



Health and Safety Policy

Evidence of intentions and practice – for the information of staff, governors, parents, LA, OFSTED and DfE.

Prepared by:

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Head teacher

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Statement of Intent

This is a policy statement for the Health and Safety arrangements, and the subsequent implementation of these at Parkstone Primary School.

Aims

We aim to:

- Provide and maintain a safe and healthy environment throughout the school site and safe means of entry and exit from it
- Establish and maintain safe working procedures amongst staff, pupils, volunteers and all those on the school site
- Ensure safe measures of using, storing and transporting articles and substances
- Provide safe systems for the control of noise, toxic and corrosive substances dust and vapours under the schools control
- Formulate effective procedures for use in case of fire and other emergencies and for evacuation on school premises
- Lay down procedures in case of accidents and medical treatments

The Governing Body of Parkstone Primary School will meet its responsibilities under the Health and Safety at Work Act and other health and safety legislation to provide safe and healthy working conditions for employees, and to ensure that their work does not adversely affect the health and safety of other people such as pupils, students, visitors and contractors.

Details of how this will be done are given in this health and safety statement.

The Governing Body will ensure that effective consultation takes place with all employees on health and safety matters and that individuals are consulted before allocating particular health and safety functions to them.

Where necessary the Governing Body will seek specialist advice to determine the risks to health and safety in the establishment and the precautions required to deal with them.

The Governing Body will provide sufficient information and training in health and safety matters to all employees in respect to the risk to their health and safety.

The Governing Body requires the support of all to enable the maintenance of high standards of health and safety in all the schools activities.

This statement includes a description of the establishment's organisation and its arrangements for dealing with different areas of risk. Details of how these areas of risk will be addressed are given in the arrangements section.

Headteacher:

Chair of Governors:

1. Aims

Our school aims to:

- Provide and maintain a safe and healthy environment
- Establish and maintain safe working procedures amongst staff, pupils and all visitors to the school site
- Have robust procedures in place in case of emergencies
- Ensure that the premises and equipment are maintained safely, and are regularly inspected

2. Legislation

This policy is based on advice from the Department for Education on <u>health and safety in schools</u> and the following legislation:

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

The school follows <u>national guidance published by Public Health England</u> when responding to infection control issues.

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

3. Roles and Responsibilities

Board of trustees

The Board of Trustees are strategically responsible for Health and Safety.

The CEO

The CEO has overall responsibility for Health and Safety throughout the Trust and forensuring that the objective of this Health and Safety Policy Statement are implemented.

• The Governing Body

The Governing Body has ultimate responsibility for Health and Safety matters in the school, but will delegate day-to-day responsibility to Sarah Waller, Headteacher.

The Governing Body has 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 Humber Education Trust, 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 Olivia Tullock.

• 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 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 headteachers absence, Jonathan Rogers, Deputy Head assumes the above day-to-day health and safety responsibilities.

• Health and Safety Lead

The nominated health and safety lead is Lynne Warrener School Business Manager. The School Business Manager is to ensure the Health and Safety management system is implemented and maintained.

- Health and Safety on day-to-day basis implementation of Health and Safety procedures, precautions and controls.
- Advise on the application and maintenance of our school Health and Safety Policy arrangements
- Maintain an up-to-date knowledge in matters of legislation and regulations as they apply and affect its Health and Safety Policy

- Advise the Headteacher on any related matters
- Advise Headteacher on training requirements for employees ensuring they are competent to carry out detailed tasks within the parameters of current safety legislation

Our designated Site Manager is Brent Warrener.

The Site Manager:

- He ensures the site is safe for all users.
- He is also responsible for daily checks on site.
- He ensures the site is safe for all staff, pupils and visitors
- He also ensures any maintenance is done promptly

• 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

• 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.

• 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

Scamp security are responsible for the security of the school site out of school hours. They are responsible for the intruder and fire alarm systems.

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.

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 will be contacted. Evacuation procedures will also begin immediately.
- Fire extinguishers may be used by staff only, and only then if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk
- Staff and pupils will congregate at the assembly points. These are on the main playgrounds.
- Class teachers will take a register of pupils, which will then be checked against the attendance register of that day.
- The head teacher 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.

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
- 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 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 or 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 Friday 12th April 2019 by IWS. Brent Warrener is responsible for ensuring that the identified operational controls are conducted and recorded in the schools' water log book.
- This risk assessment will be reviewed every year 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 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 which 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 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 immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed
- 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 efficient. Staff check that equipment is set up safely
- Any concerns about the condition of the gym floor or apparatus will be reported to Brent Warrener

7.3 Display Screen Equipment

- All staff who use computers daily as a significant part of their normal work have a display screen equipment 9DSE0 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 of required specifically for DSE use)
- A DSE self-assessment form will be completed yearly, if a change in circumstances or new member of staff.
- 'Users' shall be entitled to request an appropriate eye and eyesight test. Where 'special corrective appliances' are needed, a special pair of spectacles for display screen work may be prescribed.

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
- Site managers 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 ask to be performed then the task will be postponed until other staff members are available.

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

The loner 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 work.

In addition:

- 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
- Ladders are stored safely by the caretaker and a ladder register is maintained.
- 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 access 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 is clear
- When lifting, ben your knees and keep your back straight, feet apart and angled out. Ensure the load is help close to the body and firmly. Lift smoothly and slowly and avoid twisting, stretching and reaching where practicable

11. Off-Site Visits

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

- Risk assessments will be completed where off-site visits and activities require them
- All off-site visits are appropriately staffed
- Staff will take a school mobile phone, a portable first aid kit, information about the specific medical needs of pupils along with parent's contact details
- There will always be at least one first aider on school trips and visits

12. 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. These must be recorded on CPOMS under the category "violence towards staff". This applies to violence from pupils, visitors or other staff. If an injury is sustained then an accident form must be completed, please refer to section 18.1.

13. Smoking

Smoking is not permitted anywhere on the school premises.

14. 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.

14.1 Handwashing

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

14.2 Coughing and sneezing

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

14.3 Personal protective equipment

- Wear disposable non-powdered vinyl or latex free CE-marked gloves and disposable plastic aprons where there is risk of splashing or contamination with blood/body fluids 9for example, nappy or pad changing)
- Wear goggles if there is risk splashing to the face
- Use the correct personal protective equipment when handling cleaning chemicals

14.4 Cleaning of the environment

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

14.5 Cleaning of blood and body fluid spillages

- Clean up spillages or blood, faeces, saliva, vomit, nasal and eye discharges immediately and wear protective personal 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

14.6 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

14.7 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 sustainability of the animal as a pet

14.8 Pupils vulnerable to infection

Some medical conditions make pupils vulnerable to infections that would rarely be serious in most children. The school will normally have been made aware of such vulnerable children. These children are particularly vulnerable to chickenpox, measles or slapped cheek disease (parvovirus

B19), 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 pneumococcal and influenza.

14.7 Exclusion periods for infectious diseases

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

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

15. New and expectant mothers

Lynne Warrener, School Business Manager, will carry risk assessments out whenever any employee notifies the school that they are pregnant.

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

- Chickenpox can affect the pregnancy if a woman has not already has 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 chicken pox is potentially vulnerable to the infection if they have had 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 or 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
- 16. 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 school for responding to individual concerns and monitoring staff workloads.

If staff are recognised to be suffering with occupational health, the school will risk assess the individual and put in place to control measures to reduce stress. The school uses Occupational Health to support staff who are unable to work. The school has a work-life balance policy which places staff well-being at the centre of our support for staff.

17. Accident/Injury Reporting

17.1 Accident record forms- staff

If a staff member receives an injury as a result of violence from a child or by accident then they must complete an accident form as soon as possible after the accident/injury occurs by the member of staff. As much information as possible will be supplied when reporting an incident.

Accident forms 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.

17.2 Accident forms – child

If a child sustains an injury in relation to a slip, trip, collision or fall, an accident/incident form must be completed.

If a child sustains a serious injury, then an ambulance may be called or a child may be taken to the hospital in a staff car. Where a parent cannot be contacted or cannot get to the school quickly, a member of staff will go to the hospital with the child until the parent is able to be there.

Accident forms 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.

17.3 Reporting to the Health and Safety Executive

Lynne Warrener 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). Lynne Warrener 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
 - o Amputations
 - \circ $\;$ 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 and internal organs
 - Serious burns (including scalding)
 - Any scalping requiring hospital treatment
 - o 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 illnesses, 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 the hospital
- Where something 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
 - o The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here:

How to make a RIDDOR report, HSE

http://www.hse.gov.uk/riddor/report.htm

18. Notifying parents

Parents will be informed 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.

18.1 Reporting to Ofsted and child protection agencies

The headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as it is reasonably practicable, and no later than 1 days after the incident.

The headteacher will also notify Hull Children's Safeguarding Board of any serious accident or injury to, or the death or, a pupil while in the school's care.

19. Training

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

20. Monitoring

The Headteacher, Sarah Waller, will review this policy. At every review, the Local Governing Body will approve the policy.

21. Links with other policies

This health and safety policy links to the following policies:

- First Aid Policy
- Risk Assessments
- Risk Management Policy
- Supporting pupils with Medical Conditions Policy
- Asthma Policy
- Display Screen Policy
- Fire Evacuation Policy
- Food Hygiene Policy
- Educational Visits Policy
- Lone Working Policy
- Work-Life Balance Policy
- Accessibility

Appendix 1. Fire safety checklist

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

Appendix 2. Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from non-statutory guidance for schools and other childcare settings from Public Health England. For each of these infections or complaints, there is further information and 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
Chickenpox (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 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.
Conjunctivitis	None
Diarrhoea and /or vomiting	Children and adults with diarrhoea or vomiting should be excluded until 48 hours after the 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 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 visitor 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.
Flu	Until recovered
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).
Glandular Fever	None, they can return one they feel well.
Hand, foot and mouth	Children are safe to return to school or nursery, as they are feeling better, there is no need to stay off until the blisters have healed.
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 doctor 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.
Head lice	None.
Impetigo	Until lesions have crusted or 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's important to ensure cases are excluded from school during this period.
Meningococcal meningitis	If the child has been treated and 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	None.
Mumps	5 days after onset of swelling (if well).
Ringworm	Exclusion not needed once treatment has started.
Rubella	5 days from the appearance of the rash.
Scabies	The infected child or staff member should be excluded until after the first treatment has been carried out.
Scarlett 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 Scarlett fever at the school or nursery, the health protection team will assist with letters and factsheet to send to parents, carers, or staff.
Slapped cheek	None, (not infectious once the rash has developed.
Threadworm	None.
Tuberculosis	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	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.