



*Children and adults are at the heart of our school;
our school is at the heart of our community.*

Health and Safety Policy

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

Establish a culture where everyone takes responsibility for the safety of themselves and others

Have robust procedures in place in case of emergencies

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

2. Legislation

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

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

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

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

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

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

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

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

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

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

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

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

3. Roles and responsibilities

3.1 The local authority and governing board

Bedford Borough Council 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 Body has the responsibility to ensure that:

- a clear written statement of intent is created which promotes the correct attitude towards safety in staff and pupils;
- responsibilities for health, safety and welfare are allocated to specific people and that these persons are informed of these responsibilities;
- persons have sufficient experience, knowledge and training to perform the tasks required of them;
- clear procedures are created which assess the risk from hazards and produce safe systems of work;
- sufficient funds are set aside with which to operate safe systems of work; ➤ health and safety performance is measured both actively and reactively;
- the school's health and safety policy and performance is reviewed annually;
- new Health & Safety legislation or guidance is recognised and acted on appropriately and that relevant persons attend training where appropriate to enable them to do this.

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

3.2 Headteacher

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

- Implementing the health and safety policy
- Ensuring there are always enough staff to safely supervise pupils
- Ensuring that the school building, premises and equipment are safe and regularly inspected and that relevant documentation is kept
- 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 leads are the Site Agent and Meriel Strange, who are responsible for

- co-ordinating and managing the risk assessment process for the school;
- co-ordinating the termly general workplace monitoring inspections and performance monitoring process;
- making provision for the inspection and maintenance of work equipment throughout the school;
- ensuring that all health and safety documentation is appropriately maintained and available to all employees and inspecting authorities e.g. Ofsted / HSE;
- advising the Headteacher of situations or activities which are potentially hazardous to the health and safety of staff, pupils and visitors;
- ensuring that staff are adequately instructed in health and safety matters in connection with their specific work place and the school generally;
- carrying out any other functions devolved to them by the Headteacher or Governing Body;
- ensuring that unsafe conditions are being reported and dealt with to agreed timescales;
- keeping up to date with new Health & Safety legislation or guidance and attending relevant training where appropriate.

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
- Complete risk assessments for activities that fall outside of 'typical daily activities', such as educational visits, forest school

All staff receive Health and Safety induction training and complete SMARTLOG training at least annually to inform them of the guidelines and requirements for working at height, manual handling and basic Fire safety training.

3.5 Pupils and parents

Pupils and parents are responsible for following the school's health and safety advice, when involved in school business both in and out of school, 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/site agent before starting work. Before work begins the contractor will provide evidence that they have completed an adequate risk assessment of all their planned work.

Contractors are responsible for ensuring that they have adequate insurance to carry out the work for which they have been contracted.

Cleaners are employed through an agency. Their work is overseen by the site agent, who liaises directly with the staff and their employer.

4. Site security

The site agent 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.

CYS are key holders and will respond to an emergency.

CCTV is installed, which can be accessed by the site agent and H&S lead.

Vehicles are only permitted on the school site, under the supervision of a member of staff. Precautions must be made to keep children away from the area, whilst vehicles are moving. They must also be supervised when near a vehicle that is parked.

5. Fire

Emergency exits, assembly points and 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 voice command in some areas of the school and an intermittent alarm in others.

Fire alarm testing will take place weekly, outside of school hours-each Friday morning.

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, which automatically alerts the emergency services. Evacuation procedures will also begin immediately

Fire extinguishers may only be used by individuals who have received appropriate training on how to use them.

Staff and pupils will congregate at the assembly point, on the main playground

Class teachers will take a register of pupils, using the attendance register of that day

The office staff will take a register of all staff and visitors

Staff and pupils will remain outside the building until the emergency services say it is safe to re-enter, or the Headteacher in the case of a drill or false-alarm

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 by the site agent and made available 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. Access to these products is strictly limited and they are always stored securely.

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

We have a policy for Managing Medicines, which outlines the procedures for storing and using potentially harmful drugs. Staff are trained for implementing this policy and all medicines are logged appropriately by the school office. Support is also provided by the school nursing team, if appropriate.

6.1 Gas safety

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

Gas pipework, appliances and flues are regularly maintained

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

6.2 Legionella

A water risk assessment was completed in December 2020 by HBI. The site agent is responsible for ensuring that the identified operational controls are conducted and recorded in the school's water log book

This risk assessment will be reviewed every two years and when significant changes have occurred to the water system and/or building footprint

The risks from legionella are mitigated by: temperature checks, heating of water, disinfection of showers and regular running of all taps.

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. Any faults should be recorded using the local authority_Concerto system (<https://bedford.concerto.co.uk/>) with emergency issues being raised directly with the Property Repairs team, (01234 276763 or 01234 718051) who will create a ticket and provide a reference number. The out of hours service (weekdays between 5pm-8am and weekends) to continue as normal by calling 01234 267422.

When new equipment is purchased, it is checked to ensure that it meets appropriate educational standards. It is also added to the asset register

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

7.1 Electrical equipment

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

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

Any potential hazards will be reported to the site agent 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, arranged by the site agent

All isolator switches are clearly marked to identify their machine

Electrical apparatus and connections will not be touched by wet hands and will only be used in dry conditions

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

7.2 PE equipment

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

Any concerns about the condition of the gym floor or other apparatus will be reported to the site agent and the PE coordinator

7.3 Display screen equipment

All staff who use computers daily as a significant part of their normal work may 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)

Users are directed to www.hse.gov.uk for further information

8. Lone working

Lone working may include:

- Late working
- Home or site visits
- Weekend working
- Site manager duties
- Site cleaning duties
- Working in a single occupancy office
- Potentially dangerous activities, such as those where there is a risk of falling from height, will not be undertaken when working alone. If there are any doubts about the task to be performed then the task will be postponed until other staff members are available.

If lone working is to be undertaken, a risk assessment must be completed in advance. The member of staff should also inform a colleague, friend or family member as to 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 site agent retains ladders for working at height
- Purpose designed stools are available
- 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 relocate 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. Curriculum safety

Risk assessments are completed for activities within the school curriculum that present an increased level of risk. These are agreed by the H&S lead, before the event can take place.

Advisory groups and information is used within different subjects, such as Safer Practice in PE and School Sport, CLEAPSS and DATA, along with local authority guidance.

12. Off-site visits

When taking pupils off the school premises, staff will follow the procedures outlined in the Educational Visits Policy, to ensure that:

- Risk assessments are completed
- 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
- For trips and visits with pupils in the Early Years Foundation Stage, there will always be at least one first aider with a current paediatric first aid certificate
- For other trips, there will always be at least one first aider on schools trips and visits
- Details of the visit have been logged with Evolve, if appropriate
- Visits have been approved by the Educational Visit Coordinator and the Headteacher

13. 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. See the Lettings policy for further details. Those letting the facilities are responsible for ensuring that they have their own public liability insurance.

14. 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 at themselves to the headteacher/assistant headteacher immediately. This applies to violence from pupils, visitors or other staff.

15. Smoking

Smoking is not permitted anywhere on the school premises.

16. Infection prevention and control

We follow national guidance published by Public Health England when responding to infection control issues and encourage staff and pupils to follow this good hygiene practice, outlined below, where applicable.

16.1 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

16.2 Coughing and sneezing

Cover mouth and nose with a tissue

Wash hands after using or disposing of tissues

Spitting is discouraged

16.3 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)

Wear goggles if there is a risk of splashing to the face

Use the correct personal protective equipment when handling cleaning chemicals

16.4 Cleaning of the environment

Clean the environment and equipment, frequently and thoroughly

16.5 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

Make spillage kits available for blood spills

16.6 Laundry

There is a washing machine located in nursery

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

16.7 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

Clinical waste is removed by a registered waste contractor

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

16.10 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.

17. New and expectant mothers

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

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

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

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

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

18. Accident reporting

18.1 First aid

An accident form will be completed as soon as possible after the injury occurs, by the member of staff or first aider who deals with it. These forms are located in the Medical Room. As much detail as possible will be supplied when reporting an accident, before a copy is made – one for the injured person to keep and one that is filed into their school record. The incident is also made in the incident log book, located in the Medical Room

The majority of staff receive first aid training, with all members of Early Years staff completing paediatric first aid and several members of staff completing more extensive training.

Records held in the first aid and accident book will be retained by the school for a minimum of 7 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, before being destroyed.

18.2 Reporting to the Health and Safety Executive

The office 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 office manager will ensure that these are reported to the Health and Safety Executive as soon as is reasonably practicable and in any event within 2 working days of the incident.

Reportable injuries, diseases or dangerous occurrences include: Death

Specified injuries, such as:

- Fractures, other than to fingers, thumbs and toes
- Amputations
- Any injury likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding)
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days
- Where an accident leads to someone being taken to hospital
- Where something happens that does not result in an injury, but could have done
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

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

18.3 Notifying parents

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

18.4 Reporting child protection concerns

The Designated Safeguarding Lead will notify the Integrated Front Door of any serious accident or injury to, or the death of, a pupil in the Early Years Foundation Stage while in the school's care. They will also ensure that Ofsted are informed.

The DSL is also responsible for ensuring that all staff have the relevant and necessary training to ensure that they are able to carry out their duties, with regards Child Protection. This includes being able to report concerns.

19. Training

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

Staff are also involved in the production of risk assessments for aspects of work of which they are part. This may include working with specific pupils, in specific areas or when completing specific activities.

20. Monitoring

This policy will be reviewed by the site agent, in conjunction with the Assistant Headteacher, every two years.

At every review, the policy will be approved by the governing board.

21. Links with other policies

This health and safety policy links to the following policies and documents:

First aid

Child protection

Behaviour

Risk assessments

Supporting pupils with medical conditions

Managing medicines

Fire Safety

Accessibility plan

Appendix 1. 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)	<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>
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 antiTB 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.

Approved by:

Governing Body

Date: 15th May 2023

Next review due by:

May 2024