

We are a Catholic school and we have a mission to educate our children in the spirit of the Gospel of Christ.

As our Vision statement says;

*“Our school is a Catholic community. Through the love of Jesus Christ, we inspire our children to learn, grow, enjoy and be happy so that they are readily equipped for the next stage of their development.”*

As our Mission Statement says:

Living, Loving and Learning through Christ’

*Living – We provide a safe environment where children are inspired to achieve their true potential.*

*Loving – We learn how to love Jesus and each other. We follow His example by showing kindness and respect to everyone. We see potential in all.*

*Loving - We educate and nurture all to meet the demands of the changing world with Love, Peace and Respect.*

Our Health and safety Policy is very much a reflection of both our Mission and Vision Statements.

St Scholastica’s School fully realises its responsibilities to the Health and Safety of its school Community and its visitors. We follow the guidelines below set out by the London Borough of Hackney.

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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.

## 3. Roles and responsibilities

### 3.1 The local authority and governing board

London Borough of Hackney 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 Senior Leadership Team.

All Employees have a duty to themselves, to their colleagues and to visitors and contractors to work safely and in a manner which prevents pollution and minimises the use of resources. All staff should read and co-operate with the requirements contained within this document. Line Managers will regularly review safety and environmental standards within their areas of responsibility to ensure compliance with all the standards as laid down. Contractor and sub-contract staff and visitors have a similar duty of care and a right to a safe working environment. Like school staff, they must ensure that they comply with the requirements of the school's codes of safe working practice.

### **3.2 Headteacher**

The Head teacher will ensure compliance with the policy statement and that all staff endeavour to ensure the safety of others; be they staff, pupils, parents, visitors or contractors. The Head teacher will be responsible for:

- Ensuring that the Health and Safety Policy is prepared, signed and dated and together with the governing body is regularly reviewed.
- Ensuring that all activities, including educational visits, are risk assessed and staff informed of the control measures necessary to work safely
- Ensuring that processes are in place for the maintenance of the building and equipment, including statutory inspections.
- Ensuring that an emergency evacuation procedure is in place and is regularly tested.

Day-to-day management of all health and safety matters in the school in accordance with the health and safety policy.

- Appointing suitable competent staff to assist in carrying out duties necessary under this policy.
- Passing on information received on Health and Safety matters to appropriate people
- Meeting with the school's Health and Safety Link governor
- Co-operating with and providing necessary Site for trade union safety representatives.

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

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

The nominated health and safety lead is the Head teacher supported by the Site Manager.

### **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 and advise Head teacher of any circumstances that restrict or obstruct their responsibilities.
- Work in accordance with training and instructions
- Inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken
- Model safe and hygienic practice for pupils
- Understand emergency evacuation procedures and feel confident in implementing them

### **3.5 Pupils and parents**

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

### **3.6 Contractors**

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

### **4. Site security**

- Site Manager / Management company – Schools, is responsible for the security of the school site in and out of school hours.
- Site Manager is responsible for visual inspections of the site, and for the intruder and fire alarm systems.
- Will notify the Head teacher/Assistant Headteacher of any circumstances where he/she is unable to take suitable remedial action for any hazards
- Ensure the emergency exits are clear and that rubbish is not allowed to accumulate in unguarded areas in or around the school

City Key Holding 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.

Site Manager makes sure that fire alarm systems and fire appliances are tested and properly maintained.

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. All classrooms have evacuation maps showing where their assembly point is.
- Class are required to evacuate with their fire register. The fire register should updated registers details so that it reflect those in attendance on that day. Teachers check the register once they are at the assembly point. This should include if children are out of class due to interventions/small group teaching.
- Class teachers will call into the Assistant Head to inform him that all children and staff are present
- 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.

Students with mobility issues will be guided by teaching assistants who support them in and out of class. If the teaching assistant is not near the student, then any adult near the student will be help.

## **6. COSHH**

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

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

For Cleaning - control of substances hazardous to health (COSHH) risk assessments are completed by the site manager and circulated to all employees who work with hazardous substances. Staff are also provided with protective equipment, where necessary.

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. Hazardous products are stored in the cleaning cupboard which is locked at all times.

### **6.1 Gas safety**

- Installation, maintenance and repair of gas appliances and fittings will be carried out by a competent Gas Safe registered engineer
- Gas pipework, appliances and flues are regularly maintained
- All rooms with gas appliances are checked to ensure that they have adequate ventilation

### **6.2 Legionella**

- The site manager schedules water risk assessments on time and 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 month and when significant changes have occurred to the water system and/or building footprint
- The risks from legionella are mitigated by checking hot and coldwater services, checking evaporative cooling system, water treatment services, cleaning and disinfection services and legionella analytical services

### **6.3 Asbestos**

- Ours is a newly built school totally asbestos free.

## **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

### **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 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.

### **7.2 PE equipment**

- Pupils are taught how to carry out and set up PE equipment safely and efficiently. Staff check that equipment is set up safely
- Any concerns about the condition of the gym floor or other apparatus will be reported to the Site Manager.

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

We have thermostatic controls in every classroom showing the carbon dioxide levels and skylight could be opened up to allow enough oxygen to the whole class.

## **8. Lone working**

Lone working may include:

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

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

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

The lone worker will ensure that they are medically fit to work alone. Only the Premises Manager and cleaners work full time and during school holidays.

## **9. Working at height**

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

In addition:

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

## **10. 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

## **11. Off-site visits**

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

- Risk assessments will be completed where off-site visits and activities require them
- All off-site visits are appropriately staffed
- Staff will take a 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 with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

## **12. Lettings**

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

### **13. Violence at work**

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

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

### **14. Smoking**

Smoking is not permitted anywhere on the school premises.

### **15. 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.

#### **15.1 Handwashing**

- Wash hands with liquid soap and warm water, and dry with paper towels
- Always wash hands after using the toilet, before eating or handling food, and after handling animals
- Cover all cuts and abrasions with waterproof dressings

#### **15.2 Coughing and sneezing**

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

#### **15.3 Personal protective equipment**

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

#### **15.4 Cleaning of the environment**

- Clean the environment, including toys and equipment, frequently and thoroughly. The cleaning team le team does this. EYFS Team will leave all toys in the trough and it is sterilised and washed by school cleaners. Staff have to put the toys back in its place in the morning.

#### **15.5 Cleaning of blood and body fluid spillages**

- Clean up all spillages of blood, faeces, saliva, vomit, nasal and eye discharges immediately and wear personal protective equipment
- When spillages occur, clean using a product that combines both a detergent and a disinfectant and use as per manufacturer's instructions. Ensure it is effective against bacteria and viruses and suitable for use on the affected surface
- Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below
- Make spillage kits available for blood spills

## **15.6 Laundry**

- Wash laundry in a separate dedicated facility
- Wash soiled linen separately and at the hottest wash the fabric will tolerate
- Wear personal protective clothing when handling soiled linen
- Bag children's soiled clothing to be sent home, never rinse by hand

## **15.7 Clinical waste**

- Always segregate domestic and clinical waste, in accordance with local policy
- Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins
- Remove clinical waste with a registered waste contractor
- Remove all clinical waste bags when they are two-thirds full and store in a dedicated, secure area while awaiting collection

## **15.8 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.

## **15.9 Exclusion periods for infectious diseases**

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

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

## **16. New and expectant mothers**

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

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

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

## **17. Occupational stress**

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

Systems are in place within the school for responding to individual concerns and monitoring staff workloads. Any policy that directly impact staff workload like e.g. marking feedback policy is released to staff before ratification for discussion. Staff can access telephone counselling through HLT human resources. The school has a Wellbeing Co-ordinator who can support staff during difficult times. The school provides a supportive and collegiate staff body promoted through variety of social activities.

## **18. Accident reporting**

All accidents, no matter how minor, that occur to members of staff, or visitors are to be reported using the accident report form which is in the office. A copy of the completed form is to be sent to the Health and Safety advisor, Education, at 280 Mare Street, E8 1HE. In addition accidents to staff must be entered into the accident book. The accident book is kept in the school office and the form is sent to the Health and Safety advisor.

Accidents to pupils must be reported in the incident reporting pad and the accident reporting book. However, trivial accidents resulting in no injury or minor injuries such as bruises and grazes, will be recorded locally. Serious accidents i.e. any fatality, major injury, accident where a pupil is taken directly to hospital, reportable disease or dangerous occurrence, must be reported immediately by telephone to the Health and Safety Advisor – Education.

### **18.1 Accident record book**

- An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. An accident form template can be found in appendix 2
- 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.

### **18.2 Reporting to the Health and Safety Executive**

The Office 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 Manager 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 is available here:

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

### **18.3 Notifying parents**

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

### **18.4 Reporting to Ofsted and child protection agencies**

The Office Manager will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The SENCO Lead will also notify the City and Hackney Children's Safeguarding Board on 020 8356 5500/2710 of any serious accident or injury to, or the death of, a pupil while in the school's care.

### **19. Training**

Our staff are provided with health and safety training as part of their induction process. Most of the support staff are first aid trained.

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

### **20. Monitoring**

This policy will be reviewed by the Head Teacher every three years.  
 At every review, the policy will be approved by the Full Governing Body.

### **21. Links with other policies**

This health and safety policy links to the following policies:

- First aid
- Attendance
- Risk assessment
- Medical Needs
- Accessibility plan
- Snow arrangements
- Winter readiness
- Guidance on Infection Control

Agreed By Governors: 17<sup>th</sup> November 2021

Presented to staff: November 2021

Signed by Chair of Resources Committee \_\_\_\_\_ Date: 17<sup>th</sup> November 2021

Signed by Head teacher \_\_\_\_\_ Date: 17<sup>th</sup> November 2021

Review date: November 2023

## 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. 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
<b>Athlete's foot</b>	None	Athlete's foot is not a serious condition. Treatment is recommended.
<b>Chickenpox</b>	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.
<b>Cold sores (herpes simplex)</b>	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting.
<b>German measles (rubella)*</b>	Four days from onset of rash (as per " <u>Green Book</u> ")	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.
<b>Hand, foot and mouth</b>	None	
<b>Impetigo</b>	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period.
<b>Measles*</b>	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.
<b>Molluscum contagiosum</b>	None	A self-limiting condition.
<b>Ringworm</b>	Exclusion not usually required	Treatment is required.
<b>Roseola (infantum)</b>	None	
<b>Scabies</b>	Child can return after first treatment	Household and close contacts require treatment.
<b>Scarlet fever*</b>	Child can return 24 hours after starting appropriate antibiotic treatment	Antibiotic treatment is recommended for the affected child.
<b>Slapped cheek syndrome/fifth disease (parvovirus B19)</b>	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.

<b>Shingles</b>	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.
<b>Warts and verrucae</b>	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.

### Diarrhoea and vomiting illness

<b>Infection complaint</b>	<b>or Recommended period to be kept away from school or nursery</b>	<b>Comments</b>
<b>Diarrhoea and/or vomiting</b>	48 hours from last episode of diarrhoea or vomiting	
<b>E. coli O157 VTEC Typhoid* [and paratyphoid*] (enteric fever) Shigella (dysentery)</b>	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

<b>Cryptosporidiosis</b>	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled
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### Respiratory infections

<b>Infection or complaint</b>	<b>Recommended period to be kept away from school or nursery</b>	<b>Comments</b>
<b>Flu (influenza)</b>	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.
<b>Tuberculosis*</b>	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.
<b>Whooping cough*</b>	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

<b>Infection or complaint</b>	<b>Recommended period to be kept away from school or nursery</b>	<b>Comments</b>
<b>Conjunctivitis</b>	None	If an outbreak/cluster occurs, consult your local PHE centre.

<b>Diphtheria*</b>	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.
<b>Glandular fever</b>	None	
<b>Head lice</b>	None	Treatment is recommended only in cases where live lice have been seen.
<b>Hepatitis A*</b>	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.
<b>Hepatitis B*, C*, HIV/AIDS</b>	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.
<b>Meningococcal meningitis*/septicaemia*</b>	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.
<b>Meningitis* due to other bacteria</b>	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.
<b>Meningitis viral*</b>	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case.

		Contact tracing is not required.
<b>MRSA</b>	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.
<b>Mumps*</b>	Exclude child for five days after onset of swelling	Preventable by vaccination
<b>Threadworms</b>	None	Treatment is recommended for the child and household contacts.
<b>Tonsillitis</b>	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.

## 24. Outbreak Management Plan (Covid 19)

### 1. Introduction

This plan is based on the [contingency framework for managing local outbreaks](#) of COVID-19 and the [schools operational guidance](#), provided by the Department for Education (DfE).

We will only implement some, or all, of the measures in this plan in response to recommendations provided by our local authority (LA), directors of public health (DsPH), Public Health England (PHE) health protection team or the national government.

It may be necessary to implement these measures in the following circumstances, for example:

To help manage a COVID-19 outbreak within the school. Actions will be considered when either of the following thresholds are met:

- There are 5 positive cases amongst pupils or staff who are likely to have mixed closely within a 10-day period
- 10% of pupils or staff who are likely to have mixed closely test positive within a 10-day period
- If COVID-19 infection rates in the community are extremely high, and other measures have failed to reduce transmission

As part of a package of measures responding to a 'variant of concern' (VoC)  
To prevent unsustainable pressure on the NHS

## **2. Seeking public health advice**

When one of the thresholds above is met, we will review the testing, hygiene and ventilation measures already in place.

We will also seek public health advice from a director of public health or health protection team. Sandra Brierley will be responsible for seeking this advice and will do so by telephoning the DfE helpline (0800 046 8687) or by seeking advice from the Health and Safety team at Hackney Education.

## **3. Shielding**

We will adhere to national guidance on the reintroduction of shielding, which would apply to those on the [shielded patient list \(SPL\)](#).

We will speak to individuals required to shield about additional protective measures in school or arrangements for home working or learning.

## **4. Other measures**

Parents, carers, pupils and staff will be informed promptly about the introduction of control measures. This will be done via e-mail once a decision has been made.

If recommended, we will limit:

- Residential educational visits
- Open days
- Transition or taster days
- Parents coming into school
- Live performances

If recommended, we will (re)introduce:

- Testing, including the use of an asymptomatic test site (ATS)
- Bubbles, to reduce mixing between groups
- Face coverings in communal areas and classrooms for staff and visitors (unless exempt)

## **5. Attendance restrictions**

Attendance restrictions will only be recommended as a last resort. If recommended, we will implement the measures in this section.

### **5.1 Eligibility to remain in school**

If restrictions are recommended, we will stay open for:

- Vulnerable pupils
- Children of critical workers

### **5.2 Education and support for pupils at home**

All other pupils will be required to stay at home and will receive remote education.

We will aim to deliver remote education that meets the same quality and quantity of education that pupils would receive in school, as outlined in our remote learning policy.

The school will continue to provide meals or lunch parcels for pupils eligible for benefits-related free school meals while they are not attending school because of COVID-19 isolation guidelines.

These will be distributed via supermarket vouchers.

### **5.3 Wraparound care**

We will limit access to before and after-school activities and wraparound care during term time to those that need it most.

We will communicate who will be eligible to attend once the restrictions are confirmed.

### **5.4 Safeguarding**

We will review our child protection policy to make sure it reflects the local restrictions and remains effective.

We will aim to have a trained DSL or deputy DSL on site wherever possible. The school has at least three members of staff who are DSL trained and one of them will always be available.

If our DSL (or deputy) can't be on site, they can be contacted remotely by calling the Headteacher – 07738570297.

On occasions where there is no DSL or deputy on site, a senior leader will take responsibility for co-ordinating safeguarding on site.

When vulnerable pupils are absent, we will:

- Speak to parents/carers and, where applicable, social workers and the local authority, to work out the reason for absence
- Encourage attendance
- Make sure vulnerable pupils can access appropriate education and support while at home
- Maintain contact, and check regularly that the pupil is able to access remote education provision

Agreed By Governors: 6th July 2022

Presented to staff: September 2022

Signed by Head teacher \_\_\_\_\_ Date \_\_\_\_\_

Signed by Chair of Governors \_\_\_\_\_ Date \_\_\_\_\_

Review date: July 2024