



# Health and Safety Policy

(including First Aid, Intimate Care and Bodily Fluids)

Date: July 2020

Review date: July 2021

Approved by the Advisory Board: July 2020

Linked with other policies:

- Admissions
- Behaviour
- Lone Working
- ICT Acceptable Use
- Lockdown and and Evacuation
- Equality

Signed:

## STATEMENT OF ORGANISATION AND ARRANGEMENTS FOR ENSURING HEALTH, SAFETY AND WELFARE

### Part 1: Advisory Board Statement of Intent

Effective health and safety management is integral to delivering our ambition for excellence in education and our performance as a school. Our overall objective is to provide and maintain a safe and healthy environment for our staff and students and others with whom we work.

We will achieve this by:

- Developing and maintaining a positive health and safety culture with an emphasis on continually improving our performance taking into account human and cultural factors
- Ensuring that health and safety management is an integral part of decision making and organisational processes
- Adopting a sensible and proportionate approach to managing risks, with well informed decision making processes for higher risk activities and ensuring a disproportionate amount of time is not spent on trivial or everyday risks
- Providing a safe and healthy working environment for our staff, students and others working in the school
- Ensuring safe working methods are in place and providing safe equipment.
- Communicating and consulting with our staff and their trade union representatives
- Complying with statutory requirements and where possible best practice
- Investigating and learning the lessons from accidents and work related ill health incidents
- Providing effective information, instruction and training to enable our staff to be competent in their roles
- Monitoring and reviewing systems and preventative measures to make sure they are suitable, sufficient and effective
- Ensuring adequate resources are available to fulfil our health and safety responsibilities and objectives
- Working with and monitoring our contractors to ensure consistent and comparable health and safety standards.

We recognise that overall responsibility for health and safety lies with all levels of management having direct responsibility for activities and staff under their control. However, all staff have a legal and moral responsibility to take reasonable care for the health and safety of themselves and for others who may be affected by their acts or omissions.

**Name of Director:** Rachel Smith

**Date:** July 2020

**Review date:** July 2021

## Part 2: Responsibilities and Organisation

### Introduction

To comply with the Advisory Board Statement of Intent the following responsibilities have been assigned:

### The Advisory Board

Responsible for ensuring that suitable organisational arrangements are in place for the management and control of health and safety within the school. In particular, we will ensure that:

- A written policy statement is created and communicated which promotes a positive attitude towards health and safety in staff and students.
- Responsibilities for health, safety and welfare are allocated to specific people and those people are informed of these responsibilities.
- A lead Advisory Board member for health and safety is nominated.
- People 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 allocated to operate safe systems of work.
- Health and safety performance is monitored and targets for improvement are set.
- The school's Health and Safety policy is reviewed at least every two years.
- Our management of health and safety considers the needs of anyone with a protected characteristic under the Equalities Act.

### The Headteacher

Responsible for all staff and activities under their control and will ensure that the requirements of relevant safety policies and procedures are implemented and complied with. In particular, they will: Be fully committed to the Advisory Board's Statement of Intent, ensuring that a positive health and safety culture is demonstrated and promoted through their leadership.

Ensure that appropriate risk assessments are undertaken by competent persons and that suitable control measures are taken on a risk basis to manage the health and safety risks to staff and any other people who may be affected by the school's activities.

- Monitor and review health and safety performance through:
  - Undertaking health and safety inspections of work areas/practices in line with relevant policy
  - Setting health and safety targets and objectives through appraisals and other supervisory reviews
  - Reviewing incidents and accidents
  - Monitoring commissioned and contracted work under their control for compliance
  - Ensure that the management of health and safety in the areas under their control considers the needs of anyone with a protected characteristic under the Equalities Act
- Develop safe systems of work and procedures and ensure that they are implemented
- Ensure prompt action is taken to resolve any situations that may adversely affect the health and safety of staff or other people
- Ensure that they undertake all relevant training and staff are given adequate information, instruction, training and supervision to carry out their duties, paying particular attention to new/inexperienced employees and trainees
- Ensure that all plant and work equipment provided is: selected through a risk assessment process, suitable, properly maintained and subject to all necessary tests and examinations
- Ensure that accidents and incidents (including near misses and violence and aggression) are reported and investigated and the findings acted upon without delay
- Ensure there are meaningful, effective arrangements in place for consulting employees and their trade union representatives on health and safety matters that affect them

- Ensure information that may assist safety representatives in their role is provided to them. When commissioning work through contractors, ensure that they are selected and managed in line with statutory requirements.
- Ensure that they seek timely assistance and advice where expert help is required from the Health, Safety and Well-being team
- Report to the Advisory Board at least annually on the school's health and safety performance.

#### **Lead Advisory Board member for Health and Safety**

The Lead Advisory Board member has the following responsibilities:

- To be fully and visibly committed to the Statement of Intent for health and safety
- To scrutinise and review health and safety performance
- To provide support and challenge to the Headteacher and the Advisory Board in fulfilling their health and safety responsibilities
- To ensure in particular that risk assessments of the premises and working practices are carried out and documented.

#### **Health and Safety Coordinator / Director**

The Health and Safety Coordinator has the following responsibilities:

- To coordinate and manage the annual risk assessment process for the school
- To coordinate performance monitoring processes
- To make provision for the inspection and maintenance of work equipment
- To manage the keeping of records of all health and safety activities including management of building fabric and building services in liaison with NPS and other contractors.
- To advise the Headteacher of situations or activities which are potentially hazardous to the health and safety of staff, students and visitors.
- To ensure that staff are adequately instructed in safety and welfare matters about their specific workplace and the school generally.

#### **Teaching and support staff holding positions of special responsibility**

This includes school support manager, senior teachers

They have the following responsibilities:

- Apply the school's Health and Safety Policy and the relevant health and safety Codes of Practice to their own department or area of work and be directly responsible to the Headteacher for the application of the health and safety procedures and arrangements.
- Carry out regular health and safety risk assessments of the activities for which they are responsible.
- Ensure that all staff they manage are familiar with the relevant health and safety Codes of Practice, for their area of work.
- Resolve health, safety and welfare issues that staff refer to them, or refer to the Headteacher any matters for which they cannot achieve a satisfactory solution within the resources available.
- Carry out regular inspections of their areas of responsibility to ensure that equipment, and activities are safe and record these inspections where required.
- Ensure, so far as is reasonably practicable, the provision of sufficient information, instruction, training and supervision to enable other staff and students to avoid hazards and contribute positively to their own health and safety.
- Investigate any accidents that occur within their area of responsibility.

### **Class Teachers**

Class teachers are expected to:

- Exercise effective supervision of their students, to know the procedures for fire, first aid and other emergencies and to carry them out
- Follow the particular health and safety measures to be adopted in their own teaching areas as laid down in the relevant Codes of Practice
- Give clear oral and written instructions and warnings to students when necessary
- Follow safe working procedures
- Require the use of protective clothing and guards where necessary
- Make recommendations to their Headteacher or manager regarding equipment and improvements to plant, tools, equipment or machinery
- Integrate all relevant aspects of safety into the teaching process
- Report all accidents, defects and dangerous occurrences to their manager.

### **Employee Consultation/Safety Representatives**

The Advisory Board believes that consulting employees on health and safety matters is important in creating and maintaining a safe and healthy working environment.

Safety representatives of trade unions recognised by Norfolk County Council / the Trust will be consulted on all matters of health and safety that may affect staff and on the provision of health and safety information and training. Non-union staff will also be consulted directly.

Before making any decisions which could have health and safety consequences for staff, the Advisory Board will inform safety representatives about the proposed course of action and give them an opportunity to express their views.

### **Staff**

All staff have individual responsibility to take reasonable care for the health and safety of themselves and for others who may be affected by their acts or omissions. In particular, they must:

- Comply with the school's Health and Safety policy and procedures at all times
- Co-operate with managers in complying with relevant health and safety safe systems of work and procedures
- Use all work equipment and substances in accordance with instruction, training and information received
- Wear, use, store, maintain and replace personal protective equipment as appropriate
- Not intentionally misuse anything provided in the interests of health, safety and welfare
- Take part in and contribute to health and safety inspections, risk assessments etc. as appropriate
- Report all accidents (personal injury and vehicle), ill health, incidents of violence and aggression, near misses, hazardous situations, general health and safety concerns, defective equipment or premises
- Attend all training relevant to their role.

### **Students**

Students, allowing for their age and aptitude, are expected to:

- Take personal responsibility for the health and safety of themselves and others
- Observe standards of dress consistent with safety and/or hygiene
- Observe all the health and safety rules of the school and in particular the instructions of staff given in an emergency
- Use and not wilfully misuse, neglect or interfere with things provided for their health and safety.

### **Part 3: Procedures and Arrangements**

The following procedures and arrangements have been adopted to ensure compliance with the Advisory Board's Statement of Intent.

#### **Lead Advisory Board member for Health and Safety**

The lead Advisory Board member with responsibility for scrutiny of health and safety performance is Rachel Smith.

### **Risk Assessment:**

#### **General Risk Assessment**

General Risk Assessment will be coordinated by SENCo following guidance and templates available. They will be responsible for ensuring the actions required are implemented.

#### **Fire Safety**

A fire risk assessment will be carried out and local fire safety procedures developed for the premises by the Headteacher following guidance and templates available from ACE fire.

#### **Manual Handling**

Manual handling risk assessments will be carried out by Caretaker following online training available from High Speed Training.

#### **Computers and Workstations**

Computer and workstation risk assessments will be carried out by the Occupational Therapist.

#### **Hazardous Substances**

Caretaker will identify hazardous substances for which no generic assessment exists in the Codes of Practice mentioned below, following online training available from High Speed Training.

#### **Violence to Staff**

Assessment of the risks of violence to staff will be carried out by the Headteacher. This assessment cross-refers to the school's Behaviour policy.

#### **Lone Working**

Assessment of the risks of lone working staff will be carried out by the Headteacher following and can be found in the Lone Working policy.

#### **Risk Assessment of Curriculum Activities**

Risk Assessments for curriculum activities will be carried out by relevant teachers and overseen by the SENCo.

#### **Caretaking Code of Practice**

Assessment of the risks to Caretakers will be assessed by the Headteacher following the Caretaking Code of Practice guidance available.

#### **Driving for Work**

Assessment of the risks of driving for business will be carried out by the Headteacher.

#### **Handling Money**

Assessment of the risks of handling money (if applicable) will be carried out by the Headteacher.

#### **Home Working**

Assessment of the risks of staff working from home can be found in the Acceptable Use policy

#### **Safe Plant and Equipment**

Plant and equipment will be inspected, maintained and, where necessary, tested by appropriate contractors appointed by the Directors.

Routine local testing of fire alarm call points, flushing of infrequently used water outlets and monthly water temperature monitoring will be carried out by the caretaker.

Any problems or defects regarding plant and equipment should be reported to Caretaker and then to the Headteacher and then to the Managing Director.

## **Information, Instruction and Training**

### **Information and Advice**

A [Health and Safety Law Poster](#) is displayed at: School Office, Headteacher's Office.

Health and safety advice is available from the headteacher/health and safety coordinator

### **Health and Safety Training:**

#### **Induction**

Health and safety induction training will be provided for all new employees and for work experience placement students by headteacher using on line training and staff meetings. This covers the following areas as a minimum:

- Fire arrangements for the workplace, including assembly point, exit routes, fire alarm sounder and specific details as they relate to the premises
- First aid arrangements – first aid contacts and location of first aid equipment
- Details of asbestos containing materials which are relevant to the place(s) of work
- Welfare facilities – toilets, kitchen, rest areas
- Incident reporting requirements
- Display Screen Equipment assessment
- Staff responsibilities (general, specific arrangements such as checking portable electrical equipment using the checklist, responsibility for student safety in lesson planning and delivery).
- Relevant risk assessments which apply to the work and safe working practice
- Arrangements for competency development such as mentoring, job shadowing, training courses and what work tasks cannot be carried out until the required competency level is achieved
- Means to report building defects and Premises Headteacher/line manager information
- Premises security and any lone working requirements
- Student safety and safeguarding.

Short health and safety e-learning modules are provided which cover core subjects including manual handling, display screen equipment and fire. Use of these courses may not necessarily replace the need for staff to attend a formal training course or receive further instruction and information, for example, lifting techniques for manual handling.

Staff and Advisory Board named below have received or will receive health and safety training in the following areas:

#### **Strategic Health and Safety Management and Premises Management Training**

- Health and Safety Awareness for Advisory Board members: Online training
- Health and Safety Management for Headteachers: LA training
- Health and Safety for all staff: On line training
- Premises Management: Nick Dyball:
- General Risk Assessment: Jo Paffett

#### **Curriculum/Subject Specific Health and Safety Training**

##### **Secondary Science**

- CLEAPSS Health and Safety Management for Heads of Science: Mark Pinsent
- CLEAPSS Radiation Protection Supervisor: Mark Pinsent
- Level 2 Award in Food Safety: Elaine Smith, Jayne Senior, Elizabeth Woolnough, Rosemary Price

##### **Primary and Secondary PE and School Sport**

- Risk Management in PE: Nigel McGrath
- Safe Supervision of Swimming: Victory Leisure Centre

### **Occupational Risks**

- First Aid at Work: Claire Boughton and Karen Berryman
- Norfolk Steps training: all staff
- Auto-injector training: all staff
- Nasogastric feeding tube: Bea Gatfield, Karen Berryman, Jo Paffett, Cheryl Parmenter

### **Caretaking/Site Management**

- IOSH Working Safely – Nick Dyball
- Ladder Use and Inspection Training Nick Dyball :
- Health and Safety Workshop (COSHH): Training Nick Dyball

### **Health and Well-Being**

- Health and Safety staff representative: Mark Pinsent
- Well-Being Facilitator: Sylwia Czubaj

### **Training Records and Training Needs Identification**

Health and safety training records are held by: Karla King

Training needs will be identified, arranged and monitored by: Karla King

### **Incident Reporting and Investigation**

All accidents and cases of work-related ill health involving employees (or non employees where the injury is potentially caused by a deficiency in activity, equipment or premises must be recorded. All accidents are investigated and if required LA support sought.

Minor injuries to non-employees (i.e. students and visitors) where first aid is given will be reported on the First Aid Record of Treatment form. These forms are kept in the school office.

Headteacher will investigate all incidents and act on findings to prevent a recurrence.

### **First Aid**

**Named First Aiders** - Claire Boughton and Karen Berryman

### **The Role of the Headteacher/First Aider**

- Ensure all staff are familiar with location of equipment and identity of First Aiders
- Keep records of all first aid trained personnel
- Ensure first-aid kits are regularly checked, replenished and clearly identified
- Ensure equipment is available for mopping up spillages of body fluids
- Ensure accidents and/or injuries are recorded on an Accident/Incident form in accordance with the relevant procedures
- Take charge in situations where personal injury or illness has occurred and where further medical help is needed by acting in accordance with their first aid training

**First-aid does not include the giving of tablets and/or medicines to treat illness.**

### **First-Aid Kits**

First-aid kits should be clearly identifiable with a white cross on a green background, readily accessible and their locations made known by clear signing to employees and other persons who



regularly attend the premises. Kits should be placed conveniently, if possible near to hand washing facilities. The main First Aid Kit at All Saints School is kept in the Medical Room.

First Aid Kits are also available in areas of greater risk: School House Kitchen, Science Room, Staff Kitchen and Staff Room.

A travelling first-aid kit must be kept in minibuses and school cars. A First Aid kit should always be taken on off-site school trips.

Kits should contain a sufficient quantity of first-aid materials, possibly recommended items of supplementary equipment. The use of antiseptics is not necessary for the treatment of wounds. No medication of any kind, for example, aspirin, paracetamol, antiseptic creams, burn sprays, etc., should be kept in first-aid kits nor used as a form of first-aid.

First aid boxes are kept at: First Aid room, Kitchens, Science room and in vehicles

### **Allergic Reactions to Plasters**

Plasters are safe provided that they are not used on persons who may suffer an allergic reaction to certain types of plaster. Before plasters are used, first-aiders should establish whether the person requiring treatment has any such allergy. This information is provided by parents at the beginning of each academic year on the Student Information Form which is kept in the front of each student file in the school office. If the person has such an allergy an alternative dressing, i.e. a non-allergic plaster or dressing, should be used.

Persons who have no allergy to plasters can, of course, be treated with any kind of appropriate plaster (fabric or waterproof type) from the first-aid kit supply. Plaster on a continuous roll or strip should not be used because of the risk of cross infection.

### **Cleaning Up Body Fluids**

Any spilt blood or other body fluids should be cleaned up using the BIOHAZARD SPILLAGE CLEAN UP KITS in the Medical Room and Staff Kitchen.

Manufacturers' instructions must be followed whilst using these products. Protective clothing, (e.g. Latex gloves, an apron) must be worn to prevent contamination.

### **Waste Disposal**

Any waste created by the administration of First-Aid, for example, blood stained dressings, gauzes, plasters etc., is classified as 'Clinical Waste' but these small quantities of such waste can be disposed of through the normal waste disposal arrangements from the premises.

Protective latex gloves must be worn at all times when dealing with any injury where there may be a loss of blood or body fluid to protect the First Aider from contamination and the possible risk of contracting HIV or Aids.

### **Supplementary Equipment**

The following supplementary equipment may be made available if the assessments determine a need and may be kept in or near first-aid kits:

- Splinter forceps
- Disposable gloves
- Stainless steel scissors
- Protective resuscitation aid
- Safalite dressings (also known as Melolite)
- Adhesive tape
- Ice packs
- Eye wash bottles (these are also available in the Science lab.)
- Individually wrapped moist wipes
- Non allergic plasters.

Supplementary equipment may also include, stretchers, blankets, aprons and other protective equipment. Where such equipment is considered necessary it should be stored in the vicinity of first-aid kits or in the first-aid room.

### **Supporting Students with Medical Conditions**

Claire Boughton and Karen Berryman are responsible for the management of administration of medicines to students.

Medication cannot be given to any student without completion of the 'Parental Agreement for Administering Medication' form from their parents or carers. This documentation is kept in the student's main file in the school office. Any medication brought into the school is taken to the school office where it is kept safely secured with clear instructions of how and when the medication should be administered. When medication is administered, by a qualified First Aider, a written record is kept showing:

- Name of medication
- Prescribed amount of medication given
- Time is recorded when the medication is administered
- Initials of member of staff who has administered the medication.

### **Epinephrine auto-injectors**

All staff are informed if any of the students require an epinephrine auto-injector as part of their medical requirements. Permission is sought from the student's parents to enable all staff to receive training from the local Health Authority.

Depending on the age of the student and following discussion with parents, it may be deemed suitable for the student to carry an Epinephrine auto-injector in a safe container in their own bag, thus alleviating additional stress caused in an emergency situation.

An Epinephrine auto-injector clearly labelled with the student's name must be stored in the First Aid Cupboard and must accompany the individual student on any off-site journey, such as leaving the premises for sport, attending college, school day trips or residential trips.

### **Site Security and Visitors**

All visitors must report to reception where they will be asked to sign the visitors book and wear a visitors' badge.

Other arrangements to ensure the security of students and employees on site are: security gates.

### **On-Site Vehicle Movements**

The risks of persons and vehicles coming into contact will be controlled by the following measures:  
Staff measures

### **Selection and Management of Contractors / Construction & Refurbishment works**

Contractors and Construction Projects are selected approved and managed by the Directors .

### **Educational Visits**

Educational visits, including residential visits and any school-led adventure activities, will be organised following guidance produced by the Outdoor Education Advisers Panel and adopted by Norfolk County Council.

### **Emergency Procedures – Fire and Evacuation**

Escape routes are checked by Caretaker: daily

Fire extinguishers are maintained and checked by ACE fire: annually

Alarms are tested Ace Fire and Caretaker: Annually and weekly

Emergency evacuation procedures will be tested once every term.

### **Monitoring**

Routine inspections of the premises to ensure safe working practices are being followed will be carried out by Caretaker and Directors

Inspections of individual departments and specific work areas will be carried out by Heads of Department or nominated staff.

### **Review of Policy**

This policy will be reviewed at least every year.

## **ARRANGEMENTS**

### **Supervision of Students**

**For further information see the Staff Handbook and School Brochure sections on Discipline, Bullying, Sanctions and School Rules.**

These include references to:-

- (a) Commencement/end of the school day (responsibility for students on the premises is only accepted from taxi drop off to taxi pickup;
- (b) Break times and lunch times;
- (c) The movement of students between different parts of the building;
- (d) The action of students in science laboratories, food technology rooms and other practical rooms, including the external sports centres.
- (e) Car parking including arrangements for disabled persons;
- (f) The presence on site of contractors.

## Emergency Procedures

### Illness or Accident

If anyone should become ill or suffer injury as a result of an accident the procedures below should be followed:

- (a) First Aid should be given, but only as far as knowledge and skill permit. The patient should be reassured and, only if absolutely necessary, removed from danger.
- (b) The SCHOOL MEDICAL ROOM is located in the school house near the Headteacher's room and the main office. Claire Boughton and Karen Berryman have first aid responsibilities.
- (c) Transport to hospital. If an ambulance is required, the emergency "999" service should be used. Every effort will be made to contact parents/carers. It may be appropriate in cases of a less severe nature to transport a student to a casualty department/doctors surgery without using the ambulance service but it should be noted that this should always be on a voluntary basis. (If a member of staff uses his/her own car for these purposes he/she must ensure that he/she has obtained specific cover from his/her insurance company).
- (d) No casualty should be allowed to travel to hospital unaccompanied.
- (e) Reporting Accidents to students and non-employees. If taken to hospital immediately after the incident every case of injury or accident no matter how minor must be fully and accurately reported on the appropriate accident form and, where possible, detailed statements should be obtained from witnesses.
- (f) Reporting Accidents to Employees. For employees only, an entry must be made on the incident report forms, which are available on from the school office. All accidents/incidents reported are followed up by either the Headteacher or the Managing Director, by completing the appropriate sections of the forms.
- (g) For all accidents where any person is injured causing an absence in excess of three days, the report must be forwarded immediately to the Health and Safety Executive (HSE) within seven days. For serious injuries reports must be made immediately by telephone to the Departmental Administrator for Accident Reports as all such incidents must be reported by telephone to the HSE without delay. These are the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).
- (h) All first aiders are trained in the use of an auto-injector and have received specialist Diabetic Training.
- (i) Anyone receiving a head injury will be sent home with information leaflet stating the signs and symptoms of further head trauma. (Appendix 6)

## Intimate Care

All Saints School is committed to ensuring that all staff responsible for intimate care of students and young people will undertake their duties in a professional manner at all times.

This school takes seriously its responsibility to safeguard and promote the welfare of the students and young people in its care.

The Directors recognise their duties and responsibilities in relation to the Disability Discrimination Act, which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against. Also that students who require support with toileting and changing also require this care and attention which does not embarrass or cause unnecessary stress or upset to individuals.

We recognise that there is a need for students and young people to be treated with respect when intimate care is given.

No child shall be attended to in a way that causes distress, embarrassment or pain.

Staff will work in close partnership with parents and carers to share information and provide continuity of care; discussion of the Intimate Care procedures and practices are discussed fully with parents/carers and records are kept of when intimate care intervention is required.

### Definition:

Intimate care is defined as any care which involves washing, touching or carrying out a procedure that most students and young people carry out for themselves, but which some are unable to do. Disabled students and younger students with toileting issues may be unable to meet their own care needs for a variety of reasons and will require regular support.

### Our approach to best practice:

- The management of all students with intimate care needs will be carefully planned and fully discussed with parents and carers.
- Staff who provide intimate care are trained to do so (including Child Protection, and Moving and Handling where appropriate) and fully aware of best practice. It is best practice for the adults to always have support when toileting a child; however, this is not always practical within the classroom situation. As the Disabled toilet is situated in the main school corridor a second member of staff will be required. When the medical room is used in the House the Headteacher's office is next door, so a member of the office staff or Head could be the second person. Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible one student will be cared for by one adult with a second adult outside the door for support and safety for the child and member of staff.
- Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.
- There is careful communication with any student who requires intimate care in line with their preferred means of communication to discuss needs and preferences, including which adult will

support them (the majority of the time). At all times the Students will be spoken to and have the situation explained to them.

- Staff will be supported to adapt their practice in relation to the needs of individual students taking into account developmental changes such as the onset of puberty and menstruation.
- Students will be supported to achieve the highest level of independence possible, according to their individual condition and abilities.
- Individual care plans will be drawn up for any student requiring regular intimate care
- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan
- The needs and wishes of Students and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation
- Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day. This information should be treated as confidential and communicated in person, via telephone or by sealed letter.

**Child Protection:**

The Directors and staff of All Saints School recognise that disabled students are particularly vulnerable to all forms of abuse.

- Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.
- If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Lead for Safeguarding.
- If a child becomes distressed or unhappy about being cared for a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.
- Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.
- If a child makes an allegation about a member of staff this will be investigated in accordance with agreed procedures.

## **Body Fluid Spillage**

### **Introduction**

Blood and body fluids (e.g. faeces, vomit, saliva, urine, nasal and eye discharge) may contain viruses or bacteria capable of causing disease. It is therefore vital to protect both yourself and others from the risk of cross infection. In order to minimize the risk of transmission of infection both staff and students should practice good personal hygiene and be aware of the procedure for dealing with body spillages. This information is to be used in conjunction with Public Health England: Guidance on infection control in schools and other childcare settings (September 2014).

There are Body Fluid Disposal Kits available at All Saints School reception, in the First Aid Room and in the Disabled Toilet

Staff are advised to contact the Head of Maintenance so that he can arrange for a member of his team to help to clean the area appropriately, but the initial clean-up of the situation should be carried out by the person(s) who is at the scene of the incident:

### **Body Fluid Spillage Clean-Up Procedure**

1. Cordon off the area until clean-up is completed.
2. Put on disposable gloves from the nearest First Aid kit.
3. Use Biohazard clean up Kits on the affected area and allow the spill to absorb. (These are stored in the medical room and Disabled toilet).
4. Wipe up the spill using these and then place in a bin (which has a bin liner).
7. If the spillage has been quite extensive then the area may need to be closed off until it can be cleaned correctly.
8. The area must be cleaned with disinfectant following the manufacturer's instructions.
9. An appropriate hazard sign needs to be put by the affected area.
10. The area should be ventilated and left to dry.
11. All reusable cleaning equipment needs to be appropriately disinfected according to the manufacturer's instructions.
12. Anyone involved in cleaning up the spillage must wash his or her hands.

### **Please note that:**

- ☑ The bin that has had the soiled paper towels put in needs to be tied up and ideally placed in the yellow bin or double bagged and put in an outside bin.
- ☑ Any article of clothing that has been contaminated with the spill should be wiped clean and then put in a plastic bag and tied up for the parents to take home.
- ☑ Any soiled wipes, tissues, plasters, dressings etc. must ideally be disposed of in the clinical waste bin (yellow bag). If not available then the gloves being used need to be taken off inside out so that the soiled item is contained within them. This can then be double bagged and disposed of appropriately.

### **Fire and Emergency Procedures**

It is the duty of all members of staff to carry out the procedures as set out in the All Saints School Fire Orders and Emergency Procedures and Evacuation Policy Document, prepared by the Headteacher and approved by School Directors: which has been issued to all Staff.



## Review of Emergency Procedures

The Headteacher will arrange for an annual review of the emergency procedures and of the provision of first aid in the school. Where necessary recommendations will be made to the Directors.

## Information about the Arrangements

The Headteacher will ensure that students and staff are familiar with the arrangements set out in this section of the Policy Statement.

## Food Safety

Hazard	Who could be harmed	Risk level	Precautions and control measures
Tripping, falling and slipping	Staff and Students	Medium	<ol style="list-style-type: none"> <li>1. Floor to be dry and cleaned of food and other matter likely to cause slipping.</li> <li>2. Cooking area access only to students engaged in the activity and who are under strict supervision.</li> <li>3. Running, jumping and pushing to be strictly prohibited.</li> <li>4. Wheelchairs and people who are restricted movement to be carefully positioned.</li> <li>5. Table heights to be appropriate to student height.</li> <li>6. Students never to stand or kneel on chairs or stools.</li> </ol>
Food contamination caused by clothing	Staff and Students	Low	<ol style="list-style-type: none"> <li>1. All participants to wear a clean apron reserved solely for food preparation – rolled up sleeves</li> <li>2. Staff/students PVC - coated aprons cleaned with hot, soapy water before and after use.</li> <li>3. Aprons put on only in the cooking area and removed when leaving it for any purpose.</li> <li>4. Long sleeves to be rolled up, and scarves and other accessories (except for religious head scarf) to be removed.</li> </ol>
Food contamination caused by hair, nail polish, rings and bacteria on hands.	Staff and Students	Low	<ol style="list-style-type: none"> <li>1. Long / medium length hair to fastened back using bands and clips; and wisps to be secured away from face.</li> <li>2. Prior to food handling, hands to be washed, using hot water and soap and dried with paper towels.</li> </ol>
Food contamination caused by cuts, sores, boils and dressings.	Staff and Students	Low to medium	<ol style="list-style-type: none"> <li>1. Blue plasters used to cover cuts and sores.</li> <li>2. More extensive existing injuries must be covered with vinyl or latex (plasters or gloves).</li> </ol>
Food contamination caused by bacteria spread by illness	Staff and Students	Low to medium	<ol style="list-style-type: none"> <li>1. No participant feeling sick or unwell to be permitted to enter the cooking area.</li> <li>2. No participant suffering or recently recovered from sickness, diarrhoea to be permitted to enter the cooking area.</li> </ol>
Food contamination caused by bacteria from equipment and / or surfaces	Staff and Students	Low and medium	<ol style="list-style-type: none"> <li>1. Surfaces to be wiped with a disposable cloth retained solely for the purpose.</li> <li>2. No outdoor / indoor clothing, bags, brief cases, files, books or boxes to be placed on cooking surface.</li> </ol>

			<ol style="list-style-type: none"> <li>3. Cooked raw ingredients to be kept separated, both in storage and in preparation.</li> <li>4. Equipment to be hot washed to remove all food particles and thoroughly dried before storage.</li> <li>5. Chopping boards and especially plastic bowls to be scrubbed with hot water, detergent and air dried.</li> <li>6. Food, cleaning agents and cloths including tea towels never to be stored with equipment.</li> </ol>
Food Storage	Staff and Students	Low to medium	<ol style="list-style-type: none"> <li>1. All foods to be covered to prevent cross contamination.</li> <li>2. Dry goods to be stored in sealed containers and in a clean, dry designated area well away from cleaning agents, paints, stationary and other potential contaminants.</li> </ol>
Food contamination contracted through soil or other growing medium.	Staff and Students	Low to medium	<ol style="list-style-type: none"> <li>1. Cooking aprons never to be worn when picking or harvesting produce.</li> <li>2. Hands to be washed thoroughly after picking, harvesting and washing produce.</li> <li>3. Soil and other growing media to be removed by washing prior to food preparation.</li> <li>4. Open wounds to be covered prior to handling soil covered produce.</li> </ol>
Food contamination contracted through waste on table, in bins or on the floor.	Staff and Students	Low to medium	<ol style="list-style-type: none"> <li>1. Waste bins to be lined, full bags to be tied and sealed and disposed of promptly.</li> <li>2. Food waste bins to be washed and disinfected immediately after emptying.</li> <li>3. Accidental spillages of food to be wiped, swept or vacuumed, and the floor washed before and after (never during) cooking activities.</li> <li>4. Bags and outdoor clothing never to be placed on work surfaces.</li> </ol>
Reactions to food, allergic or intolerance	Staff and Students	Medium to high	<ol style="list-style-type: none"> <li>1. All adults, students and visitors to provide detailed information on any known or suspected allergies or intolerance to food stuffs or cleaning agents.</li> <li>2. Alternative foodstuffs may be available for any students with food allergies or intolerances. In some cases, it may be deemed necessary to exclude certain ingredients from the recipes or, in extreme cases, to exclude the participant from the cooking activity – alternative cooking opportunities sought – see allergy lists in HT office.</li> </ol>
Dangers from heat, fire and electrical hazards	Staff and Students	Low to medium	<ol style="list-style-type: none"> <li>1. Flammable materials not to be stored or situated close to cookers.</li> <li>2. Cooker or hob and over to be operated only by adult in charge.</li> <li>3. Emergency evacuation procedure to be in place and understood by all participants.</li> <li>4. Emergency exits to be kept clear or obstruction - free at all times.</li> </ol>

			<p>5. A fire blanket and suitable fire extinguishers to be available at all times.</p> <p>6. Electrical equipment must be certified for safe use by an authorised person or body.</p>
Burns from ovens, equipment liquids or food stuffs	Staff and Students	Low to medium	<p>1. Oven gloves to be used to carry hot food pans / tins.</p> <p>2. Pan handles turned inwards but not over hot hobs.</p> <p>3. Adults only to carry hot liquids. Care where students stir serve hot liquids.</p> <p>4. Hot food and liquids never to be unattended and always placed out of reach.</p> <p>5. Students to be kept well away from cookers and ovens.</p>

Cuts from knives and other equipment including graters	Staff and Students	Medium	<p>1. All sharp knives and other sharp equipment (eg. skewers) to be stored in an appropriate place when not in use – in staffroom</p> <p>2. Knives to be counted out and in. Sharp knives never to be left out during set up preparation, in readiness for lesson or after use.</p> <p>3. Appropriate type and size of knives to be selected for age of students.</p> <p>4. Bridge and claw safe cutting techniques to be taught and supervised.</p> <p>5. Personal Behaviour plans to be considered when using knives – see Headteacher RQ.</p> <p>6. Students to be supervised at all times during all cooking activities.</p>
Cuts or injury from electrical processors and blenders including hand blenders	Staff and Students	Medium	<p>1. Students never to be permitted to handle or operate this type of equipment unsupervised – blenders/smoothie makers require adult to operate.</p> <p>2. Equipment to be used only by competent adults and only following reading of appliance instruction handbook.</p>
Choking on small pieces of food or inhalation of small ingredients	Chiefly Students	Medium	<p>1. Tasting sessions of small pieces of fruit or other small ingredients to be conducted in a calm, unhurried manner and supervised.</p> <p>2. Students to be encouraged to follow adult guidance on tasting and eating slow.</p> <p>3. Students never to eat foods from cupped hand with head thrown back.</p> <p>4. Students to taste and eat food only at the invitation of the adult in charge.</p>

## **CONCLUSION AND REVIEW**

### **Conclusion**

It is the responsibility of everyone to make these arrangements work. This will ensure, as far as is reasonably practicable, that working conditions are safe and that the working life of everyone is accident free.

If an improvement or prohibition notice is served by an enforcement officer (e.g. Factories Inspector or Environmental Health Inspector), The Headteacher should immediately advise The Managing Director. If a prohibition notice is issued with immediate effect the activities specified should cease forthwith.

Any member of staff noticing a failure to comply with this Statement of Organisation and Arrangements or other advice/guidance issued by the Directors or Headteacher in pursuance of the Health and Safety Policy should immediately report the circumstances to The Headteacher. The Headteacher should then initiate appropriate remedial action. If it proves impossible for The Headteacher to resolve the matter he should then report the facts to the Managing Director.

Hazardous situations should also be reported immediately and the same procedure followed. Suggestions by any member of staff to improve standards of health and safety are welcomed by the Headteacher.

Appendix 1 – record of discussion with parents:  
**Intimate Care Guidance - Toileting plan discussion with parents/carers**  
*Record of discussion with parents/carers*

Student's name:..... DoB.....

Date of meeting:.....

Persons present.....

	Details	Action
Working towards independence, e.g. taking student to toilet at timed intervals, rewards		
Arrangements for changing, e.g. who, where, privacy		
Level of assistance needed, e.g. undressing, hand washing, dressing		
Moving and handling needs, e.g. equipment, training needs, hoisting equipment		
Infection control, e.g. wearing gloves, disposal of soiled items		
Sharing information, e.g. rash, infection, family/cultural customs		
Resources needed, e.g. toilet seat, step, creams, disposal sacks, change of clothes, gloves		
Other		

Signed:.....

Appendix 2: Planning

**Intimate Care Guidance - Intimate care checklist (preparation for plan)**

*Planning for intimate care*

Student's name:..... DoB.....

Admission date. ....

	Discussion	Actions
<p><b>Facilities</b></p> <p>Suitable toilet identified? Adaptations required?</p> <ul style="list-style-type: none"> <li>• Changing table/bed</li> <li>• Grab rails</li> <li>• Step</li> <li>• Locker for supplies</li> <li>• Hot and cold water</li> <li>• Lever taps</li> <li>• Mirror at suitable height</li> <li>• Disposal unit/bin</li> <li>• Hoist</li> <li>• Other moving and handling equipment</li> <li>• Emergency alarm</li> <li>• Other</li> </ul>		
<p>Family provided supplies</p> <ul style="list-style-type: none"> <li>• <b>Pads</b></li> <li>• <b>Wipes</b></li> <li>• <b>Spare clothes</b></li> <li>• <b>Other</b></li> </ul>		
<p>School provided supplies</p> <ul style="list-style-type: none"> <li>• Toilet rolls</li> <li>• Antiseptic cleanser</li> <li>• Cloths/paper towels</li> <li>• Soap</li> <li>• Disposable gloves/aprons</li> <li>• Disposal sacks</li> <li>• Bowl/bucket</li> <li>• Milton/sterilising fluid</li> <li>• Other</li> </ul>		

<p><b>Good practice</b></p> <ul style="list-style-type: none"> <li>• Advice sought from Health professionals?</li> <li>• Moving and Handling Co-ordinator?</li> <li>• Parent/carer views</li> <li>• Student's views</li> <li>• How does child communicate?</li> <li>• Agree use of language to be used</li> <li>• Preferences for gender of carer</li> <li>• Training required for staff?</li> <li>• Awareness raising for all staff</li> <li>• Other</li> </ul>		
<p><b>PE issues</b></p> <ul style="list-style-type: none"> <li>• Discreet clothing required?</li> <li>• Privacy for changing?</li> <li>• Other</li> </ul> <p>Specific advice for swimming</p> <ul style="list-style-type: none"> <li>• From parents/carers</li> <li>• From Health professionals</li> <li>• Moving and Handling Co-ordinator</li> </ul>		
<p><b>Support</b></p> <p>Designated staff  Back-up staff  Training for back-up staff  Transport  School visits</p> <p>Toilet management/intimate care plan to be prepared</p> <ul style="list-style-type: none"> <li>• By whom</li> <li>• When</li> <li>• To be reviewed when</li> </ul>		

Appendix 3 – Permission

**Intimate Care Guidance - Permission form**

*Permission for school to provide intimate care*

Student's name:.....

DoB:.....

Parent/Carer name(s):.....

Address:.....

.....

.....

I/We give permission for the school to provide intimate care to my/our child.

I/We will advise the school of anything that may affect issues of personal care (if medication is changed or my child has an infection for example)

I//We understand the procedures that will be carried out and will contact the school immediately if there are any concerns.

Signature:.....

Name:.....

Relationship to child:.....

Date:.....



Appendix 4 – Record of intervention

**Intimate Care Guidance - Recording sheet**

**Record of intimate care intervention**

Child's name..... DoB.....

Name(s) of staff involved.....

Date	Time	Procedure	Signature(s)	Comments

## Appendix 5 – Disability Discrimination and Intimate Care – linked to Equalities Policy

### **Disability Discrimination Legislation**

The Disability Discrimination Act provides protection for anyone who has a ‘physical or mental impairment that has a substantial, long term and adverse effect on his/her ability to carry out normal day to day activities’.

Disabled students in schools will include those with Cerebral Palsy, Muscular Dystrophy, Downs Syndrome, Epilepsy, Diabetes, visual and hearing impairments, ADHD, Autistic Spectrum Disorder, gross obesity and HIV/AIDS amongst many others. Some of these disabled students and young people will have delayed continence as a result of their condition, or may never be able to attain continence.

Schools have a responsibility to meet the needs of students with delayed personal development in the same way that they would meet the needs of students with delayed development in any other area. **Disabled students should not be excluded from any activity due to incontinence, sent home to change, or parents expected to attend school to deal with toileting needs.**

A disabled child must not be put at a substantial disadvantage compared with his non-disabled peers, and the school has a legal duty to make reasonable adjustments to ensure less favourable treatment does not occur.

The Disability Equality Duty requires schools to promote positive attitudes towards, and eliminate harassment of disabled people. Establishing good practice in intimate care procedures will help a school meet its duties in these and other areas of the Duty.

An admission policy that sets a blanket requirement for continence, or any other aspect of development, for all students is discriminatory. Schools should be reviewing all policies and practices to ensure compliance with the law.

## **ADVICE TO PARENTS AND CARERS CONCERNING CHILDREN WITH HEAD INJURIES**

This child has sustained a head injury and following thorough examination we are satisfied that the injury does not appear to be serious. It is expected that the recovery will be rapid and complete.

**Do** expect the child to feel generally miserable and 'off colour'. Do not force them to eat, but make sure he/she has enough to drink.

**Do** expect the child to be more tired than usual. Allow them to sleep if they want to. Just pop in to see them every couple of hours. Do not be confused between normal sleep and unconsciousness – someone who is unconscious cannot be woken up – you need to be satisfied they are reacting normally to you.

**Do** expect the child to have a slight headache.

**Do** keep the child quiet and resting as much as possible. Keep them away from school, discourage active games, watching TV and reading until the symptoms subside.

These symptoms should improve steadily and the child should be back to normal within a few days.

Even after a minor injury, complications may occur, but they are rare.

### **If the symptoms worsen, or if you notice the following signs:**

- Difficulty in waking from sleep
- Appears confused or not understanding what is said to them
- Vomiting
- Complaining of severe headache, or trouble with their eyesight
- Become irritable
- Has any kind of attack which you think is a fit

Then you are advised to:

**CONTACT YOUR DOCTOR OR CONTACT THE ACCIDENT AND EMERGENCY DEPARTMENT  
WITHOUT DELAY**

Registered address: All Saints School (Lessingham) Limited. Company no: 10323174  
Rookery Farm, Reynolds Lane, Potter Heigham, Great Yarmouth NR29 5LY



**Parental agreement for school/setting to administer medicine**

The school will not give your child medicine unless you complete and sign this form, as stated in the Health & Safety Policy.

**Name of School/Setting:** All Saints School, Lessingham    **Date:**.....

**Child's Name:**.....

**Year group:**.....

**Name and strength of medicine:**.....

**Expiry date:** .....

**How much to give (i.e. dose to be given):**.....

**When to be given:**.....

**Any other instructions:**.....

**Number of tablets/quantity \_\_\_\_\_ to be given to school**

**Note: Medicines must be the original container as dispensed by the pharmacy**

Daytime phone no. of parent or adult contact:

Name and phone no. of GP:

Agreed review date to be initiated by [*name of member of staff*]:

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

**Parent's signature:** \_\_\_\_\_    **Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

If more than one medicine is to be given a separate form should be completed for each one.