

# Health & Safety Policy



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## ***Aims which guide our policies and practice***

*As a school, we seek to promote shared moral and ethical values to unite both local and global interests which enable children to become global citizens. Our agreed school aims are:*

- To create a happy and stimulating learning environment, in which each child will develop to their full potential, thereby achieving high educational standards.*
- To develop self-awareness, self-respect and tolerance of others by developing an understanding of the world in which they live.*
- To appreciate human achievements and aspirations; develop aesthetic sensitivity and appreciation; physical ability and co-ordination and a concern for the safety of themselves and others.*
- To prepare children to live and work with others, enabling them to be responsible and caring members of the community.*
- To give children, at the end of their period of primary education, an appetite for acquiring further knowledge, experience and skills, so ensuring they are prepared for the challenges of the next stage in their education.*

*We ensure that all of our policies and practices are guided by these aims and we seek to ensure that they are at the forefront of all that we do.*

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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
- Ensure that all reasonably practical steps are taken to ensure the health, safety and welfare of staff, children and other supervising adults participating in educational visits
- Have robust procedures in place in case of emergencies
- Ensure that the premises and equipment are maintained safely, and are regularly inspected

## 2. Legislation

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

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

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

Sections of this policy are also based on the [statutory framework for the Early Years Foundation Stage](#).

### **3. Roles and responsibilities**

#### **3.1 The local authority and governing body**

Wakefield Local Authority has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the school's governing body.

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

#### **3.2 Headteacher**

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

- Implementing the health and safety policy
- Ensuring there is enough staff to safely supervise pupils
- Ensuring that the school building and premises are safe and regularly inspected
- Providing adequate training for school staff
- Ensuring records are maintained relating to accidents, incidents and near misses
- Ensuring that arrangements are made for the implementation of the Authority's accident reporting procedure and that this is drawn to the attention of all staff at the school as necessary
- Reporting to the governing body on health and safety matters
- Ensuring appropriate evacuation procedures are in place and regular fire drills are held
- Ensuring that in their absence, health and safety responsibilities are delegated to another member of staff
- Ensuring all risk assessments are completed and reviewed for activities on and off the school site
- Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary

In the headteacher's absence, **[name of individual/role]** assumes the above day-to-day health and safety responsibilities.

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

The nominated health and safety lead is Emma Wake, HR 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:

- Ensure they are familiar with the school's Health and Safety policy
- 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
- Make regular safety inspections of their areas of work
- 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
- Complete an Accident/Incident Report Form (IRF 2016) available from the school office in the event of an accident or incident of violence. All accidents should also be recorded in the accident book which is kept in individual classrooms
- Understand emergency evacuation procedures and feel confident in implementing them

### **3.5 Caretaker**

The Caretaker also has responsibility for health and safety. This involves;

- Ensuring that he is familiar with the school's Health and Safety policy
- Conducting daily health and safety checks on the premises including, external fencing, security, fixed play equipment, fitness equipment
- Conducting daily checks of fire escape routes
- Undertaking monthly checks of water systems in line with Legionella health checks
- Reporting to the Headteacher/SLT or the Health and Safety Lead any defects and hazards brought to their attention
- Informing the Headteacher/Health and Safety Lead whenever contractors are due to enter the school or undertake maintenance, service or works contracts and wherever possible provide supervision
- Conducting weekly fire tests

### **3.6 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.

In addition pupils are expected to;

- Take reasonable care of their own health and safety and other children
- Walk around school in a quiet and sensible manner with their partner unless told to do otherwise
- Follow the safety rules of the school and in particular the instructions of all staff given in an emergency
- Play safely on outdoor equipment in line with the safety rules and use these facilities appropriately
- Use and not willfully misuse, neglect or interfere with things provided for their safety

### **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 Caretaker is responsible for the security of the school site in and out of school hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems.

An electronic entry system has been installed at the main entrance gate to the school site. Entrance to the site for staff, is gained via a keypad code, visitors can contact the main office and Nursery via an intercom system.

An electronic sign in system is in place for staff and visitors, located in the entrance to main school. All visitors are asked to sign in using the sign in system and are provided with a photographic entrance pass.

The school has fitted three electronic entry doors off the entrance hall to maintain a secure area where parents and visitors may wait before either escorted entry to the main school or to meet a member of staff or collect their child.

The only cars parked in school should be staff, visitors or contractors. Parents are asked not park in school. Car parking is separate to the areas where the children spend break and lunch times.

Contractors come onto the premises when loading/unloading equipment or delivering supplies and park in the school car park. They have to report to main reception or the school kitchen.

If any contractors vehicles need to be present during playtime or lunchtime in any of the children's play areas then, it is supervised by a member of staff and remains stationary until all children are clear of the playground or children are not allowed into the playground.

The Headteacher, Assistant Headteacher and HR Manager are key holders and will respond to an emergency.

## **5. Fire**

Emergency exits, assembly points and assembly point instructions are clearly identified by safety signs and notices. Fire risk assessment of the premises will be reviewed regularly.

Emergency evacuations are practiced at least once a term.

The fire alarm is a loud continuous alarm.

Fire alarm testing will take place every Friday morning at 9.00am.

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

In the event of a fire:

- The alarm will be raised immediately by whoever discovers the fire and emergency services contacted. Evacuation procedures will also begin immediately
- Fire extinguishers may be used by staff only, and only then if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk
- Staff and pupils will congregate at the assembly point. The assembly point is on the top main playground
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day
- The Headteacher will take a register of all staff
- Staff and pupils will remain outside the building until the emergency services say it is safe to re-enter

The school will have special arrangements in place for the evacuation of people with mobility needs and fire risk assessments will also pay particular attention to those with disabilities. Personal Emergency Evacuation Plans (PEEPs) are in place for specific children who require additional support through an evacuation.

## 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 Mark Dermody, Caretaker and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

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

Insert additional information on how hazardous products will be stored and details on pupil access to substances.

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

### 6.1 Gas safety

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

### 6.2 Legionella

- A water risk assessment has been completed on [date] by [name of individual and/or role]. [Name of individual and/or role] 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 [frequency] and when significant changes have occurred to the water system and/or building footprint
- The risks from legionella are mitigated by the following: [insert examples of controls or checks that are in place e.g. temperature checks, heating of water, disinfection of showers, etc.]

### 6.3 Asbestos

- An Asbestos Management Plan, sign in sheets and management surveys are held in the school office and checks are undertaken in line with accordance with LA procedures
- The Headteacher/Health and Safety Lead will make it available to contractors working on site

## 7. Equipment

- All equipment and machinery is maintained in accordance with the manufacturer's instructions. In addition, maintenance schedules outline when extra checks should take place
- When new equipment is purchased, it is checked to ensure that it meets appropriate educational standards

- All equipment is stored in the appropriate storage containers and areas. All containers are labelled with the correct hazard sign and contents

### **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 directs them
- Cookers should not be used without essential fire precautions being immediately available eg fire blanket, fire extinguisher
- All staff will ensure that children receive instructions and on the job training to enable them to be safe during a cooking activity
- Any potential hazards will be reported 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. The Schools Sports Coordinator has demonstrated lessons to all teaching staff and has focused on safe practice in PE, sharing his knowledge and understanding of staying safe whilst undertaking physical activity
- Any concerns about the condition of the gym floor or other apparatus will be reported to the Caretaker
- Gymnastics equipment is checked annually by an accredited contractor and repaired or removed as appropriate

### **7.3 Playground**

- Staff actively encourage children to play safely. Fighting, wrestling or other rough games are not allowed
- Eight members of staff supervise the playground during lunchtimes
- We have ten Lunchtime Supervisors and a Senior Lunchtime Supervisor on duty at lunchtime
- Staff on duty should ensure that all gates are locked

### **7.4 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 about where the member of staff is and when they are likely to return.

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

## **9. 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 Caretaker 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. Educational visits**

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

- Risk assessments will be completed where educational visits and activities require them using the LA Evolve system
- All educational visits are appropriately staffed
- Staff will take a mobile phone, a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details
- For visits with pupils in the Early Years Foundation Stage, there will always be at least one first aider with a current paediatric first aid certificate
- For other trips, there will always be at least one first aider on schools trips and visits

## **12. Lettings**

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

## **13. Violence at work**

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

All staff will report any incidents of aggression or violence (or near misses) directed to themselves to their line manager/headteacher immediately. This applies to violence from pupils, visitors or other staff. Staff will complete an Accident/Incident Report Form (IRF2016) which will be recorded using the mpip system.

## **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 when responding to infection control issues. We will encourage staff and pupils to follow this good hygiene practice, outlined below, where applicable.

### **15.1 Handwashing**

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

### **15.2 Coughing and sneezing**

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

### **15.3 Personal protective equipment**

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

## **15.4 Cleaning of the environment**

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

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

- Clean up all spillages of blood, faeces, saliva, vomit, nasal and eye discharges immediately and wear personal protective equipment
- Follow the procedure for removing spillages and obtain the body fluids disposal kit from the Caretakers cleaning cupboard

## **15.6 Clinical waste**

- Always segregate domestic and clinical waste, in accordance with local policy
- Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins
- Remove clinical waste with a registered waste contractor

## **15.7 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. We will advise these children to have additional immunisations, for example for pneumococcal and influenza.

## **15.8 Head Lice**

A general letter is sent to the parents of all children in a class if there is a case of head lice in the class.

We also display information and resources on a regular basis regarding the prevention of head lice.

## **15.9 Administration of Medicines**

Information is sought from parents about any medical needs on admission to school. Prescription and non-prescription medicines will be administered in line with the Medical Needs Policy.

## **15.10 First Aid Provision**

The Headteacher is responsible for ensuring that there is an adequate number of qualified First Aiders.

A list of staff who have undertaken Paediatric First Aid and Basic First Aid Training is held by the Health and Safety Lead. All staff are trained in any aspects of First Aid deemed necessary eg asthma, epilepsy, the use of an epi-pen. First Aiders will ensure the maintenance of the contents of the first aid boxes and other supplies.

## **15.10 Exclusion periods for infectious diseases**

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 1.

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 carer 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.

## **18. Accident reporting**

### **18.1 Accident record book**

- Any pupil who has been injured will be seen by a qualified First Aider
- Parents will be contacted if there are any doubts over the health and welfare of a child
- Staff issue notes to parents regarding minor accidents which details what procedures were followed
- In the event of a serious incident an ambulance is called and a member of staff accompanies the child to hospital. Parents are asked to go immediately to the hospital if they are not nearby
- An Accident/Incident Form (IRF 2016) will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. The Health and Safety Lead will record this using the mpip system. All accidents should also be recorded in the accident book which is kept in individual classrooms
- As much detail as possible will be supplied when reporting an accident
- Accident records will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of

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

The Health and Safety Lead 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 Health and Safety Lead 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 – <http://www.hse.gov.uk/riddor/report.htm>

### **18.3 Notifying parents**

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

### **18.4 Reporting child protection agencies**

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

### **18.5 Reporting to Ofsted**

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

## **19. Training**

Our staff are provided with this policy as part of their induction process.

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

## **20. Monitoring**

The Governing Body has a named governor with responsibility for health and safety matters. It is this governor's responsibility where possible to keep the Governing Body informed of new regulations regarding health and safety, and to ensure that the school regularly reviews its processes and procedures with regard to health and safety matters. The governor in question also liaises with the LA and other external agencies, to ensure that the school procedures are in line with those of the LA.

The Governing Body, in consultation with professional advisors, carries out regular risk assessments to ensure that the school is a safe environment. In addition, risk assessments are made by staff for school activities, including off-site visits.

The Head teacher implements the school health and safety policy on a day-to-day basis, and ensures that all staff are aware of the details of the policy as it applies to them.

The Head teacher reports to governors half termly on health and safety issues. The report will address hazards and risks that were identified during school and out of school hours and the steps taken to minimise or eliminate them. The Governing Body will evaluate those outcomes and will consider whether any further action should be recommended.

This policy will be reviewed by the Health and Safety Lead on an annual basis.

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

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

This health and safety policy links to the following policies:

- First aid
- Risk assessment
- Supporting pupils with medical conditions
- Accessibility plan

## Appendix 4. 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 that you can check.](#)

Infection or complaint	Recommended period to be kept away from school or nursery
<b>Athlete's foot</b>	None.
<b>Campylobacter</b>	Until 48 hours after symptoms have stopped.
<b>Chicken pox (shingles)</b>	<p>Cases of chickenpox are generally infectious from 2 days before the rash appears to 5 days after the onset of rash. Although the usual exclusion period is 5 days, all lesions should be crusted over before children return to nursery or school.</p> <p>A person with shingles is infectious to those who have not had chickenpox and should be excluded from school if the rash is weeping and cannot be covered or until the rash is dry and crusted over.</p>
<b>Cold sores</b>	None.
<b>Rubella (German measles)</b>	5 days from appearance of the rash.
<b>Hand, foot and mouth</b>	Children are safe to return to school or nursery as soon as they are feeling better, there is no need to stay off until the blisters have all healed.
<b>Impetigo</b>	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
<b>Measles</b>	Cases are infectious from 4 days before onset of rash to 4 days after so it is important to ensure cases are excluded from school during this period.
<b>Ringworm</b>	Exclusion not needed once treatment has started.
<b>Scabies</b>	The infected child or staff member should be excluded until after the first treatment has been carried out.
<b>Scarlet fever</b>	Children can return to school 24 hours after commencing appropriate antibiotic treatment. If no antibiotics have been administered the person will be infectious for 2 to 3 weeks. If there is an outbreak of scarlet fever at the school or nursery, the health protection team will assist with letters and factsheet to send to parents or carers and staff.
<b>Slapped cheek syndrome, Parvovirus B19, Fifth's disease</b>	None (not infectious by the time the rash has developed).

<b>Bacillary Dysentery (Shigella)</b>	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
<b>Diarrhoea and/or vomiting (Gastroenteritis)</b>	<p>Children and adults with diarrhoea or vomiting should be excluded until 48 hours after symptoms have stopped and they are well enough to return. If medication is prescribed, ensure that the full course is completed and there is no further diarrhoea or vomiting for 48 hours after the course is completed.</p> <p>For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health advisor or environmental health officer will advise.</p> <p>If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.</p>
<b>Cryptosporidiosis</b>	Until 48 hours after symptoms have stopped.
<b>E. coli (verocytotoxigenic or VTEC)</b>	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
<b>Food poisoning</b>	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
<b>Salmonella</b>	Until 48 hours after symptoms have stopped.
<b>Typhoid and Paratyphoid fever</b>	Seek advice from environmental health officers or the local health protection team.
<b>Flu (influenza)</b>	Until recovered.
<b>Tuberculosis (TB)</b>	Pupils and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. Pupils and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.
<b>Whooping cough (pertussis)</b>	A child or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so or 21 days from onset of illness if no antibiotic treatment.
<b>Conjunctivitis</b>	None.
<b>Giardia</b>	Until 48 hours after symptoms have stopped.



<b>Glandular fever</b>	None (can return once they feel well).
<b>Head lice</b>	None.
<b>Hepatitis A</b>	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older children with good hygiene who will have been much more infectious prior to diagnosis.
<b>Hepatitis B</b>	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
<b>Hepatitis C</b>	None.
<b>Meningococcal meningitis/ septicaemia</b>	If the child has been treated and has recovered, they can return to school.
<b>Meningitis</b>	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
<b>Meningitis viral</b>	None.
<b>MRSA (meticillin resistant Staphylococcus aureus)</b>	None.
<b>Mumps</b>	5 days after onset of swelling (if well).
<b>Threadworm</b>	None.
<b>Rotavirus</b>	Until 48 hours after symptoms have subsided.