



**LIONHEART**  
EDUCATIONAL  
TRUST

**HEALTH AND SAFETY POLICY**

**This policy applies to all schools within the  
Lionheart Educational Trust**

**Approved by Trust Board  
January 2025 – January 2027**



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## 1.0 Statement of Intent

- 1.1 As a responsible employer, Lionheart Educational Trust (“the Trust”) which incorporates:
- Beauchamp City Sixth Form
  - Beauchamp College
  - Brocks Hill Primary
  - Broom Leys Primary
  - (The) Castle Rock School
  - (The) Cedars Academy
  - Greenstone Primary
  - Hallam Fields Primary
  - Highcliffe Primary
  - Humphrey Perkins School
  - Judgemeadow College
  - Martin High School
  - Mercia Academy
  - (The) Newbridge School
  - Newhall Junior School
  - Riverside Primary
  - Sir Jonathan North College

Plus and any additional schools joining the Trust during the lifetime of this policy, will honour its legal obligations, in particular the requirements of the Health and Safety at Work Act 1974 and associated regulations and codes of practice.

- 1.2 The Trust recognises and accepts its responsibilities and duties as the employer to conduct its operations in a manner which protects the health, safety and welfare of employees, students, visitors and any persons affected by its activities so far as is reasonably practicable.
- 1.3 In compliance with the Management of Health and Safety at Work Regulations, risk assessments will be undertaken, and arrangements will be made, where significant risks are identified, the necessary preventative and protective measures will be put into place so far as is reasonably practicable using a sensible risk management approach. Every compliance software is used at all Trust schools.
- 1.4 The Trust is committed to the prevention of accidents and ill health.
- 1.5 The Trust will work towards continual health and safety improvement.
- 1.6 To achieve these objectives, we will:
- Conduct all our activities safely and in compliance with legislation and where possible, best practice.
  - Ensure the provision of safe working conditions and safe equipment.
  - Ensure a systematic approach to identify risks is developed and implemented and ensure sufficient resources are allocated to control them.
  - Ensure the provision of suitable information, instruction, training and supervision.
  - Promote a positive health and safety culture that is demonstrated by open communication and a shared commitment to the importance of health, safety and welfare.
  - Promote the principles of sensible risk management.
  - Monitor, review and modify this policy and any arrangements as required.



- 1.7 All of the Trust employees have a responsibility to take reasonable care of themselves and others and to co-operate with their employer to ensure statutory duties and obligations are fulfilled.

## 2.0 The Trust Organisation – Roles and Responsibilities

### 2.1 Background & Context

The Trust is a charitable company operating under Articles of Association and Memorandum of Association signed by the Members.

### Structure & Organisational Responsibilities

- 2.2 The Members have appointed Trustees who are to ensure that the charitable objectives of the Trust are carried out. The Board of Trustees is the corporate body accountable for the overall health and safety performance of all the schools within the Trust.
- 2.3 The Board has appointed the Chief Executive Officer (CEO) who has been delegated responsibility for the executive management and the performance of the Trust and all schools. The Board will determine overarching H&S objectives for the organisation that are aligned to the vision and aims of the Trust.
- 2.4 The Responsibilities are delegated by the Board in line with the Articles of Association and are outlined in the Trust's Scheme of Delegation and/or Controls Matrix and Terms of Reference.
- 2.5 The CEO leads the Trust Executive Leadership Team and will delegate executive management functions to the members of the Trust Executive Leadership Team. The CEO retains accountability to the Trust Board for the performance of the Trust Executive Leadership Team.
- 2.6 Operations Managers report to the Head Teacher and they hold shared responsibility with the Head Teacher for health and safety compliance within their school.

### Trust Organisation Structures

#### Health and Safety Organisation Structure – Operations

### 2.9 Chief Executive Officer (CEO)

The Trust Board has appointed the Chief Executive Officer (CEO) who has delegated responsibility for the executive management and the performance of the Trust and all member schools for health and safety. The CEO will be responsible for:

- Ensuring adequate resource is provided for health and safety.
- Setting clear health and safety values and standards throughout the Trust.
- Consulting with staff, union representatives, safety committees and stakeholders on health and safety matters.
- Ensuring 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.
- Ensuring that risk assessments are undertaken by competent persons and that adequate control measures are implemented to reduce risks so far as is reasonably practicable.
- Ensuring that accidents and incidents (including near misses and violence and aggression) are properly reported and investigated and the findings acted upon without delay.
- The Chief Executive Officer may delegate specific responsibilities to other members of The Trust staff; however, the CEO will still be accountable for ensuring the responsibilities are fulfilled.



## 2.10 Chief Financial Officer (CFO)

The CFO should:

- Establish an annual budget for health and safety for all schools within the Trust.
- Report any shortcomings in health and safety budget to the CEO/Trust Board.
- Produce annual health and safety budget forecast reports and communicate them to the Trust board and CEO.

## 2.11 Chief Operating Officer (COO)

The COO should:

- Ensure all Trust policies reflect the latest health and safety legislation.
- Ensure that all sites correctly implement Trust policies.
- Report annually on health and safety compliance to the CEO.
- Ensure the Trust has access to competent health and safety advice.

## 2.12 Director of Estates / Head of Estates

The Director of Estates/ Head of Estates should:

- Provide health and safety reports to the Trust ACR Committee.
- Establish clear and measurable health and safety aims and objectives.
- Ensure the provision of competent health and safety advice.
- Ensure any health and safety shortcomings are identified and rectified in a timely manner.
- Ensure the health and safety policy and arrangements are reviewed and implemented throughout the Trust.
- Ensure that Trust both building and plant Trust assets are maintained in line with current legislation and statutory requirements.
- Oversee the implementation of the Trust contractor management policy.
- Ensure all accidents, incidents and near misses are investigated and reported to the CEO.
- Implement an internal health and safety auditing program to ensure premises compliance.
- Implement an external health and safety audit program to ensure premises compliance.
- Review termly premises inspections for all schools within the Trust and provide a report to the COO and CEO.
- Ensuring that compliance documentation is up-to-date and readily accessible.
- Ensuring that all sites implement contractors checks to confirm they are competent to carry out their duties and carry out and record contractor inductions.
- Conducting, reviewing, implementing and communicating risk assessments in relation to the activities the staff under their control.

## 2.13 Local Governing Body (LGB)

The LGB have no responsibility for Health and Safety.

## 2.14 Audit, Compliance & Risk Committee (ACR)

The Board Audit, Compliance & Risk Committee is responsible for:

- Establishing clear lines of local accountability for health and safety.
- Periodically assessing the effectiveness of its implementation of the Trust policy and ensuring that the need for any necessary changes are communicated to the Board and Executive Leadership Team.
- Ensuring that responsible staff have access to competent health and safety advice.
- Ensuring the provision of a business continuity plan and SEMT (Senior Emergency Management Team) for each school within The Trust.
- Ensuring that each school allocates sufficient funds for health and safety.



## 2.15 Director of People

The Director of People should:

- Ensure Health and Safety responsibilities are included in job descriptions.
- Assist where necessary in facilitating clear lines of communication between management and employees across the Trust.
- Cooperate and communicate with the CEO to ensure the Trust Health and Safety policy aligns with HR policies.
- Make recommendations in relation to Occupation Health referrals to the CEO/Head Teachers.

## 2.16 Estates Hub Managers

The Trust Estates Hub Managers are delegated the responsibility of overseeing premises management and as it relates to the buildings and other assets ensuring health and safety compliance across the Trust. The Trust Estates Hub Managers are responsible for:

- Ensuring that all premises compliance checks across the Trust are completed within the prescribed timeframe.
- Ensuring that all contractors adhere to the Trust contractor management policy.
- Ensuring all accidents, incidents and near misses are investigated and reported to the Director of Estates.
- Facilitate health and safety audits.
- Undertake termly premises inspections within all schools within the Trust and provide the reports to the Director of Estates.
- Carry out and review relevant risk assessments within the premises department.
- Conducting, reviewing, implementing and communicating risk assessments in relation to the activities the staff under their control.

## 2.17 Trust Head of Catering

The Trust Head of Catering is responsible for catering activities across the Trust. The Head of Catering will:

- Advise the COO and Director of Estates of any health and safety concerns related to property or premises.
- Ensure risk assessments are undertaken across the Trust for activities associated with catering and kitchen work within school kitchens.
- Ensure health and safety information is communicated across the Trust catering team.
- Report accidents, dangerous occurrences and near misses to the Director of Estates.
- Ensure a food safety policy is devised, reviewed and communicated to kitchen staff across the Trust.
- Ensure the provision of adequate PPE for kitchen staff across the Trust. Undertake any training identified by the COO/Head of Estates to enable them to perform their duties at the level of responsibility allocated to them.
- Implement an internal audit system across the Trust school kitchens.
- Implement an external audit system across the Trust school kitchens.
- Provide a termly kitchens/catering health and safety performance report to the COO.

## 2.18 The Executive Principal/Principal/Head teacher

The Executive Principal/Associate Principal/Head of School has been delegated the responsibility of the management of safety and implementation of this policy within The Trust schools. The Executive Principal/Associate Principal/Head of School will implement an occupational health and safety management system to comply with The Management of Health and Safety at Work Regulations 1999. To help achieve this they will:



- Ensure compliance with the Trust schools health and safety policy.
- Make clear any duties in respect of health and safety, which are delegated, to members of staff.
- Make themselves familiar with any documentation and/or instruction referring to the health and safety arrangements for staff, building maintenance or operation of The Trust schools and maintain an up-to-date system of policies, procedures and risk assessments.
- Co-operate and communicate with trade unions and employee health and safety representatives and ensure that all employees are aware of and accountable for their specific health and safety responsibilities and duties set out in Appendix 1.
- In the event of any hazard or risk to health and safety of any persons under their control, take appropriate action to control the hazard/risk.
- Ensure the health and safety policy, procedures and risk management programme are implemented as an integral part of business operational planning and service delivery.
- Co-operate and communicate with the Trust/SLT/CEO/COO.
- Undertake regular monitoring and ensure the provision of adequate resources to achieve compliance.
- Provide a termly health and safety performance report to The Trust/CEO.
- Ensure that local procedures for the selection and monitoring of contractors are in place.
- Take appropriate action under the Trust schools disciplinary procedures against anyone under their control found not complying with health and safety policies and/or procedures.
- Ensure there is a clear system for reporting accidents and incidents.
- Facilitate health and safety audits.

2.19 In addition to their statutory duties, the Executive Principal/Associate Principal/Head of School and teachers have a common law duty of care for pupils which stems from their position in law “in loco parentis”.

2.20 They may delegate various health and safety responsibilities through their respective hierarchies. However, where responsibility is delegated, sufficient resources and authority should be allocated to ensure that these responsibilities can be effectively and efficiently implemented. Specific duties and responsibilities in relation to specific job roles are set out in appendix 1 of this policy.

### 2.21 Senior Leadership Team

The senior leadership team will:

- Make themselves familiar with and ensure their schools’ compliance with this policy.
- Monitor the effectiveness of this policy, identify any shortcomings within the policy and communicate them to the Head teacher
- Implement and document process for reporting and investigating all incidents, accidents and near misses.
- Provide termly health and safety performance reports to The Executive Principal/Associate Principal/Head of School.

### 2.22 Heads of Faculties/Departments

Heads of faculty/departments at the Trust schools will undertake general responsibility to ensure that all necessary health and safety activities, requirements and standards are undertaken and met within their respective areas of control. This will be done under the direction of the Executive Principal/Associate Principal/Head of School. Any member of staff with departmental/faculty management responsibilities will: -

- Make themselves familiar with and ensure their department complies with this policy, including any procedures, instructions and requirements for safe methods of work.



- Identify new and existing hazards, provide risk assessments, record the significant findings, implement any necessary control measures and review these to ensure that they remain relevant.
- Check and document that the working environment is safe; equipment, products and materials are used safely; that health and safety procedures are effective and complied with and that any necessary remedial action is taken.
- Provide information, instruction, training and supervision for the department staff they are responsible for.
- Complete a health and safety induction checklist for all new employees at the commencement of their employment.
- Report all accidents, incidents and near miss events, undertake an investigation into the cause and take appropriate remedial action to prevent recurrence.
- Be responsible for all aspects of health and safety included in their job description.
- Ensure that all statutory registers and records are retained and maintained.
- Report property defects within their department to the Site Manager/Premises Manager.
- Provide termly health and safety performance reports to the SLT.
- Ensure the provision of adequate PPE free of charge for staff and pupils with their departments.
- Facilitate health and safety audits.

### 2.23 Head of Design, Science and PE

- Ensure a departmental health and safety policy is devised and communicated to all staff concerned.

More specific duties for Heads of Design Technology, Science and PE will be set out in their departmental health and safety policies and within appendix 1 of this policy.

### 2.24 Operations Managers

Operations Managers are responsible for ensuring the day-to-day operational requirements of the health and safety policy are implemented. To achieve this, they will:

- Maintain an up-to-date copy of the health and safety policy together with all associated documentation relevant to the faculty involved.
- Notify the Site Manager/Premises Manager/Premises Officer and/or Head Teacher of any health and safety concerns and any financial implications identified by the risk assessment process.
- Liaise with and report directly to the SLT on matters of health and safety.
- Ensure that all certification and statutory inspections are kept up to date.
- In conjunction with the site manager, investigate accidents, dangerous occurrences and near misses, complete accident reports and escalate these to the Director of Estates and the Head Teacher.
- Facilitate health and safety audits.
- Provide termly health and safety performance reports to the SLT.
- Ensure the school has a Medical Needs Policy.
- Ensure the school has an Off-Sites Visits Policy.
- Ensure resource is allocated to enable statutory inspections, risk assessments, property maintenance and equipment maintenance to take place at the correct intervals and when necessary.
- Ensure the provision of resources for staff health and safety training.
- Establish a health and safety training plan and matrix to identify staff training needs.





## 2.25 Site Manager/Premises Officer

Site Manager/Premises Officer is responsible for day-to-day management of property maintenance and compliance checks. The Site Manager/Premises Officer will be responsible for:

- Having a general responsibility for the application of the school's health and safety policy to their own area of work and are directly responsible to the Director of Estates and Head Teacher.
- Maintaining safe working procedures including (referring to relevant legislation and guidance) arrangements for ensuring so far as is reasonably practicable, the absence of risks to health and safety in connection with the use, handling, storage and transport of articles and substances (e.g. chemicals, boiling water and sharp instruments).
- Carrying out regular health and safety assessments of the activities for which they are responsible, and report to the SLT any defects, which need attention. Monitor their effective implementation by staff under their control.
- Ensuring relevant advice and guidance on health and safety matters is sought, where appropriate
- Advising the SLT on requirements for health and safety equipment and on additions or necessary improvement to plant, tools, equipment or machinery.
- Carrying out compliance checks in accordance with Appendix 1 and job description.
- Liaising with the Head Teacher and/or Operations Manager on property related matters.
- Providing a termly health and safety report for the SLT.
- Maintaining digital compliance and health and safety related documentation.
- Ensuring statutory surveys, risk assessments and reports are organised with competent contractors and complete.
- Conducting contractor induction and recording the process.
- In conjunction with the Operations manager, investigate accidents, dangerous occurrences and near misses, complete accident reports and escalate these to the Director of Estates and the Head Teacher.
- Undertaking any training identified by the Director of Estates to enable them to perform their duties at the level of responsibility allocated to them.

## 2.26 Catering/Kitchen Manager

The Catering Manager is responsible for activities undertaken within the school kitchen and will:

- Take responsibility for the day-to-day management of health, safety and wellbeing within the school kitchen and the activities undertaken by kitchen staff.
- Advise the Site Manager/Premises Officer and/or Head Teacher of any health and safety concerns.
- Provide risk assessments for activities associated with work and relevant employees in the kitchen. Monitor their effective implementation.
- Ensure health, safety and wellbeing information is communicated to catering staff.
- Report accidents, dangerous occurrences and near misses to The Operations Manager.
- Ensure a food safety policy is communicated to kitchen staff.
- Ensure the provision of adequate PPE for staff that they are responsible for.
- Undertake any training identified by the Head of Catering/SLT to enable them to perform their duties at the level of responsibility allocated to them.

## 2.27 All Staff

All employees, agency, peripatetic workers and contractors must comply with the school's health and safety policy and associated arrangements, in addition to any specific responsibilities which may be delegated to them. All staff are required to:

- Take reasonable care for their own health and safety at work and of those who may be affected by their actions or omissions.



- Cooperate with their line manager and senior management to work safely.
- Comply with health and safety instructions and information and undertake appropriate health and safety training as required.
- Not intentionally or recklessly interfere with or misuse anything provided in the interests of health, safety and welfare.
- Report to their manager any health and safety concerns, hazardous condition or defect in the health and safety arrangements and/or workplace.
- Support the Trust schools in embedding a positive safety culture that extends to pupils and any visitors to the site.
- Undertake any training identified by the SLT to enable them to perform their duties at the level of responsibility allocated to them.

## 2.28 Pupils

All pupils are expected to behave in a manner that reflects the Trust school's behaviour policies and are expected to: -

- Take reasonable care for their own health and safety and of their peers, teachers, support staff and any other person that may be at the Trust schools.
- Co-operate with teaching and support staff and follow all health and safety instructions given.
- Not intentionally or recklessly interfere with or misuse anything provided in the interests of health, safety and welfare.
- Report to a teacher or other member of the Trust schools' staff any health and safety concerns that they may have.

## 2.29 Shared site users

Where two or more employers share a workplace, each employer shall cooperate with the other employers concerned to enable them to comply with their duties under health and safety legislation.

All users of the shared site must agree to:

- Co-operate and co-ordinate on health and safety matters.
- Provide information relating to any additional risks or procedures which will be new or unusual to those sharing the site that may arise from their activities.
- Meet the insurance requirements of the Trust school's insurance provider.
- Familiarise themselves with and communicate to their employees/users the Trust school's health and safety arrangements.

The Trust schools will ensure that:

- The premises are in a safe condition for the purpose of use.
- Adequate arrangements for emergency evacuation are in place and communicated.
- Users are consulted on health and safety matters.
- The Trust school's health and safety arrangements are made available to shared users.

## 2.30 Lettings

All Trust schools have a Lettings policy. The policy covers procedures for fire evacuation, security arrangements, the requirements relating to accident, assault and near miss reporting and requirements for the provision of first aid.

Persons/organisations using our sites must agree to:

- Co-operate and co-ordinate with the Trust schools on health and safety matters.
- Agree to the terms of the Lettings policy in relation to health and safety arrangements.



- Provide information relating to any additional risks or procedures which will be new or unusual to those of the Trust schools that may arise from their activities.

All Trust schools will ensure that:

- Premises are in a safe condition for the purpose of use.
- Health and safety arrangements detailed in the Lettings policy are fully explained and communicated to all individuals or groups letting a space/area of the school premises.
- Adequate arrangements for emergency evacuation are in place and communicated.

## 3.0 The Trust Organisational Arrangements for Health and Safety

3.1 The following arrangements will be adopted to ensure that the Trust Board, CEO, CFO, COO and the Principal/Head Teacher fulfil their responsibilities and provide the foundation for securing the health and safety of employees and all users of the site.

### 3.2 Setting health and safety objectives

The Board and the CEO will specifically review progress of health and safety objectives at the termly meeting of the Board ACR Committee. Where necessary health and safety improvements will be identified and included within the Trust annual improvement plan.

### 3.3 Provision of effective health and safety training

The Board ACR Committee will consider health and safety training on an annual basis in line with the Trust Board's health and safety training matrix focussing on mandatory training as a priority.

### 3.4 Provision of an effective joint consultative process

Trust schools have a regular site operations meeting. A standing item on the agenda for this meeting will be site Health and Safety. The Principal/Head Teacher, who will be a member of the operations meeting will ensure that any Health and Safety concerns are considered and addressed within a clear action plan, with identified responsibilities and target dates. All Health and Safety concerns will be escalated to the Director of Estates, the COO and CEO as appropriate (see 3.6 below).

### 3.5 Establishing adequate health and safety communication channels

Communication channels will be established for the exchange of health and safety knowledge and information. Where necessary, these communications will be recorded and include:

- Senior leadership team meetings and staff meetings.
- Site operations meetings.
- Provision of information relating to safe systems of work and risk assessments.
- Training provided.
- Communications with relevant specialist advisors and bodies.

3.6 Where health and safety issues cannot be resolved at local level, they will be escalated through the management structure as appropriate.

### 3.7 Financial resources

The Trust Board along with the CEO and CFO will review the Trust budget to determine, in the light of past performance, if adequate resources are being deployed to ensure adequate health and safety management and control.



### 3.8 Specialist advice/support

The Trust will ensure that access to competent technical advice on health and safety matters is procured to assist the Trust in complying with statutory duties and meeting health and safety objectives; the Trust will do this by;

- Accessing the services of a competent Health and Safety Advisor through the local authority traded service for health and safety.

### 3.9 Audit

Each of the Trust school's health and safety management system will be audited by the local authority Traded Services Health, Safety and Wellbeing Service every two years. The Trust views this process as a positive assessment of our health and safety management system and takes appropriate action to continually improve health and safety within Trust.

- External health and safety audit reports will be delivered to the Trust CEO/ Director of Estates at each individual School for review.

## 4.0 Local Organisational Arrangements

### 4.1 Accident and assaults

All accidents, assaults and near miss incidents will be reported in the accident book or agreed reporting form within 24 hours of occurrence. All incidents should be reported to the Leadership Team, Head of school, CEO, COO and Director of Estates. RIDDOR reportable incidents, as per the HSE's Education Information Sheet No1 (Revision 3) will be reported to the HSE within the required timescales.

4.2 All incidents will be investigated to attempt to identify the root cause: relevant local policies, procedures and risk assessments will be reviewed and revised as required. All premises related issues will be addressed in a timely manner. Any relevant learning from investigations will be communicated to relevant staff, pupils etc.

4.3 Accident, assaults and near miss incidents will be monitored at least termly as part of the site operations meeting. Identification of significant trends or major incidents will be reviewed by the senior leadership team as required with information communicated to the CEO, COO and Director of Estates.

4.4 Accident records will be retained in line with the Trust's Records Management policy.

### 4.5 Contractor management

All Trust schools will comply with the Construction Design and Management Regulations 2015, and the HSE guidance document: HSG159 Managing contractors: A guide for employers. The schools in the Trust ensure that:

- Roles of client, principal designer, designer, principal contractor, contractor are understood and formally allocated.
- Competent contractors are used.
- Clear specifications of works are drawn up by a competent person to include phases of the work, duration, separation of building and school site, delivery times and locations, tapping



into utilities, site security, fire and emergency coordination, fire escape routes, accident reporting etc.

- Pre-start meetings take place to discuss how works will be managed, responsibilities, codes of conduct and to assess new hazards that may be introduced to the site.
- Key contacts are identified.
- Regular update meetings take place throughout any works/projects.
- Works are visually monitored, and any concerns immediately reported.
- Works are signed off and any associated certification and documentation is obtained.
- All staff/ pupils and other users of site remain in a safe environment for the duration of the works.
- All contractors are given access to the asbestos register.
- All contractors to complete a contractor site induction sheet before work can proceed.

#### 4.6 Control of hazardous substances

The schools in the Trust comply with the HSE's approved code of practice Control of Substances Hazardous to Health (L5) relating to the management and control of hazardous substances on site. The schools in the Trust will ensure:

- An inventory of all hazardous substances on site is kept and updated regularly.
- Wherever possible non-hazardous substances are used and if this is not possible the least harmful substance is used.
- A COSHH risk assessment will be complete for all hazardous substances used and shared with relevant staff.
- Wherever possible exposure to hazardous substances is prevented, where exposure cannot be prevented, a risk assessment will be carried out and controls measures implemented.
- Where identified as part of the risk assessment, appropriate PPE will be provided to staff.
- Any requirement for exposure monitoring or health surveillance will be carried out.
- Sufficient information, instruction and training is given to staff to ensure full understanding of the hazards to health posed by substances in the workplace and the importance of control measures provided.
- Training records are maintained for those who receive training.
- Information will also be given to others who may be affected, such as contractors, temporary staff and visitors.
- Only substances purchased through the school's procurement systems can be used on site.
- Substances are stored correctly and those that are no longer used are disposed of as per the substance's safety data sheet.
- COSHH risk assessments are monitored quarterly and reviewed annually.

#### 4.7 Dealing with health and safety emergencies - procedures and contacts

As per legal requirements all dangerous occurrences and near miss incidents that are RIDDOR reportable incidents, will be reported to the HSE within the required timescale.

- 4.8 All incidents will be investigated in an attempt to identify the root cause: relevant local policies, procedures and risk assessments will be reviewed and revised as required. All premises related issues



will be addressed in a timely manner. Any relevant learning from investigations will be communicated to relevant staff, pupils etc.

#### 4.9 Defect reporting

The schools in the Trust have a defect reporting procedure whereby any damage or defect to the premises, equipment or furnishings is reported. Defective equipment is isolated and labelled as defective to prevent use until replaced or repaired. Where premises defects are identified a dynamic assessment is carried out to decide whether an area should be isolated or cordoned off whilst awaiting repair.

#### 4.10 Display screen equipment (DSE)

The schools in the Trust acknowledge that staff who use DSE should have suitable equipment to undertake the tasks that they are required to carry out, knows how to safely use the equipment and have a DSE assessments when requested which is reviewed at suitable intervals. The schools in the Trust ensure that:

- All static workstations used by staff meet the minimum standards required.
- Equipment is maintained in good working condition.
- Staff are aware of best practice in using DSE and issued with relevant information.
- Staff whose roles require significant use of DSE are prioritised for individual assessment.
- Assessments are reviewed at least bi-annually, earlier if there are significant changes to equipment/layout individual health.
- DSE training and assessment is available via LTS Health Safety and Wellbeing Service buy back. This can be access through the SHINE online system. For access, please call 0116 305 5515 <https://go-shine.co.uk/login/index.php>

#### 4.11 Driving

All staff that drive their own cars for work purposes must have a full UK driving licence, business insurance and maintain their vehicle in a road worthy condition. 6 monthly licence and insurance checks are undertaken and documented.

4.12 Any school with a Minibus needs to book any use through the Estates team in the Premises Office. For a member of staff to drive the bus they must have a full clean driving licence with a D1 permission on the licence. The staff member can go on the DVLA website to give permission for a check on their driving licence and then give the code to the Estates team to view the licence online. They must also be in possession of the Midas Minibus proficiency test.

4.13 The day-to-day management of the road worthiness of the minibus is carried out by the driver each day prior to being driven. This includes tyre checks, visual checks on lights, wipers, water, signage, seat belt checks etc. Any faults occurring are quickly remedied either in house or by booking this into the garage. MOT's and servicing of the school vehicles are usually done within the school holidays to minimise disruption of use. If any repairs need to be carried out and the vehicle goes in overnight to the garage, then a hire bus of equal standard is hired for that period and insurance is notified and adjusted to cover this. The school vehicles are fully insured through local authority and have breakdown cover and fuel cards to use at filling stations.



#### 4.14 Electrical systems and equipment

The schools in the Trust maintain and service electrical systems and equipment in line with statutory guidance and best practice. Electrical systems (hard wiring) are periodically inspected every 5 years by a competent contractor and records maintained; any remedial works recommended are acted upon in a timely manner.

4.15 Portable electric appliances have a portable appliance test (PAT) carried out, in line with HSE guidance '*Maintaining portable electrical equipment in low-risk environments*' (INDG236), by a competent contractor with records maintained.

4.16 Formal termly workplace inspections are undertaken whereby all equipment is visually inspected. Staff are instructed to undertake a visual inspection of equipment prior to use and not to use any equipment that appears damaged or defective. The schools in the Trust defect reporting procedure is followed as required.

#### 4.17 Fire safety

The schools in the Trust are committed to providing a safe environment for both staff and pupils. The schools in the Trust manage the risk of fire by ensuring:

- A detailed fire and emergency evacuation plan has been developed that clearly details actions to be taken when a fire is identified or suspected, individual responsibilities and arrangements for safe evacuation, this will include the development of a Personal Emergency Evacuation Plan (PEEP) for any person requiring assistance in an evacuation.
- An annual type 1 and a 5 yearly type 2 fire risk assessment must be in place and reviewed on a regular basis. Actions highlighted in the risk assessments will be completed in order of priority highlighted by the assessors within the assessments.
- Statutory inspections are carried out on all fire related systems and equipment either both by competent contractors and in-house by trained staff.
- All staff receive fire awareness training that is regularly updated, and fire marshals receive role specific instruction.
- A fire drill is undertaken at least termly to practice evacuation arrangements and to ensure that the evacuation procedure is carried out successfully and as expected.
- A fire logbook is kept and maintained.

#### 4.18 First-aid and supporting pupils' medical conditions

Adequate first aid arrangements are assessed, maintained and monitored at the schools in the Trust and for all activities that the schools in the Trust will:

- Ensure the number of first aiders and appointed persons meets recommendations and adequate cover is available to cover for annual leave and unexpected absences.
- Ensure all first aiders and appointed persons hold a valid certificate of competence, the schools in the Trust maintain a register of all qualified staff and will arrange re-training as necessary.
- Ensure that first aid notices are clearly displayed around the schools in the Trust.
- Ensure that sufficient numbers of suitably stocked first aid boxes are available and checked periodically to ensure they are adequately stocked.
- Ensure a suitable area is available for the provision of first aid.



- Ensure that staff are regularly informed of first aid arrangements within the schools in the Trust through induction, teacher training days and the staff handbook.
- Ensure that where first aid has been administered this is recorded in the first aid treatment book.
- Ensure that the correct reporting procedures are followed including those required under RIDDOR regulations.
- Ensure that individual risk assessments have been carried out which consider first aid provision for lone workers and employees who travel in works vehicles that carry passengers.
- Ensure that information, instruction and training will be provided to staff on any specific medical conditions of pupils and the procedures to follow in case of an emergency.
- Ensure that children with medical conditions will be cared for in line with the Medical Needs policy.
- Ensure that medication shall be kept securely in line with the Medical Needs policy.

#### 4.19 Glass & Glazing

The schools in the Trust will comply with the Workplace (Health, Safety and Welfare) Regulations 1992 and the Approved Code of Practice L24 as it relates to glass and glazing

4.20 The schools in the Trust will survey its glass surfaces in doors, windows and door side panels for the presence of safety glass and where appropriate will make remedial actions to install safety glass or film and have it suitably marked to that effect

#### 4.21 Grounds - Safety/Security Safety

The schools in the Trust will ensure that there is safe access and egress from the buildings and grounds including balancing the need for security with the need for emergency escape. The schools in the Trust will ensure that there is a regime for maintaining the grounds, perimeter demarcation (where owned) and equipment e.g. outdoor play equipment.

#### 4.22 Security

Security is reviewed annually The Trust will produce an action plan to address any issues.

#### 4.23 Housekeeping – storage, cleaning & waste disposal

The schools in the Trust will ensure that there is suitable and sufficient storage including systems for ensuring that items are included on an inventory and checked periodically where necessary for safety.

4.24 The schools in the Trust will ensure that there are systems in place for cleanliness, to minimise the accumulation of rubbish, for the removal and disposal of controlled waste and for the cleaning of spills/ wet floors to minimise the risk of slips. The schools in the Trust will ensure that there are suitable and sufficient external waste bins secured from the risks of arson and tampering.

4.25 Where applicable and to accommodate the requirements of environmental legislation the schools in the Trust will arrange for suitable disposal/recycling of relevant items e.g. fluorescent lighting and waste electrical appliances.





4.26 Suitable arrangements will be made for the clearing of snow as part of winter preparedness.

#### 4.27 Jewellery

The schools in the Trust will have their own individual rules and procedures on the wearing of jewellery.

#### 4.28 Lone working

The schools in the Trust will ensure through risk assessment that all staff who work alone are given suitable instruction on lone working procedures including communications, emergency procedures and any restrictions during lone working e.g. work at height.

#### 4.29 Management of asbestos

The schools in the Trust comply with the HSE's approved code of practice *'Managing and working with asbestos, Control of Asbestos Regulations 2012, Approved Code of Practice & Guidance (L143)*. All schools in the Trust are committed to preventing exposure to asbestos fibres to all persons that enter onto its premises. All schools in the Trust have a whole site asbestos 'management survey' (previously known as Type 2 survey) from which a local asbestos management plan (Lamp) has been developed. The Lamp along with the asbestos register will be kept up to date.

4.30 A minimum termly visual inspection of all identified asbestos containing materials (ACMs) that are not encapsulated or in restricted access areas are undertaken and documented; where necessary more frequent checks of ACMs will be undertaken. Any concern relating to known or suspected ACMs are addressed as per the procedures detailed in the schools in the Trust Lamps.

4.31 Prior to any works that will or has the potential to alter the fabric of the building; a 'refurbishment and demolition survey' (previously known as a Type 3 survey) will be procured in order to undertake a comprehensive assessment of the materials being disturbed prior to any works commencing. Where necessary works that are likely to disturb asbestos will be planned so as to avoid disturbance (re-routed) or the asbestos will be removed by competent licensed contractors prior to building works commencing.

4.32 Any changes to the building where asbestos any work on or the removal of asbestos has been carried out will be recorded in the asbestos register and kept with the school's Lamp.

#### 4.33 Moving and handling

The schools in the Trust comply with the HSE's approved code of practice amended). Guidance on Regulations (L23). 'Manual Handling. Manual Handling Operations Regulations 1992 (as amended)

4.34 Within the schools in the Trust there is a variety of moving and handling tasks that may be necessary; this could range from moving files to assisting an individual with mobility issues. The schools in the Trust manage the risk associated with moving and handling tasks by ensuring that:

- Moving and handling is avoided whenever possible.
- If it cannot be avoided, moving and handling is properly planned, has a relevant risk assessment, is carried out by competent staff and carried out in a manner which is, so far as is reasonably practicable, safe.
- Those undertaking specific moving and handling tasks have received appropriate training and training records are maintained.
- Any equipment provided to assist with moving and handling tasks is maintained and serviced in accordance with statutory requirements.



- Any defective equipment is taken out of use until repaired or is replaced.
- An individual risk assessment will be completed for all new or expectant mothers and staff with identified medical conditions that may be affected by undertaking moving and handling tasks, these may result in some moving and handling task being restricted.
- Any accidents resulting from manual handling operations will be investigated to identify root causes and implement additional controls as required.

#### 4.35 Noise

The schools in the Trust will make arrangements for the assessment of risk, protection and other control measures where the noise levels reach the action values as detailed within the Control of Noise at Work Regulations 2005.

#### 4.36 Occupational health services and work-related stress

The schools in the Trust acknowledges that there are many factors both work related and personal that may contribute to staff being absent from work through injury and ill health including stress.

4.37 The schools in the Trust will follow the principles of the HSE guidance '*Managing the causes of work-related stress*' (HSG 218). The following arrangements are in place to locally manage staff health issues:

- Employees are advised that it is their responsibility to inform their line manager or a member of the senior leadership team of any ill health issues.
- An appropriate senior member of staff will meet and discuss the ill health issues with the employee and consider what actions could be taken to support the staff member and where appropriate assist in reducing stress levels.
- The member of staff will be offered a referral to an occupational health professional for advice and support, e.g. counselling, etc.
- The member of staff will be advised that support can also be provided through their trade union.
- A series of regular review meetings will be scheduled to monitor ill health and stress levels where they have been identified.

#### 4.38 Off-site visits including school-led adventure activities

The schools in the Trust have created an Off-Sites visits policy which should be followed by the EVC (Educational Visits Coordinator) and Visit Leaders.

- Risk assessments will be created for all off-site visits by trained and delegated visit leaders.
- The schools in the Trust requests and requires staff to follow the Off-Site visits policy and adopt OEAP National guidance when creating risk assessments for off-site visits.  
<https://oeapng.info/>
- All residential, overseas and adventurous activity visits will be logged on the EVOLVE system. The LTS Health Safety and Wellbeing team duty officer at Leicestershire Traded Services will provide advice via the EVOLVE system.
- [https://evolve.edufocus.co.uk/evco10/evchome\\_public.asp?domain=LeicestershireCountyCouncil](https://evolve.edufocus.co.uk/evco10/evchome_public.asp?domain=LeicestershireCountyCouncil) This link directs to the EVOLVE website. For login enquiries please contact 0116 305 5515.



- Visit Leaders will create risk assessments for visits, the EVC will review the visit forms and risk assessments and the Head Teacher will approve the visit.
- All approvals for off-site visits will be done by the Head Teacher or designated and trained deputy.

#### 4.39 Risk assessment

Risk assessments are undertaken for tasks/activities where hazards have been identified or where there is a foreseeable risk of injury/ill health.

4.40 A system for the development and upkeep of risk assessments will be devised by each School in the Trust. This system will be documented and reported to the Trust.

4.41 Within the schools in the Trust various persons are tasked with the development of risk assessments based on their knowledge, experience and competence (See Appendix 1). Relevant staff will develop the risk assessments prior to consultation with all staff to which they are relevant prior to sign off. Risk assessments are accessible to staff at all times electronically/hard copy via the Trust Shared Drive (L:\).

4.42 New and expectant mothers risk assessments will be conducted in line with HSE Guidance.

4.43 Young persons' risk assessments will be carried out for staff working on site falling within this age range, as applicable.

#### 4.44 Smoking

The schools in the Trust comply with UK law on smoking in both indoor and external spaces. The schools in the Trust have a no smoking policy which extends to the limits of the curtilage of the site. The policy extends to the used of substitute inhalers and all types of vaping devices including e-cigarettes. There is signage on site and the schools in the Trust will ensure that persons seen smoking onsite are instructed not to do so.

#### 4.45 Statutory Inspections

The schools in the Trust ensure that statutory inspections are undertaken at required intervals for all plant and equipment required. A table detailing required inspections, date of last inspection, date of next inspection and who is undertaking the inspection has been developed which is implemented by the Site Manager / Premises Officer and monitored by the health and safety committee.

#### 4.46 Swimming Pool Operating Procedures

The Trust have a separate Policy for Swimming Pools.

#### 4.47 Preventing workplace harassment and violence

The schools in the Trust are committed to providing a safe and secure working and educational environment for staff, pupils and any other persons on its site. Where applicable, in addition to the control measures identified in the site specific lone working risk assessment, the following procedures are in place:

Staff are advised to:

- Avoid confrontation if possible.
- Withdraw from a situation or escalating situation.



- Arrange seating so that a clear escape route from the room to a place of safety is available. Sit near the door or use a room with two doors.
- Contact emergency services, as appropriate.
- Inform the Principal/Head Teacher or a member of the senior management team if confrontation has taken place.

#### 4.48 The schools in the Trust will:

- Ensure the Principal/Head Teacher or member of the senior leadership team to attend the site of an incident on being informed of an incident, if considered necessary.
- Have in place procedures for the reporting of incidents.
- Offer counselling/ support through Occupational Health.
- Debrief individuals following any incident.
- Provide training on how to manage conflict and aggression as required.
- Review the appropriate risk assessments following any incident.

#### 4.49 Vehicles on Site.

The schools in the Trust have various measures in place to control traffic on individual sites. A Traffic risk assessment is completed annually.

#### 4.50 Water hygiene management

The schools in the Trust will comply with the HSE approved code of practice '*Legionnaires' disease - The control of legionella bacteria in water systems' (L8)*.

#### 4.51 The schools in the Trust will:

- Employ an external person with relevant knowledge and competence to obtain initial advice on any necessary actions.
- Employ a competent external contractor to provide a suitable survey/risk assessment periodically as below:
  - Changes to the water system or its use.
  - Changes to the use of the building in which the water system is installed.
  - The availability of new information about risks or control measures
  - the results of checks indicating that control measures are no longer effective.
  - Changes to key personnel.
  - A case of legionnaires' disease/legionellosis associated with the system.
  - If none of the above situations apply a new water hygiene survey/risk assessment will be conducted by a competent contractor every 2 years.
- Address any remedial actions identified by the survey including dead leg removal or drain down in order of priority determined by the survey/risk assessment.



- Employ a competent external contractor to undertake water sampling and routine cleaning, maintenance and disinfection of water systems and thermostatic mixing valves (TMV's) as applicable. TMV's will be serviced in accordance with the manufacturer's instructions or as advised by a competent contractor.
- Ensure regular flushing of little used outlets is completed by a competent individual on a weekly basis.
- Employ a competent person to undertake monthly monitoring of water systems including temperature readings.

#### 4.52 Working at height

The schools in the Trust will follow the principles of the HSE guidance *'The Work at Height Regulations 2005 (as amended) A brief guide' (INDG401)*. The schools in the Trust use a variety of access equipment for working at height tasks including ladders, step ladders and kick stools. The schools in the Trust ensure that:

- Work at height is avoided whenever possible.
- If it cannot be avoided, work at height is properly planned, has a relevant risk assessment, is carried out by competent staff and carried out in a manner which is, so far as is reasonably practicable, safe.
- Those undertaking work at height have received appropriate training and training records are maintained.
- All access equipment (ladders, step ladders, tower scaffolds etc.) is identifiable and inspected as required.
- Any equipment provided to assist with working at height tasks is maintained and serviced in accordance with statutory requirements.
- Any defective equipment is taken out of use until repaired or is replaced.
- An individual risk assessment will be completed for all new or expectant mothers and staff with identified medical conditions that may be affected by undertaking working at height tasks, these may result in some working at height tasks being restricted.
- Any accidents resulting from working at height will be investigated to identify root causes and implement additional controls as required.

#### 4.53 Workplace inspections

The schools in the Trust recognise the importance of undertaking regular formal workplace inspections to ensure that the premises remain a safe working and educational environment for staff and pupils. A formal termly workplace inspection is undertaken with findings documented and any actions allocated with remedial actions. The termly inspection findings are reviewed with actions monitored for close out at the health and safety committee. It is recognised that termly inspections alone will not keep premises safe and there is an expectation that staff will report any defects/damage to premises and equipment as per the defect reporting procedure.

#### 4.54 Monitoring and review

This Health and Safety Policy together with the associated procedures and health and safety performance, will be reviewed by the Trust Board, CEO and the Principal/Head Teacher on a regular basis (every two years as a minimum), or as required.



4.55 In order to substantiate that health and safety standards are actually being achieved, the schools in the Trust will measure performance against predetermined plans and objectives. Any areas where the standards are not being met will require remedial action.

4.56 The schools in the Trust may use different types of systems to measure health and safety performance.

#### 4.57 Active monitoring systems

- Spot checks and termly site inspections will be undertaken.
- Documents relating to the promotion of the health and safety culture will be regularly examined and reviewed.
- Appropriate statutory inspections on premises, plant and equipment will be undertaken.
- Where necessary, health surveillance and environmental monitoring systems will be implemented to check the effectiveness of health control methods and to detect early signs of harm to health.

#### 4.58 Reactive monitoring systems

- Identifying where health and safety standards are not being met, by monitoring for failures in the systems - such as accidents, cases of ill health (work-related sickness), damage to property, etc.

#### 4.59 Reporting and response systems

- Ensuring that monitoring information is received, having regard to situations which create an immediate risk to health or safety, as well as longer-term trends and ensuring remedial action is taken.
- The Trust Board, CEO and School Senior Leadership team will all receive and consider reports on health and safety performance.

#### 4.60 Investigation systems

- Investigations will be implemented for incidents proportionate to the severity of the incident. The investigation will incorporate systems to identify both the immediate and the underlying causes of events.
- Analysing data to identify common features or trends and initiate improvements.
- Where cases of occupational ill-health are to be investigated.
- Where complaints relating to occupational health and safety are to be recorded and investigated.
- Where accidents/incidents and assaults with the potential to cause injury, ill health or loss are to be reported, recorded and appropriately investigated.

#### 4.61 Third Party Monitoring/ Inspection

- The schools in the Trust will be subject to third party inspection and monitoring, as part of Ofsted requirements. Actions arising from third party audit/inspection will be incorporated within the schools in the Trust action plans with appropriate target dates for completion.

#### 4.62 Business Continuity

- The Trust have a separate business continuity plan, this plan will be used during events which have the potential to cause major disruption to our services. Although such events are rare, it



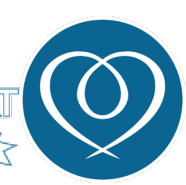
is important that we have in place plans to help us manage and recover from these situations as they arise.

- In the event of a major emergency or disruption, co-ordination and implementation of the business continuity plan is the responsibility of the Executive Team. This group of employees will form the SEMT (Senior Emergency Management Team) in the event of a major emergency or major disruption.
- A copy of the Trust business continuity plan will be distributed to all members of the SEMT and they will ensure that pre-planning is carried out.
- In the unlikely event of major disruption or disaster the SEMT will arrange.
- To meet via Microsoft Teams to co-ordinate and implement the business continuity plan.

The Trust business continuity plan will be reviewed annually, when there is a change in staff, when there is a change in arrangements, following an incident, when there is a significant change to the premises. These reviews will be conducted by the COO.

#### 4.63 Retaining and Maintaining Documentation

- All health and safety related documentation will be stored by the estates team.
- Health and safety related documentation will be backed up/scanned in and stored within the Trust computer system for future reference.



## 5.0 Appendix 1 Table of Delegation of Specific Duties:

<b>Responsibility</b>	<b>Frequency</b>	<b>Delegated to Job Role</b>	<b>Signed</b>
Reviewing Health and Safety Policy	Every 3 years	Director of Estates / Head of Estates	
Digitally Backing up Compliance and Safety Documents	When Created or Received	Estate Managers	
Allocating Budget for Health and Safety	Annually	Director of Finance	
Display Energy Certificate Renewal	As Instructed on Current Certificate	Estate Managers	
Organising Type 2 Fire Risk Assessment	Every 5 Years	Estate Managers	
Conducting and reviewing Type 1 Fire Risk Assessment	Annually	Estate/Site Managers	
Internal Checking of the Fire Alarm Panel	Daily	Premises	
Internal Fire Evacuation Drill Organisation	Termly	SLT/Premises	
Internal Manual Call Point Checks	Weekly on Rotation	Premises	
Internal Emergency Lighting Checks	Monthly	Premises/Contractor	
Internal Extinguisher Checks	Monthly	Premises/Contractor	
Internal Sprinkler System Checks	Weekly	Premises/Contractor	
Internal Fire Door Checks	Monthly	Premises	
Organising Service of The Fire Alarm System	Six Monthly	Estate/Site Managers	
Organising Service of Fire Extinguishers	Annually	Estate/Site Managers	
Organising Service and Maintenance to the Sprinkler System	Annually	Estate/Site Managers	
Organising Service and Maintenance of Emergency Lighting	Annually	Estate/Site Managers	
Organising Service and Maintenance of Air Conditioning Units	6 Monthly	Estate/Site Managers	
Organising Service and Maintenance of Air Handling Units	Annually	Estate/Site Managers	

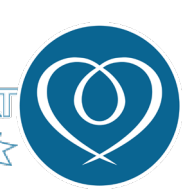




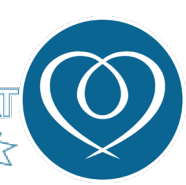
<b>Responsibility</b>	<b>Frequency</b>	<b>Delegated to Job Role</b>	<b>Signed</b>
Reviewing the Emergency Evacuation Plan	Annually	SLT/Premises	
Creating and Reviewing PEEP (Personal Emergency Evacuation Plans)	When Necessary	SLT	
Creating and Reviewing the Winter Gritting Plan	Annually	SLT/Premises	
Winter Gritting Pavements and Carparks	Consult Weather Forecast	SLT/Premises	
Reviewing the Business Continuity Plan and Emergency Procedures	Annually	Exec Team/SLT	
Reviewing the LAMP (Local Asbestos Management Plan)	Annually	Estates/Site Managers	
Organising Asbestos Management Surveys	5 Yearly	Estate Managers	
Monitoring the Condition of Asbestos on the Premises	Termly	Premises	
Organising Water Hygiene Surveys	2 Yearly	Estates/Site Managers	
Flushing of Little Used Outlets	Weekly	Premises	
Organising Service of TMV	Annually	Premises	
Organising Water Tank Cleans	When Necessary	Estate/Site Managers	
Water Temperature Monitoring	Monthly	Premises/Contractor	
Signing Off Water Temperature Monitoring	Monthly	Estate/Site Managers	
Organising Water Heater Service and Maintenance	Annually	Premises	
Organising Water Tank Inspections	Annually	Premises	
Organising Electrical Installations Condition Reports	5 Yearly	Estate/Premises	
Organising PAT (Portable Appliance Testing)	Annually	Estate/Site Managers	
Organising Service of Stage Lighting	Annually	Premises	
Organising Servicing of Gas Boilers	Annually	Estate/Site Managers	
Organising Gas Risk Assessment	Annually	Estate/Site Managers	
Conducting Workplace Inspections	Weekly	Premises	
Conducting Workplace Inspections (SLT)	Termly	SLT	



<b>Responsibility</b>	<b>Frequency</b>	<b>Delegated to Job Role</b>	<b>Signed</b>
Organising Building Condition Surveys	5 Yearly	Estates Managers	
Internal Inspections of Playing Fields and Playground Equipment	Weekly	Premises/PE Staff	
Organising RPII Inspections of Outdoor Play Equipment	Annually	Estate/Site Managers	
Inspecting PE Equipment	Before Use	PE Staff	
Organising External Inspections of PE Equipment	Annually	Estate/Site Managers	
Organising Glazing Surveys	10 Yearly	Estate/Site Mangers	
Procuring and Commissioning Contractors	When Necessary	Executive Team	
Managing and Supervising Contractors	When Necessary	Premises	
Contractor Inductions	When Necessary	Premises	
Internal Inspection of Passenger Lifts and Hoists	Monthly	Premises/Contractor	
Organising Service and Maintenance of Lifts and Hoists used for carrying people	6 Monthly	Premises/Contractor	
Organising Service and Maintenance of The Kiln	Annually	Premises/Contractor	
Organising the Service and Maintenance of Local Extract Ventilation (LEV) Systems e.g. fume cupboards, dust extraction in D&T	14 months	Premises/Contractor	
Organising the Service and Maintenance of Work Equipment	Follow Manufacturer's Instructions	Premises	
Organising the Service and Maintenance of The Kitchen Equipment	Follow Manufacturer's Instructions	Head of Catering	
Organising a Thorough Clean of The School Kitchen	Termly	Premises	
Creating and Reviewing Classroom Risk Assessments	Annually	Premises	
Creating and Reviewing Premises Related Risk Assessments	Annually	Premises	
Creating and Reviewing PE Risk Assessments	Annually	PE Staff	



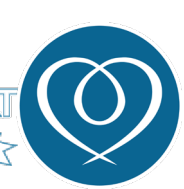
<b>Responsibility</b>	<b>Frequency</b>	<b>Delegated to Job Role</b>	<b>Signed</b>
Creating and Reviewing Design Technology Risk Assessments	Annually	Design Staff	
Creating and Reviewing Science Risk Assessments	Annually	Science Staff	
Creating and Reviewing Other Risk Assessments	Annually	SLT	
Conducting Pregnancy Risk Assessments	When Necessary	HR	
Conducting Return to Work Risk Assessments	When Necessary	HR	
Selecting Staff Health and Safety Training	Review Termly	HR	
Recording Staff Health and Safety Training in a Central Record	When Necessary	HR	
Creating and Reviewing COSHH Risk Assessments for Premises	Annually	Premises	
Creating and Reviewing COSHH Risk Assessments for Substances Used in Classrooms and Offices.	When Necessary	SLT/Premises	
Creating and Reviewing COSHH Risk Assessments for Substances Used by Cleaning Staff	Annually	Premises	
Logging Accidents onto the AssessNet system	When Necessary	SLT	
Reporting RIDDOR	When Necessary	SLT	
Reviewing Accident Statistics	Termly	SLT	
Reviewing the Management of Medications Policy	Annually	SLT	
Reviewing the First Aid Needs Assessment	Annually	SLT	
Checking First Aid Kit Contents	Monthly	SLT	
Checking the Condition of First Aid Facilities	Weekly	SLT	
Reviewing Pupil Individual Care Plans	When Necessary	SLT	
Reviewing Individual Behaviour Plans	When Necessary	SLT	
Creating and Reviewing Off-Site Visit Risk Assessments	When Necessary	SLT	
Approving Off-Site Visits	When Necessary	SLT	
Communicating Emergency Procedures to lettings	When Necessary	Head of Enterprise	



<b>Responsibility</b>	<b>Frequency</b>	<b>Delegated to Job Role</b>	<b>Signed</b>
Emergency Contact during lettings	When Necessary	Head of Enterprise	
Work Experience Co-ordination	When Necessary	Head Teacher	
Organising Service of The School Minibus	Annually	Estate/Site Manager	
Pre-Use/Daily Minibus Driver Checks	Daily / Before Use	Driver	
Driving for Work Drivers Licence and Insurance Checks	6 Monthly	HR	
Organising Tree Surveys	3 Yearly	Premises	
Organising Service/Inspection of The Lightening Protection Rod	11 Monthly	Premises	

Swimming Pool Management Responsibilities:

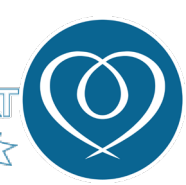
Creating and Reviewing Normal Operating Procedures for The Swimming Pool	Annually	Estates Managers	
Creating and Reviewing Swimming Pool Risk Assessments	Annually	Swimming Pool Staff	
Ensuring Water Samples are Submitted for Bacteria Testing	Monthly	Premises	
Conducting Water PH Testing	3 Times a Day	Premises	
Conducting Deep Cleans of The Swimming Pool Area and Changing Rooms	Termly	Premises	
Organising Service and Maintenance of Pool Plant	Annually	Premises	
Creating and Reviewing an Emergency Action Plan for the Pool	Annually	Estates Mangers	



## 6.0 Appendix 2. Lionheart Educational Trust's Additional Policies and Guidance for reference:

<b>Policy Documents</b>	<b>Location</b>
Off-Site Visits Policy	Shared drive
Management of Medications Policy	Shared drive
Supporting Pupils with Medical Conditions Policy	Shared drive
Lettings Policy	Shared drive / Premises office
Contractor Management Policy	Shared drive / Premises office

<b>Guidance Documents</b>	<b>Location</b>
Accident, Incident and Near Miss Guidance	Shared drive
Asbestos - Information and Guidance	Premises
LAMP Local Asbestos Management Plan	Premises
Schools Gate Safety Guidance	Premises
Blood Borne Viruses & Needle Stick Injury	Shared drive
Notification of Construction Works in Schools	Premises
CDM Guidance	Premises
Challenging Behaviour and Violence at Work	Shared drive
Contractor Management	Premises
COSHH Guidance	Premises
Door Safety in Schools	Premises
Driving School Minibuses Guidance	Shared drive
Driver and Vehicle Safety Guidance	Shared drive
Display Screen Equipment Guidance	Shared drive
Electrical Safety Guidance	Premises
Fire Safety Guidance	Premises



<b>Guidance Documents</b>	<b>Location</b>
First Aid Guidance	Shared drive
Food Safety Information and Guidance	Kitchen office
Glazing - Information and Guidance	Premises
Intimate Care Guidance	Shared drive
lettings Guidance	Premises
Lone Working	Shared drive
Manual Handling	Shared drive
Moving and Handling of People Guidance	Shared drive
Pregnancy	Shared drive
Noise at Work	Shared drive
Outdoor Play Equipment, Outdoor Gyms and Playing Fields Guidance	Shared drive
Risk Assessment Procedure Guidance	Shared drive
Stress Management in Schools Guidance	Shared drive
Supervision of Pupils by Others Guidance	Shared drive
Swimming Pool Safety Operating Procedures	Premises / Pool side
Violence at Work Guidance	Shared drive
Water Hygiene Procedure Guidance	Premises
Winter Gritting & Snow Clearing Guidance	Premises / website
Work at Height Guidance	Premises
Work Equipment Guidance	Premises
Young Persons and Work Experience Guidance	Shared drive

## 7.0 Appendix 3 – Leicestershire Traded Services – Infection Control Blood Borne Viruses Sharps & Needlestick Injuries

# **Infection Control Blood Borne Viruses Sharps & Needlestick Injuries**

## **Information and Guidance**

**Author: LTS Team**

**Reviewed by: SW/LTS HR**

**Issue Number: 5**

**Date Reviewed: 23/06/2023**

**Review Due Date: 23/06/2026**

## Introduction – Infection Control

1.1 This document is designed to offer practical advice to employees and the senior leadership team to enable them to work safely and reduce the risk of infection to themselves and others. It is intended for school / school use.

### 1.2 What is infection control?

- Infection control includes all the behaviours that eliminate or reduce the transmission of infectious disease.
- Infection control is based on job-specific protocols and guidelines. It is maintained by the continuous implementation of such guidelines, regular staff training and the effective supervision of individuals and the environment.
- Communicable or infectious diseases can spread rapidly, particularly in settings deemed as higher potential risk environments.

### 1.3 What are infectious diseases?

- Infectious diseases are conditions that have the potential to be passed from one person to another, from animal to animal, from an animal to a person or from the environment. The infectious agents that cause disease are called pathogens (disease causing). Examples include viruses, blood borne viruses, moulds, spores, bacteria, and fungi. Mites such as those that cause scabies can also cause infections.
- Infectious diseases may in some cases produce harmful and unpleasant symptoms; in other cases, they may produce no symptoms at all.

### 1.4 How do harmful pathogens enter the human body?

Pathogens can enter the body in many ways:

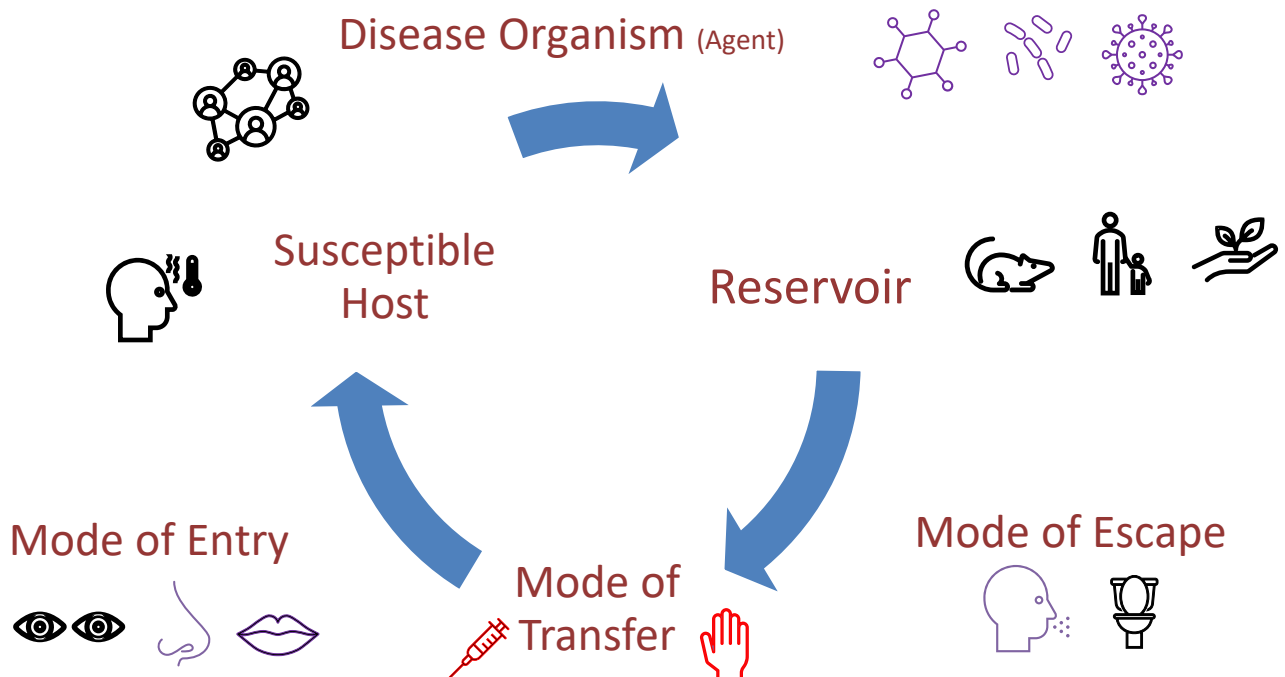
- Via the skin
- Via the respiratory system
- Via the mouth
- Via the eyes
- By injection and or breaks in the skin
- Via sexual intercourse (via infected person)

### 1.5 Chain of Infection

1.6 Certain conditions must be met in order for a pathogen (agent) to spread from person to person. This process called the chain of infection, can only occur when all six links in the chain are intact. By breaking this chain along the links, can hinder and or stop the transmission. Recognising how pathogens can enter and leave the human body, will assist in formulating suitable and sufficient risk assessments and provide employees with knowledge of how to control and avoid risks, to their own and others health.



## Diagram: chain of infection cycle



1.7 It is important to assess the vulnerability of the workforce. The effects of their activities on others and external influences likely to impact on the workforce as a whole, such as a pandemic.

### 1.8 **Workers at lower risk of exposure**

1.9 A large number of staff will be in this group, which includes those working in offices or libraries, for example. These employees are not routinely exposed to an increased risk of infectious disease.

1.10 In most cases they do not require any job-specific guidelines for infection control, though they are expected to follow the social norms of good hygiene, including workstation cleaning. However, they may use this guidance should they need to deal with any unusual or unexpected occurrences, i.e. blood spillage.

### 1.11 **Workers at higher risk of exposure**

This group in particular have a higher risk of exposure to sharps, suffer needlestick and/or bite injuries, be spat at, increased risk of Blood Borne Viruses and includes many different types of workers (but is not limited to) for example those involved with:

- Residential care
- Domiciliary care
- Child-care
- Educational staff
- Cleaners
- Health Care Workers, including those trained to administer medication
- Premises Officers
- Grass cutting and Maintenance Operatives

## 1.0

- First Aiders
- Any other employee that works within areas used by members of the public where needles/syringes are being used either legally or illegally.

### 1.12 Workers during a Pandemic

Maintaining services during a pandemic require 'new ways' of working. Senior leadership/team leaders should have a pandemic specific risk assessment that are communicated to all employees. The risk assessment needs to be specific to the pandemic and will be guided by Government, UK Health Security Agency UKHSA and LCC LTS guidance.

## 2.0 Employers' Roles and Responsibilities

2.1 Employers have a legal duty to ensure in so far as is reasonably practicable for the health, safety, and welfare at work of all their employees stated within the Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999, which also includes temporary workers, new and expectant mothers, young persons, and visitors to site.

2.2 The main piece of legislation that applies to infections at work is The Control of Substances Hazardous to Health Regulations 2002 (COSHH). The term biological agents are covered within this legislation and are defined as any micro-organism which may cause infection or create a hazard to human health for example blood borne viruses, etc. LCC LTS COSHH Guidance is available via the LTS website.

2.3 Under COSHH an employer has a legal duty to assess the risk of infection for employees and those affected by the work and are legally required to keep health records in relation to work involving risk of exposure to biological agents. Once the risk is identified, suitable precautions and control measures should be implemented. The employees must also be given adequate information, instruction, and training on the risks they may be subjected to within their work environment.

### 2.4 Assessing the risk

2.5 It is the responsibility of senior leadership/team leaders to carry out a risk assessment assisted by the individuals that are subjected to the hazards. See template samples in Appendix 2.

2.6 It is the responsibility of senior leadership/team leaders to ensure they are appropriately trained in this area.

2.7 When conducting the risk assessment, the following items need to be considered:

- Identify the hazards considering if the environment is a low or high-risk environment.
- Decide on who might be harmed and how – which employees and others may be exposed and how might this happen, for example dealing with accidents or handling contaminated items when cleaning or disposal.
- Assess the likelihood of contracting an infection / BBV that may affect our health or assess if an employee has a possibility of being exposed to certain microorganisms. Some can cause disease and your employees may be

exposed to them at work, including where needle stick/sharps/sharp injuries resulting in a blood borne virus (BBVs) may be present.

- Then decide whether current controls are adequate or whether more can be done.

## 2.8 Other factors to consider include:

- Identify the frequency and scale the individual is exposed to the biological agent, bodily fluids, or blood.
- If possible, identify the number of different people where contact is made.
- Find out if any previous information on existing injuries reported is available.
- Monitor the effectiveness of the control measures used including PPE.
- Record all findings.
- Review the risk assessment and revise where necessary.

2.9 As part of this assessment, senior leadership will need to consider if vaccination is an appropriate control measure. It is not generally recommended that all employees should be vaccinated against hepatitis B because the **emphasis** should be **on preventing exposure** in the first instance. However, if a risk assessment shows that there is a risk of exposure to biological agents, and effective vaccines exist, then provision should be made to determine whether an employee is already immunised, and immunisation should be offered to those not already immunised. The pros and cons of immunisation/non-immunisation should be explained when offering immunisation to the worker at risk.

2.10 Vaccinations should be provided and paid for the employer and carried out by a medical practitioner/Occupational Health or other private provider. If via the latter, the employee should be reimbursed.

2.11 Where immunisation is deemed necessary, senior leadership should monitor recommended re-vaccination periods, to ensure this is always up to date.

2.12 Senior leadership will also need to identify any team members who are more susceptible to infections i.e., pregnant employees and immune-suppressed as an example.

2.13 Personal risk assessments should be carried out for identified vulnerable individuals during a government announced epidemic/pandemic, please see [www.gov.uk](http://www.gov.uk) for updates and discuss with Health, Safety and Wellbeing Team.

2.14 Ensure individual workers undergo adequate training in relation to infection control, plus potential emergency situations and ensure that employees have access to sufficient relevant supplies of PPE.

2.15 Specific protocols (where they exist) may be required, such as reporting incidents and injuries and first aid for needle stick injuries. **Note:** Not all exposures result in infection.

## 3.0 Employees' Roles and Responsibilities

3.1 An employee has a legal duty to take care of their own health and safety and that of others affected by their actions. It is important that employees are aware of existing control measures and considers these controls throughout their

employment. Cooperation with employers is required so that they can comply with any legal duties placed upon them.

3.2 Everyone has a duty to inform their leadership team of any problems or issues affecting infection control. This includes any incidence of infectious disease in themselves, colleagues, or other persons that they are in contact with. The key types of illness include:

- Diarrhoea and vomiting
- Flu-like illnesses
- Skin infections

3.3 It is important that staff should follow the advice that they are given by their GP, other healthcare professionals, UKHSA, or Environmental Health Officers.

## **4.0 Blood Borne Viruses, Sharps & Needlestick Injuries**

### **4.1 Sharps Definition**

4.2 The term, sharps, is used to describe anything that is a sharps hazard. It is commonly used in healthcare as a collective term for things like needles, canulae, scissors, blades, scalpels, and knives. However, sharp instruments and work equipment are used in all sorts of industries from body piercing to warehousing. There are also sharp hazards associated with waste, such as broken glass. Source: Barbour Employee Factsheet February 2023

### **4.3 What is a Blood Borne Virus?**

4.4 Blood borne viruses (BBVs) are viruses found within the blood of some people and can be spread from one person to another, whether the carrier of the virus is ill or not. Those infected with a BBV can show signs of a severe disease, or little or no symptoms

4.5 The main blood borne viruses are:

- Human Immunodeficiency Virus (HIV) – a virus which causes the disease Acquired Immune Deficiency Syndrome (AIDS), affecting the immune system within the body.
- Hepatitis B, C and D, which all cause Hepatitis; inflammation and disease of the liver. Note: Hepatitis A and E are not usually passed on by blood-to-blood contact and therefore does not pose a significant risk of blood borne infection.

### **4.6 How can BBVs be spread and who are at risk?**

4.7 These viruses can spread from one infected person to another by various routes and over a prolonged period. These viruses can be found in bodily fluids other than blood. These include:

- Blood
- Semen
- Vaginal secretions
- Breast Milk

- 4.8 Bodily fluids such as urine, faeces, saliva, sputum, sweat, tears, and vomit carry minimal risk of BBV infection, unless they are contaminated with blood. It is not always obvious if blood is present and so care should be taken in this instance. All contact with bodily fluids should be treated as potential sources of infection.
- 4.9 Blood borne viruses are mainly transmitted sexually or by direct exposure to infected blood or other bodily fluids contaminated with infected blood. They can also be transmitted by puncturing the skin through a needle stick/sharps injury commonly by hypodermic needles.
- 4.10 In the workplace, direct exposure can occur through accidental contamination by a sharp instrument, such as a discarded needle or broken glass. Infected blood may also spread through contamination of open wounds, skin abrasions, skin damaged due to a condition such as eczema, or through splashes to the eyes, nose, or mouth.
- 4.11 **Workplace transmission**
- 4.12 Blood borne viruses can present an occupational health risk at work, depending on the type of job you undertake. It is important that employers understand and recognise the ways BBVs can be transmitted in the workplace. The risk of BBV infection is low for many occupations, as direct contact with blood and bodily fluids does not occur regularly; however, this depends upon the nature and level of exposure.
- 4.13 Needles/syringes have been found concealed in cigarette packets, toilet cisterns, sweet papers, drinks cans, undergrowth, car seats, bedding and clothing etc.
- 4.14 **Where there is a risk of exposure the completion of a risk assessment must be undertaken, and a safe system of work developed. The guidance on the HSE website must be followed.**
- <https://www.hse.gov.uk/healthservices/needlesticks/>
- 4.15 If you are a First Aider, the risk of being infected with a BBV while carrying out your duties is small. However, there are some precautions that need to be considered to reduce the risk of infection, which forms part of the first aiders, First Aid training. These, include:
- Cover any cuts or grazes on your skin with a waterproof dressing.
  - Wear suitable disposable gloves when dealing with blood or any other bodily fluids.
  - Use suitable eye protection and a disposable apron when splashing is possible.
  - To use a protective resuscitation aid (Vent Aid) when giving mouth to mouth resuscitation, but only when adequately trained.
  - To thoroughly wash hands after every procedure (antiseptic wipes should be used when no running water is available and or alcohol gel).
  - **Note:** As a First Aider you should not withhold treatment for fear of being infected with a BBV.

## 5.0 What to do if exposed to a needle stick/sharps injury?

5.1 If an employee has a needle stick/sharps/sharps injury (or puncture wound from a syringe, etc.) If there has been a risk of cross-infection by the transfer of body fluids into an open wound, for example if a child bites an employee and breaks the skin, then the needlestick injury procedure must be followed.

They **must:**

- Encourage the wound to bleed, ideally by holding it under running water.
- Wash the wound under cold running water and plenty of soap.
- Do not suck the wound.
- Put a dressing on the wound.
- **Seek immediate medical advice** e.g., local First-Aider, NHS Direct111 or NHS Walk in Centre.
- Report the incident to their Line Manager or Senior Leadership Team
- Inform the appointed person who will record the incident on the reporting system- Assess NET

5.2 It can take up to 6 weeks for medical diagnosis to confirm if a person has been infected following a needle stick injury. The emotional stress this can cause to the employee must not be underestimated or ignored and counselling and other mental health support services may need to be provided. Enquiries to the school's EAP or counselling service should be made without delay.

5.3 Further guidance can be found:

<https://www.nhs.uk/common-health-questions/accidents-first-aid-and-treatments/what-should-i-do-if-i-injure-myself-with-a-used-needle/>

<https://www.nhs.uk/conditions/animal-and-human-bites/>

## 6.0 Standard Hygiene Control Measures

### 6.1 Hand Hygiene

6.2 Hand hygiene is a general term that applies to hand washing with soap and water and the use of alcohol-based hand rubs.

**6.3 Hand washing remains the single most important method of reducing the spread of infections.** This applies equally to the general population as well as those working in higher risk occupations, such as health care.

6.4 Where no running water is available, or hand hygiene facilities are lacking, staff should use hand wipes or alcohol-based hand gels and should wash their hands at the first available opportunity. Senior leadership must provide carefully located alcohol hand gel to employees where it has been deemed necessary in a risk assessment.

6.5 Hand hygiene is an important means of reducing the risk of transmitting all infectious agents to others and limiting outbreaks of viral illness such as influenza pandemics and gastro-intestinal infections.

6.6 Employees, no matter where they work are required to follow the social norms of general population in respect of hand hygiene. Posters can be displayed if necessary.

**For guidance on how to wash your hands and when please see:**

<https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/>

## 6.7 **Respiratory and Cough Hygiene**

6.8 Respiratory illnesses such as a common cold or flu. The differences being they are caused by different viruses. Because these two types of illnesses have similar symptoms, it can be difficult to tell the difference between them based on symptoms alone.

6.9 Disposable, single use tissues should be used to cover the mouth when sneezing, coughing, or wiping and blowing the nose. Used tissues should be disposed of promptly in the nearest waste bin.

6.10 Bins will be available around the school. Any issues with these bins or missing bins should be reported to the relevant site manager or premises officer immediately.

6.11 Hands should be cleaned (using soap and water if possible; otherwise using alcohol-based hand gel) after coughing, sneezing, using tissues or after any contact with respiratory secretions and contaminated objects.

6.12 During a pandemic, stricter measures may be introduced by the government including social distancing, and or the use of face coverings. Senior leadership should ensure that government guidance is followed at the point where these measures are introduced.

## 6.13 **General Hygiene for Hot Desking**

6.14 Hot desking gives you the flexibility to work from any desk within the school you work in.

6.15 Each touchdown or central office area should have enough appropriate cleaning products to clean up dirt or spillages. If this is not the case, please report this immediately to the Premises Officer.

6.16 Fortunately, there are a few simple ways to encourage better hot-desk hygiene and decrease the risk of transmission of germs between staff and reduce absenteeism in the process:

- **Clean workstations regularly** – Hot desks should not be personalised and should be clutter free. Employees should clean desks before use and after use to take any litter and belongings with them at the end.
- **Keep food away from desk spaces** – Crumbs and debris encourage the growth of bacteria, so minimise snacks to break out areas.
- **Practice good hand hygiene** – Wash or sanitise hands when necessary to do so. For example: Before eating, drinking, smoking, including always after using the bathroom.
- **Flexible working** – By providing flexible or home working, employees will be less likely to bring contagious germs and infections to work, this would be

something that needed to be discussed and agreed by senior leadership according to specific situations.

- Hot desking may be discouraged during a pandemic to avoid the spread of the virus. Further guidance will be made available on alternative working arrangements.

## **7.0 Personal Protective Equipment (PPE)**

7.1 Workers in groups at higher risk of infectious disease transmission (for example, education, health care, or those considered above) will need to have an additional job-specific protocol for PPE.

7.2 A range of PPE is available, for example:

- Gloves (these may need to protect against sharps/needlesticks)
- Aprons
- Masks (these may need to be fluid resistant and or protect against aerosols)
- Eyewear (these may need to protect all around the eyes)
- Footwear (adequate to protect against puncture wounds)
- Uniform (to prevent against the spread of infection)

7.3 The protection equipment should be decided according to the hazard identified within the risk assessment and appropriate control measures applied.

7.4 Personal Protective equipment should be compliant with the relevant BS/UKCA standards and must be provided free of charge to the employee.

7.5 Employees who are required to wear PPE must be provided with adequate information, instruction, training and supervision on the correct donning and doffing procedures. Training is available within the following link: UK Health Security Agency [https://www.youtube.com/watch?v=-GncQ\\_ed-9w](https://www.youtube.com/watch?v=-GncQ_ed-9w) / Doffing and Donning.

7.6 Where FFP3 masks are required, the employee should be face fit tested. This can be arranged by contacting the Health, Safety and Wellbeing Team.

## **8.0 Cleaning**

8.1 Spillages should be cleaned up as quickly as possible. Spillages of water or of drinks can present a slip hazard and should be wiped up immediately using the appropriate paper towels or cleaning clothes.

8.2 HIV can remain infectious in dried blood and liquid blood for several weeks and Hepatitis B can stay active for even longer. If materials become contaminated with blood or other bodily fluids, then there are different methods of decontamination. Any spillages that potentially are contaminated must be cleaned up as soon as possible.

8.3 Staff should treat every spillage of body fluids or body waste as potentially infectious. They should wear protective gloves and aprons and use disposable wipes wherever possible. Eye protection should also be used if there is risk of splashing.



8.4 There are two methods that can be used to decontaminate a contaminated area. Each stage consists of a two-stage cleaning process. These are:

- Disinfection
- Sanitising

#### 8.5 **Disinfection**

8.6 It is important that all contaminants are removed before the disinfection process takes place. The use of hot water and liquid detergent will help in removing contaminants such as blood, pus, faeces etc., which all encourage the growth of micro-organisms. Once all the contaminants have been removed, a disinfectant can be applied to the contaminated area. The disinfectant is used to remove and/or destroy pathogenic micro-organisms.

8.7 A disinfectant is used to remove and/or destroy pathogenic micro-organisms.

#### 8.8 **Sanitising**

8.9 A sanitising solution is a combination of both a detergent and a disinfectant. The sanitising solution should be applied to the contaminated area removing all contaminants. Once all the contaminants have been removed, the sanitising solution should be applied to the affected area. This second stage acts as a disinfectant removing and/or destroying pathogenic micro-organisms. Steam can also be another method of sanitising which involves the use of hot steam to destroy pathogenic micro-organisms.

- Cleaning items used, such as mops (steam), buckets etc. should be stored dry, following any cleaning undertaken (except steam mops).
- To prevent cross-contamination it is important to use clean cleaning materials such as cloths between each stage of the cleaning process. Disposable cloths would be recommended.
- Any chemical used within the cleaning process must be used at the manufacturers' recommended dilution and contact time. See container for this information. Note: some chemicals are "ready to use".
- DO NOT mix two or more chemicals, except when instructed to do so.
- Ensure that all instructions on the containers with regards to protective clothing are followed.

8.10 If there is uncertainty in any of the cleaning processes, then contact the school's property team. Should a deep clean need to be carried out in a particular area i.e., following any identified outbreak, then a contractor or specialist may be contacted to advise further. Schools that buy back LCCs Property Services will be able to seek assistance via their helpdesk. The process is recommended to be maintained in the school's Business Continuity Plan.

8.11 The school / school Local Health Protection Team (HPT) may need to be contacted and this [link](#) provides contact details.

## 9.0 **Disposal of Waste**

9.1 There are sufficient bins located in suitable spaces to allow disposal of office and food waste. Small desk-side bins and desk-top recyclers must not be used. The bins are clearly marked, and colour coded and should be used as directed.

## 1.0

- 9.2 General human waste (offensive waste) is not considered to be clinical waste and should be disposed of in a hygienic way using sanitary provisions. This would include the disposal of a small amount of first aid materials. Those that are involved in carrying out the risk assessment must have local knowledge.
- 9.3 Certain waste is classified as clinical waste and its collection, storage and disposal is subject to strict controls. Clinical waste includes waste consisting wholly or partly of blood or other bodily fluids, swabs or dressings, syringes, needles or other sharp instruments, which unless made safe may be hazardous to any person encountering it.
- 9.4 Arrangements for the collection and disposal of clinical waste in the community and from persons' homes can be made through the Local Authority Cleansing Departments both within the boroughs and districts of Leicestershire. See Appendix 1 for more details.
- 9.5 Sharps must be disposed of using a sharps container (see appendix 3). The container must be compliant with BS7320:1990. Sharps must not be disposed of with other clinical waste (yellow bags) and should be separated and disposed of using the sharps container. In the event of an emergency where a sharps box is not available, the use of a non-permeable box will be enough.
- 9.6 **Safe use and Disposal of Needles** (See appendix 3 for Toolbox Talk Resource)
- 9.7 **Safe use includes:**
- Needles must not be passed from hand to hand and handling should be kept to a minimum.
  - Needles must not be bent or broken prior to use.
  - Needles must not be re-sheathed by hand.
  - Do not touch a needle with your bare hands.
  - To wear the correct personal protective equipment including suitable disposable gloves.
  - To use a grab stick to avoid hand contact were necessary.
- 9.8 **Safe Disposal includes:**
- Always dispose of needles at the point of use in a suitable container.
  - Syringes/cartridges and needles should be disposed of intact.
  - Always take the 'sharp box' to the needle not the needle to the box
  - Always make sure that bins which contain sharps are securely placed on work surfaces – no part of the bin should overhang the surface on which it stands and it should not be possible for it to be easily or inadvertently knocked over.
  - Do not dispose of sharps with other clinical waste (yellow bags), use the sharps container.
  - Do not fill the sharps container above the manufacturers marked line.
  - Always carry the used sharps container by the handle.
  - Lock the used sharps container when ready for final disposal.

- Do not force sharps into a full bin by pushing down with your hands
- Do not try to recap a needle. Used needles must not be bent or broken before disposal.

9.9 Place damaged used sharps containers into a large secure rigid container which is properly labelled ready for collection.

9.10 Waste Disposal may change during pandemic periods, so current UKHSA guidance should be followed and updated on risk assessments or procedures accordingly.

## 10.0 Reporting Accidents and Incidents

10.1 Employers are legally required to report any infections and dangerous occurrences with biological agents at work under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

10.2 Incidents such as a puncture wound from a needle known to contain blood contaminated with a BBV should be reported as a dangerous occurrence. Other incidents such as a human bite should also be reported using AssessNET and in addition blood splashes directly into the eye.

10.3 Accidents, incidents and ill-health treatment may be reported using AssessNET. New users or updates to user details may be requested by contacting [healthandsafety@leics.gov.uk](mailto:healthandsafety@leics.gov.uk). Getting started information is contained within the iHelp Knowledge base area.

10.4 School/school must ensure that details of COSHH related incidents are retained for *“at least 40 years from the date of the last entry” (Regulations 10 Monitoring Exposure & 11 Health Surveillance)*.

### 10.5 Near Misses/Violence

10.6 Any incident (**near miss**) where no immediate injury has occurred but could have occurred should also be reported to senior leadership and be recorded for future reference, for example, where a spillage has occurred and has been cleaned up using the correct cleaning procedure but no obvious impact on the person.

10.7 Any violence, including verbal abuse and challenging behaviour, in addition to injuries should also be reported to senior leadership and recorded for future reference, for example, being bitten or spat at by an individual during working hours.

10.8 All types of incidents must be investigated to identify the root cause and implement remedial measures. The details may then be included in the agenda for H&S committee or Governor type meetings.

10.9 LTS Website and Documents:

Accident, Incident and Near Miss Reporting guidance is available via the [LTS](#) website.

## 11.0 Further Reading

[Govt Guidance](#) – Health protection in children and young people settings, including education. A practical guide for staff on managing cases of infectious diseases in children and young people settings, including education.

[Govt](#) Guidance - Preventing and controlling infections – includes educational resources, sanitation, pets, environmental, cleaning, laundry

[Govt](#) Waste classification

[HSE](#) includes BBV educational material and further links to appropriate legislation.

[HSE](#) Violence Employer Advice

[HSE](#) Violence Worker Advice

[HSE](#) COSHH L5 ACOP

[DfE](#) Behaviour in schools

## Appendix 1: Contact List - Local Authority Cleansing Departments

NOTE: This information is correct as of June 2023.

Local Authority	Usual time between notification and collection	Contact details
Leicester City Council	<p>Leicester City Council will clear away discarded hypodermic syringes and needles from high-risk public areas within two hours; this includes schools and shopping centres.</p> <p>An area of low risk will be cleared of offending items within 24 hours.</p> <p>A charge will be made for visits to commercial premises.</p>	<p>Call 0116 454 1002 or email: <a href="mailto:customer.services@leicester.gov.uk">customer.services@leicester.gov.uk</a></p> <p>Environmental services: 0116 454 1001</p> <p>Report online <a href="http://www.leicester.gov.uk">www.leicester.gov.uk</a></p>
Blaby District Council	<p>Sharps found on <u>public</u> land can be collected by the district cleansing team.</p>	<p>Call 0116 272 7555</p> <p><a href="#">Reporting – Blaby District Council</a></p>
Charnwood Borough Council	<p>If the needle or syringe is on Council owned land, please contact <a href="#">Environmental Services</a> who will arrange to have it collected by our cleansing contractor, Serco.</p> <p>Where needles are found on private land, these can be removed by our contractor, but this will require a payment.</p>	<p>Call Environmental Services - 01509 634563</p>
Harborough District Council	<p>For all needle or syringe advice contact the Community and Living Team or the Community Safety Team.</p> <p>Available from 8am to 5pm. Wednesday closed</p>	<p>Call Contact the Community and Living Team on 01858 82 82 82</p>

	for training from 9am to 9.30am.	
Hinckley & Bosworth Borough Council	We need to follow up reports of needles and syringes quickly and therefore we operate 24 hour/seven days a week helpline at our control centre. When you speak to an officer please be as specific as possible about the location such as street name, the number of the nearest lamp post or house.	Call 01455 251137
Melton Borough Council	We will remove hypodermic needles or syringes from an adopted highway, or from land owned by the Council. To enable this to be done, the exact location of the item(s) must be given.	Call Customer Services on 01664 502502
North West Leicestershire District Council	The street cleansing team will clear discarded syringes from public land and aim to do this within 24 hours.	Call 01530 454554 or email: <a href="mailto:refuse@nwleicestershire.gov.uk">refuse@nwleicestershire.gov.uk</a>
Oadby & Wigston Borough Council	Removal of needles/syringes will be carried out as soon as possible. If found on school land during working hours, the school office/premises officer should report this.	Call 0116 288 8961 option 2 or email: <a href="mailto:clientservices@oadby-wigston.gov.uk">clientservices@oadby-wigston.gov.uk</a> <a href="http://oadby-wigston.gov.uk">Waste and Environment – Oadby and Wigston Borough Council (oadby-wigston.gov.uk)</a>
Rutland County Council	All needle/syringe sighting to be reported to the customer services.	Call customer services on 01572 722577

## Appendix 2: Risk Assessments

<b>Activities Covered by this Assessment</b>	Infection Prevention Control		
<b>Site Address / Location</b>		<b>Department / Service / Team</b>	
Note: A person specific assessment must be carried out for young persons, disabled staff and new and expectant mothers conducting this activity			

Hazard (Something with a potential to cause harm)	Who might be Harmed & How?	Existing Controls (Consider Hierarchy of Control)	Initial Risk Rating (S x L)			Further Controls Required (Consider Hierarchy of Control)	Final Risk Rating (S x L)			Action Required		
			Severity	Likelihood	Risk		Severity	Likelihood	Risk	Who (Initial )	Date By: (---/---/---)	Done?
<b>Body fluids</b>	Staff Hand to mouth/nose/eye contact Infection via broken skin (cuts or scratches) Health effects from cleaning products	<ul style="list-style-type: none"> <li>Induction training, specific training, reporting procedures within school property services and line managers</li> <li>Wash before eating or drinking, and after touching any surface or object that might be contaminated.</li> <li>Follow UKHSA guidance and school information for current featured information</li> </ul>	H	M	M	<ul style="list-style-type: none"> <li>Implement and document a specific safe system of work</li> </ul>						

<b>Coughs, Colds, Nasal and throat fluids</b>	Others may be affected by infections	<ul style="list-style-type: none"> <li>• Cough into a tissue</li> <li>• Throw the tissue away after use</li> <li>• Follow hand hygiene as per NHS guidelines</li> </ul>												
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To add more rows to the risk assessment, place the cursor within the last row right click and select insert row below.

During this activity, what could go wrong resulting in an emergency?	Broken skin with bodily fluid contact, due to spitting/biting/unforeseen personal care
How could this emergency be prevented / controlled?	Follow Challenging behaviour, Violence guidance and Information document where necessary (available from the LTS website). Implement and apply PPE and Infection Control standards for employee's safety.
Who should respond to a potential emergency and how? Have staff been trained to respond to this emergency?	Employees to follow Infection Control Guidance and Gp health information. Senior leadership should ensure records are made in AssessNET (or similar) and followed up accordingly.
Could any non – routine changes affect the safety arrangements in place for this activity? (E.g. weather, people, equipment etc.) What can be done?	Please use guidance from Challenging behaviour, Violence guidance and Information document, including NHS guidance



Risk Assessor (s) Name(s):		Risk Assessor(s) Signature (S):		
Authorised By:		Authoriser Signature:		
Date Conducted:		Date Review Due	Date of Review	Initial

<b>Potential Severity of Harm</b>	<b>High</b> Death, paralysis, long term serious ill health.	<b>Medium</b>	<b>High</b>	<b>High</b>
	<b>Medium</b> An injury requiring further medical assistance or is a RIDDOR incident.	<b>Low</b>	<b>Medium</b>	<b>High</b>
	<b>Low</b> Minor injuries not resulting in any first aid or absence from work.	<b>Low</b>	<b>Low</b>	<b>Medium</b>
	<b>Low</b> The event is unlikely to happen.	<b>Medium</b> It is fairly likely to happen.	<b>High</b> It is likely to happen.	
<b>Likelihood of Harm Occurring</b>				

## Risk Rating Definitions

<b>Low</b>	This is an acceptable level of risk. No further controls are required as the risk rating cannot be reduced any further. However, it is advised that continual monitoring occurs to ensure that no changes / deviation of control measures occur.
<b>Medium</b>	It is advised that further controls are implemented to reduce the risk rating to as low a level as possible. If the risk cannot be reduced to lower than a medium, then on site monitoring should occur to ensure that all stipulated controls are being adhered to.
<b>High</b>	This is an unacceptable risk rating. Urgent interim controls should be implemented to reduce the risk so far as is reasonably practicable. If the risk rating cannot be reduced to lower than a <b>High</b> , then a documented safe system of work should be implemented to control the activity. It may be necessary to seek further professional advice. Serious considerations should be given to the validity of carrying out the activity at all. Regular monitoring of the activity should occur.

<b>Activities Covered by this Assessment</b>	Using and disposing of sharps		
<b>Site Address / Location</b>		<b>Department / Service / Team</b>	

Note: A person specific assessment must be carried out for young persons, disabled staff and new and expectant mothers conducting this activity

Hazard (Something with a potential to cause harm)	Who might be Harmed & How?	Existing Controls (Consider Hierarchy of Control)	Initial Risk Rating (S x L)			Further Controls Required (Consider Hierarchy of Control)	Final Risk Rating (S x L)			Action Required		
			Severity	Likelihood	Risk		Severity	Likelihood	Risk	Who (Initial )	Date By: (--/--/--)	Done?
Possibility of a needle stick/sharps, cross-contamination of blood borne diseases.	Staff -Puncture wound -Incision	<ul style="list-style-type: none"> <li>Sharps must not be passed directly from hand to hand and handling should be kept to a minimum.</li> <li>Bent or broken needles must not be used.</li> <li>Always dispose of sharps in a suitable container at the point of use.</li> <li>Needles should <u>NOT</u> be re-sheathed.</li> <li>Syringes/cartridges should be disposed of intact.</li> <li>Ensure that the container used for the disposal of any sharps complies to BS 7320:1990 specification for sharps container and/or</li> </ul>	H	M	M	<ul style="list-style-type: none"> <li>Implement and document a specific safe system of work</li> </ul>						

		<p>are type approved in accordance with The Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations 2009</p> <ul style="list-style-type: none"> <li>• Do not fill sharps container above the manufacturers marked line.</li> <li>• Lock the used sharps container when ready for disposal or when the marked line has been reached, or at intervals specified by procedures. Always carry sharps containers by the handle.</li> <li>• Do <u>NOT</u> place sharps or sharps containers in yellow bags for disposal.</li> <li>• Do <u>NOT</u> dispose of sharps in clinical waste.</li> <li>• Give them to the District Nurse or any other suitably qualified person to dispose of.</li> <li>• Staff to follow sharps injury procedure if they come in contact with bodily fluid or broken skin</li> <li>• Report to a line manager and record on AssessNET (or similar)</li> </ul>												
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		<ul style="list-style-type: none"> <li>• Needles should not be recapped before being disposed of</li> </ul>											
<b>Body fluids</b>	<p>Staff Hand to mouth/nose/eye contact Infection via broken skin (cuts or scratches) Health effects from cleaning products</p>	<ul style="list-style-type: none"> <li>• Induction training, specific training, reporting procedures within school property services and line managers</li> <li>• Wash before eating or drinking, and after touching any surface or object that might be contaminated.</li> <li>• Follow UKHSA guidance and school information for current featured information</li> </ul>	H	M	M	<ul style="list-style-type: none"> <li>• Implement and document a specific safe system of work</li> </ul>							

During this activity, what could go wrong resulting in an emergency?	Broken skin with bodily fluid contact, due to spitting/biting/unforeseen personal care
How could this emergency be prevented / controlled?	Follow Challenging behaviour and Violence guidance and Information Document where necessary. Implement and apply PPE and Infection Control standards for employee's safety.
Who should respond to a potential emergency and how? Have staff been trained to respond to this emergency?	Employees to follow Infection Control Guidance and GP health information. Line Managers should record on AssessNET and follow up accordingly.
Could any non – routine changes affect the safety arrangements in place for this activity? (E.g. weather, people, equipment etc.) What can be done?	Please use guidance from Behaviour of Concern and Violence Document, including NHS guidance

Risk Assessor (s) Name(s):		Risk Assessor(s) Signature (S):	

Authorised By:		Authoriser Signature:		
Date Conducted:		Date Review Due	Date of Review	Initial

Potential Severity of Harm	<b>High</b> Death, paralysis, long term serious ill health.	<b>Medium</b>	<b>High</b>	<b>High</b>
	<b>Medium</b> An injury requiring further medical assistance or is a RIDDOR incident.	<b>Low</b>	<b>Medium</b>	<b>High</b>
	<b>Low</b> Minor injuries not resulting in any first aid or absence from work.	<b>Low</b>	<b>Low</b>	<b>Medium</b>
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# Appendix 3: Sharps Disposal and Needlestick Injury

## What are sharps?

Sharps is used to describe anything that is a sharp hazard.

Sharp instruments and work equipment are used in all sorts of industries. There are also sharp hazards associated with waste such as broken crockery and glass.

Sharps examples can be: needles, scissors, blades, scalpels, knives etc



## What are the dangers?

Used needles and other sharps are dangerous to people and pets if not disposed of safely because they can injure people and spread infections that cause serious health conditions. The most common infections are:

- Hepatitis B (HBV),

Can be spread via being injured by a used needle

- Hepatitis C (HCV),

Sharing unsterilised needles – particularly needles used to inject recreational drugs, sharing razors or toothbrushes

- Human Immunodeficiency Virus (HIV)

Sharing needles, syringes or other injecting equipment

**The only way to determine whether you are infected is to visit a health professional/GP**

## What to do in the event of a needle stick injury?



Let it bleed, don't squeeze.



Wash with soap water



Cover it



Report it

### They **must**:

- Encourage the wound to bleed, ideally by holding it under running water.
- Wash the wound under cold running water and plenty of soap
- Do not suck the wound
- Put a dressing on the wound.
- Seek immediate medical advice e.g. local First- aider, NHS Direct or NHS Walk in Centre.
- Report the incident to their Line Manager

### Team Documents:

There should be risk assessments covering your work and identifying sharps risks where applicable.

There should be a safety procedure in place where applicable.

There should be notices displayed explaining the emergency action.

## Safe Handling and Disposal



### Knives/Weapons

**CALL POLICE ON 101 and follow their advice**

If possible leave item in place and stay

Always wear gloves when handling sharps

Use a grab stick to avoid hand contact where necessary.

Needles must not be re-sheathed by

Sharps must be disposed of using a sharps container. The container must be compliant

In the event of an emergency where a sharps box is not available, the use of a non-