



Health & Safety Policy

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Statement of Intent

It is our policy to carry out our activities in such a way as to ensure so far as is reasonably practicable, the health, safety and welfare of our employees and all persons likely to be affected by our activities, including the general public where appropriate. We will cooperate and coordinate with partnerships, contractors, sub-contractors & employers in order to pursue our Health and Safety Policy aims.

1. Aims

The GFM aims to:

- provide and maintain a safe and healthy environment
- establish and maintain safe working procedures amongst staff, pupils and all visitors to all of the school and other sites across the Trust
- have robust procedures in place in case of emergencies
- ensure that the premises and equipment are maintained safely, and are regularly inspected
- consult with all staff on matters affecting their health, safety and welfare
- continually develop a safety culture to remove or reduce the possibility of accidents, injuries and ill-health.

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 assess the risks to the health and safety of all their employees.
- *The Management of Health and Safety at Work Regulations 1999*, which require employers to carry out risk assessments, decide 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 Trust follows national guidance published by Public Health England when responding to infection control issues.

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

3. Roles & Responsibilities

3.1 The Trust Board

The GFM Board has ultimate responsibility for health and safety matters in the school, but will delegate day-to-day responsibility to the Executive team and specific staff across each site. The GFM Board has a duty to take reasonable steps to ensure that all staff and pupils are not exposed to risks to their health and safety. This applies to activities on or off Trust premises.

The GFM, as the employer, also has a duty to:

- assess the risks to staff and others affected by school and Trust 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.

3.2 Health & Safety Lead

The nominated Health & Safety Lead is the Trust Health & Safety Manager. The Health & Safety Manager is line managed by a member of Executive to work across Executive and with the school leadership to ensure health and safety across the various sites This involves:

- ensuring that each school building and premises are safe and regularly inspected

- providing up to date and adequate training for school staff
- reporting to the Executive and Trustee Board on health and safety matters
- chairing the Health & Safety Committee meeting termly as a minimum
- ensuring appropriate evacuation procedures are in place and overseeing regular fire drills across each site
- ensuring all risk assessments are completed and reviewed
- Oversight of and support with COSHH & Riddor updates and forms.
- monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment

3.3 Executive / School Leadership

The Executive, Associate Headteacher and school leadership (site dependent) are responsible for health and safety on each school or GFM site on a day-to-day basis. They are supported by the Health & Safety Manager and together provide support to all line managers. This involves:

- implementing the health and safety policy across each site
- ensuring there are enough staff to safely supervise pupils and students
- ensuring that adequate training for school staff has been provided
- reporting to the H&S Committee on health and safety matters and concerns and actions are taken appropriately
- ensuring appropriate evacuation procedures are in place and regular fire drills are held
- ensuring there is a named on-site point of contact and a named Emergency Evacuation Manager at each site who will be the point of contact for the arrival of the emergency services
- ensuring line managers work with staff to complete risk assessments when required
- ensuring health and safety compliance.

3.4 Staff

All GFM staff have a duty to take care of pupils and students in the same way that a prudent parent/carer would do so. Staff will:

- take reasonable care of their own health and safety and that of others who may be affected by what they do at work

- work in accordance with training and instructions and the GFM ethos with health and safety
- inform their line manager of any work situation representing a serious and immediate danger so that remedial action can be taken. In most cases the line manager or member of staff will refer to the Health and Safety Manager
- model safe and hygienic practice for pupils and students
- understand emergency evacuation procedures and regularly familiarise themselves with the procedure to ensure they can be confident in implementing them.

3.5 Pupils, Students and Parents/Carers

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

3.6 Contractors

Contractors will agree on health and safety practices with the Health & Safety Manager and Head of Estates or their designated representative before starting work. Before work begins the contractor will provide evidence that they have completed an adequate risk assessment of all their planned work. This will be recorded on the Trust Asset Management System.

3.7 Site Security

The GFM Estates team are responsible for the security of each site across the Trust, in and out of school hours and the GFM Communities team are responsible for the security of the site during community operating hours including community events. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems.

Kestrel Guard Contractors are key holders to all the Trust sites and will also respond to an emergency out of hours.

4. Fire

Emergency exits, assembly points and assembly point instructions are clearly identified by safety signs and notices. A summary of key procedures are as follows:

- fire risk assessments of the various site premises will be reviewed annually
- new staff will be trained in what to do in the event of a fire during induction. The school operates a flight not fight policy when dealing with a fire

- emergency evacuations are to be carried out and practised once a term if possible and at a minimum, twice a year. See Appendix 3 for further information on evacuation procedures and details of alarms.

The GFM has 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. PEEPS are written for all of the above and their alternative meeting point is on the main playground as required where they will be met by a member of the first aid team for roll call. PEEP's assembly points are found at secondary sites only. All other sites evacuate with their peers to the designated assembly points. See Appendix 3 for further details.

5. Control of Substances Hazardous to Health (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; and germs that cause diseases, such as leptospirosis or legionnaires disease.
- COSHH risk assessments are completed by subject and/or department leaders with the appropriate training 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.
- All hazardous substances are to be stored in the secure and signed storage when not in use which are located within each building. These are to remain locked at all times.
- 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.

5.1 Gas Safety

- Installation, maintenance and repair of gas appliances and fittings will be carried out by a competent Gas Safety registered engineer.
- Gas pipework, appliances and flues are regularly maintained.

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

5.2 Legionella

- A full risk assessment is carried out every three years. The last water risk assessment was completed in 2022 by Hydrotech. The designated Legionella lead in the estates team is responsible for ensuring that the identified operational controls are conducted and recorded in the school's water logbook.
- An interim risk assessment will be carried out when any significant changes are identified with the water system and/or building footprint.
- The risks from legionella are mitigated by the following: staff training, flushing, temperature monitoring, cleaning and defects are to be retained for auditing purposes.

5.3 Asbestos

- Staff are briefed on the hazards of asbestos, primarily at induction, on asbestos awareness and of the procedures to follow if they feel 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 each school site. This is held in the Asset Management System. This can be found in reception or at the contractor's sign-in location at the estates team office.

6. Equipment

- All equipment and machinery must be 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.

6.1 Safe Plant & equipment

- The Head of Estates and nominated estates supervisors will be responsible for identifying equipment / plant needing maintenance

- The Head of Estates will be responsible for ensuring effective maintenance procedures are drawn up and reviewed.
- The Head of Estates will be responsible for ensuring that all identified maintenance is carried out.
- Any problems found with plant / equipment should be reported to the Head of Estates or nominated estates supervisors.
- Designated staff will check that any new plant and equipment meets health & safety standards before it is purchased.
- No unauthorised electrical equipment is to be used on school premises and where appropriate, residual current devices should be used with all electrical equipment.

6.2 PE Equipment

- Pupils/students 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 estates team via the online reporting system or in person.
- PE equipment will be risk assessed and serviced as risk assessment determines.

6.3 Display screen equipment

- All staff who use computers daily as a significant part of their normal work have a display screen equipment (DSE) assessment carried out. 'Significant' is taken to be continuous/near continuous spells of an hour or more at a time.
- Staff identified as DSE users are entitled to an eyesight test for DSE use upon request, and at regular intervals thereafter, by a qualified optician (and corrective glasses provided if required specifically for DSE use).

6.4 Specialist equipment

- Parents/carers are responsible for the maintenance and safety of their children's wheelchairs. In school, staff promote the responsible use of wheelchairs.
- Oxygen cylinders are stored in a designated space, and staff are trained in the removal storage and replacement of oxygen cylinders.

7. 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 to assist.
- If lone working is to be undertaken, a colleague or line manager will be informed about where the member of staff is and when they are likely to return. This should be done in advance if known.
- If working alone cannot be avoided/postponed, the lone worker must have some means of communication i.e. mobile phone, radio/walkie talkie to ask for assistance if the need arises.
- The lone worker will ensure that they are medically fit to work alone.

8. Manual Handling, Working at Height

- Training in 'manual handling' and 'working at height' is available to all GFM Staff.
- Staff must take a sensible approach when considering precautions. Low-risk, relatively straightforward tasks will require less effort when it comes to planning and there may be some low-risk situations where common sense tells you no particular precautions are necessary.
- Specific risk assessments will be undertaken by managers to address any additional risks associated with manual handling and working at height.

9. Off-Site Visits

Please refer to the GFM Trips and Visits Policy.

10. Lettings

This policy also 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. This is administered by the GFM Community team.

11. 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. They will also be required to complete the Violence at Work report form available on the staff shared drive.

12. Smoking

Smoking or vaping in any form is not permitted on any premises throughout the GFM.

13. Infection Prevention & 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.

13.1 Handwashing

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

13.2 Coughing and sneezing

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

13.3 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.

13.4 Cleaning of the environment

- Clean the environment frequently and thoroughly.

13.5 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.

13.6 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.

13.7 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 them in a dedicated, secure area while awaiting collection.

13.8 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/students.
- Supervise pupils/students when playing with animals.
- Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a pet.

13.9 Pupils vulnerable to infection

Some medical conditions make pupils/students vulnerable to infections that would rarely be serious in most children. The Trust and its schools 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.

13.10 Exclusion periods for infectious diseases

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

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

14. New and Expectant Mothers

Risk assessments will be carried out whenever any employee or pupil/student notifies the school or Trust that they are pregnant. Appropriate measures will be put in place to control the risks identified. The Trust will inform all staff when it becomes aware of any risks via the appropriate channels; 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 their 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), they should inform their 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 their antenatal care and GP as this must be investigated promptly.

15. Occupational Stress

We are committed to promoting the well-being and positive health of all in the GFM community. It is the role of the line manager, working with their line managee to provide support, guidance, and signposting to mitigate the risk of pressure building to stress.

Where appropriate, line managers may use risk assessments to identify where pressure may result in stress, with strategies to mitigate these risks.

The GFM has a 'Fair Workload Charter' can be found on the GFM staff drive and in Appendix 5.

16. Accident Reporting

16.1 Accident record book

An accident form will be completed as soon as possible after the accident occurs by the member of staff and their line manager. (who in turn informs their Executive link). An

accident form template can be found in Appendix 2 and is available on the staff shared drive.

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

Information about injuries will also be kept in the pupil/student's record.

Records held in the first aid and accident book will be retained by the GFM 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.

16.2 Reporting to the Health and Safety Executive

The Health and Safety Officer will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Health and Safety Officer 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, including 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 which causes 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](#):

17. Training

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

Staff who work in high-risk environments, such as in science labs or with woodwork equipment, the estates team or staff who work with pupils/students with special educational needs (SEN), are given additional health and safety training.

Any staff who identify a need for training can seek advice from the Health and Safety lead or their subject/department lead for further advice.

18. Monitoring & Reporting

This policy will be reviewed by the Health and Safety Manager and the GFM Executive annually and sent for approval to the GFM Board.

At each meeting of the H&S Committee, the following will be reviewed, evaluated and monitored:

- The Trust central assets register.
- The Trust central maintenance register, to include any maintenance that is out of date plus backlogs.
- Legionella and other external reports as they are done.
- The list of H&S (RIDDOR) reportable incidents.
- Training records of all staff.

Any risks to delivering the requirements of this policy will be raised as a risk on the risk register along with the mitigating actions being taken and reported to the Audit & Risk Committee.

An annual report will be prepared for the Trust Board, highlighting successes and risks.

19. Links with other policies

This Health and Safety Policy links to the following policies which can be found on the Staff Shared Drive:

- Health & Safety Risk Assessment Policy
- Safeguarding and Child Protection Policy & Procedures
- Trips and Visits Policy
- Emergency Evacuation Plan
- Fire Safety Policy
- Pupils with Medical Conditions Policy
- First Aid Policy
- On-Site Security Policy & Procedures
- GFM No Smoking Policy.

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)	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 the 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 factsheets 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 (methicillin resistant Staphylococcus aureus)	None
Mumps	5 days after onset of swelling (if well).
Threadworm	None.
Rotavirus	Until 48 hours after symptoms have subsided.

Appendix 2: Accident report form

 [Copy of Accident Report Form](#)

Appendix 3: Fire / Emergency Evacuation

Please refer to the GFM Fire Safety Policy

Evacuation Drills

The GFM will endeavour to carry out emergency evacuation drills once a term across all sites, but will ensure that at least two will take place across the academic year. The critical 2 periods are as follows:

1. Sometime in the first two weeks of September to enable the new intake of pupils/students and new staff members across all sites to familiarise themselves with the alarm system sounding and the evacuation instructions they are to follow.

2. The period between the start of the Spring term (post-Christmas) and the Easter break.

Alarms & Checks

Depending on the site location then the fire alarm will be either a bell or sounder system which will be heard.

Times of fire alarm weekly checks vary across GFM sites and are carried out by the Estates Team. Current timings are as follows:

07:30 – 08:00 Friday; Bay House

07:30 – 08:00 Friday; Brune Park

07:30 – 08:00 Friday; Gomer Junior

07:30 – 08:00 Friday: Rowner Junior

12:45 – 13:00 Friday; LWS

07:30 – 08:00 Monday; Enterprise Academy

Spring Garden Lane - monthly

Staged Evacuations

The GFM operates different alarm evacuation systems across the Secondary, Junior and SEN sites. These can be summarised as follows:

- At both secondary sites a full evacuation will not take place unless there is a “confirmed fire”. There is a three minute window for the Estates team to confirm there is a fire, or to cancel and reset the fire alarm system.
- At Bay House a staged alarm system is operated. The first bell is a warning bell which is silenced and remains manned until an all clear evacuation call or three minutes waiting time has passed. This is managed by the Estates team who will confirm whether there is a fire, or to cancel and reset the fire alarm system. Upon hearing the second continuous alarm the school implements its emergency evacuation procedures¹.
- At Brune Park, procedures to be followed as above. The alarm/warning bell may sound different to the system at Bay House.
- At the primary phase sites, the evacuation is immediate with staff and students plus any visitors assembled on the playground (Gomer) and back field at (Rowner) awaiting instructions.

¹ Please refer to the Emergency Evacuation Plan for details for procedures to follow.

- At the LWS site the evacuation is immediate with staff and students plus any visitors assembled on the playground awaiting instructions.

Appendix 4: PEEPS (Personal Emergency Evacuation Plan)

Student Plan and Staff Plans are both available on the [GFM Staff Shared Drive](#).

Appendix 5: GFM Fair Workload Charter

 GFM Fair Workload Charter.pdf