Health and Safety Policy

Date ratified	5 December 2024	
Committee	Full Governing Body (As Employer)	
Responsible for Policy		
Date to be updated	November 2025	
Headteacher Signature	A. Ripards	
Chair of Governors/ Committee Signature	Mande	

Growing Together as Children of God

At Holy Trinity C of E Primary School:

- we want our pupils to **grow** in confidence, independence, resilience and knowledge, so that all achieve their full potential and develop a life-long love of learning and of the world around us.
- we work **together** with families, community and church to model positive relationships, supporting each other and acknowledging that we are stronger when we work together.
- we are growing together as **children of God,** strengthening our faith, secure in the knowledge we are unique, loved and cherished

Biblical Basis

3 John 1:2

Dear friend, I pray that you may enjoy good health and that all may go well with you...

I. Aims

The Governing Body believes that effective health and safety management supports our delivery of education and services to pupils.

We consider the health and safety of pupils, employees and visitors to the school to be an integral part of what we do and will pursue continual improvement in performance through the setting of objectives and targets.

We are committed to:

- Developing and maintaining a positive Health and Safety culture with an emphasis on continuous improvement, through communication and consultation with employees and their trade union representatives.
- Providing a safe and healthy working environment.
- Ensuring safe working methods and providing safe equipment.
- Assessing and controlling the risks that arise from our work.
- Complying with and where possible exceeding statutory requirements.
- Preventing accidents and work-related ill health.
- Providing effective information, instruction and training.
- Monitoring and reviewing systems and preventative measures to make sure they are effective.
- Ensuring adequate resources are made available to fulfil our health and safety responsibilities.

For these commitments to be effective, employees throughout the school must play their part in the creation of a safe and healthy working environment for all.

This policy should be read in conjunction with the Critical Incident Policy and Plan.

2. Legislation

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

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

The school follows national guidance published by UK Health Security Agency (formerly Public Health England) and government guidance on living with COVID-19 when responding to infection control issues. Sections of this policy are also based on the statutory framework for the Early Years Foundation Stage.

3. Roles and responsibilities

For a list of the names of current role holders please see Appendix I.

3.1 The governing board

As a voluntary aided school, the governing board as employer has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the headteacher and staff members.

The governing board has a duty to take reasonable steps to ensure that staff and pupils are not exposed to risks to their health and safety. This applies to school activities on or off the school premises. The governing board as the employer, also has a duty to:

- Assess the risks to staff and others affected by school activities in order to identify and introduce the health and safety measures necessary to manage those risks
- Inform employees about risks and the measures in place to manage them
- Ensure that adequate health and safety training is provided
- The school has a nominated governor responsible for overseeing health & safety matters.

3.2 Headteacher

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

- Implementing the health and safety policy
- Ensuring there are enough staff to safely supervise pupils
- Ensuring that the school building and premises are safe and regularly inspected
- Providing adequate training for school staff
- Reporting to the governing board on health and safety matters
- Ensuring appropriate evacuation procedures are in place and regular fire drills are held
- Ensuring that in their absence, health and safety responsibilities are delegated to another member of staff
- Ensuring all risk assessments are completed and reviewed
- Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary

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

3.3 Health and safety lead

The Lead Governor for Health and Safety is responsible for the following:

- Be fully and visibly committed to the health and safety priorities.
- Scrutinise and review health and safety performance.
- Provide support and challenge to the Head teacher in fulfilling their health and safety responsibilities.
- Ensure in particular that risk assessments of the premises and working practices are carried out and documented.

3.4 Staff

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

Staff will:

- Take reasonable care of their own health and safety and that of others who may be affected by what they do at work
- Co-operate with the school on health and safety matters
- Work in accordance with training and instructions
- Inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken
- Model safe and hygienic practice for pupils

• Understand emergency evacuation procedures and feel confident in implementing them

3.5 Health and Safety Representatives

The Headteacher and Governing Body of Holy Trinity C of E Primary School recognise the role of Health and Safety Representatives appointed by recognised trade unions.

Health and Safety Representatives will be allowed to investigate incidents and potential hazards, pursue employee complaints and carry out school inspections within directed time but, wherever practicable, outside teaching time.

They will also be consulted on health and safety matters affecting all staff. They are also entitled to certain information, e.g. about incidents and to paid time off to train for and carry out their health and safety functions. However, they are not part of the management structure and do not carry out duties on behalf of the Head teacher or Governing Body

3.6 Pupils and parents/ carers

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.

3.7 Contractors

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

4. Site Security

The Premises Manager and School Business Manager are responsible for the security of the school site in and out of school hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems.

The Headteacher, Deputy Headteacher, School Business Manager and Premises Manager are key holders and will respond to an emergency.

5. Fire

The school has a fire safety management file which is kept in the School Business Manager's office. The file includes the school's Fire Risk Assessment, plans of the building and evacuation drill logs.

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, with evacuation drills taking place at least once per term. 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 main assembly point (F). It is next to the back fence adjacent to Faraday Road.
- If the fire is on the Faraday road side then the alternative assembly point (E) will be used. It is in front of the Reception playground, close to the Effra road gate.
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day
- The office team will take a register of all staff and visitors
- Staff and pupils will remain outside the building until the emergency services say it is safe to reenter

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. Personal evacuation plans (PEEPs) are developed for staff and pupils with limited mobility.

A fire safety checklist can be found in Appendix 3.

6. COSHH

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

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

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

The ordering of substances is centralised through the School Business Manager/ Finance Officer to track what is being purchased. The minimum quantity required for the task(s) will be ordered. Preference will be given to non-hazardous or at least less hazardous alternatives for substances in use where these can be used effectively for the same task.

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

Any hazardous products are disposed of in accordance with specific disposal procedures.

Emergency procedures, including procedures for dealing with spillages, are displayed near where hazardous products are stored and in areas where they are routinely used.

6.1 Gas safety

Installation, maintenance and repair of gas appliances and fittings will be carried out by a competent Gas Safe registered engineer

Gas pipework, appliances and flues are regularly maintained

All rooms with gas appliances are checked to ensure that they have adequate ventilation

6.2 Legionella

A water risk assessment was completed by Hydro-X in September 2022. The risk assessment will be reviewed when it is believed that the risk assessment is no longer valid e.g. when significant changes have occurred to the water system and/ or building footprint.

Water checks are completed every 3 months by an external contractor (currently Hydro-X). The Premises Manager is responsible for ensuring that the identified operational controls are conducted and recorded in the school's water log book.

This checks will be reviewed every 3 months and when significant changes have occurred to the water system and/or building footprint.

The risks from legionella are mitigated by regular temperature checks, disinfection of showers etc. and by periodic tank cleaning.

6.3 Asbestos

Management surveys have confirmed that there is no known asbestos at Holy Trinity Primary School, however a refurbishment and demolition survey will be completed prior to any work that could disturb hidden asbestos containing materials in the older areas of the school.

The Premises Manager is 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

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 safety 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 School Business 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. PAT testing currently takes places annually. The school also completes the required five yearly electrical installation condition tests, with recommended remedial works carried out in a timely manner.

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.

An external company – currently The Play Inspection Company – is engaged to check the indoor and outdoor play equipment on an annual basis.

Any concerns about the condition of the hall floor, MUGA surface, or other apparatus will be reported to the Premises Manager or School Business Manager immediately.

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).

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 by the lone worker 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. There is an onus on the employer to ensure this, though the employee does also play a part. If there is any doubt then medical advice should be sought.

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 Premises 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 Site Manager and assistant Site Manager undertake regular training for manual handling tasks and specific risk assessments will be drawn up in the case of projects involving a large amount of manual handling.

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

II. Off-site visits

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

- Risk assessments will be completed, in partnership with the school's Educational Visits Coordinator, 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 medical needs of specific pupils along with the pupils' parents' contact details
- There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits involving children at Early Years Foundation Stage, as required by the statutory framework for the Early Years Foundation Stage.

12. Lettings

This policy applies to lettings (see also the school's Lettings Policy). Those who hire any part of the school site or any facilities will be made aware of the content of the school's Health and Safety Policy, and will have responsibility for complying with it.

13. Violence at work

We believe that staff should not be in any danger at work, and will not tolerate violent or threatening behaviour towards our staff. The school maintains a specific Violence and Aggression risk assessment.

13.1 Definition of Assault

In this policy, 'assault' shall be defined as any act indicating an intention to use unlawful violence against another whether it makes contact with the victim or causes fear of immediate unlawful physical contact and; any act of malicious verbal aggression targeted at another person. Examples include:

- Racist, sexist and homophobic language
- Threats of violence or intimidation
- Any form of physical abuse including punching, pushing, tripping, slapping, kicking, biting and throwing of objects.

13.2 Assaults by pupils

If a member of staff is assaulted by a pupil, the pupil will be removed from the class/ area immediately. The pupil concerned will be isolated from other pupils. The parents/ carers of the pupil will be informed.

The removal of the pupil, as an internal exclusion or a suspension, will allow for an investigation of the circumstances of the assault. Suspension will only be used as a last resort.

13.3 Action when an assault occurs

If a member of staff is assaulted the following action will be taken in consultation with the staff member concerned:

- The staff member will be permitted access to a private area for as long as necessary where they can sit with another adult
- The staff member will be permitted to go home if they so wish and the Headteacher will make any necessary cover arrangements, and transport arrangements if needed
- Where the staff member is required to attend hospital or their GP they can choose to be accompanied by a work colleague, friend or trade union representative
- The employee may access the employer's occupational health services and counselling service; the employer will make the staff member aware of this provision and complete any referral in a timely manner.
- Staff who have been assaulted will be provided with all other appropriate support, which may include legal advice.
- In the case of visible injuries, it is helpful to take photographs.
- A written record to cover the circumstances leading up to the event, the event itself and any injuries sustained will be recorded as soon as possible. MyConcern should be used to record the incident. It is confirmed that reporting an incident will not reflect upon an individual's competence.
- Written statements will be taken from any witnesses to the event, preferably on the day of the event or as soon as possible thereafter.

- At the school's discretion, the incident may be reported to the police. In all cases the employee has the right to report the incident personally to the police if they so wish.
- For extreme incidents or where a pupil has been involved in repeated incidents and actions taken by the school have not remedied the situation, permanent exclusion may be considered.
- Educational Psychologists and Virtual Behaviour Support may provide support services to schools in the management of pupils with emotional and behavioural difficulties.
- Following any assault/ incident the school will re-visit any relevant risk assessments.

14. Smoking

Smoking and/or vaping are 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.

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

Coughing and sneezing

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

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

Cleaning of the environment

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

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

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

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

Animals

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

15.1 Infectious disease management

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

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

- Following good hygiene practices
 - We will encourage all staff and pupils to regularly wash their hands with soap and water or hand sanitiser, and follow recommended practices for respiratory hygiene. Where required, we will provide appropriate personal protective equipment (PPE)
- Implementing an appropriate cleaning regime
 - We will regularly clean equipment and rooms, and ensure surfaces that are frequently touched are cleaned
- Keeping rooms well ventilated
 - We will identify rooms or areas with poor ventilation and put measures in place to improve airflow, including opening external windows, opening internal doors and mechanical ventilation

15.2 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.

15.3 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 4 or as documented on the Public Health England website.

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 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
- Some pregnant women will be at greater risk of severe illness from COVID-19

17. Occupational stress

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

Systems are in place within the school for responding to individual concerns and monitoring staff workloads.

18. Accident reporting

18.1 Accident record file

An accident/ first aid form will be completed as soon as possible after the incident occurs by the member of staff or first aider who deals with it (see Appendix 3).

As much detail as possible will be supplied when reporting an accident.

Records held in the first aid and accident book will be retained by the school in accordance with the School's data protection policy.

18.2 Reporting to the Health and Safety Executive

The School Business 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 School Business Manager and Headteacher will report these to the London Borough of Merton and where applicable the Health & Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within 10 days.

School staff: reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding) which:
 - Covers more than 10% of the whole body's total surface area; or
 - Causes significant damage to the eyes, respiratory system or other vital organs
 - Any scalping requiring hospital treatment
 - Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heatinduced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the School Business Manager/ Headteacher will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
 - Carpal tunnel syndrome
 - Severe cramp of the hand or forearm

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- Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
- Hand-arm vibration syndrome
- Occupational asthma, e.g from wood dust
- Tendonitis or tenosynovitis of the hand or forearm
- Any occupational cancer
- Any disease attributed to an occupational exposure to a biological agent
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

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

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

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

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

Information on how to make a RIDDOR report is available here: http://www.hse.gov.uk/riddor/report.htm

18.3 Notifying parents

A member of staff will inform parents of any serious accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable. Parents will also be informed if emergency services are called.

18.4 Reporting to Ofsted and child protection agencies

The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil in 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 Headteacher will also notify all relevant local child protection agencies 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 basic health and safety training as part of their induction process. The School Business Manager maintains a Health & Safety Training log which may be found on the AdminShare (N: drive).

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

The following training is provided to members of staff as appropriate:

- Accident Reporting and Investigating
- Asbestos Awareness
- Control of Substances Hazardous to Health
- Critical Incident Management
- Display Screen Equipment (workstations)
- Educational Visit Co-ordinator
- First Aid
- General Awareness
- Introduction to Risk Assessment
- Safe Manual Handling of Static Loads
- Risk Management in PE and School Sport
- Safe Use and Inspection of Ladders and Stepladders

20. Risk Assessments

General Risk Assessments will be coordinated by School Business Manager and Headteacher following guidance from the London Borough of Merton:

- 1. In order to reduce the chances of potential hazards not being identified a risk assessment procedure should include the following steps:
 - Identify significant hazards including:
 - those arising from Curriculum Activities/Areas; and
 - those arising from Non-curriculum/Support activities
 - Assess the potential risk of the hazards identified;
 - Implement appropriate measures to control the hazards identified;
 - Document the findings;
 - Review the assessments annually and/or when there is any significant change (e.g. change in operational procedure or personnel); after any accident or incident or for any other reason the assessment is no longer valid.

- 2. School safety inspections can also be utilised to identify physical hazards located around the premises and form the first step of a risk assessment. An example process is outlined below.
 - Site Manager carries out informal daily and weekly inspections as part of his normal duties. If they identify a significant hazard(s) a risk assessment is carried out, control measures implemented as appropriate and a record kept of the findings.
 - Staff are able to report defects, repairs required, potential hazards etc. to the Site Manager in the maintenance / works required book. If a significant hazard(s) is identified a risk assessment is carried out, control measures implemented as appropriate and a record kept of the findings.
 - Site Manager, Head teacher and a representative from the Governing Body carry out formal recorded school inspections each term. If a significant hazard(s) is identified a risk assessment is carried out, control measures implemented as appropriate and a record kept of the findings.
- 3. To assist with reviews and to make identification and retrieval easier it is recommended that each individual assessment be given a unique number which is then listed in a risk assessment register containing the following information:
 - Assessment title / heading;
 - Date the assessment was first carried out and by whom;
 - Dates of each subsequent review; and:
 - Name and signature of the person carrying out the review

If an assessment must be completely redone or a brand new assessment is carried out a new entry should be made. A copy of the risk register should then be filed with the assessments.

It is also recommended that assessments are separated and filed into:

- Curriculum activities and areas e.g. Science; D&T; PE & Sports Facilities; Food Technology; Sixth Form etc. and
- Non-curriculum/Support activities e.g. facilities/building management

The register and assessments can be held electronically if preferred, however please note that if this method is selected then you must ensure that all members of staff have easy and unrestricted access at any time to the information held.

All members of staff must be advised of the chosen method and where the assessments can be located.

- 4. Where appropriate completed risk assessments should be further developed into safe working procedures / safe systems of work / method statements.
- 5. The risk assessment process should be used to identify training requirements e.g. ladder and step ladder inspection; assembling and dismantling access towers etc. as part of the measures to control the hazards identified.

The Premises Manager will be responsible for ensuring all premises-related required actions and control measures are implemented.

21. Medicines

Medication will be administered to pupils in accordance with the School's Managing Medical Conditions in School Policy.

The office team are responsible for control of administration of medicines to pupils.

APPENDIX I: Current Role Holders

	NAME	CONTACT DETAILS
HEADTEACHER:	Izzy Rickards Headteacher	headteacher@holytrinity.merton.sch.uk 020 8542 1591
HEALTH & SAFETY CO-ORDINATOR(S):	Laura Evershed School Business Manager	sbm@holytrinity.merton.sch.uk 020 8542 1591
	Job Okiro Premises Manager	Job.okiro@holytrinity.merton.sch.uk 020 8542 1591
DESIGNATED HEALTH & SAFETY GOVERNOR:	Adam Lawson Health & Safety Governor	Adam.lawson.governor@holytrinity.merton.sch.uk
RISK ASSESSMENT (INCLUDING DSE AND PEEPS) LEADS:	Izzy Rickards Headteacher	<u>headteacher@holytrinity.merton.sch.uk</u> 020 8542 1591
	Laura Evershed School Business Manager	sbm@holytrinity.merton.sch.uk 020 8542 1591
GENERAL HEALTH AND SAFETY INSPECTIONS:	Adam Lawson Health & Safety Governor	Adam.lawson.governor@holytrinity.merton.sch.uk
	Job Okiro Premises Manager	Job.okiro@holytrinity.merton.sch.uk 020 8542 1591
EQUIPMENT INSPECTION LEAD:	Job Okiro Premises Manager	Job.okiro@holytrinity.merton.sch.uk 020 8542 1591
ACCIDENT REPORTING AND INVESTIGATION LEAD:	Laura Evershed School Business Manager	sbm@holytrinity.merton.sch.uk 020 8542 1591
HEALTH AND SAFETY TRAINING COORIDNATOR:	Laura Evershed School Business Manager	sbm@holytrinity.merton.sch.uk 020 8542 1591
PE LEAD:	Abi Hann Deputy Headteacher	Abi.hann@holytrinity.merton.sch.uk 020 8542 1591
EDUCATIONAL VISITS COORDINATOR:	Izzy Rickards Headteacher	headteacher@holytrinity.merton.sch.uk 020 8542 1591
STAFF HEALTH AND SAFETY REPRESENTATIVES:	Tina Panners	<u>Tina.Panners@holytrinity.merton.sch.uk</u> 020 8542 1591

APPENDIX 2: Table of Mandatory Arrangements

	Job Title of Person Responsible	Location of Arrangement	Date of Issue	Date of review
Accident Reporting and Investigation	School Business Manager	https://self.merton.gov.uk/ service/Accident_Reporti ng_Admin https://www.hse.gov.uk/ri ddor/	N/A	Annually as part of Health & Safety Policy
Asbestos Management	School Business Manager / Site Manager	N/A	N/A	When any demolition work is completed
Client Handling	Headteacher	PEEPs	October 2024	September 2025 or when new children join
Communication and Consultation with employees on health and safety matters	School Business Manager / Staff Health & Safety Representative	N/A	November 2024	May 2025
Control of Hazardous Substances	Site Manager	Health & Safety Policy (above)	November 2024	November 2025
Critical Incident Management	Headteacher	Critical Incident Policy and Critical Incident Plan	March 2024	March 2025
Educational Visits / School Trips, including residential visits and any school-led adventure activities	Headteacher	Individual Risk Assessments c/o Headteacher	Ongoing	Ongoing
Facilities / Buildings Management	Site Manager	N/A	Ongoing	Ongoing
Fire Safety and Emergency Arrangements including Evacuation Procedures	Headteacher / School Business Manager	Health & Safety Policy (above)	November 2024	November 2025
		Fire Safety File including Fire Risk Assessment	March 2024	March 2025
First Aid Arrangements and Supporting Medical Needs	School Business Manager	First Aid in School Policy Supporting Children with	November 2024	November 2025
		Medical Conditions Policy	March 2024	March 2025
Health and Safety Training for all staff	Headteacher / School Business Manager	Health & Safety Training Log	Ongoing	Ongoing
Lettings	School Business Manager	Lettings Policy 2024-25	March 2024	March 2025
Lone Working	Headteacher	Health & Safety Policy (above)	November 2024	November 2025

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APPENDIX 3: 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?	

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APPENDIX 4: Accident/ First Aid Report Form

HOLY TRINITY C OF E PRIMARY SCHOOL – FIRST AID REPORT

Date of Incident			Tin	ne of Incident	
Name of Injured Person			Cla	ss (if HT Pupil)*	
Details of the Incident <i>Please give full details</i>					
Treatment Given Please give full details					
Follow Up – In School Please give name of staff member informed and any advice given					
Follow Up – Parents/ Carers	N/A	-	p Letter hiting/ Diarrhoea Lette bleed Letter		Consciousness Form
If applicable please give: • Name of person contacted • Time of contact • Details of any advice given					
Name of Staff Member/ First Aider Assisting			Staff Signature		

APPENDIX 5. 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. For each of these infections or complaints, there is further information in the guidance on the symptoms, how it spreads and some 'do's and don'ts' to follow: https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities

The exclusion table below is taken from: <u>https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/children-and-young-people-settings-tools-and-resources</u>

Infection	Exclusion period	Comments
Athlete's foot	None	Children should not be barefoot at their setting (for example in changing areas) and should not share towels, socks or shoes with others.
Chickenpox	At least 5 days from onset of rash and until all blisters have crusted over.	Pregnant staff contacts should consult with their GP or midwife.
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores.
Conjunctivitis	None	If an outbreak or cluster occurs, <u>consult your local</u> <u>health protection team (HPT)</u> .
Respiratory infections including coronavirus (COVID-19)	Children and young people should not attend if they have a high temperature and are unwell. Children and young people who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.	Children with mild symptoms such as runny nose, and headache who are otherwise well can continue to attend their setting.
Diarrhoea and vomiting	Staff and students can return 48 hours after diarrhoea and vomiting have stopped.	If a particular cause of the diarrhoea and vomiting is identified, there may be additional exclusion advice, for example E. coli STEC and hep A. For more information, see <u>Managing outbreaks and</u> <u>incidents</u> .
Diptheria*	Exclusion is essential. Always consult with your <u>UKHSA HPT</u> .	Preventable by vaccination. Family contacts must be excluded until cleared to return by <u>your local HPT</u> .
Flu (influenza) or influenza like illness	Until recovered	Report outbreaks to <u>your local HPT</u> . For more information, see <u>Managing outbreaks and</u> <u>incidents</u> .
Glandular fever	None	
Hand foot and mouth	None	Contact your local HPT if a large number of children are affected. Exclusion may be considered in some circumstances.
Head lice	None	

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Infection	Exclusion period	Comments
Hepititis A	Exclude until 7 days after onset of jaundice (or 7 days after symptom onset if no jaundice).	In an outbreak of hepatitis A, <u>your local HPT</u> will advise on control measures.
Hepatitis B, C, HIV	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact.
		Contact your <u>UKHSA HPT</u> for more advice.
Impetigo	Until lesions are crusted or healed, or 48 hours after starting antibiotic treatment.	Antibiotic treatment speeds healing and reduces the infectious period.
Measles	4 days from onset of rash and well enough.	Preventable by vaccination with 2 doses of MMR.
		Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife.
Meningococcal meningitis* or septicaemia*	Until recovered	Meningitis ACWY and B are preventable by vaccination.
		Your local HPT will advise on any action needed.
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. Your <u>UKHSA HPT</u> will advise on any action needed.
Meningitis viral	None	Milder illness than bacterial meningitis. Siblings and other close contacts of a case need not be excluded.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise spread. Contact your <u>UKHSA HPT</u> for more information.
Mumps*	5 days after onset of swelling	Preventable by vaccination with 2 doses of MMR. Promote MMR for all pupils and staff.
Ringworm	Not usually required	Treatment is needed.
Rubella* (German measles)	5 days from onset of rash	Preventable by vaccination with 2 doses of MMR. Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife.
Scabies	Can return after first treatment.	Household and close contacts require treatment at the same time.
Scarlet fever*	Exclude until 24 hours after starting antibiotic treatment.	A person is infectious for 2 to 3 weeks if antibiotics are not administered. In the event of 2 or more suspected cases, please <u>contact your UKHSA HPT</u> .
Slapped cheek/Fifth disease/Parvovirus B19	None (once rash has developed)	Pregnant contacts of case should consult with their GP or midwife.
Threadworms	None	Treatment recommended for child and household.
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need or respond to an antibiotic treatment.
Tuberculosis* (TB)	Until at least 2 weeks after the start of effective antibiotic treatment (if pulmonary TB.	Only pulmonary (lung) TB is infectious to others, needs close, prolonged contact to spread.

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Infection	Exclusion period	Comments
	Exclusion not required for non-pulmonary or latent TB infection.	Your local HPT will organise any contact tracing.
	Always consult <u>your local HPT</u> before disseminating information to staff, parents and carers.	
Warts and verrucae	None	Verrucae should be covered in swimming pools, gyms and changing rooms.
Whooping cough (pertussis)*	2 days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. <u>Your local HPT</u> will organise any contact tracing.