



New Direction School



Health and Safety Policy

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1. Aims	5
2. Legislation	17
3. Roles and responsibilities	5
4. Site security	6
5. First Aid	7
6. Fire	8
7. COSHH	8
8. Equipment	9
9. Lone working	10
10. Working at height	11
11. Manual handling	11
12. Working with horses and on the Yard	11
13. Off-site visits	12
14. Lettings	12
15. Violence at work	12
16. Smoking	12
17. Infection prevention and control	13
18. New and expectant mothers	14
19. Occupational stress	14
20. Risk Assessment	14
21. Accident reporting	18
22. Training	19
Appendix 1. Fire safety checklist	20
Appendix 2. Asbestos record	21
Appendix 3. Recommended absence period for preventing the spread of infection	22

1. Aims

Our school aims to:

- Provide and maintain a safe and healthy environment
- Establish and maintain safe working procedures amongst staff, students and all visitors to the school site
- Have robust procedures in place in case of emergencies
- Ensure that the premises and equipment are maintained safely, and are regularly inspected

2. Legislation

This policy is based on advice from the Department for Education on [health and safety in schools](#) and the following legislation:

- [The Health and Safety at Work etc. Act 1974](#), which sets out the general duties employers have towards employees and duties relating to lettings
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Control of Substances Hazardous to Health Regulations 2002](#), which require employers to control substances that are hazardous to health
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive and set out the timeframe for this and how long records of such accidents must be kept
- [The Health and Safety \(Display Screen Equipment\) Regulations 1992](#), which require employers to carry out digital screen equipment assessments and states users' entitlement to an eyesight test
- [The Gas Safety \(Installation and Use\) Regulations 1998](#), which require work on gas fittings to be carried out by someone on the Gas Safe Register
- [The Regulatory Reform \(Fire Safety\) Order 2005](#), which requires employers to take general fire precautions to ensure the safety of their staff
- [The Work at Height Regulations 2005](#), which requires employers to protect their staff from falls from height

The school follows [national guidance published by Public Health England](#) when responding to infection control issues.

3. Roles and responsibilities

3.1 The Proprietor (Headteacher)

The proprietor has ultimate responsibility for health and safety matters in the school, but will delegate day-to-day responsibility to Luke Collins and Hannah Oliver

The proprietor has a duty to take reasonable steps to ensure that staff and students are not exposed to risks to their health and safety. This applies to activities on or off the school premises.

The proprietor, as the employer, also has a duty to:

- Assess the risks to staff and others affected by school activities in order to identify and introduce the health and safety measures necessary to manage those risks
- Inform employees about risks and the measures in place to manage them
- Ensure that adequate health and safety training is provided

3.2 Deputy headteachers

The Deputy Head Teachers are health and safety leads and are responsible for health and safety day-to-day. This involves:

- Implementing the health and safety policy
- Ensuring there is enough staff to safely supervise students
- Ensuring that the school building and premises are safe and regularly inspected
- Providing adequate training for school staff
- Reporting to the proprietor on health and safety matters
- Ensuring appropriate evacuation procedures are in place and regular fire drills are held
- Ensuring that in their absence, health and safety responsibilities are delegated to another member of staff
- Ensuring all risk assessments are completed and reviewed
- Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary

3.3 Staff

School staff have a duty to take care of students in the same way that a prudent parent would do so.

Staff will:

- Take reasonable care of their own health and safety and that of others who may be affected by what they do at work
- Co-operate with the school on health and safety matters
- Work in accordance with training and instructions
- Inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken
- Model safe and hygienic practice for students
- Understand emergency evacuation procedures and feel confident in implementing them

3.4 students and parents

students and parents are responsible for following the school's health and safety advice, on-site and off-site, and for reporting any health and safety incidents to a member of staff.

3.5 Contractors

Contractors will agree health and safety practices with the Proprietor/ Deputy headteachers before starting work. Before work begins the contractor will provide evidence that they have completed an adequate risk assessment of all their planned work.

4. Site security

Luke Collins and Hannah Oliver are responsible for the security of the school site in and out of school hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems.

Yvonne Evans, Luke Collins and Hannah Oliver are key holders and will respond to an emergency.

5. First Aid

The first aiders

- Luke Collins
- Hannah Oliver
- Joanna Haigh
- Hayley Morris-Rowe

Staff who are able to administer medicines are:

- Luke Collins (Level 2)
- Hannah Oliver (Level 2)
- Nikki Morris (Level 3)
- Cara Haddon (Level 3)
- Hayley Morris-Rowe (Level 3)
- Joanna Haigh (Level 2)
- Laura Donaldson (Level 2)
- Ellie-Mae Hamilton-Wright (Level 2)

Staff who are trained to manage Epilepsy (including administration of Buccal Midazolam)

- Luke Collins (Level 2)
- Hannah Oliver (Level 2)
- Nikki Morris (Level 3)
- Cara Haddon (Level 3)
- Hayley Morris-Rowe (Level 3)
- Joanna Haigh (Level 2)
- Laura Donaldson (Level 2)
- Ellie-Mae Hamilton-Wright (Level 2)

First Aid Boxes

The first aid posts are located:

- Office 1
- Prior Building Kitchen
- Prior Building Medical Room
- Feed room

Medication

All medicines will be stored safely in the cabinet or fridge within the medical room along with paperwork relating to the medication. Students will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to students and not locked away.

In the case of a pupil accident, the procedures are as follows:

- The member of staff on duty calls for a first aider; or if the child can walk, takes him/her to a first aid post and calls for a first aider.
- The first aider administers first aid and records in our treatment book.
- Full details of the accident are recorded in our accident book
- If the child has to be taken to hospital or the injury is 'work' related then the accident is reported to the Proprietor
- If the incident is reportable under RIDDOR (*Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 1995*), then as the employer the Proprietor will arrange for this to be done.

The proprietor will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

Avid Insurance Services Ltd are our current insurance provider. Their details are displayed in the Robinson building in the main eating room

In the case of a residential **visit**, the residential first aider will administer First Aid. Reports will be completed in accordance with procedures at the Residential Centre. In the case of day **visits** a trained First Aider will carry a travel kit in case of need.

6. Fire

Emergency exits, assembly points and assembly point instructions are clearly identified by safety signs and notices. The Fire Drill and Procedures outline which staff are responsible for which areas and what to do in those areas upon hearing the alarm. The Fire risk assessment of the premises will be reviewed regularly.

Emergency evacuations are practised at least once a term.

The fire alarm is a loud Horn

Fire alarm testing will take place Once a week and be recorded on a testing form within the fire folder.

New staff will be trained in fire safety and all staff and students will be made aware of any new fire risks.

In the event of a fire:

- The alarm will be raised immediately by whoever discovers the fire. The Fire Wardens will aid to sound the alarm and for the orderly evacuation of their areas. Evacuation procedures will also begin immediately
- The emergency services will be contacted by Luke or Hannah.
- Fire extinguishers may be used by staff only, and only then if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk
- Staff and students will congregate at the assembly point. This is the marked point in the car park
- a register of students will be taken, which will then be checked against the attendance register of that day
- Laura Donaldson will take a register of all staff
- Staff and Students will remain outside the building until the emergency services say it is safe to re-enter

The school will have special arrangements in place for the evacuation of people with mobility needs and fire risk assessments will also pay particular attention to those with disabilities.

A fire safety checklist can be found in appendix 1.

7. COSHH

Schools are required to control hazardous substances, which can take many forms, including:

- Chemicals
- Products containing chemicals
- Fumes
- Dusts
- Vapours
- Mists
- Gases and asphyxiating gases
- Germs that cause diseases, such as leptospirosis or legionnaires disease

Control of substances hazardous to health (COSHH) risk assessments are completed by Laura Donaldson and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

Our staff use and store hazardous products in accordance with instructions on the product label. All hazardous products are kept in their original containers, with clear labelling and product information.

Any products will be stored in locked cupboards on the yard or in the Robinson Building.

Any hazardous products are disposed of in accordance with specific disposal procedures.

Emergency procedures, including procedures for dealing with spillages, are displayed near where hazardous products are stored and in areas where they are routinely used.

7.1 Gas safety

- Installation, maintenance and repair of gas appliances and fittings will be carried out by a competent Gas Safe registered engineer
- Gas pipework, appliances and flues are regularly maintained
- All rooms with gas appliances are checked to ensure that they have adequate ventilation

7.2 Asbestos

- Staff are briefed on the hazards of asbestos, the location of any asbestos in the school and the action to take if they suspect they have disturbed it
- Arrangements are in place to ensure that contractors are made aware of any asbestos on the premises and that it is not disturbed by their work
- Contractors will be advised that if they discover material which they suspect could be asbestos, they will stop work immediately until the area is declared safe
- A record is kept of the location of asbestos that has been found on the school site

8. Equipment

- All equipment and machinery is maintained in accordance with the manufacturer's instructions. In addition, maintenance schedules outline when extra checks should take place
- When new equipment is purchased, it is checked to ensure that it meets appropriate educational standards
- All equipment is stored in the appropriate storage containers and areas. All containers are labelled with the correct hazard sign and contents

8.1 Electrical equipment

- All staff are responsible for ensuring that they use and handle electrical equipment sensibly and safely
- Any pupil or volunteer who handles electrical appliances does so under the supervision of the member of staff who so directs them
- Any potential hazards will be reported to Luke Collins and Hannah Oliver immediately
- Permanently installed electrical equipment is connected through a dedicated isolator switch and adequately earthed
- Only trained staff members can check plugs
- Where necessary a portable appliance test (PAT) will be carried out by a competent person
- All isolators switches are clearly marked to identify their machine
- Electrical apparatus and connections will not be touched by wet hands and will only be used in dry conditions
- Maintenance, repair, installation and disconnection work associated with permanently installed or portable electrical equipment is only carried out by a competent person

8.2 PE equipment

- students are taught how to carry out and set up PE equipment safely and efficiently. Staff check that equipment is set up safely
- Any concerns about the condition of the gym floor or other apparatus will be reported to the Luke Collins and Hannah Oliver

8.3 Display screen equipment

- All staff who use computers daily as a significant part of their normal work have a display screen equipment (DSE) assessment carried out. 'Significant' is taken to be continuous/near continuous spells of an hour or more at a time
- Staff identified as DSE users are entitled to an eyesight test for DSE use upon request, and at regular intervals thereafter, by a qualified optician (and corrective glasses provided if required specifically for DSE use)

8.4 Specialist equipment

Parents are responsible for the maintenance and safety of their children's wheelchairs. In school, staff promote the responsible use of wheelchairs.

Oxygen cylinders are stored in a designated space, and staff are trained in the removal storage and replacement of oxygen cylinders.

8.5 Yard Equipment

- students will be taught how to use all yard equipments correctly and safely before using
- All students will be supervised using yard equipment to ensure safe and proper use

9. Lone working

Lone working may include:

- Late working
- Home or site visits
- Weekend working
- Site manager duties

- Site cleaning duties
- Working in a single occupancy office

Potentially dangerous activities, such as those where there is a risk of falling from height, will not be undertaken when working alone. If there are any doubts about the task to be performed then the task will be postponed until other staff members are available.

If lone working is to be undertaken, a colleague, friend or family member will be informed about where the member of staff is and when they are likely to return.

The lone worker will ensure that they are medically fit to work alone.

10. Working at height

We will ensure that work is properly planned, supervised and carried out by competent people with the skills, knowledge and experience to do the work.

In addition:

- Luke Collins and Hannah Oliver retain ladders for working at height
- students are prohibited from using ladders
- Staff will wear appropriate footwear and clothing when using ladders
- Contractors are expected to provide their own ladders for working at height
- Before using a ladder, staff are expected to conduct a visual inspection to ensure its safety
- Access to high levels, such as roofs, is only permitted by trained persons

11. Manual handling

It is up to individuals to determine whether they are fit to lift or move equipment and furniture. If an individual feels that to lift an item could result in injury or exacerbate an existing condition, they will ask for assistance.

The school will ensure that proper mechanical aids and lifting equipment are available in school, and that staff are trained in how to use them safely.

Staff and students are expected to use the following basic manual handling procedure:

- Plan the lift and assess the load. If it is awkward or heavy, use a mechanical aid, such as a trolley, or ask another person to help
- Take the more direct route that is clear from obstruction and is as flat as possible
- Ensure the area where you plan to offload the load is clear
- When lifting, bend your knees and keep your back straight, feet apart and angled out. Ensure the load is held close to the body and firmly. Lift smoothly and slowly and avoid twisting, stretching and reaching where practicable

12. Working with horses and on the Yard

All staff and students have a responsibility to ensure that the yard is kept a safe place to work and learn. Horses are live animals and therefore can be unpredictable. However all tasks are risk assessed and safety measures can be taken to minimise any health and safety concern.

12.1 General Yard Safety

- All students will be supervised at all times
- All staff will be supervised until deemed competent at different tasks.
- Staff will only be asked to do tasks that they are competent in
- Appropriate safety equipment must be worn (eg Riding hat)
- Ensure that long hair is tied back and don't wear jewelry

12.2 Yard Tasks

- Everyone will be appropriately trained on safe use of equipment by senior yard staff.
- Everyone must follow instruction from the senior member of staff on the yard
- Senior members of yard staff must ensure tasks are assigned according to staff/ student competencies.
- Everyone will be trained and instructed on manual handling and only move items following this training

12.3 Working with horses

- Staff may only enter a stable with a horse or lead out horses if confident and competent (as instructed by the senior staff member on duty) to do so.
- Students may only enter a stable with a horse or lead out horses if confident and competent (as instructed by the senior staff member on duty) to do so and where appropriate under supervision.
- Only work with the horses under instruction and, where appropriate, supervision of a senior yard staff member.

12.4 Infection Control

- Ensure safe hygiene is maintained around the horses if a horse is sick or any infections are detected (senior staff will advise on infection risk protocols).
 - Wearing clean ppe when entering the stable
 - washing hands, changing clothes after being with the horse
 - Ensuring food and water is kept separate
 - Moving the horse to a stable away from other horses
 - Ensuring tools are kept separate and washed after use.

12.5 Hygiene

- Everyone will make sure that muddy boots are removed on entering any indoor space
- Everyone will make sure hands are washed as soon as they come inside

13. Off-site visits

When taking students off the school premises, we will ensure that:

- Risk assessments will be completed where off-site visits and activities require them
- All off-site visits are appropriately staffed
- Staff will take a school mobile phone, a portable first aid kit, information about the specific medical needs of students along with the parents' contact details
- There will always be at least one first aider on school trips and visits

14. Lettings

This policy applies to lettings. Those who hire any aspect of the school site or any facilities will be made aware of the content of the school's health and safety policy, and will have responsibility for complying with it.

15. Violence at work

We believe that staff should not be in any danger at work, and will not tolerate violent or threatening behaviour towards our staff.

All staff will report any incidents of aggression or violence (or near misses) directed to themselves to their line manager/headteacher immediately. This applies to violence from students, visitors or other staff.

16. Smoking

Smoking is not permitted anywhere on the school premises.

17. Infection prevention and control

We follow national guidance published by Public Health England when responding to infection control issues. We will encourage staff and students to follow this good hygiene practice, outlined below, where applicable.

17.1 Handwashing

- Wash hands with liquid soap and warm water, and dry with paper towels
- Always wash hands after using the toilet, before eating or handling food, and after handling animals
- Cover all cuts and abrasions with waterproof dressings

17.2 Coughing and sneezing

- Cover mouth and nose with a tissue
- Wash hands after using or disposing of tissues
- Spitting is discouraged

17.3 Personal protective equipment

- Wear disposable non-powdered vinyl or latex-free CE-marked gloves and disposable plastic aprons where there is a risk of splashing or contamination with blood/body fluids (for example, nappy or pad changing)
- Wear goggles if there is a risk of splashing to the face
- Use the correct personal protective equipment when handling cleaning chemicals

17.4 Cleaning of the environment

- Clean the environment frequently and thoroughly

17.5 Cleaning of blood and body fluid spillages

- Clean up all spillages of blood, faeces, saliva, vomit, nasal and eye discharges immediately and wear personal protective equipment
- When spillages occur, clean using a product that combines both a detergent and a disinfectant and use as per manufacturer's instructions. Ensure it is effective against bacteria and viruses and suitable for use on the affected surface
- Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below
- Make spillage kits available for blood spills

17.6 Laundry

- Wash laundry in a separate dedicated facility
- Wash soiled linen separately and at the hottest wash the fabric will tolerate
- Wear personal protective clothing when handling soiled linen
- Bag children's soiled clothing to be sent home, never rinse by hand

17.7 Clinical waste

- Always segregate domestic and clinical waste, in accordance with local policy

- Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins
- Remove clinical waste with a registered waste contractor
- Remove all clinical waste bags when they are two-thirds full and store in a dedicated, secure area while awaiting collection

17.8 Animals

- Wash hands before and after handling any animals
- Keep animals' living quarters clean and away from food areas
- Dispose of animal waste regularly, and keep litter boxes away from students
- Supervise students when playing with animals
- Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a pet

17.9 students vulnerable to infection

Some medical conditions make students vulnerable to infections that would rarely be serious in most children. The school will normally have been made aware of such vulnerable children. These children are particularly vulnerable to chickenpox, measles or slapped cheek disease (parvovirus B19) and, if exposed to either of these, the parent/carer will be informed promptly and further medical advice sought. We will advise these children to have additional immunisations, for example for pneumococcal and influenza.

17.10 Exclusion periods for infectious diseases

The school will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 3.

In the event of an epidemic/pandemic, we will follow advice from Public Health England about the appropriate course of action.

18. New and expectant mothers

Risk assessments will be carried out whenever any employee or pupil notifies the school that they are pregnant.

Appropriate measures will be put in place to control risks identified. Some specific risks are summarised below:

- Chickenpox can affect the pregnancy if a woman has not already had the infection. Expectant mothers should report exposure to antenatal carer and GP at any stage of exposure. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles
- If a pregnant woman comes into contact with measles or German measles (rubella), she should inform her antenatal carer and GP immediately to ensure investigation
- Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), the pregnant woman should inform her antenatal care and GP as this must be investigated promptly

19. Occupational stress

We are committed to promoting high levels of health and wellbeing and recognise the importance of identifying and reducing workplace stressors through risk assessment.

Systems are in place within the school for responding to individual concerns and monitoring staff workloads.

20. Risk Assessment

20.1 Why undertake risk management?

Robust risk management is an essential component to running an efficient and effective school. Monitoring the risks that could impact on delivery in a proactive and structured way helps the organisation track how it is achieving agreed priorities and provides management information to help inform decision making and the capacity to improve. Having a risk register helps senior staff challenge the way services are managed and what impact changes to policy, funding, or delivery models are having so action plans can be put in place to mitigate against potential risks before they become a reality.

Schools exist in an environment which is constantly changing, where pressure on pupil numbers, finances, staff recruitment and retention and from Ofsted can alter the organisation's fortunes very quickly.

The Governance Handbook March 2019 (DfE) confirms that effective risk management is a key element of strategic leadership i.e. there should be:

"Procedures for the Board to set and manage risk appetite and tolerance ensuring that risks are aligned with strategic priorities and improvement plans and that appropriate intervention strategies are in place and embedding risk management at every level of governance".

<https://www.gov.uk/government/publications/governance-handbook>

Furthermore, accountability requires "a regular cycle of meetings and appropriate processes to support business and financial planning."

School leaders will be familiar with health and safety risk assessments and will have procedures in place for reviewing these on a regular basis. Risk management of issues which are not related to health and safety concerns are less common but no less important in the context of the school's reputational risks, operational risks (e.g. health and safety, premises management, workforce), regulation risks (e.g. Ofsted), financial risks, safeguarding/pupil welfare risks and risks associated with relationships (e.g. federations, collaborations).

20.2 What is risk management?

Definitions

Collins English Dictionary

"Risk management is the skill or job of deciding what risks are in a particular situation and taking action to prevent or reduce them."

Institute of Risk Management

<http://www.theirm.org>.

"Risk is part of all our lives. As a society, we need to take risks to grow and develop...We need to make sure we manage risks so that we minimise their threats and maximise their potential. Risk management involves understanding, analysing and addressing risk to make sure organisations achieve their objectives".

How to undertake risk management?

In simple terms, risk management involves a process where the following questions can be addressed:

1. What could go wrong?
2. How likely is it to happen?
3. If it happens, what will be the impact?
4. What am I doing about it?
5. Is it working?
6. How am I monitoring it?

This process also allows for identification of what could go right

For schools, some of the obvious risks will fall into the following categories:

1. Pupil outcomes
2. Pupil numbers/size of school
3. Reputation which can affect (2)
4. Financial performance

5. Compliance
6. Safeguarding and wellbeing
7. Staffing /workforce planning including succession arrangements
8. Operational issues including premises management/health and safety

20.3 Roles and responsibilities

The Proprietor has overall responsibility of risk management at the school.

The headteacher and Deputy Headteachers are responsible for:

- Ensuring potential hazards are identified and risk assessments are carried out as appropriate.
- Ensuring that any individual tasked to carry out a risk assessment is suitably trained to do so.
- Allocating resources in response to risk assessments and determining a course of action, if it has been identified that a risk cannot be suitably controlled so far as is reasonably practicable.
- Implementing frameworks for decision-making and corporate strategies which consider risk assessment principles.
- Implementing appropriate mechanisms to communicate safe systems of work identified as part of the risk assessment process.
- Communicating elements of risk and health and safety management to the proprietor and all other staff

Staff members are responsible for:

- Taking reasonable care of their own safety, as well as that of students, visitors and other staff members.
- Undertaking their work in accordance with training and Risk Assessments.
- Cooperating with the school on health and safety matters.
- Carrying out assigned risk assessments effectively, ensuring all risks are identified as well as suitable control measures.
- Reporting any risks or defects to the headteacher in order to create new, or update, risk assessments.
- Participating in risk management training.

20.4 Risk Assessments

The risk assessment follows almost the same principles as the risk register, but with a focus on each individual risk. Almost any activity comes with associated risk and a pragmatic and realistic approach is important to follow; specifically, though, a culture of risk assessment needs to permeate the school, with everyone thinking about risks. This is called a dynamic risk assessment and can be very powerful – any member of staff should be confident enough to say about an activity that it is risky & then carry out a more formal risk assessment, with measures considered to reduce risk.

This should be simple enough for anyone to not consider it a burden. A dynamic risk assessment should consider the likelihood and possible severity of any activity; the following table is a good ready reckoner and could be posted on staff only areas as a reminder.

Risk Assessment Matrix

SEVERITY

L I K E L I H O O D		TRIVIAL Little to no effect on event / activity or person involved, e.g., bumps / bruises	MINOR To include first aid being required, to one day lost time	MODERATE Sprains / strains / referral to clinician, 1 – 6 days lost time etc	INTOLERABLE Major injury including 7 days off work, and / or disastrous results to event or activity / life changing injury or death
	IMPROBABLE Unlikely to occur	LOW	LOW	MEDIUM	HIGH
	POSSIBLE Likely to occur	LOW	MEDIUM	HIGH	HIGH
	PROBABLE Risk will occur	MEDIUM	MEDIUM	HIGH	HIGH

Risk Rating Key and required actions:

LOW –	MEDIUM –	HIGH –
Acceptable and OK to proceed	Take further action to reduce risk if this can be done cost effectively, and the benefits will outweigh the risk(s). Otherwise risk can be tolerated if existing precautions are maintained and managed. Consider a formal risk assessment	Intolerable – do not proceed - requires further action to reduce risk to a tolerable level: seek support. Conduct a full risk assessment

20.5 Safeguarding

Our Safeguarding Policies and training for all staff form the core of our Child Protection Risk management. Safe recruitment policies and procedures ensure that the school is not exposed to the risk of employing staff who are barred from working with children, or who are not allowed to work in the UK.

20.6 Risk Assessment areas

At New Direction we have individual Risk Assessments for all our Students and Adult Clients. Policies covering Safeguarding and Safer Recruitment help to mitigate the risk arising from Safeguarding by putting in place measures to help protect students, identify risks and make everyone aware of how to deal with concerns.

Risk Assessments will be available to staff through the internal staff intranet site. Student Risk assessments are on Class Charts. Staff are responsible for using these and reporting any extra information which would need adding to the risk assessments as they are using them. This is important to maintain the Risk assessments as Live Documents which are being constantly reviewed and Updated. All Risk Assessments will be reviewed annually as a minimum. Student Risk Assessments will be reviewed termly as a minimum.

Some area(s) which may require Risk Assessments include:

- The equine element
- Asbestos management plan

- Behaviour risk assessments – to include both pupil and staff safety
- Car parking
- Catering
- Classroom (general)
- Cleaning
- DT / Practical lessons / use of materials or machinery
- Fire risk assessment
- First Aid requirements
- Fragile roof(s)
- General Circulation
- General security arrangements
- Lone working / skeleton staff working
- Manual handling
- Medicine administration / use of emergency inhalers / epi-pens
- New and expectant mothers
- Office work (to include DSE / manual handling / personal safety etc)
- Perimeter / fencing assessments (will probably go hand in hand with security assessments)
- Playground equipment / PE equipment
- Return to Work risk assessment (after a period of sick leave)
- School Security
- School trips
- Specific risks as and when they arise – perhaps as a result of an incident / notification
- Stress / mental health (can cover staff and students)
- Travelling for work / use of own car for business travel
- Water hygiene assessment
- Work tools
- Working at Height

21. Accident reporting

21.1 Accident record book

- An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it.
- As much detail as possible will be supplied when reporting an accident
- Information about injuries will also be kept in the pupil's educational record
- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

21.2 Reporting to the Health and Safety Executive

Luke Collins and Hannah Oliver will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

Luke Collins and Hannah Oliver will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries. These are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight

- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding)
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days
- Where an accident leads to someone being taken to hospital
- Where something happens that does not result in an injury, but could have done
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here:

How to make a RIDDOR report – <http://www.hse.gov.uk/riddor/report.htm>

21.3 Reporting to Ofsted

Luke Collins and Hannah Oliver will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

22. Training

Our staff are provided with health and safety training as part of their induction process.

Staff who work in high risk environments, such as in science labs or with woodwork equipment, or work with students with special educational needs (SEN), are given additional health and safety training.

23. Monitoring

The Proprietor will regularly monitor the operation of this policy and its procedures.

This policy will be reviewed annually by the Proprietor and key staff.

Appendix 1. Fire safety checklist

ISSUE TO CHECK	YES/NO
Are fire regulations prominently displayed?	
Is fire-fighting equipment, including fire blankets, in place?	
Does fire-fighting equipment give details for the type of fire it should be used for?	
Are fire exits clearly labelled?	
Are fire doors fitted with self-closing mechanisms?	
Are flammable materials stored away from open flames?	
Do all staff and students understand what to do in the event of a fire?	
Can you easily hear the fire alarm from all areas?	

Appendix 2. Asbestos record

Location	Product	How much	Surface coating	Condition	Ease of access	Asbestos type	Comment

Appendix 3. Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from non-statutory guidance for schools and other childcare settings from Public Health England. For each of these infections or complaints, there [is further information in the guidance on the symptoms, how it spreads and some 'do's and don'ts' to follow that you can check.](#)

Infection or complaint	Recommended period to be kept away from school or nursery
Athlete's foot	None.
Campylobacter	Until 48 hours after symptoms have stopped.
Chicken pox (shingles)	Cases of chickenpox are generally infectious from 2 days before the rash appears to 5 days after the onset of rash. Although the usual exclusion period is 5 days, all lesions should be crusted over before children return to nursery or school. A person with shingles is infectious to those who have not had chickenpox and should be excluded from school if the rash is weeping and cannot be covered or until the rash is dry and crusted over.
Cold sores	None.
Rubella (German measles)	5 days from appearance of the rash.
Hand, foot and mouth	Children are safe to return to school or nursery as soon as they are feeling better, there is no need to stay off until the blisters have all healed.
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
Measles	Cases are infectious from 4 days before onset of rash to 4 days after so it is important to ensure cases are excluded from school during this period.
Ringworm	Exclusion not needed once treatment has started.
Scabies	The infected child or staff member should be excluded until after the first treatment has been carried out.
Scarlet fever	Children can return to school 24 hours after commencing appropriate antibiotic treatment. If no antibiotics have been administered the person will be infectious for 2 to 3 weeks. If there is an outbreak of scarlet fever at the school or nursery, the health protection team will assist with letters and factsheet to send to parents or carers and staff.

Slapped cheek syndrome, Parvovirus B19, Fifth's disease	None (not infectious by the time the rash has developed).
Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the child or food handler returning to school.
Diarrhoea and/or vomiting (Gastroenteritis)	<p>Children and adults with diarrhoea or vomiting should be excluded until 48 hours after symptoms have stopped and they are well enough to return. If medication is prescribed, ensure that the full course is completed and there is no further diarrhoea or vomiting for 48 hours after the course is completed.</p> <p>For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health advisor or environmental health officer will advise.</p> <p>If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.</p>
Cryptosporidiosis	Until 48 hours after symptoms have stopped.
E. coli (verocytotoxigenic or VTEC)	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
Food poisoning	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
Salmonella	Until 48 hours after symptoms have stopped.
Typhoid and Paratyphoid fever	Seek advice from environmental health officers or the local health protection team.
Flu (influenza)	Until recovered.
Tuberculosis (TB)	students and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. students and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.

Whooping cough (pertussis)	A child or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so or 21 days from onset of illness if no antibiotic treatment.
Conjunctivitis	None.
Giardia	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).
Head lice	None.
Hepatitis A	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older children with good hygiene who will have been much more infectious prior to diagnosis.
Hepatitis B	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
Hepatitis C	None.
Meningococcal meningitis/ septicaemia	If the child has been treated and has recovered, they can return to school.
Meningitis	Once the child has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
Meningitis viral	None.
MRSA (meticillin resistant Staphylococcus aureus)	None.
Mumps	5 days after onset of swelling (if well).
Threadworm	None.
Rotavirus	Until 48 hours after symptoms have subsided.

