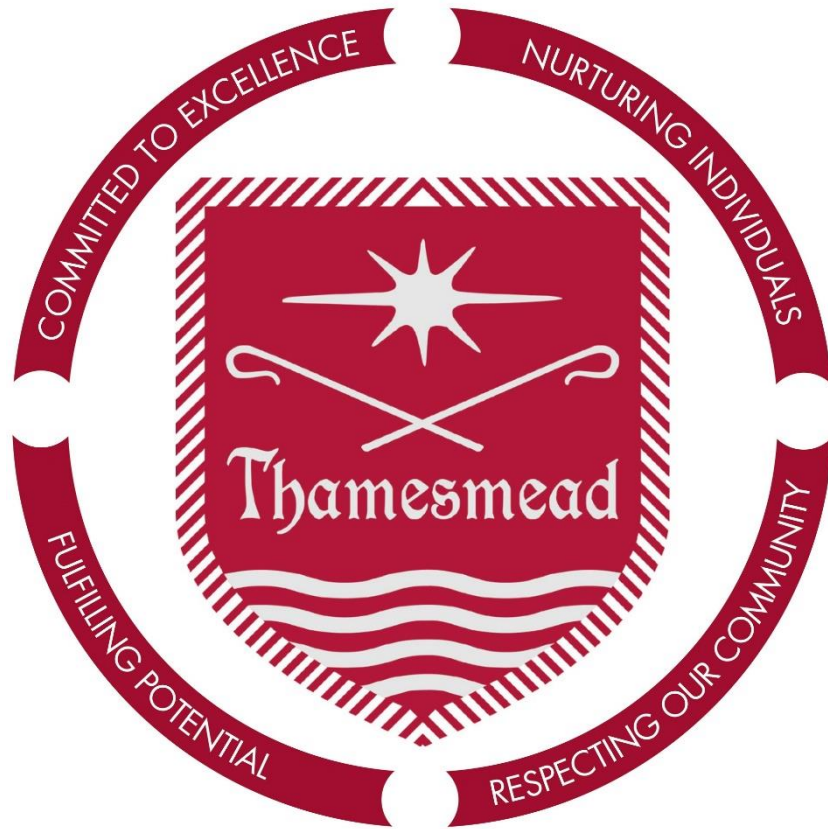


THAMESMEAD SCHOOL



INFECTION CONTROL POLICY

Policy Document

Person Responsible	Business Manager
Governors Committee	Finance, Audit & Risk
Review period	Annually
Date of review	Summer Term 2025
Date of next review	Summer 2026 or as required

Statement of Intent

The Health and Safety at Work Act imposes a duty on employers to ensure, as far as reasonably practicable, the health safety and welfare of employees and others (this includes visitors and students.) There are several Regulations which relate to the school legal obligations to control, manage and report infections which include:-

- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)
- Public Health (Control of Disease) Act
- The Public Health (Infectious Diseases) Regulations
- The Management of Health and Safety at Work Regulations
- The Control of Substances Hazardous to Health Regulations (COSHH)
- The Food Safety and Hygiene (England) Regulations
- Food Safety Act
- The Health Protection (Notification) Regulations

The school and Governing Body are committed to safeguarding the health, safety and welfare of staff, students and visitors so far as is reasonably practicable. The school and Governing Body have a duty of care to volunteers and agency staff/consultants who are not employees and who may be affected by their work activities.

The policy applies to all relevant school activities and is written in compliance with all current UK health and safety legislation. This policy provides a clear framework for ensuring that the school management, all employees and visitors have clear procedures for the prevention and control of infections in the school.

This control of infections policy covers and applies to all work and teaching activities undertaken by the school and sets out clear procedures, arrangements and any provisions made by the school to ensure the school can manage infections effectively. The policy set out the responsibilities of Headteacher, Governors, managers, all staff, contractors and students. This policy also provides links to the necessary guidance to enable the school to manage infections effectively.

Staff must be aware of this policy, of statutory reporting procedures and of the outside agencies involved in dealing with outbreaks of disease. Staff should also be particularly aware of the practical procedures to control the spread of communicable diseases. Staff should also be aware of the First Aid and Administration of Medicines Policy which may also be relevant.

Signature

Bill Kerr, Chair of Governors

Date:

Signature

Philip Reeves, Headteacher

Date:

Distribution of copies

Electronic copies of the policy and any amendments will be distributed to: the Headteacher; Health and Safety Representatives; All Staff; Board members and Administration office.

1. Introduction

Schools are common sites for transmission of infections. Children are particularly susceptible because:

- they have immature immune systems
- have close contact with other children
- sometimes have no or incomplete vaccinations
- have a poor understanding of hygiene practices

This policy provides information for staff managing a range of common and important childhood infections in settings including schools. It includes the principles of infection prevention and control to enable safe working during pandemics e.g. the coronavirus (COVID-19) outbreak.

2. Roles and Responsibilities

2.1. Headteacher

The Headteacher will be responsible for:

- Curriculum Department risk assessments are undertaken, and appropriate controls are in place to manage infection hazards at source in line with the hierarchy of risk control and these are reviewed regularly (e.g. annually) or when there is a significant change.
- Ensuring all staff are made aware of their role(s) and responsibilities in the prevention and control of infection.
- Staff are instructed, informed, monitored and updated in correct infection control procedures and this policy. All staff are to be provided with suitable training commensurate to their roles and responsibilities.
- Staff are informed of any risk to their health from a communicable disease that might arise as a result of their work or working environment and advise them on the means of avoiding either becoming infected or infecting others.
- Incidents and sharp injuries are reported in line with the school reporting procedure and that staff follow the correct procedures and these are investigated to prevent infections and support staff that may be infected.
- Providing appropriate quantities of Personal Protective Equipment (PPE) – suitable protective gloves, aprons, face masks and resuscitation face masks are available at all times.
- Ensuring cleaning procedures are in place to maintain a clean environment and resources are available to staff.
- Records are maintained of staff' Hepatitis B vaccination history in areas where a risk of the disease has been identified.
- The immunisation of students and staff is promoted.

- Good hygiene practices are promoted such as hand washing (20 seconds) and any other guidelines provided by official bodies.
- The school follows the advice given by Government advice and professional bodies.
- Further professional advice is sought when necessary.

In the Headteacher's absence, a Deputy Headteacher assumes the above responsibilities.

The Headteacher delegates functions to other members of staff, who are tasked with the administrative arrangements for ensuring all responsibilities. The Headteacher will always retain the overall responsibility for ensuring that these responsibilities have been carried out.

2.2. All Teaching Staff

Teaching Staff will be responsible for:

- Compliance with the requirements set in this policy.
- Control of infection issues are brought to the attention of the Headteacher.
- Relevant training is completed as required.
- Ensure a high standard of infection control and hygiene is maintained as a matter of good practice.
- Incidents and accidents are reported and recorded immediately in line with the school reporting procedure.
- Report promptly if they are unwell with an infectious disease, follow their GP, UK Health Security Agency (UKHSA) and/or NHS guidance and do not return to school until clear of symptoms for the time specified by their GP, NHS or government guidance.
- Take due care of their own, their colleagues' and students' health and safety.
- Use and maintain work equipment and personal protective equipment (PPE) according to training and manufacturers' instructions.
- Inform the school if they are at higher risk of infections (e.g. pregnancy, underlying medical condition, etc.) or if they have any concerns with regards the school's procedures to control infections.
- Become familiar with relevant risk assessments and follow control measures.
- Incidents are reported immediately, following the school Accident/Incident reporting and investigation procedure.

2.3. Support Staff

Support Staff will be responsible for:

- Ensuring their line manager is promptly informed if there is a reason you are or could be more susceptible to risks presented by infectious diseases.
- Undertake any training required for the role and responsibilities.
- Take due care of their own and their colleagues' health and safety at work.
- Become familiar with relevant risk assessments and follow control measures.

- Ensure a high standard of infection control and hygiene is maintained as a matter of good practice.
- Report promptly if they are unwell with an infectious disease, follow their GP, UKHSA and/or NHS guidance and do not return to school until clear of symptoms for the time specified by their GP, NHS or government guidance.
- Take due care of their own, their colleagues' and students' health and safety.
- Use and maintain work equipment and personal protective equipment (PPE) according to training and manufacturers' instructions.
- Incidents are reported immediately, following the school Accident/Incident reporting and investigation procedure.

2.4. Business Manager

The Business Manager will be responsible for:

- Ensuring suitable and sufficient risk assessments are completed and these take into consideration infection risks.
- Ensure arrangements are in place to maintain good standards of cleaning.
- All materials and equipment required to meet the arrangements of this policy are made available to staff.
- All hirers of the school premises are made aware and comply with the "Contractors and Visitors policy".

2.5 First Aiders

First Aiders will be responsible for:

- Ensuring they are familiar with this policy and fulfil their duties outlined in other sections (E.g. Teaching Staff or Support Staff)
- Individuals may be exposed to infectious substances such as blood and other bodily fluids and should take the following precautions to reduce the risk of infection:
 - Cover any cuts or grazes on their skin with a waterproof dressing
 - Wear suitable disposable gloves when dealing with blood or any bodily fluids
 - Use suitable eye protection and a disposable plastic apron where splashing is possible
 - Use resuscitation face masks if you have to give mouth to mouth resuscitation
 - Wash your hands after each procedure.
 - Become familiar with relevant risk assessments.
 - Follow good hygiene practice
 - Liaise with the facilities team to ensure the school cleaning procedure is followed

2.6 Operational Facilities Team (Premises Team)

The Facilities Team will be responsible for:

- Compliance with the requirements set in this policy.
- Ensuring control of infection issues are brought to the attention of the Headteacher.

- Relevant training is completed as required.
- Ensuring a high standard of infection control and hygiene is maintained as a matter of good practice.
- Incidents and accidents are reported and recorded immediately in line with the school reporting procedure
- Report promptly if they are unwell with an infectious disease, follow their GP, UKHSA and/or NHS guidance and do not return to school until clear of symptoms for the time specified by their GP, NHS or government guidance.
- Take due care of their own, their colleagues' and students' health and safety.
- Use and maintain work equipment and personal protective equipment (PPE) according to training and manufacturers' instructions.
- Inform the school if they are at higher risk of infections (e.g. pregnancy, underlying medical condition, etc.) or if they have any concerns with regards the school's procedures to control infections.
- Good standard of cleaning is maintained at all times.
- That in the event of an outbreak of infection, relevant areas are to be deep cleaned promptly.
- Ensuring the relevant risk assessments are completed and followed.
- The correct PPE is worn when dealing with bodily fluids and cleaning of areas (disposable gloves, plastic aprons, face shields).
- Incidents are reported immediately, following the school Accident/Incident reporting and investigation procedure.

2.7 Catering Team (Catering Contractor – Impact Food)

The Catering Team will be responsible for:

- The catering function within the school must have a recognised Food Management System in place, including a HACCP system (hazard analysis critical control point) which incorporates prerequisites such as pest control, personal hygiene etc. This system should be fully traceable to maintain due diligence.
- All those with the responsibility for food preparation should be aware of their duties under this legislation and have received training commensurate to their level of responsibility in the food preparation area. The minimum training requirement for all kitchen staff is Level 2 Safety, for Supervisors, Managers, Support Chefs and Operations Managers Level 3 Food Safety. If new staff do not hold this certificate when they join the School, arrangements should be made within a month for them to attend a course. New catering staff must be made aware of food hygiene arrangements.
- The Catering Contractor is responsible to ensure all relevant staff training is in place and completed within the correct timeframe, liaising with Business Manager at Thamesmead.
- Incidents are reported immediately, following the school Accident/Incident reporting and investigation procedure.
- That in the event of an outbreak of infection, relevant areas to be deep cleaned promptly.
- The relevant risk assessments are completed and followed.

- The correct PPE is worn when dealing with bodily fluids and cleaning of areas (disposable gloves, plastic aprons, face shields).
- Good standard of cleaning is maintained at all times.
- Ensuring a high standard of infection control and hygiene is maintained as a matter of good practice.
- All staff should complete a Health Questionnaire before commencing employment and when returning from abroad.
- Any member of the catering staff who reports that they are suffering from diarrhoea and/or vomiting should be excluded from food preparation or serving until they are symptom-free for 48 hours.
- Food handlers with skin problems especially on the hands and forearms should be excluded from food preparation until the skin is healed.
- Food handlers suffering from colds and coughs should not be working while still at the acute stage of the illness.
- All food handlers who consult their doctors about any infectious disease should make sure their doctor is aware of the work they do.
- Food handlers who smoke should be reminded to wash their hands after smoking and before resuming their food preparation tasks. Smoking is prohibited on site and should only take place away from the premises.

2.8 Contractors and Visitors

Contractors and Visitors will be responsible for:

- Ensuring the school reporting procedure is followed.
- Ensuring their activities do not introduce infection risks to the School.
- Ensuring a high standard of infection control and hygiene is maintained whilst in school premises as a matter of good practice.
- Any areas which may be contaminated are to be reported to the Facilities Team or their host.

2.9.1 Students and Parents/Carers

Students and Parents/Carers will be responsible for:

- Ensuring they comply with any request from staff to leave the area if someone is unwell.
- They should report any concerns they may have to a member of staff.
- Any student who is unwell should stay away from the school until they have been symptom-free for at least 48 hours as set out in the current exclusion policy set out by UKHSA for schools. Parents are asked to ensure that this happens.
- Ensuring good personal hygiene is practised.

3. Arrangements

How Infection Spreads

Infections are spread in many different ways:

Respiratory spread:

Contact with cough or other secretions from an infected person, like influenza. This can happen by being near the infected person when they cough and then breathe in the organism; or by picking up the organism from an infected item, for example, a used tissue or on an object in the environment, and then touching your nose or mouth.

Direct contact spread:

By direct contact with the infecting organism, for example, contact with the skin during contact sports such as rugby and in gyms, like impetigo or staphylococcal infections.

Gastrointestinal spread:

Resulting from contact with contaminated food or water (hepatitis A), contact with infected faeces or unwashed hands after using the toilet (typhoid fever).

Blood-borne virus spread:

By contact with infected blood or body fluids, for example, while attending to a bleeding person or injury with a used needle (hepatitis B). Human mouths are inhabited by a wide variety of organisms, some of which can be transmitted by bites. Human bites resulting in puncture or breaking of the skin are potential sources of exposure to blood-borne infections, therefore, it is essential that they are managed promptly.

In all education settings, preventing the spread of viruses involves preventing:

- direct transmission, for instance, when in close contact with those sneezing and coughing
- indirect transmission, for instance, touching contaminated surfaces

Prevention and Control

Hand washing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting and respiratory disease. Liquid soap, warm water and paper towels are recommended.

- All staff and students are advised to wash their hands after using the toilet, before eating or handling food, after touching animals, when your hands are visibly dirty and after accidental contact with others.
- Cover all cuts and abrasions with a waterproof dressing.
- Coughing and sneezing easily spread infections. To prevent the transmission of all respiratory infections, all staff and students are encouraged to cover their mouth and nose when coughing or sneezing with a disposable tissue. If no tissue is available to staff and students, they are encouraged to cough or sneeze into the crook of their elbow. Tissues are to be discarded after use and good hand washing/hygiene is to be followed. Spitting should be discouraged.
- Wear disposable gloves and plastic aprons if there is a risk of splashing or contamination with blood or body fluids during an activity. Gloves should be disposable, non-powdered vinyl or latex-free and CE marked. Wear goggles if there is a risk of splashing to the face.

Managing Needle Stick Injuries

Occasionally students or staff may injure themselves with discarded used hypodermic needles which they have found. Dispose of the needle safely to avoid the same thing happening to someone else. This can be done by contacting the Operational Facilities Manager in the first instance then the local authority.

If someone pricks or scratches themselves with a used hypodermic needle:

- wash the wound thoroughly with soap and water
- cover it with a waterproof dressing
- record it in the accident book and complete the accident form
- seek immediate medical attention from your local Accident and Emergency department

Bites

- If a bite does not break the skin: clean with soap and water and no further action is needed.
- If a bite breaks the skin: clean immediately with soap and running water. Record incident in accident book. Seek medical advice as soon as possible (on the same day) to treat potential infection, to protect against hepatitis B, for reassurance about HIV.

Sanitary Facilities

Good hygiene practices depend on adequate facilities. A hand wash basin with warm running water along with a mild liquid soap, preferably wall mounted with disposable cartridges, should be available. Bar soap should not be used.

Place disposable paper towels next to basins in wall mounted dispensers, together with a nearby foot-operated waste paper bin.

Toilet paper should be available in each cubicle.

Suitable sanitary disposal facilities should be provided for female staff and students.

Children with Continence Aids

Pupils who use continence aids (like incontinence pads, catheters) should be encouraged to be as independent as possible. The principles of basic hygiene should be applied by both pupils and staff involved in the management of these aids.

Incontinence pads should be changed in a designated area. Disposable powder-free non-sterile latex gloves and a disposable plastic apron should also be worn. Gloves and aprons should be changed after every pupil. Hand washing facilities should be readily available. Contact your school health team including the School Nurse for further advice.

Dealing with Contaminated Clothing

Clothing of either the student or the first-aider may become contaminated with blood or body fluids. Clothing should be removed as soon as possible and placed in a plastic bag and sent home with the student with advice for the parent on how to launder the contaminated clothing. The clothing should be washed separately in a washing machine, using a pre-wash cycle, on the hottest temperature that the clothes will tolerate.

Prevention and Control during a pandemic

Government guidance should be followed, and a range of approaches and actions should be employed during a virus pandemic or outbreak. These can be seen as a hierarchy of controls that, when implemented, creates an inherently safer system where the risk of transmission of infection is substantially reduced. These include:

- Minimise contact with individuals who are unwell
- Clean your hands often
- Respiratory hygiene (catch it, bin it, kill it)
- Clean surfaces that are touched frequently
- Minimise contact and mixing
- Face coverings are worn
- Personal protective equipment (PPE) (i.e. hazmat suit, apron, gloves, goggles etc)
- Social distancing measures are implemented
- Soft furnishing and equipment that are hard to clean have been removed
- The use of shared resources has been reduced
- Air flow and ventilation is increased by opening windows and students spend more time outdoors.

Accidental Contamination with Bodily Fluids

Blood-borne viruses do not invade the body through intact skin; they can, however, penetrate through open wounds, mucous membrane (mouth), conjunctivae (eyes) and puncture wounds.

In the event of an accident with body fluids that results in possible contamination **IMMEDIATE ACTION** should be taken by the person involved and first aider and if necessary, escalated to the employee's line manager. The steps are:

- make the wound bleed for a few seconds, but do not suck the wound.
- wash the wound with soap and warm running water, do not scrub
- cover the wound
- conjunctivae (eyes), mucous membrane (mouth) should be washed well under running water.
- Report the incident to the Headteacher and ask them to complete, with your help, an accident form as soon as possible. The accident form should note: whether the injury is deep, if there was visible blood on the device causing the injury, or if there is known HIV related illness.

As soon as possible (within the hour)

- Report the matter to your GP or the local A&E department.
- Take the accident form with you to the GP.
- If you have had Hepatitis B vaccination in the past you should remind your GP of the fact.
- However, if you have not had a vaccine within the last six months the doctor will probably decide to give a booster.
- Blood should be taken and tested for blood-borne viruses (Hepatitis B, Hepatitis C and HIV).

- The Health Protection Team should be informed of the incident by the Headteacher/Principal. If the person whose bodily fluids are involved is known, their details should be given to HPT (Refer to section (The Local Health Protection Team))
- The Principal should also report the occurrence to the HSE under RIDDOR (Form 2508A) and ensure that the above actions are carried out by the person involved in the accident.

The Local Health Protection Team (HPT)

The local health protection team is responsible for dealing with outbreaks. Most outbreaks are managed at a local level without needing to form an Outbreak Control Team (OCT.)

The HPT should be contacted (by phone initially) by the school when there is an outbreak of a serious infectious disease in their establishment. The level of reporting is when two or more individuals are reported with the same infectious disease.

The HPT will advise on all management aspects of the situation. This will include information to parents, students and staff, vaccination arrangements (if indicated), possible collection of samples for microbiological analysis and statements to the press.

For the list of reportable diseases see Appendix 2.

Training

Suitable training is delivered to staff where there is an identified risk.

Appropriate training will need to be identified for the different categories of infection risk that staff encounter in their particular jobs. Staff working entirely in the school office are unlikely to require training. Cleaners, facilities staff and staff supporting students with special medical needs will require specific instruction in this area.

The school requires that the minimum training for all food handlers must be the Basic Food Hygiene Certificate. If new staff do not hold this certificate when they join the School, arrangements should be made within a month for them to attend a course. New catering staff must be made aware of food hygiene arrangements.

First Aid

First Aid is an area that might expose individuals to infectious substances such as blood and other bodily fluids. within the training for an Occupational First Aider, there is an element of infection control based on Universal Infection Control Precautions.

Staff responsible for purchasing first aid materials should supply first aiders with suitable disposable gloves, aprons and resuscitation face masks in addition to the basic requirements of the first aid box.

What to do if you suspect an Outbreak of Infection

An outbreak or incident may be defined as:

- an incident in which 2 or more people experiencing a similar illness are linked in time or place
- a greater than expected rate of infection compared with the usual background rate for the place and time where the outbreak has occurred

When to Report

The Headteacher or Senior Leadership Team member will contact the local Health Protection Team as soon as they suspect an outbreak to discuss the situation and agree if any actions are needed.

It is useful to have the information listed below available before this discussion as it will help to inform the size and nature of the outbreak:

- total numbers affected (staff and children)
- symptoms
- date(s) when symptoms started
- number of classes affected

If you suspect cases of infectious illness including coronavirus at your school but are unsure if it is an outbreak, please [call your local HPT](#):

UKHSA Surrey & Sussex Health Protection Team (South East): 0344 225 3861
SE.AcuteResponse@ukhsa.gov.uk

How to Report

The school is to telephone their local HPT as soon as possible to report any serious or unusual illness particularly for:

- Escherichia coli (VTEC) (also called E. coli 0157) or E coli VTEC infection
- Food poisoning
- Hepatitis
- Measles, Mumps, Rubella (Rubella is also called German measles)
- Meningitis
- Tuberculosis
- Typhoid
- Whooping Cough (also called Pertussis)

The [full list of notifiable diseases](#) was updated in April 2025.

The local HPT can also draft letters and provide factsheets for parents and carers to ensure the most up to date information is given.

Immunisation

Immunisations are checked at school entry and at the time of any vaccination. Parents are encouraged to have their child immunised.

Cleaning the Environment

Cleaning of the environment, including equipment, is an important function for the control of infection in childcare settings. It is important that cleaning schedules clearly describe the activities needed, the frequency and who will carry them out. Cleaning standards are monitored regularly by the school. Cleaning staff should be appropriately trained and have access to personal protective equipment.

Cleaning Contract

Essential elements of a comprehensive cleaning contract include daily, weekly and periodic cleaning schedules, based on national guidance. A proper colour coding system is recommended by the Health and Safety Executive. Choosing to employ a colour system in your workplace can make cleaning easy, efficient and in turn, increase general hygiene and cleanliness.

Colour-coded equipment should be used in different areas with separate equipment for kitchen, toilet, classroom and office areas (red for toilets and washrooms; yellow for hand wash basins and sinks; blue for general areas and green for kitchens). Cloths should be disposable (or if reusable, disinfected after use).

Cleaning solutions should be stored in accordance with Control of Substances of Hazardous to Health (COSHH), and cleaning equipment changed and decontaminated regularly. Consideration should be given to situations where additional cleaning will be required including during term time (for example in the event of an outbreak) and how the school might carry this out.

The Business Manager with the support of the Operational Facilities Manager will monitor cleaning standards and discuss any issues with cleaning staff.

Cleaning Up, Blood and Body Fluid Spills

All spillages of blood, faeces, saliva, vomit, nasal and eye discharges should be cleaned up immediately, wearing appropriate PPE such as plastic aprons, disposable gloves (vinyl) not latex as known to cause allergic reactions in some people. Visor or face shield if there is a risk of splashes protection should be worn.

The area should be cleaned thoroughly with a product which combines detergent and disinfectant and hot water (and ensure it is effective against both bacteria and viruses). Always follow the manufacturer's instructions. Use disposable paper towels or cloths to clean up blood and body fluid spills and disposed of after use by flushing down the toilet where possible and where not possible, the waste should be placed in biohazard or clinical waste bags and a waste disposal contractor should be contacted to request a clinical waste collection. A spillage kit should be available for bodily fluids like blood, vomit and urine.

Any cuts on the hands or arms should be covered with waterproof plasters, clean the student (or staff member) and remove them from the immediate area.

Isolate the affected area with signs, chairs, cones etc immediately.

Disposal of Waste:

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):

- Should be put in a plastic rubbish bag and tied when full.
- The plastic bag should then be placed in a second bin bag and tied.
- It should be put in a suitable and secure place and marked for storage until the individual's test results are known.

Disposal of Sharps

- Where staff and students are required to administer medicine via needles or syringes, appropriate sharp boxes are to be provided and disposed of by the individual, which are located and locked in a safe place with the First Aid Team in the Front Office.
- Sharps are sometimes found discarded on school premises. Sharps include needles or syringes, scalpel blades, and razor blades etc. Used sharps will inevitably have traces of blood on them. Therefore, they mustn't be allowed to cut or penetrate the skin of another person after they have been used.
- Appropriate PPE will be made available to dispose of sharps such as litter pickers and/or sharps gloves.
- Sharps must never be disposed of into waste bags or receptacles and must be disposed of in sharp boxes.
- Sharps disposal procedure dictates that all sharps be disposed of using safe, colour coded pharmaceutical waste bins, using the following format:
 - Purple lid: for sharps that may be contaminated with cytotoxic or cytostatic substances
 - Orange lid: for sharps that haven't been contaminated with medication
 - Yellow lid: for any other sharps, including those contaminated with medicine
- Sharps' boxes should only be filled to where it says "Do not fill above this line" A sharps' box will need to be available in all areas where there is a chance of discarded needles being discovered.
- The contents of sharp boxes should be treated as clinical/hazardous waste and as such, should be disposed of appropriately.

Enhanced Cleaning during an Outbreak of Infection

In the event of an outbreak of infection at your school, the local health protection team will recommend enhanced or more frequent cleaning, to help reduce transmission. Advice may be given to ensure regular cleaning of areas with particular attention to door handles; toilet flushes and taps and communal areas where surfaces can easily become contaminated such as handrails.

Plans should be developed for such an event on how the school might carry this out which could also include during term time. Dedicated cleaning equipment must be colour coded according to area of use.

Vulnerable Children

The school will ascertain if enrolled children have medical conditions that make them vulnerable to infections that would rarely be serious in most children, e.g. children being treated for leukaemia or other cancers, on high doses of steroids and with conditions that seriously reduce immunity.

The school risk assessment will consider if further precautions need to be taken to protect vulnerable children and these will be discussed with the parent/carer in conjunction with their medical team.

Precautions will be taken to ensure vulnerable children are not knowingly exposed to chickenpox, measles and parvovirus B19 and, if they are exposed to either of these, their parent/carer will be informed promptly and further medical advice will be sought.

Staff welfare

Staff Immunisation

All staff should undergo a full occupational health check before starting employment; this includes ensuring they are up to date with immunisations, including Measles, Mumps, Rubella (MMR).

Specific immunisation is not necessary for All Staff in the context of their work. However, school staff that have been identified as being at risk of specific infections, such as, Tuberculosis (TB), Rubella, Polio and Tetanus. Staff should be issued with advice upon employment and thereafter.

It is recommended that the Premises Team and all trained First Aiders should have up to date Tetanus vaccinations and also be offered Hepatitis B vaccinations.

It is not considered necessary for the Hepatitis B or HIV/AIDS status of staff to be declared. If the infection control procedures set out in these guidelines and are followed, there will be no risk to either students or other staff.

Exclusion

Staff employed in school settings should have the same rules regarding exclusion applied to them as are applied to the children. They may return to work when they are no longer infectious, provided they feel well enough to do so.

Pregnant Staff

Managers need to consider the risks for new and expectant mothers when carrying out activity/task risk assessments.

Ensure a specific New and Expectant Mother Risk Assessment is carried out as soon as notification of pregnancy or breastfeeding is given and ensure infection control is considered on the assessment; any pre-existing medical condition or disability may also be relevant. The risk assessment should be reviewed as the pregnancy progresses and as circumstances dictate, and also on return back to work after maternity leave.

If a pregnant woman develops a rash or is in direct contact with someone with a rash who is potentially infectious, she should consult her doctor or midwife.

Chickenpox can affect the pregnancy if a woman has not already had the infection. The GP and midwife should be informed promptly. Shingles is caused by the same virus as chickenpox therefore anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles.

Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed, the midwife should be informed immediately. All female staff under the age of 25 years, working with young children, should have evidence of 2 doses of MMR vaccine or a positive history of measles.

If a pregnant woman comes into contact with German measles she should inform her GP and midwife immediately. The infection may affect the developing baby if the woman is not immune and is exposed in early pregnancy.

All female staff born after 1970 working with young children, should have evidence of 2 doses of MMR vaccine or a positive history of Rubella.

Slapped cheek disease (Parvovirus B19) can occasionally affect an unborn child if exposed early in pregnancy. The pregnant woman should inform their midwife promptly.

Pregnant staff members are promptly informed of any confirmed infectious diseases known in the school by the HR Manager.

Food Handling Staff

Food handlers and catering staff may present a particular risk to the health of their students and staff if they become infected or have close contact with diseases that can be transmitted to others via the medium of food or drink. These diseases commonly affect the gastrointestinal system (stomach and bowel) and usually cause diarrhoea or vomiting, or both.

Food handling staff suffering from such diseases must be excluded from all food handling activity in the school until advised by the local Environmental Health Officer that they are clear to return to work. There are legal powers for the formal exclusion of such cases but usually voluntary exclusion will suffice with 'off work' certificates from the GP, as necessary.

Staff and attenders should not be present at the school if they are currently suffering from diarrhoea or vomiting, or both. At the very least, persons suffering from gastro-intestinal diseases should not return to work until 48 hours post recovery (no further diarrhoea or vomiting).

Employers are to notify their local Environmental Health Department immediately that they are informed of a member of staff engaged in the handling of food has become aware that he or she is suffering from, or is the carrier of, any infection likely to cause food poisoning.

This policy will be shared with Innovate Services who are responsible for the provision of catering for Thamesmead School, this and their own policy will be shared with all catering staff at the time of appointment. Food handlers are required by law to inform their employer immediately if they are suffering from:

- Typhoid Fever
- Paratyphoid Fever
- Other Salmonella Infections
- Dysentery
- Shigellosis
- Diarrhoea (cause of which has not been established)
- Infective Jaundice
- Staphylococcal Infections likely to cause food poisoning like impetigo, septic skin lesions, exposed infected wounds, boils
- E. coli VTEC infection

Managing Specific Diseases and Infections

Please refer to UK Health Security Agency advice on specific diseases and infections -

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z>

Pets and Animal Contact

Pond dipping activities might bring students into contact with leptospirosis (Weil's Disease). This is a disease caused by contact with the urine of infected rats.

The organism can penetrate the skin, especially broken skin. Therefore, cover any abrasion with waterproof plasters and wash thoroughly after contact with pond or river water.

Symptoms develop about ten days after contact and can include severe headache, severe muscle aches and tenderness, redness of the eyes, loss of appetite, vomiting and sometimes a skin rash.

Anyone who has been in contact with a pond or river water and subsequently develops any of these symptoms within 10 days should mention the contact to their doctor. Early treatment with antibiotics is usually effective. Symptoms can seem similar to influenza illness.

Hygiene in Kitchens and Eating Areas

The Catering Manager/Contractor is responsible for the safe operation of the catering facilities and must ensure:

- Safe food preparation is key to the prevention of food-related illnesses. The day-to-day responsibility for managing food safety has been delegated to Impact Food Group.
- The cleanliness of all food equipment, including plates and cutlery for the Dining hall, is the responsibility of the Catering staff.
- Food allergies are considered and controls are in place and the Kitchen log book is completed in full daily.
- All recommendations from visiting enforcement officers are acted upon within the recommended guidelines.
- Any person working in a food area that knows or suspects that they are suffering from or are a carrier of any disease that is likely to be transmitted through food or has an infected wound, skin infection, skin condition, sore or diarrhoea, must inform their immediate line manager and discontinue food handling duties
- Any person suffering from food poisoning must not be allowed to engage in food handling activities until they have been free from any symptoms for 48 hours, once any treatment has ceased and have received medical clearance.
- The catering function within the school ensures that pre-requisites are met before implementing the hazard analysis critical control point system (HACCP).

In addition to the generic prerequisites, the school has compiled additional pre-requisites, where necessary. Generic pre-requisites are in place to ensure food safety is maintained and this includes ensuring that good hygiene procedures and processes are in place, as follows: -

- The use of approved suppliers
- Drinking water
- Integrated pest management
- Stock rotation
- Staff training

- Good design of equipment and premises
- Labelling and traceability
- Personal hygiene of employees
- Cleaning and sanitising
- Preventative maintenance
- Waste disposal

Conclusions

- Basic good hygiene practice is the key to infection control throughout our school.
- The inclusion of infection control issues in risk assessments, as well as training staff on induction and at suitable intervals thereafter, will reduce the likelihood of infections being spread unnecessarily. Wider infection control measures will be needed if there is an outbreak, such as enhanced cleaning programmes and more comprehensive control measures to reduce exposure following guidance from the local HPT.

Appendix 1 – Diarrhoea and vomiting outbreak – school action checklist

Date Completed:			
Checklist Completed By (Print Name):			
Name & Tel No of Institution:			
Name of Head Teacher/Manager:			
	Yes	No	Comments:
Deploy 48 hour exclusion rule for ill children and staff			
Liquid soap and paper hand towels available			
Staff to check/encourage/supervise hand washing in children			
Check that deep cleaning, ie twice daily (min) cleaning and follow through with bleach/Milton/ appropriate disinfectant is being carried out, (especially toilets, frequently touched surfaces eg handles and taps and including any special equipment and play areas). Ensure that all staff/contractors involved in cleaning are aware of, and are following, the guidance			
Disposable protective clothing available (ie non-powdered latex/synthetic vinyl gloves & aprons)			
Appropriate waste disposal systems in place for infectious waste			
Advice given on cleaning of vomit (including steam cleaning carpets/furniture or machine hot washing of soft furnishings)			
Clean and disinfect hard toys daily (with detergent and water followed by bleach/Milton). Limit and stock rotate toys			
Suspend use of soft toys plus water/sand play and cookery activities during outbreak			
Segregate infected linen (and use dissolvable laundry bags where possible)			
Visitors restricted. Essential visitors informed of outbreak and advised on hand washing			
New children joining institution suspended			
Keep staff working in dedicated areas (restrict food handling if possible). Inform HPT of any affected food handlers.			
Check if staff work elsewhere (restrict) and that all staff are well (including agency). Exclude if unwell (see above re 48 hour rule)			
HPT informed of any planned events at the institution			
Inform School Nurse and discuss about informing OFSTED, if applicable.			

Appendix 2 – List of Notifiable Diseases

Diseases notifiable (to Local Authority Proper Officers) under the Health Protection (Notification) Regulations 2010:

- Acute encephalitis
- Acute infectious hepatitis
- Acute meningitis
- Acute poliomyelitis
- Anthrax
- Botulism
- Brucellosis
- Cholera
- COVID-19
- Diphtheria
- Enteric fever (typhoid or paratyphoid fever)
- Food poisoning
- Haemolytic uraemic syndrome (HUS)
- Infectious bloody diarrhoea
- Invasive group A streptococcal disease
- Legionnaires' disease
- Leprosy
- Malaria
- Measles
- Meningococcal septicaemia
- Monkeypox
- Mumps
- Plague
- Rabies
- Rubella
- Severe Acute Respiratory Syndrome (SARS)
- Scarlet fever
- Smallpox
- Tetanus
- Tuberculosis
- Typhus
- Viral haemorrhagic fever (VHF)
- Whooping cough
- Yellow fever

The patient's physician would report the above diseases to the local Health protection team. The HPT will advise the school of any action necessary.

If you require advice on any communicable disease, please contact the Local Health Protection team.

The Headteacher is required to contact the local health protection team if they suspect an outbreak, any serious or unusual illness or if any advice is needed.

RIDDOR reporting is required in the case of biological agents such as legionella if it is work-related. A report should be made whenever there is reasonable evidence suggesting that work-related exposure was the likely cause of the disease. The doctor may indicate the significance of any work-related factors when communicating their diagnosis. Follow this link to report an [Occupational Disease](#).

Appendix 3 – Useful links

Guidance - Health protection in education and childcare settings

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

NHS Immunisation information:

<https://www.nhs.uk/conditions/vaccinations/>

Children and Family Health Surrey school nursing

<https://childrenshealthsurrey.nhs.uk/services/school-nursing-general>

Public Health England School Zone – teaching resources

<https://campaignresources.phe.gov.uk/schools>