

| Policy Focus                  | Health & Safety Policy |
|-------------------------------|------------------------|
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| Designated Governor           | June Palmer            |
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## **Important Information**

# **The Medical Tuition Service Torbay Health & Safety Contacts**

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| Health & Safety Monitoring Governor | June Palmer  |
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### Preface - Our Intentions & Values

MTS is a place where self-development, awareness and well-being are at the core of what we do. Without these elements sitting at the forefront of our provision, long term academic achievement would not be an option for our young people as a result of their medical needs. The safety and wellness of our students is our greatest priority and nurture and removing barriers is central to our environment as a result.

We are a supportive stepping-stone for young people currently unable to attend mainstream or suitable alternative as a result of medical need, and our offer is one that facilitates them in successful future transitions and integration. Those transitions might be a return to mainstream, settling in at a suitable alternative, a move to Further Education, entry into the world of work, or a reestablishment of place in family or society.

## **Beyond Learning**

- We recognise and value the potential in all of our students and only model 'can-do' attitudes.
- We strive to develop the whole learner, beyond just their academic achievement.
- Caring for and preparing our young people to lead and maintain healthy lifestyles and attitudes is at the forefront of what we do.
- We go beyond learning, in order for all of our students to become confident with their place in the world of education; work; society; family; community and beyond - through a rigorous and bespoke learning and reintegration programme.
- We welcome our learners into MTS with a carefully designed and supportive curriculum that will enable their academic achievement now, whilst simultaneously facilitating our young people in developing the life skills they will need to become independent, well rounded, happy, healthy and successful individuals in the future.

At MTS we aim to create a collaborative working ethos which engenders the following:

- Celebration and Humour → we feel good about ourselves
- Collegiality → we are working together towards a common purpose → the success of our setting
- Continuous Improvement → we can get better; we will get better
- Lifelong Learning → learning is for everyone
- Mutual Respect → everyone has something to offer
- Openness → we can discuss our differences with mutual respect
- Responsibility for Success → we must succeed; we will succeed
- Risk Taking → we learn by trying something new we must model that for our students
- Shared Goals → we know where we are going and why
- Support → there is always someone there to help



#### **CONTENTS**

Section One - Statement of Intent

Section Two - Organisation

## Section Three - Arrangements

- 1. Reporting an Incident or Near Miss
- 2. First Aid
- 3. Fire
- 4. Other Emergency Procedures
- 5. Risk Assessments
- 6. Asbestos
- 7. Contractors
- 8. Legionella
- 9. Control of Substances Hazardous to Health
- 10. Premises & Work Equipment
- 11. Working at Height
- 12. Display Screen Equipment
- 13. Manual Handling
- 14. Food Safety
- 15. Personal Safety & Lone Working
- 16. Stress & Wellbeing
- 17. Vehicles
- 18. Smoking
- 19. Drugs/alcohol
- 20. Health & Safety Monitoring Arrangements
- 21. Health & Safety Information & Training

### **Related Policies & Documents**

## **Appendices**

- 1. Incident Categories
- 2. Recommended absence period for preventing the spread of infection
- 3. Equality Impact Assessment



#### Section One - Statement of Intent

MTS will strive to achieve the highest standards of health, safety and welfare consistent with their responsibilities under the Health & Safety at Work Act 1974 and other statutory and common law duties.

This statement sets out MTS' organisation and arrangements for dealing with different areas of risk. How these areas of risk will be addressed is detailed in Section 3 – Arrangements.

This policy will be brought to the attention of and issued to all members of staff and a reference copy kept in MTS Site Control Log, and on the Medical Tuition Service website. This policy statement and the accompanying organisation and arrangements will be reviewed on an annual basis.

To assist in meeting our legal requirements and our general duties outlined in the Health and Safety general policy, this Health and Safety Statement of Intent has been prepared as outlined below which identifies our approach to ensuring an effective and efficient approach to Health and Safety.

- 1. It is our firm intention to enforce appropriate measures to control and monitor Health and Safety procedures as a vital part of running Torbay Education Ltd trading as MTS as an efficient and successful operation,
- 2. Therefore, as far as is reasonably practicable, Torbay Education Ltd trading as MTS:
  - a. Ensures that as far as reasonably practicable equipment and working practices are safe and offer no hazard or risk to Health and Safety;
  - b. Ensures that all necessary precautions are taken in respect of the safe use, handling, storage and transport of materials and substances;
  - c. Provides such information, instruction, training and supervision as is necessary to ensure Health and Safety at work of all employees;
  - d. Maintains all places of work, work equipment and transport under its control in a safe condition, free from risk to Health and Safety as far as is reasonably practicable;
  - e. Provides adequate facilities for the welfare of employees;
  - f. As far as reasonably practicable safeguards the Health and Safety of students, visitors, contractors and of any members of the general public who could be affected by its activities;
  - g. Provides all necessary information relating to Health and Safety in respect of procedures and services and, where necessary, consults with employees;
  - h. Reviews and updates the policy as and when necessary, particularly in respect of major changes within Torbay Education Ltd trading as MTS and/or changes in legislation and brings these changes to the attention of all employees;
  - Ensures that all employees are mindful of their Health and Safety responsibilities and co-operate with Torbay Education Ltd trading as MTS in their efforts to fulfil the above policy;
  - Ensures the policy is monitored at the workplace.



### Section Two - Organisation

### **Local Governing Bodies**

The Directors of Torbay Education Limited are responsible for ensuring Health & Safety management systems are in place at MTS and effective.

The Directors will receive regular reports from the Local Governing Body in order to enable them to provide and MTS commission the TDA. They receive relevant information, monitors the implementation of policies and procedures in co-operation with the Principal and provides feedback on Health & Safety issues and identified actions to MTS and the Local Governing Body.

The Directors' nominated Health & Safety representative is the COE at Torbay Council, Anne-Marie Bond

The Health & Safety monitoring Governor is named on the cover page of this policy.

### **Chair of Governors (CoG)**

The CoG has responsibility for:

- Co-operating with the Directors to enable Health & Safety Policy and procedures to be implemented and complied with
- Reporting to the Directors on Health & Safety performance and any safety concerns or issues which may need to be addressed by the allocation of funds
- Ensuring consultation arrangements are in place for staff and their trade union representatives (where appointed) and recognising the right of trade unions in the workplace to require a Health & Safety committee to be set up
- Monitoring purchasing and contracting procedures to ensure Health & Safety is included in specifications and contract conditions

#### **Principal**

Overall responsibility for the day-to-day management of Health & Safety in MTS lies with the Principal including:

- So far as is reasonably practicable ensure effective arrangements are in place to pro-actively manage
   Health & Safety, by conducting and reviewing inspections and risk assessments and implementing required actions
- So far as is reasonably practicable (ALARP) communicating the policy and other appropriate Health & Safety information to all relevant people, including contractors
- So far as is reasonably practicable (ALARP) ensure that the premises and equipment are maintained in a safe and serviceable condition
- So far as is reasonably practicable (ALARP) ensuring all staff are competent to carry out their roles and are provided with adequate information, instruction, and training
- Monitoring local purchasing and contracting procedures to ensure Health & Safety is included in specifications and contract conditions
- Take appropriate action on health, safety and welfare issues referred to them



Ensure that all incidents and near miss events are promptly reported and investigated

### **Site Manager**

The Site Manager is employed through the TDA Facilities Management contract. They will:

- Apply the MTS Health & Safety policy to their area of work
- Ensure staff members under their control are aware of and follow relevant published Health & Safety guidance and safe working procedures
- Ensure Health & Safety risk assessments are undertaken for the activities for which they are responsible and that identified control measures are implemented
- Carry out regular inspections of their areas of responsibility and report and record these inspections.
- Regularly report on these areas of responsibility to the Principal

## All employees and volunteers

Under the Health & Safety at Work Act 1974, all employees have general Health & Safety responsibilities. All employees are obliged to take care of their own Health & Safety whilst at work, along with that of others who may be affected by their actions.

All employees have responsibility to:

- Take reasonable care for the Health and Safety of themselves and others in undertaking their work
- Comply with the Health & Safety Policy and procedures at all times
- Report all incidents and near miss events in line with the Incident & Near Miss Reporting Procedure
- Co-operate with MTS management on all matters relating to Health & Safety
- Not to intentionally interfere with or misuse any equipment or fittings provided in the interests of health,
   safety and welfare
- Report all defects in condition of premises or equipment and any Health & Safety concerns immediately to Principal/Site Manager/Health & Safety Co-ordinator
- Ensure they only use equipment or machinery they are competent and have been trained to use
- Make use of all necessary control measures and personal protective equipment provided for safety or health reasons

The Corporate Health & Safety Officer at Torbay Council is commissioned to assist MTS with the provision of competent Health & Safety advice, auditing of compliance with Health & Safety regulations and guidance and monitoring incidents and near miss events.

#### **Section Three – Arrangements**

#### 1. Incident and Near Miss Reporting

Incidents and near misses arising out of or in connection with the work of MTS must be reported. This includes incidents involving workers, students, visitors, contractors on site and members of the public affected by the activities and undertakings of MTS.



## 1.1 Definitions:

| Incidents that arise out of or are in connection to the work of Medical  Tuition Service e.g.  A failure in the way a work activity was organised e.g. inadequate         |
|---|
| <ul> <li>A failure in the way a work activity was organised e.g. inadequate</li> </ul>  |
| supervision, inadequate risk assessment, non-compliance with safety procedure   |
| <ul> <li>The way equipment or substances were used e.g. sports equipment, art<br/>materials, ladders</li> </ul>   |
| <ul> <li>The condition of the premises e.g. poorly maintained floor coverings,<br/>poor lighting of stairs</li> </ul>   |
| Harm caused by the behaviour of setting users or members of the public while staff are at work.   |
| Unplanned, unexpected events arising out of or in connection with work affecting employees, students, members of the public, contractors, visitors, volunteers.           |
| Occurrences that arise out of or in connection with work, where harm was very nearly caused e.g.  |
| <ul> <li>Behaviour towards staff member with clear intention to harm but did<br/>not</li> </ul>   |
| Slip on wet floor but no injury   |
| <ul> <li>Failure of equipment or furniture that could have caused an injury if in<br/>use at the time</li> </ul>  |
| Incidents of verbal or physical abuse, threats and/or harassment where no physical injury was sustained but had a negative impact on emotional health.                    |
| Any health condition caused, or made worse, by The MTS work environment e.g.  |
| <ul> <li>Musculoskeletal disorders</li> </ul>   |
| Contact dermatitis  |
| <ul> <li>Any disease attributed to an occupational exposure to a biological agent</li> </ul>  |
| <ul> <li>Occurrence of disease cases in excess of normal expectancy that is likely<br/>to impact on welfare of staff and setting users and business continuity</li> </ul> |
| Something that could cause harm that requires remedial action to make safe  |
|   |



#### 1.2 Incident with physical injury

All employee and volunteer incidents with physical injury, no matter how minor, must be recorded on the same day in the Accident Book and onto the Incident & Injury Log. The report will be completed, where possible, by the staff member who has experienced the incident or a staff member who witnessed it. The Principal will be informed of all staff and volunteer injuries and ensure an investigation is carried out with corrective actions and lessons learned recorded onto the Incident & Injury Log for sharing with MTS and the TDA.

All incidents of students and other non-employees (members of public/visitors to site etc.) injured while at MTS must also be recorded on the same day onto the Incident & Injury Log by the injured person or a staff member who witnessed the incident or provided first aid.

More significant incidents, as detailed below, must also be reported to the TDA and Principal within 24 hours by completing the Incident & Near Miss Reporting Form and submitting to the TDA.

- Major injuries
- Incidents where significant first aid treatment has been provided
- Incidents which result in the injured person being taken from the scene of the accident directly to hospital
- Injuries arising from premises / equipment defects
- Incidents of physical injury, abuse, ill health or near miss that may attract media interest (including social media) or reputational damage

Any major incident must be reported to the RIDDOR without delay by phone call or email. See Appendix 2 for reporting categories.

## 1.3 Reportable ill health

Ill health caused by work related factors are reported to the TDA using the Incident & Near Miss Reporting Forms within Evotix Assure.

#### 1.4 Reporting to the Health & Safety Executive (HSE)

Incidents involving a fatality or major injury will be reported by the Torbay Corporate H & S Officer immediately to the Health & Safety Executive (HSE). All incidents reportable under RIDDOR - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 must be reported to the Torbay Council H&S without delay. The Health & Safety Team will complete the online HSE report within laid down timescales being immediate in the case of fatality and for accidents resulting in over seven days incapacitation of a worker, you must notify the enforcing authority within 15 days of the incident. Reportable incidents include:

- A student or other non-employee being taken directly to hospital for treatment due to a work-related incident
- An employee being taken directly to hospital for treatment required due to a work-related incident
- Employee absence or inability to carry out their normal duties as the result of a work-related incident, for periods of 7 days or more (including weekends and holidays)
- Specified injuries to workers including, but not limited to,



- 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) which:
  - covers more than 10% of the body
  - causes significant damage to the eyes, respiratory system or other vital organs
- 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
  - requires resuscitation or admittance to hospital for more than 24 hours

To see the full list of reportable injuries, see <a href="http://www.hse.gov.uk/riddor/reportable-incidents.htm">http://www.hse.gov.uk/riddor/reportable-incidents.htm</a>

## 1.5 Abuse (no physical injury) incidents

- Abuse incidents should also be recorded in the Incident & Injury Log
- Incidents relating to the behaviour of a student must also be recorded on a Behaviour Incident Form on CPOMs
- If the incident has resulted in an injury, the procedure for reporting an Incident with Injury must be followed

### 1.6 Near Miss events

Near Miss events must be logged onto the Incident & Injury Log and marked as a Near Miss. Actions taken to reduce risk of injury must be recorded and shared with MTS staff team. Learning from Near Miss events is to be shared with the TDA through the Evotix Assure system.

### 1.7 Reporting Hazards

Hazards are reported in the Evotix Assure system, along with updates on when the remedial action has been carried out (including date and signature). The Principal is responsible for ensuring hazards identified are acted upon, escalating to the Governors and TDA if required.

#### 2. FIRST AID

### 2.1 First aid provision

MTS has assessed the need for first aid provision to provide first aid on site and, where required, for trips/visits and extra-curricular activities. This assessment is recorded and stored in the Site Control Log.



First aid qualifications remain valid for 3 years. The Principal will ensure that refresher training is organised, to maintain competence. The Principal will ensure that sufficient trained First Aiders are available to cover absences and when a current First Aider leaves employment.

Posters are displayed to inform students, staff and visitors of the location of First Aid kits and First Aiders. First Aiders are responsible for termly checks on First Aid kits to ensure stock is replenished as necessary through use and expiry dates.

### 2.2 Transport to hospital

Where a first aider considers it necessary the injured person will be sent directly to hospital (normally by ambulance). Parents / carers will be notified immediately of all major injuries to students.

No casualty will be allowed to travel to hospital unaccompanied and an accompanying adult will be designated in situations where the parents/carers cannot be contacted in time.

Any student taken directly to hospital and requiring treatment as a result of a work-related incident is reportable under RIDDOR (see above section).

#### 2.3 Medication

Medication is stored and administered in accordance with The MTS Medical Conditions Policy.

#### 3. FIRE

MTS recognises its responsibility for ensuring, so far as is reasonably practicable, the health, safety and welfare of all who may be affected by our work. In accordance with the Regulatory Reform (Fire Safety) Order 2005 (RRFSO) a 'responsible person' is appointed to ensure all relevant requirements of the RRFSO are implemented and maintained.

#### 3.1 Definitions

| Responsible person | The responsible person at MTS is the Principal.  |
|--------------------|--|
| Competent Person   | A trained Fire Safety and Fire Safety Systems specialist with independent registration with, or certification from, a professional or certification body with sufficient professional indemnity insurance and public liability insurance. Details of reputable Fire Safety companies are available from the TDA. |



| Fire Warden | A staff member designated to take responsibility for checking fire hazards, emergency procedures and escape routes. |
|-------------|---|
|             |   |

The Principal is responsible for ensuring the MTS fire risk assessment is undertaken and implemented. A Fire Risk Assessment will be carried out by a competent person every 3 years, unless a change in layout or use of the building, fire or change in any other circumstances warrants an earlier re-assessment. The fire risk assessment will be reviewed annually.

The fire risk assessment is located in the Site Control Log and will be reviewed on an annual basis by a competent individual and the Principal. The Fire Risk Assessment will be included in the TDA reporting process. Training for Fire Wardens, Site Managers and Principals is available from TDA and external fire safety specialist companies.

### 3.2 Emergency Procedures

- Fire and emergency evacuation procedures are displayed in around each individual setting. These procedures
  will be reviewed at least annually and are made available to all staff as part of MTS' induction process.
   Evacuation procedures are also made available to all contractors/visitors
- Emergency exits, fire alarm call points, assembly points are clearly identified by safety signs and notices
- Emergency exits and fire evacuation routes will be kept clear of obstructions
- Emergency contact and key holder details are maintained by the Principal/Site Manager and held in the
   Emergency Plan

## 3.3 Personal Emergency Evacuation Plans (PEEP)

Any staff member or student who requires assistance during an evacuation must have a PEEP detailing the assistance they require and how this need will be met. If assigning an evacuation buddy, cover for any staff absence must be considered. The PEEP must be reviewed termly with the teacher or line manager and Fire Wardens

## 3.3 Fire Drills

- Fire drills will be undertaken termly and results recorded in the Site Control Log
- Fire Wardens will wear high visibility jackets during all evacuation procedures

## 3.5 Fire Fighting

- Ensure the alarm is raised BEFORE attempting to tackle a fire
- The safe evacuation of all children, visitors and staff is an absolute priority



Staff may only attempt to deal with small fires, if it is safe to do so without putting themselves or others at risk, using portable firefighting equipment. Staff members are to be aware of the type and location of portable firefighting equipment and receive basic instruction in its correct use

## 3.6 Details of service isolation points (i.e. gas, water, electricity)

These are highlighted on the drawings displayed in the vicinity of the Fire Alarm Panel in reception

#### 3.7 Details of chemicals and flammable substances on site

An inventory is held in the Site Control Log held in the admin office and a copy held in the site manager's office.

### 3.8 Inspection and maintenance of emergency equipment

The Principal is responsible for ensuring that the Site Control Log is kept up to date and that the following inspections and maintenance are undertaken and recorded in the log located in the admin office.

## 3.9 Fire Alarm System

Fire alarm call points will be tested **weekly** in rotation. Any defects on the system will be reported immediately to the alarm contractor/electrical engineer.

#### 3.10 Fire Extinguishers and Fire Blankets

Weekly in-house checks are conducted by a competent person to ensure that all firefighting equipment is in the correct position, easily accessible and clear of obstruction, correctly charged and operational, and showing no signs of tampering.

Contractors undertake an annual maintenance service of all firefighting equipment. Defective equipment or extinguishers that need recharging should be taken out of service and reported directly to Principal/Site Manager for replacements.

### 3.11 Emergency Lighting Systems

Emergency lighting will be checked by the Site Manager **each month**. Annually, the contractor will conduct a full discharge test and certification of the system.



### 3.12 Means of Escape

The Site Manager/Fire Wardens will carry out **daily checks** for any obstructions on exit routes, and will ensure all exit doors are operational and available for use.

### 3.13 Good Housekeeping

All passageways, stairwells and storage areas must remain clean, tidy, and cleared from any obstructions. At no time should any items be stored in the vicinity of heat-producing equipment. Routine inspections of internal and external areas will be conducted by the Site Manager/Fire Wardens. However, it is important that the whole staff take a proactive approach to good housekeeping, to promote a safe and healthy working environment.

#### 4. OTHER EMERGENCY PROCEDURES

MTS Emergency and Business Continuity Plan details procedures for emergency evacuations in the event of flood, explosion (or risk of explosion), chemical exposure risk or other emergency in the vicinity of The Setting that creates a risk of harm to staff and students.

The MTS Emergency Plan also includes a procedure for lock down.

The Emergency Plan is shared with all staff during induction and reviewed annually.

The Principal is responsible for the Emergency Plan.

Procedures are shared and practised in an age-appropriate way with students on a frequency cycle to ensure all students are informed and confident in knowing what to do in the case of an emergency.

#### 5. RISK ASSESSMENTS

### 5.1 General Risk Assessments

MTS conducts and documents risk assessments for all activities presenting a significant risk. A competent person should conduct the risk assessment with the assistance of staff members.

All Risk Assessments are approved by the Principal.

Risk assessments are available for all staff to view and are held on a Evotix Assure and in the Site Control Log.

Risk assessments will be reviewed on an annual basis or when the work activity changes. Staff will be made aware of any changes to risk assessments relating to their work. A sample of risk assessments will be reviewed during each annual internal Health & Safety audit.

#### 5.2 Curriculum Activities



Risk assessments for curriculum activities will be carried out by teachers using the relevant codes of practice and model risk assessments detailed below.

Whenever a new course is adopted or developed, all activities are checked against these and any significant findings are incorporated into lesson plans and schemes in daily use.

- Be Safe! Health & Safety in primary science and technology
- National Society for Education in Art & Design (NSEAD):
  - o <a href="http://www.nsead.org/hsg/index.aspx">http://www.nsead.org/hsg/index.aspx</a>
- Safe Practice in Physical Education and School Sport: <a href="http://www.afpe.org.uk/">http://www.afpe.org.uk/</a>

All risk assessments are logged onto Evotix Assure with review dates.

Evotix Assure is monitored and audited by the TDA.

#### 5.3 Individual Risk Assessments

Specific assessments relating to staff member(s) or student(s) are held on the individual's file and will be undertaken by a relevant line manager or teacher. Such risk assessments will be reviewed on a regular basis.

It is the responsibility of all staff to inform their line manager of any medical conditions (including pregnancy) that may impact upon their work. A frequently reviewed risk assessment is required for pregnant staff members written and reviewed between the staff member and her line manager.

### 6. ASBESTOS

There are no known sources of asbestos within the MTS buildings.

Any damage to materials known or suspected to contain asbestos should be reported to the Principal and TDA Facilities Team.

### 7. CONTRACTORS

All contractors used by MTS shall ensure compliance with relevant Health & Safety legislation, guidance and good practice. They must hold up to date Liability Insurance, suitable qualifications, and provide an up-to-date DBS certificate for every operative who will be on site.

All contractors must report to reception, where they will be asked to sign the visitor's book and wear an identification badge. Contractors will be issued with guidance on fire procedures, local management arrangements and vehicle movement restrictions. The Principal/Site Manager is responsible for monitoring areas where the contractor's work may directly affect staff and students, and for keeping records of all contractor work.



Contractors will be asked to provide risk assessments and method statements specific to the site and works to be undertaken. MTS, contractor(s) and any subcontractor(s) involved will agree the risk assessment and safe systems of work to be used prior to works commencing on site.

#### 8. LEGIONELLA

MTS complies with advice on the potential risks from Legionella as identified in the HSE ACOP L8.

A water risk assessment of The Setting is carried out every two years. The Principal is responsible for ensuring that the identified operational controls are being conducted and recorded in the Site Control Log.

The risk assessment should be reviewed by a competent person where significant changes have occurred to the water system. Advice and guidance on completion of operational controls is available from the TDA. Details of competent specialists can be provided by TDA Facilities Team.

## 9. Control of Substances Hazardous to Health (COSHH)

Every attempt will be made to avoid, or choose the least harmful of, substances which fall under the "Control of Substances Hazardous to Health Regulations 2002" (COSHH Regulations).

For curriculum resources, teachers are responsible for COSHH and ensuring that an up-to-date inventory and risk assessments are undertaken in line with model risk assessments contained in the relevant national publications are in place. (CLEAPSS, Association for Science Education's "Topics in Safety" etc.)

In all other areas, The Principal/Site Manager are responsible for substances hazardous to health.

#### They shall ensure:

- An inventory of all hazardous substances used on site is compiled and regularly reviewed
- Material safety data sheets are obtained from the relevant supplier for all such materials
- Where required, COSHH risk assessments are conducted and that these assessments are seen and understood by all affected staff
- All chemicals are appropriately and securely stored out of the reach of children or vulnerable adults
- All chemicals are kept in their original packaging and labelled (no decanting into unmarked containers)
- Suitable personal protective equipment (PPE) has been identified and is readily available for use. PPE will
  be provided free of charge where the need is identified as part of the risk assessment
- The Principal/Site Manager is responsible for ensuring that COSHH assessments are available from contractors (this applies to both regular contracts such as cleaners and caterers and from builders, decorators, flooring specialists, etc.)



#### **10.PREMISES AND WORK EQUIPMENT**

### 10.1 Statutory inspections

Regular inspection and testing of MTS equipment is conducted to legislative requirements by competent contractors. Records of such monitoring will be kept in the relevant section of the Site Control Log by the Site Manager/Administrator.

The Site Manager/Administrator is responsible for identifying all equipment in an equipment register and ensuring that any training or instruction needs, or personal protective equipment requirements are identified. The Site Manager will ensure that the relevant risk assessments are conducted where required.

Equipment restricted to those users who are authorised or have received specific training is detailed in the register and labelled accordingly.

All staff are required to report any problems found with equipment to the Site Manager/Administrator. Defective equipment will be clearly marked and taken out of service by storing in a secure location, pending repair or disposal.

#### 10.2 Curriculum Areas

All members of staff are responsible for ensuring maintenance requirements for equipment in their areas are identified, implemented and recorded in the Site Control Log.

#### 10.3 Electrical Safety

All staff will conduct a visual inspection of plugs, cables and electrical equipment prior to use. Defective equipment shall immediately be taken out of service and be reported to Site Manager/Administrator. All portable items of electrical equipment will be subject to formal inspection and testing (Portable Appliance Testing (PAT)) on an annual cycle carried out by the Site Manager.

The Site Manager/Administrator is responsible for keeping an up-to-date inventory of all relevant electrical appliances and for ensuring that all equipment is available for testing.

A fixed electrical installation test (fixed wire test) will be conducted by qualified contractors on a 5-year cycle. The Electrical Installation Condition Report (EICR) will be kept in the Site Control Log and a copy will be retained by TDA acting for the landlord.

## 10.4 External play equipment



Any external play equipment will only be used when appropriately supervised. This equipment will be checked **daily** before use by a competent person inspecting for any apparent defects, a formal inspection and testing regime has been established with a competent specialised company.

#### 11.WORK AT HEIGHT

Working at height can present a significant risk. Where such activities cannot be avoided, a risk assessment will be conducted to ensure such risks are adequately controlled. A copy of this assessment will be provided to employees authorised to work at height.

When working at height, (including accessing storage or putting up displays) appropriate step ladders or kick stools are to be used. Staff must not climb onto chairs etc.

Only those persons who have been trained to use ladders safely may use them.

Basic instruction is provided to all staff that use ladders / stepladders and is available from: <a href="http://www.hse.gov.uk/pubns/indg405.pdf">http://www.hse.gov.uk/pubns/indg405.pdf</a>

Formal training on work at height, use of ladders, mobile tower scaffolds etc. will be provided where a significant risk is identified as part of an individual's role.

MTS' nominated person(s) responsible for work at height are the Principal and Site Manager

The nominated person(s) shall ensure:

- all work at height is properly planned and organised;
- the use of access equipment is restricted to authorised users;
- all those involved in work at height are trained and competent to do so;
- the risks from working at height are assessed and appropriate equipment selected;
- a register of access equipment is maintained and all equipment is regularly inspected and maintained;
- any risks from fragile surfaces are appropriately controlled

### 12. DISPLAY SCREEN EQUIPMENT (DSE)

All staff who use computers daily, as a significant part of their normal work

(significant is taken to be continuous / near continuous spells of an hour or more at a time)

e.g. admin / office staff will undertake a DSE self-assessment (<a href="http://www.hse.gov.uk/pubns/ck1.pdf">http://www.hse.gov.uk/pubns/ck1.pdf</a>). This to be conducted via Torbay Council Health & Safety Portal <a href="https://www.hse.gov.uk/pubns/ck1.pdf">Assure - Portal (sheassure.net)</a>



The self-assessment must be discussed with the staff member's line manager and any issues requiring further assessment or guidance on remedial action can be referred to the TDA.

MTS staff considered DSE users are entitled to an eye test (costs will be reimbursed up to a maximum of £25). Payment for any further tests, as recommended by an optician, will also be considered if related to visual difficulties which may reasonably be considered to be caused by their DSE work. Should any staff member require glasses for DSE work (as denoted by an Optician), MTS will reimburse the first £49.95 towards the expenses of glasses, frames etc. Claims must be submitted via the expenses system and authorised by a line manager.

#### 13. MANUAL HANDLING

Risk assessments for manual handling operations are undertaken and staff are provided with information on safe moving and handling techniques. Advice and training are given during CPD sessions.

Staff should ensure they are not lifting heavy items and equipment unless they have received training and/or equipment in order to do so safely.

All manual handling activities which present a significant risk to the health and safety of staff will be reported to the Principal/Site Manager. Where such activities cannot be avoided, a risk assessment will be conducted to ensure such risks are adequately controlled. A copy of this assessment will be provided to employees who must follow the instruction given when carrying out the task and a copy will be kept in the Site Control Log.

All staff who move and handle students have received appropriate training. All moving and handling of students has been risk assessed and recorded by a competent member of staff.

#### 14. FOOD SAFETY

Only authorised staff are allowed access to the kitchen area. All staff involved with teaching cookery or serving food will be expected to have gained Level 2 Food Safety Certificate as a minimum and work in accordance with that training and the risk assessment for food preparation held in the Site Control Log and listed on the Risk Assessment Register.

All portable and fixed electrical equipment will be tested and maintained in accordance with Electrical safety requirements (see Premises and Work Equipment section of this policy). Gas appliances are similarly tested and maintained annually with certificates held in the Site Control Log.

### 15. PERSONAL SAFETY / LONE WORKING

Risk to staff safety from violence and aggression is assessed and recorded. Staff are provided with training on behaviour management, including de-escalation techniques and positive handling to prevent harm.

Any incidents of harm caused by violence and aggression are reported as described in the Incident & Near Miss Reporting section of this policy. MTS will work in partnership with the police where inappropriate behaviour/



individual conduct compromise the setting's aims in providing an environment in which the students and staff feel safe.

Any lone working, including home visits must be risk assessed drawing on information known about the individual student/family/environment. The Principal is responsible for ensuring a lone working procedure is in place and reviewed regularly. The lone working procedure includes:

- A requirement for an electronic calendar to be kept up to date to allow instant access to a lone worker's whereabouts
- A procedure for 'tagging out and in' when working in the community so it is known when a lone worker has finished working and is safe
- A procedure for raising the alarm and an escalation plan

The TDA can advise on lone working risk assessments and procedures.

#### 16. STRESS AND WELLBEING

MTS is committed to promoting high levels of health and well-being, and recognises the importance of identifying and reducing workplace stress. A risk assessment, carried out in line with the HSE management standards, is undertaken by The Principal and reviewed at least annually.

An external counselling service is available for all staff members. The details of this are displayed on the staff notice board and promoted in supervision and team meetings.

Further advice and information are available from the Torbay HR Team.

#### 17. VEHICLES

#### 17.1 Vehicle Access

Vehicle access to MTS premises is restricted and risk assessed to ensure pedestrian safety. Access is kept clear at all times for emergency vehicles.

#### 17.2 Use of vehicles

Staff using their own vehicles for work purposes (not including travel to and from work) must hold a valid licence, business use insurance and MOT (where required). Details of drivers and compliance with these requirements must be held by MTS and checked annually.

If using a vehicle to transport large or bulky loads, the manual handling section of this policy applies and alternative methods should be explored.



#### 18. SMOKING

#### 18.1 Staff

MTS operates a non-smoking policy. There are no internal spaces/offices designated for use by smokers, including for vaping. Arrangements for staff to smoke away from the premises must be agreed with their line manager. The place designated will be out of public view and should not result in cigarette ends being left by doors, etc. (please note that the law imposes a fine for this).

The number of informal breaks taken for smoking should not exceed those taken by non-smokers, e.g. to make a drink, and should not be taken in contact time. Staff must never be seen to condone smoking by young people e.g. by smoking with them.

All staff and volunteers will be advised of this procedure during their induction and will always be expected to comply with it.

#### 18.2 Students

Young people under and over the age of 18 will not be allowed to smoke on MTS premises, or those of education or work experience providers.

The curriculum for all young people includes health education about the risks of smoking and staff should actively encourage young people who smoke to reduce or eliminate their smoking.

All young people will be advised of this procedure during their induction onto their project.

### 19. DRUGS/ALCOHOL

Where a member of staff has evidence or suspects or that a learner is under the influence of drugs and/or alcohol, the learner should be informed that they are not allowed to participate in that day's activities as soon as a visual risk assessment has taken place, they should be asked to go home. Where a learner is of compulsory school age, the parent/carer must be informed that the learner is not allowed to stay on the project that day due to concerns that their child may be under the influence of drugs and/or alcohol. This should be recorded as a fixed term exclusion.

Further information is available for staff and students on the procedures for dealing with incidents of drugs and alcohol brought onto MTS premises and any student appearing to be under the influence of drugs or alcohol.

Any student believed to have been under the influence of drugs or alcohol should be made known to the DSL and appropriate support offered.



#### 20. HEALTH & SAFETY MONITORING ARRANGEMENTS

An annual general Health & Safety inspection will be conducted by the Torbay Council H & S Team and a Report detailing any remedial actions required (corrective actions) will be submitted to the Principal.

Copies of regulatory checks (Fire, Legionella, Electric, Gas etc.) will be submitted to the TDA for review at each reassessment. Risk assessments and safe working procedures will be reviewed as part of the audit.

Risk and Compliance reports will be compiled and circulated via TechForge with the aim of monitoring compliance and sharing lessons learned. Risk & Compliance reports are shared with the CoG and Principal on a monthly basis.

#### 21. HEALTH & SAFETY INFORMATION AND TRAINING

#### 21.1 Consultation

The nominated Local Authority Member for Health and Safety is Giles Watson.

Directors meet termly to discuss health, safety and welfare issues affecting staff, students and visitors. Action points from meetings are brought forward for review by MTS' Principal and Local Governing Body.

#### 21.2 Communication of Information

The Health & Safety Law poster is displayed in the staff room. Details of First Aiders, Fire Wardens, the Health & Safety Representative and the allocated TDA Health & Safety Manager are also displayed including contact details.

### 21.3 Health & Safety Training

All employees will be provided with:

- Induction training in the requirements of this policy
- Update training in response to any significant change and refresher training where required
- Training in specific skills needed for certain activities, (e.g. use of hazardous substances, work at height etc.)

Training records are maintained to evidence completion. The Principal is responsible for assessing the effectiveness of training received.

Each member of staff is also responsible for drawing their line manager's attention to their own personal needs for training, and for not undertaking duties unless they are confident that they have the necessary competence.



Training and information is available from the TDA. The team is also able to provide advice on how to meet training needs relevant to Health & Safety matters from external specialist companies, where required.

Specific training is available for Principals, Line Managers and Health & Safety Representatives.

#### **RELATED POLICIES & DOCUMENTS**

This policy links to the following policies and procedures:

- Medical Conditions Policy
- Home Tuition and Lone Worker Policy

#### **APPENDICIES**

- Appendix 1 Incident Reporting Categories
- Appendix 2 Recommended absence period for preventing the spread of infection
- Appendix 3 Equality Impact Assessment

Version control record from June 2022.

| Version Number | Date of Change | Reviewed by | Brief reason for changes   |
|----------------|----------------|-------------|--|
| 1.6            | June 2022      | V Banks     | Policy Updated   |
| 1.7            | October 2022   | V Banks     | Wording changed<br>School to setting /<br>MTS  |
| 1.8            | September 2023 | V Banks     | Policy review and update re staff changes  |
| 1.9            | September 2023 | V Banks     | Policy review and update with guidance from Torbay H & S Team.  Policy amended as fire risk assessment to be carried out |



|  | every 3 years and<br>reviewed annually<br>inline with advice<br>from Torbay H&S<br>Manager |
|--|--|
|  |  |

## Appendix 1

## **Torbay Council Incident Reporting Categories**

• These lists are to provide guidance on the incident severity categories used when reporting incidents and near miss events. The lists are not exhaustive. For further guidance please contact the TDA.

| Incident category | Description   |
|-------------------|---|
| Major             | Fatality, life threating injuries, heightened threat assessment – violence/blackmail/terrorism, fire resulting in full evacuation of MTS premises and attendance of fire service, possible liability of the Torbay Education Limited, likely to attract negative media attention or adversely affect reputation.  |
| Medium            | Serious but non-life threatening injury or illness requiring hospital treatment, multiple minor injuries sustained during one activity, fire causing minor damage to property but made safe without attendance of emergency services, near miss that could have led to death or life-threating injury, work-related incident resulting in staff being off work for more than 7 consecutive days, intimidation/verbal abuse of staff resulting in ongoing support or time off work, violence/aggression towards staff causing an injury. |
| Minor             | Work related incidents (injury, health, wellbeing) not considered major or medium severity, abandonment of any activity due to safety concerns, near miss that could have led to non-life threatening injury  |

Appendix 2 - 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 the UK Health Security Agency. For each of these infections or complaints, there <u>is further information in the guidance on the symptoms, how it spreads and some 'dos and don'ts' to follow that you can check.</u>





In confirmed cases of infectious disease, including COVID-19, we will follow the recommended self-isolation period based on government guidance.

| 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.  |
| Respiratory infections including coronavirus (COVID-19) | Children and young people should not attend if they have a high temperature and are unwell.  Anyone with a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.   |
| 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 a factsheet to send to parents or carers and staff.  |
|---|---|
| Slapped cheek syndrome,<br>Parvovirus B19, Fifth's<br>disease | None (not infectious by the time the rash has developed).   |
| Bacillary Dysentery<br>(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)                   | 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.  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 adviser or environmental health officer will advise.  If a child has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea. |
| 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/<br>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. |



### **Appendix 3**

### **Equality Impact Assessment**

The TDA is committed to always: avoiding the potential for unlawful discrimination, harassment and victimisation; advancing equality of opportunity between people who share a protected characteristic and those who do not; and, foster good relations between people who share a protected characteristic and those who do not.

An Equality Impact Assessment (EIA) is a tool for identifying whether or not strategies, projects, services, guidance, practices or policies have an adverse or positive impact on a particular group of people or equality group. While currently only public bodies are legally required to complete EIA's, the TDA has adopted the process in line with its commitment to continually improve our equality performance.

### 1. Summary

| This EIA is for:        | The MTS Health & Safety Policy                                 |
|-------------------------|--|
| EIA completed by:       | Dan Hamer, Head of Vulnerable Pupils, Torbay Education Limited |
| Date of assessment:     | 13/10/2023   |
| Assessment approved by: | Jelle Lever  |

## Objectives and intended outcomes

This EIA has been completed in order to ensure that the implications and potential impact, positive and negative, of the TDA Health & Safety policy for all staff have been fully considered and addressed, whether or not the staff members share a protected characteristic.

## 2. Potential Impacts, positive and negative

| Equality Area | Positive | Neutral | Negative | Summary   |
|---------------|----------|---------|----------|---|
| Age           |          |         |          | The policy applies equally to all members of staff regardless of age. It's not considered that the policy includes any guidance or rules that may impact either positively or negatively on any member of staff because of their age. |





| Disability                                  |   | The policy applies equally to all members of staff regardless of health/disability. It's not considered that the policy includes any guidance or rules that may impact either positively or negatively on any member of staff because of their disability.             |
|---|---|--|
| Pregnancy & Maternity/paternity             | × | It's not considered that the policy positive or negatively impacts on pregnant women or on staff on maternity or paternity leave.  |
| Race (incl. origin, colour and nationality) | X | The policy applies equally to all members of staff regardless of their race, origin, colour or nationality. It's not considered that the policy includes any guidance or rules that may impact either positively or negatively in these respects.                      |
| Gender and Gender<br>Re-assignment          |   | The policy applies equally to all members of staff regardless of their gender at any given time. It's not considered that the policy includes any guidance or rules that may impact either positively or negatively on any member of staff because of gender.          |
| Sexual Orientation                          |   | The policy applies equally to all members of staff regardless of their sexual orientation. It's not considered that the policy includes any guidance or rules that may impact either positively or negatively on any member of staff because their sexual orientation. |

# 3. Negative impacts and mitigations

| Nega | tive Impact | Mitigation | Owner |
|------|-------------|------------|-------|
|      |             |            |       |