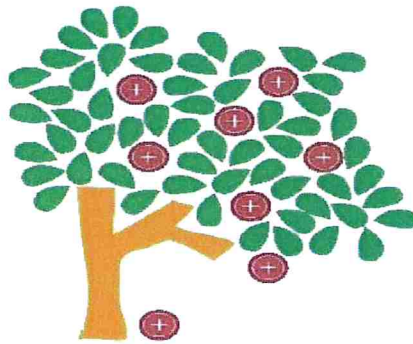

The Elm Court Livity Federation

Health and Safety Policy

The Livity School



Approved by: [Name] *Michael Jones* Date: [Date] *07/12/2012*

Last reviewed on: [Date]

Next review due by: [Date]

Contents

1. Aims	3
2. Legislation	3
3. Roles and responsibilities	3
4. Site security	4
5. Fire	5
6. COSHH.....	6
7. Equipment	6
8. Lone working	7
9. Working at height.....	8
11. Off-site visits	8
12. Lettings	8
13. Violence at work	8
14. Smoking.....	9
15. Infection prevention and control	9
16. New and expectant mothers	10
17. Occupational stress	10
18. Accident reporting.....	10
19. Training.....	12
20. Monitoring	12
21. Links with other policies	12
Appendix 1. Fire safety checklist.....	13
Appendix 2. Accident report.....	Error! Bookmark not defined.
Appendix 3. Recommended absence period for preventing the spread of infection	17

1. Aims

The Livity School believes that the prevention of incidents, accidents, injury or loss is essential to the efficient organisation of the school and takes all such steps as are reasonably practicable to meet its responsibility for providing a safe & healthy working & learning environment for staff, pupils and visitors.

Our school aims to:

Provide and maintain a safe and healthy environment

Establish and maintain safe working procedures amongst staff, pupils and all visitors to the school site

Have robust procedures in place in case of emergencies

Ensure that the premises and equipment are maintained safely, and are regularly inspected

2. Legislation

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

[The Health and Safety at Work etc. Act 1974](#), which sets out the general duties employers have towards employees and duties relating to lettings

[The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees

[The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training

[The Control of Substances Hazardous to Health Regulations 2002](#), which require employers to control substances that are hazardous to health

[The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive and set out the timeframe for this and how long records of such accidents must be kept

[The Health and Safety \(Display Screen Equipment\) Regulations 1992](#), which require employers to carry out digital screen equipment assessments and states users' entitlement to an eyesight test

[The Gas Safety \(Installation and Use\) Regulations 1998](#), which require work on gas fittings to be carried out by someone on the Gas Safe Register

[The Regulatory Reform \(Fire Safety\) Order 2005](#), which requires employers to take general fire precautions to ensure the safety of their staff

[The Work at Height Regulations 2005](#), which requires employers to protect their staff from falls from height

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

3. Roles and responsibilities

3.1 The local authority and governing board

Lambeth has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the school's governing board.

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

Health & Safety is everybody's responsibility and we must all be continuously aware of our own safety and the safety of others in everything we do. It is the responsibility of all the staff to notify the Headteacher of any health & safety issues and to remain vigilant while on the school premises. Health & Safety standards should enhance the potential range of activities and not curtail them.

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 Assistant Headteacher assumes the above day-to-day health and safety responsibilities.

3.3 Health and safety lead

The nominated Health and Safety Lead is Klare Ng, School Business Manager.

3.4 Staff

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

Staff will:

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

3.5 Pupils and parents

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

3.6 Contractors

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

4. Site security

Michael Adjei-Twumasi, Premises Assistant 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.

The Premises Staff, Michael Adjei-Twumasi along with "Engie" are key holders and will respond to an emergency. The School Business Manager and Headteacher also hold Keys in case of 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 buzzer.

Fire alarm and Sprinkler testing takes place weekly.

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

The school has a sprinkler system - Fire extinguishers are placed in kitchen and in the school minibus and may be used by staff trained in their operation and who are confident they can use them without putting themselves or others at risk - the fire marshals.

Staff and pupils will congregate at the assembly points. These are at the front of the school in front of the cycle sheds.

Class teachers will take a register of pupils, which will then be checked against the attendance register of that day

The Headteacher or Assistant Head will check all staff and pupils are out of the building.

Staff and pupils will remain outside the building until the Headteacher / Deputy or emergency services say it is safe to re-enter

In the event of the Fire alarm sounding

Staff:

DO evacuate the building with the group of pupils you are working with

DO go directly to your assembly point where a roll call will be made.

DO close all doors behind you as you leave

DO follow instructions given to you by Teaching Staff or Fire Wardens. Failure to do so will be considered a serious matter, and may be dealt with under the School's Disciplinary Procedures.

DO NOT stop to retrieve personal items

DO NOT stop or take detours, to meet with friends. If you are concerned about the whereabouts of a person or are aware of the location of someone who requires more assistance inform the nearest Fire Warden

DO NOT re-enter a building whilst the alarm is still sounding

Fire Warden should do sweeps

Fire Wardens A or those deputising for them go to the two fire safe lifts at either end of the building and turn the Key to set the lifts into fire evacuation mode. Then leave the building going to the lift exits to assist staff and pupils leaving the lifts.

Fire Warden B to coordinate the 2nd floor Evacuation of EY's pupils and do a sweep of rooms on second floor

Fire Warden C to sweep and assist with evacuation of 1st floor Corridor

Fire Warden D to sweep the ground floor and assist with the evacuation of the pool if it is in use.

Administrative Staff:-

Senior Admin Officer to collect the Red Bag – consisting of staff and pupil's contact details and mobile phone.

Receptionist/Admin Assistant to remain to accept phone call from - The Alarm Monitoring Company informing them of the emergency situation before evacuating

Head will instruct one of the SLT members to collect the Rescue medication for pupils in a Red Bag and evacuate.

The Premises Assistant or those deputising will check the fire alarm panel and reset the alarm.

A fire safety checklist can be found in appendix 1.

6. COSHH

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

Chemicals

Products containing chemicals

Gases – O₂

Germs that cause diseases.

Medical Waste

Control of substances hazardous to health (COSHH) risk assessments are completed by the manufacturer of chemicals. This Risk Assessment is 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 and waste disposed of appropriately. For example - Pool Chemicals are storage separately in a locked chemical storage cabinet. Oxygen is stored in a locked cabinet in the nurse's office. All medical waste is placed in yellow disposal bags and collected separately from general rubbish and disposed of appropriately.

Appropriate signage is displayed, 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 is 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

Contractor PRIMEC visits the school to conduct legionella testing on a monthly basis. Their engineers are responsible for ensuring that the identified operational controls are conducted and recorded. This record is handed to the Premises Assistant monthly.

This risk assessment is reviewed every month and will be changed when required by PRIMEC if changes have occurred to the water system and/or building footprint.

The risks from legionella are mitigated by the following: in place e.g. temperature checks, heating of water, disinfection of showers, running taps infrequently used and performing mixing valve checks. These are carried through by premises staff.

6.3 Asbestos

- **The school is newly built and does not contain Asbestos**

7. Equipment

All equipment and machinery is maintained in accordance with the manufacturer's instructions. In addition, maintenance schedules outline when extra checks should take place

When new equipment is purchased, it is checked to ensure that it meets appropriate educational standards

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

7.1 Electrical equipment

All staff are responsible for ensuring that they use and handle electrical equipment sensibly and safely

Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them

Any potential hazards will be reported to premises staff 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) is 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 other than those devised to be used in the pool area

Maintenance, repair, installation and disconnection work associated with permanently installed or portable electrical equipment is only carried out by a competent person

7.2 PE equipment

Pupils are taught how to carry out and set up PE equipment safely and efficiently. Staff check that equipment is set up safely

Any concerns about the condition of the gym floor or other apparatus will be reported to the premises staff

7.3 Display screen equipment

All staff who use computers daily as a significant part of their normal work will have a display screen equipment (DSE) assessment carried out. 'Significant' is taken to be continuous/near continuous spells of an hour or more at a time

Staff identified as DSE users are entitled to an eyesight test for DSE use upon request, and at regular intervals thereafter, by a qualified optician (and corrective glasses provided if required specifically for DSE use)

7.4 Specialist equipment

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

8. Lone working

Lone working may include:

Late working

Home or site visits

Weekend working

Premises staff 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 premises staff 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, and a safety harness must be worn at all times on the roof area.

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

Refer to the school's Manual handling Policy

11. Off-site visits

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

Risk assessments will be completed where off-site visits and activities require them

All off-site visits are appropriately staffed

Staff will take a school mobile phone, a portable first aid kit, information about the specific medical needs of pupils along with the parents' contact details

There will always be at least one first aider on school trips and visits. There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, for the Early Years Foundation Stage.

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

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

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, 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

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

Spillage kits are available for blood spills and vomit

15.6 Laundry

Wash laundry in a separate dedicated facility

Wash soiled linen separately and at the hottest wash the fabric will tolerate

Wear personal protective clothing when handling soiled linen

Bag children's soiled clothing to be sent home, never rinse by hand

15.7 Clinical waste

Always segregate domestic and clinical waste, in accordance with local policy

Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins

Remove clinical waste with a registered waste contractor

Remove all clinical waste bags when they are two-thirds full and store in a dedicated, secure area while awaiting collection

15.8 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

15.9 Pupils vulnerable to infection

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

15.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 3.

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

16. New and expectant mothers

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

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

Chickenpox can affect the pregnancy if a woman has not already had the infection. Expectant mothers should report exposure to antenatal carer and GP at any stage of exposure. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles

If a pregnant woman comes into contact with measles or German measles (rubella), she should inform her antenatal carer and GP immediately to ensure investigation

Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), the pregnant woman should inform her antenatal care and GP as this must be investigated promptly

17. Occupational stress

We are committed to promoting high levels of health and wellbeing and recognise the importance of identifying and reducing workplace stressors and will carry through risk assessments as required.

A confidential call line is in place for Staff to talk to someone regarding their stress. Staff can discuss individual concerns with their line managers or speak to a member of the Senior Leadership Team.

18. Accident reporting

18.1 Accident record

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

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

Information about injuries to pupils will also be kept in the pupil's educational record

Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of

18.2 Reporting to the Health and Safety Executive

The Headteacher 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 Headteacher 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

18.3 Notifying parents

A member of the Senior Leadership team will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

18.4 Reporting to Ofsted and child protection agencies

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

The Headteacher will also notify Lambeth's Safeguarding Childrens Board 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 a variety of different health and safety training as part of their induction process as required. For example manual handling training

20. Monitoring

This policy will be reviewed by the Headteacher and School Business Manager every year.

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 and procedures:

- First aid
- Risk assessments
- Manual handling
- Intimate Care Policy
- Supporting pupils with medical conditions
- Educational Visits
- Supervision

Appendix 1. Fire safety checklist

Issue to check	Yes/No
Are fire regulations prominently displayed?	Yes
Is fire-fighting equipment, including fire blankets, in place?	Yes Blankets in ICT / Kitchen / Food tech Extinguishers in Kitchen School has a sprinkler system throughout
Does fire-fighting equipment give details for the type of fire it should be used for?	Yes
Are fire exits clearly labelled?	Yes
Are fire doors fitted with self-closing mechanisms?	Yes
Are flammable materials stored away from open flames?	Yes
Do all staff and pupils understand what to do in the event of a fire?	Yes
Can you easily hear the fire alarm from all areas?	Yes

Appendix 3



Please Address this Original to:
 Occupational Health & Safety Team
 (OHS Team)
 Resilience: 11th Floor, International House
 Email: CorpHealthandSafety@lambeth.gov.uk
 Fax: 020 7926 6163

Retain a copy on site for 3 years

**URGENT & CLASSIFIED
 ACCIDENT/INCIDENT/ILL
 HEALTH/FIRST AID
 RECORD**

OHS Team (Office Use Only)

Date HSE notified by telephone or e-mail: HSE reference number:

A. Date/Time & Place of Incident

Date of incident:	Time of incident: a.m./p.m.	Date Reported: (if different)
Location and Address of incident:		Where on the premises:

B. Person(s) Ill or Injured or Involved

Surname:	First Name(s):	Male / Female	Date of Birth or Age:
Contact Details:			
Postcode:		Contact Telephone number:	
Status: (Please tick)	LBL Employee <input type="checkbox"/>	Agency <input type="checkbox"/>	Work Experience / Trainee <input type="checkbox"/>
	Student / Pupil <input type="checkbox"/>	Other service user <input type="checkbox"/>	Member of the Public <input type="checkbox"/>
			Other: e.g. contractor <input type="checkbox"/>
Employee Job title (if not an LBL employee give employers name and address):			Normal Place of work:
Department & Business Unit:			

C. Details of Incident or Hazard *(Serious incidents should be reported directly to the OHS Team by telephone ASAP x64700)*

Describe the incident:	Part(s) of the body affected by any injury:
------------------------	---

Describe the Injury, Damage or Hazard:	What caused the injury or damage?
	Was the injured person: <ul style="list-style-type: none"> • Taken directly to Hospital for treatment: Yes/No • Remained in hospital more than 24 hours: Yes/No • Referred to Own Doctor: Yes/No • Referred to Occupational Health: Yes/No
Witnesses to the incident:	
Address:	
First Aid Treatment:	
Name of First Aider:	

D. LBL Employees Only - Lost Time Details

Normal Working Time	Work pattern, e.g. full time, part time etc:	Date of first full day of Absence or Incapacity if absent over 7 days	Date first absent:
*IF THE INJURED PERSON IS LIKELY TO BE ABSENT ON THE SEVENTH DAY FOLLOWING THE INJURY PLEASE IMMEDIATELY NOTIFY THE OHS TEAM BY TELEPHONE, E-MAIL OR FAX AND CONFIRM THE ABSENCE DATES ON THE 8TH DAY OF ABSENCE AFTER THE INCIDENT. TEL: x64700			

E. Management Action

Was the person authorised to be in that place at the time? Yes/No
Are you satisfied that an incident occurred as described in section C? Yes/No (If No - give details)

F. To prevent a recurrence, managers will need to investigate the incident to identify the causes, contributory factors and any remedial action necessary.

The complexity of this will depend on the seriousness/implications of the incident and will also involve examining existing precautions, methods of work, current risk assessments and training/instruction given.Action Taken (Please complete as appropriate for all incidents, e.g. if no action required please indicate this).

Please give brief details of action to be taken to prevent a recurrence:

Name of person making report:

Signature:

Contact Number:

.....

.....

.....

Supervisor's/Manager's Verification of Report (if different from above)

(please include any additional comments here)

Appendix 3. Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from non-statutory guidance for schools and other childcare settings from Public Health England. 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
Athlete's foot	None.
Campylobacter	Until 48 hours after symptoms have stopped.
Chicken pox (shingles)	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. 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.
Cold sores	None.
Rubella (German measles)	5 days from appearance of the rash.
Hand, foot and mouth	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.
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.

Measles	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.
Ringworm	Exclusion not needed once treatment has started.
Scabies	The infected child or staff member should be excluded until after the first treatment has been carried out.
Scarlet fever	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.
Slapped cheek syndrome, Parvovirus B19, Fifth's disease	None (not infectious by the time the rash has developed).
Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
Diarrhoea and/or vomiting (Gastroenteritis)	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. 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. If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.
Cryptosporidiosis	Until 48 hours after symptoms have stopped.

E. coli (verocytotoxigenic or VTEC)	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.
Food poisoning	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).
Salmonella	Until 48 hours after symptoms have stopped.
Typhoid and Paratyphoid fever	Seek advice from environmental health officers or the local health protection team.
Flu (influenza)	Until recovered.
Tuberculosis (TB)	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.
Whooping cough (pertussis)	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.
Conjunctivitis	None.
Giardia	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).

Head lice	None.
Hepatitis A	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.
Hepatitis 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.
Hepatitis C	None.
Meningococcal meningitis/ septicaemia	If the child has been treated and has recovered, they can return to school.
Meningitis	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
Meningitis viral	None.
MRSA (meticillin resistant Staphylococcus aureus)	None.
Mumps	5 days after onset of swelling (if well).
Threadworm	None.
Rotavirus	Until 48 hours after symptoms have subsided.

