

Daffodil Grammar School for Girls

Infection Prevention and Control (IPC) Policy

School address: 163 Commercial Road, London, E1 2DA

Proprietor: ASM Anisuzzaman

Headteacher: Mr Stephen Montford

Health and Safety Lead: Eman Ahamed

Applies to: All staff, pupils, visitors and contractors

Review cycle: Annual and in response to public health updates

1. Purpose, legal context and safeguarding link

The purpose of this policy is to establish a comprehensive and consistent approach to preventing, identifying and managing infection risks within Daffodil Grammar School for Girls.

Infection control in a school is not simply a matter of cleanliness. It is directly linked to safeguarding, attendance, pupil welfare and the school's legal duty to provide a safe environment. Illness can spread rapidly in school settings due to prolonged close contact, shared surfaces, and the movement of pupils throughout the day. If not managed effectively, this can lead to significant disruption, risk to vulnerable pupils or staff, and potential safeguarding concerns where pupils are absent repeatedly or for prolonged periods due to illness.

This policy reflects the school's responsibility under health and safety law and the Independent School Standards to ensure that the welfare of pupils is protected. It also reflects current public health expectations that schools must operate in a way that reduces transmission risk while maintaining normal education wherever possible.

2. Strategic approach and operational philosophy

The school adopts a structured and layered approach to infection prevention and control.

The first layer is environmental control. This involves maintaining clean, well-ventilated spaces and reducing contamination on surfaces.

The second layer is personal hygiene. This involves ensuring that pupils and staff understand and practise effective hand and respiratory hygiene.

The third layer is behavioural control. This involves reinforcing expectations about illness, absence and hygiene-related conduct.

The fourth layer is response and containment. This involves identifying illness early, responding appropriately, and preventing further spread.

The fifth layer is leadership oversight. This ensures that procedures are not only written but are actively implemented, monitored and improved.

This layered approach ensures that the school does not rely on a single measure but instead builds resilience through multiple reinforcing controls.

3. Leadership, accountability and implementation

The proprietor retains overall accountability for ensuring that appropriate infection control measures are in place and functioning effectively.

The Headteacher is responsible for ensuring that this policy is implemented in practice. This includes ensuring that staff are aware of expectations, that procedures are followed consistently, and that appropriate action is taken when concerns arise.

The Health and Safety Lead has operational responsibility for coordinating infection control measures. This includes overseeing cleaning arrangements, monitoring hygiene standards, responding to incidents, maintaining supplies and liaising with external agencies where necessary.

However, infection control is not the responsibility of one individual. Every member of staff has a role in implementing this policy through their daily conduct. This includes modelling good hygiene, identifying concerns early, and responding appropriately to illness.

4. Daily hygiene practices and behavioural expectations

Effective infection control depends on consistent daily behaviour.

Hand hygiene must be embedded as a routine part of the school day. Pupils must be explicitly taught when and how to wash their hands. This is not assumed knowledge. Staff must actively reinforce expectations, particularly with younger pupils in Key Stage 3 who may not yet have fully developed independent hygiene habits.

Handwashing must take place using soap and water and must be thorough. Staff must ensure that pupils do not treat handwashing as a token action. Where appropriate, staff should supervise or monitor compliance.

In addition to hand hygiene, respiratory hygiene must be emphasised. Pupils must understand that coughing or sneezing openly spreads infection. They must be instructed to use tissues, dispose of them immediately and wash their hands afterwards.

Staff must model these behaviours consistently. Pupils are more likely to follow expectations when they see them demonstrated.

5. Environmental cleanliness and practical implementation

The cleanliness of the physical environment is a critical factor in reducing transmission.

The school will ensure that cleaning is not superficial but targeted. Frequently touched surfaces, such as door handles, desks, switches and shared equipment, must be cleaned regularly and effectively.

Toilets must be maintained to a high standard. Poorly maintained toilet facilities can become a source of infection and discourage proper hygiene practices.

Cleaning schedules must be structured and monitored. It is not sufficient to assume that cleaning is taking place. Leadership must ensure that cleaning staff understand their responsibilities and that standards are maintained consistently.

Where there is known illness, particularly involving vomiting, diarrhoea or other high-risk symptoms, enhanced cleaning must be carried out promptly. Areas must be cleaned using appropriate methods and products.

6. Identification and management of illness in school

Early identification of illness is essential to preventing spread.

Staff must be attentive to pupils who appear unwell. This includes not only obvious symptoms such as vomiting or fever, but also less obvious indicators such as lethargy, withdrawal, persistent coughing or unusual behaviour.

If a pupil becomes unwell, the response must be structured. The pupil must be assessed, supervised and, where appropriate, separated from others to reduce risk.

Separation does not mean isolation without supervision. The pupil must remain under adult care at all times.

Parents must be contacted promptly where a pupil is not fit to remain in school. The school must make clear that attendance while unwell is not acceptable and may place others at risk.

Staff must exercise professional judgment but must not minimise symptoms that could indicate infectious illness.

7. Staff illness and professional responsibility

Staff have a professional duty to act responsibly when they are unwell.

A staff member who attends work while infectious places pupils and colleagues at risk and may contribute to wider disruption.

Staff must not attend school if they are experiencing symptoms that could be contagious. This is not simply a matter of personal attendance but of professional responsibility.

Leadership must reinforce this expectation and ensure that staff do not feel pressured to attend when unwell.

8. Attendance, exclusion and return to school

The school must balance attendance expectations with infection control.

Pupils who are unwell must not attend school. Parents must be clearly informed of this expectation.

The school will follow current public health guidance regarding exclusion periods for infectious diseases. This includes conditions such as vomiting and diarrhoea, where pupils must remain at home for a specified period after symptoms cease.

The school must also exercise judgment where symptoms persist or where there is uncertainty about fitness to return.

Attendance systems must not override health considerations. However, the school must also ensure that absence is monitored and that patterns of illness are not masking other concerns.

9. Outbreak identification and response

An outbreak may occur where multiple cases of illness arise within a short period.

The school must be alert to patterns, such as:

- multiple pupils in the same class becoming unwell
- similar symptoms appearing across groups
- increased absence linked to illness

Where an outbreak is suspected, the school must act promptly.

This may involve:

- reviewing cleaning arrangements
- reinforcing hygiene expectations
- contacting public health authorities where appropriate
- communicating with parents

The school must respond proportionately but decisively. Delay in responding to an outbreak can significantly increase spread.

10. First aid, bodily fluids and high-risk situations

Situations involving bodily fluids present a higher risk of infection.

Staff providing first aid must:

- use appropriate protective equipment where necessary
- avoid direct contact with bodily fluids
- ensure that any contamination is cleaned promptly and safely

Spillages must be managed using appropriate procedures and materials.

Staff must not improvise in such situations. Proper procedures must be followed consistently.

11. Ventilation and physical environment

The school recognises that ventilation plays an important role in reducing airborne transmission.

Where possible, classrooms and indoor spaces should be ventilated. This may involve opening windows or ensuring that ventilation systems are functioning effectively.

However, ventilation must be balanced with safety, security and comfort. Staff must use professional judgment to maintain an appropriate environment.

12. Communication and awareness

Effective infection control depends on clear communication.

The school must ensure that:

- staff understand expectations
- pupils are reminded regularly
- parents are informed of relevant guidance

Communication must be consistent and accurate. Mixed messages can undermine compliance.

Where necessary, the school will provide updates in response to changes in public health guidance or emerging concerns.

13. Monitoring, compliance and leadership oversight

The effectiveness of this policy depends on implementation, not documentation.

Leadership must actively monitor:

- hygiene practices
- cleanliness standards
- staff response to illness
- pupil behaviour

This may involve observation, discussion with staff, and review of incidents.

Where weaknesses are identified, the school must act promptly to address them.

14. Continuous improvement and review

Infection control is not static. The school must remain responsive to new guidance, emerging risks and lessons learned from experience.

This policy will be reviewed regularly and updated as required.

Staff feedback will be considered as part of this process.

15. Final statement

Infection prevention and control is a shared responsibility that requires consistent, informed and responsible behaviour from all members of the school community.

Daffodil Grammar School for Girls is committed to maintaining an environment in which risks are actively managed, standards are upheld and the health and wellbeing of pupils and staff are protected at all times.