



Policy & Procedure Health and Safety

(Quality Standard 5, 7, 9) Regulation 10, 12)

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Health and Safety Policy

1. Introduction

The purpose of this policy is to further our aim to provide a secure safe, healthy and stimulating environment for all young people, staff and visitors to the home. Parents/carers need to know that every measure will be taken to keep the young people safe. We believe that the prevention of accidents and hazards is a key responsibility for every member of the home community.

All staff, young people and managers have been encouraged to contribute to this policy. The policy has been modelled on the Health and Safety Policy published by 'The Key for School Leaders'. The content has also been influenced by guidance from the DfE and the Health and Safety executive

This policy should be read in conjunction with all other policies and the Clovelly House 'Guidance for Staff'.

2. Aims

This is the statement of general policy and arrangements for Clovelly house, a residential home for young people. We are committed to ensuring that Clovelly House is a safe place to live and work. We have processes in place to:

- > Provide and maintain a safe and healthy environment
- > Prevent accidents and cases of work-related ill-health by managing the health and safety risks in the workplace
- > Establish and maintain safe working procedures amongst staff, children and all visitors to the home site
- > Ensure that there are robust systems and procedures for undertaking Health and Safety checks
- > Provide clear instructions and information and adequate training to ensure that employees are competent to do their work
- > Engage and consult with employees and residents in the home on day-to-day health and safety conditions
- > Have robust procedures in place in case of emergencies such as fire or other significant incident
- > Ensure that the premises and equipment are maintained safely, and are regularly inspected.

3. Legislation

This policy is based on advice from the Department for Education on <u>health and safety in homes</u> and the following legislation:

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



- ➤ The Regulatory Reform (Fire Safety) Order 2005, which requires employers to take general fire precautions to ensure the safety of their staff
- > The Work at Height Regulations 2005, which requires employers to protect their staff from falls from height

The home follows <u>national guidance published by Public Health England</u> when responding to infection control issues.

4. Roles and responsibilities

4.1 The Principal has ultimate responsibility for health and safety matters in the home, but will delegate day-to-day responsibility to Health and Safety Officer.

The Principal has overall responsibility for health, safety and well-being in the organisation and for ensuring that all health and safety procedures are followed. The Principal is Jennifer Collighan and she is supported by the home manager who takes the lead for Health and safety management in the home and the Deputy Home Manager who takes the lead for Health and Safety in the home. The Principal has a duty to take reasonable steps to ensure that staff and children contractors and visitors are not exposed to risks to their health and safety. This applies to activities on or off the home premises.

All staff members are trained in Health and Safety and work together to support the manager. The Principal, as the employer, also has a duty to:

- Assess the risks to staff and others affected by home activities in order to identify and introduce the health and safety measures necessary to manage those risks
- > Ensure all members of staff understand and fulfil their responsibilities to ensure a safe learning environment
- > Ensure that staff are aware of their responsibilities and receive appropriate supervision, instruction and training
- Ensure that staff, young people and others are encouraged to promote health and safety
- > Ensure that risk assessments are carried out for activities on and off the home site
- > Ensure that LA and DfE guidance is followed for all home trips and visits
- > Ensure that all defects and/or hazards are made safe in a timescale commensurate with the risk they pose
- Ensure that specialist advice is sought as and when necessary
- Inform employees about risks and the measures in place to manage them

4.2 Home Manager

The Home Manager is responsible for health and safety day-to-day. This involves:

- > Implementing the health and safety policy
- > promoting high standards of health and safety within the home
- > assigning responsibilities, including designating a co-ordinator for health and safety
- > establishing a forum for discussing health and safety issues in the home
- > ensuring that there are risk assessment procedures in place to identify all risks relating to the premises, home activities and home-sponsored activities
- providing appropriate resources from the home's delegated budget to ensure that risks and hazards are minimised or eliminated
- > ensuring that all staff receive supervision, instruction and training appropriate to their duties and responsibilities
- > evaluating the measures taken to minimise or eliminate risks and hazards



- > ensuring that there is designated space for medical treatment and for caring for sick or injured children during the home day
- > ensuring that the hirers are aware of their duty to arrange insurance cover for their activities take a reasonable step to ensure that the principal person in charge of hirers, contractors and others makes sure they conduct themselves and carry out their operation in such a manner that all statutory and advisory safety requirements are met at all times. (When the premises or facilities are being used out of normal home hours for all activities, then, for the purposes of this policy, the organiser of that activity, even if an employee, will be treated as a hirer and expected to comply with the requirements of the policy.)
- > Ensuring there is enough staff to safely supervise children
- > Ensuring that the home building and premises are safe and regularly inspected
- > Reporting to the Senior Leadership Team on health and safety matters
- > Ensuring appropriate evacuation procedures are in place and regular fire drills are held
- > Ensuring that in their absence, health and safety responsibilities are delegated to another member of staff
- > Ensuring all risk assessments are completed and reviewed
- > Monitoring cleaning contracts, and ensuring cleaners are appropriately trained and have access to personal protective equipment, where necessary
- > reviewing this policy and updating at least annually

In the Home Manager's absence, the Deputy Home Manager assumes the above day-to-day health and safety responsibilities.

4.3 Health and safety lead

The nominated health and safety lead is Rebecca Paddock.

4.4 Staff

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

Staff will:

- > Take reasonable care of their own health and safety and that of others who may be affected by what they do at work
- > be familiar with the health and safety policy and all safety regulations laid down by the Principal
- > undertake regular updated training on Health and Safety
- > take reasonable care of their own health and safety and that of others who may be affected by their actions
- > make regular safety inspections of their areas of work and report to their line manager any danger to health and safety, whether serious and immediate or not
- > only use equipment that they are competent to use
- > follow instructions when using any machinery, equipment, dangerous substance of safety device
- > take an active interest in promoting health and safety and suggest ways of reducing risks
- > all young people and visitors to the home will be expected to take reasonable care for their own health and safety and that of others who may be affected by their actions
- Co-operate with the home on health and safety matters
- > Work in accordance with training and instructions



- Inform the appropriate person of any work situation representing a serious and immediate danger so that remedial action can be taken
- > Model safe and hygienic practice for children
- > Understand emergency evacuation procedures and feel confident in implementing them

4.5 Children and parents

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

4.6 Contractors

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

5. Risk Assessments

Risk assessments are in place to assess the risk of the site, the home, the children and staff, visitors and other H&S concerns. Staff can access all risk assessments, hardcopies are stored in a file in the office, electronic copies are stored in a shared drive which all employees can access. All risk assessments are reviewed at least annually. General risk assessments for the premises are carried out by the home staff, overseen by the home manager. Risk assessments for individual young people are carried out by the key workers.

6. Communication

Employees

A Health and Safety Law Poster is displayed in the staff office. Health and Safety is a standard agenda item at team meetings during all staff members engage and consult on Health and Safety conditions. All staff members are aware that Health and Safety is a shared responsibility and that staff have a duty to report any concern to the manager and record them as an action in the Maintenance Book.

Young people

Children and young people receive information in a way that is suited to their needs, age and identity. Information for children and young people is accessible to them terms of being both understandable and available to them.

All young people are given a 'Young Person's Guide' when they first arrive at Clovelly House which gives an explanation of the House Rules and the expectations for behaviour. There is a weekly young person's meeting during which young people are encouraged to discuss any concerns they may have, in addition, they are reminded that they can report any issues at any time.

7. Emergency Procedures

Clovelly House has a contingency plan should the building be unsafe after fire/flood etc. which is updated annually. Clovelly House also has evacuation procedures which all staff are required to sign. All staff members are required to have fire safety training. All children and young people are made aware of fire evacuation procedures when they arrive at Clovelly House and they are made aware of emergency escape routes. Monthly planned evacuations, (fire drills), are carried out involving the young people and the staff. These take place at varying times to ensure that staff and young people are confident and know what to do in case of emergency. The fire alarm is inspected and maintained by a contractor regularly and alarms are tested weekly.

8. Maintaining a Safe Place of Work

Monitoring checks are constantly done on the premises. This includes assessment related to Fire, Legionella and asbestos. Gas safety inspections and electrical testing, (both fixed installation and portable appliances),



are also undertaken regularly to comply with statutory guidelines. A record of these checks is kept in the main staff office.

The maintenance person has a maintenance book which details minor repair needed in the home, they all carry out thorough working environment risk assessments throughout the home every six months to identify any potential risks. All major repairs are conducted by professional tradesmen.

9. Arrangements for First Aid

All staff members are trained in First Aid at work and receive refresher training every three years. First aid kits are stored in the main office, in the vehicle and in the home.

10. Food safety

All staff members are trained to level 2 'Food Safety'. Daily checks are made to record the fridge temperatures and food is checked daily to see if it is within date.

11. Road Safety

Children and young people at Clovelly House may be transported to activities, visits and meetings by care and teaching staff. Staff members transporting young people will have a valid driving licence and will use a vehicle which is roadworthy. Vehicles will have valid insurance and breakdown cover and carry a mobile phone and first aid kit.

Young people who cycle will be expected to pass their cycling proficiency test. All young people will be taught road safety.

12. Site security

Barry Armson and the Health and Safety Officer are responsible for the security of the home site in and out of home hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems. This is supported by the care staff in the home.

Senior Care Practitioners are key holders and will respond to an emergency.

13. Fire

Emergency exits, assembly points and assembly point instructions are clearly identified by safety signs and notices. Fire risk assessment of the premises will be reviewed regularly.

Emergency evacuations are practiced at least once a term.

The smoke alarm is a loud alarm sound

Fire alarm testing will take place once a week.

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

In the event of a fire:

- > The alarm will be raised immediately by whoever discovers the fire and emergency services contacted. Evacuation procedures will also begin immediately
- > Fire extinguishers may be used by staff only, and only then if staff are trained in how to operate them and are confident they can use them without putting themselves or others at risk
- > Staff and children will congregate at the assembly points. These are on the grass verge at the front of the property.
- > The home will take a register of all staff
- > Staff and children will remain outside the building until the emergency services say it is safe to re-enter



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

A fire safety checklist can be found in the 'Fire Safety Logs.

14. COSHH

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

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

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

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

Hazardous products used for cleaning will be stored in a locked cupboard in the back storeroom. Hazardous products used for science lessons will be kept in a locked cupboard in the office at Enderby.

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

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

14.1 Gas safety

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

14.2 Legionella

- A water risk assessment has been completed on March 2020 by 365 Direct Co. The Health and Safety Officer is responsible for ensuring that the identified operational controls are conducted and recorded in the home's water log book
- > This risk assessment will be reviewed every term, and when significant changes have occurred to the water system and/or building footprint
- > The risks from legionella are mitigated by the following: temperature checks, heating of water, disinfection of showers and undergoing legionella treatment of all standing water. tablet [insert examples of controls or checks that are in place e.g. temperature checks, heating of water, disinfection of showers, etc.]

14.3 Asbestos

> Staff are briefed on the hazards of asbestos, the location of any asbestos in the home and the action to take if they suspect they have disturbed it



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

15. Equipment

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

15.1 Electrical equipment

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

15.2 Outdoor equipment

- > Children are taught how to carry out and set up PE equipment safely and efficiently. Staff check that equipment is set up safely
- > Any concerns about the condition of the gym floor or other apparatus will be reported to the Health and Safety Officer.

15.3 Display screen equipment

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

15.4 Specialist equipment



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

16. Lone working

Lone working may include:

- > Late working
- > Home or site visits
- > Weekend working
- Site manager duties
- Site cleaning duties
- > Working in a single occupancy office

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

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

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

17. Working at height

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

In addition:

- The Maintenance Officer retains ladders for working at height
- > Children are prohibited from using ladders
- > Staff will wear appropriate footwear and clothing when using ladders
- Contractors are expected to provide their own ladders for working at height
- > Before using a ladder, staff are expected to conduct a visual inspection to ensure its safety
- Access to high levels, such as roofs, is only permitted by trained persons

18. Manual handling

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

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

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

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

Cook

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19. Off-site visits

When taking children off the home premises, we will ensure that:

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

20. Lettings

This policy applies to lettings. It is unlikely that lettings will apply to the home. However, those who hire any aspect of the home site or any facilities will be made aware of the content of the home's health and safety policy, and will have responsibility for complying with it.

21. Violence at work

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

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

22. Smoking

Smoking is not permitted anywhere on the home premises.

23. Infection prevention and control

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

23.1 Handwashing

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

23.2 Coughing and sneezing

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

23.3 Personal protective equipment

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

23.4 Cleaning of the environment

- > Clean the environment frequently and thoroughly
- > Clean the environment, including resources and equipment, frequently and thoroughly

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23.5 Cleaning of blood and body fluid spillages

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

23.6 Laundry

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

23.7 Clinical waste

- > Always segregate domestic and clinical waste, in accordance with local policy
- > Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in footoperated bins
- Remove clinical waste with a registered waste contractor
- Remove all clinical waste bags when they are two-thirds full and store in a dedicated, secure area while awaiting collection

23.8 Animals

- > Wash hands before and after handling any animals
- > Keep animals' living quarters clean and away from food areas
- > Dispose of animal waste regularly, and keep litter boxes away from children
- > Supervise children when playing with animals
- > Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a pet
- In the case of a 'bird flu' epidemic, the chickens will be housed in a closed pen with no access to wild birds, and cleansing procedures will be in place for all staff and children caring for the chickens.

23.9 Children vulnerable to infection

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

23.10 Exclusion periods for infectious diseases

The home will follow recommended exclusion periods outlined by Public Health England, summarised in appendix 4.

Coops

Clovelly House Policy

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

24. New and expectant mothers

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

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

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

25. Occupational stress

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

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

The home places a high level of importance on Wellbeing and is applying for the Homes Wellbeing award. The home works therapeutically with children and staff members benefit from high levels of care and nurture.

26. Accident reporting

26.1 Accident record book

All accidents are recorded in an accident book in the staff office. These are reviewed by a member of the management team. The completed hardcopy books and documents are stored securely in the office. Any incidents which involve employees being injured in the workplace are reported to RIDDOR.

- An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. An accident form template can be found in appendix 2
- As much detail as possible will be supplied when reporting an accident
- Information about injuries will also be kept in the pupil's educational record
- > Records held in the first aid and accident book will be retained by the home for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

26.2 Reporting to the Health and Safety Executive

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

The Principal will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- > Death
- > Specified injuries. These are:
 - Fractures, other than to fingers, thumbs and toes

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

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

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

26.3 Notifying parents

The Family Liaison Officer will inform parents of any accident or injury sustained by a pupil in the home and any first aid treatment given, on the same day, or as soon as reasonably practicable.

26.4 Reporting child protection agencies

The Principal will notify social services of any serious accident or injury to, or the death of, a pupil in the home while in the home's care.

26.5 Reporting to Ofsted

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

27. Training

Our staff are provided with health and safety training as part of their induction process, and then ongoing14

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

28. Links with other policies

This health and safety policy links to the following policies:

Cooks

Clovelly House Policy

- > First aid
- > Risk assessment
- > Supporting children with medical conditions
- > Accessibility plan
- Safeguarding
- > Pastoral Care Policy
- > Policy on administration of medicines
- > Supporting Children with Medical Needs'
- > Bullying Policy
- > Smoking Policy
- > Keeping Children Safe in Education: statutory guidance for Homes and Colleges, DfE Sep 2020
- > Fire Risk Assessments
- > Guidance for Staff
- > Clovelly House Training Matrix and Records
- > Children's Homes: Quality Standards 2015

29. Monitoring

The Health and Safety Officer will report on a termly basis to the Senior Management team on Health and Safety matters as well as reporting as needs arise. The report will address hazards and risks that were identified during home and out of home hours and the steps taken to minimise or eliminate them. The managers will evaluate those outcomes and will consider whether any further action should be recommended. This policy will be reviewed by the Principal every year.

At every review, the policy will be approved by the Principal and the Senior Leadership Team.

Date established:
Date for full implementation:
Date for review:
Proprietor's approval:
Date: