



**POLICY:** Health and Safety Policy

**STATUTORY:** Yes

**DATE AGREED:** October 2024

**REVIEW DATE:** Sept 2025

**RESPONSIBLE MEMBER OF STAFF:** R French

**GOVERNOR COMMITTEE:** Finance, Audit and Site

**SIGNED HEADTEACHER:** J Holmes

**SIGNED CHAIR OF GOVERNORS:** R Whitehouse

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## 1. Statement of Intent

John Masfield High School:

- Will take all reasonable steps to provide safe and healthy conditions for students, employees and others.
- Will assess risks to the health and safety of staff, students, contractors, volunteers, and visitors and others.
- Will take sensible and proportionate steps to ensure compliance with all relevant health and safety legislation.
- Will provide adequate resources to implement this policy including access to support from health and safety **competent persons**. Where necessary external specialist advice and assistance will be obtained.
- Accepts that health, safety and welfare are an integral part of all its activities and will take steps to manage these effectively.
- Expects all employees and students to co-operate in complying with all legal obligations and to take reasonable care of their own health and safety and have regard for the health and safety of other.
- Is committed to providing the necessary information, instruction, supervision and training to all employees and students where applicable.
- Acknowledges and actively supports the role and responsibilities of employee representatives and will give full co-operation to elected safety representatives of recognised trade unions to enable them to carry out their duties effectively.
- Is committed to regular evaluation and review of its Health and Safety Policy to ensure its objectives are met and, as necessary, to modifying the policy in light of new legislation, incidents and other changing circumstances.
- Will set out full details of the organisation and arrangements for the management of health and safety and communicate these to all employees, volunteers and contractors.

## 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 require 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.

This policy complies with our funding agreement and articles of association.

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

#### **3.1 The governing board**

The governing board has ultimate responsibility for health and safety matters in the school, but will delegate day-to-day responsibility to the Headteacher.

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 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 governor who oversees health and safety is Mrs Sarah Fletcher

#### **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 [-----] assumes the above day-to-day health and safety responsibilities.

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

The nominated health and safety lead is Rebecca French, School Business Manager

### **3.4 Staff**

#### **3.4.1 All School staff**

School staff have a duty to take care of pupils in the same way that a prudent parent/carer 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.

#### **3.4.2 Supervisory staff (e.g. heads of faculty/subject/technicians)**

In addition to the duties which all staff have, supervisory staff will:

- Be responsible for all matters health and safety relevant to the work of their area of responsibility.
- Bring to the notice of the Headteacher (and the School Business Manager) any problems or defects affecting the health and safety or welfare of staff, students or other persons in their faculty, department or subject area.
- Have a working knowledge of regulations, guidance materials and codes of practice in their subject areas.
- Produce a faculty/department/subject safety policy and revise it when necessary.
- Ensure that staff have received adequate training on health and safety aspects of their specialist areas (particularly where use of potentially hazardous equipment or substances is undertaken) and that new employees working within the department are given instructions in safe working practices.
- Ensure that necessary personal protective equipment (e.g. eye protection or protective clothing) is available and kept well maintained.
- Ensure that any risks specific to their area of work are adequately assessed (e.g. risk assessments for the use of tools or equipment, COSHH assessments for the use of hazardous substances).
- Ensure that relevant safety signs and notices are displayed (e.g. signs requiring use of eye protection, restricting use of teacher-only machines).
- Ensure that regular safety inspections are made to ensure that all plant, machinery and equipment in the department in which they work is in good and safe working order, and is adequately guarded.

#### **3.4.3 Site Team**

The site team is responsible for:

- Bringing the school health and safety policy and risk assessments to the attention of staff (including contract cleaners, caterers and grounds maintenance staff) in so far as it affects those personnel (e.g. in storage of equipment).
- Ensuring that safe procedures are used and followed when work of a potentially hazardous nature is undertaken by themselves or others under their direction (e.g. working at height on steps or ladders, use of electrically powered machine, carrying out repair or maintenance work).
- Ensuring that due warning is given of any caretaking operations that could constitute a hazard to other users of the premises (e.g. use of signs to warn of slippery floors, ice or snow).
- Informing the School Business Manager of the arrival (or expected arrival) of contractors for maintenance work, and informing contractors of any hazards that could affect their health and safety while working in school.
- Completion and recording of scheduled testing (e.g. weekly fire alarm test, water testing).

### **3.5 Pupils and parents/carers**

Pupils and parents/carers 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 School Business Manager 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 site manager, Leon French, and the caretaker, Paul Archer 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.

Leon French (site manager) and Paul Archer (caretaker) 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 and fire alarm testing will take place once a week. New staff will be trained in fire safety and all staff and pupils will be made aware of any new fire risks.

In the event of a fire:

- The alarm will be raised immediately by whoever discovers the fire and emergency services contacted. Evacuation procedures will also begin immediately, as detailed in "Fire Alarms and Other Emergency Procedures".
- Fire extinguishers may be used by staff only, and only then if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk.
- Staff and pupils will congregate at the assembly points. These are:
  - Lower tennis courts – Y12 and Y13

- Playground outside DT rooms – Y11 and Y10
- Maths playground – Y9
- Playground at rear of MFL block – Y7 and Y8
- Outside reception area – Support staff, visitors and contractors
- Form tutors will take a register of pupils, which will then be checked against the attendance register of that day.
- 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.

## **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 senior science lab technician and/or the School Business Manager and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

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

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 they have adequate ventilation.

### **6.2 Legionella**

- A water risk assessment has been completed in September 2022 by EMS water. The site manager 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 bi-annually, and when significant changes have occurred to the water system and/or building footprint.

### **6.3 Asbestos**

- Staff are briefed on the hazards of asbestos, the location of any asbestos in the school and the action to take if they suspect they have disturbed it.
- Arrangements are in place to ensure that contractors are made aware of any asbestos on the premises and that it is not disturbed by their work.
- Contractors will be advised that if they discover material that they suspect could be asbestos, they will stop work immediately until the area is declared safe.
- A record is kept of the location of asbestos that has been found on the school site.

## **7. Equipment**

All equipment and machinery are 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 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 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 the School Business Manager or 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.
- 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 sports hall floor or other sports equipment will be reported to the Site Manager or School Business Manager.
- All sports equipment is checked annually by Sportsafe.

### **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 subsidised if required specifically for DSE use).

## **8. Lone working**

It is school policy that as far as is reasonably practicable, no member of staff or pupil may work alone in any building. However, JMHS recognise that at times it will be necessary for staff to be in areas that are unsupervised. When this is the case, appropriate risk assessments for the work to be undertaken will be undertaken. The factors to be considered in determining risk, should include, but are not limited to:

- Risk of violence.
- Machinery and equipment.
- Working at height.
- Chemicals.
- The area in which lone working may take place.
- Methods of communication that are available.
- Access and egress.
- The person involved.

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 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 Site Manager and caretaker retain 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**

- The Educational Visits Co-ordinator for the school is the School Business Manager.
- All educational visits must be authorised by the Headteacher/EVC in advance.
- Risk assessments will be completed where off-site visits and activities require them.
- All off-site visits are appropriately staffed.
- Staff will take a school mobile phone, an appropriate portable first aid kit, information about the specific medical needs of pupils, along with the parents'/carers' contact details.
- The Evolve portal site provides detailed procedures and guidelines. Login details can be obtained from the School Business Manager.
- There will always be at least one first aider on school 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.

## **14. Smoking and Vaping**

Smoking is not permitted anywhere on the school premises.

## **15. Infection prevention and control**

We follow national guidance published by the UK Health Security Agency 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 or hand dryer.
- 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.
- Wear goggles if there is a risk of splashing to the face.
- Use the correct personal protective equipment when handling cleaning chemicals.
- Use personal protective equipment (PPE) to control the spread of infectious diseases where required or recommended by government guidance and/or a risk assessment.

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

- Clean the environment frequently and thoroughly.

### **15.6 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 use risk assessments to 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.

## **15.7 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 any 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 Exclusion periods for infectious diseases**

The school will follow recommended exclusion periods outlined by the UK Health Security Agency and other government guidance as outlines in appendix 2.

In the event of an epidemic/pandemic, we will follow advice from the UK Health Security Agency 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 an 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 book**

- An accident form will be completed as soon as possible after the accident occurs by the member of staff and/or first aider who deals with it. An accident form template can be found in appendix 1.
- 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 regarding first aid and accidents will be retained by the school for a minimum of three years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

## **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 will report these to the HSE 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**

These 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 heat-induced 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 seven consecutive days (not including the day of the incident). In this case, the School Business Manager 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.
  - 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**

These 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 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:

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

## **19. Training**

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

Staff who work in high-risk environments, such as in science labs or with woodwork equipment are given additional health and safety training.

## **20. Monitoring**

This policy will be reviewed by the School Business Manager annually.

At every review, the policy will be approved by Finance, Audit and Site Committee.

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

This health and safety policy links to the following policies:

- First aid.
- Risk assessment.
- Supporting students with medical needs.
- Accessibility plan.
- Remote learning.
- Business continuity (critical incident) plan.
- Guidance for working alone at JMHS.



## Appendix 1: Accident Form

# SCHOOL ACCIDENT/INCIDENT REPORT FORM

For **JMHS Employees** -to be completed by the person who had the accident, their Headteacher/SBM.

For **Pupils** – to be completed by a Teacher or First Aider. In ALL cases it is to be signed by the Headteacher/SBM. All parts must be filled, ✓ or marked NOT APPLICABLE

### PART A – ABOUT YOU/THEM (THE PERSON WHO HAD THE ACCIDENT/INCIDENT)

1. What is your/their full name?

What is your/their job title (if applicable?)

.....

3. Are You/They a? (Please tick✓)

Pupil		JMHS employee		A visitor to JMHS premises	
Contractor		Member of the public		Other (state):	

4. If Injured person is NOT a JMHS

Employee i.e. a Pupil, Member of Public or Visitor - What is their Home address, postcode, home telephone and date of birth?

--

### PART B – ABOUT THE ACCIDENT/ INCIDENT

1. On what date did the incident happen?

--

2. At what time did the incident happen? Please use 24hr time i.e. 0930

--

3. Did the incident happen on JMHS School premises?

--

4. If YES - Where exactly on the JMHS premises did the incident happen?

--

5. If NO, where did the incident happen?

At someone else's premises		If so: -The Name, address, postcode:
In a public place		

### PART C – ABOUT THE INJURY/INCIDENT

1. What was the injury i.e. cut, graze, strain

--

2. What part(s) of the body were injured?

--

3. Was the injury? (Please tick ✓)

A fatality	
A major injury or condition i.e. a fracture or loss of consciousness	
An injury or condition <b>to an employee</b> , which resulted in their absence from work, or prevented them doing their normal work for <b>more than 7 days</b> .	
An injury to <b>a Pupil</b> or member of the public where they had to be <b>taken from the scene of the accident to a hospital</b> for treatment?	
A minor injury or condition.	
A non-physical injury incident i.e. verbal assault, threatening behaviour or cyber-bullying?	
A near hit?	



4. Did the injured person? (Tick ✓ all that apply) given?

Become unconscious?	
Need resuscitation?	
Remain in hospital for more than 24hrs?	
None of the above.	

5. Was first aid treatment

6. If YES give name of first aider.

part)

7. Describe treatment given. (First Aider completes this

8. Does the person verbally/physically assaulted feel distress or harmed by the incident? N/A

9. In the case of verbal/physical bullying was the incident racial, sexual, homophobic or disablist?

Yes/No

#### PART D – ABOUT THE KIND OF ACCIDENT

Please tick ✓ ONE box that best describes what happened

Contact with moving machinery		Drowned or asphyxiated	
Hit by a moving flying or falling object		Exposed to, or in contact with, a harmful substance-	
Hit by a moving vehicle		Exposed to fire-	
Hit something fixed or stationary		Exposed to an explosion.	
Injured while handling, lifting or carrying		Contact with electricity or electrical discharge	
Slipped, tripped or fell on the same level		Injured by an animal	
Fell From a Height – (How high in metres?)		Physically assaulted by a person	
Trapped by something collapsing		Verbal or threatening behaviour from another person	
Another kind of accident (Please outline here and describe fully in part E)			

#### PART E – DESCRIBING WHAT HAPPENED

Give as much detail as possible; continue on a separate sheet if needed. Try to include:

- The name of any substances involved;
- The name and type of any equipment/machinery involved;
- The unsafe act or unsafe condition LEADING UP TO the incident;
- What the person involved was doing at the time of the incident;
- The part played by other people i.e who perpetrated the verbal assault pupil, vehicle driver, parent in School etc;

Please give name, address and telephone number of any witnesses here (if none please state) - For Pupil witnesses give Year Group & Form:

**PART F – ACTIONS TO PREVENT RECURRENCE (HEAD TEACHER/SBM TO ENSURE THIS PART IS COMPLETED)**

Please give details of the following:

- Actions immediately following the event to make safe;
- Intermediate actions following the event that were done, or will be done, to minimise risk while investigating cause;
- Longer-term actions that were done, or will be done, to establish root cause of incident and prevent recurrence.
- Whether risk assessment has been completed/reviewed as a result of this incident.

Action Taken / Proposed / Timeframe	Person Responsible Position

**PART G – YOUR SIGNATURE**

Head teacher's Name		Name of Person Submitting Form:	
Head teacher's Signature		Signature of Person Submitting Form:	
		Date:	
Date:		Are You: The person who had the accident The First Aider Other (please state) if Other please state whether you witnessed the accident/incident	

Suggest – Scan all pages of the Form, saving as Injured Person's name and date of accident, page 1, page 2 etc – email to [accidents@fandrms.co.uk](mailto:accidents@fandrms.co.uk) Original copy remains in School

**FOR FIRE AND RISK MANAGEMENT SERVICES USE ONLY**

Date Received:	Data Entry Date: Data Entry By (initials): Accident Ref No:
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RIDDOR Reportable?	YES/NO	Accident Investigation Required? Locally? Specialist?	
Date of Report: Method:		Name of Person(s) Investigating:	
		Date Investigation Started:	
		Date Investigation Report Submitted:	
RIDDOR Ref:		Occupational Health Input suggested?	

## **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 the UK Health Security Agency. For each of these infections or complaints, there [is further information in the guidance on the symptoms, how it spreads and some 'dos and don'ts' to follow that you can check.](#)

In confirmed cases of infectious disease, including COVID-19, we will follow the recommended self-isolation period based on government guidance.

<b>Infection or complaint</b>	<b>Recommended period to be kept away from school or nursery</b>
<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>Respiratory infections including coronavirus (COVID-19)</b>	<p>Children and young people should not attend if they have a high temperature and are unwell.</p> <p>Anyone with a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.</p>
<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 a 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 adviser 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.

<b>Version</b>	<b>Date</b>	<b>Done by</b>	<b>Comment</b>	<b>Approval</b>
2.0	Sept 2024	Rebecca French	Full review and update in line with current legislation and guidance	Finance, Audit and Site Committee