to-date by the health and safety officer, and is made available to anyone who needs to alter or maintain the building.

The headteacher will hold weekly progress meetings with the project team to ensure that all members are carrying out their roles as required.

Where the project is for a new workplace or alterations to an existing workplace, it must also meet the standards set out in The Workplace (Health, Safety and Welfare) Regulations 1992.

5. Visitors to the School

All visitors and contractors will sign in to reception.

Once signed in, visitors and contractors will be collected from reception by the member of staff they are visiting, or escorted to the area of the school concerned.

No contractor will carry out work on the school site without the express permission of the headteacher, other than in an emergency or to make the site safe following theft or vandalism.

Contractors will be responsible for the health and safety of their employees and for ensuring safe working practices. They will not constitute a hazard to staff, pupils or visitors to the school.

Anyone hiring the premises will be made aware of their health and safety obligations when making the booking.

Visitors and contractors will wear a visitor's badge at all times while on school grounds.

Cleaning contractors will wear an easily identifiable uniform or badge at all times.

Temporary teaching staff and assistants will inform reception of their presence by reporting to reception on arrival and signing the visitors' log.

Staff members who encounter an unidentifiable visitor will enquire if they require assistance and direct them to reception or off site.

Staff members who encounter uncooperative visitors threatening violence, refusing to leave the site, or carrying out physical or verbal abuse will seek immediate help by calling 999.

6. Risk Assessments

The headteacher has overall responsibility for ensuring potential hazards are identified and risk assessments are completed for all areas in the school. The health and safety officer will be consulted when risk assessments are being carried out.

Annual risk assessments will be conducted for all other areas of the school.

Risk assessments will consider the needs of staff, pupils, visitors and contractors.

Risk assessments will identify all defects and potential risks along with the necessary solutions or control measures.

Risk assessments will be reviewed if:

- There is any reason to suspect that they are no longer valid.
- There has been a significant change in related matters.

The governing body will be informed of risk assessments, allowing issues to be prioritised and actions to be authorised, along with funds and resources.

The school will record any significant findings of any risk assessments, including the following:

- The identified hazards
- How people might be harmed by them
- What the school has implemented to control the risk

A designated staff member will ensure risk assessments are completed by staff leading day trips or residential stays.

7. Site Security

The school is 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.

Lisa Sparkes (Headteacher), Peter Mabbitt (Deputy Headteacher) and Fiona Rapley (Office Manager) are key holders and will respond to an emergency.

As a school we have a Site Security Policy which provides further detail on both Site and Personal Security.

8. Contacting the Emergency Services

The headteacher will certify that procedures for ensuring safety precautions are properly managed are discussed, formulated and effectively disseminated to all staff.

Staff will contact the emergency services in an emergency.

Staff will alert their colleagues to the incident, if it is safe and appropriate to do so.

Where an ambulance is called for a pupil, office staff will contact the pupil's parents.

Where necessary, all pupils will be evacuated from the building and taken to the designated emergency assembly point – currently, this is the far end of the large playground.

Staff will be aware of any pupils who have specific evacuation needs.

Staff will be responsible for the safety of pupils and responding to any questions from the emergency services, as best they can.

9. 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.

Building Evacuation Procedures are included in the induction for new staff. 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 at the bottom of the playground facing away from the school or if not safe to do so, outside the school gate on the grass area in School Close
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day
- **The Office Manager, Fiona Rapley** 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.

Key Staff are trained on how to use fire extinguishers as part of fire safety training.

A fire safety checklist can be found in appendix 2.

10. Use of lit candles

Use of lit candles will be limited to Collective Worship in the School Hall or in classrooms.

Matches will be kept locked away and used only for this purpose.

Children will be made aware of the dangers of lit candles.

Children will be supervised while lighting and extinguishing the candles.

Whilst lit, the candles will be placed away from flammable materials and not moved.

Where, in the opinion of the teacher, the risks are not adequately controlled, the candle should be extinguished. In the event of any uncertainty about the use of lit candles, obtain advice from the Head or Deputy Head.

In the event of a fire, procedures set out in the Building Evacuation Procedure document will be followed.

11. Sharps

For the purposes of this policy, “**sharps**” is defined as sharp objects such as needles, scalpels, razor blades and broken glass which pose a risk of an accidental penetrating injury or laceration or puncture to skin.

Sharps are not likely to be found commonly on school premises; however, staff will be vigilant towards the following circumstances in which sharps may be found:

- During school-based vaccination programmes
- Where an individual within the school requires injections to manage a health condition
- Where a pupil brings a sharp into the school
- Where glass is broken within the school, or broken glass is found on or around the school premises
- Where drug paraphernalia, e.g. heroin needles, is found on or around the school premises

In the context of this policy, offensive weapons are not considered sharps. Offensive weapons will be handled in line with the School Security Policy.

Handling and disposing of a sharp

All staff members will receive health and safety training as part of their induction. This training will include:

- The safe collection and disposal of sharps.
- Assembling sharps boxes and verifying that they are compliant with the accepted standards.
- The procedure to log incidents and who to inform.
- Immediate action in the event of sharps or needlestick injury.

Where an individual brings a sharp onto the school premises, e.g. a needle to manage a health condition, they will be responsible for its disposal. The use of needles for medication for an individual on the school premises will be managed in line with the Administering Medication Policy.

The headteacher will ensure that all pupils are informed that, where they see a sharp, they must alert the nearest staff member immediately and avoid touching the sharp.

Where a sharp is found, the nearest staff member will move all pupils away from the area in order to prevent accidental injuries, and will guard the sharp while alerting another staff member to bring the sharps retrieval kit. Sharps retrieval kits will contain:

- Protective gloves.
- A pair of long-stemmed tongs.
- A pincer tool, e.g. tweezers.
- Brush and pan.
- Sharps box for disposal.

They will be kept off the floor and out of the reach of pupils. Sharps boxes must not be filled above the designated fill line on the outside of the box. Once filled, boxes will be sealed immediately and removed by a clinical waste contractor or a specialist collection service.

The staff member will check the surrounding area carefully to ensure that no other sharps are in the vicinity. Where the sharp cannot be removed immediately, e.g. due to a delay in obtaining the sharps retrieval kit, the nearest staff member will place a cone or box on top of the sharp to prevent anyone from touching or finding it.

The following procedure will be followed in the event that sharps are found on the school premises:

- Staff will wear protective gloves, and will not handle sharps with bare hands.
- Staff will not handle sharps while barefoot or wearing open shoes, as injury may occur if the sharp is dropped on feet.
- Only one sharp will be handled at a time and, where there are multiple, sharps will be carefully separated using the pair of tongs.
- Sharps will be picked up using the relevant equipment, e.g. pair of tongs or brush and pan for broken glass, and place it into the sharps box, which will be brought to the sharp rather than the other way around.
- The appropriate staff, including the headteacher and site manager, will be informed.
- The incident will be recorded, with details of when, where and by whom the sharp was found.
- Sharps will be disposed of quickly and safely into the school's sharps bin.

Sharps injury

First aid staff will be trained in handling sharps injuries, and will adhere following guidelines in case of injury from a contaminated sharp:

- Encourage the wound to bleed gently, ideally by holding it under running water
- Wash the wound using water and soap
- Avoid scrubbing the wound while washing
- Avoid sucking the wound
- Dry the wound and cover it with a waterproof dressing
- Seek medical advice

Injuries will be handled in line with the First Aid Policy.

12. COSHH

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

- Chemicals
- Products containing chemicals
- Fumes
- Dusts
- Vapours
- Mists
- Gases and asphyxiating gases
- Germs that cause diseases, such as leptospirosis or legionnaires disease

At Norton CEVC Primary School, such substances are locked away in the Cleaner's Cupboard and kitchen in a locked safe in the locked Cleaner's Shed

Control of substances hazardous to health (COSHH) risk assessments are completed and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

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.

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.

13. Legionella

- A water risk assessment has been completed on 18 September 2019 by Jordan Environmental. Vertas Property Management 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: temperature checks, heating of water, disinfection of showers, etc.

14. 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

15. 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

15.1 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 Lisa Sparkes (Headteacher) or Fiona Rapley (Office Manager) immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed
- Only trained staff members can check plugs
- Each year a portable appliance test (PAT) is carried out by contractors.
- All isolators 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

15.2 PE equipment

- Pupils are taught how to carry 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 David Kerry (PE Coordinator) Lisa Sparkes (Headteacher) or Fiona Rapley (Office Manager)

15.3 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)

15.4 Specialist equipment

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

If oxygen cylinders are, required by any child they will be stored in a designated space, and staff will be trained in the removal storage and replacement of oxygen cylinders.

15. Lone working

Lone working may include:

- Late working
- Home or site visits
- Weekend working
- Site manager duties
- Site cleaning duties
- Working in a single occupancy office

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

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

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

17. 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.

Staff will not be required to use a ladder.

18. 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.

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

19. 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
- There will always be at least one first aider on school trips and visits
- There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.
- Staff will complete an Evolve assessment

20. Security and Theft

CCTV systems will be used to monitor events and identify incidents taking place.

CCTV systems may be used as evidence when investigating reports of incidents.

Money will be held in a safe and banked every half term to ensure large amounts are not held on-site. The school over recent years has encouraged a cashless system for parents.

Money will be counted in an appropriate location, such as the school office, and staff should not be placed at risk of robbery.

Staff and pupils are responsible for their personal belongings and the school accepts no responsibility for loss or damage.

Thefts may be reported to the police and staff members are expected to assist police with their investigation.

All members of staff are expected to take reasonable measures to ensure the security of school equipment being used.

Missing or believed stolen equipment will be reported immediately to a senior staff member.

The school will ban individuals from the premises if they pose a risk to any member of the school community.

The school will consider any risks that are posed by their local context, e.g. recent arson attacks.

As a school we have a Site Security Policy which provides further detail on both Site and Personal Security.

21. Severe Weather

The headteacher, in liaison with the governing body, makes a decision on school closure on the grounds of health and safety.

If a closure takes place, the governing body will be promptly informed.

22. 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.

23. 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.

24. Smoking

Smoking is not permitted anywhere on the school premises.

25. Allergens and Anaphylaxis

Parents are required to provide the school with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required. Staff members are also required to provide the headteacher with a list of their allergies. Information regarding pupils' and staff members' allergies is collated and stored securely.

Under The Human Medicines (Amendment) Regulations 2017, the school is able to purchase AAI devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working. The school will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy.

The headteacher and catering team will ensure that all pre-packed foods for direct sale (PPDS) made on the school site meet the requirements of Natasha's Law, i.e. the product displays the name of the food and a full, up-to-date ingredients list with allergens emphasised, e.g. in bold, italics or a different colour.

The catering team will also work with any external catering providers to ensure all requirements are met and that PPDS is labelled in line with Natasha's Law. Further information relating to how the school operates in line with Natasha's Law can be found in the Whole-School Food Policy.

Staff members receive appropriate training and support relevant to their level of responsibility, in order to assist pupils with managing their allergies.

Further information relating to the school's policies and procedures addressing allergens and anaphylaxis can be found in the Allergen and Anaphylaxis Policy.

26. 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.

26.1 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

26.2 Coughing and sneezing

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

26.3 Personal protective equipment

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

26.4 Cleaning of the environment

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

26.5 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

26.6 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

26.7 Animals

- Wash hands before and after handling any animals
- Supervise pupils when touching or observing animals

26.8 Pupils vulnerable to infection

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

26.9 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 3. In the event of an epidemic/pandemic, we will follow advice from Public Health England about the appropriate course of action.

27. New and Expectant Mothers

Risk assessments will be carried out whenever any employee 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

28. 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.

Mrs Jo Bouttell is the well-being coordinator for the school.

29 Accident Reporting

29.1 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. At Norton CEVC we complete an incident report on a book, which is then photocopied. We keep the original and the photocopied
- 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 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

29.2 Reporting to Suffolk County Council

The office manager, Fiona Rapley, 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 manager will report these to Suffolk County Council as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

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

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

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

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

29.3 Notifying parents

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

30. Reporting Hazards

Staff, pupils, contractors and visitors have a legal duty to report any condition or practice they deem to be a hazard. In most cases, reporting should be conducted verbally to the site manager as soon as possible, who will then inform the headteacher as appropriate. Serious hazards will be reported using the appropriate form available in the school office.

31. Accident Investigation

All accidents, however minor, will be investigated by the health and safety officer and the outcomes recorded. The length of time dedicated to each investigation will vary on the seriousness of the accident. After an investigation takes place, a risk assessment will be carried out, or the existing assessment amended, to avoid reoccurrence of the accident.

The health and safety officer will undertake monthly evaluations of all reported incidents. They will then identify patterns and trends in order to take corrective action and minimise the reoccurrence of any incident/illness.

32. Near misses

A 'near miss' is an event not causing harm, but has the potential to cause injury or ill health.

If staff members, pupils, contractors or visitors see or are involved in a near miss, they will report it in order to allow consideration of how to prevent a possible accident happening in the future.

Reporting will be conducted verbally to the health and safety officer as soon as possible, who will then inform the headteacher as appropriate.

The school will report near misses that constitute as dangerous occurrences to the HSE. A 'dangerous occurrence' includes any incident which results in requiring hospital treatment or further attention.

All accidents and near misses, however small, will be reported and investigated by the health and safety officer and the outcomes recorded. The length of time dedicated to each investigation will vary depending on the seriousness of the accident.

After the investigation takes place, a risk assessment will be carried out, or the existing assessment amended, to avoid reoccurrence of the accidents

32. Our Active Monitoring System

It is good practice to actively monitor systems prior to accidents, ill health or incidents taking place; this involves regularly checking compliance procedures and the achievement of objectives. Our procedure for actively monitoring our system includes:

- Annual audits, including fire risk assessments and health and safety audits.
- Termly examination of documents to ensure compliance with standards.
- Termly inspection of premises, plants and equipment.
- Monthly reports and updates to the headteacher.
- External measures, such as surveys by contractors and service providers, along with visits from Environmental Health and Ofsted.

33. 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.

34. Monitoring

This policy will be reviewed by the headteacher every year.

At every review, the policy will be approved by the Full Governing Body

Please note, this is not an exhaustive list and you should identify any other hazards associated with the daily use of the [classroom](#) in additional tables, including any further actions needed. If necessary, discuss your concerns with a senior leader in your school.

	Questions you should ask concerning your classroom environment:	Yes/No:	Further action required:	
Movement around the classroom (slips and trips)	Is the internal flooring in good condition?			
	Are there any changes in floor level or type of flooring that need to be highlighted?			
	Are gangways between desks kept clear?			
	Are trailing electrical leads/cables prevented wherever possible?			
	Is lighting bright enough to allow safe access and exit?			
	Are procedures in place to deal with spillages, e.g. water and blood from cuts?			
	For stand-alone classrooms:			
	Are access steps or ramps properly maintained?			
Work at height (falls)	Do you have an 'elephant-foot' step-stool or stepladder available for use where necessary?			
	Is a window-opener provided for opening high-level windows?			
Furniture and fixtures	Are permanent fixtures in good condition and securely fastened, e.g. cupboards, display boards, shelving?			
	Is furniture in good repair and suitable for the size of the user, whether adult or child?			
	Is portable equipment stable, e.g. a TV placed on a suitable trolley?			
	Where window restrictors are fitted to upper-floor windows, are they in good working order?			
	Are hot surfaces, such as radiators, protected where necessary to prevent the risk of burns to vulnerable young people?			

Manual handling	Have trolleys been provided for moving heavy objects, e.g. computers?		
Computers and similar equipment	If you use computers as part of your job, has a workstation assessment been completed?		
	Have pupils been advised about good practice when using computers?		
Electrical equipment and services	Are fixed electrical switches and plug sockets in good repair?		
	Are all plugs and cables in good repair?		
	Has portable electrical equipment, e.g. laminators, been visually checked and tested at suitable intervals to ensure that they are safe to use? (There may be a sticker to show it has been tested.)		
	Has any damaged electrical equipment been taken out of service or replaced?		
Asbestos	If the school contains asbestos, have details of the location and its condition in the classroom been provided and explained to you?		
	Have you been provided with guidance on securing pieces of work to walls/ceilings that may contain asbestos?		
Fire	If there are fire exit doors in the classroom, are they unobstructed, unlocked and easy to open from the inside?		
	Is fire-fighting equipment in place in the classroom?		
	Are fire evacuation procedures clearly displayed?		
	Are you aware of the evacuation drill, including arrangements for any vulnerable adults or children?		
Workplace (ventilation and heating)	Does the room have natural ventilation?		
	Can a reasonable room temperature be maintained during use of the classroom?		

	Are measures in place, e.g. blinds, to protect from glare and heat from the sun?		
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Appendix 2. 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 3. Recommended absence period for preventing the spread of infection

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

Rashes and skin infections

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended.
Chickenpox	Until all vesicles have crusted over	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to chickenpox. Chickenpox can also affect pregnancy if a woman has not already had the infection.
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting.
German measles (rubella)*	Four days from onset of rash (as per " Green Book ")	Preventable by immunisation (MMR x2 doses). If a pregnant woman comes into contact with German measles she should inform her GP and antenatal carer immediately to ensure investigation.
Hand, foot and mouth	None	

Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period.
Measles*	Four days from onset of rash	Preventable by immunisation (MMR x2 doses). Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to measles. Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed she should immediately inform whoever is giving antenatal care to ensure investigation.
Molluscum contagiosum	None	A self-limiting condition.
Ringworm	Exclusion not usually required	Treatment is required.
Roseola (infantum)	None	
Scabies	Child can return after first treatment	Household and close contacts require treatment.
Scarlet fever*	Child can return 24 hours after starting appropriate antibiotic treatment	Antibiotic treatment is recommended for the affected child.
Slapped cheek syndrome/fifth disease (parvovirus B19)	None (once rash has developed)	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to parvovirus B19. Slapped cheek disease (parvovirus B19)

		can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), inform whoever is giving antenatal care as this must be investigated promptly.
Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune, i.e. have not had chickenpox. It is spread by very close contact and touch. If further information is required, contact your local PHE centre. Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. These children are particularly vulnerable to shingles. Shingles can also affect pregnancy if a woman has not already had chickenpox.
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.

Diarrhoea and vomiting illness

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting	
E. coli O157 VTEC Typhoid* [and paratyphoid*] (enteric fever) Shigella (dysentery)	Should be excluded for 48 hours from the last episode of diarrhoea. Further exclusion may be required for some children until they are no longer excreting	Further exclusion is required for children aged 5 years or younger and those who have difficulty in adhering to hygiene practices. Children in these categories should be excluded until there is evidence of microbiological clearance. This guidance may also apply to some

		contacts who may also require microbiological clearance. Please consult your local PHE centre for further advice
Cryptosporidiosis	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled

Respiratory infections

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Flu (influenza)	Until recovered	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.
Tuberculosis*	Always consult your local PHE centre	Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.
Whooping cough*	Five days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local PHE centre will organise any contact tracing necessary.

Other infections

Infection or complaint	Recommended period to be kept away from school or nursery	Comments
Conjunctivitis	None	If an outbreak/cluster occurs, consult your local PHE centre.
Diphtheria*	Exclusion is essential. Always consult with your local HPT	Family contacts must be excluded until cleared to return by your local PHE centre. Preventable by vaccination. Your local PHE centre will organise any contact tracing necessary.
Glandular fever	None	
Head lice	None	Treatment is recommended only in cases where live lice have been seen.
Hepatitis A*	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)	In an outbreak of hepatitis A, your local PHE centre will advise on control measures.
Hepatitis B*, C*, HIV/AIDS	None	Hepatitis B and C and HIV are bloodborne viruses that are not infectious through casual contact. All spillages of blood should be cleaned up immediately (always wear PPE). When spillages occur, clean using a product that combines both a detergent and a disinfectant. Use as per manufacturer's instructions and ensure it is effective against bacteria and viruses and suitable for use on the affected surface. Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below. A spillage kit should be available for blood spills.

Meningococcal meningitis*/ septicaemia*	Until recovered	Meningitis C is preventable by vaccination There is no reason to exclude siblings or other close contacts of a case. In case of an outbreak, it may be necessary to provide antibiotics with or without meningococcal vaccination to close school contacts. Your local PHE centre will advise on any action is needed.
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case. Your local PHE centre will give advice on any action needed.
Meningitis viral*	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case. Contact tracing is not required.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. If further information is required, contact your local PHE centre.
Mumps*	Exclude child for five days after onset of swelling	Preventable by vaccination
Threadworms	None	Treatment is recommended for the child and household contacts.
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic.

* denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control). In addition, organisations may be required via locally agreed arrangements to inform their local PHE centre. Regulating bodies (for example, Ofsted/Commission for Social Care Inspection (CSCI)) may wish to be informed.