

# HEALTH AND SAFETY POLICY

(incorporating safety, health and environmental arrangements and approaches)

<b>Lead</b>	COO
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# HEALTH AND SAFETY POLICY

## 1. Introduction

1.1 *The Collegiate Trust* is a partnership of academies in Crawley and Croydon whose purpose is to build *collaboration to deliver exceptional education*, and whose vision is *exceptional education for all*. This is reflected in our Trust's values: **ambition & collaboration**, as well as in our desired outcomes: **achievement & enjoyment**.

## 1.2 Policy Statement

1.2.1 Our approach is to encourage and maintain a proactive health, safety and environmental culture, safe working conditions, equipment and systems of work, according to the HSE's published guidance 'HSG65'. We also provide such systems, procedures, information, training and supervision as is necessary to achieve this. We acknowledge our legal duty of care for the health, safety and environmental well-being of our staff, students and pupils, and others who may be affected by our activities. This Policy Statement acts as a preface to more detailed arrangements governing key safety topics and is reviewed annually.

1.2.2 Environmental impact is assessed as part of general management strategy and steps are taken to minimise and control waste at procurement, installation and disposal stages. Site waste is segregated to promote sustainability as far as possible. We apply and promote a good neighbour policy with regard to all activities. None of the products we use are known to be harmful to the environment. All possible steps are taken to ensure legal compliance with health, safety and environmental legislation.

## 1.3 Organisation and Responsibilities

### 1.3.1 Board of Directors

The Chair of the Board of Directors accepts overall and ultimate responsibility for all health safety and environmental matters and for the appropriate delegation / implementation of this policy document.

### 1.3.2 Duty Holders

Risk control is a line management responsibility. Steps are taken to ensure that all personnel have sufficient training, authority and resources to enable them to carry out their duties safely. In particular, Duty Holders must ensure safety arrangements are fully applied at all times and that a copy of this document is kept on site at all times.

### 1.3.3 Contractors and Suppliers

Safe systems of work and reputation with respect to health, safety and environmental considerations is a significant factor in the selection and appointment of contractors and suppliers.

### 1.3.4 All Staff

All staff have legal duties regarding safety and health. They must co-operate in the preservation of their own safety and that of their colleagues and visitors. In practice this means observing all safety rules and regulations, following safe working arrangements, using the safety equipment provided – notably PPE, ensuring that all hazardous areas are appropriately segregated and bringing any unsafe conditions or practices to the attention of their Line Manager.

### 1.3.5 Safety Advisor

*Britrisk Safety Limited* is retained to assist with the management of health and safety.

## 2. Arrangements

### a. Policy / Procedures / Arrangements

Detailed safe operational arrangements governing key safety topics are summarised in the policy.

### b. Emergency Planning & Response

Emergency arrangements, notably in respect of fire and first aid, are in position. Staff must be fully conversant with all related procedures.

### c. Risk Assessments

Risk assessments are prepared in respect of all hazards and tasks. All staff must ensure that they read and understand these documents that they apply appropriate control measures and work safely.

### d. Safety / control of Visitors and Contractors

Steps are taken to ensure the safety of all visitors. In particular, contractors are required to maintain safe systems of work, including the preparation of relevant risk assessments and method statements.

### e. Routine Monitoring

Steps are taken to ensure that those responsible for safety carry out checks on an ongoing basis. TCT's Safety Advisers *Britrisk Safety* carry out periodic audits as instructed by TCT.

### f. Information, Instruction and Training

Steps are taken to ensure that staff receive appropriate, readily understood information, instruction, and training via training courses, safety briefings and printed material.

### g. Positive Health & Safety Culture

Culture in a professional context is defined as a set of habits, attitudes and beliefs that together comprise the way the organisation does business. It is 'The way we do things here'. The following points should therefore be applied by all staff at all times:

- Take care of your own safety & remind colleagues to do the same
- Apply the contents of training courses, training information, notices, risk assessments and procedures.
- Where applicable apply all rules regarding correct / full use of PPE.
- Report any defective plant or equipment immediately and do not use it until it is fully repaired or replaced.

### h. Consultation and Communication

Staff must take individual and collective responsibility for implementing this safety policy, within the context of their tasks and duties. The principle of line management responsibility includes health and safety considerations at all times. The flowchart indicating safety responsibilities within the Collegiate Trust is considered an integral part of this document. Safety meetings are convened at regular intervals.

### i. Accident and Incident Reporting and Investigation

All Staff are required to report any accident or incident (actual or 'near-miss') to their supervisor immediately. Appropriate liaison will take place with the Safety Advisor who will ensure that such occurrences are reported in accordance with 'RIDDOR', investigated, root causes identified and suitable measures taken to prevent a recurrence.

### j. Work Equipment Provision, Use & Maintenance

TCT recognises that this is a higher-risk area of activity and takes care to comply with the Provision & Use of Work Equipment Regulations (PUWER)

## 3. Organisation and Responsibilities

### Section A Key Duty Holders

### **i. Board of Directors and Chair**

The Board of Directors has overall and ultimate responsibility for health and safety performance throughout the organisation including all schools that come within the auspices of the Trust. The Chair will take all reasonable steps to ensure that:

- All health and safety considerations are fully and appropriately resourced.
- The coordination of health and safety on a day-to-day basis is delegated to the Chief Operating Officer.
- The Governing Bodies of each school acts as a 'Critical Friend' with regard to health and safety considerations.
- Health and safety is seen by all staff, trustees, governors and board members as the Trust's top priority.

### **ii. Chief Operating Officer**

The Chief Operating Officer coordinates health and safety throughout the Trust. In practice this means taking reasonable steps to ensure that:

- All leaders and managers, teachers, maintenance staff and others treat health and safety as a top priority.
- Where necessary, resources are provided and appropriately allocated to ensure safety, so far as is reasonably practicable.
- That a 'Competent Person' is appointed and retained to assist all staff and Duty Holders with the discharge of their relevant duties.
- Duty Holders and staff are appointed, appropriately trained and support the Trust's health and safety aims, objectives and aspirations.
- That a viable health and safety strategy is devised, implemented and maintained throughout the organisation.
- This document is reviewed periodically and that responsibility for active implementation is appropriately delegated.
- Fire safety arrangements are appropriate and that they comply with the Regulatory Reform (Fire Safety Order).
- The safety of staff and others is assured and that the organisation complies with the requirements of the Health and Safety at Work Act and all other related legislation.
- Appointments are made relating to health and safety responsibilities and that such responsibilities are appropriately discharged according to the safety flowchart which depicts the structure of the health and safety management system.
- Appropriate liaison takes place with staff, contractors and the external 'Competent Person' / Health & Safety Advisor regarding health and safety matters.
- Risk assessments are carried out, appropriately communicated and appropriate controls implemented.
- Regular, written departmental checks are carried out as appropriate.
- The actions of contractors are controlled, and steps taken to ensure safety.

### **iii. Health and Safety Adviser: *Britrisk Safety Limited***

The Health and Safety Adviser takes reasonable steps to ensure that the organisation is appropriately supported with regard to health and safety management and in particular that 'Competent' guidance is offered namely:

- The compilation of this safety policy and arrangements.
- Emergency procedures.
- The compilation and communication of 'Suitable and sufficient' risk assessments.
- The control of contractors.
- Written checks and audits.
- Training and competence (including the delivery of key training seminars).
- The development of a positive health & safety culture.
- Document management and efficient communication systems.
- Assisting with accidents, incidents and 'Near misses'.

- The safe use of work equipment and safe maintenance of premises.

#### **iv. Principals**

Principals of each Academy are responsible for health and safety management by staff within their individual academies. In practice this means taking reasonable steps to ensure that:

- Appropriate Duty Holders are appointed and manage health and safety within their areas of jurisdiction.
- Duty Holders are aware of guidance received from the Chief Operating Officer and implemented accordingly.
- The '10 Element Health & Safety Management System' forms the basis of health and safety management and document control.
- Guidance from the Health and Safety Advisor is accessed and acted upon.
- The contents of this health and safety policy is implemented.

#### **v. All Staff**

All staff are required to take reasonable steps to ensure that they:

- Take reasonable care for their own health and safety and that of others who may be affected by their acts or omissions.
- Are aware of relevant risk assessments, and fully apply control measures identified.
- Wear such appropriate PPE (personal protective equipment) as may be required and maintain this equipment in good condition.
- Fully cooperate with the Trust and their line manager on all health and safety matters.
- Are fully conversant with the contents of the safety arrangements within this document and that they take all necessary steps to ensure the contents are applied.
- Report any accidents or 'Near misses' to their line manager immediately.
- Report any defective plant or equipment to their line manager immediately.
- Report any unsafe situation to their line manager immediately.
- Do not to interfere with, misuse or damage anything provided in the interests of safety.

## Section B Arrangements

### i. Accident Reporting

#### Purpose of Procedure

Regulations governing the notification and recording of accidents are comprised within the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). These regulations require that certain prescribed events, injuries and diseases are formally reported.

It is important to ensure that all staff are aware of the importance of reporting accidents and 'Near misses'. This is vital as it may be an indication of working practices that need to be revised to reduce the likelihood of similar incidents and accidents occurring in the future.

#### Procedure

All accidents, no matter how small should be appropriately reported and entered in the accident book which is held by an appropriate Duty Holder within each school. Where necessary, treatment should be given by a suitably trained First Aider or Appointed Person and the emergency services alerted as appropriate.

It is important that all staff report 'Near misses' to the relevant Duty Holder who in turn will ensure risk assessments are reviewed accordingly. It is vital that 'Near miss' incidents are reported and acted upon as this may prevent similar events and accidents occurring in the future.

In the case of certain serious accidents and incidents the HSE must be notified in writing within 10 days of the accident. This is done via the HSE website. The *Britrisk Safety Adviser* will guide this process if necessary.

In the event of an accident or incident occurring which is reportable under RIDDOR, or where there is a serious 'Near miss' the Duty Holder may require an Accident Investigation Report to be completed by the Health and Safety Advisor. All eyewitness accounts will be collected as near to the time of the accident as is reasonably practicable. Notwithstanding legal obligations, the Collegiate Trust views accident investigation as a valuable tool in the prevention of future accidents.

In the event of a reportable accident, insurers should also be notified.

Following any RIDDOR Incident, the relevant Risk Assessment will be reviewed and amended as necessary, and working practices revised as required.

Reactive Monitoring of accidents, incidents and 'Near misses' takes place on an annual basis via the table below:

Year: 2022/23					
	Accidents (RIDDOR)	Accidents (Non-RIDDOR)	Incidents	'Near misses'	Total
Staff					
Visitors					
Contractors					

**Accident:** An unplanned event that resulted in an injury or ill health to a person or people.  
**Incident:** An unplanned event that resulted in damage to property but *no* injury or ill health to a person or people.  
**'Near miss':** An unplanned event that *could have* resulted in an injury or ill health to a person or people *but did not*.

Related HSE information: <http://www.hse.gov.uk/riddor/>  
<http://www.hse.gov.uk/pubns/indg453.pdf>

## ii. **Safe Systems of Work (risk assessments and method statements)**

### **Purpose of Procedure**

This section contains reference to Risk Assessments (and Method Statements where applicable) used to control the safety of all activities. It also refers to safe working practices and discipline.

Risk Assessments identify hazards and summarise measures to reduce and control risk. Method Statements are intended to ensure that relevant staff understand the detailed nature of potentially hazardous tasks, their safety considerations and the sequence in which the task is completed.

### **Procedure**

Each Principal is responsible for overseeing the risk assessment process and, where appropriate, the use of method statements.

The Health and Safety Adviser will facilitate this process. Contractors are required to provide evidence of their preparation of risk assessments and by method statements ('RAMS') as applicable.

The Principal will delegate the responsibility for carrying out risk assessments to relevant Duty Holders and will periodically review risk assessments with those to whom responsibility has been delegated.

Duty Holders are responsible for taking reasonable steps to ensure that the contents of these documents are effectively communicated and understood by staff under their supervision.

All staff are required to read risk assessment thoroughly, understand / implement their contents and ask their line manager any questions that may arise.

All risk assessments are reviewed periodically, after a reportable accident, or at the time of any changes for example in procedure, staff or equipment, or for any new work tasks.

Relevant staff receive training in risk assessment, including 'Dynamic' risk assessment, delivered by the Health & Safety Adviser and this process should be applied as an integral part of all work tasks.

All staff should make themselves aware of the risk assessment process by following the link below.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg163.pdf>

## iii. **Manual Handling**

### **Purpose of Procedure**

Serious, chronic injury can result if loads are not lifted / handled correctly. The purpose of this procedure is to ensure that all people who are required to lift or move heavy objects receive training in manual handling techniques and follow manual handling risk assessments for key tasks.

### **Procedure**

The Collegiate Trust endeavors to avoid the need for manual handling activities, so far as is reasonably practicable. Where this is not possible, a risk assessment will be carried by a competent person, taking into account the task, the load, the work environment and the capability of the individual concerned. Controls should then be introduced to reduce the risk of accident or injury to the lowest extent reasonably practicable. Wherever possible, manual handling tasks will be facilitated by the use of mechanical aids.

The basic principle of the Manual Handling Regulations is that the maximum that anyone should have to lift on their own is 25kg although this is only a recommendation as everyone has a different capacity and ability to lift.

Where manual handling cannot be avoided, training, guidance and instruction will be given to reduce the risk of injuries occurring, especially if vulnerable persons are involved (such as those with a known medical condition or weakness such as a chronic spinal condition).

Employees must always ask for assistance should any task be beyond their individual capability.

Any employee who has a known medical condition or weakness must notify the Principal immediately who will take steps (in association with the employee concerned) to ensure that suitable manual handling precautions are taken and that safe handling is ensured at all times.

All employees should be made aware of safe manual handling techniques by following the link below.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg143.pdf>

#### **iv. Written Inspections / Checks**

##### **Purpose of Procedure**

Regular, written systematic inspections / checks are important to assist with the control of safety and to ensure that relevant arrangements / procedures are being observed and are working effectively. Inspections also provide an opportunity to review the continuing effectiveness of this policy and to identify areas where revision may be necessary.

##### **Procedure**

Periodic checks are carried out variously by those holding key safety responsibilities, as delegated by the Principal, according to their area of jurisdiction. The frequency of these checks is specified within the relevant documents. Additional, periodic checks may be carried out by the Health and Safety Advisor during scheduled visits.

Relevant Duty Holders are responsible for ensuring that written checks are carried out as stated. The checking task may be delegated, but responsibility for ensuring that checks are carried out regularly and on time rests with the relevant Duty Holder and cannot be transferred.

All such inspections should be suitably documented and a 'Non-compliance Report' raised as necessary. Corrective action will then follow as soon as possible following the check.

The person carrying out the inspection / check will initial the written checks and also has responsibility for ensuring that any corrective actions are addressed / closed out.

#### **a. First Aid**

##### **Purpose of Procedure**

To ensure that appropriate first aid arrangements are in position in the event of personal injury.

##### **Procedure**

Specific arrangements for first aid cover will depend on the findings of a risk assessment.

Fully trained 'First Aiders' (FAW – First Aid at Work / 3 day course) are considered appropriate for higher risk environments, one day 'Appointed Persons' (EFAW - Emergency First Aid at Work / 1 day course) are considered sufficient for lower risk environments. A minimum of one First Aider (FAW) should be present on all premises at all times.

Training should include administration of Epipen, treatment for anaphylaxis and use of defibrillators as necessary.

No-one should give first aid treatment for which they have not been trained as this may cause additional injury to the patient.



Fully equipped, hygienically clean first aid boxes are located in specified areas according to local arrangements. They are clearly marked, easily accessible and contain the recommended quantities of sterile dressings.

Local first aid arrangements include eye wash stations where appropriate.

No medication should be administered or dispensed other than the use of EpiPen or as specified in individual care plans. Therefore no painkillers, tablets, ointments, creams or lotions should be kept in first aid boxes.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg347.pdf>

## v. **The Control of Substances Hazardous to Health – COSHH**

### **Purpose of Procedure**

The purpose of this section is to ensure that all products used / stored on site that are relevant to the COSHH Regulations are used and stored safely. It is also necessary to control risks associated with non-commercial, naturally occurring substances such as dust and biological hazards.

### **Procedure**

Hazardous substances are identified by 'Red diamond' safety warning labels, which have now replaced the previous 'Orange Square' labels. Suppliers have a legal duty to supply 'Material Safety Data Sheets' which contain details of the properties of the substance together with first aid measures that are relevant to the substance. (N.B. Data Sheets are not risk assessments!) Data sheets should be kept up to date (guideline three years).

All hazardous substances are the subject of 'Individual substance' COSHH risk assessments. These assessments are intended to minimise exposure to substances and to reduce / control risk.

Risk assessments are based on suppliers' safety data sheets which should be obtained for all hazardous substances. The assessment includes the handling of substances and any PPE (Personal Protective Equipment) that must be worn.

Staff members who are potentially exposed to hazardous substances receive training and information on the health and safety issues relating to the type of work they do and the substances used.

Staff members are made aware of the correct disposal procedures for hazardous substances, how to use spill kits and how to contain any spillage of hazardous materials they may be using.

Hazardous substances must only be stored in correctly marked, appropriately designed containers.

PPE (Personal Protective Equipment) is used as a last resort to control risks relevant to COSHH. All Staff must use PPE as directed.

Step-by-step procedure:

- 1) Safely dispose of all hazardous substances that are not used.
- 2) Ensure safe, secure storage of all remaining 'COSHH' substances and display warning signs.
- 3) Compile an inventory of all 'COSHH' substances used.
- 4) Obtain data sheets (normally via suppliers' websites).
- 5) Consider non-commercial substances e.g. dust, biological hazards, Weils disease
- 6) Prepare individual substance risk assessments.
- 7) Communicate risk assessments to Users.
- 8) Ensure appropriate PPE is used and is kept in good condition.

Where applicable, science departments should adhere to 'CLEAPSS' data and guidance in addition to the above.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg136.pdf>

## **vi. Training and Competence of Staff**

### **Purpose of Procedure**

To ensure that all Staff are appropriately trained and competent.

Health and safety training is an indispensable part of an effective management system. It is essential that all staff are trained to perform tasks effectively and safely. All staff are trained in safe working practices during the induction process, via specific training programmes (e.g. first aid / manual handling / fire safety / risk assessment), prior to being allocated any new role and as a part of their continued professional development.

### **Procedure**

Health and safety training is co-ordinated and supervised by the Duty Holder who will identify training needs in conjunction with the Health and Safety Advisor. Training provision is consequent on these discussions.

All employees are provided with basic induction training, comprising safety issues and other matters specific to their employment.

All staff must apply the contents of training courses and programmes. Failure to do so may result in disciplinary action.

Health & Safety notice boards, positioned in appropriate, strategic staff areas used to support induction training and as a constant reminder of key issues and topics.

The training regime is tracked and coordinated via a 'Staff Training Summary Matrix' held by the relevant Duty Holder. This is comprised within an 'Excel spreadsheet'. Red cells identify training needs and green cells show training has been completed. In anticipation of refresher training falling due, green cells are coded amber. 'Comment boxes' are used to record the date and details of training.

## **vii. The Provision and Use of Work Equipment (PUWER) and Lifting Equipment (LOLER)**

### **Purpose of Procedure**

To ensure that all work equipment on site is safe to use and that it is used safely to prevent injury. All work equipment and plant is deemed to be covered by the Provision and Use of Work Equipment Regulations (PUWER). Lifting equipment is covered by the Lifting Operations and Lifting Equipment Regulations (LOLER). Serious injury can result from the use of equipment unless this procedure is carefully followed. The Collegiate Trust takes reasonable steps to ensure the safety of all staff members who use work equipment / lifting equipment, and others who may be affected by its use.

### **Procedure**

The Principal is primarily responsible for implementing this procedure.

The Collegiate Trust applies a 'Buy Safe / Buy Quiet' policy that ensures the design of all sourced equipment takes account of health and safety considerations including noise, vibration and guarding.

Newly purchased or hired equipment should be visually checked by appropriate personnel before it is used. Where necessary the supplier will be instructed to provide additional training to ensure safe use.

All work equipment owned, procured, hired or used by The Collegiate Trust is subject to a programme of planned, preventative maintenance (PPM).

All work equipment must be used and maintained strictly in accordance with manufacturers' instructions at all times. A copy of the manufacturer's instructions is kept available at all times.

All relevant staff should be provided with sufficient information, instruction and training in order to allow them to use the equipment in a safe and efficient manner. Work equipment must only be used

by trained, authorised personnel. Disciplinary action is likely to result from improper or unauthorised use of work equipment.

A Competency Matrix should be held by Premises staff that ensures all equipment operators are suitably trained and competent.

It is the responsibility of all staff to visually check all items of equipment prior to use and to ensure that it is in a good and safe condition. Any defective tools or equipment must be removed from use and labelled / quarantined until corrective action is taken.

No equipment is to be used without the manufacturer's recommended shields, guards or attachments. No guards may be removed or tampered with. Equipment must not be used for any purpose other than for which it is designed. Particular care must be taken when using mobile equipment, e.g. where gradients may give rise to the risk of overturning. All equipment must be properly and safely stored when not in use.

Approved Personal Protective Equipment (PPE) must be correctly worn when using work equipment and staff may not wear clothing, jewelry or long hair in such a way as to pose a risk to their own or anyone else's safety.

Staff members are not permitted to bring their own electrical appliances into the workplace without the express permission of the Principal. N.B. this includes mobile phone chargers.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg291.pdf>

#### **viii. Personal Protective Equipment - PPE**

##### **Purpose of Procedure**

To ensure the safe and consistent use of PPE.

The Collegiate Trust recognises the duties and obligations established by the Personal Protective Equipment Regulations and will provide staff with personal protective equipment (PPE) where risk assessments identify such a need and where the risk presented by a work activity cannot be adequately controlled by other means.

##### **Procedure**

All Duty Holders / Users are responsible for implementing this procedure, notably premises staff.

PPE is issued (as a last resort) to all staff whose work activity requires them to take additional / appropriate precautions. PPE potentially includes hard hats, protective footwear, protective clothing, high visibility coats or vests, eye protection and suitable gloves. A combination of safe PPE must be used according to the precise nature of the task.

All staff required to use PPE will be provided with adequate information and training regarding its use. PPE must be worn in accordance with the training and instruction received and it must be maintained in good condition. Any loss or defect must be reported immediately to the relevant Duty Holder who will take steps to order replacement equipment.

Personnel appointed to carry out site safety inspections should ensure that suitable PPE is used in accordance with site rules and the contents of this policy.

The Principal ensures that appropriate responsibility is delegated to:

- Carry out an assessment of proposed PPE to determine the requirement for its use.
- Act on the findings of the risk assessment.
- Communicate the findings of the risk assessment to those at risk.
- Re-assess as necessary if substances used or work processes change.
- Ensure that PPE is compatible, well-fitting and effective in reducing risk.
- Provide appropriate storage facilities for PPE.

- Make suitable arrangements for maintaining PPE in good condition.
- Make suitable arrangements for training Users in the safe use of PPE.
- Replace any PPE as necessary and at no cost to staff.

A PPE Register is used to control the issue and use of PPE.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg174.pdf>

## ix. Fire and Emergency

### Purpose of Procedure

Fire is a very significant risk. This safety policy takes account of the need to take all reasonable steps to ensure that the risk of fire is appropriately controlled. It also seeks to control risks of explosion e.g. where equipment is fuelled by petrol and consequently where petrol is stored.

### Procedure

The Collegiate Trust takes steps to comply with the Regulatory Reform (Fire Safety) Order 2005 as necessary, including preparation of a fire Risk Assessments and Emergency Fire Evacuation Procedures. These documents are held by the appropriate Duty Holder.

All reasonable steps are taken to ensure that a Fire Logbook is maintained that comprises a detailed record of the servicing and maintenance of critical fire safety equipment, such as fire extinguishers, fire alarm, emergency lighting etc.

Everyone has a general responsibility for fire safety, for ensuring self-awareness of local fire precautions and emergency evacuation procedures including the location of the fire assembly point and for keeping emergency fire exit routes clear (both internal and external).

All staff members have a duty to conduct their work tasks in such a way as to minimise the risk of fire. This includes keeping hazardous materials separate from sources of ignition, avoiding unnecessary accumulation of combustible materials and smoking only in authorised areas.

Anyone discovering or even suspecting a fire must immediately sound the alarm by activating a Fire Alarm Call Point and if in any doubt simply shout 'Fire'! Any potential fire hazards such as faulty electric cables, congested fire exit routes or poor electrical connections should be reported to the Principal.

Fires should only be fought using a suitable fire extinguisher and only if the User is trained in its use. Those using a fire extinguisher must not put themselves at risk. Extinguishers should always be located on emergency escape routes.

Any 'Hot work' (i.e. work involving a source of ignition or heat) carried out on the premises must be the subject of a signed 'PTW' (Permit To Work).

It is recognised that some pupils, students staff or guests may be disabled or have special needs. Such individuals may require assistance to safely evacuate the premises in an emergency. This will require a PEEP (Personal Emergency Evacuation Plan).

**N.B. Please see SECTION C FOR the detailed 'Fire Safety File' for each Academy site. This contains all relevant fire safety information including:**

- **Fire Risk Assessment**
- **Fire Logbook**
- **Emergency Fire Evacuation Arrangements (including 'PEEPs' as necessary)**
- **Fire duties and responsibilities including Fire Warden appointments and training**

**x. Environment**

**Purpose of Procedure**

To maintain environmental protection and sustainability, to ensure that waste is recycled wherever possible, to ensure that hazardous substances do not contaminate groundwater and to take steps to reduce our carbon footprint as far as possible.

**Procedure**

The Collegiate Trust:

- Maintains awareness of all legislation, regulations and Codes of Practice regarding environmental matters that are relevant to its operations; makes best endeavours to ensure that its personnel are adequately instructed in the requirements of this legislation etc; and takes all other reasonable actions to ensure compliance.
- Takes all reasonable precautions, to avoid environmental damage, disruption or nuisance. We will at all times take steps to keep all areas and any adjoining areas, clean and tidy and to avoid pollution of the air, ground or water by noise, fumes, dust, or the disposal of materials and substances.
- Wherever viable, uses materials and products from sustainable sources and that are re-usable or capable of being recycled.
- Makes every effort to conserve the use of energy and, where viable, collects waste materials for re-cycling.

**xi. Display Screen Equipment**

**Purpose of Procedure**

Staff members that are required to routinely use computer workstations as part of their daily work are subject to The Health and Safety (Display Screen Equipment) Regulations 1992. These regulations establish criteria for the selection, location and use of DSE in the workplace.

Using a computer screen for extended periods can have adverse health effects linked with eyesight and posture. The regulations are designed to offer Users relevant protection.

All reasonable steps are taken by The Collegiate Trust to comply with the regulations and secure the health and safety of staff members who work at computer workstations.

**Procedure**

The Collegiate Trust defines those affected by the regulations as 'Users'. Users are those who use computer workstations for more than 2 hours per working day.

Managers should oversee the DSE (computer) workstation risk assessment process and ensures that all Users are issued with appropriate guidance / training material (via the link below). They will also be subject to a Self-DSE (Display Screen Equipment) risk assessment (using the HSE checklist via the link below). The assessment is reviewed whenever the workstation is substantially modified.

Where necessary (particularly where risk assessment identifies particular risks) the Health & Safety Advisor may be requested to carry out a review with the User concerned to ensure that work stations are safe. He also ensures that all workstations comply with current guidance relating to screens, keyboards, desks, chairs and the work environment.

Any specific problems identified may be referred to an occupational health specialist.

Users are entitled to eye / eyesight tests to ensure their visual acuity is compatible with the requirements of DSE work and the costs of such tests are paid by The Collegiate Trust. If the examination reveals the need for corrective lenses, then The Collegiate Trust will contribute a maximum amount of £100 towards the cost of providing lenses and frames, for display screen work only.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg36.pdf>

**xii. Vibration**

**Purpose of Procedure**

To safeguard staff against the risk of damage to their health due to Hand-Arm Vibration Syndrome (HAVS) and whole body vibration. Such damage can be chronic (harmful in the long term) and irreversible.

Damage can occur when vibration is transmitted from work processes into hands, arms and the whole body while using hand held power tools, hand-guided equipment or holding material being processed by machinery.

If such equipment is frequently used for long periods Hand Arm Vibration can have a permanent effect on health. Occasional exposure is less likely to be hazardous.

HAVS symptoms include tingling and numbness in the fingers, inability to feel things properly, loss of strength in hands and fingers going white and becoming red and painful on recovery. Carpal Tunnel Syndrome, is a related nerve disorder which may involve pain, tingling, numbness and weakness in parts of the hand.

**Procedure**

The most senior member of Premises staff is primarily responsible for implementing this procedure. As such it is his responsibility to identify any relevant tasks / equipment that may be hazardous.

The HSE 'Ready Reckoner' (regarding vibration ratings vs. time exposure) may be used to control the use of all relevant equipment. These guidelines will indicate the amount of time each item of plant can be used by one person in a day to ensure they are not over exposed to vibration.

In order to minimise the risk staff should:

- Limit time spent using equipment that causes vibration, by taking regular breaks and / or carrying out other tasks that do not carry vibration risk.
- Time-share vibration-orientated work with colleagues as appropriate.
- Plan work to accommodate the above.
- Always wear appropriate, padded gloves when using equipment that causes vibration.
- Report immediately any suspected HAVS symptoms such as those stated above.
- Report any unusual movement in machinery to.

In order to minimise risk the following actions should be carried out:

- Carry out risk assessments and act on their findings.
- Use vibration ratings of new and existing equipment to carry out HAVS risk assessments.
- Subject to risk assessment findings, consider the need for medical health surveillance.
- Hold regular toolbox talks / training sessions regarding HAVS risks.
- Source only suitably safe work equipment.
- Maintain service records of all relevant work equipment and carry out routine inspections.
- Provide all necessary PPE to Users.
- Keep records of and act upon any reported ill effects.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg296.pdf>

**xiii. Noise**

**Purpose of procedure**

Prolonged exposure to noise carries the risk of chronic (long term) noise-induced hearing loss and other serious conditions such as tinnitus. It is a legal requirement that staff who are exposed to noise are protected, usually including by the use of ear defenders.

Noise-induced hearing loss is not reversible.

Exposure to a daily or weekly average noise exposure level of 80 dB means the employer must provide information and training and make hearing protection available. 80 dB is comparable with the noise generated by a hedge trimmer, or a hand held electric power drill.

A daily or weekly average noise exposure of 85 dB or above requires the employer to take reasonably practicable measures to reduce noise exposure, such as engineering controls or other technical measures. The use of hearing protection is also mandatory if the noise cannot be controlled by these measures.

Finally there is an exposure limit value of 87 dB, above which no worker can be exposed (taking hearing protection into account).

### **Procedure**

The most senior member of Premises staff is primarily responsible for implementing this procedure.

Where the operating environment generates noise above 80dB all staff will be required to wear suitable ear protection.

In order to minimise the risk steps should be taken to:

- Ensure all powered equipment is serviced regularly and that grinding discs, drill bits etc. are kept sharp.
- Ensure regular breaks from noise generating tasks by carrying out other activities that do not involve noise generation.
- Plan work to accommodate the above.
- Consider the need for medical health surveillance (subject to risk assessment findings).
- Ensure that staff who may be exposed to noise are trained and aware of relevant risks.
- Provide ear defenders free of charge.
- Keep records of and act upon any reported ill effects.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg362.pdf>

#### **xiv. Vulnerable Groups**

##### **Purpose of Procedure**

To maintain the safety of vulnerable people in the workplace including Children, Expectant Mothers, Vulnerable Adults, those with disabilities – including pupils, students or staff members - or anyone with learning difficulties such that may compromise their health or safety.

The Equality Act requires 'Reasonable Adjustments' to be made in the interests of disabled people and to eliminate discrimination.

##### **Procedure**

If a young person, other than a pupil or student, is present – for example – on work experience, an individual risk assessment will be carried out by the Health and Safety Advisor in line with the duties they will be undertaking. Where the person is under the age of 17, this risk assessment must be agreed and signed by the parents/guardian as consent for them to carry out such duties. Manual Handling assessments and training must be given in all cases. No person under the age of 18 is to operate any item of mechanical plant. All young persons must work under the close personal supervision of a Competent Person.

The Collegiate Trust requires that staff members advise the Principal if they become aware of any change in their personal health or welfare, which could result in their being at increased risk. This could include medical conditions such as heart disease or asthma, permanent or temporary disability, taking medication and pregnancy.

A risk assessment in respect of any person who may be considered particularly at risk, (as stated) may be carried out by the Health and Safety Advisor. The results of the assessment will be communicated to relevant parties. In particular the relevant Duty Holder should take steps to ensure that the findings of the risk assessment are implemented.

The Fire risk assessment / accompanying procedures and the Fire Plan include fire risk control measures in respect of any Vulnerable Person.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg364.pdf>  
<http://www.hse.gov.uk/pubns/indg373.pdf>

## **xv. Driving at Work and Use of Vehicles**

### **Purpose of Procedure**

To maintain the safety of people driving 'At work'. Driving a vehicle whilst at work (whether on the public highway or not) is considered to be in 'The workplace', therefore general principles of safety will apply. This does not include commuting (i.e. traveling to and from work), unless the staff member is traveling from their home to a location which is not their usual place of work.

### **Procedure**

Everyone who uses a vehicle during the course of their work must comply with this policy.

Staff members driving vehicles on the public highway whilst at work (whether or not they are the vehicle owner) are responsible for ensuring that the vehicle used is fully legally compliant, appropriately maintained, insured and subject to a valid MOT certificate if applicable.

Where seatbelts are fitted to any vehicle they must be used.

No staff member should drive any vehicle, whether on the public highway unless they hold a valid UK driving license. All endorsements or driving bans must be declared to the COO.

When left unattended all vehicles must be secure and the ignition key must be removed.

Any staff member who undertakes a long journey (in excess of 100 miles), regularly undertakes single journeys in excess of 50 miles, or who drives more than 10,000 miles per year whilst 'At work' should be familiar with and comply with the guidance offered via the link below.

No member of staff should drive a vehicle at work if they are tired. This is particularly important if undertaking long journeys.

All drivers must comply with the Highway Code at all times.

It is the responsibility of the Principal to ensure the safety of work vehicles used within the private boundaries of the premises.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg382.pdf>

## **xvi. Work at Height**

### **Purpose of Procedure**

To maintain the safety of staff members and others when working at height. A place is 'At height' if a person could potentially be injured falling from it even if it is at or below ground level. Serious injuries can and do result from falling from a very low height such as a chair.

The Work at Height Regulations 2005 require that:

- All work at height is properly planned and organised.
- Those involved in work at height are trained and competent.



- The work at height location is safe.
- The risks from falling objects are properly assessed and controlled.

### **Procedure**

In order to minimise the risk of falling, staff members should:

- Act on instructions given and do everything possible to prevent a fall.
- Consider all the risks in advance and ensure they read / understand the risk assessment.
- Avoid working from height if possible. Always look for alternative ways to get the job done.
- Ensure equipment is fit for purpose, i.e. ladders are serviceable, the rungs free from grease, mud etc.
- Take into account working conditions, including weather and basic housekeeping.
- Think about the safety of everyone in the work area, e.g. ensure tools and other objects do not fall onto those below and cause injury.
- Not take risks, such as standing on a table or chair to gain height.
- Never work at height alone, or without telling a colleague who can make regular checks.

In order to minimise the risk, steps should be taken to ensure that:

- All work at height is planned and implemented safely.
- A risk assessment is undertaken prior to commencement of any work at height.
- The risk assessment findings are communicated to those at risk.
- Work is carried out in accordance with the relevant risk assessment / method statement.
- All work is appropriately supervised.
- Access to any unusually hazardous work area (e.g. a roof) is fully controlled and, if appropriate, that the task is the subject of a Permit To Work (PTW) system.
- The correct equipment needed to complete the job is specified and used, e.g. for any longer term work that a tower is used in preference to ladders / stepladders.
- Ladders / stepladders are fit for the task, regularly inspected and replaced as necessary.
- Ladders / stepladders are kept secure when not in use.
- Those working at height are appropriately trained.
- All independent contractors are subject to these safety controls

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg401.pdf>  
<http://www.hse.gov.uk/pubns/indg402.pdf>

## **xvii. Control of Asbestos**

### **Purpose of Procedure**

The purpose of this procedure is to ensure that risks associated with asbestos are fully controlled, in accordance with the Control of Asbestos Regulations 2012.

Regulation 4 covers the duty to manage asbestos in non-domestic premises. It requires Duty Holders to identify the location and condition of asbestos and to manage the risk to prevent harm to anyone who works on the building or to building occupants. It also explains what is required of people who have a duty to cooperate with the main Duty Holder to enable them to comply with the regulations.

Asbestos may not present any undue risk unless it is disturbed, however it becomes extremely hazardous when in dust form as inhalation can have serious chronic health implications.

Asbestos is normally only present in buildings or refurbishments that date from before 2000. It is also commonly found in out-buildings such as for roofing. It may also be kept in long term storage in a wide range of unexpected locations.

Any work or activity that raises risks linked with asbestos must be controlled and risk-assessed.

### **Procedure**

The Collegiate Trust holds appropriate asbestos 'Management' surveys for all schools and the buildings they comprise. The surveys identify the presence / location of any asbestos, asbestos containing materials (ACMs).

By reference to the surveys, steps are taken to prepare relevant, suitable and sufficient risk assessments. These will include reference to the condition of ACMs.

All ACMs are clearly labelled and a plan is available that makes clear the relevant locations.

The survey and the condition of any asbestos should be reviewed regularly. Using the survey, an Asbestos Management Plan should be prepared to allow steps to be taken to minimise risks associated with asbestos or suspected ACMs.

Also, by reference to the survey, steps should be taken to ensure that maintenance / other work does not involve staff or contractors being exposed to asbestos nor that work being undertaken risks disturbing any ACMs.

In the event that any asbestos is identified or suspected that is not appropriately managed, the Principal must be advised immediately and steps taken to isolate and seal the area. No person should enter the area until the local work environment has been verified as safe by a competent person. This is likely to involve referral to a specialist asbestos contractor.

The Principal also takes steps to ensure that any visiting contractor is not exposed to known or suspected ACMs via the sign-in procedure, and by making the findings of the above survey available for inspection.

**Related HSE information:** <http://www.hse.gov.uk/pubns/priced/l143.pdf>

#### **xviii. Drugs & Alcohol**

##### **Purpose of Procedure**

There is a clear link between misuse of drugs or alcohol and reduced safety / efficiency. The purpose of this policy is therefore:

- To ensure that the use of drugs or alcohol by staff does not affect the health and safety of the individuals themselves, their fellow workers or others with whom they come into contact in the course of their work.
- To ensure that the use of drugs or alcohol does not affect the safe and efficient operation of The Trust / Academy.
- To set out rules on drugs, alcohol, and substance abuse.

This policy is does not confer any contractual rights. It is not an employment contract or disciplinary procedure. It applies to all staff members and will be strictly enforced.

##### **Procedure**

The contents of this policy is communicated to all Staff before starting work for The Collegiate Trust.

Trust policy is that the working environment should be free from the influence of drugs or alcohol.

No member of staff shall:

- Report or try to report for work when unfit due to alcohol, drugs or substance abuse.
- Be in possession of alcohol or illegal drugs in the workplace.
- Consume alcohol or illegal drugs or abuse any substance whilst at work.
- Report for duty having recently consumed alcohol or whilst under the influence of drugs.

All Staff members must inform the Principal if any prescribed medication or drugs purchased by them from a pharmacy may for any known reason render them unfit to carry out their normal duties. Should this be

the case the Collegiate Trust will seek medical advice as to the suitability of that person to carry out work tasks.

Any person suspected of having consumed alcohol or drugs may be required to submit to an alcohol and / or drugs test if required by the Collegiate Trust. He / she may also be required to remain on the premises until investigations are completed.

If any member of staff is suspected of being under the influence of alcohol or drugs he/she will be suspended immediately (with pay) and escorted off Academy premises. The disciplinary procedure will then be invoked.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg240.pdf>

## **xix. Lone Working**

### **Purpose of Procedure**

To ensure the safety of staff working alone.

Lone workers are those who work alone for extended periods, either without close supervision or where no other people are present in the same area. There are three fundamental concerns surrounding lone working:

- The risk of assault.
- The risk of the lone worker becoming suddenly and critically ill, possibly as a result of pre-existing condition such as heart disease.
- The risk of an accident which may severely incapacitate the person concerned, who may in turn require immediate medical attention.

Risk is generally elevated when people work alone and any task that is hazardous by its nature such as working at height is automatically accentuated if people work alone.

### **Procedure**

It is Collegiate Trust policy to ensure:

- That lone working only takes place as a last resort, i.e. when it is not reasonably practicable to have more than one person engaged in a particular task.
- That there is a mutual appreciation of the risks of lone working.
- In situations where any work is particularly hazardous, a risk assessment is carried out and that lone working forms part of that risk assessment.
  - That higher risk tasks such as working at height and use of ladders are not undertaken by people working alone.
  - That anyone who has a known, pre-existing medical condition does not work alone at any time, if the condition may raise relevant risk factors.
  - No staff member should go ahead with a job, or to work alone if they consider any aspect of it to be unsafe.
  - That anyone who is lone working does so under a 'Buddy' system. That is to say that a paired member of staff knows they are working alone and takes steps to maintain regular contact.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg73.pdf>

## **xx. Slips Trips & Falls**

### **Purpose of procedure**

Slips trips & falls are very common cause of workplace injuries – accounting for some 30% of accidents. This aspect of safety management requires particular attention to ensure that such occurrences are minimised. Many related accidents and injuries are trivial, but sometimes serious injuries can occur.

## **Procedure**

The Collegiate Trust takes reasonable steps to ensure that the risks of slips, trips and falls are appropriately controlled by paying particular attention to the controls listed below.

All staff members should take steps to ensure that:

- Barriers / cones etc. are deployed to segregate / draw attention to maintenance / cleaning work.
- The deployment of such items do not cause additional trip hazards in their own right.
- Such items are not deployed near doors or in other areas where they may not be easily seen.
- Suitable signage is displayed offering appropriate hazard warning.
- Cleaning tasks are ideally completed at times when footfall is at its minimum / areas are closed.
- Spillages etc. are cleaned up as soon as possible and the area left dry.
- No trace of liquid is left on a floor surface following cleaning that could cause slips.
- Walking surfaces are maintained in good condition.
- Where possible / practical, steps and variations in levels are appropriately / clearly identified.
- Any worn floor coverings such as carpets that may represent trip hazards are reported for repair
- The relevant areas / premises are subject to a hazard checking routine.
- Handrails are appropriately positioned, in good condition and fit for purpose
- Any surfaces made wet due to ingress of rainwater / snow / ice etc. are made safe.
- Any exterior walkways / paths etc. treated with grit in snowy / frozen conditions are treated thoroughly and re- treated as frequently as necessary to keep them clear.
- There are no trailing leads / cables across walkways and that equipment is disconnected from the electrical supply when not in use.

The Premises Team should take particular steps to ensure that:

- Footpaths on the course are maintained in good condition and free of trip hazards
- Access / egress routes to and from the school are in good condition and free of trip hazards

**Related HSE information:** <http://www.hse.gov.uk/slips/>  
<http://www.hse.gov.uk/slips/preventing.htm>

## **xxi. Mental Health & Wellbeing**

### **Purpose of Procedure**

Stress is a psychological state that affects everyone. It is normally associated with negative effects and consequences. It can be a serious condition and is known to inhibit the effectiveness of the body's auto-immune system.

The effects of stress in the workplace include disharmony amongst working colleagues, poor performance, general ill health and a lack of concentration which may in turn lead to accidents.

Symptoms of stress include irritability, depression, lethargy and a range of adverse health conditions.

The Collegiate Trust recognises that workplace stress is a health and safety issue and acknowledges the importance of identifying and reducing stress. It has adopted the Health and Safety Executive's definition of 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.

The aim of this section of our policy is to provide staff with some reassurance with regard to stress management.

### **Procedure**

The Collegiate Trust operates an 'Open door' policy with regard to stress. In practice this means that anyone who is suffering from stress, or who thinks they may be particularly stressed should speak in confidence to the Principal. All such discussions will be given positive, sympathetic and confidential consideration.

During these discussions, and their potential outcomes, The Collegiate Trust will give due consideration to the possible sources of any particular workplace 'Stressors' including the following HSE generated Management Standards:

- The particular demands of relevant work tasks.
- The amount of control that is exercised by the staff member concerned.
- What level of support is given to the staff member, including information, training and resources.
- The nature of relevant relationships amongst staff members and how these can be optimised.
- Individual roles and how job tasks are performed.
- Any changes in roles or job tasks that may need particular attention, or sensitive management.

The Collegiate Trust will refer any stress-related issues to a specialist occupational health advisor for detailed consideration, including whether the source of stress is workplace-related, primarily within the individual's private life, or a combination of these.

The Collegiate Trust will make every effort to resolve stress-related issues as described above and at its sole discretion will consider whether specialist counseling may be required and thus included in a specific strategy to alleviate stress impacting on a member of staff.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg430.pdf> Also: <http://www.shponline.co.uk/wp-content/uploads/2017/01/how-to-manage-and-reduce-stress.pdf>

## **xxii. Control of Contractors**

### **Purpose of Procedure**

To ensure that visiting contractors work safely, that they apply a duty of care for their own safety and that of other who may be affected by their acts or omissions.

While contractors are on site, their health and safety is seen as the responsibility of The Collegiate Trust.

### **Procedure**

Steps are taken to ensure the competence of visiting contractors as follows:

- Before a contractor is appointed to undertake work at any Academy, a questionnaire is issued that seeks to ensure that the company applies appropriate safety precautions – e.g. in respect of training, risk assessments and safety policy. Contractors must also be covered by appropriate insurance. This process and all relevant documentation is reviewed by the Principal who will refer any queries to the Health and Safety Advisor.
- Following approval of the completed questionnaire, the contractor / supplier in question is placed on the Approved Suppliers List. The club will only use contractors and suppliers who appear on this list.
- When Operatives from the relevant contractor visit Collegiate premises to carry out work tasks they must read and sign the statement that appears in the Contractors Log as evidence that they understand – and will apply basic safety precautions during their work tasks.

Every effort will be made to ensure that visiting contractors work safely whilst on site and that they wear appropriate PPE at all times.

It is the responsibility of the Principal to oversee the above process and to refer to the Health and Safety Advisor for any advice.

## **xxiii. Legionella (Legionnaires Disease)**

### **Purpose of Procedure**

Legionella is a bacteria potentially found in all water sources. It can cause serious illness called Legionnaires Disease. The main symptom of this disease is pneumonia. There is a high fatality rate

partly because of the type of persons that are likely to catch it. Pneumonia is a disease caused by bacteria reaching the base of the lungs – to do this the bacteria need to be very, very small and be projected in some way – therefore water droplets, for example generated by a shower, or water vapour, are effective means by which the bacteria can reach the base of the lungs.

Those most likely to catch the disease include those with weakened immune systems. There needs to be a certain amount of bacteria to cause the illness. To grow, the bacteria need warmth.

Warm, stagnant water provides ideal conditions for growth of Legionella. At temperatures between 20°C-50°C the organism can multiply. Temperatures of 32°C-40°C (90°-105°F) are ideal for growth. Rust (iron), scale, and the presence of other microorganisms can also promote growth.

The purpose of this procedure is therefore to ensure that risks associate with Legionella Virus are appropriately controlled.

#### **Procedure**

- Each Academy will engage a competent contractor to carry out a risk assessment and where necessary to lead an effective water monitoring and treatment programme.
- All tanks and pipework are kept clean and free of sludge; chlorination is carried out at regular intervals, showerheads are cleaned and disinfected at monthly intervals.
- Water is stored at a temperature outside the range where the bacteria will grow. (The danger zone is between 20° - 45° Celsius.)
- Water temperatures are measured / recorded (cold water should be below 20°C after running the tap for 2 minutes and hot water should be above 50°C after running the water for 1 minute).
- If temperatures are found to be outside this range investigations / other measures are undertaken and corrective action taken.
- Conditions that allow water to stagnate are avoided. (Large water-storage tanks exposed to sunlight can produce warm conditions favorable to high levels of Legionnaires Disease Bacteria (LDB.) All water lines, particularly those that are not regularly used, are frequently flushed to alleviate stagnation.
- Steps are taken to regularly maintain and clean equipment to prevent growth of LDB. This includes twice-yearly cleaning and periodic use of chlorine or other effective biocide.

It is the responsibility of the Principal to ensure this programme is adhered to.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg458.pdf>  
<http://www.hse.gov.uk/legionnaires/faqs.htm>

#### **xxiv. General Workplace Environment**

##### **Purpose of Procedure**

To ensure the successful implementation of Workplace Regulations, that the workplace is conducive to a positive working environment and that all staff members and others are safe and comfortable during their working day.

The Workplace (Health, Safety and Welfare) Regulations 1992 cover a wide range of basic health, safety and welfare issues and apply to all workplaces.

##### **Procedure**

The Collegiate Trust takes reasonable steps to comply with the above regulations, to ensure that working conditions are fully safe, reasonably spacious, light, and well ventilated. Drinking water and tea / coffee making facilities are available at all times. It also encourages staff to take up any concerns with the Principal.

The regulations are not dealt with in detail within this document, the link below should be used to gain further information.

However the issue of temperature control is often an emotive topic and this is dealt with briefly: The temperature in the working environment should provide reasonable comfort without the need for special clothing. Where such a temperature is impractical because of hot or cold processes or extremes of weather, all reasonable steps are taken to achieve a temperature which is as close as possible to comfortable for example by:

- providing air-cooling plant
- shading windows
- supplying fans

The target temperature should be no lower than 16°C as a minimum.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg244.pdf>

## **xxv. Electrical Safety**

### **Purpose of Procedure**

To ensure that fixed and portable electrical equipment is safe, appropriately maintained, and that the risks of electric shock and fire resulting from electrical sources are reduced as far as reasonably possible via the risk assessment process.

### **Procedure**

Portable electrical equipment is 'Portable Appliance Tested' (PAT) at varying intervals depending on the rigor, intensity, frequency of use. Equipment that is primarily static may be tested less frequently than power tools, extension leads etc. The normal default testing period is annual.

Reasonable steps are taken to ensure that:

- The fixed wiring installation is inspected and tested by a Competent Person at maximum intervals of five years.
- All portable appliances are tested by a Competent Person at default intervals of 12 months.
- All users of portable electrical equipment visually inspect the equipment for safety before using it.
- Electrical intake cupboards and fuse boards are kept completely clear to guard against the risk of fire resulting from a malfunction of that equipment.
- No person is exposed to the risk of electric shock, even if electrical cables are thought to be isolated from the electrical supply.
- Suitably trained First Aiders are available to treat any electric shock victim.
- Electric shock emergency action / treatment notices are displayed on the Health & Safety notice board.
- No personal electrical equipment is used on the premises – including mobile phone chargers – without the express permission of the Principal.

**Related HSE information:** <http://www.hse.gov.uk/pubns/indg231.pdf>

## **xxvi. Personal Security, Violence & Aggression**

### **Purpose of Procedure**

Rare though violent episodes may be, there are occasionally instances where violence or threats of violence occur in the workplace. There is a requirement for The Collegiate Trust to take reasonable steps to ensure the safety of staff members in this respect.

Protecting cash or property is not a safety-related issue. Protecting people who may be vulnerable as a result of associated risk certainly is.

## **Procedure**

The Collegiate Trust takes responsibility for ensuring that staff members are protected from violence or attack, notably when alone, when handling or banking cash or when securing the premises late at night.

Risk assessments are carried out in respect of any process that implies a raised risk of violence or attack. Such risk assessments should take account of any risk that may be raised due to lone working (see above).

Staff members are instructed that in the event of robbery (e.g. when transporting cash to bank), that they should not place themselves at risk, and should comply with instructions given by the offender.

Staff members should not intervene, or be drawn into in any dispute that shows signs of escalating into a violent episode.

Any situation that could lead to violence or threats of violence should be referred to the Principal immediately.

## **xxvii. Kitchen Safety and Food Hygiene**

### **Purpose of Procedure**

Failure to comply with food hygiene and food safety requirements can result in serious illness. In addition, failure to apply strict disciplines in the kitchen can result in serious injury.

There are three key aspects to kitchen safety and food hygiene; the need to control:

- The risk of microbiological contamination resulting from poor hygiene standards, cross-contamination, incorrectly cooked food, incorrectly stored food etc.
- The risk of food being consumed by someone who suffers from food allergies
- General kitchen hazards such as slips, trips, falls, scalds, burns, fire, cuts etc.

### **Procedure**

This policy makes no distinction as to whether kitchen staff are employed directly by the Collegiate Trust, or whether the catering function is outsourced to a contracting organisation.

The Operations Director takes steps to ensure that:

- The FSA's 'Safer Food Better Business' scheme is in place and maintained, brought to the attention of all staff, adhered to and periodically reviewed.
- Temperatures are monitored in accordance with the 'Safer Food Better Business' scheme and that appropriate records are maintained.
- Food is appropriately date labelled in accordance with the 'Safer Food Better Business' scheme and that appropriate records are maintained.
- Requirements regarding food allergies are complied with and accompanying information is sourced / made available to food consumers.
- A risk assessment in respect of all kitchen tasks and activities is maintained, brought to the attention of all staff, adhered to and periodically reviewed.
- Food handlers are appropriately trained (including induction training) and that relevant records in evidence of this are maintained.
- Assessments of food suppliers are carried out and periodically reviewed in order to ensure that food of a high standard and acceptable quality is sourced.
- Appropriate signage (containing required pictograms) is displayed and maintained in the kitchen.
- A system of written checks is developed and maintained.
- Stringent standards of cleaning and hygiene are maintained at all times.
- Kitchen staff are fully aware of the above controls, the reasons for them and the need for them to be maintained at all times.
- Appropriate COSHH (Control of Substances Hazardous to Health) controls are maintained and legally compliant.



- Appropriate fire safety controls are maintained and legally compliant.

#### **xxviii. Communication, Consultation and Leadership**

##### **Purpose of Procedure**

The Collegiate Trust sees communication and consultation between staff at all levels as an essential part of effective health and safety management. The reason for this is to allow essential information to be conveyed and exchanged, staff questions on health and safety issues to be addressed by senior management, staff suggestions to be considered and also to provide an opportunity to assess the continuing effectiveness of this policy.

Leadership is also a vital ingredient of a robust Safety Management System and the Principal clearly play a key role in ensuring that all staff take their health & safety related duties seriously. The building of a strong and positive health and safety 'Culture' is also an important objective. All key staff have duties in this respect.

##### **Procedure**

Safety meetings include the following '10 Element' agenda items:

- Review of key aspect of this policy and ensure all HODs are familiar with its contents
- Review of Emergency Procedures.
- Review of risk assessments: effective / communicated etc.
- Review of contractor controls
- Review of written checks and audits
- Review of training and competence (including the delivery of key training seminars)
- Review of health & safety culture
- Review of document management, communications & staff / management concerns
- Review of any 'Near-misses' / incidents / accidents and corrective action taken
- Review of the safe use of work equipment and safe maintenance of premises.

All staff members are expected to co-operate with The Collegiate Trust and those with safety responsibilities, also to accept their duties under this policy.

It is the responsibility of all managers to make the necessary arrangements to ensure that all staff members are aware of health and safety arrangements that pertain in their respective departments.

#### **xxix. Ionising Radiation**

##### **Purpose of Procedure**

Exposure to radiation can cause significant health problems. The Collegiate Trust take all reasonable steps to comply with the Ionising Radiation Regulations and associated Approved Code of Practice. Steps are taken to ensure that exposure to ionising radiation is kept as low as reasonably practicable.

##### **Procedure**

The Collegiate Trust where required have appointed a Radiation Protection Adviser and notified the Health and Safety Executive accordingly. It is his / her duty to take reasonable steps to:

- Ensure compliance with the above regulations
- Ensure relevant staff are suitably trained and competent
- Plan tasks ahead to minimize time spent handling radioactivity
- Distance people appropriately from sources of radiation
- Use appropriate shielding for the type of radiation
- Contain and secure radioactive materials within defined work areas
- Ensure appropriate protective clothing and dosimeters are worn
- Monitor the work area frequently for contamination
- Ensure local rules and safe ways of working are followed
- Minimise accumulation of waste and dispose of it by appropriate routes
- Monitor relevant staff ensure washing takes place after completion of work and monitor again.

**Related HSE information:** <http://www.hse.gov.uk/pUbns/priced/l121.pdf>

**xxx. Pressure Systems and Gas Containers**

**Purpose of Procedure**

Pressure systems and gas containers pose a particular risk since, by definition, they are designed to hold gas and air under pressure. It is primarily the pressure aspect that is hazardous.

**Procedure**

There are potentially a number of small pressure systems on various premises. Each school should keep a register of the type and serial number and provide a copy to the Chief Operating Officer.

This type of equipment includes autoclaves, pressure cookers, air brush and other types of compressors, gas cylinders and regulators, and any other equipment which works under pressure.

Safe operating limits should be established for all such equipment.

Operating and emergency instructions must be provided to those who work with such equipment.

Regular planned preventative maintenance should be undertaken by a competent person and suitable and records kept.

All redundant equipment must be discarded in the correct manner.

All pressure systems are inspected and tested annually by a competent person. This is an insurance requirement. This should be undertaken in accordance with a 'Written scheme of examination'.

Maintenance and testing of boilers and calorifiers are similarly undertaken by a 'Competent Person' each year. Appropriate records are maintained.

**xxxi. Monitoring and Review of the Policy and Arrangements**

**Purpose of Procedure**

There is a legal requirement for The Collegiate Trust to maintain a safety policy including a statement of intent and associated *Arrangements* as above. It should seek to be an accurate reflection of the circumstances that pertain, thus it is seen as a live document and as such it requires regular review / updating for a number of reasons including changes in legislation, accidents, 'Near misses', staff feedback, current working practices and changes in personnel.

**Procedure**

The COO in conjunction with the *Health and Safety Adviser* take steps to ensure that the policy and associated arrangements are reviewed annually.

As part of the review, the COO meets with the *Health and Safety Adviser*, to review health and safety performance, current working practices, and any new legislation that may affect the operations of The Collegiate Trust.

No other member of staff should make changes to Sections A or B of this Policy. However, Sections C and D should contain academy specific arrangements as noted.

Any suggested changes / edits to Sections A or B should be e-mailed to the COO for consideration. In this way all academies in The Collegiate Trust may benefit from the resulting potential improvements.

Upon completion of the review (and any accompanying audit) the consequent revisions will be passed onto staff.

This policy document is reviewed at annual intervals. To assist this process, a draft policy is in constant preparation at all times in order to capture adjustments that are seen as important, on an ongoing basis.

**Section C      Academy-Specific Fire and Evacuation Plans**

**Section D      Other Academy-Specific Arrangements**

## Appendix A

### COVID-19 (Coronavirus)

#### Purpose of Procedure / Arrangement

The risks relevant to 'Covid' are well known, well documented and frequently publicised. The purpose of this Procedure / Arrangement is to take steps to ensure that control measures are implemented and observed by staff and visitors as far as can reasonably be expected. Government rules and guidelines may be expected to change frequently depending on the characteristics of the virus, including its degree of transmissibility, its threat level, and general high-level medical advice to all. Accordingly the measures adopted by the Trust are also likely to change dynamically on an ongoing basis.

#### Procedure / Arrangement

**Principals** will take steps to:

Maintain an acute awareness of government rules, guidelines, advice and best practice insofar as these are published periodically. Consequently we will make all reasonable efforts to implement and maintain control measures appropriate to the business and the safety of all present including staff, visitors and contractors. From time to time this is likely to include a strategic mix of the following:

- Requiring that individuals participate in testing regimes
- Requiring that individuals wear suitable face masks
- Requiring that individuals maintain social distancing
- Requiring that staff apply high standards of personal hygiene and cleanliness
- Displaying guidance signage, comprising pictograms as necessary
- Installing transparent screens where to do so would be practical & beneficial
- Providing hand sanitiser at critical points
- Applying a rigorous cleaning regime
- Installing external food, beverage and general facilities where to do so is practical and beneficial
- Maintaining particular cognisance of the needs of staff members who may be of increased clinical vulnerability by virtue of a known, underlying health condition (and risk assess accordingly).
- Limiting the type and extent of hospitality functions and events as may from time to time be required or deemed appropriate
- Limiting hospitality table occupancy as may from time to time be required or deemed appropriate
- Where possible/practical meetings are held via Zoom or Teams.
- In general meetings and activities are held in well ventilated or external spaces.

