The Percy Hedley Foundation Health and Safety Manual

Approved:	**7th August 2026**
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Version number	**8**

Equality Impact Assessment

The Foundation's commitment is to create a positive culture of respect for all staff and service users and to identify, remove or minimise risks of unlawful discrimination and disadvantage in its policies, functions and activities. As part of its development this document has been assessed in line with The Foundation's equality impact assessment procedure.

CONTENTS

Contents

1. INTRODUCTION **4**

2. HEALTH AND SAFETY POLICY STATEMENT **12**

3. ORGANISATION FOR HEALTH AND SAFETY **14**

4. HEALTH AND SAFETY RESPONSIBILITIES **16**

The Foundation Board of Trustees 16
Chief Executive Officer 16
Executive Team 16
Heads Teachers/Heads of Service 17
Health, Safety & Environment Manager 18
Foundation Staff 19
Contractors 19
WorkNest 20
Health and Safety, Quality, Wellbeing & Environment Committee 21

5. HEALTH AND SAFETY RULES **23**

General 24
Working Practices 24
Hazard / Warning Signs and Notices 25
Working Conditions/Environment 25
Fire Precautions 25
Accidents, incident and near misses 25
Health 26
Employer's Transport 26
Rules Covering Gross Misconduct 26

6. ARRANGEMENTS **28**

Accident, Incident near miss and work related and Ill-Health Recording, Reporting and Investigation 28
Administration of medication 29
Allergens and intolerances 31
Asbestos 31
Ball Pools 31
Bedrails 32
Communication and Consultation 33
Contractors 33
COVID 19 34
Design & Technology departments in Educational and Adult Services 35
Disabled Persons 40
Display Screen Equipment 41
Driving 41
Dysphagia 41
Educational Visits 41
Drugs and Alcohol 46
Electricity 47
Environment & Sustainability 48
F Gases 48
Fire 48
First Aid 49
Food safety 50
Fundraising/Events 54
Gas Installations and Appliances 55

This document is controlled electronically and shall be deemed an uncontrolled documented if printed. The document can only be classed as 'Live' on the date of print.

Hazardous Substances (COSHH) 55
Health, Safety and Welfare 56
Hot Water and Hot Surfaces 57
Hybrid working 58
Infection Prevention and Control 58
Interactive Whiteboards 61
Legionnaires Disease/water management 62
Lockdown or invacuation policies and procedures 63
Lifting Equipment 63
Lone Working 64
Minibuses and electric fleet 65
Moving and Handling 69
New and Expectant Mothers 70
Night Working 71
Outdoor Play Equipment 72
Permits to Work 74
Personal Protective Equipment 75
Physical Education 76
Trampolines and rebound therapy 78
Positive Behaviour Management 79
Printing 79
Radon 80
Risk Assessment 80
Science (education only) 81
Self-harm 84
Smoking (to include E Cigarettes, vaping) 84
Stress 84
Swimming Pool 85
Temporary Employees 89
Training 89
Vibration 91
Violence to Staff 91
Visitors 92
Volunteers 93
Waste Management 93
Wellbeing 94
Window and balcony safety 94
Work Equipment 95
Work at Height 96
Work Experience Placement 97
Young People 100

7. RISK ASSESSMENT **102**

Risk Assessment 102
Fire Risk Assessment 105

8. MONITORING OF HEALTH AND SAFETY **108**

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INTRODUCTION

This document is controlled electronically and shall be deemed an uncontrolled documented if printed. The document can only be classed as 'Live' on the date of print.

1. INTRODUCTION

This Health and Safety manual was prepared by WorkNest on our behalf and with our involvement. It contains our Health and Safety Policy as required by the Health and Safety at Work Act 1974 and it defines the way we manage the health and safety hazards and risks associated with our business, premises and activities.

The Percy Hedley Foundation (hereafter "The Foundation") are committed to managing health and safety effectively to protect our employees and other persons with whom we interact because we recognise that we have not only a moral and legal duty, but also that our employees are our greatest asset.

Our Health and Safety Policy Statement sets out our commitment and the objectives we aspire to in managing health and safety. It is signed by the most senior person in our organisation to demonstrate that our commitment is led from the top.

Our approach to managing health and safety will be pragmatic and proportionate and will be prioritised according to risk with the objective of maintaining continuous improvement. We accept that we cannot eliminate risk from everything we do but we can manage risk in such a way that exposure to hazards is controlled as far as is reasonably practical.

We recognise that improvement in health and safety will not happen by chance and that planning to manage using a systematic approach through risk assessment is a necessary first step and an ongoing process. In moving forwards we will wherever possible eliminate risk through selection and design of buildings, facilities, equipment and processes. Where risks cannot be eliminated they will be minimised by the use of physical controls or, as a last resort, through systems of work and personal protection.

Our success in managing health and safety will be measurable and we look to establish key performance indicators against which we can monitor our progress to identify future actions to go into our improvement programme.

Based on our performance measurement in the form of accident monitoring, internal monitoring and external audits we will review our health and safety arrangements periodically and at least annually. The results of our measurement will be recorded and presented to the Board in our Annual Report.

POLICY REVIEW

This Health and Safety Policy will be reviewed annually by WorkNest Ltd in conjunction with our nominated responsible person.

As each review is completed it will be signed off by the consultant from WorkNest and confirmed by our nominated responsible person.

Review Date	Signed on behalf of WorkNest	Confirmed
29th November 2016	**Gary Stoker**	
14th June 2018	**Gary Stoker**	
6th August 2020	**Gary Stoker**	
26th July 2022	**Gary Stoker**	
30th May 2024	**Gary Stoker**	
23rd June 2026	**Daniel Atchison**	

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DOCUMENT CONTROL

The hardcopy of the Health and Safety Policy provided will remain the controlled copy and will be recorded on the register. Any amendments made to the policy will be provided for each of these accordingly to ensure all copies in circulation remain the current version. Staff should access the policy via PHF Connect.

Should further copies of the policy be printed either in whole or part, then these will be marked as 'UNCONTROLLED COPY'. Where further controlled copies are required then these should be issued by the Health, Safety & Environment Manager and added to the register of controlled copies.

Forms from the policy manual are available to be printed or copied from the Health and Safety area of PHF Connect, and it will remain the responsibility of the manager to ensure the correct form is in use.

Register

Copy Number or Reference	Location kept
	Health and Safety office

AMENDMENT RECORD

Any amendments made to the Health and Safety Policy will be recorded below with information on changes made.

Where significant changes are to be made which could impact on the business or client, we will consider the reasons for change, potential problems and how it will be implemented.

Date	Section	Ref /Title	Details of amendment made	Change made by
29.11.16	2	Policy	Policy Statement updated.	Gary Stoker
29.11.16	6	Accident/ Incidents	Section updated to reflect RIDDOR changes.	Gary Stoker
29.11.16	6	Disabled Persons	Section updated to include SEN.	Gary Stoker
29.11.16	6	Educational Visits	CBR references changed to DBS.	Gary Stoker
29.11.16	6	Violence to Staff	Policy included in arrangements section.	Gary Stoker
29.11.16	HB	Handbook	Handbook updated to reflect Manual changes.	Gary Stoker
29.11.16	HB	Handbook Guidance	COSHH guidance & Fire Chart updated.	Gary Stoker
23.5.2018	6	DSE	New Foundation policy for DSE	Claire Snowdon
23.5.2018	6	Volunteers	New section included on volunteering on PHF premises or at events	Claire Snowdon

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24.5.2018	6	Infection control	Section update to reflect Foundation policy changes.	Claire Snowdon Lindsay Elliott
24.5.2018	6	Positive Behaviour Management	Inclusion of specific section on Behaviour Management.	Claire Snowdon
13.6.2018	6	Environmental policy	Review of policy to reflect current initiatives.	Claire Snowdon
13.6.2018	6	Hot water and hot surfaces	Inclusion of section on this risk.	Claire Snowdon
13.6.2018	6	Window and balcony safety	Inclusion of section on this risk.	Claire Snowdon
13.6.2018	8	Monitoring of Health and Safety	Reviewed to include H&S audit and tracker.	Claire Snowdon
13.6.2018	6	Administration of medication	Replaced section supporting students with medical needs.	Claire Snowdon
13.6.2018	4	Health and safety responsibilities	Updated to reflect current structure.	Claire Snowdon
14.6.2018	Policy Manual	All Sections	All section reviewed to verify Percy Hedley changes. Document formatting amended as necessary. Contents field updated	Gary Stoker
27.6.2018	6	Asbestos	Reviewed to include new asbestos management plan.	Claire Snowdon
27.6.2018	6	Accident, incident and near miss	Reviewed to reflect current policy.	Claire Snowdon
1.8.2018	6	Fundraising/Events, Ball Pools, fireworks and hire of inflatables and fairground rides, trampolines/rebound.	Addition of sections in line with new insurance requirements	Claire Snowdon
06.08.2020	HB	Handbook	Hazardous Substance (COSHH) guidance up dated to reflect new signage.	Gary Stoker
06.08.2020	Policy Manual	Introduction	Ellis Whittam Advice line number updated.	Gary Stoker
06.08.2020	Policy Manual	All sections	All section reviewed to verify Percy Hedley changes. Document formatting amended as necessary. Contents field updated.	Gary Stoker
24.08.2020	Policy Manual	Accident, incident and near miss	Updated to reflect current policy and procedure.	Claire Snowdon
24.8.2020	Policy Manual	Driving, Minibuses	Updated to refer to new Transport policy.	Claire Snowdon

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24.8.2020	Policy Manual	Dysphagia, Positive Risk taking, Covid 19.	Addition of sections to Policy Manual.	Claire Snowdon
24.08.2020	Policy Manual	All sections.	Full review on Manual to reflect current arrangements/practice.	Claire Snowdon
26.07.2022	Front page	Policy & Handbook	Ellis Whittam logo changed to WorkNest Logo.	Gary Stoker
26.07.2022	Policy Manual	All sections	All references to Ellis Whittam removed and replaced with WorkNest.	Gary Stoker
26.07.2022	Policy Manual	All sections	All section reviewed to verify Percy Hedley changes. Document formatting amended as necessary. Contents field updated.	Gary Stoker
26.07.2022	Policy Manual & Handbook	Arrangements	All arrangements reviewed and no legislative changes required on this occasion.	Gary Stoker
26.07.2022	Policy Manual & Handbook	Policy Statement	Statement reset and will require date and CEO signature.	Gary Stoker
30.8.2022	Policy Manual	Arrangements	Removed AIN policy which was previously embedded in the manual and referred to policy on PHF Connect.	Claire Snowdon
30.8.2022	Policy Manual & Handbook	H&S rules	Expanded section on footwear to stipulate closed flat footwear is required for those delivering day to day support to residents, people we support and students.	Claire Snowdon
30.08.2022	Handbook	Fire	Inclusion of photograph of green emergency door release units so staff know how to operate if door does not fail safe.	Claire Snowdon
30.8.2022	Policy Manual	Radon	Inclusion of section on risks around RADON and requirement to have surveys available.	Claire Snowdon
30.8.2022	Policy Manual	All sections	Updated reference to Health & Safety Committee and replaced with Health Safety, Quality and Wellbeing Committee.	Claire Snowdon
30.08.2022	Policy Manual & Handbook	Arrangements	Included section on Wellbeing	Claire Snowdon
30.08.2022	Policy Manual & Handbook	Arrangements	Included requirement for Paediatric first aiders where caring for babies and young children (0-5 years).	Claire Snowdon
16.02.2024	Policy statement	H&S Policy statement	Policy & handbook updated to include statement signed by new CEO.	Claire Snowdon
30.05.2024	Policy Manual	All sections	All section reviewed to verify Percy Hedley changes. Document formatting amended as necessary. Contents field updated.	Gary Stoker

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30.05.2024	Policy Manual & Handbook	Arrangements	All arrangements reviewed and no legislative changes required on this occasion.	Gary Stoker
1.7.2024	Policy statement	H&S Policy statement	Policy & handbook updated to include statement signed by interim CEO.	Claire Snowdon
1.07.2024	Policy	Lone working	Updated to include arrangements in independent supported living (ISL)	Claire Snowdon
1.07.2024	Policy	Arrangements	Arrangements section update to include management of bedrails.	Claire Snowdon
1.07.2024	Policy	H&S rules	Arrangements section updated to include more explicit guidance around footwear, nails/nail varnish/false nails and jewellery.	Claire Snowdon
1.07.2024	Policy	Arrangements	Update to include risks around self-harm.	Claire Snowdon
1.07.2024	7	Risk assessment	Update to include 3 year frequency for external FRA	Claire Snowdon
1.07.2024	6	F Gases	Added section around management of equipment containing F Gases.	Claire Snowdon
1.07.2024	6	Asbestos	Removed narrative and signpost to asbestos management plan on PHF Connect.	Claire Snowdon
1.07.2024	6	Display screen equipment	Removed narrative and signpost to DSE on PHF Connect.	Claire Snowdon
1.07.2024	6	Hybrid working	Added section and signpost to Hybrid working policy on PHF Connect.	Claire Snowdon
1.07.2024	6	Lockdown/invacuation procedures	Added section on invacuation and lockdown procedures.	Claire Snowdon
1.07.2024	6	Minibus	Referenced use of fleet management software Verizon.	Claire Snowdon
1.07.2024	6	Driving	Removed narrative and signpost to Transport policy on PHF Connect.	Claire Snowdon
23.06.2026	Policy Manual & Handbook	Arrangements	All arrangements reviewed and no legislative changes required on this occasion.	Daniel Atchison
11.08.2026	6	Allergens and intolerances	Arrangements section updated to include reference to separate Allergy Policy.	Claire Snowdon
11.08.2026	6	Fire	Updated to reference lithium batteries.	Claire Snowdon
11.08.2026	6	Minibuses	Updated to reference electric fleet and specify the legal requirement for the driver to complete a pre-use inspection on the vehicle.	Claire Snowdon
11.08.2026	6	Volunteers	Removed reference to the Volunteer handbook.	Claire Snowdon

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11.8.2026	6	Rebound therapy	Removal of reference to rebound policy.	Claire Snowdon

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LEGISLATION

Extracts of relevant legislation are provided for ease of reference on the WorkNest webpage. Full copies of the legislation are available on the Office of Public Sector Information web page (www. Opsi.gov.uk).

GUIDANCE

Guidance on a number of health and safety issues can be accessed by logging onto the Health and Safety pages of PHF Connect or the WorkNest webpage.

Should you require further advice or assistance not available here then remember that advice on any health and safety issue is available from the **Health, Safety & Environment Manager** on 07525 590954 or the **WorkNest** advice line - **Tel: 0345 226 8393**

FORMS

Relevant forms and templates that may be utilised can be accessed in the Health and Safety folders on PHF Connect.

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POLICY STATEMENT

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2. HEALTH AND SAFETY POLICY STATEMENT

The management of The Foundation recognises that it has a legal duty of care towards protecting the health and safety of its employees, students, residents, people we support and others who may be affected by the foundation's activities, and that managing health and safety is a business critical function.

In order to discharge its responsibilities the management will:

- bring this Policy Statement to the attention of all employees by displaying a copy on the Health and Safety notice board and communicating via induction
- carry out and regularly review risk assessments to identify proportionate and pragmatic solutions to reducing risk
- communicate and consult with our employees on matters affecting their health and safety
- comply fully with all relevant legal requirements, codes of practice and regulations at International, National and Local levels
- eliminate risks to health and safety, where possible, through selection and design of materials, buildings, facilities, equipment and processes
- encourage staff to identify and report hazards so that we can all contribute towards improving safety
- ensure that emergency procedures are in place at all locations for dealing with health and safety issues
- maintain our premises, provide and maintain safe plant and equipment
- only engage contractors who are able to demonstrate due regard to health & safety matters
- provide adequate resources to control the health and safety risks arising from our work activities
- provide adequate training and ensure that all employees are competent to do their tasks
- provide an organisational structure that defines the responsibilities for health and safety
- provide information, instruction and supervision for employees
- regularly monitor performance and revise policies and procedures to pursue a programme of continuous improvement

This Health and Safety Policy will be reviewed at least annually and revised as necessary to reflect changes to the business activities and any changes to legislation. Any changes to the Policy will be brought to the attention of all employees.

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ORGANISATION FOR HEALTH & SAFETY

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3. ORGANISATION FOR HEALTH AND SAFETY

The overall responsibility for health and safety rests at the highest management level. However, it is the responsibility of every employee to co-operate in providing and maintaining a safe place of work.

This part of our policy allocates responsibilities to line managers to provide a clear understanding of individuals' areas of accountability in controlling factors that could lead to ill health, injury or loss. Managers are required to provide clear direction and accept responsibility to create a positive attitude and culture towards health and safety.

The following positions have been identified as having key responsibilities for the implementation of our health and safety arrangements:

The Foundation Board

Chief Executive Officer

Executive Team

Head Teachers/Heads of Service

Health, Safety & Environment Manager

HEALTH AND SAFETY RESPONSIBILITIES

4. HEALTH AND SAFETY RESPONSIBILITIES

The Foundation Board of Trustees

The Board has the ultimate responsibility for the health and safety of The Foundation but discharges this responsibility through the Chief Executive Officer down to individual managers, supervisors and employees.

The Board has nominated the Chief Executive Officer to have special responsibility for health and safety.

The Board will ensure that:

- they provide a lead in developing a positive health and safety culture throughout the organisation
- all its decisions reflect its health and safety intentions
- adequate resources are made available for the implementation of health and safety
- they will promote the active participation of workers in improving health and safety performance
- they will review the health and safety performance of the foundation on an annual basis

Chief Executive Officer

The Chief Executive Officer has overall responsibility for ensuring our compliance with Health and Safety legislation but delegates the responsibility for implementation to Managers and Department Heads.

The Chief Executive Officer will ensure that:

- our Health and Safety Policy is implemented, monitored, developed, communicated effectively, reviewed and amended as required
- a health and safety plan of continuous improvement is created and that senior management monitor progress against agreed targets
- suitable and sufficient funds, people, materials and equipment are provided to meet all health and safety requirements
- senior management designated with health and safety responsibilities are provided with support to enable health and safety objectives to be met
- a positive health and safety culture is promoted and that senior management develop a pro-active safety culture which will permeate into all activities undertaken and reach all personnel
- a system of communication and consultation with employees is established
- effective training programmes have been put in to place
- an annual report on the safety performance of the foundation is presented to the Board

Executive Team

The Executive Team have responsibility for ensuring our compliance with Health and Safety legislation.

They will ensure that:

- our Health and Safety Policy is implemented, monitored, developed, communicated effectively, reviewed and amended as required
- a health and safety plan of continuous improvement is created and progress monitored
- suitable and sufficient funds, people, materials and equipment are provided to meet all health and safety requirements
- adequate insurance cover is provided and renewed
- competent persons are appointed to provide health and safety assistance and advice
- an adequate system of maintenance exists and operates to keep premises, plant and work equipment in a safe condition
- statutory examinations are planned, completed and recorded
- there is regular communication and consultation with staff on health and safety issues
- an effective training programme is established to ensure staff are competent to carry out their work in a safe manner
- safe systems of work are developed and implemented
- accidents, ill health and 'near miss' incidents at work are recorded, investigated and reported
- safety issues raised are thoroughly investigated and, when necessary, further effective controls implemented and communicated to staff
- contractors engaged are reputable, can demonstrate a good health and safety record and are made aware of relevant local health and safety rules and procedures
- effective contingency plans are in place with a designated competent person in charge of the planning and control measures for situations involving imminent danger
- health and safety objectives are set and their achievement is measured and reported in the annual report

Heads Teachers/Heads of Service

The Head Teachers and Heads of Service will ensure that in their areas of control:

- they actively lead the implementation of our Health and Safety Policy
- they supervise their staff to ensure that they work safely, providing increased supervision for new and young workers
- safe systems of work are developed and implemented
- risk assessments are completed, recorded and regularly reviewed
- accidents, ill health and 'near miss' incidents at work are investigated, recorded and reported
- they communicate and consult with staff on health and safety issues
- they encourage staff to report hazards and raise health and safety concerns

- safety training for staff is identified, undertaken and recorded to ensure staff are competent to carry out their work in a safe manner
- issues concerning safety raised by anyone are thoroughly investigated and, when necessary, further effective controls implemented
- premises, plant and work equipment are maintained in a safe condition
- statutory examinations are planned, completed and recorded
- personal protective equipment is provided, staff instructed in its use and that records are kept
- adequate arrangements for fire and first aid are established
- any safety issues that cannot be dealt with are referred to the Chief Executive Officer for action
- welfare facilities provided are maintained in a satisfactory state
- hazardous substances are stored, transported, handled and used in a safe manner according to manufacturers' instructions and established rules and procedures
- health surveillance is carried out and records are kept
- contractors engaged are reputable, can demonstrate a good health and safety record and are made aware of relevant local health and safety rules and procedures
- health and safety notices are displayed
- agreed safety standards are maintained particularly those relating to housekeeping
- health and safety rules are followed by all

Health, Safety & Environment Manager

The Health, Safety & Environment Manager will ensure that:

- management are advised of relevant changes in health and safety legislation, codes of practice and industry standards
- risk assessment requirements are co-ordinated and the implementation of any action required is monitored
- risk assessments are reviewed regularly and any changes are brought to the attention of staff who may be affected
- regular meetings are held where health and safety issues can be discussed, progress made against objectives and plans monitored and actions decided
- provide advice on health and safety training requirements
- details of accidents, dangerous occurrences or diseases that are notifiable are reported to the Enforcing Authorities
- assist Managers in investigating and recording accident investigations

- contact with external organisations such as the emergency services is co-ordinated
- health assessment requirements are identified and advised to management
- the schedule of statutory examinations of plant and equipment is maintained and managers are made aware of impending examinations

Foundation Staff

All Foundation Staff must:

- take reasonable care of their own safety
- take reasonable care of the safety of others affected by their actions
- observe the safety rules
- comply with the Health and Safety Policy
- conform to all written or verbal instructions given to them to ensure their personal safety and the safety of others
- dress sensibly and safely for their particular working environment or occupation
- conduct themselves in an orderly manner in the work place and refrain from any antics or pranks
- use all safety equipment and/or protective clothing as directed
- avoid any improvisations of any form which could create an unnecessary risk to their personal safety and the safety of others
- maintain all equipment in good condition and report defects to their supervisor
- report any safety hazard or malfunction of any item of plant or equipment to their supervisor
- report all accidents to their supervisor whether an injury is sustained or not
- attend as requested any health and safety training course
- observe all laid down procedures for processes, materials and substances used
- observe the fire evacuation procedure and the position of all fire equipment and fire exit routes

Contractors

All contractors must:

- take reasonable care of their own safety
- take reasonable care of the safety of others affected by their actions
- observe the safety rules
- submit their health and safety policy and relevant risk assessments to us for approval
- comply with and accept our health and safety policy, if they do not have one

- conform to all written or verbal instructions given to them to ensure their personal safety and the safety of others
- dress sensibly and safely for their particular working environment or occupation
- conduct themselves in an orderly manner in the work place and refrain from any antics or pranks
- use all safety equipment and/or protective clothing as directed
- avoid any improvisations of any form which could create an unnecessary risk to their personal safety and the safety of others
- maintain all equipment in good condition and report defects to their supervisor
- report any safety hazard or malfunction of any item of plant or equipment to their supervisor
- report all incidents to their supervisor and to us whether an injury is sustained or not
- attend as requested any health and safety training course
- observe all laid down procedures for processes, materials and substances used
- observe the fire evacuation procedure and the position of all fire equipment and fire exit routes

WorkNest

WorkNest, in agreement with management, provides us with the following services:

- development of our documentation throughout the period of our contract and keeping it updated for:
    - changes in Health and Safety legislation relevant to us
    - organisational changes which affect our management system
- a general risk assessment in the first part of the contract that forms the basis of our risk management programme and helps us plan our future actions to reduce risk.
- a consultant visit to train senior managers and to support our implementation of this Policy by:
    - assisting us to complete specific risk assessments
    - providing further training, as agreed, on relevant agreed topics
    - reviewing and auditing our health and safety procedures and legal compliance
    - providing advice on implementing changes and system procedures

WorkNest is also contracted to:

- fulfil the role of 'Competent Person', providing advice and assistance on Health and Safety issues
- provide for us a telephone advisory service - available 24 hours per day, 365 days of the year
- provide crisis help if we have a serious accident or incident involving the Enforcement Authorities
- provide briefings to help keep us up to date with new and forthcoming legislation

Health and Safety, Quality, Wellbeing & Environment Committee

The Health and Safety Quality and Wellbeing Committee's (HSQWE) responsibility is to facilitate communication and consultation on health and safety issues across the organisation.

They are responsible for ensuring that:

- there is regular communication and consultation with staff on health and safety issues
- health and safety issues raised by employees are discussed and considered for action
- health and safety standards within departments are monitored
- trends in accident statistics across the foundation are identified and making recommendations for action
- health and safety is promoted and new initiatives are considered to progressively improve standards in all areas
- employees are aware of significant changes to our health and safety policy documentation

HEALTH AND SAFETY RULES

5. HEALTH AND SAFETY RULES

This section of our Health and Safety Policy specifies the rules laid down for the attention of all employees. These rules are prepared in accordance with legal requirements and acknowledged safe working practices. In addition to the legal duty imposed upon employees to comply with these rules, failure to observe them will be considered to be a breach of the contract of employment and will result in disciplinary action being taken.

Employees are reminded that a breach of health and safety legislation by an employee is a criminal offence and action taken by an Enforcing Officer against an individual may result in heavy penalties.

Safety rules may vary depending upon the nature of work and the circumstances therefore the overriding requirement is that employees are expected to act in a sensible manner and adhere to verbal instructions given by Management.

General

- It is the duty of all employees to co-operate with management in fulfilling our legal obligations in relation to health and safety.
- It is the duty of all employees to familiarise themselves with the local health and safety arrangements relevant to their location of work
- Employees must not intentionally or recklessly interfere with anything provided in the interests of health, safety or welfare.
- Employees are required to notify to management of any unsafe activity, item or situation.

Working Practices

- All staff must complete induction prior to completion of any tasks.
- Staff must be aware of all relevant policies and procedures relevant to their role to include infection control, food hygiene, medication policies and practice etc. which should be read by the employee during the induction period with records of understanding kept.
- Where staff are supporting students, residents and people we support they must have read and understood all relevant plans prior to the completion of any tasks e.g. meal time management plans, moving and handling plans, positive behaviour plans, care plans etc.
- Employees must not operate any item of plant or equipment unless they have been trained and authorised.
- Where employees are required to operate any equipment they must make full and proper use of all equipment guarding. Employees must not clean any moving item of plant or equipment.
- Employees under the age of 18 years must not operate any item of plant or equipment unless they have received sufficient training or are under adequate supervision.
- Employees must not make any repairs or carry out maintenance work of any description unless authorised to do so.
- Employees must use all substances, chemicals, liquids etc, in accordance with all written instructions and training.
- Employees must not smoke or vape except in prescribed areas (please note smoking/vaping is prohibited on our education sites as part of the Health School Award).
- Whilst the Foundation recognises that a persons dress and appearance are matters of personal choice and self-expression it is important that staff consider the manner of their dress and appearance appropriate to their professional role. Staff should ensure they are dressed professionally, decently, safely and appropriate for the tasks they are to undertake. In particular staff supporting wheelchair users, individuals with behaviours that challenging and/or moving and handling tasks must wear flat, closed footwear and should not wear sandals, flip flops, crocs etc. Nails should be kept to an appropriate length and staff should be aware that in the event of an outbreak of infection they may be requested to work bare below the elbow (BBE) and nail varnish or false nails will not be permitted and staff may be requested to remove them. Jewellery should also be kept to a minimum.
- Where hot drinks are being carried around a building where there is a risk of contact with students, residents or services users a suitable enclosed container should be used instead or a mug or cup.

Hazard / Warning Signs and Notices

- Employees must comply with all hazard/warning signs and notices displayed on the premises.

Working Conditions/Environment

- Employees must ensure that they adhere to all plans and assessments and make proper use of all equipment and facilities provided to control working conditions/ environment.
- Employees must ensure their work area is maintained in a clean and tidy condition.
- In our residential settings employees must ensure a safe environment for residents at all times whilst supporting a home from home experience.
- Employees must clear up any spillage or liquids.
- Employees must deposit all waste materials and substances at the correct disposal points and in the prescribed manner.

Protective Clothing and Equipment

- Employees must use all items of protective clothing/equipment provided as instructed; this may include gloves and aprons for personal care tasks, bite or scratch protection or high visibility clothing for staff involved in transport tasks or safety boots, eye protection or gloves for our maintenance teams.
- Employees must store and maintain protective clothing/equipment in the approved manner.
- Employees must report any damage, loss, fault or unsuitability of protective clothing/equipment to their supervisor.

Fire Precautions

- Employees must comply with all laid down emergency procedures.
- Employees must not obstruct any fire escape route, fire equipment or fire doors. Fire doors must not be 'wedged' open.
- Employees must not misuse any fire fighting equipment provided.
- Employees must report any use of fire fighting equipment to their supervisor.

Accidents, incident and near misses

- Employees must seek medical treatment for work related injuries they receive by contacting designated first aider. Upon returning from treatment they must report the incident to their supervisor.
- Employees must ensure that any accident or injury treatment is properly recorded in accordance with the Accident, Incident and near miss policy.
- Employees must notify management of any incident in which damage is caused to property.
- Any near miss that had the potential to cause harm must be reported to their immediate supervisor.

Health

- Employees must report to management any medical condition or medication which could affect the safety of themselves or others.
- Employees must adhere to infection control procedures in place to protect both staff and people we support.
- Employees must co-operate with management on the implementation of the medical and occupational health provisions.

Employer's Transport

- All employees must be permitted to drive Foundation vehicles by the Foundation's Transport Manager and be registered on the Fleetcheck application.
- Employees must carry out prescribed checks of foundation vehicles prior to use using the Fleetcheck app (paper versions of this check available in each vehicle should staff not have access to the app for any reason)
- Employees must not drive or operate any vehicles for which they do not hold the appropriate driving licence or permit.
- Employees must not carry unauthorised passengers or unauthorised loads.
- Employees must not use vehicles for unauthorised purposes.
- Employees must not load vehicles above the stated capacity.
- Employees must not drive or operate vehicles whilst suffering from a medical condition or illness that may affect their driving or operating ability.
- Employees must not use vehicles to transport unauthorised loads to include chemicals, clinical waste or certain equipment

Rules Covering Gross Misconduct

An employee will be liable to summary dismissal if they are found to have acted in any of the following ways:

- A serious or wilful breach of Safety Rules.
- Failure to adhere to person centred plans to include moving and handling plans, positive behaviour management plans, care plans, individual risk assessments.
- Incorrect administration of medication.
- Unauthorised removal or interference with any guard or protective device.
- Unauthorised operation of any item of plant or equipment.
- Unauthorised removal of any item of first aid equipment.
- Wilful damage to, misuse of or interference with any item provided in the interests of Health and Safety or welfare at work.
- Unauthorised removal or defacing or any label, sign or warning device.

- Horseplay or practical jokes which could cause accidents.
- Making false statements or in any way deliberately interfering with evidence following an accident or dangerous occurrence.
- Misuse of any item of equipment, utensil, fitting/ fixture, vehicle or electrical equipment.
- Deliberately disobeying an authorised instruction.
- Failing to report an accident or incident, to include safeguarding incident or medication error

ARRANGEMENTS

6. ARRANGEMENTS

Accident, Incident near miss and work related and Ill-Health Recording, Reporting and Investigation

See separate Accident incident near miss and work-related ill health reporting policy and procedure found on PHF Connect.

Administration of medication

Individual care plans are in place for those with significant medical needs and will be updated at least annually. Staff will receive appropriate training related to health conditions and the administration of medicines by a competent individual/organisation as appropriate.

Any member of PHF staff involved in the administration of medication must have received suitable training and competency assessments with written records kept. This training must be regularly reviewed. Medication should be administered by 2 persons (except in circumstances where this is operationally not possible e.g. lone working) to ensure the correct dose and type of medication is verified by a second person. All medical records must be updated at the time of administration.

- All medicine must be checked once received by pharmacy to ensure correct delivery and recorded on the MARS sheet.
- All medicines are clearly labelled with the child, young person or residents name and are stored in a designated medication room.
- All medicines are cross referenced via checklist to ensure correct medicines and measurements for the correct patient are being adhered to
- Staff always observe the persons taking the medication
- Self-management of medication will be encouraged where appropriate.
- Fridge temperatures to be recorded and monitored on a daily basis
- All drugs to be kept in original packaging and/or labelled so that contents are highlighted.
- Where a residence or service is responsible for the supply of medication regular audits should take place to ensure sufficient stocks.
- Where staff administer medication via a needle they must have a up to date Hepatitis B vaccination.
- When administering medication staff must adhere to the infection control policy and guidelines.

Refer:
Medication Management Policy

Activities and visits and sports

Where possible reasonable adjustments should be made for those with medical needs to participate fully and safely on visits / activities. This might include reviewing and revising the visits policy and procedures so that planning arrangements will include the necessary steps to include those with medical needs. It might also include risk assessments for participants.

Sometimes additional safety measures may need to be taken for outside visits. It may be that additional supervision is required. Arrangements for taking any necessary medicines will also need to be taken into consideration. Staff supervising visits should always be aware of any medical needs and relevant emergency procedures. Copies of health care plans should be taken on visits in the event of the information being needed in an emergency.

Any restrictions on a person's ability to participate in an activity should be recorded in their individual health care plan. All adults should be aware of issues of privacy and dignity for children with particular needs.

Some people may need to take precautionary measures before or during exercise or specific activities and may also need to be allowed immediate access to their medicines such as asthma inhalers. Staff

supervising sporting activities should consider whether risk assessments are necessary for some participants, be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

Transport

Where students have life threatening conditions, specific health care plans should be carried on vehicles. The care plans should specify the steps to be taken to support the normal care of the student as well as the appropriate responses to emergency situations.

All drivers and escorts should have basic first aid training. Additionally, trained escorts may be required to support some students with complex medical needs. These can be healthcare professionals or escorts trained by them.

Some people are at risk of severe allergic reactions. Risks can be minimised by not allowing anyone to eat on vehicles. All escorts should also be trained in the use of an adrenaline pen for emergencies where appropriate.

- Medication Management policy
- Accepting Complex health needs in PHF education or social care setting policy
- Accepting Complex health needs in PHF residential setting policy
- Accepting Complex health needs in Horizons Day Services policy
- MARS sheets/charts
- Infection Prevention control policy and procedure
- Individual care plans/Health care plans

Allergens and intolerances

A separate Allergy Policy is in place to ensure compliance with Benedicts Law and to ensure all of our settings maintain robust allergy aware environments. All of our education and day services sites are 'nut safe' meaning nuts should not be brought to into the setting; in ISL and in our residences this is separately risk assessed balancing individual choice with the duty to protect the people who live there.

Refer:

- Allergy Policy

Asbestos

See separate Asbestos management plan on PHF Connect and also:

Refer:

- Asbestos monitoring form
- Asbestos Management Surveys/refurbishment surveys
- Asbestos report holder notice
- Contractor Safety Information sheet
- HSE guidance em1 Asbestos Essentials

Ball Pools

Any ball pool owned, operated by the foundation will be:

- Used, erected and operated in accordance with the manufacturer's instructions
- Supervised by a responsible adult when in use
- Only persons of similar age, weight or build should be permitted to use the ball pool at any one time
- Checked daily to remove foreign items from the ball pool
- If soiled, evacuated with affected balls removed and cleaned
- Only used by persons who have removed all items of jewellery, keys, coins and similar items prior to entering the pool

Refer:

- Generic Ball pool risk assessment

Bedrails

In some scenarios it may be appropriate to use bedrails to prevent people from falling from their beds and being injured. However, use of such equipment poses a risk in itself in particular the risk of:

- Entrapment between the bedrails and the mattress
- Entrapment between the gaps in the bedrails

Bed rails are classed as 'medical devices', which fall under the authority of the Medicines and Healthcare Products Regulatory Agency (MHRA). A full risk assessment must be completed by a competent person prior to implementation of use of bedrails this should include the need for bed rails, the type to be used and the method of use, MHRA guidance on the 'Safe Use of Bed Rails' should be consulted when completing this.

The need for bed rails, the type and method of use, details of permitted accessories etc. included in the care plans for each person who uses them.

Where bed rails are used with the consent of the resident/people we support a record of consent given must be in place either in writing or by means of a recording.

Where bed rails are used but the person does not have capacity to provided consent a best interests decision must be in place and recorded to rationalise use of the bed rails.

Assessments must be reviewed when there is significant change in the bed occupant's condition, replacement of any part of the equipment combination.

Internal inspections are completed monthly and recorded on the bedrail checklist.

All bed rails have a unique asset number are inspected annually under PUWER regulations.

Refer:

- Generic bedrail/cotsides risk assessment
- Monthly bedrail checklist

Communication and Consultation

It is a legal requirement for the foundation to establish arrangements to communicate and consult with employees on issues affecting their health and safety and to take account of their views.

To achieve this objective we will:

- establish effective lines of communication
- involve and consult with employees through:
  - Health and safety pages on PHF Connect
  - individual conversations and supervisions, appraisals
  - notice boards
  - internal publications
  - staff meetings
  - health and safety meetings
  - Health, Safety, Quality, Wellbeing & Environment Forum committee (HSQWE)
- display the 'Health and Safety Law – What You Should Know' poster
- consult with employees when changes to processes, equipment, work methods etc. are to be introduced that may affect their health and safety

Contractors

When working on our premises it is considered that contractors are joint occupiers for that period and therefore we have both joint liabilities in "common areas". In order to meet our legal obligations with regard to contractors we will ensure, prior to engaging any contractor, that they are competent and ensure during their period of engagement that any works are carried out safely.

The following factors will be considered as part of our procedures for vetting contractors:

- Relevant DBS checks have been completed
- sight of the contractor's own safety policy, risk assessments, method statements, permits to work, etc. as applicable
- communication of relevant asbestos surveys and plans
- clarification of the responsibility for provision of first aid and fire extinguishing equipment
- details of articles and hazardous substances intended to be bought to site, including any arrangements for safe transportation, handling, use, storage and disposal
- details of plant and equipment to be brought onto site, including arrangements for storage, use, maintenance and inspection
- clarification for supervision and regular communication during work including arrangements for reporting problems or stopping work in cases where there is a serious risk of personal injury
- confirmation that all workers are suitably qualified and competent for the work (including a requirement for sight of evidence where relevant)
- evidence showing that appropriate Employers and Public Liability Insurance is in place

Clearly, it will not be necessary to go to such elaborate lengths if the contract is very short and will not create hazards of any significance. The complexity of the arrangements will be directly proportional to the risks and consequences of failure; the Health, Safety & Environment Manager, Estates Compliance Manager, Estates Project Manager or the Maintenance and Facilities Manager will determine the level of arrangements required.

Similarly, we have a parallel duty to the contractor and must ensure that the contractor is not put at risk by our own activities for the duration of the contract.

We will stop contractors working immediately if their work appears unsafe or interaction with students and people we support is of concern. Staff should report any concerns to a manager immediately.

Construction work and the Construction (Design and Management) Regulations 2015

Where any construction work is carried out, to fulfil our legal duties as a "client" under the Construction (Design and Management) Regulations 2015 we will:

- make suitable arrangements for the management of the project and review those arrangements throughout the project to ensure that they are still relevant
- ensure that all duty holders that we appoint have the necessary skills, knowledge and experience to carry out their roles safely
- appoint in writing the Principal Designer and Principal Contractor sufficiently early in the project to allow them to carry out their duties properly
- notify the HSE in writing for projects that require it
- ensure that relevant pre-construction information is passed to all designers and contractors
- ensure that the Principal Designer and Principal Contractor carry out their duties
- ensure that adequate welfare facilities are provided for the contractors
- ensure that no construction commences until an adequate health and safety plan and construction phase plan covering the work has been prepared
- ensure that any health and safety file passed to us is kept securely and readily available for inspection by anyone who requires it to fulfil their legal duties, and , if we choose to dispose of the building, to pass the file to any person or company who acquires the building.
- cooperate fully with all other duty holders and provide all relevant information and instruction promptly and clearly

Refer:

- Approval of New Contractors Questionnaire
- Contractors Approved List
- Contractors Safety Information form

COVID 19

As we now live alongside Covid 19 its specific risks are managed alongside other respiratory infections through our standard Infection Prevention and Control (IPC) policies and procedures. We continually monitor updates from key regulatory bodies to include the UK Health Security Agency (UKHSA), local

Health Protection teams, commissioners, Local Authorities, the CQC and Ofsted. Specific IPC risk assessments are in place to account for the varying regulatory requirements.

Key measures that continue to be adopted include:

Vigilance for symptoms of respiratory illness
Strict hand hygiene and availability of hand sanitising stations as well as hot water and soap
Use of PPE as dictated by government guidance
Encouragement to particate in Covid and Flu vaccination/booster programmes
Outbreak testing requirements

Refer:

- Health Protection in education and childcare settings
- Infection prevention in adult social care settings
- Disposal of clinical waste policy and procedure
- Infection Prevention and Control policy and procedure
- Infection Prevention and Control audits

Design & Technology departments in Educational and Adult Services

This policy outlines the procedures for ensuring safe working in Design and Technology (Textiles Technology, Food Technology, Graphics and Product Design). All staff are required to follow this policy to minimise risks to themselves, to people we support, students and to others. Staff are expected to use this information to help them to plan lessons and activities and decide if an activity can be carried out safely, giving consideration to the age and responsibility of the students.

Communication, information and training

The Head of Department or Activity Lead is responsible for ensuring that all staff are made aware of this policy and ensuring that the procedures are followed, providing suitable training or directing new staff to an appropriate member of staff, and for recording the dates and content of any training given.

Any Trainee teachers or staff who are following a recognised training course should be supervised by a qualified person at all times when they are engaged in practical work. Such trainees may use machines and may show students or people we support how to use machines as part of the lessons or activity that they are teaching provided that appropriate supervision is maintained. This supervision may be progressively reduced, depending on the competence of the individual trainee teacher. In such instances a specific risk assessment of the situation should be carried out, and the degree of supervision needed discussed with the Head of Department or Activity Lead.

Generally, the departments follow guidance in *BS 4163:2007 Health and safety for design and technology in schools and similar establishments – Code of practice* and is also licensed to use CLEAPSS. Whilst this is focussed on educational settings standards are used as good practice across the Foundation.
A copy of the code is available and staff within the department are given access to the CLEAPSS website.

Monitoring and checking

The school requires the Head of Department or Activity Lead to monitor the implementation of this policy. Records of monitoring are kept by theses persons.

Equipment and machines will be checked in accordance with current guidelines and records kept.

Risk assessments

The Foundation follows the recommendation of the Health and Safety Executive to adopt published 'model' or 'general' risk assessments which the D&T department adapts to the activity and facilities.

Whenever a new course or activity is adopted or developed, all activities (including preparation and clearing-up work) are to be checked against the model risk assessments and significant findings incorporated into texts in daily use, i.e. the scheme of work, set of lesson plans, syllabus, technician notes.

If a model risk assessment for a particular operation involving hazards cannot be found in these texts, a special risk assessment must be completed.

Every activity is to be assessed for risk including working with simple hand tools as well as potentially hazardous processes such as wood machining. An attempt is made to balance the desire to eliminate risk with the need to reduce risk in order to maintain practical work, e.g. Certain activities may be demonstrated in order to reduce the level of risk to students or people we support.

It is the responsibility of all staff and other adults to follow the relevant risk assessments and lesson or activity plans.

Equipment Safety

New equipment will be purchased that is safe and suitable for the intended purpose and to comply with the *Provision and Use of Work Equipment Regulations*. Equipment listed by specialist educational equipment suppliers is taken to meet these *Regulations* but all other equipment, especially gifts, are to be treated with caution and carefully assessed.

Use of guards

All staff in the departments must use all guards and other safety devices on machines and other equipment at all times. Under no circumstances should any guard or other safety device be removed or not used to enable a task to be done. Any operation which cannot be done with guards and other safety devices in place must not be done.

Maintenance, Inspection and Testing of Equipment

All equipment and machinery must be maintained in a safe condition. To achieve this, equipment will be regularly maintained, inspected and, where necessary, tested.

There are 3 levels of inspection, maintenance and testing of equipment which must be carried out. These are:-

Level 1 A visual check by staff of equipment prior to its use or on a daily basis.

Level 2 A more formal visual inspections which should be carried out termly by staff. This requires checking equipment against an inventory using a checklist. Small items, e.g. hand tools, knives, can be banded together.

Level 3 Formal maintenance/inspection checks carried out by specialist contractors. This is normally undertaken annually except for LEV (Local Exhaust Ventilation) which is carried out every 14 months. This includes PA testing, no electrical equipment should be used in the Foundation unless it has in up to date PAT sticker.

When maintenance of equipment is carried out all machines must be isolated from the power supply and the fuses removed or the isolator locked off. A notice stating that the machine is under maintenance should be fixed to the machine. A risk assessment of the hazards involved in the task should be carried out before the work is started.

Recording of Inspections and Testing

All Level 2 formal inspections of equipment by members of staff should be recorded. An up to date record of Inspections will be maintained by the technicians on a weekly basis.

All Level 3 inspections/maintenance must be recorded. It is recommended that the subject leader holds records of examinations, tests and certificates. This information will be kept in the office in the health and safety folder.

If any faults, or the need for maintenance, are identified at any time, they must be reported to the Head of Department or Activity Lead. If the fault or need for maintenance makes the equipment unsafe, it must not be used and must be electrically isolated. An appropriate label must be clearly displayed on the equipment.

Pressure Vessels

Autoclaves and pressure cookers need periodic inspection, normally annually, under the *Pressure Systems Safety Regulations*. Records of examinations are kept on file.

Local exhaust ventilation

The Foundation requires the regular testing of local exhaust ventilation equipment (dust extraction and fume extraction from heat treatment areas) every 14 months. The Head of Department or Programme Manager has the responsibility of seeing that this happens. The records of the tests are available for staff reference and for inspection by an HSE Inspector on file.

Room Safety

All practical rooms must be locked when not in use.

Unsupervised students or people we support must not be allowed in hazardous rooms.

When starting a practical lessons, staff should check that rooms are clear, all thoroughfares and room exists are free from obstruction, floors are dry and in a safe condition, and the lighting is adequate for the work being undertaken

Fire doors must be unlocked and clear;

Only authorised staff are permitted to switch on the electricity and gas mains isolators. Students or people we support users may not switch on these – not even under supervision;

Students and people we support must not use utensils, tools, machines or other equipment until they have been taught how to use them correctly

Particular care should be given to the distribution and collection of hand-tools and of small items of equipment, the number and condition of which should be checked at both the beginning and the end of an activity or a lesson.

Only one person may operate a machine or piece of equipment at a time.

A specialist room may only be used for other curriculum activities if the person supervising the students understands room hazards in the room and can prevent them having accidents

Supply or cover staff must be given information on the room hazards; explaining the location and operation of main services such as electrical isolators, any local hazards and where help can be obtained.

Students, people we support and staff are not to eat or drink in a room/workshop - this includes break and lunch times.

Gas and electricity must be switched off at the mains at the end of the day - the location of mains switches/taps is clearly indicated in each area.

Large volumes of shavings, sawdust and plastic cuttings are likely to constitute a fire hazard and so clearance and disposal should take place on a regular basis, rather than at the end of the day. Excessive dust from machining operations and 'walked in' dirt contribute to respiratory problems and should be removed by vacuuming on a regular basis, rather than by sweeping.

At the end of the day and particularly at weekends, all tool and storage cupboards should be locked, key switches and main electrical supplies isolated, gas valves closed, all machine tools and bench shears padlocked and all electrical equipment turned off. It is the responsibility of the teacher in charge of the room to make sure that all systems are safe, all hot items are cool and that everything is closed down safely before they leave the building.

All D&T areas are made safe for cleaners or contractors to work in before these persons are allowed to proceed.

Storage

Storage must be kept well organised and tidy. Large items should not be stored high and proper stepladders or similar must be available for reaching high shelves safely.

Medication must be stored in lockable cabinets/drawers or refrigerators, temperatures for storing medicines must be observed and how these storage conditions should be monitored (particularly during particularly hot or cold weather).

All chemicals should be stored in accordance with the COSHH Regulations and risk assessments must be in place dealing with their safe use

Standing on benches, chairs, tables to watch a demonstration/get equipment etc. is not permitted.

Sharp tools and utensils must be stored so that accidental contact with the sharp part is unlikely and they must be securely locked when not in use.

All materials which are hazardous, for example they may be toxic, flammable or corrosive, must be clearly labeled. The labeling must state the material and the nature of the hazard(s).

Keep all working quantities of these materials to a minimum.

Access to hazardous materials must be restricted to authorised staff only (technicians).

All hazardous materials must be stored away from direct access by students or people we support;

Stocks of flammable liquids must be stored in a lockable fire-resistant cabinet in a well-ventilated stockroom.

All sharp Design Technology Food knives should be stored in the locked store cupboards.

All sharp craft knives should be stored in a locked cupboard or room.

No sharp knives should be left unattended in a classroom.

Shelving

Shelves must not be overloaded and heavy materials must not be stored high up.

Proper stepladders must be provided for access to shelving beyond easy reach from the floor.

Safety Signs, Notices and Displays

Each workroom must have a set of safety rules and procedures displayed clearly. Cautionary notices and signs must be displayed where appropriate.

Personal Protective Equipment

The Foundation accepts the duty to provide eye protection, gloves, overalls and aprons for employees where the risk assessment requires them and safety spectacles for students.

Eye protection must be worn by all staff and students when using any machine or when soldering using soldering irons. Eye protection should be used for any other operation where the risk assessment shows it is required. Eye protection must conform to BS EN166.

The employer expects eye protection to be available for people we support students and visitors. Safety spectacles are provided for general use, with a set of goggles or face shields used whenever the risk assessment requires them.

The condition of the eye protection is checked at the start of each term.

Protective clothing such as aprons must be used in lessons where students/people we support could get dirty during practical work, or where hazardous materials are being used.

Emergency procedures

In the event of a fire sound the fire alarm.

On hearing the fire alarm staff should turn off the gas, electric and any machinery or equipment and make their way to the assembly point

In the event of a fire and if it is safe to do so staff should attempt to extinguish a fire using the appropriate fire extinguisher provided.

Disabled Persons

As an organisation committed to meeting the needs of disabled people and their families the foundation will give full and proper consideration to the needs of disabled employees, students, people we support and visitors.

To achieve this, the foundation will:

- treat all disabled employees, students, people we support and visitors with respect and dignity, both in the provision of a safe working environment and in equal access to the Foundation's facilities
- encourage employees with special needs to suggest any premises or task improvements to their line managers
- discipline any employees found treating their disabled colleagues with less than the expected standards of respect and dignity
- in an emergency evacuation, ensure suitable plans are in place which will assist disabled people to leave the premises swiftly.
- Ensure our buildings are accessible in line with DDA regulations and guidance.
- Undertake risk assessment and complete reasonable adjustments to the premises and/or employment arrangements
- Individual risk assessments are undertaken for all residents, people we support and students to include:
    - manual handling
    - communication and independence
    - using mechanical aids and equipment
    - use of therapy
    - administering medical treatment and minimising the risk of infection
    - management of challenging behaviour and the use of restraint
    - Transport

Refer:

- DDA Audit Form
- Personal Emergency Evacuation Plan Form
- Risk assessment templates

Display Screen Equipment

All reasonable steps will be taken by the foundation to secure the health and safety of employees who work with display screen equipment, for example specialist seating or ergonomic tools. See separate DSE policy on PHF Connect.

Refer:

- DSE Workstation Assessment Form
- DSE Index of Workstations
- DSE User Training/Information Record
- DSE Record of Eye Tests
- Health and Safety Employee's Guide - Display Screen Equipment

Driving

Refer to Transport policy on PHF Connect.

Dysphagia

The Foundation caters for a high number of students, residents and people we support who experience chronic difficulties with eating, drinking and swallowing. This may be as a result of neurological conditions, oro-motor difficulties, sensory based difficulties or profound and multiple learning difficulties and can result is specific risks around aspiration, dehydration, choking, weight loss and malnutrition. A separate policy and procedure is in place to manage this risk overseen by the Dysphagia Lead.

The Foundation aims to ensure that people we support of the Percy Hedley Foundation who have eating, drinking and swallowing difficulties (dysphagia) receive the highest level of assessment, care and support. The PHF recognises that people with a physical and or learning disability are well known to be at higher risk of choking than other people and there is much research evidence to support this (Thacker 2007, Samuels, Chadwick 2006, Hampshire Choking Report).

All staff involved in the preparation of modified meals or drinks must have completed suitable training via Oakhouse Kitchen, training delivered by our internal team of Dysphagia SaLTs or Dysphagia & Texture Modification e-learning on LMS.

Refer:

- Dysphagia Policy and Procedures
- Individual Meal time management plans (MMPs)
- Administration of Liquidised Diet Via Gastrostomy
- Gastro/blenderized diets risk assessment

Educational Visits

Foundation policy is to ensure that the safety of students, employees and others is managed to minimise risk as far as practicable and in developing its procedures is guided by the guidance and procedures issued by the Department for Education and the Outdoor Education Advisers Panel Guidance for the Management of Outdoor Learning, Off-site visits and Learning Outside the Classroom.

To achieve its objective to ensure safety the school will ensure that:

- all visits are approved by the Senior Leadership Team (SLT) as appropriate
- a person is nominated to coordinate educational visits and that person will be trained in the role of an Educational Visit Coordinator (EVC)
- Group leaders are trained and experienced to lead a visit
- all visits are planned
- risk assessments are completed, where appropriate
- all employees are briefed prior to each visit
- emergency arrangements are established for all visits
- the ratio of adults to students is appropriate and proportionate to the needs of the visit
- adequate insurance is in place
- adequate child protection measures are in place
- parents are notified of all visits and given the opportunity to withdraw their child from any particular school trip or activity
- consent is obtained from parents for all visits
- arrangements are made for students with medical or special needs
- adequate first aid is available
- contingency plans are made
- safety during visits is monitored and reviewed
- visits incorporating an activity that will involve caving, climbing, trekking, skiing or water sports, the provider must hold a licence as required by the Adventure Activities Licensing Regulations 2004.

Responsibilities

Group Leader

- To complete all relevant Educational Visits documentation, including risk assessments and consent forms
- To complete risk assessments or acquire assessments completed by external agencies (for example, a tour operator) as appropriate
- To ensure all students have made necessary payments and completed the necessary documentation
- For overseas visits, to ensure photocopies of student passports (and EHIC cards if relevant) have been taken
- For an overseas visit, to ensure all non-British citizens have visa entitlements to re-enter the country

- To provide reasonable notice to the Educational Visit Coordinator (or other nominated person) to allow them to assist in completing agreed tasks
- To plan for students with special educational needs, pre existing medical condition or a disability and ensure appropriate provision
- To lead the trip in accordance with the approval given by the SLT and ensure all staff and students are fully briefed and that emergency arrangements are in place
- Record the details of any accident or incident in line with the school policies
- Have completed the Visit Leader training as recommended by the Outdoor Education Advisers Panel.

Educational Visit Coordinator

- To coordinate all educational visits to ensure procedures are complied with and all documentation is completed
- To liaise with Group Leaders to ensure the approval requirements for each visit are clearly communicated
- To retain all documentation in relation to each school visit.
- Provide support and guidance to Group Leaders
- Ensure that any accident/incident on a visit is notified to the SLT and a record is kept and that future visits are reviewed in light of previous incidents
- Ensure this Policy is kept up to date and that amendments are notified to the SLT
- Have completed the EVC training as recommended by the Outdoor Education Advisers Panel.

Senior Leadership Team

- To consider the suitability of all proposed educational visits
- To 'sign off' all documentation (including risk assessments) prior to approval.
- To approve all school trips.

Staffing of Trips

Ratios:
It is important to have a high enough ratio of adult supervisors to students for any visit. The factors to take into consideration include:

- Sex, age and ability of group;
- Students with special educational or medical needs;
- Nature of activities;
- Experience of adults in off-site supervision;
- Duration and nature of journey;
- Type of any accommodation;
- Competence of staff, both general and on specific activities;
- Requirements of the organisation/location to be visited;
- Competence and behaviour of students;

- First aid cover.

Ratios of staff to students for ***low risk activities in a mainstream setting are***:

Year 1 - 3	1 Teacher to every 6 students for all visits. (under 5s reception classes should have a higher ratio)
Year 4 -6	1 Teacher to every 10 – 15 students for all visits.
Years 7 +	1 Teacher for every 15 – 20 students for visits in the UK 1 Teacher to every 10 students for visits outside the UK or for more hazardous activities

These ratios must therefore be adapted to suit the individual needs of the Foundation's students and students in accordance with specific care plans, positive behaviour plans and risk assessments.

Without special safeguards or control measures, these ratios will not be adequate to meet the needs of most residential or more complex visits. The ratios stated above are the minimum acceptable.

Except in special circumstances and with the agreement of the SLT, there must always be a minimum of 2 teachers with any visit. For certain visits a higher ratio will be appropriate because the leader of the visits has to ensure that there is a safe level of supervision at all times.

For visits abroad, at least 3 teachers must accompany the party unless the number of students is fewer than 10, in which case there should be 2 teachers.

If an adult who is not a member of staff is accompanying the trip then they must have an up to date and valid DBS check, authorised by the HR department.

No member of staff can be included in the staffing ratios if they are accompanied by their own child who is a minor (under 16).

Group Leaders must be experienced and have undertaken training as recommended by the Outdoor Education Advisers Panel.

Sporting Fixtures

The level of supervision should be at least in the ratio of one teacher to 15 students. At the end of a fixture, staff must ensure that all students are supervised until they are collected.

The use of **Students'** cars to transport other students is not allowed.

Emergency Procedures

Teachers should not hesitate to act in an emergency and to take lifesaving action in an extreme situation.

Emergency procedures are an essential part of planning a school visit. If an emergency happens the priorities are to:

- Assess the situation
- Safeguard the uninjured members of the group
- Attend the casualty
- Inform the emergency services and everyone who needs to know of the incident.

Guidance on Emergency Procedures

A copy of the following guidelines must be taken by all Group Leaders and their deputies.

- Establish nature and extent of the emergency.

- Make sure that all other members of the party are accounted for and safe.

- If there are injuries, establish their extent and arrange for first aid
- Establish names of the injured and call relevant emergency services.
- Advise other party staff of the incident and that emergency procedures are in operation.
- Ensure that an adult from the party accompanies casualties to hospital.
- Ensure that the remainder of the party is adequately supervised throughout and arrange for their early return to school.
- Arrange for one adult to remain at the incident site to liaise with emergency services until the incident is over and all children are accounted for.
- Control access to telephones until contact is made with the Executive Director for Education until they have had time to contact those directly involved. Pass full details of the incident (name, nature, date and time of incident, location of incident, details of injuries, names and telephone numbers of those involved, action taken so far).
- Telephone numbers for future communication (identify alternate telephone numbers in case telephone lines become jammed).
- The school will arrange to contact the parents of those involved. In serious incidents the parents of all party members should be informed.
- all accident forms should be completed and insurers and the HSE should be contacted if appropriate
- inform parents of any delays that will be necessitated
- the Party Leader should write down as soon as practicable all relevant details. A record should be made of any witnesses. Any associated equipment should be kept in its original condition.

Media:

In the event of an emergency:

- a designated person should act as the point of contact with the media to whom all involved should direct questions (refer to the local Disaster Recovery and Business Continuity plan for guidance on who can communicate with media)
- under no circumstances should the name of any casualty be divulged to the media
- legal liability should not be discussed or admitted.

Additional Procedures for Visits Overseas

Prior to the visit the tour leader should obtain and take with them:

- European Health Insurance Card (where appropriate) and significant medical histories
- details of insurance arrangements and the insurance company's telephone number
- location of local hospital/medical services.

In the case of an emergency the framework outlined above should operate. In addition, the group leader should notify the British Embassy/Consulate.

After the Trip

The trip leader must inform the Educational Visit Coordinator (or whoever has been delegated as the school contact) that the party has returned safely and ensure that all the students are safely collected from school by a responsible adult, such as a parent or guardian.

If any difficulties or incidents occur on a school trip, the Educational Visit Coordinator must be informed as soon as possible after the trip returns to school so that appropriate follow up action can be taken quickly.

Drugs and Alcohol

Alcohol

Employees must not drink alcohol on the Foundation's premises or the premises of its customers or clients without express permission from a senior manager or director.

Any employee who is found consuming alcohol on the Foundation's premises or the premises of its customers and clients without permission or is found to be intoxicated at work will normally face disciplinary action on the ground of gross misconduct under the Foundation's disciplinary procedure.

Drugs and medication

The possession, use or distribution of drugs for non-medical purposes on the Foundation's premises is strictly forbidden and a gross misconduct offence.

If you are prescribed drugs by your doctor which may affect your ability to perform your work you should discuss this with your manager or supervisor.

If the Foundation suspects there has been a breach of this policy or your work performance or conduct has been impaired through substance abuse, the Foundation reserves the right to require you to undergo a medical examination to determine the cause of the problem.

Medical Examination

Existing and prospective employees may be asked to undergo a medical examination, which will seek to determine whether he/she has taken a controlled drug or has an alcohol abuse problem.

A refusal to give consent to such an examination or a refusal to undergo the screening will result in the immediate withdrawal of any offer made to prospective employees and will normally be treated as gross misconduct for employees.

If, having undergone a medical examination, it is confirmed that you have been positively tested for a controlled drug, or you admit there is a problem, the Foundation reserves the right to suspend you from your employment (with or without pay) to allow the Foundation to decide whether to deal with the matter under the terms of the Foundation's disciplinary procedure and/or to require you to undergo treatment and rehabilitation.

Reasonable Grounds

The Foundation reserves the right to search you or any of your property held on Foundation premises at any time if there are reasonable grounds to believe that this policy is being or has been infringed or for any other reason. If you refuse to comply with these search procedures, your refusal will normally be treated as gross misconduct.

The Foundation reserves the right to inform the police of any suspicions it may have with regard to the use of controlled drugs by its employees on the Foundation's premises.

Electricity

All reasonable steps will be taken to secure the health and safety of employees who use, operate or maintain electrical equipment.

To ensure this objective the foundation will:

- ensure electrical installations and equipment are installed in accordance with the Wiring Regulations (BS 7671) published by the Institution of Engineering and Technology (IET)
- maintain the fixed installation in a safe condition by carrying out routine safety tests
- inspect and test portable and transportable equipment as often as required to ensure safety
- promote and implement a safe system of work for maintenance, inspection and testing
- forbid live working unless absolutely necessary, in which case a permit to work must be issued
- ensure employees who carry out electrical work are competent to do so
- maintain detailed records

Employees must:

- visually check electrical equipment for damage before use
- report any defects found to their line manager/supervisor
- not use defective electrical equipment
- not carry out any repair to any electrical item unless qualified to do so
- switch off non-essential equipment from the mains when left unattended for long periods
- not bring any electrical item onto the foundation premises until it has been tested and a record of such a test has been included in the appropriate record
- not leave electric cables in such a position that they will cause a tripping hazard or be subject to mechanical damage

Refer:

- Portable Electrical Equipment Test Register Form
- Portable Appliance Visual Checklist Form
- Employee Guidance Electrical Safety
- Employer Guidance Electrical Safety

Environment & Sustainability

See separate Environment and Sustainability policy and strategy.

F Gases

Fluorinated greenhouse gases (F-gases) are a family of gases containing fluorine. They are powerful greenhouse gases that trap heat in the atmosphere and contribute to global warming. They are stronger than naturally occurring greenhouse gases and their use is regulated.

There are three main types of F-gases:

- hydrofluorocarbons (HFCs)
- perfluorocarbons (PFCs)
- sulphur hexafluoride (SF6)

F-gases are used in a number of ways:

- Stationary refrigeration, air conditioning and heat pump (RAC) equipment are some of the largest sources of F-gas emissions.
- Some stationary fire protection systems and portable fire extinguishers currently use HFCs.
- Mobile air conditioning in cars and light vans currently uses HFCs. Other air-conditioned and refrigerated transport also uses F-gases.

Operators of all stationary systems containing the equivalent of 5 CO2 tonnes or more of F-Gases must maintain records in the form of an onsite F-Gas log, all technicians contracted to service systems containing F gases must also be trained and certified.

Fire

All reasonable steps will be taken to prevent a fire occurring. In the event of fire, ***the safety of life will override all other considerations, such as saving property and extinguishing the fire.***

In order to prevent fire and to minimise the likelihood of injury in the event of a fire the Foundation will:

- assess the risk from fire at our premises and implement appropriate control measures
- ensure good housekeeping standards are maintained to minimise the risk of fire
- provide and maintain safe means of escape from the premises
- develop a fire evacuation procedure for all buildings
- ensure that Personal Emergency Evacuation Plans (PEEPs) are in place where needed for staff or people we support to include specialist equipment as needed (to include rescumats, fire evacuation lifts, refuge points and Emergency Voice Communication Systems (EVCS)
- provide and maintain appropriate fire-fighting equipment
- regularly stage fire evacuation drills, inspect the means of escape and test and inspect fire-fighting equipment, emergency lighting and any fire warning systems
- provide adequate fire safety training to employees, plus specialist training to those with special responsibilities
- make arrangements for the safe evacuation of deaf or otherwise disabled persons
- make arrangements for ensuring all visitors are made aware of the fire evacuation procedures

- display fire action notices
- keep fire safety records
- ensure wheelchair batteries are never charged in the bedrooms of people we support

The Foundation does not require persons to attempt to extinguish a fire but extinguishing action may be taken if the person is trained Fire Warden and it is safe to do so and the fire is smaller than a waste paper bin.

Immediate evacuation of the building must take place as soon as the evacuate signal is given. All occupants, on evacuation, should report to the pre-determined assembly points.

Where lithium batteries are in use a separate risk assessment should be completed; where wheelchairs are scooters are required to be charged in a designated room over-night this should include consideration of suitable fire-fighting equipment and C02 detection. All chargers used must be CE marked.

Re-entry of the building is strictly prohibited until the fire brigade officer or a senior person present declares it is safe to do so.

Employees are encouraged to report any concerns regarding fire procedures so the organisation can investigate and take remedial action if necessary.
Refer:

- Site specific Fire Risk Assessments
- Monthly and annual Fire inspections
- Fire signs and notices
- Generic risk assessment for the use of lithium batteries

First Aid

The Foundation is committed to providing sufficient provision for first aid to deal with accidents and injuries that arise at work.

To achieve this objective the Foundation will:

1. appoint and train a suitable number of first aid personnel to cover all work patterns
2. display first aid notices with details of first aid provision
3. provide and maintain suitable and sufficient first aid facilities including first aid boxes
4. provide any additional first aid training that may be required to deal with specific first aid hazards

The minimum first aid provision at all sites is an adequately stocked first aid box and an Appointed Person to take charge of the first aid arrangements however each site must complete a First Aid needs risk assessment to assess site specific requirements.

Appointed Person

The Appointed Person duties include:

- taking charge when someone falls ill or is injured, including calling an ambulance if required
- looking after and maintaining the first aid box and contents

The Appointed Person will not be required to provide treatment for which they have not been trained.

First Aiders

First aiders are qualified personnel who have received training and passed an examination in accordance with HSE requirements.

The numbers of first aid personnel at each location will be determined by individual circumstances, the level of risk and in line with current government guidance.

First aid personnel will be provided with refresher training at regular intervals to keep their skills up to date.

Note paediatric first aid training must be relevant for workers caring for young children and where relevant, babies (0-5 years). Providers should take into account the number of children, staff and layout of premises to ensure that a paediatric first aider is able to respond to emergencies quickly.

First Aid Boxes

First aid boxes will be provided within the workplace to ensure there are adequate supplies for the nature of the hazards involved. All boxes will contain at least the minimum supplies suggested by L74: First Aid at Work Approved Code of Practice. Only specified first aid supplies will be kept. No creams, lotions or drugs, however seemingly mild, will be kept.

Portable First Aid Kits

Portable first aid kits will be available for staff members required to work away from the normal workplace, where access to facilities may be restricted, such as:

- work with potentially dangerous tools and machinery away from base location
- staff travelling abroad on business
- staff travelling in vehicles on a regular basis
- staff whose work takes them to isolated or remote locations
- staff participating in sporting or social events arranged or supported by the organisation

AEDS (Automatic External Defibrillators)

AEDs are accessible at all of the Foundation's sites - the location will be specified on the First Aid notice on your H&S Noticeboard. Staff do not require training to operate these devices.

Refer:

- First aid Notice
- First aid kit checklist
- First aid needs risk assessment

Food safety

Food prepared on Foundations premises must be handled and served to comply with good hygiene practice to make sure the food is safe to eat.

The teaching of Food Science or food based activities must be carried out to ensure the safety of people we support, students and staff.

All commercial kitchens must be registered with the Local Environmental Health department and the Safer Food for Better Business file updated daily; 'Scored on the doors should be displayed in a prominent place.

Food allergens and intolerances

A separate policy is in place to manage risks of allergens and intolerances, see the Foundation Allergy Policy on PHF Connect.

Food Hygiene Training

The Foundation will ensure that all relevant staff are competent in all aspects of food hygiene that they are required to ensure that students and people we support are provided with appropriate experience to enable them to work correctly and safely, Level 2 in Food Safety is considered the minimum qualification.

Food hygiene training will be obtained by attending certificated courses which should be regularly reviewed, updated and refreshed every three years.

Key Considerations for lessons or activities involving food

Food preparation areas and classrooms provided are of sufficient size to allow people to work and circulate around the room with ease.

Group size can be determined by considering factors such as the size of the room, the equipment available, the age and ability of the participants, the number and size of wheelchair users and the experience of the staff. Staff must work within safe operating limits so that there is a safe teach environment and that they are able to provide adequate supervision for hazardous activities.

Staff are provided with safe equipment and systems that are regularly checked, inspected and maintained in an efficient state to recognised standards, with records kept. In addition to PAT testing this includes the servicing of gas equipment, fridge and freezer temperature checking, equipment guard checks, where appropriate.

Teachers should be trained to the standards specified in Health and Safety Training Standards in Design and Technology published by DATA.

Staff should will teach students and people we support about general health and safety requirements relating to the working environment; additional direct support will be determined on an individual basis.

Lessons and activities will be planned ahead to avoid risk. Work will be planned to involve the use of a wide range of food, food components and equipment to complete focused practical tasks. Student ability, knowledge, maturity, experience and special needs must be taken account of, to provide challenging tasks and potential for achievement.

Staff should be aware that because of their inexperience, students working with food require a high level of supervision, and should not be left unattended.

Manual Handling

It is recommended that trolleys are used for carrying heavy equipment and foodstuff.

The use of high-level storage should be avoided. Where this is not possible there must be safe procedures for access to such storage and the provision of suitable and adequately maintained steps/footstools.

Personal Protective Equipment for catering environments

Appropriate protective equipment, clothing, and storage of such, will be provided including suitably sized oven gloves and clean aprons.

Students and people we support should be made aware of the hazards of unsuitable footwear. Soft shoes and open toe sandals offer little protection from falling objects or spillages. Staff working in commercial kitchens must wear non-slip footwear which will be provided by the Foundation.

Long hair, jewellery, loose clothing such as ties and unbuttoned cuffs are potential hazards therefore sleeves should be rolled up, watches, jewellery (except a wedding band) and ties removed and long hair tied back.

Additional personal protective equipment such as gloves and eye protection is required when using hazardous cleaning agents.

Microwave & Combination Ovens

Manufacturer's instructions must be followed.

The ovens must be kept clean, including ensuring that air vents are not blocked or obstructed and that food debris does not build up around the door seal which could lead to leaks.

The ovens must not be used if the door does not close properly or if the door interlock switch does not work properly.

The ovens must not be switched on when empty.

Burns and scalds can be avoided by using oven gloves, removing lids or microwave film away from the face and checking the temperature of food and drink.

It is important to ensure food is thoroughly cooked throughout by stirring and turning the food during cooking.

Where induction hobs are in use they should never be used as a worksurface and items should never be stored on them when the hob is not in use.

Only food grade microwave film should be used in direct contact with food during cooking and defrosting. Food should not be cooked in sealed containers; pierce the film covering containers (unless there are specific manufacturer's instructions to the contrary). Only use containers, films and ingredients which are known to be suitable for heating in a microwave oven.

Users should be made aware of the risk of certain foods superheating.

Where induction hobs are in use signage should be displayed to warn anyone entering the area who may use a pacemaker.

Deep Fat Frying

Where small electrically powered thermostatically controlled deep fat dryers are provided the following precautions should be remembered:

- fryers should not be over-filled,
- electric leads should be kept as short as possible,
- fryers should be positioned safely,
- fryers should not be left unattended,
- water must not be allowed to come into contact with hot oil or fat (dry food before deep frying),
- the handle must be positioned safely and fat must be cooled before straining or pouring into plastic containers.

All persons must be trained to deal correctly with a fat or oil fire.

Where commercial standard gas appliances are provide the following controls must be in place and operational:

All deep fat fryers (except table top basket fryers) have:

- Flame failure device (if gas or oil fired)
- Thermostat to prevent temp exceeding 205 centigrade or manufactures recommended temp - whichever is lower
- a non-self resetting temp control which shuts of the heat source if the temp exceeds 230 degrees (or manufacturers instructions which ever is the lower)
- Extraction of heat via either:

    - integral duct or
    - overhead canopy
- Ducts and fixings to be constructed of galvanised or stainless steel
- Grease trap of filter is cleaned weekly

Pressure Cookers

Pressure cookers are covered by the Pressure Safety System Regulations 2000 and require annual inspections, against a suitable written scheme of examination.

Knives & Utensils

Staff should be trained in the safe use of knives with records kept.

Students and people we support must not be allowed to use a knife unless he or she has been properly trained in appropriate techniques.

The degree of supervision which is required when students/people we support are using knives depends on individual competencies and the tasks for which knives are being used.

Knives must be kept sharp and, when they are not in use, they must be stored securely in a knive box or lockable cabinet.

A knives inventory should be kept and checked at the end of any session involving students or people we support.

Where possible, the use of knives should be avoided, e.g. by the provision of vegetable peelers, scissors, etc. Mandolins are **not** recommended for use with students or people we support.

Sharp utensils should not be left projecting from work surfaces, left in sinks and should be placed with the blade pointing down in dishwashers and instruction must be given in their correct use, handling, storage and cleaning.

There is a Foundation generic risk assessment on for use of knives in commercial environments and in lesson/activity settings which can be adapted for use in specific Foundation areas.

Gas appliances

Gas appliances are serviced at least annually by an organisation registered with the Gas Safety Register. In commercial kitchens gas is isolated as part of the closing checks at the end of the day.

First Aid in a kitchen environment

At least one trained First Aider must be available le to attend and to provide first aid when the commercial kitchens, independent living skills or cookery rooms are in use.

A first aid container equipped and maintained in accordance with Health and Safety (First Aid) Regulations should be readily available.

Food standard sterile waterproof dressings coloured blue for ease of detection in food should be provided.

A separate policy is in place to manage risks around allergens and intolerances.

Fire Safety in a kitchen environments

Fire escape routes and fire doors must be operational and clearly marked, should be easily opened and free from all obstructions.

Fire fighting equipment, including fire extinguishers, fire blankets and fire detectors, should be readily available and maintained.

It is difficult to reduce the risk of fat-pan fires to zero, so specific instruction must be given to everyone on how to deal safely with such a fire when it occurs.

Spark devices are safer than matches for lighting gas hobs/ovens.

All displays should suitably positioned away from heat sources.

To reduce the dangers of accidents, the number of students or people we support working at any one time around heating equipment must be controlled and close supervision given.

Extraction duct work and canopies should be cleaned in accordance with TR/19 TR/19 HVCA Guide to Good Practice Internal Cleanliness of Ventilation Systems, this should be completed at least annually.

Kitchen Health & Safety Notices & Signage

Appropriate notices and signs are to be clearly displayed including warning signs next to hobs that have no visual indication that they are on/hot, next to freezers, for hazardous materials, for fire exits, escape routes, fire fighting equipment and emergency first aid.

Hand washing/personal hygiene posters are also recommended.

Refer:

Handwash poster
Kitchen inspection
Kitchen audit
Light equipment audit

Fundraising/Events

- A risk assessment must be completed and agreed by the Health, Safety & Environment Manager for any event organised by the Foundation.
- Staff arranging any event involving volunteers must also refer to the section on Volunteers in the Health and Safety Policy.
- Staff organising fundraising events must ensure that attendance at any event does not exceed 500 persons at any one time.
- Where necessary approval for the event must be granted by the police/and or a competent authority.
- Where alcohol of any other intoxicating substance is to be sold or provided control measures must be documented in the event risk assessment and agreed with the Health, Safety & Environment Manager

Play Inflatables

Where the Foundation hires play inflatables or any inflatable of a similar kinds the play inflatable must have a current PIPA test certificate issued in accordance with the manufacturers recommendations and must be supervised by a responsible adult when in use.

Hire of fairground rides or amusements

Where the Foundation hires fairground equipment or rides the equipment must be owned by and operated by a current member of the Showman's Guild.

Fireworks

Any event involving the use of fireworks, firework displays or bonfires must be organised in accordance with HSG124 'Giving your own firework display: How to run is safety. A risk assessment must be completed and approved by the Health, Safety & Environment Manager.

Any professional fireworks organisers engaged by the Foundation must be members of the British Pyrotechnics Association.

Gas Installations and Appliances

The Foundation will ensure that all work carried out on gas fittings and appliances are in accordance with the requirements of the regulations and the Safety in the Installation and Use of Gas Systems and Appliances Manual.

The Foundation is committed to achieving high standards of health and safety for all staff, visitors, customers and others. For these reasons employing, training, and arranging the assessments of operatives that are competent to work on gas installations and appliances – servicing, repairing or installing, is highly significant to supporting these aims.

The Foundation supports the aims of:

- reducing the waste of fuel and material
- increasing operational efficiency
- eliminating unnecessary emission of atmospheric pollutants
- reducing the risk to death, injury and distress to members of the public, staff and others who may be affected
- increasing confidence, amongst users, in the safe use of fossil fuels and fossil fuel burning appliances

The Gas Safe Register (GSR) is the governing body approved by the Health and Safety Executive to register and monitor the activities of gas installation and use. Gas fitting operatives carrying out work on behalf of the foundation will be registered with the GSR.

No person shall interfere with any gas appliance or gas fitting or pipe work unless qualified and competent to do so.

Hazardous Substances (COSHH)

All reasonable steps will be taken to ensure all exposure of employees to substances hazardous to health is prevented or at least controlled to within statutory limits.

The Foundation will implement the following:

- maintain an inventory of all substances hazardous to health kept or present on site and retain copies of relevant hazard data sheets
- competent persons will be appointed to carry out risk assessments of the exposure to substances hazardous to health and advise on their control

- all operations which involve, or may involve, exposure to substances hazardous to health will be assessed and appropriate control measures will be taken if elimination or substitution of the substance is not possible
- engineering controls will be properly maintained by planned preventive maintenance and annual performance monitoring to ensure continued effectiveness
- systems of work will be reviewed at suitable intervals and revised if necessary
- all employees and others who may work in the affected areas will be informed of the purpose and safe operation of all engineering controls
- personal protective equipment (PPE) will only be used as a last resort or as a back-up measure during testing or modification of other controls
- the type and use of PPE will be carefully assessed and maintained according to manufacturers' instructions
- assessments will be reviewed periodically or if changes to the operation or any hazardous substances used
- qualified professionals, where necessary, will carry out health surveillance
- employee health records of all exposures to substances hazardous to health will be kept for a minimum of 40 years
- all employees will be provided with understandable information and appropriate training on the nature of the hazardous substances they work with. Employees will be informed about any monitoring and health surveillance results
- all changes to control measures and changes of PPE will be properly assessed and no new substances will be introduced into the workplace without prior assessment

Information and Training

The Foundation will give sufficient information and training to ensure full understanding of the hazards to health posed by substances in the workplace and the importance of the control measures provided. Information will also be given to others who may be affected such as contractors, temporary staff and visitors where appropriate.

Managers and supervisors of areas which use substances hazardous to health will be given additional training to ensure the proper management of the risks.

Refer:

- COSHH Risk Assessment Form
- COSHH Inventory of Hazardous Substances
- COSHH symbols guidance
- Employee Guide to COSHH
- Employer Guide to COSHH

Health, Safety and Welfare

The Foundation is committed to providing suitable health, safety and welfare facilities in line with current legislation, in particular the provision of:

- adequate maintenance of workplace and equipment
- appropriate ventilation, temperature control and lighting (ideal working temperatures are between 16°C and 24°C although this varies depending on the kind of work being done, strenuous work is better performed at slightly lower temperatures than office work. Temperatures in residential settings however may be impacted by the requirements of the residents).

- suitable cleanliness and housekeeping standards
- adequate workspace allocation
- properly designed workstations
- well maintained traffic routes and floors
- appropriate fall protection
- suitable glazing
- safe access and egress (well maintained exits and entrances)
- appropriate sanitary and washing facilities
- a plentiful drinking water supply
- seating with an incorporated back rest
- accommodation for keeping clothing clean and dry
- facilities for changing, rest periods, hot drinks and meals preparation
- showering facilities if the nature of an employees work requires this
- appropriate first aid provision
- appropriate emergency, fire and evacuation equipment and procedures

The Foundation recognises these responsibilities are required for any work whether on a remote work site, at their usual workplace or Central Services.

Refer:

- The Health and Safety at Work Act
- The Workplace (Health, Safety And Welfare) Regulations
- Workplace inspection checklist

Hot Water and Hot Surfaces

Where there are people vulnerable to the risk of scalding, from bathing or showering, or burns and where there are hot surfaces such as pipes or radiators, risk assessments must be completed to identify the controls necessary and how the systems will be managed and maintained.

The results of the general risk assessment should be taken into account when completing an individual's care assessment. An individual's assessment needs to consider whether:

- The person is likely to try to run a bath or shower or add water when unattended
- The person's lack of mobility means they are unable to respond safely to hot water or surfaces (e.g. safely get in/out of the bath or shower, or move away from a radiator)
- The person's sensitivity to temperature is impaired
- The person's mental state means they cannot recognise or react to hot water or a surface that is too hot
- The person can summon assistance
- Any lifting or other aids limit mobility in the bath or elsewhere
- Any furniture, fixtures and fittings that restrict movement away from the source of heat.

Ensure all bathing risk assessments include the checking and **recording** of water temperature before the person baths/showers. This temperature must not exceed 44°C for baths and 41°C for showers.

In areas where these temperatures are exceeded (e.g. main kitchens, sluice rooms, cleaners cupboards etc) a warning notice must be placed on the affected outlet; a risk assessment should also be in place to ensure residents/people we support or students cannot access the outlet independently.

The Manager must compile a list of thermostatic mixing valves in each property, water temperatures should be monitored monthly and Thermostatic mixing valves must be serviced, inspected and tested on an annual basis by a qualified plumber or engineer.

Other Considerations

Hot drinks

Where hot drinks are being carried around a building where there is a risk of contact with students or the people supported, a suitable enclosed container should be used instead or a mug or cup. Trays for carrying multiple items are recommended.

Hot surfaces

Where assessment identifies that vulnerable people may come into prolonged contact with such surfaces the equipment should be designed or covered so that the maximum accessible surface temperature does not exceed 43°C.
E.g.
• Providing low surface temperature heat emitters
• Locating sources of heat out of reach
• Guarding the heated areas (e.g. providing radiator covers, covering exposed pipe work)
• Reducing the flow temperatures, although this should not reduce their effectiveness or increase risk from legionella.

Where temporary portable heaters have to be used (for emergency purposes in only in power failure etc.) only electric or gas fired appliance are permitted. A risk assessment must be completed to include the following controls:

The appliance must:

- Have a current maintenance/service record
- Be used in accordance to the manufacturer's instructions
- Sited away from combustible materials
- Stable, guarded and sited in a position to prevent burns from contact with hot surfaces with any leads, cables or fuel pipes secured and protected to ensure they do not pose a trip hazard
- Turned off when the area is not occupied

Refer:

- Hot Water and Hot Surfaces - Health and Safety Employer's Guide
- Hot water and hot surfaces generic risk assessment

Hybrid working

In some parts of the Foundation a hybrid way of working is embraced where employees work more flexibly either from a foundation building or from home or any combination of these. Full details of how this is safely managed is found within the Hybrid Working policy on PHF Connect.

Refer:

Hybrid working policy
Homeworking checklist and DSE assessment

Infection Prevention and Control

The Clinical Nurse Manager leads on infection control supported by the Nursing and Health and Safety team and adhere to current guidance from NHS, NICE and Public Health England, links to all current guidance are below:

https://www.nice.org.uk/Guidance/QS61

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

https://www.nhs.uk/

For some work activities, staff may be at risk of infection or of spreading infection. Exposure to infections may arise at work from a number of situations, including:

- contact with people (e.g. Diphtheria, TB, MRSA)
- contact with blood and bodily fluids (e.g. Tetanus, Hepatitis B or C, HIV)

The Foundation aims to prevent the spread of infection through work-based activities by adopting suitable control measures.

The Foundation will:

- undertake assessments to identify tasks or situations that may expose individuals or groups to potential infection
- identify, plan and implement controls and safe systems of work to prevent transmission of infection
- where individuals pose a risk of biting or scratching strategies to control this risk must be documented in the Behaviour Manager Plan. All incidents must be recorded and investigated.
- provided information, instruction and training to those identified at risk
- where required, provide personal protective equipment (PPE) and monitor its use and maintenance (to include the use of bite resistant clothing where appropriate).
- organise for the safe cleaning of equipment and where appropriate disinfection and thorough, cleaning of the premises
- arrange for safe disposal of any infected materials (disposal of clinical waste, needles etc.)
- adopt good hygiene practices in particular hand hygiene
- complete regular infection control audits

Vaccination

Where working with students or people we support who are known to carry Hepatitis staff must be vaccinated (and have achieved immunity). Where staff are required to use hypodermic needles consideration of vaccination should take place but will take into account the individual nature of the risk; where required the vaccinations shall be offered to individuals without charge.

Vaccination/booster against Covid 19 and seasonal flu and strongly encouraged by the Foundation.

Training and Information

Training and information will be provided to all employees who are identified from the risk assessment as being potentially exposed to infections.

Training will be given for any tasks they are employed to do, the equipment they will be using and any safe procedures to adopt.

Incidents of biting or scratching

Where staff are involved in an incident and the skin is penetrated as a result of a bite they must attend A&E immediately.

Where staff are involved in an incident and the skin is punctured as a result of a scratch/grab they must seek advice from their GP.

See also https://www.nhs.uk/conditions/animal-and-human-bites/

Use of and disposing of sharps

Where staff are required to use needle stick a risk assessment should be completed and relevant staff should be trained in the control measures identified. The Needlestick Injuries emergency procedure should be displayed in all rooms where sharps are in use.

Staff administering needles should be considered for vaccinated against Hep B.

Used sharps should be disposed of immediately in a sharps bin or (where it is not appropriate to store the bin in the area that the medication is administered) the used needle should be transported in a suitable temporary container to the sharps bin***. Sharps should never be re-sheathed.***

In the event of a needle stick injury where the skin is punctured, free bleeding should be gently encouraged and the wound should be washed with soap and water, but not scrubbed or sucked. The staff member must attend A&E immediately. The incident must be reported as soon as possible and investigation instigated.

- See also https://www.nhs.uk/common-health-questions/accidents-first-aid-and-treatments/how-should-i-dispose-of-used-needles-or-sharps/
- Needlestick Injury poster (see PHF Connect)

Staff Illness and Reporting

It is important to remember that infection can also be passed onto people from staff. Staff should notify their manager if they develop any infectious disease that may affect work or people around them, for example:

- skin infections or exposed areas of infestation
- Covid 19
- severe respiratory infection (e.g. pneumonia, TB)
- severe diarrhoea
- jaundice
- hepatitis
- Chicken Pox, Measles, Mumps, Rubella
- HIV
- Weil's Disease.

Managers will need to discuss with the individual suitable controls. In some cases, employees may need to be referred to an Occupational Health Practitioner or their GP for advice.

Staff should also report any illness or disease which has been contracted through work. In some circumstances if a staff member contracts a disease whilst at work, this is reportable under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations). Certain diseases including Leptospirosis, Hepatitis, TB, and Tetanus are specifically required to be reported.

In residential or ISL settings where the is a suspected outbreak of 2 or more people we support, the home must inform the Public Heath England team.

Where the numbers of those **employees** suffering from illness are more than the norm it may be necessary to inform the local Health Protection Team:

https://www.gov.uk/health-protection-team
0300 030 8596

See also: Management of Outbreaks of Diarrhoea and Vomiting in Care Homes, North East Resource Pack June 2014
www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf

Confidentiality

Confidentiality will be maintained at all times in relation to an employee who is known to have any infectious disease.
No health information will be disclosed without the written consent of the employee concerned and any breach of such confidentiality, either inside or outside the organisation, will be regarded as a disciplinary offence and may result in disciplinary action.

Refer:

- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
- Accident, incident and near miss reporting policy
- Wallcharts:
  - C Diff
  - MRSA
  - CMV

- Handwash guidelines
- Infection control audits
- Infection prevention & control policy
- IPC resource area on PHF Connect

Interactive Whiteboards

All reasonable steps will be taken by the school to secure the health and safety of employees and students when interactive whiteboards are used.

To achieve this objective the school will:

- consider ultra short throw projectors as a first option during the procurement process as these present the safest option for teachers and students

- prior to the installation of any new whiteboard a risk assessment will be completed to cover the positioning of the projector and the exposure to intense light

- try to ensure that projectors are located out of the sight line from the screen to the classroom; to ensure that, when teachers look at the class, they do not also have to stare at the projector lamp. (The best way to achieve this is by ceiling-mounting rather than floor or table-mounting the projector)

- ensure that students and students are adequately supervised when they are asked to point out something on the screen

- provide a stick or laser pointer to avoid the need for the user to enter the beam is recommended.

- provide adequate information and training to persons working with interactive whiteboards especially in relation to beam viewing by teachers and students.

Guidance for Users

- Teachers and students should avoid staring into the projector beam at all times
- Try to keep your back to the beam as much as possible
- Use the stick or laser pointer provided whenever possible.

Legionnaires Disease/water management

All reasonable steps will be taken to identify potential legionellosis hazards and to prevent or minimise the risk of exposure.

A risk systems include the hot and cold water storage and distribution system.

To achieve control of legionella bacteria the foundation will implement the following:

- **Avoidance of Conditions Favouring Growth of Organisms**
  As far as practicable, water systems will be operated at temperatures that do not favour the growth of legionella. The recommended temperature for hot water is 60°C and either above 50°C or below 20°C for distribution, as care must be taken to protect people from exposure to very hot water.

  The use of materials that may provide nutrients for microbial growth will be avoided. Corrosion, scale deposition and build up of bio films and sediments will be controlled and tanks will be lidded.

- **Avoidance of Stagnation**
  Dead-legs, which occur when water services leading from the main circulation water system to taps or appliances, are used only intermittently and other parts of systems which may provide a reservoir for infection will be identified and where possible eliminated.

- **System Maintenance**
  Water systems will be disinfected by an effective means before being taken into service and after shut downs of five or more days. Plant will be regularly inspected and maintained (e.g. by monthly visits from a water treatment specialist). Plant will be disinfected periodically (normally twice yearly) by chlorination or by temporarily raising water temperatures. Biocides may be used to control microbial growth. Maintenance personnel must wear appropriate protective clothing.

- **Sampling**
  Sampling for legionella will not normally be necessary, unless in the case of an outbreak or to monitor the effectiveness of precautionary measures. Weekly monitoring of chemical and microbiological water quality will be carried out to give a useful indication of the state of the system.

- **Record Keeping**
  Records will be kept of all maintenance, temperature monitoring and sampling carried out.

Selection, Training and Competence of Staff

Persons carrying out control measures will receive appropriate training and supervision so they are able to perform their duties competently.

Action in the Event of an Outbreak

The Health, Safety & Environment Manager or Head of Estates and Facilities ***must be contacted immediately*** who will implement the Legionella outbreak plan detailed in section 9.0 of the L8 Water risk assessments held on each site.

Reporting
Legionella is a RIDDOR reportable disease and there is a legal requirement for employers to report cases of Legionnaires Disease that may be acquired at their premises to the Health and Safety Executive.

Refer:

- Water Management policy and procedure - PHF Connect

Lockdown or invacuation policies and procedures

All sites are required to have a lockdown or 'invacuation' policy and procedure in order to manage and respond to security related incidents. Invacuation is the process of getting everybody inside, safe and securing a building. In most cases once the building is secure activities can continue as normal. For example there could be an incident or civil disturbance that might affect the setting; there could be an intruder on site or there could a risk of air pollution from a nearby fire or chemical release. All sites should have their own invacuation/lockdown procedure and this should be tested regularly to ensure it is effective.

Refer:
- Site specific invaucation/lockdown procedures

Lifting Equipment

All reasonable steps will be taken to ensure lifting equipment is suitably managed with regards to health and safety.

Definition

Lifting equipment includes any equipment used at work for lifting or lowering loads, including attachments used for anchoring, fixing or supporting it.

Implementation

The Foundation will ensure that

- lifting equipment is suitable for the intended use with adequate strength and stability
- an examination scheme is drawn up by a competent person
- lifting operations will be properly planned by a competent person, appropriately supervised and carried out in a safe manner
- lifting equipment is maintained in a safe condition and examined/inspected by competent persons (annually or 6 monthly if lifting people) to ensure correct installation and safe operation
- lifting equipment will be re-examined following relocation or conditions that may cause deterioration
- safe working load (SWL) is clearly displayed on all lifting equipment
- suitable training, instruction and information is provided for operators and supervisors
- a visual inspection of all hoists should be completed prior to use to include check that LOLER and service are in date

Records

All thorough examination reports will be kept for as long as the equipment is being used except for lifting accessories reports and reports carried out due to deterioration in condition, which must be kept for 2 years.

Refer:

- Moving and handling Training and Competence Record Form
- Moving and handling plans
- Moving and handling policy
- Lifting Operations and Lifting Equipment Regulations
- Work Equipment Maintenance Record Form
- Safe use of wheelchairs guidance
- Hoist checklist (LPS)

Lone Working

The Foundation will ensure, so far as is reasonably practicable, that employees and self-employed contractors who are required to work alone or unsupervised for significant periods of time are protected from risks to their health and safety.

The Foundation will determine, by risk assessment, those activities where work can actually be done safely by one unaccompanied person. This will include the identification of hazards from means of access and/or egress, plant, machinery, goods, substances, environment and atmosphere, etc.

Particular consideration will be given to:

- the remoteness or isolation of workplaces
- any problems of communication
- the possibility of interference, such as violence or criminal activity from other persons
- the nature of injury or damage to health and anticipated "worst case" scenario

Lone Working within independent supported living outlines some slightly different protocols to ensure the safety and well-being of employees who work alone while providing care to individuals in their homes. Here are some key components the Foundation consider:

- Risk Assessments are required for staff lone working with a person we support. The Foundation will do this by assessing the risks associated with lone working situations. This will include evaluating the nature of the tasks, the environment in which the care is provided, and any potential hazards or threats.

- Training and competency will be completed on all staff members that are lone working. We will ensure that our that lone workers are adequately trained and competent to carry out their duties safely and effectively. This will include training in first aid, health and safety, conflict resolution, and are signed off as competent in executing any emergency/contingency procedures.

- Communication – we will have established and reliable communication channels between lone workers and their supervisors and colleagues with a robust on-call procedure. Our lone workers will be provided with mobile phones, radios, as well as regular check-ins with their line manager.

- Emergency procedures- We have clearly outlined the procedures which must be followed in the event of an emergency, such as a medical emergency, accident, or hostile situation. This may include instructions on how to summon assistance and provide appropriate first aid.

- Personal safety measures- we will provide guidance on personal safety measures, such as maintaining situational awareness, avoiding potentially dangerous situations, and knowing how to de-escalate conflicts. This will form part of the staff members induction which is completed with their line manager.

- People that we support risk assessments- At the Foundation we will complete a needs assessment on all individual and conduct numerous assessments of clients' homes to identify any potential risks to lone workers, such as aggressive pets, unsafe environments, and/or individuals with a history of violence/allegations. This risk assessment will be completed in conjunction with the multi-disciplinary team and the individual so that appropriate risk measures are in place.

- Support and supervision to staff- we will ensure that lone workers receive adequate support and supervision from their line manager, even when working alone. This may involve regular check-ins from supervisors or colleagues, as well as access to counselling or debriefing services.

- Documentation and reporting- we have established procedures for documenting lone working activities and any incidents that occur through our digital systems Nourish and/or Vatix. This will include keeping detailed records of client visits, incidents, and near misses, as well as reporting requirements for accidents or injuries. These will be discussed locally and through our Incident Review Group (IRG) which is held monthly.

- Review and Monitoring- we will be regularly reviewing and monitoring the effectiveness of the lone working policy and making any necessary adjustments or improvements. This may involve soliciting feedback from lone workers, people we support, and other stakeholders.

By implementing the above step, we can help ensure the safety and well-being of our employees whilst delivering high-quality care to individuals in their homes.

Information and Training

Employees and others will be given all necessary information, instruction, training and supervision to enable them to recognise the hazards and appreciate the risks involved with working alone.

Employees will be required to follow the safe working procedures devised including:

- when working alone, e.g. in an isolated area of a building with all doors closed, ensure that someone is aware of your presence

- check that work being done has been subject to risk assessment and check the assessment yourself – some work may have been identified as requiring the assistance of a second person

- if possible and arranged beforehand, keep in regular contact with someone else, e.g. use a mobile phone to call into the office every couple of hours indicating your movements

- do not put yourself at risk; if you do not feel safe discuss the situation with your immediate manager

Refer:
- Lone working risk assessments
- Employee Guide to Violence and Lone working
- Lone working ‘buddy’ form

Minibuses and electric fleet

Legal Requirements

The law requires that a minibus must:

- Be correctly licensed
- Display a valid tax certificate
- Be adequately insured
- Be well maintained
- Have a valid MOT certificate (if more than one year old)

The school will ensure that appropriate safety procedures are established for the minibus in line with the ROSPA Advice for Minibus Safety and their code of practice. A copy of the full code of practice is available at www.rospa.com.

Driver Training

It is essential that the Foundation is satisfied that all persons authorised to drive are competent to drive a Foundation vehicle containing people we support safely. The absolute minimum requirements to comply with our insurance are that the drivers:

- are over the age of 21,
- have category D1 on their licence,
- have at least two years' experience as a qualified driver
- hold a current full driving licence with no more than 6 penalty points. If a driver has less than 6 points, the driver may still be precluded if the points are for dangerous driving

To comply with the above, the Foundation has gone further in its quest to ensure that students, residents and people we support are driven in safety, including the option of MiDAS training to improve standards.

Prior to transporting passengers for the first time, all drivers will be given the opportunity of a vehicle familiarisation session to include:

- Daily vehicle checks
- Pre-journey checks
- General driving safety
- Road testing
- Emergency stop
- Use of mirrors and indicators
- Reversing using mirrors only
- Passenger safety
- Passenger comfort

Given the fundamental differences between Electric Vehicles and petrol/diesel vehicles separate familiarisation sessions are completed on the electric fleet.

All new drivers will be added to the list of authorised drivers once the Transport Manager is satisfied with the driver is competent.

Staff who passed the test to drive a car after 01.01.98 are required to successfully complete a PSV test to drive the academy minibuses.

Drivers Hours

It is the Foundation's policy that if there is a trip which involves a driver being in charge on an extended day, then a second adult should accompany the party and that person should be competent to share the driving to reduce the possibility of driver fatigue. An extended day is anything beyond 7.00 pm when the employee started work at 8.45 am. This requirement is non-negotiable.

Driver's Responsibilities

Whilst the Foundation will ensure a weekly check of the condition of the minibuses and EVs, drivers are responsible for the following checks before embarking on their trips:

- Do a visual inspection of the minibuses which includes tyre pressure checks and that the windscreen and glass is clean and can be seen through
- Check brakes to see that they are functioning correctly
- Ensure that mirrors and seat are in the correct driving position
- Check that all lights are functioning correctly
- Ensure that all seat belts are being worn. This includes all passengers, who must wear a seat belt
- Ensure that wheelchairs are correctly clamped into the vehicle
- Ensure that the windscreen washer system works and that wipers are functioning correctly
- Ensure that the vehicle is correctly loaded and that no more than sixteen passengers are being carried
- Emergency exits must not be blocked
- Ensure that all doors are correctly closed
- Check that you have enough fuel for your journey
- As soon as possible after moving off, the driver should carry out a running brake test and at the same time, check the operation of the seat belts
- At intervals throughout the journey, all instruments and warning lights should be checked and necessary action taken if a fault is indicated
- Ensure that food and drink are not consumed on the vehicle
- Make sure that no rubbish is left on the vehicle and ensure that no malicious damage has occurred to the interior of the vehicle

This legal requirement is fulfilled by use of the Fleetcheck application which ***must*** be completed prior to the trip; authorised drivers have access to this app via the mobile phone designated to the minibus/EV. If for any reason the Fleetcheck App cannot be accessed a paper back up is available for completion in every vehicle. Failure to complete the pre-inspection may result in disciplinary action.

At the end of the journey the driver must lock and make the vehicle secure. Keys should only be taken just prior to making use of the minibuses. The keys should be returned immediately after use.

Passenger Responsibilities

- Should wear seat belts and always remain in their seats until instructed otherwise
- Should never distract the driver by shouting, etc
- Students should not eat or drink on the vehicle
- Must make sure that escape routes are not blocked by bags, etc

- Students are ambassadors of the academy and must never bring its name into disrepute by gesturing, etc
- Passengers found to have vandalised the minibuses may face a ban from using it again and be required to pay for damages

Accident Procedures

If an accident occurs and any personal injury or damage to third party property is involved, then the driver must stop. He/she must be prepared to give his name and address and details of the owner of the vehicle to a Police Officer or any other person having reasonable grounds to ask. If for any reason the driver is not able to give these details then he/she must report in person to a Police Station as soon as practically possible, otherwise an offence is committed, and in any event not later than twenty-four hours afterwards. Advice on action to take in the event of an accident in also included in the Fleetcheck app.

Report the accident immediately to the Transport Manager and in accordance with the AIN Policy and complete the appropriate forms for onward transmission to our insurers.

Breakdown and Recovery

The foundation fleet is covered for breakdown and recovery. Details of how to contact the providers and our membership numbers are in each vehicle.

First Aid

All vehicles contain first aid boxes which are checked at the end of each term. The contents of these boxes include:-

- Antiseptic wipes
- Bandages
- Assorted adhesive dressings
- Plasters
- Eye pads
- Scissors.

Any use of the first aid kit must be reported as soon as possible thereby maintaining a full kit at all times.

All vehicles must also carry an emergency exit hammer, fire extinguisher and seatbelt cutters; availability of such items is checked daily as part of Fleetcheck.

Foundation fleet should not be used for private use or for the transportation of chemicals, clinical waste or certain equipment. If the driver is unsure they must contact the Transport Manager prior to using the vehicle.

Weekly Checks

Weekly checks of the minibuses will be carried out by the Transport Manager and recorded on the Fleetcheck system.

Any defects in the minibuses are notified immediately to the Transport Manager via the Fleetcheck system who will then determine whether or not the vehicle should be taken off the road and repairs carried out.

The minibuses are inspected every ten weeks and serviced in line with the manufacturers recommendations.

Incorrect Use of the vehicles

A driver who breaks the speed limit will be responsible for paying his/her own fines. Similarly fines imposed for incorrect car parking or negligent driving will be the responsibility of the driver. Any damage caused to the minibuses through incorrect use, may result in the driver being asked to contribute fully or partially to any excess payable by the academy.

The Foundations also uses Verizon fleet management software to track vehicle location, improve routing and reduce costs for vehicle maintenance and fuel as well as track driver speeding and harsh driving.

Speed Limits

The speed limit for minibuses is as follows:

- 30 mph not 40 mph on urban carriageways
- 50 mph not 60 mph on single carriageways
- 60 mph not 70 mph on dual carriageways
- 70 mph on motorways

List of Authorised Drivers

The Transport Manager will keep a list of drivers who have been authorised to drive the minibuses on the Fleetcheck system – full details of checks completed is contained within the Transport policy.

Authorisation may be withdrawn at any time by the Transport Manager. Any member of staff who has been advised not to drive their own vehicle for medical reasons must advise the Transport Manager and their Line Manager immediately.

Electric Vehicles

As part of its sustainability strategy the Foundation has a number of Electric Vehicles, separate risk assessments are in place for both use of the vehicle and the associated charging infrastructure.

Refer:

- Foundation Transport Policy
- Wheelchair clamping guidance
- Wheelchair clamping risk assessment
- Fleetcheck application
- Driving section of H&S manual
- Separate risk assessments for use of Electric EVs and the EV charge points

Moving and Handling

To prevent injuries and long term ill-health from manual handling, the Foundation will ensure that operations which involve manual handling are eliminated, so far as is reasonably practicable. Where it is not practical, the Foundation will carry out an assessment to determine what control measures are required to reduce the risk to an acceptable level.

To implement this policy the organisation will ensure that:

- manual handling assessments of inanimate objects are carried out where relevant and records are kept
- employees are properly supervised
- adequate information and training is provided to persons carrying out manual handling activities including details of the approximate weights of loads to be handled and objects with an uneven weight distribution

- any injuries or incidents relating to manual handling are investigated, with remedial action taken
- employees adhere to safe systems of work
- safety arrangements for manual handling operations are monitored and reviewed
- where relevant, employees undertaking manual handling activities are suitably screened for reasons of health and safety, before doing the work
- special arrangements are made for individuals with health conditions which could be adversely affected by manual handling operations

Reducing the risk of injury

In considering the most appropriate controls, an ergonomic approach to designing the manual handling operation will optimise the health, safety and productivity associated with the task.

Techniques of risk reduction will include:

- mechanical assistance
- redesigning the task
- reducing risk factors arising from the load
- improvements in the work environment
- employee selection

No employee will be required to lift any item that they do not feel confident of doing without risking personal injury.

Moving and Handling People

Whenever a person with physical disabilities needs regular support in standard moves such as from wheel chair to bed, toilet or bath, then a full **moving and handling plan** must be recorded. Clear instructions covering each activity should be included, so that all staff members who are involved in the task may move the person safely and in the same manner. Ancillary equipment such as hoists, sliding boards, swivel plates, etc. must all be used in the correct manner.

Refer:

- Manual Handling task specific risk assessment form
- Moving and handling plans
- Generic manual handling risk assessment
- Employee guide – Manual handling
- Foundation Moving and handling policy
- Safe use of wheelchair guidance
- Moving and Hoist checklist
- Sling checklist and video

New and Expectant Mothers

The Foundation recognises that the general precautions taken to protect the health and safety of the workforce as a whole may not in all cases protect new and expectant mothers and there may be occasions when, due to their condition, different and/or additional measures will be necessary.

To implement effective measures for new and expectant mothers, the Foundation will ensure that:

- employees are instructed at induction to inform their relevant manager of their condition at the earliest possible opportunity and that the highest level of confidentiality is maintained at all times

- risk assessments are carried out for all work activities undertaken by new and expectant mothers and associated records and documentation maintained

- necessary control measures identified by the risk assessment are implemented, followed, monitored, reviewed and, if necessary, revised
- new and expectant mothers are informed of any risks to them and/or their child and the controls measures taken to protect them
- any adverse incidents are immediately reported and investigated
- appropriate training etc is provided where suitable alternative work is offered and accepted
- provision is made to support new and expectant mothers who need to take time off work for medical reasons associated with their condition
- where relevant a suitable rest area is provided to enable the new or expectant mother to rest in a degree of privacy and calm
- where risks cannot be eliminated or reduced to an acceptable level then consideration will be given to adjusting working conditions and/or hours or if necessary providing suitable alternative work or suspension with pay

Refer:

- New and Expectant Mothers Notification and Risk Assessment Form generic template
- Employees Guide - New and Expectant Mothers
- Employers Guide Pregnancy at work

Night Working

The Foundation will ensure, so far as is reasonably practicable, that employees who work nights are not put at any additional risk. The Foundation will identify from risk assessment any necessary controls required for night workers.

A 'night worker' is defined as one whose daily working time includes at least three hours of night time:

- on most days worked
- on a proportion of the days worked which is specified in a collective or workforce agreement
- often enough for it to be said that the night work is as a normal course

To implement effective measures for night workers, the Foundation will ensure that:

- risk assessments are carried out for all work activities undertaken by night workers and associated records and documentation maintained
- necessary control measures identified by the risk assessment are implemented, followed, monitored, reviewed and, if necessary, revised
- night workers are informed of any risks to them and the controls measures taken to protect them
- any adverse incidents are immediately reported and investigated
- health assessments are conducted prior to starting night work
- where an individual cannot work nights due to a health condition, other employment options or restrictions will be considered on a temporary or permanent basis where possible
- new and expectant mothers will be assessed once notified
- young workers may not be legally allowed or suitable for night work, depending on the task or duration. This will be assessed prior to starting any night work

Health Assessment

Those identified as night workers will be offered a Health Assessment prior to starting working nights and annually thereafter.

The Health Assessment will consist of a Medical Questionnaire. Where this identifies any medical concerns then the foundation will review the ability to work nights with an occupational health provider.

Refer:

- Night Workers Health Assessment Form

Outdoor Play Equipment

Supervision

Children and adults must be supervised at all times whilst using outdoor play equipment and the appropriate number of people required to supervise play areas must be determined for each location and user group.

Supervising staff should be familiar with the equipment, the rules for use and of the ability of the user

General guidelines

- Staff/supervisors on duty must ensure that outdoor play equipment is visible and can be appropriately supervised when in use.
- Staff/supervisors on duty have a responsibility to make regular checks for defects and report them as appropriate.
- Staff/supervisors have a responsibility to ensure appropriate behaviour policy
- Consideration needs to be given to weather conditions, outdoor play equipment should not be used during wet or icy conditions.
- Apparatus must only be used at appropriate times when supervised. Parents need to be informed that the apparatus is for school aged children only and not to be used before and after school

Clothing/Footwear

Suitable clothing should be worn. Hazards can arise from - unfastened coats, woollen gloves, scarves, ties, etc.

Appropriate footwear must be worn. Hazards arise from - slippery soles, open toed and sling back sandals, heels and untied laces, etc.

Zoning of Activities

Consideration will be given to the range of activities occurring within the playground area:

- Ball games/chasing games to be sited away from the climbing area.
- In a nursery garden, wheeled toys in particular, are to be used away from the climbing area.

Play equipment standards

All new outdoor play equipment to be designed, constructed, installed and maintained in accordance with European standards BS EN 1176 and BS EN 1177.

These European standards are not retrospective or a legal requirement but represent good practice in the event of an accident claim. Play equipment which was considered safe under BS 5696 will still be safe under the new standards.

The independent competent person carrying out annual inspection and maintenance will advise whether any alterations need to be made.

Only manufacturers/contractors with appropriate play industries registration will be used to install new outdoor play equipment. Schools will check that companies have API (Association of Play Industries) or BSI registration for equipment manufacture and installation.

Scrambling and climbing elements must not exceed 3 metres, for children below 5 years the height should be a maximum of 1.6 metres.

Height should not be the dominant feature on any item of equipment. Interest challenge and enjoyment should be achieved without the need for height itself.

Structures must be spaced clear of each other to prevent one activity interfering with another, they must also be clear of walls, fences etc.

Suppliers of new equipment will be required to supply information relating to surfacing requirements, intended age range, risk assessment, installation instructions, servicing and maintenance instructions

Safety surfaces

All products must meet the appropriate BS EN Standards. Both portable and fixed climbing equipment that has a fall height of 600mm must be on an impact-absorbing surface if used outside. (Fall height is the distance from the clearly intended body support to the impact area)

Although impact absorbing surfaces cannot prevent accidents they may reduce the level of injury. There are a range of surfaces available which provide impact attenuation including rubber mats and tiles, bark etc.

The extent of surfacing around static equipment is dependent on the fall height; this should extend at least 1.75m beyond the outermost points of the base of the frame.

When considering so called safety surfaces their likely effectiveness, durability, practicality and management will be taken into account.

Materials such as top soil and turf do have limited impact absorbing properties.

Where bark is used this area should be a minimum of 300mm deep with a recommended particle size of 38mm max and 12mm min.

Loose materials will spread if not suitably contained and will need to be topped up from time to time, thus it is important to have additional bark available to top up to the original level.

Inspection and maintenance

For new equipment a post installation inspection will be arranged.

BS EN 1176 recommends that all outdoor play equipment be inspected and maintained on a regular basis.

Such inspection and maintenance is at 3 levels.

Level 1 checks – Daily / pre use checks by staff (these do not require formal recording)

Concentrating on the following points:

- No evidence of obvious wear / damage
- Area safe from health hazards e.g. needles, glass, faeces etc.
- Impact absorbing surfaces no cuts, tears, wear or unstuck areas
- All fastening tightly secured
- No broken chains, stretched links or loose or twisted shackles
- Uprights unbroken and firm in the ground

Where any defects / hazards are identified appropriate steps must be taken to prevent use until problems have been satisfactorily resolved.

Level 2 checks – termly inspection in house

A more thorough check of the equipment to be conducted termly and these records kept on site (RoSPA site specific tailored inspections available).

Level 3 checks – annual inspection

A detailed certified inspection by an independent competent person capable of inspecting to BS EN 1176 and 1177 these checks must be formally recorded and records kept on site.

Such checks ensure safety and identifies any improvements required in terms of the European standards

The competent person conducting the annual inspection will advise on the extent of surfacing required for both static and moving equipment

Refer:

- Termly outdoor equipment checklist
- Visual outdoor equipment checklist
- Site specific tailored inspection (RoSPA)

Permits to Work

Non-routine work, such as maintenance, cleaning, equipment installation and refurbishment, can produce health and safety risks over and above those normally encountered in our day to day activities. Permits to work are designed to check that all eventualities have been considered when planning and organising this type of work and are an important means of minimising any risks involved.

Employees, contractors and visitors are all expected to comply with the requirements of any permits that are in force.

Employees working off site, i.e. on another organisation's premises, are expected to abide by all permits to work operated on that site.

Should employees experience any problems with the operation of permit-to-work systems, they should immediately inform a responsible person (usually a manager or supervisor) so the organisation can investigate and rectify the situation.

Permits to work exist to cover tasks carried out under certain circumstances and over limited time periods. They will therefore be displayed while the work specified is under way but will cease to operate when the tasks have been completed.

Information and Training

The Foundation will provide the necessary information and appropriate training to ensure that appropriate employees, supervisors, contractors and visitors are fully aware of the permits in use and are competent to undertake the tasks and tests prescribed in the permits.

Refer:

- Permit to Work Forms
- Permit to work at height
- Wet work permits
- Hot work pemits

Personal Protective Equipment

The Foundation provides personal protective equipment (PPE) when the risk presented by a work activity cannot be eliminated or adequately controlled by other means. When it is provided, it is because health and safety hazards have been identified that require the use of PPE and it is therefore necessary to use it in order to reduce risks to a minimum.

To effectively implement its arrangements for the use of PPE the Foundation will:

- ensure that PPE requirements are identified when carrying out risk assessments
- use the most effective means of controlling risks without the need for PPE whenever possible and only provide PPE where it is necessary
- carry out an assessment to identify suitable PPE
- ensure that if two (or more) items of PPE are used simultaneously, they are compatible and are as effective used together as they are separately
- ensure PPE is available to all staff who need to use it in a variety of sizes to ensure a suitable fit
- provide adequate accommodation for correct storage of PPE
- provide adequate maintenance, cleaning and repair of PPE
- inform staff of the risks their work involves and why PPE is required
- instruct and train staff in the safe use and maintenance of PPE
- make arrangements for replacing worn or defective PPE
- review assessments and reassess the need for PPE and its suitability whenever there are significant changes or at least annually
- where PPE requirements conflict with cultural or religious beliefs we will actively explore safe alternatives where this is possible

Employees provided with PPE for their own personal use at work will be required to sign to confirm its receipt.

Refer:

- PPE risk assessment
- Personal Protective Equipment Issue Record

Physical Education

The Foundation is committed to safe practice in physical education and recognises that staff leading physical lessons and activities have a duty of care for those in their charge to ensure that planning and implementation include recognition of safety as an important element.

Our Educational settings follows the standards set out in 'Safe Practice in Physical Education and School Sport' produced by the Association for Physical Education, this standards are also seen as good practice for PE activities in adult services.

Implementation

The Head of PE or Activity Lead is responsible for ensuring this policy is brought to the attention of all staff in the Department, for ensuring that it is complied with. They are also responsible for completing an Association for Physical Education (afPE) PE risk assessment form for each PE event where significant health and safety hazards are reasonably foreseeable and for bringing risk assessments to the attention of relevant staff.

Staff competence and qualifications

Staff with responsibility for the planning and delivery of PE programmes should have satisfactorily completed appropriate initial and/or in-service training which cover all those aspects of activity required to be taught, as recognised by the DfE.

Where there are specific National Governing Body Certificates available for certain sport or activities, teachers planning or supervising these activities should be certificated as appropriate.

Only in exceptional circumstances and with great care should teachers of other subjects who have no specialist training in physical education be time-tabled to teach in the PE department. Those teaching staff should not take full responsibility for any aspect of physical activity where there are elements of hazard and attendant risk. This will include swimming, gymnastics, athletics and throwing events.

Supervision of students/people we support

Unqualified teachers will not be required to teach in areas where they lack the appropriate experience and expertise, particularly where there are safety implications. A qualified specialist teacher should closely supervise PE classes. It is not acceptable for non-teaching staff to supervise a practical class on their own.

Adults other than Teachers (AOTT's)

When adults other than teachers are used to support the delivery of physical education and in the extended curriculum to:

- support and work alongside teachers in the delivery of the curriculum
- work alongside and support teachers in the development of school clubs and teams on the school site
- deliver off-site activities

However the duty of care that operates for any activity in which students or people we support are engaged cannot be transferred to the AOTT; AOTT's must work alongside teachers with supervision.

Refer: 'Guidelines for Local Education Authorities, Schools and Colleges' in the use of 'Adults other than Teachers in Physical Education and Sport Programmes', BAALPE.

Class/group sizes in Physical Education

In determining the size of teaching groups in physical education, account will be taken of:

- nature of the activity
- age, experience and developmental stage of student/students
- requirements of National Curriculum in educational settings

Risk Assessment

The Foundation will create and maintain a risk assessment for each PE work area.
Significant hazards and their control measures will be included in "schemes of work" as appropriate. All staff working in PE and school sport and adult activities will be made aware of these findings and be involved in their review.

Manual handling and storage of equipment

Where possible manual handling tasks should be avoided or the risk of handling injury minimised by appropriate task design or the use of handling aids (e.g. trolleys). The layout of storage areas should minimise the need to stretch, reach, bend or twist the body excessively to reach frequently used or heavy items. This can be enhanced by ensuring that storage areas are kept tidy and well organised.

Apparatus Handling by Students or people we support

Where possible it is beneficial to involve students and people we support in apparatus handling, particularly in gymnastics, but only if this is appropriate for the individual student or people we support. If involved this must be carried out in such a way as to reduce risk to students/people we support as far as is reasonably practicable. The Foundation will make arrangements to enable students and people we support to learn how to handle equipment safely according to their age and strength.

Inspection of equipment

All indoor PE facilities (gymnasiums, halls, sports halls, multi-gyms etc.) and equipment will be inspected termly and records kept.

PE/Sports department staff should carry out pre-use visual checks of equipment to identify obvious defects this includes a visual sweep of playing areas prior to use to ensure any hazardous objects are removed.

Games posts to be kept in good condition, lighter portable posts secured to prevent them falling over free standing posts secured and all posts checked regularly.

Hazards and equipment defects

It is the responsibility of everyone in the PE/Sports department to inform the person in charge of any hazards, e.g. defects to equipment, so that appropriate action can be taken.

If the person in charge considers a defect to be a significant threat to health and safety, the equipment must be taken out of action until the defect to the equipment has been remedied and it is safe to be used. A notice must be hung on the equipment indicating that it is faulty and must not be used.

Emergency procedures

The Head of Department/Activity Lead is responsible for preparing written emergency procedures for activities where there is a risk of serious and imminent danger to employees and/or students. Where employees are allocated specific tasks to perform in an emergency their role will be detailed and they will be suitably trained.

Away Fixtures

Such risks could be significant in the case of an injury to student(s)/people we support during an activity both on-site and off-site. Effective procedures are complicated by when and where the emergency happens. The Foundation will consider what they will do during away fixtures and matches and agree procedures that will ensure effective handling of the situation.

First Aid

The Foundation will ensure that a suitable numbers of trained first aiders are available.

A travelling first aid kit and clear, effective procedures for contacting the emergency services is considered to be the minimum requirement.

Procedures to address the needs of injured students or people we support and the remainder of the group away from Foundation premises and the managing accidents will be included in PE risk assessments.

Clothing and Footwear

This must be appropriate to the activity.
Suitable footwear must be worn on all occasions. Specific requirements are:

- **Games, athletics, cross-country running**

Training shoes are acceptable in most circumstances. However, the soles must provide satisfactory grip, particularly in wet conditions. Where appropriate, studded footwear should be worn. Participation in ‘everyday shoes’, such as those with heels or open toes, must not be permitted under any circumstances. Footwear must always be secured by suitable fastenings. Long, loose laces and flapping tongues present a significant hazard.

In football related activities consideration will be given to participants in boots / blades and those in trainers. This will form part of the on-going risk assessment undertaken by the teacher.

- **Indoor activities, (dance, gymnastics, etc.)**

Participation with bare feet will enhance the quality of work considerably, thereby making it much safer. If the condition of the floor does not allow bare feet, then soft soled plimsolls provide the best alternative. During activities, such as ‘step aerobics’, where excessive and repeated impact might be anticipated, suitable training shoes must be worn.

Trampolines and rebound therapy

Only staff suitably trained in rebound therapy can lead sessions and only those assessed by a Physiotherapist as suitable to participate will access rebound therapy. Localised risk assessments are in place for to include the requirement that when not in use rooms housing trampolines must be locked to prevent unauthorised persons gaining access.

Refer:

- Rebound risk assessments
- Support plans
- Moving and handling plans

Positive Behaviour Management

The Foundation recognises that people we support may present with a variety of difficulties relating to their behaviour which stem from their underlying issues with communication and endeavour to manage such behaviour to prevent any injury to themselves, staff or those around them.

Within the Foundation we believe that behaviour is a means of communication – we must ensure that all people we support needs safely and appropriately and PHF staff can learn strategies to help with this.

A consistent and positive system of managing behaviour is essential. The Foundation adopts the Non-Abusive, Psychological and Physical Intervention (NAPPI) approach, in which all staff are trained to an appropriate level. Positive Behaviour Support (PBS) is also implemented which is a multicomponent framework for developing an understanding of behaviour that challenges with the overall goal of enhance the person's quality of life, thus reducing the likelihood of challenging behaviour occurring in the first place.

Where a member of staff is injured as a result of behaviour this must be reported in accordance with the accident incident and near miss reporting policy.

Refer:

- Positive Behaviour Support policy
- Restrictive practice policy
- Positive behaviour plans
- Individual risk assessments
- Accident, incident and near miss reporting policy

Printing

<u>Machinery</u>
Before using any printing machine all risks must be considered in accordance with the Provision and Use of Work Equipment Regulations 1998 (PUWER).

- Choose the right machine for the job
- Check the machinery is adequately guarded to prevent access to dangerous parts or stop machinery movement before a person enters a danger zone.
- New machines (after 1 January 1999) should be CE marked, supplied with a Declaration of Conformity and have instructions in English
- Printing machines supplied after 2005 should have been manufactured to BSEN1010 'Safety of machinery – Safety requirements for the design and construction of printing and paper converting machines'
- Carry out printing machinery risk assessments for your workplace and involve employees (to include activities including clearing obstructions, cleaning etc.)
- Provide effective guards in accordance with the age of machine and type of controls
- Provide safe systems of work for using and maintaining the machine
- Provide information, instruction and training to machine operators and supervisors. Operators should be authorised to use certain machines. Operators should NOT remove any safeguards, even if their presence seems to make the job more difficult.
- Only qualified machine operation should be used to operate inspect test and maintain equipment
- Maintain guards and other protective devices to ensure they are working properly.

COSHH
Refer to Hazardous substances section.

PPE/C

PPE/C deemed necessary from risk assessment must be worn and may include:

Gloves
Safety glassed/goggles
Face shields
Hearing protection

Housekeeping
The workshop must be kept clean and tidy at all times and dust should not be allowed to build up on equipment or electrical devices.
Glues and inks should be stored in tightly capped containers.
Paper and paper rolls must not be overstacked.
Excess paper and boxes must be removed daily
Soiled rags must be stored in fire resistant containers
Occupational health

Noise - a noise assessment must be completed to ensure that the noise level emitted is within exposure limits
Occupational dermatitis - health surveillance for skin problems may include:

- assessing skin condition as soon as possible after starting work
- examining the skin (usually hands and forearms) regularly
- asking workers about their skin condition
- keeping records

Radon

Radon is a radioactive gas the comes from rocks and soil found everywhere in the UK, the levels in the air we breath outside is low but this can be higher inside buildings. Radon is everywhere but some parts of the country are more likely to have high levels in buildings than others. UKSHA has worked with the British Geological Survey to produce a data set and maps of the radon prone areas:

https://www.ukradon.org/

All Foundation sites will be checked annually against this map to ensure the site is in a less than a 1% affected area; additional monitoring will not be necessary where levels are below 1%. If levels fluctuate a radon measurement will need to be completed by a validated laboratory. Additional control measures may be required following the results of this measurement.

Copies of a radon risk report are also held on the Estates PPM area of the network.

Risk Assessment

Risk assessment is a systematic examination of what within our business can cause harm to people and it helps us determine whether we are doing enough or further actions are required to reduce the likelihood of injury or ill health.

Our policy is to complete a general risk assessment of all our known and reasonably foreseeable health and safety hazards covering all our premises, equipment and activities in order to plan and prioritise the implementation of the identified control measures.

More detailed specific risk assessments will also be carried out as determined by the general assessment to address those premises, equipment, people or activities to comply with specific legislation or to proactively manage health and safety risks.

We will ensure that:

- assessments are carried out and records are kept
- control measures introduced as a result of assessments are implemented and followed
- employees are informed of the relevant results and provided with necessary training
- any injuries or incidents lead to a review of relevant assessments
- assessments are regularly monitored and reviewed – this should be completed at least every 12 months but should also take place where there is any change or and accident, incident or near miss
- suitable information, instruction and training will be provided to all persons involved in the risk assessment process

We may be controlling risks in various ways, determining the effectiveness of those controls is part of our risk assessment process.

Refer:

- Risk Assessment template
- Various template/generic risk assessment on PHF Connect
- Employee guide to completing risk assessments

Science (education only)

This policy sets out schools arrangements for ensuring that practical work within the science department is carried out safely and that safety control measures applied are pragmatic and proportionate so as not to inhibit good teaching.

The task of overseeing health and safety within the science department is that of the Head of Department.

Information

All staff are issued with a copy of this policy which they should keep in their personal health and safety portfolio.

Any new instructions, restrictions or rescinded (lifted) restrictions made by the school are communicated to all staff in writing.

Monitoring and checking

The school requires the science department to monitor the implementation of this policy. Records of monitoring are kept by the Head of Department.

Training

Any non-science staff who have to supervise any class in a laboratory will receive brief training in laboratory rules.

Records of the training received by members of the science staff are kept on file.

Risk Assessments

The school follows the recommendation of the Health and Safety Executive to adopt 'model' or 'general' risk assessments adapted to the school curriculum and facilities.

Whenever a new course is adopted or developed, all activities (including preparation and clearing-up work) are to be checked against the model risk assessments and significant findings incorporated into texts in daily use, i.e. the scheme of work, set of lesson plans, syllabus, technician notes.
If a model risk assessment for a particular operation involving hazards cannot be found in these texts, a special risk assessment is to be completed. In order to assess the risks adequately, the following information is collected.

- Details of the proposed activity.
- The age and ability of the persons likely to do it.
- Details of the room to be used, ie, size, availability of services and whether or not the ventilation rate is good or poor.
- Any substance(s) possibly hazardous to health.
- The quantities of substances hazardous to health likely to be used, including the concentrations of any solutions.
- Class size.
- Any other relevant details, eg, high voltages, heavy masses, etc.

Lesson plans have been checked against the model risk assessments; staff should deviate from it only if their proposed activities have been also checked with the models and where appropriate agreed with the Head of Department.

Where an activity must be restricted to those with special training, that restriction is included in a note on the text.

Fume Cupboards

The school will arrange regular testing of fume cupboards at a maximum interval of 14 months but require teachers to perform a quick check before use. Records of the tests are kept on file.
All users have been trained to carry out a quick check that a fume cupboard is working before use.

Pressure Vessels

Autoclaves and pressure cookers need periodic inspection, normally annually, under the *Pressure Systems Safety Regulations*. Records of examinations are kept on file.

Equipment Safety

All staff selecting equipment for purchase will check that it is safe and suitable for the intended purpose (to comply with the *Provision and Use of Work Equipment Regulations*). Equipment listed by specialist educational equipment suppliers is taken to meet these *Regulations* but all other equipment, especially gifts, is treated with caution and carefully assessed.

Any user who discovers a hazardous defect in an item of equipment must report it to the Head of Department or other nominated person.

Personal Protective Equipment

The school accepts the duty to provide eye protection, gloves and laboratory coats for employees where the risk assessment requires them and safety spectacles for students. The condition of the eye protection is checked at the start of each term.

Chemicals

The safe storage and, where necessary, disposal of chemicals including highly-flammable liquids, will be arranged in accordance with the requirements of the *Dangerous Substances and Explosive Atmospheres Regulations (DSEAR)* in order to ensure that chemicals are stored securely, the risks of fire, explosion and spillage are minimised, labels are readable and that a spill kit is available and properly replenished.

Hazardous activities involving chemicals is restricted to those who have received special training and as identified in the texts in daily use as part of the risk assessment.

Waste disposal

Waste chemicals and equipment are disposed of in an environmentally-responsible manner in accordance with relevant legislation.

Safe disposal of Sharps

All sharps must be correctly and safely disposed in a leak-proof, puncture resistant, lockable container. The container should not be filled more than two thirds then sealed and disposed as per the school procedure.

Security

Access to laboratories and preparation rooms will be controlled to prevent unauthorised access. All science rooms including store rooms are to be kept locked at all times except when in use. It is the task of the staff member leaving such a room to see that the room is empty and that the door is locked. All laboratories which are left open are cleared of all hazards, including shutting-off all services when supervision by a suitably-trained teacher or teaching assistant comes to an end. No class is allowed to be in a laboratory without adequate supervision.

All science areas are made safe for cleaners or contractors to work in before these persons are allowed to proceed.

Fire fighting equipment

Two 2 kg carbon-dioxide extinguishers and one fire blanket provided for fire fighting are the standard for Science classrooms.

When using flammable metals, it is better to have a bag of sand immediately available in case of fire. Dry powder extinguishers may cause permanent damage to computers and lead to such a mess that industrial cleaning will be required. A fire blanket can be used to smother fires, often causing less damage than a carbon dioxide extinguisher, which may blast apparatus across the bench.

Spills

Trivial spills are dealt with using damp cloths or paper towels. Spills of any amount which do not give rise to significant quantities of toxic or highly-flammable fumes (‘minor spills’) are dealt with by staff using a ‘spill kit’ provided for this purpose.

Major spills are those involving the escape of toxic gases and vapours or of flammable gases and vapours in significant concentrations. (Small amounts can be ‘major spills’ if spilt in small rooms.) Staff are trained in the appropriate procedures which may involve calling the Fire Service. This training is supported by regular drills arranged by the Head of Department.

Self-harm

Self-harm is any behaviour where the intent is to deliberately cause harm to ones' own body, without causing death. Other terms that are used to describe self-harming are deliberate self-harm; self-inflicted harm; self-injury; deliberate self-injury. The Foundation recognises the risks to those who self-harm, their families and those supporting them.

Where supporting an individual who self-harms a specific risk assessment should be completed with the Designated Safeguarding Lead for the location (see PHF connect for a generic template). Staff should also refer to the self-harm policy and safeguarding and child protection policies.

Refer:

- Risk Assessment template for self-harm
- Self-harm policy

Smoking (to include E Cigarettes, vaping)

Exposure to second-hand smoke, also known as passive smoking, increases the risk of lung cancer, heart disease and other illnesses. Ventilation or separating smokers and non-smokers within the same airspace does not stop potentially dangerous exposure.

It is the policy of the Foundation that ***all workplaces*** are smoke-free and that all employees have a right to work in a smoke-free environment, this includes foundation vehicles. As part of the Healthy School Award smoking & vaping is ***prohibited throughout all educational buildings and grounds – this includes E Cigarettes and vaping.***

Exceptions may apply to parts of adult services however designated smoking areas will be provided with appropriate ashtrays; staff should not congregate around entrances to Foundation buildings and are encourage to take a walk whilst having a cigarette break. Smokers are responsible for ensuring all cigarettes are extinguished fully before leaving any designated area.

Where a resident smokes in his or her home the fire risk assessment for the building must identify the additional controls in place to manage this risk.

As part of our wellbeing programme the Foundation also offers support to those want to stop smoking; further advice can be provided by contacting the HR Team.

Implementation

All staff are obliged to adhere to and facilitate the implementation of the policy.

The Foundation will ensure that all employees and contractors are aware of the policy on smoking. They will also ensure that all new personnel are given a copy of the policy on recruitment or induction.

Appropriate 'no smoking' signs will be clearly displayed at or near the entrances to the premises. Signs will also be displayed in foundation vehicles that are covered by the law.

Stress

The Health and Safety Executive define stress as "the adverse reaction people have to excessive pressure or other types of demand placed on them". This makes an important distinction between pressure, which can be a positive state if managed correctly, and stress which can be detrimental to health.

Stress at work can come about for a variety of reasons. It may be excessive workload, unreasonable expectations, or overly-demanding work colleagues. As a reasonable foundation, we try to ensure that you are in a pleasant working environment and that you are as free from stress as possible. The foundation acknowledges neurodiversity as a natural variation in human thinking and is committed to providing a

psychologically safe environment for all. Our risk assessment procedure actively evaluates and mitigates cognitive, sensory and psychological risks.

We will:

- work to identify all workplace stressors and conduct risk assessments to eliminate stress or control the risks from stress
- regularly review risk assessments
- consult with Safety Representatives on issues relating to the prevention of work-related stress
- provide access to confidential counselling for employees affected by stress caused either by work or external factors
- provide training for all managers and supervisory staff in good management practices
- provide adequate resources to enable managers to implement the foundation's agreed stress management strategy
- refer to occupational health services where appropriate including counselling via Talkworks

Employees who experience unreasonable stress which they think may be caused by work should raise their concerns with their Manager or through the Foundation's grievance procedure.

Following action to reduce the risks, they shall be reassessed. If the risks remain unsustainable by the employee concerned, efforts shall be made to reassign that person to other work for which the risks are assessed as tolerable.

Refer:

- Stress Individual Risk Assessment Form
- Employee wellbeing policy

Swimming Pool

The Foundation will take all reasonable precautions to safeguard staff & people we support using the swimming or hydro pools and it recognises the following are essential elements of ensuring this will be achieved:

- completing a Risk Assessment for the pool and making sure it used
- the implementation of a PSOP (Pools Safety Operating Procedure) and
- the preparation and training of staff in the Emergency Action Plan (EAP)
- clear conditions of hire - where relevant
- the establishment and implementation of pool rules
- determining the special needs or medical conditions of students
- nominating a member of staff responsible for pool safety.

General Safe Practice

The minimum number of people, teachers and support, at the poolside is two, where only one is present this will be justified in the risk assessment to indicate why this ratio is acceptable and should highlight alternative emergency arrangements.

A suitably qualified adult should always be present at the poolside to effect a rescue from water and carry out cardiopulmonary resuscitation.

One of the following qualifications would be deemed appropriate when the teaching of swimming takes place:

- ASA Assistant Teacher Certificate (Swimming for People with Disabilities)
- ASA Level 1 Certificate for Teaching (Swimming for People with Disabilities)

- Halliwick Association of Swimming Therapy Course.
- The STA Level 1 Award in Pool Emergency Procedures

Lifesavers should be appropriately trained to fulfil their responsibilities. The following qualification would be deemed appropriate:

- RLSS National Rescue Award for Swimming Teachers and Coaches
- RLSS National Pool Lifeguard Qualification
- The STA Level 2 Award for Pool Lifeguard

All staff at the poolside need to:

- update their lifesaving and water safety skills regularly
- practice their skills
- remain diligent
- be aware of the NOP and EAP

Pool Rules

All users must be made aware of the pool rules, including:

No running on the poolside
No diving or jumping in from the side into the pool
Entry and exit must be made by the steps or hoist operated by competent person
No entry until instructed to do so
No shouting
No acrobatics
No pushing or ducking other swimmers
No outdoor shoes are permitted on the poolside (use shoe covers provided)
No food on poolside (including sweets and gum)
No drinks other than water on poolside (exceptions may apply i.e. medical need which must be notified prior to pool entry)
No playing with pool cover or operation of pool cover unless trained
Removal or making safe of jewellery
Usual hygiene procedures
Children under the age of 14 years are not permitted at the poolside unless they are participating in a session
Users should not be permitted into the pool if they are unwell

Staff to user ratios

The designated maximum bather capacity appropriate to the size of the pool will be specified in the Normal Operating Procedure.

Irrespective of the ratio there must always be a supervisor present on the poolside alongside the swimming teacher, one of which must be responsible for lifesaving. The supervisors will be required to be able to effectively carry out emergency procedures. User/Support ratios must not exceed 20:1 and for the vast majority of cases in primary school swimming should be less than this. The following ratios are based upon safety considerations rather than teaching requirements:

Non-swimmers and beginners 12:1

Young children, normally primary school age, being introduced to swimming who are unable to swim 10 metres unaided on back and front.

Children under the age of seven 12:1

Irrespective of their swimming ability, group size should be restricted.

Improving swimmers 20:1

Swimmers of a similar ability to each other who can swim at least 10 metres competently and unaided on their back and on their front. It is recommended that the lesson be confined to an area in which the children are not out of their depth.

Mixed ability groups 20:1

Students with a range of ability (from improving to competent) where the least able and least confident are working well within their depth. Swimmers' techniques, stamina and deep water experience should be considered.

Competent swimmers 20:1

Those swimmers who can swim at least 25 metres competently and unaided on front and back and can tread water for 2 minutes.

Swimmers with disabilities 1-8 (with an appropriate number of helpers)

Each situation must be considered individually as people with disabilities are not an homogeneous group. Care must be taken to ensure that there are sufficient helpers in the water to provide a 1:1 ratio for those needing constant support and a sufficient number of other helpers to provide the degree of support required by the range of disabilities within the group.

Normal Operating Procedure

The NOP should include:

- a plan of the pool
- the key hazards
- communications methods
- rules of supervision
- systems of work and operational systems
- detailed work instructions
- first aid supplies and training
- details of alarm systems and other emergency equipment:
- conditions of hire, where appropriate

Emergency Action Plans

An Emergency Action Plan details what everyone should do in the event of a reasonably foreseeable emergency. This might include:

- Overcrowding
- Disorderly behaviour
- Assault
- Lack of water clarity
- Fire
- Bomb threat
- Structural failure
- Emission of toxic gases
- Serious injury to swimmer
- Discovery of a casualty in the pool

The procedure should explain how to clear the pool and/or evacuate the building/site, the roles of all the staff involved, how to call for help and what help to give to the people involved.

All staff likely to be involved in this procedure and all outside user group leaders who may be affected need to be trained to ensure their effectiveness in an emergency.

Notices need to be displayed to advise pool users of the arrangements in the event of an emergency.

All school classes to run practice drills during the first lessons of each term in order that both staff and students recognise the alarm signal and know how to respond to it.

Exit doors and signs, fire fighting equipment and alarm points need to be checked regularly to ensure that they are working and accessible. All fire doors must be operable without the aid of a key at all times the pool is in use. These should be checked at the start of every day.

Safety Equipment

- All pools must be equipped with a means of raising an alarm and summoning support in the event of an accident or incident. Ideally, this will be an emergency button which activates a siren or a telephone giving direct contact with the emergency services.

- There should be a long pole at either side of the pool to reach and rescue anyone in difficulties without getting into the water. Adequate buoyancy aids and first aid equipment, including a blanket should be immediately to hand.

- Where spine boards are available for use staff must be adequately trained in their use.

- Pool depths should be clearly marked on the walls of the pool and teachers should explain their significance to students, especially beginners.

- All signs should be compliant with the Safety Signs and Signals Regulations.

- A pool divider, usually a rope, should normally be positioned to separate deep from shallow water when non-swimmers are present.

- All pools should be able to be locked off and isolated to prevent unauthorised access when not manned. Failure to achieve this is a major cause of accidents in school and private pools.

Conditions of Hire

If the Foundation's pools are hired to an outside organisation the Foundation will ensure that the outside organisation will use the pool in a safe manner.

Hirers will be required to sign a hire agreement and will also be given an up-to-date copy of the NOP and EAP and any special conditions of hire which might apply to their session.

Conditions of hire should include:

- the name and address of the organisation hiring the pool

- the name of the pool being hired

- the name of the hirer and contact details

- the activity for which the pool is to be hired (to assess the level of risk and safety rules required by session type)

- the numbers participating and their age and swimming ability (where a school hires a pool for a block involving more than one class with different abilities, ideally the form should be completed to

show all this information as the equipment/area of the pool used may need to be different for different groups)

- specific agreement on the respective responsibilities of the hirer and the pool operator (for instance who will provide the lifeguarding and the level of life guarding provision to be made, child protection issues, staffing levels)
- details of who is to be responsible for what in the event of an emergency (normally it is the operator of the pool who is responsible for building related problems and the hirer for emergencies associated with the activities of the group)
- any safety advice to be given to swimmers and any specific rules that should be enforced
- a signature from the hirer that they have received and read copies of the NOP & EAP
- appropriate third party liability insurance.
- Confirmation they will work in line with DfE After-school clubs, community activities, and tuition Safeguarding guidance for providers.

Temporary Employees

The Foundation will take the necessary measures to ensure the health and safety of any temporary and casual staff in its employment.

To achieve this, the Foundation will provide temporary employees with the following information prior to starting work:

- details of the qualifications and skills are required to do the work safely
- the health surveillance to be provided under statutory provisions
- any risks to health and safety identified by workplace risk assessments
- the preventive measures to be taken
- safe working procedures
- the action to be taken in the event of an emergency

The competence of temporary workers will be assessed to ensure they are capable of working safely.

Temporary workers should receive induction prior to commencing work in any Foundation locations; this must include reading and understanding all person specific plans or protocols (moving and handing, behaviour management, eating and drinking etc).

Refer:

Agency and Temporary employee induction

Training

Training in health and safety is a legal requirement and also helps create competent employees at all levels within the Foundation to enable them make a far more effective contribution to health and safety, whether as individuals, teams or groups.

Competence of individuals through training helps individuals acquire the necessary skills, knowledge and attitude which will be promoted by managers and supervisors throughout the organisation.

Our training objectives will cover three areas, that of the organisation, the job and individuals.

All employees will need to know about:

- the health and safety policy
- the structure and system for delivering this policy

Employees will need to know which parts of the system are relevant to them, to understand the major risks in our activities and how they are controlled.

Managers and supervisors training needs will include:

- leadership and communication skills
- safety management techniques
- skills on training and instruction
- risk assessment
- health and safety legislation
- knowledge of our planning, measuring, review and audit arrangements

All our employees training needs will include:

- relevant health and safety hazards and risk
- the health and safety arrangements relevant to them
- communication lines to enable problem solving

All employees will receive **induction training**. Such training will cover:

> Fire procedures, warning systems, actions to be taken on receiving warning, locations of exits/escape routes, evacuation and assembly procedures, first aid/injury reporting procedures, names of first aiders/appointed persons, instruction on any prohibition areas (i.e. no smoking), issue of protective clothing/equipment and its use, instruction under COSHH, mandatory protection areas, thorough instruction applicable to their particular duties at work etc.

Training needs will be reviewed as a result of job changes, promotion, new activities or new technology, following an accident/incident and performance appraisal.

Where there are any language or communication barriers safety signs, induction documentation or emergency alerts will be made accessible.

Records of training will be kept for all employees.

Employees must:

- participate in the induction training activities they have been required to attend or carry out
- work according to the contents of any training they receive
- ask for clarification of any points they do not fully understand
- not operate hazardous plant or equipment, use hazardous chemicals or carry out any hazardous activity unless they have been appropriately trained and instructed

Refer:

- Employee Induction Check List (see also Agency, Bank worker and redeployed staff forms)
- Training and competence records
- Health and Safety Policy Acknowledgement Form
- Health and safety induction checklist

- Select HR system
- New starter welcome induction pack
- Managers Guide to induction
- Local induction checklist
- Induction Policy

Vibration

Regular exposure to continuous vibration from a work process has the potential to cause long term ill health including a range of occupational diseases collectively known as hand-arm vibration syndrome (HAVS) or whole body vibration (WBV).

To minimise the risk from vibration the Foundation will:

- assess the risks to health from exposure to continuous levels of vibration and determine the control measures needed
- introduce effective control measures to ensure levels of exposure to hand-arm vibration and whole body vibration are eliminated or reduced as far as is reasonably practicable
- record the assessments and review them periodically or when changes occur
- ensure that the most appropriate equipment is used for the job
- ensure that those persons responsible for managing work likely to result in exposure to hand arm vibration and whole body vibration are adequately trained and competent
- inform, instruct and train employees about the risks and the precautions to be taken to protect themselves from the harmful effects of continuous exposure to vibration
- ensure no new equipment or processes are introduced into the work activities where there is a foreseeable risk of hand-arm or whole body vibration without a risk assessment and approval of a designated manager
- maintain an inventory of all vibration equipment used that is likely to cause hand-arm vibration and whole body vibration
- monitor exposure of hand-arm vibration and whole body vibration and undertake appropriate health surveillance, where necessary
- maintain tools to the manufacturer's specifications to avoid worsening vibration

Refer:

- WRULD Initial Risk Assessment Form

Violence to Staff

The Foundation recognises that in certain situations violent behaviour towards staff may occur and therefore will take all reasonable measures to protect staff from violence and aggression.

We define violence and aggression as:

- actual or threatened physical assaults on staff
- psychological abuse of staff
- verbal abuse which includes shouting, swearing and gestures
- threats against employees.

To achieve this objective we will:

- carry out risk assessments of potential conflict situations to determine the control measures necessary to protect staff (in particular staff who may lone work).
- ensure that premises are kept secure
- display zero tolerance to abuse notices at all reception points
- inform all employees of the procedure following a violent or challenging behaviour incident
- not tolerate violence or challenging behaviour towards our employees
- train our employees who may be exposed to violence or challenging behaviour situations
- support the employees involved in any incident
- support their decisions regarding the pressing of criminal charges
- provide any counselling or post-incident assistance required by the employees (accessed via Foundation Occupational Health)
- keep records of all incidents of violence and aggression and review the control measures with a view to continual improvement in employee safety.

Refer:

- Accident incident and near miss reporting policy
- Employee Guide to Lone working
- Employer Guide to Violence and Lone working
- Zero abuse notice
- Individual behaviour management plans

Visitors

In the interest of safety and security, the Foundation will take the necessary measures to protect staff and visitors from any accidents or incidents that may occur during visiting. Visiting procedures and protocols have also been completing reviewed in light of the C19 pandemic and separate procedures are in place to support this to includes individual visit plans for each resident.

Employees hosting visitors much ensure that:

- All visitors sign into the premises on the necessary form or book or system
- All visitors wear the appropriate lanyard and badge at all times
- they are accompanied at all times unless evidence of current DBS has been seen
- they adhere to applicable health and safety instructions and rules during their visit
- adequate information is passed to ensure their safety including emergency information
- any protective clothing required is provided and worn
- any accidents / incidents involving visitors are reported through the accident reporting arrangements

Employees aware of people on the premises who may be unauthorised should report these to their manager for action.

Separate visiting protocols may be necessary in ISL or our residences in the event of an outbreak however this will be separately risk assessed to ensure it is proportionate to ensure people we support can maintain contact with their loved ones.

Emergency Action

In the event of the fire alarm sounding, all visitors should be escorted to the assembly point by their host. Visitors should not leave the area before notifying the senior person present.

Refer:

- Visitor books/form/Inventory sign in system
- Individual visit plans
- Visit packs for each residential setting

Volunteers

Volunteers are recognised as a valuable asset to the Foundation and are involved in tasks such as supporting at Fundraising events or completing suitable on site tasks including gardening and painting and decorating.

The Foundation recognises both the common law duty of care to these individuals but also the requirements of the Management of Health and Safety at Work Regulations 1999 and to the health and safety of voluntary workers. The Foundation therefore has a separate 'Keeping Healthy, Legal and Safe' handbook for volunteers and all volunteers receive a copy of this document as part of their induction. All volunteers must be adequately supervised by a member of Foundation staff and it is the responsibility of volunteering managers to undertake risk assessments as and when appropriate.

Refer:

- Volunteer induction checklist
- Example volunteer activity risk assessments on PHF Connect

Waste Management

The Foundation will instigate a waste management plan for any work carried out when required to by legislation and in order to do so will identify the:

- client
- principal contractor
- person with overall responsibility for the waste management plan
- location of the site where the work will be carried out
- estimated cost of the project

In carrying out any site work the Foundation will adhere to the following hierarchy for processing of waste materials:

- re-use (on or off site)
- recycle (on or off site)
- send off site for recovery
- send for incineration

- as a last resort send to land fill

The waste management plan will:

- describe each type of expected to be produced
- estimate the quantities of each type of waste
- describe the waste management action for each type of waste (e.g. re-use, recycle)

The waste management plan will comply with the duty of care and ensure materials will be handled efficiently and waste managed appropriately. All waste materials which leave site will be processed through licensed contractors. Copies of all duty of care waste notices will be retained for at least 3 years.

Additional duties:

- ensure co-operation between all contractors involved on the project during the construction phase
- discuss waste management with every site worker through induction, training and tool box talks
- ensure that waste is reused, recycled or recovered, where practicable to do so

Refer:

- Site Waste Management Data Sheet

Wellbeing

The Foundation recognises that investing in employee wellbeing aims to ensure a healthier workplace; better staff morale; better quality of care and more committed and engaged staff. A variety of initiatives and training for managers is currently ongoing along with a Wellbeing hub on PHab rewards providing advice and resources to support good mental, financial and physical wellbeing. An employee assistance programme is in place offering specialist support via Canada Lift, Talk works and Newcastle Premier Health.

Wellbeing is incorporated into the Health, Safety, Quality Wellbeing and Environmental Forum - meetings take place on a quarterly basis.

Refer:

- Employee Wellbeing policy
- Wellbeing Hub on PHF Connect

Window and balcony safety

In order to manage the risk of falls from windows or balconies assessments of the premises and students/residents/people we support must be competed to identify anyone at risk from falls. This should include assessing the risk that furniture, or other items, that may enable them to climb barriers, or access windows which might otherwise be inaccessible.

The Foundation will ensure that where there is a risk of falling, the bottom edge of the window is at least 800mm above floor level. If this is not the case, a barrier must be used which is designed to be difficult to climb. Windows should be constructed of appropriate safety glass.

Controls:
Where vulnerable persons have access to windows large enough for them to fall out and be harmed, the windows must be restrained. Restrictors should:

- Restrict the opening of the window to 100mm or less;
- Be robust enough to withstand foreseeable forces applied by someone determined to open the window further;
- Be robust enough to damage, either deliberate or through ‘wear and tear’;

- Secured using tamperproof fittings which cannot be removed or disengaged with readily available implements, such as cutlery and without the use of a special tool.

Balcony Protection
Where the risk assessment identifies that people we support at risk of falling, sufficient protection must be provided to prevent them accessing balconies or climbing over balcony edge protection. This should consider furniture or fittings providing footholds such as furniture, plant pots etc.

Restricting Access to Upper Floors
Where people we support are identified as being at risk of falling, consideration must be given to whether or not to provide protective measures throughout the premises.

The alternative is to restrict access to safe areas such as the ground floor.

Suitable and sufficient controls must then be implemented to prevent falls from windows or balconies; which are inspected and maintained to ensure effective function and ensure that they have not deteriorated through use, wear or tampering and are sufficiently robust.

On installation of such controls any impact on the comfort of students, residents or people we support from reduced natural ventilation and provide adequate cooling where necessary (e.g. high level and/or restricted aperture ventilation, fans or air conditioning) must be considered.

Refer:
- Risk assessment template
- Employer's guide - Falls from Windows or Balconies
- Work place inspection form

Work Equipment

The Foundation will provide a safe working environment in relation to work equipment safety and ensure all employees receive appropriate safety information and training in their work equipment.

To achieve this objective the Foundation will:

- provide work equipment that is suitable for the purpose and compliant with the requirements of the Provision and Use of Work Equipment Regulations
- retain and make available the manufacturer's instruction manual for each item of equipment, where relevant
- before using any item of work equipment, ensure that a risk assessment is carried out and brought to the attention of relevant employees
- inspect all equipment at installation and prior to first use
- regularly inspect work equipment in accordance with the manufacturer's recommendations
- maintain work equipment in accordance with the manufacturer's recommendations
- keep records of all inspections and maintenance
- provide adequate instruction, information and training to employees to enable the work equipment to be used and maintained safely
- provide refresher training as appropriate and as determined necessary by workplace inspections

Refer:

- Work Equipment Risk Assessment Form
- Work Equipment Risk Assessment Checklist
- Work Equipment Maintenance Record

Work at Height

The Foundation will take all reasonable steps to provide a safe working environment for all employees who may be affected by work at height activities.

The Foundation will ensure that:

- all work activities that involve work at height are identified and assessed with permits to work at hight issued by the Facilities Manager
- the need to undertake work at height will be eliminated whenever it is reasonably practicable to do so
- adequate and secure working platforms with guard rails and toe boards will be used in preference to ladders which will be used for light, short duration work only and secured to prevent displacement
- when necessary, only scaffolds and scaffold towers that have been erected by a competent person will be used
- roof lights and other fragile surfaces will be protected to prevent falls
- fall arrest equipment will be used if other means of prevention (safety nets, harnesses with running lines, etc.) are not practical or justified
- risks associated with those activities where work at height cannot be eliminated are evaluated and steps are taken to control them
- all the necessary equipment to allow safe access to and egress from the place of work is provided
- all the necessary equipment to ensure adequate lighting and protection from adverse weather conditions is provided
- suitable plant is provided to enable the materials used or created in the course of the work are safely lifted to and from the workplace and stored there if necessary
- any working platform and its supporting structures are selected and/or designed in accordance with current standards
- regular inspections of all equipment required for working at height are undertaken
- competent persons are appointed to be responsible for the supervision of all work at height and associated activities
- any contractors from whom they procure services comply with this policy

Information and Training

The Foundation shall provide any information, instruction and training required to work in a safe manner when working at height.

Refer:

- Ladder Inspection Record/Ladder Logs
- Permit to work at height

Work Experience Placement

This Policy on work experience relates to the placement of students on employers' premises in which the student carries out a particular task or duty, or range of tasks or duties, more or less as would an employee, but with the emphasis on the learning aspects of the experience.

The safety of students, whilst on work experience schemes, is recognised as of prime importance by the Foundation and there will be an appointed coordinator to action, control and assess work experience placements. The coordinator will take reasonable steps to satisfy themselves that the placements they arrange will be safe and to ensure students are not exposed to significant risks to their health and safety.

Students on work experience placements with a host employer are regarded in health and safety law as their employees. The host employer therefore has a responsibility to ensure students are not exposed to significant risks to their health and safety.

Health and safety law defines all those under 18 as a young person and therefore at potentially increased risk in a workplace environment due to their lack of experience and maturity.

For learners with learning difficulties and disabilities additional safeguards may be identified and thus placements should be considered and risk assessed on an individual basis.

Key Actions

- Arrange for pre-placement checks of health, safety and welfare standards of employers (placement providers) to be carried out. Child safeguarding issues must also be considered. Using the Work Experience Placement Assessment Form.
- Brief students prior to placements starting on their own health and safety responsibilities - and those of the employer - while on placement. Issue each student with a copy of the booklet: Be Safe! An introductory guide to health and safety.
- Monitor students health, safety and welfare while on placement and provide 'pastoral' support.

Risk Assessments

Before a student is allowed to start on a programme of work experience the host employer must carry out a risk assessment. A Placement Employer Risk Assessment Form should be used for this purpose. Any risks identified must either be controlled or the student excluded from exposure to them.

The host employer must also provide the parents, or guardians, with the key findings of the risk assessment and the preventative and protective control measures introduced to minimise, or ideally eliminate any significant risks.

The parent or guardian must sign the risk assessment form and return it to the school.

Induction

Where students access placements independently they must be inducted by the employer on commencement. The induction should take place on the day the student first attends the work placement and before the student is placed in any actual work situation. Where a student is supported by a member of staff in a work placement both the student and member of staff supporting must complete an induction to the workplace.

Prohibited and Restricted Activities

Work experience placements must not take place where the work concerned is subject to a statutory restriction based on a young person's age, or is restricted more generally for activities that are:

- beyond their physical or psychological capacity
- exposes them to substances chronically harmful to human health, e.g. toxic or carcinogenic substances, or effects likely to be passed on genetically or likely to harm the unborn child
- exposes them to radiation
- involves a risk of accidents which they are unlikely to recognise because of their lack of experience, training or attention to safety
- involves a risk to their health from extreme heat, noise or vibration.

There is an exception to these restrictions. Young persons over the minimum school leaving age, can carry out such work as long as it is necessary for their training, if they are supervised by a competent person, and any risk will be reduced to the lowest level that is reasonably practicable.

Restrictions also apply in the following cases:

Agriculture - restrictions on the employment of young people
Lead - prohibition of employment on employment in certain processes
Potteries - prohibition of employment on employment in certain processes
Wood Working Machinery - prohibition on employment of untrained young people.

Preparation of and Support for Learners on Placements

The school will brief students on:

- realistic expectations for their placement
- supervision arrangements and health and safety responsibilities of students and employers
- safeguarding arrangements
- arrangements for mid-placement visit and 'pastoral' support during the placement
- arrangements for debriefing, assessment and recording.

The school will make suitable arrangements to visit/monitor students on placement as they retain the duty of care for the student during the placement (in some instances students will be supported by PHF staff whilst on placement).

The frequency of visits will vary depending on feedback from students and/or their parents, an accident or incident.

Host employers should be asked to report immediately (to a previously agreed contact) full details of any accident involving a student.

The school will provide each student with emergency contact details for a member of school staff who can be contacted should an incident occur or if significant concerns arise. This includes early mornings, evenings and weekends, or if a student is attending their placement at irregular hours.

Emergency contact details must also be available and maintained in situations where a placement continues after the end of the school term into a holiday period.

Working Hours

The Working Time Regulations apply to students on work placements. Students should not work for more than five days in any consecutive seven day period. However, the number of hours worked and pattern of work is normally a matter for agreement by the placement provider, school and students. Students should not be asked to work excessively long hours, or unnecessarily unsocial hours, and should not work more than a standard eight hour day.

Students may not be assigned to work during the 'restricted period' between 22:00 and 06:00 (or after 11:00 or before 07:00 depending on the working pattern of the foundation).

Young persons are entitled to a daily rest period of at least 12 consecutive hours in each 24-hour period in which they are at work and to a weekly rest period of at least 48 hours in each seven-day period during which they are at work.

Students are also entitled to rest breaks if their working time is more than four and a half hours. The rest break should be at least 30 minutes.

Safeguarding

There is no requirement to DBS check all staff of the host employer that may come into contact with a student on placement. Only a member of staff with day to day responsibility for the student or as part of their job description – this could be the manager, a supervisor or a mentoring employee – should be required to have a DBS check.

In the vast majority of placements – as the employer/employees involved will not have regular **unsupervised** access to young people at work – there is no need for DBS checks to take place. Around 550,000 work experience placements take place each year, and it is estimated that DBS checks take place for just one per cent of these.

However, DBS checks must be **considered** in all the following cases:

1. Students identified by the school as vulnerable for educational, medical, behavioural or home circumstance reasons, including those who have special educational needs or are young (aged under 16).

2. Students on placements lasting more than 15 days over an extended period, especially where these involve:

- regular lone working with an employer over long periods (rule of thumb would suggest anything over half a day at a time)
- placements located in particularly isolated environments with 1:1 working
- placements involving a high degree of travelling on a 1:1 basis

3. Placements which include a residential element.

The fact that a particular placement falls into one of the above categories does not necessarily mean that a DBS check will be required. Such a decision will depend on an assessment of the overall potential risks posed to a young person and will take into account any systems in place to minimise these risks.

If any of the above three cases apply, additional safeguards should be put in place. These include:

- School staff or other partners who arrange, vet or monitor the work placements should have training in child protection
- Employers, supervisors or training providers hosting students should be asked to endorse a child protection policy or statement of principles

- School and local authority policies and procedures should define what actions need to be taken by whom and when if any child protection issues are raised, before, during or after the placement

- Students should also be given clear advice and a point of contact in the school in case of any problems.

For clarity, DBS checks and additional safeguards (as above) are not necessary:

- For short-term extended work experience for half a day or a day a week lasting one term or less

- For block placements lasting up to three weeks
- Where the placement involves contact with visitors who will only have contact with children/young people on an ad hoc or irregular basis for short periods of time

- Where people will have contact with children/ young people simply because they are in the same location or as part of their work, but who will not have regular, unsupervised access to the children/young people at work

- Where the placement involves Secondary age students undertaking voluntary work, citizenship or vocational studies or work experience in other schools. In these cases the school placing the student should ensure that they are suitable for the placement in question.

Young People

Whilst precautions taken to protect the health and safety of the workforce as a whole will, in many cases, also protect young persons, there are occasions when different and/or additional measures will be necessary due to their lack of experience, knowledge or absence of awareness of potential risks.

A 'young person' is defined as one who is below the age of 18 years.

To ensure the safety of young persons the organisation will:

- carry out risk assessments to cover the activities of young persons

- implement the actions determined by the risk assessment process

- inform the young persons of any risks associated with their work and the control measures taken to protect them

- provide a copy of the risk assessment to the parent/guardian of any young person below the school leaving age

- provide additional appropriate information, instruction, supervision and training, etc as determined by the risk assessment

Refer:

- Young Persons Risk Assessment

RISK ASSESSMENT

7. RISK ASSESSMENT

Risk Assessment

Risk Assessment involves identifying the hazards present in the work place or arising out of any work activity and evaluating the extent of the risks involved to employees and others, taking into account existing precautions and their effectiveness.

A **hazard** is something with a potential to cause harm and can include articles, substances, plant or machines, methods of work and the work environment.

Risk is the likelihood of harm from that hazard being realised. Risk increases with the number of people exposed to the hazard and also with the potential severity of the harm i.e. the resultant injury or ill health effect. If there are no hazards there are no risks.

The regulations require that risk assessments are **'suitable and sufficient'** in that they should identify all the significant hazards present within the business and its activities and that they should be proportionate to the risk. The assessment should cover all risks that are reasonably foreseeable.

The risk assessment must identify all those people who may be affected by the hazard, whether they are workers or others, such as members of the public.

We may be controlling risks in various ways, determining the effectiveness of those controls is part of the risk assessment process.

Health and safety law does not demand absolute safety when considering what safety controls are required but measures taken should go as far as is **'reasonably practicable'**; a balance between risk and costs, the greater the risk the greater the need to commit resources in terms of time and money to remove or control the risk.

It is a legal requirement that the significant findings of our risk assessments are brought to the attention of our employees.

Carrying out risk assessments

Those who are involved in risk assessments should:

- be competent
- have knowledge and experience of working procedures in practice, potential dangers and strengths and weaknesses of existing precautions
- have knowledge and experience of how to solve problems identified by the assessment
- be in a position to give the commitment, co-operation and resources required to implement the assessment results

It is important that the person carrying out the risk assessment is competent. This means that the person must have the necessary skills and knowledge gained through experience and training and may have qualifications that enable them to make sound judgments.

The five stages of risk assessment

STEP 1 - IDENTIFY THE HAZARDS

Look for hazards by walking around the workplace. List the hazards that could reasonably be expected to cause harm. Ask for the opinion of employees as they may have noticed things that are not immediately obvious.

Examples of hazards include:

- cables trailing over floors
- fire
- chemicals
- work benches which are too high or too low
- electricity
- loads which have to be moved manually
- work equipment
- working environment e.g. ventilation, lighting, heating

STEP 2 - IDENTIFY WHO MAY BE HARMED AND HOW

List groups of people and individuals who may be affected by the hazards e.g.:

- staff
- members of the public
- contractors on the premises

Pay particular attention to vulnerable persons, e.g. those with disabilities, visitors, female employees who are pregnant or who have recently returned to work after having a baby, inexperienced employees or young persons.

STEP 3 - EVALUATE AND CONTROL THE RISK

Evaluate the risks arising from the hazards and decide whether existing precautions are adequate or if more should be done. When evaluating the extent of the risk, account should be taken of the chance of some harm occurring (likelihood), the likely severity of this, and the number of people who could be affected. The formula:

Likelihood x severity = Risk

Is used on the risk forms within this policy manual.

Even after all precautions have been taken some risk may remain. Ensure the precautions in place meet standards set by legal requirements comply with a recognised standard, represent good practice and reduce the risk as far as is reasonably practicable.

Where additional controls or further action are necessary to reduce the risk, decide what more could reasonably be done by adopting the following principles:

- avoid the risk completely
- evaluate risks which cannot be avoided
- combat risks at source
- adapt work to the individual
- make use of technical progress
- replace the dangerous with none or less dangerous
- develop an overall prevention policy
- give priority to measures which protect the greatest number of people
- give appropriate instructions to employees

IMPLEMENTING AN ACTION PLAN

Once the level of risk has been determined and the control measures needed to reduce or eliminate the risk established, an action plan should be drawn up with timescales for implementation of the control measures.

STEP 4 - RECORD YOUR FINDINGS

The significant findings of the assessment must be recorded since these provide evidence that something has been done, it is also a legal requirement. Keep any written assessments for future reference and ensure that employees are informed of the findings and control measures, either existing or additional, that have to be observed and used. In some circumstances the findings of the risk assessment should also be given to others who could be affected, for example agency workers, contractors etc.

Hazards and example controls

Hazard	Example control measures
Manual handling	Mechanical aids, hoists, getting assistance, breaking loads into smaller units, training
Hazardous substances	Substitution for less hazardous alternatives, extract ventilation, personal protective equipment, training
Work equipment (machinery, tools, etc.)	Guarding, demarcation of danger zones, restricted operation and use planned preventative maintenance, training
Ladders	Avoid working at height. correct type of ladder/stepladders, maintained, training
Electricity	Insulated tools, residual circuit breakers, fuses, earthing, inspection and testing of systems and appliances
Stairs, etc	Good lighting, handrails, non-slip surfaces, slightly raised/highlighted front edges
Fire	Detection/warning systems, fire drills, extinguishers, signs, suitable storage facilities for substances and goods, fire retardant furniture and fittings
Noise	Reduction at source, isolation, ear protection, demarcation of danger zones
Stress	Reduce/increase workload, more control over work, work suitable for the individual, avoidance of monotonous repetitive work
Work environment	Good lighting, ventilation, redesign layout of area, heaters/coolers

STEP 5 - MONITOR AND REVIEW THE ASSESSMENT

It is important that the control measures are monitored and that records are kept. A regular review of the assessments should be made to take into account any changes to the methods or systems of work. You should also review the assessment following an accident, where there has been a significant change to the work, if new information comes to light, or if there is any other reason to believe that it may no longer be valid. Following the review, additional control measures should be implemented if required. Even if there are no significant changes since the original risk assessment, it should be regularly reviewed to confirm that it is still relevant and valid.

Refer

- Risk Assessment template
- Various generic risk assessment examples
- Employers guide - completing a risk assessment

Fire Risk Assessment

A fire risk assessment is an organised and methodical look at the premises, the activities carried on there and the likelihood that a fire could start and cause harm to those in and around the premises.

The aims of the fire risk assessment are:

- to identify the fire hazards
- to reduce the risk of those hazards causing harm to as low as reasonably practicable
- to decide what physical fire precautions and management arrangements are
- necessary to ensure the safety of people in your premises if a fire does start

The significant findings of the fire risk assessment, the actions to be taken as a result of the assessment and details of anyone especially at risk must be recorded. The fire risk assessment should demonstrate that, as far as is reasonable, you have considered the needs of all relevant persons, including disabled people.

Risk assessments must take account of other users of the buildings and co-operation and communication of hazard and risk must be shared between businesses to ensure a co-ordinated response is prepared and implemented.

The Foundation engages external competent Fire Risk Assessors to complete fire risk assessments every 3 years to identify any preventive and protective measures needed to comply with the legislation (this may be instructed earlier as a result of extensive structural alteration or other significant change). These assessments must be reviewed at least annually (or where there is any significant change) by the Health, Safety & Environment Manager, Estates Compliance Manager, relevant Head/Deputy Head teacher or Registered Manager and the FM responsible for the site team.

Five Steps to Fire Risk Assessment

1. Identify the hazards

- Sources of ignition
- Sources of fuel
- Sources of oxygen

2. Identify people at risk

- Employees
- People in and around the premises
- Vulnerable persons, disabled etc.

3. Evaluate, remove, reduce and protect from risk

- Evaluate the risk of fire occurring
- Evaluate the risk to people from fire
- Remove or reduce the fire hazards
- Remove or reduce the risks to people

4. Consider:

- Detection and warning
- Fire fighting
- Escape routes and travel distances
- Lighting
- Signs and notices
- Maintenance

5. Record, plan, inform, instruct and train

- Record the significant findings and action taken
- Prepare an emergency plan
- Inform and instruct relevant people; co-operate and co-ordinate with other businesses
- Provide training

6. Review

- Keep assessment under review
- Revise where necessary

Refer:

- Site specific Fire risk assessments
- Monthly and annual fire inspections

MONITORING HEALTH AND SAFETY

8. MONITORING OF HEALTH AND SAFETY

Measurement is essential to maintain and improve our health and safety performance to identify how effectively we are controlling risks and how well we are developing a positive health and safety culture.

There are two types of performance monitoring, active and reactive.

Active monitoring

Monitoring is a line manager's responsibility and in this section there are numerous monitoring checklists for each of the key management positions to be used to determine achievement against relevant health and safety standards. In completing the checklist managers are providing evidence that they have carried out monitoring within their areas of responsibility and they are reinforcing their commitment to health and safety objectives in general and helping to develop a health and safety culture.

This approach to proactive monitoring gives the foundation feedback on its performance before an accident, incident or case of ill health.

Managers and supervisors with defined health and safety responsibilities must monitor in detail the areas for which they have day to day control. Much of this checking will be informal and not recorded but formalised, structured checks are also essential to ensure all areas are covered and to demonstrate compliance to senior managers who must in turn seek assurance that first line monitoring is taking place.

Employees (and where appropriate residents, people we support and students) who take a proactive interest or represent groups for health and safety can also be involved with monitoring and may take the format of a health and safety tour or if more formally via a devised checklist.

A Health and Safety audit is completed by the Health, Safety & Environment Manager at least annually; this is completed using the Care Compliance software system. All actions identified are allocate within this system and progress on actions are reported via a monthly dashboard to the Executive Team, Board of Trustees, Residential Service, Governing bodies etc.

Updates on actions will be chased by the H&S team in accordance with the following timescales:

High risk actions	Monthly
Medium risk actions	2-3 monthly
Low	3 -6 monthly

Evidence of implementation of any recommended remedial action following an accident, incident or near miss will be inspected at the subsequent audit.

Refer:

- Workplace inspection form
- Monthly fire inspection
- Annual fire inspection
- Kitchen inspection
- Infection Prevention & Control audits
- Health and Safety audit form
- Dashboard in Care Compliance

Reactive monitoring

Reactive monitoring of events including accidents, incidents, cases of ill health or property damage provide an opportunity to check performance and learn from mistakes and improve control measures. Trends and

common features arising from accident and incident investigation can identify jobs or activities where future health and safety initiatives would be most beneficial. Investigations may also provide valuable information in the event of legal action or an employee claim.

Monitoring of accident, incidents and near misses takes place at a local level however the Foundation also has an incident review group (IRG) that meets monthly to review the most significant incidents to include (along with other safeguarding events) RIDDOR reportable injuries and illnesses, RIDDOR Dangerous Occurrences, significant Lost Time Incidents and High Potential Near Misses (HiPo's). The role of the board if to:

- Identify further improvements that may be required to prevent harm
- Ascertains if agreed policy and procedure was adhered to
- Ensure the incident has been reported to all external bodies (to include the Charity Commmission) and escalated within PHF
- Ensure learnings have been shared
- Monitor and evaluate performance, including scrutiny of performance data, understanding what is driving performance levels and making recommendations to improve performance.