Halliford School
SHEPPERTON

Health and Safety Manual

Section B

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Accident Reporting and Investigations Policy

1. Scope

This guidance is to enable the School to comply with the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 ("RIDDOR") and that appropriate records are kept of accidents involving School activities.

1.1. Most incidents that happen in School or on School trips do not need to be reported to the HSE. If a student is injured in an incident and remains at School, is taken home or is simply absent from School for a number of days, the incident is not reportable.

1.2. Injuries to students, visitors and contractors who are involved in an accident at School or an activity organised by the School are only reportable under RIDDOR when:

- the death of the person arose out of or in connection with a work activity; or
- an injury that arose out of or in connection with a work activity and the person is taken directly from the scene of the accident to hospital for treatment (examinations and diagnostic tests are not treatment)
- the HSE Information Sheet EDIS 1 (rev3) gives guidance and examples of whether an injury arises out of or in connection with work.
- if in doubt guidance should be sought from the HSE, for example when a student from another school is injured (specified injury) during a sports match (not reportable) as opposed to a student of Halliford School who is injured similarly during a timetabled games lesson (reportable).
- All Student accidents are recorded via-the online reporting form. Outside contractors and physios who support weekend sporting events have access to the blank online reporting form to report any accidents or incidents. The completed forms are received by Matron via email and then recorded on iSAMS and they are also recorded on a termly spreadsheet for the Bursar.

1.3. Injuries and ill health to staff are reportable by the responsible person under RIDDOR when:

- accidents which result in death or a specified injury (which must be reported without delay). Also a reportable occupational disease when confirmed by a doctor in writing. The HSE Information Sheet EDIS 1 (rev3) gives details of specified injuries and reportable diseases.
- accidents prevent the injured person from continuing their normal work for more than seven days (not counting the day of the accident, but including weekends and other rest days). These must be reported within 15 days of the accident.
- the responsible person is normally the employer of the injured person. The exception will be those that are self-employed, where the controller of the premises should report.
- All staff accidents are recorded via the online reporting form. Matron will also record accidents on iSAMS and they are also recorded on a termly spreadsheet for the Bursar.

1.4. Dangerous Occurrences (specified near miss events) are reportable under RIDDOR. The HSE Information Sheet EDIS 1 (rev3) contains the typical examples applicable to schools.

2. Objectives

2.1. To ensure that accidents are recorded and reported in line with statutory requirements and insurance conditions.

2.2. To ensure that accidents can be appropriately investigated.

2.3. To identify the root causes of accidents and implement the lessons learnt to prevent recurrence.

2.4. Schools may choose to report near misses internally as well as accidents.

3. Guidance

3.1. Matron and/or The Bursar will assess the nature of the accident and the reporting requirements. Reference should be made to the HSE Information Sheet EDIS 1 (rev3) (www.hse.gov.uk/pubns/edis1.pdf)

3.2. If required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations a form F2508 will be completed and sent to the HSE. Reports can be made on-line via the HSE website, only fatal and specified injuries can be reported by telephone.

3.3. Matron is responsible for maintaining an accurate record of accidents which result in an injury requiring further treatment. This includes students, staff, visitors and contractors at School, or on School-led activities outside school. This will be completed by the member of staff present at the time of the accident.

3.4. Completed accident forms are to be kept for a minimum of 3 years and numerically filed. The records should be kept in a locked filing cabinet in Matron's Office to ensure compliance with the Data Protection Act. Completed online reporting forms are held securely in a confidential folder within the school system, only accessible by Matron/ the Bursar.

3.5. Accident reports will be considered at every meeting of the School H&S Committee.

3.6. All accidents reportable by the School under RIDDOR will be investigated. This will normally be undertaken by the Bursar and may include the taking of witness statements, photographs and the production of a written report. All such reports will be reviewed by the Senior Management Team and the Building Committee.

3.7. For serious incidents the Bursar should consider obtaining legal advice at the outset of any investigation. Such support can be obtained by contacting ISBA.

3.8. The Bursar will contact the School insurer where any incident is felt likely to result in a claim.

3.9. Matron or a nominated member of staff is responsible for escorting students to hospital and for ensuring that the Headmaster and relevant staff are informed. They will ensure that the parents of the student are informed as soon as possible for anything other than a trivial injury.

Legal Requirements & Education Standards

References:

A: Handbook for the Inspection of Schools - The Regulatory Requirements, Part 3 (www.isi.net)

B: Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013) (www.hse.gov.uk)

C: Incident reporting in schools (www.hse.gov.uk/pubns/edis1.pdf)

D: Health and Safety at Work" Section H of the ISBA Model Staff Handbook (http://members.theisba.org.uk/member-tools/reference-library/human-resources/staff-management/staff-handbook-section-h.aspx)

E: "Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide (http://members.theisba.org.uk/member-tools/reference-library/health-safety/management/bursars-guide-chapter-n-health-and-safety-and-welfare-at-work-(dec-2008).aspx)

F: "Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd (http://members.theisba.org.uk/member-tools/reference-library/financial/insurance/bursars-guide-chapter-k-insurance-(dec-2008).aspx)

Recommended Review Period: Annual

Review By: Bursar & Matron

Date Reviewed: September 2025

Administering Medications Policy

1. SCOPE

This guidance is applicable to all employees and / or others who may administer medication at the school.

The School accepts that there are occasions when students may need to take medication whilst at school. The School policy is to do all that is reasonably practicable to safeguard and promote the welfare of the individuals in our care. All staff are expected to maintain professional standards of care but have no contractual or legal duty to administer medication. This policy operates in conjunction with the First Aid Policy.

2. OBJECTIVES

To ensure that the school administers medicines in an appropriate manner by: -

2.1. Having authorised persons in place to administer the medication;

The School takes responsibility for the administration of medicines during school time in accordance with school policies which are based on the Department of Education guidelines. Medication will normally be administered by Matron. In the event that Matron is not available, i.e., on a school trip, an alternative member of staff will be nominated to administer the medication having received prior instruction from Matron. Both matrons and both Reception staff have completed the iHasco Medication Awareness for Schools course.

2.2 Having accurate and up to date records

On admission to the School and at the beginning of each academic year, all parents will be required to provide up-to-date information giving full details of:

- Medical conditions
- Allergies
- Regular medication
- Emergency contact numbers
- Name of family doctor/consultants
- Special requirements (e.g. dietary)

The School holds a stock of Antihistamine, Paracetamol, Ibuprofen, Milk of Magnesia and Strepsils. On admission to the School, parents are required to provide permission if they wish the School to administer these on their behalf. Details of any medication given will be recorded on the student's record in iSams. If a student is given any medication on a school trip, it will be recorded on a sheet inside the medical pack with date, time, medication and dosage given and returned to Matron for updating in iSams.

2.3 Controlled Medication and Prescription Medication

If a student is to take regular controlled medication or daily medication for an on-going condition, this will be detailed on their Individual Healthcare Plan.

If a student is given a prescription for a short-term condition, requiring a dose to be given during the school day, it will be supplied to Matron. It must be in a container as prescribed by the doctor and dispensed by a chemist with the student's name and instructions for administration printed clearly on the label. Parents must notify Matron and consent must be given to Matron to administer the said medication. It is the student's responsibility to go to the medical room at the pre-arranged time to receive the medication which will be administered by Matron or another nominated member of staff. All medication is kept in a locked cupboard and controlled medication is locked in a separate box.

If Staff need to take controlled medication they are able to keep this with Matron (optional)

3. GUIDANCE

3.1. The Bursar and Matron will be responsible for the implementation and review of this guidance;

3.2. All Schools are recommended to adopt the guidance provided by the Department of Health titled "Managing Medicines in Schools and Early Years Settings" (Supporting pupils with medical conditions at school - GOV.UK (www.gov.uk))

3.3 Under the Human Medicines (Amendment) (No.2) Regulations 2014 schools are allowed to buy salbutamol inhalers, without a prescription, for use in emergencies (in the event of an asthma attack). Schools should follow the guidance in the Department of Health document "Guidance on the use of emergency salbutamol inhalers in schools".

3.4 Under the Human medicines (amendment) Regulations 2017 schools are allowed to buy adrenaline auto-injector (AAI) devices without a prescription, for emergency use in children who are at risk of anaphylaxis but their own device is not available or not working (e.g. because it is broken, or out-of-date).

Salbutamol Inhalers and Adrenaline Auto-Injectors

All medication will be kept under the control of Matron in the medical room unless other arrangements are made with the parent, for instance inhalers and adrenaline auto-injector (AAI) should be carried by the student at all times and the School, where possible will hold a spare supplied by the parent, in the case of emergencies.

The School holds a small supply of emergency salbutamol inhalers. The Department of Health stipulates that the emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. The School would therefore seek written consent from all parents of those students with asthma related illnesses if they wish the emergency inhaler to be included as part of their child's individual healthcare plan. Parents will be advised of

use of the emergency inhaler via a telephone call from Matron where any further action can be discussed.

The School also holds nine spare emergency generic adrenaline auto injectors in case of an emergency involving anaphylaxis. Permission for the potential use of these will included as part of the child's treatment plan and will need to be signed by their GP before permission is given for this to be administered in school. Those belonging to the School and the child's own auto-injector will be administered by the student themselves (if age appropriate) or by a member of staff. Ideally the member of staff will be trained, but in an emergency anyone will administer adrenaline.

Legal Requirements & Education Standards

References:

A. Commentary on the Regulatory Requirements, Part 3 (www.isi.net)

B. Health and Safety Executive, (www.hse.gov.uk/campaigns/farmsafe.index.htm)

C. Vaccines, diseases and immunisations (www.immunisation.nhs.uk)

D. Department for Health (www.dh.gov.uk)

E. NHS Direct (www.nhsdirect.nhs.uk)

F. Department for Health Guidance on the use of emergency salbutamol inhalers in schools (March 2015)

Recommended review period: Annual

Review by: Bursar / School Matron

Date Reviewed: September 2025

Infection Control Policy

1. Scope

This guidance is applicable to all employees and/or contractors of the School who undertake activities associated with infection control.

2. Objectives

To ensure that the School prevents the spread of infection by:-

2.1. Maintaining a clean environment
2.2. Practising good standards of personal hygiene

3. Guidance

3.1. The Bursar and Matron will be responsible for the implementation and review of this guidance

3.2. Good hygiene practice will be followed by all those involved with:

- General cleaning
- Cleaning of blood and body fluid spillages
- Clinical waste
- Laundry
- Use of personal protective equipment

3.3. Bites, injuries and sharps:

- Where skin is broken, make the wound bleed and wash thoroughly with soap and water
- Report to Matron/Medical Room for treatment

3.4. Animals

- Animals can carry infections, so always wash hands after any contact
- When visiting farms check hand washing facilities and ensure that children do not eat or drink whilst touring the farm, or put fingers into mouths etc. Use waterproof plasters to protect any cuts or grazes not covered by clothes

3.5. Vulnerable Children

- Some medical conditions make children vulnerable to infections that would not normally be serious by reducing immunity. These may include cancers and those on steroids. Such individuals are particularly vulnerable to chickenpox and measles. If they are exposed contact Matron/Medical Room immediately
- Shingles is caused by the same virus as chickenpox and therefore anyone who has not had chickenpox is potentially vulnerable if they have had contact with a case of shingles
- If in any doubt seek advice from Matron/Medical Room

3.6. Pregnancy

If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash then Matron/Medical Room should be contacted immediately. Points to consider include:

- German measles (rubella). If a pregnant woman comes into contact with German Measles she should inform her GP and ante-natal carer immediately
- Slapped cheek disease (Parvovirus B19) can occasionally affect an unborn child. Any potential exposure should be reported to the ante-natal carer
- Chickenpox can affect the pregnancy if a woman has not already had the infection. Any potential exposure should be reported to the GP and ante-natal carer

3.7. Immunisations

Immunisation status should always be checked at school entry and at the time of any vaccination. Any immunisations that have been missed should be addressed via Matron/Medical Room. All enquires are passed to Children and Family Health Surrey who are responsible for missed immunisations and contact the parents directly.

3.8. Diarrhoea and Vomiting Illness

The Department of Health Guidance on infection Control in Schools states the period to be kept away from school is 48 hours from the last episode of diarrhoea or vomiting.

Legal Requirements & Education Standards

References:

A: Handbook for the Inspection of Schools - The Regulatory Requirements, Part 3 (www.isi.net)
B: Health and Safety Executive, (www.hse.gov.uk/)
C: Health and Safety at Work" Section H of the ISBA Model Staff Handbook,
D: " Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide
E: "Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd
F: Vaccines, diseases and immunisations (www.immunisation.nhs.uk)
G: Department for Health (www.dh.gov.uk)

Recommended review period: Annual

Review by: Bursar/Matron

Date reviewed: September 2025

Human Flu Pandemic: Policy

1. Scope

This guidance is applicable to all those involved in responding to a classified flu pandemic. Pandemic flu is different from ordinary flu as it occurs when a new flu virus emerges into the population and spreads rapidly from person to person worldwide. As a new virus it is unlikely that there would be immunity to it or that there would be a vaccine available. UK Health Security Agency ("UKHSA") advice forms the basis of this guidance.

2. Objectives

2.1. To ensure that the health of students and staff is appropriately considered, and action is implemented during a pandemic.

2.2. To have appropriate procedures in place for managing such an incident.

2.3. That suitable communication is maintained during an incident.

3. Guidance

3.1. The Bursar and Headmaster will be responsible for the implementation of this policy.

3.2. The symptoms of pandemic flu are similar to those of seasonal flu, but are likely to be more severe, these being:
- fever, cough/shortness of breath
- aching muscles, sore throat, headache, loss of appetite, malaise, chills, sneezing

3.3. The incubation period is 1-4 days, the infectious period up to 7 days.

3.4. The School recognises that children are efficient "spreaders" of respiratory infections and that plans are required for both School closure and the School remaining open.

3.5. The Headmaster will decide on whether to close a School after taking advice from the UKHSA. The Government may decide to close schools through the Civil Contingencies Committee and would communicate with the School where necessary.

3.6. Children with symptoms of severe flu will be isolated from other children (making use of the Medical Room) until a parent arrives to take them home (unless otherwise advised). Where children or members of staff exhibit symptoms of severe flu at home they should not come into School. Staff and children should not return to School until they are clear of all symptoms.

3.7. If a pandemic is declared by UKHSA, where applicable, the School will normally expect parents to collect their children as normal at the end of the School day. Where possible parents would be contacted during the course of the day, otherwise they will be given information when they collect their children at the end of the day or children will be given letters to take home

3.8. Where a school stays open during a pandemic, the School will:

- follow good hygiene practice and isolate staff/children experiencing flu like symptoms
- have an emergency supplies box, and parental contact list solely for use during the pandemic

3.9. To reduce the risk of spread, hygiene measures will include:

- staff training in this guidance and in infection control
- regular hand washing; during a pandemic special hand cleanser will be available in every classroom and at the main School entrance, with staff ensuring regular use
- additional tissues will be provided within all School areas and children encouraged to use and dispose of them carefully.
- the cleaners will be asked to provide additional cleaning of hard surfaces
- the sharing of pencils, crayons and pens will be discouraged.
- musical instruments will be carefully cleaned, with no sharing of wind/brass instruments
- avoiding bringing children together in large crowds in enclosed spaces
- curriculum and assembly time will include education to children regarding personal hygiene
- posters on hand washing, etc. will be displayed prominently within the School
- after School clubs, lettings to external organisations and School trips will be cancelled
- the Medical Room will be used for normal medical emergencies and a separate isolation room will be prepared
- year group or classes will be in defined "bubbles" that do not mix with other groups.
- movement around the school is restricted
- points of entry and exit and start and end times of the school day may be varied and defined for each bubble to avoid interaction

3.10. Reopening the school:

- following a closure of the School, update information will be shared with parents, e.g. school website, noticeboard, email etc.
- prior to reopening, the School will take advice from UKHSA regarding the level of cleaning required throughout the School
- once reopen, staff will keep a close check on students and report any concerns to the Headmaster who will liaise with UKHSA.

3.11. Information to be communicated will include:

Staff/Governors

- infection control guidance
- use of personal protective equipment when supervising an ill child
- familiarisation with any School Flu Planning document and recommendations
- display of Department of Health posters on hand washing and coughs & sneezes

Students

- guidance on personal hygiene
- guidance on display of Department of Health posters

Parents

- global email message
- telephone call co-ordinated by Year Group

- school website
- template letters regarding closure and reopening

Legal Requirements & Education Standards

References:

A: Handbook for the Inspection of Schools - The Regulatory Requirements, Section B Part 3 (www.isi.net)

B: Health and Safety at Work" Section I of the ISBA Model Staff Handbook,

C: " Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide

D: Schools statutory guidance documents https://www.gov.uk/government/organisations/department-for-education

E: Government wide Department of Health planning documents (https://www.gov.uk/guidance/pandemic-flu)

F: UKHSA documents
https://www.gov.uk/government/organisations/public-health-england

Recommended review period: Annual

Review by: Bursar/Headmaster

Date reviewed: September 2025

New and Expectant Mothers: Policy

1. Scope

This policy is applicable to all those employees who give written notification to the Bursar that they are pregnant, have given birth within the last six months or are breastfeeding.

2. Objectives

2.1. To identify those employees who are new & expectant mothers.

2.2. To ensure that a risk assessment of their work activities is undertaken.

2.3. To ensure that suitable arrangements are in place to protect the health, safety and welfare of such individuals.

3. Procedure

3.1. The Bursar along with the HR Officer will undertake/arrange for a specific Risk Assessment for the employee.

3.2. The Risk Assessment will be carried out using the standard forms, see Appendix 1. It must be carried out with the specific employee and take account of any medical advice that has been provided by her doctor.

3.3. Once the Risk Assessment has been completed a copy must be retained by the Bursar and treated as confidential.

3.4. The individual assessed will be informed of any significant risks to them/their child. Any required actions or recommendations will be discussed with the Headmaster and/their Head of Department as appropriate.

3.5. The Risk Assessment should be reviewed on a regular basis as the employee's condition changes. Any changes to the Risk Assessment must be fully documented and communicated both to the employee and Head of Department.

3.6. The individual assessed should:

- inform their doctor of the nature of their work
- follow any arrangements implemented for their protection at work
- not act in a manner that could adversely affect their own health and safety, or that of their child
- keep the Bursar/Headmaster/Head of Department informed of any concerns or difficulties they may have

3.7. The individual will be given a copy of the HSE leaflet "A guide for new and expectant mothers who work"

Legal Requirements & Education Standards

References:

A: Handbook for the Inspection of Schools - The Regulatory Requirements, Part 3 (www.isi.net)
B: New and expectant mothers at work, a guide for employers, HSG 122 (www.hse.gov.uk)
C: Health and Safety at Work" Section H of the ISBA Model Staff Handbook,
D: "Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide
E: "Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd
F: Guidelines for Environmental Design in Schools" DCSF Guidance

Recommended review period: Annual

Review by: Bursar

Date reviewed: September 2025

Appendix 1. New & Expectant Mothers – Risk Assessment

Name:	Dept:
Job Title:	Location:

Does your work involve:	Yes	No	Comments
Manual handling			
Working at height			
Standing for long periods			
Extremes of temperature			
Slippery surfaces			
Uneven floors			
Variations in level			
Working with DSE			
Lone working			
Food preparation/smells			
Wearing a uniform			
Excessive movement			
Are you exposed to:	Yes	No	Comments
Noise			
Radiation			
Biological agents			
Chemical agents			
Other (please specify)			
A second risk assessment will be carried out on the mothers return to work			
Initial Review Date:			
Assessor	Print:		Sign:
Person Assessed	Print:		Sign:
Second Review Date:			
Assessor	Print:		Sign:
Person Assessed	Print:		Sign:

Occupational Health Policy

Scope

This guidance is applicable to all employees of the School. The School places great importance on the well-being of its staff.

1. Objectives

    1.1. To ensure that statutory requirements are met.
    1.2. That health risks are identified and controlled as soon as possible.
    1.3. To ensure, so far as is reasonably practicable, the continued well-being of employees.

2. Guidance

    2.1. The Bursar, supported by Matron, will be responsible for the implementation of this policy. Heads of Department (including support departments) will be responsible for assisting with the identification of requirements within their areas of control.

    2.2. The School will undertake health surveillance on employees where it is specified by law. Health surveillance will also be undertaken on employees where:

    - There is a known risk to the health of employees
    - Where the health risk can be identified at an early stage; and
    - Where the identification of the condition will allow successful treatment

    2.3. Areas where consideration of health surveillance is required will include exposure to:

    - Noise or vibration
    - Solvents, dusts, fumes, biological agents and other substances hazardous to health
    - Asbestos, lead or work with compressed air
    - Ionising radiation

    2.4. Health surveillance may take the form of:

    - Periodic health questionnaires
    - Where pre-employment questions are asked, employers can only ask them to help:
        - Establish whether any reasonable adjustments need to be made for applicants during the selection process
        - Decide whether an applicant can carry out a function essential to the job
        - Monitor diversity among job applicants
        - Take positive action to assist disabled people
    - Pre-employment and return to work (after long-term illness/injury) medical examinations; and/or
    - Prescribed health surveillance required under specific legislation, which may include:
        - Skin inspections
        - Audiometry
        - Lung function tests

    2.5. All reasonably practicable corrective action to ensure the health and safety of employees identified as suffering from work related illness will be taken. Reference should also be made to:

- Alcohol, drugs and substance misuse policy
- Display Screen Equipment Policy
- Stress Management Policy

2.6. Matron will be responsible for maintaining records of any health surveillance, which should be kept for at least 40 years (this is a legal requirement e.g. under the Control of Substances Hazardous to Health Regulations). Information kept should include:

- Surname
- Forename
- Gender
- Date of birth
- Permanent address including post code
- National insurance number
- The date the check was carried out and by whom
- The outcome of the test/check
- Factual details of any decision taken by the occupational health professional in relation to the individuals work

2.7. The results of any health surveillance will remain confidential. Any medical records associated with health surveillance will be subject to the provisions of the Data Protection Act.

Legal Requirements & Education Standards

References:

Handbook for the Inspection of Schools - The Regulatory Requirements, Part 3 (www.isi.net)
B: Health Surveillance home page (www.hse.gov.uk)
C: Health and Safety at Work" Section H of the ISBA Model Staff Handbook,
D: " Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide
E: "Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd

Recommended review period: Annual

Review by: HR and Recruitment Officer, Matron & Bursar

Date reviewed: September 2025

Stress Management: Policy

1. Scope

This guidance is applicable to all employees of the school. Stress is defined as "the adverse reaction people have to excessive pressure or other types of demand placed on them". We recognise that workplace stress is a health and safety issue and acknowledge the importance of identifying and reducing workplace stressors.

2. Objectives

2.1. To ensure that work is appropriately designed, organised and managed.

2.2. To ensure that the HSE management standards are considered.

2.3. That there are appropriate support mechanisms in place to assist individuals where stress related issues have been identified.

3. Guidance

3.1. The Bursar or Headmaster will be responsible for the implementation of this policy as appropriate.

3.2. The Headmaster and Heads of Department will consider the HSE management standards when looking at workplace management, these are:

- Demands, including workload, work patterns and the work environment;
- Control, regarding how much say the individual has in the way they do their work;
- Support, including encouragement and resources provided by the organisation;
- Relationships, and the promotion of positive working together with dealing with unacceptable behaviour;
- Role, so that people understand their place and purpose within the school;
- Change, and the way in which communication is undertaken.

3.3. In practical terms, the Headmaster and Heads of Department will:

- Give constructive feedback to people;
- Consult with staff during periods of change;
- Ensure staff have trained to enable them to do their job;
- Monitor workloads and working hours.

3.4. Where issues of stress are identified, the school will:

- Raise awareness of support mechanisms available;
- Put an action plan in place to address any issues identified;
- For return to work instances, monitor any phased return and allow the individual to provide feedback;
- Records relating to any identified stress issues will be retained by the Bursar and treated as confidential.
- Make a referral to occupational health support where appropriate.

3.5. Employees should report any issues of concern to their Line Manager in the first instance and should co-operate with any remedial issues that are put into place.

Legal Requirements & Education Standards

References:

A: Handbook for the Inspection of Schools - The Regulatory Requirements, Part 3 (www.isi.net)
B: Stress home page (www.hse.gov.uk)
C:Health and Safety at Work" Section H of the ISBA Model Staff Handbook,
D: "Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide
E: "Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd

Recommended Review Period: Annual

Review By: Bursar and HR Officer

Date Reviewed: September 2025

Smoking: Policy

1. Scope

This guidance is applicable to all those persons who may be on School premises.

2. Objectives

2.1. To ensure that statutory requirements are met.

2.2. To protect non-smokers from the adverse health effects of environmental tobacco smoke in the workplace.

2.3. To demonstrate the Schools commitment to promoting the health of students and staff.

3. Guidance

3.1. The Headmaster will be responsible for the implementation of this policy.

3.2. Smoking is prohibited on School premises as specified in the Smoke-free (Premises and Enforcement) Regulations 2006.

3.3. The School shall be a smoke free site.

3.4. The prohibition of smoking will apply during School related activities which are undertaken outside School premises.

3.5. The School can provide information and support for smokers to quit if requested.

Legal Requirements & Education Standards

References:

A: Handbook for the Inspection of Schools - The Regulatory Requirements, Part 3 (www.isi.net)
B: Health Surveillance home page (www.hse.gov.uk)
C: Health and Safety at Work" Section H of the ISBA Model Staff Handbook,
D: "Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide
E: "Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd
F: www.nhs.uk, stop smoking pages.
G: DfE and ACPO drug advice for schools (DfE website).

Recommended Review Period: Annual

Review By: Headmaster

Date Reviewed: September 2025

Display Screen Equipment: Policy

1. Scope

This guidance is applicable to all those (employees and students) who use display screen equipment. Such equipment will include both laptops and desk mounted units.

2. Objectives

2.1. To ensure that those who regularly use display screen equipment are identified so that a suitable assessment may be undertaken.

2.2. To ensure, so far as is reasonably practicable, that the health and safety of users is not adversely affected by the use of Display Screen Equipment ("DSE").

2.3. To ensure that where required, ancillary equipment is provided.

3. Guidance for Staff

3.1. The Bursar is responsible for ensuring that DSE assessments are completed, remedial action implemented and the assessments reviewed as appropriate.

3.2. Members of staff who regularly use DSE should have their work station self-assessed via the Hettle Andrews checklist available from the HR and Recruitment Officer.

3.3. The Bursar will ensure that a self-assessment has been completed for each member of staff and that any remedial action identified is implemented. Completed assessments will be kept in the member of staff's personnel file. The self-assessments may be reviewed on an annual basis or when there has been a significant change in their work environment.

3.4. Where the assessment indicates a need for ancillary equipment this will be provided by the School. Equipment includes, but is not limited to :

- specialist seating
- footrests
- anti-glare screens
- wrist support
- window blinds
- specialist desk

3.5 Employees who may be suffering from ill health effects, which may be caused by or made worse by the use of DSE, should report these effects to the Bursar. Occupational health assessments may be required to be undertaken by users.

3.6 Where eye tests are requested by DSE users, these will be provided free of charge via an NHS Optometrist. Where a user provides evidence from an optician showing that they now require spectacles exclusively for their DSE work, then the cost of spectacles suitable for that purpose will be reimbursed by the School (up to a reasonable figure). Individuals may put this sum towards a pair of spectacles which may also be suitable for other purposes as long as these spectacles are made available for use at work. If an ordinary prescription happens to allow you to perform DSE work, this will not be reimbursed by the school.

3.7 Eye tests should be undertaken every 2 years.

3.8 The ICT technician will be responsible for ensuring appropriate cable management where DSE is in use.

4. Guidance for Students

4.1 Although schools are not required to undertake DSE assessments for students, it is recognised that they will use such equipment during the School day, leisure time and private study.

4.2 Students will be given guidance on the need for breaks, posture etc. in line with that given to staff.

4.3 Designated workstations for students will be of a similar standard to those provided for staff.

Legal Requirements & Education Standards

References:

A: Handbook for the Inspection of Schools - The Regulatory Requirements, Section B Part 3 (www.isi.net)

B: Health and Safety (Display Screen Equipment) Regulations 1992 (www.hse.gov.uk)

C: Health and Safety at Work" Section I of the ISBA Model Staff Handbook,

D: " Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide

E: Guidelines for Environmental Design in Schools" DCSF Guidance (www.gov.uk/dfe)

Recommended review period: Annual

Review by: Bursar

Date reviewed: September 25

Display Screen Equipment Personal Assessment

Halliford School
SHEPPERTON

This form has been sent to you as you have recently joined the school, moved desks or your job/workstation in school has been considerably altered.

This form gives an indication of how closely your workstation conforms to the Health and Safety (Display Screen Equipment) Regulations 1992, as amended.

Please complete the form and return it to the Assistant Bursar.

If you are experiencing any problems or discomfort with your workstation, please indicate this on the form and a follow-up Workstation Assessment will be arranged if appropriate.

All information will be treated in strict confidence.

Location:	

Employee Details

	Name	Job Title
Personal ID:		

	E-mail Address
Contact Details:	

	Full Time	Part Time	Contractor	Employer (if contractor)
Employee Status:				

1. Display Screen Equipment Policy	**Yes**	**No**	**N/A**
1.1 Have you read the DSE Policy on Section B of the Health and Safety Manual which can be found on the school website?			

2. Working Time

2.1 Daily number of hours spent working with DSE (approximately)	

3. Display Screen (s)	**Yes**	**No**	**N/A**
3.1 Are the characters clear and readable?			
3.2 Is the text size comfortable to read?			
3.3 Is the screen image stable and free from flicker and jitter?			
3.4 Does the screen seem suitable in size, resolution etc. for its intended use?			
3.5 Is the screen free from reflection and glare?			

3.6	Can you adjust the brightness and contrast of the screen image?			
3.7	Does the screen tilt and swivel?			

4. Keyboard and Input Devices		**Yes**	**No**	**N/A**
4.1	Is the keyboard separate from the screen?			
4.2	Is it possible to find a comfortable keying position?			
4.3	Is the angle of keyboard surface adjustable? (If so, are the feet in good repair?)			
4.4	Do you have a wrist rest, if required?			
4.5	Are the characters on the keys easy to read?			
4.6	Is there enough support for your wrist and forearm when using the mouse or other input device?			
4.7	Is the mouse placed close to the keyboard – in easy reach?			
4.8	Is the mouse device suitable for the tasks it is used for?			
4.9	Is the mouse speed suitable for you?			
4.10	Do you know how to adjust software settings for speed and accuracy of the mouser/ other device?			

5. Software		**Yes**	**No**	**N/A**
5.1	Is the software suitable for the tasks you undertake?			
5.2	Have you been trained how to use the software provided?			

6. Chair and Furniture (provided in School)		**Yes**	**No**	**N/A**
6.1	Does the chair provide good support to the small of the back?			
6.2	Is the chair stable and comfortable?			
6.3	Is the chair seat height adjustable?			
6.4	Is the angle of the chair back adjustable?			
6.5	Is the height of the seat back adjustable?			
6.6	Does the chair have castors or glides and a swivel mechanism?			
6.7	Is the chair correctly adjusted? (ie do you feel comfortable?)			
6.8	Is chair in good condition (ie does not need repair)?			

6.9	Are your forearms horizontal and eyes at roughly the same height as the top of the monitor?			
6.10	Are the feet resting flat on the floor (or a footrest) without too much pressure on the backs of the legs?			
6.11	Can you sit directly in front of the monitor and keyboard?			
6.12	Is there sufficient desk space for the tasks and equipment?			
6.13	Can you comfortably reach all the equipment and papers you need to use?			
6.14	Do you have a document holder provided, if required?			
6.15	Is the work surface free from glare and reflection?			

7. Environment (in School)		**Yes**	**No**	**N/A**
7.1	Is the lighting level comfortable?			
7.2	Are adjustable window coverings provided and in good condition?			
7.3	Is the temperature comfortable?			
7.4	Are noise levels comfortable?			
7.5	Does the air seem comfortable, i.e. not too dry?			
7.6	Is there sufficient room to change position and vary movement?			

8. Eyesight and General Health		**Yes**	**No**	**N/A**
8.1	Do you know about your employer's eye and eyesight testing arrangements?			
8.2	Do you experience any musculoskeletal problems (caused or made worse by the use of DSE equipment)?			
8.3	Do you experience symptoms of work related stress (caused or made worse by the use of DSE equipment)?			

9. Training		**Yes**	**No**	**N/A**
9.1	Have you been trained on the safe use and adjustment of your chair, workstation and other equipment?			
9.2	Do you take regular breaks working away from the monitor?			
9.3	Are you aware of the health risks associated with use of DSE and how to avoid them?			

10. Comments

11. Assessor Recommendations to Reduce Risk to Acceptable Levels (if follow up assessment required)

User's Name	User's Signature	Date

Assessor's Name	Assessor's Signature	Date