

# Health and safety policy



Document control box	
Report title	Health and Safety Policy
Report owner	Kim Anderson, Head of Centre
Red Balloon Worthing approving body	Red Balloon Worthing Governing Body
Written/updated	January 2026
Date of review	January 2027

# Contents

1. Aims .....	2
2. Legislation.....	3
3. Roles and responsibilities .....	3
4. Site security .....	5
5. Fire.....	5
6. COSHH .....	5
7. Equipment.....	7
8. Lone working .....	8
9. Working at height.....	8
10. Manual handling .....	8
11. Off-site visits .....	9
12. Lettings .....	9
13. Violence at work .....	9
14. Smoking.....	9
15. Infection prevention and control .....	9
16. New and expectant mothers .....	12
17. Occupational stress .....	12
18. Accident reporting.....	12
19. Training.....	14
20. Monitoring .....	14
21. Links with other policies.....	14
Appendix 1. Fire safety checklist .....	15

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## 1. Aims

Red Balloon Worthing aims to:

- Provide and maintain a safe and healthy environment

- Establish and maintain safe working procedures amongst staff, learners and all visitors to the Centre site
- Have robust procedures in place in case of emergencies
- Ensure that the premises and equipment are maintained safely, and are regularly inspected

## 2. Legislation

This policy is based on advice from the Department for Education (DfE) on [health and safety in Centres](#), guidance from the Health and Safety Executive (HSE) on [incident reporting in Centres](#), 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 visitors on your premises
- [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 (HSE) 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 require employers to protect their staff from falls from height

The Centre follows [national guidance published by UK Health Security Agency \(formerly Public Health England\)](#) and government guidance on [living with COVID-19](#) when responding to infection control issues.

## 3. Roles and responsibilities

### 3.1 The Governing board

The governing board has ultimate responsibility for health and safety matters in the Centre but will delegate day-to-day responsibility to the Head of Centre.

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

The governing body also has a duty to:

- Assess the risks to staff and others affected by Centre activities in order to identify and introduce the health and safety measures necessary to manage those risks

- › Inform employees about risks and the measures in place to manage them
- › Ensure that adequate health and safety training is provided

The governor who oversees health and safety is Duncan Mackrill.

### **3.2 Headteacher**

The headteacher is responsible for health and safety day to day. This involves:

- › Implementing the health and safety policy
- › Ensuring there is enough staff to safely supervise learners
- › Ensuring that the Centre building and premises are safe and regularly inspected
- › Providing adequate training for Centre staff
- › Reporting to the governing board 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

In the headteacher's absence, Lucy Jackson, Deputy Head of Centre, assumes the above day-to-day health and safety responsibilities.

### **3.3 Health and safety lead**

The nominated health and safety lead is Lucy Jackson.

The nominated competent person is Lucy Jackson, Deputy Head of Centre.

### **3.4 Staff**

Centre staff have a duty to take care of learners in the same way that a prudent parent/carer would do so.

Staff will:

- › Take reasonable care of their own health and safety and that of others who may be affected by what they do at work
- › Co-operate with the Centre 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 learners
- › Understand emergency evacuation procedures and feel confident in implementing them

### **3.5 Learners and parents/carers**

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

### 3.6 Contractors

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

## 4. Site security

Lucy Jackson and Kim Anderson are responsible for the security of the Centre site in and out of Centre hours. They are responsible for visual inspections of the site, and for the intruder and fire alarm systems.

Lucy Jackson, Kim Anderson, Richard Buckingham and Nick Munday are key holders and will respond to an emergency.

## 5. 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 practised at least once a term.

The fire alarm is a loud continuous bell.

Fire alarm testing will take place once a week.

New staff will be trained in fire safety and all staff and learners 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 learners will congregate at the assembly point. This is outside the front of 52 Windsor Road.
- Lucy Jackson will take a register of learners, which will then be checked against the attendance register of that day
- The Deputy Head will take a register of all staff
- Staff and learners will remain outside the building until the emergency services say it is safe to re-enter

The Centre 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 PEEP (Personal Emergency Evacuation Plan) will be prepared for any staff or learners who require support.

A fire safety checklist can be found in appendix 1.

## 6. COSHH

Centres are required to control hazardous substances, which can take many forms, including but not limited to:

- 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 Lucy Jackson and circulated to all employees who work with hazardous substances. Staff will also be provided with protective equipment, where necessary.

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

Any hazardous chemicals will be kept in a locked COSHH cupboard which only Science staff have access to.

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.

### **6.1 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 they have adequate ventilation

### **6.2 Legionella**

- Lucy Jackson is responsible for ensuring that the identified operational controls are conducted and recorded in the Centre's water log book regularly.
- This risk assessment will be reviewed every year 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, regular heating of water, disinfection of sinks and showers.

### **6.3 Asbestos**

- Staff are briefed on the hazards of asbestos, the location of any asbestos in the Centre 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 that 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 Centre site

## **7. 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 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.

### **7.1 Electrical equipment**

- › All staff are responsible for ensuring 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 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 isolator 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

### **7.2 PE equipment**

- › Learners 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 Lucy Jackson.

### **7.3 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)

### **7.4 Specialist equipment**

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

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

## 8. 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
- Remote working, self-isolation and/or remote learning

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 they are medically fit to work alone.

## 9. Working at height

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

We will ensure that there is a suitable and sufficient working at height risk assessment in place and that any person working at height follows the control measures identified in the risk assessment to minimise the risk of harm from the work activity.

In addition:

- The Deputy Head of Centre retains ladders for working at height
- Learners 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 a roof, is only permitted by trained and competent persons

## 10. Manual handling

The procedures related to manual handling apply to activities where there is a foreseeable risk of injury.

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 must seek further assistance.

We will ensure that a risk assessment is undertaken to identify the nature of manual handling in the Centre, and that those who may be involved in manual handling activities are required to read it. We will make sure proper mechanical aids and lifting equipment are available in the Centre, and that staff are trained in how to use them safely.

Staff and learners 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

## **11. Off-site visits**

When taking learners off the Centre 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 Centre mobile phone, an appropriate portable first aid kit, information about the specific medical needs of learners, along with the parents/carers' contact details

## **12. Lettings**

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

## **13. 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 at themselves to their line manager/headteacher immediately. This applies to violence from learners, visitors or other staff.

## **14. Smoking**

Smoking is not permitted anywhere on the Centre premises.

## **15. Infection prevention and control**

We follow national guidance published by the UK Health Security Agency when responding to infection control issues. We will encourage staff and learners to follow this good hygiene practice, outlined below, where applicable.

### **15.1 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

### **15.2 Coughing and sneezing**

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

### **15.3 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 (e.g. 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
- › Use personal protective equipment (PPE) to control the spread of infectious diseases where required or recommended by government guidance and/or a risk assessment

### **15.4 Cleaning of the environment**

- › Clean the environment frequently and thoroughly

### **15.5 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

### **15.6 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

### **15.7 Clinical waste**

- › Always segregate domestic and clinical waste, in accordance with local policy
- › Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins
- › Remove clinical waste with a registered waste contractor

- › Remove all clinical waste bags when they are two-thirds full and store in a dedicated, secure area while awaiting collection

## **15.8 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 learners
- › Supervise learners when playing with animals
- › Seek veterinary advice on animal welfare and animal health issues, and the suitability of the animal as a Centre pet

## **15.9 Infectious disease management**

We will ensure adequate risk reduction measures are in place to manage the spread of acute respiratory diseases, including COVID-19, and carry out appropriate risk assessments, reviewing them regularly and monitoring whether any measures in place are working effectively.

We will follow local and national guidance on the use of control measures including:

### **Following good hygiene practices**

- › We will encourage all staff and learners to regularly wash their hands with soap and water or hand sanitiser, and follow recommended practices for respiratory hygiene. Where required, we will provide appropriate personal protective equipment (PPE)

### **Implementing an appropriate cleaning regime**

- › We will regularly clean equipment and rooms, and ensure surfaces that are frequently touched are cleaned daily

### **Keeping rooms well ventilated**

- › We will use risk assessments to identify rooms or areas with poor ventilation and put measures in place to improve airflow, including opening external windows, opening internal doors and mechanical ventilation

## **15.10 Learners vulnerable to infection**

Some medical conditions make learners vulnerable to infections that would rarely be serious in most children. The Centre 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 any 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.

## **15.11 Exclusion periods for infectious diseases**

The Centre will follow recommended exclusion periods outlined by the UK Health Security Agency and other government guidance.

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

In addition to general cleaning guidance:

- › Wash hands using soap and warm water and dry after removing disposable gloves

## 16. New and expectant mothers

Risk assessments will be carried out whenever any employee or pupil notifies the Centre 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 an 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
- Some pregnant women will be at greater risk of severe illness from COVID-19

## 17. 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 Centre for responding to individual concerns and monitoring staff workloads. Please refer to RBET Staff Wellbeing policy.

## 18. Accident reporting

### 18.1 Accident record book

- An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. 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 Centre 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.

### 18.2 Reporting to the Health and Safety Executive

The Deputy Head of Centre 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 Deputy Head of Centre will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within 10 days.

## **Centre staff: reportable injuries, diseases or dangerous occurrences**

These include:

➤ Death

➤ Specified injuries, which are:

- Fractures, other than to fingers, thumbs and toes
- Amputations
- Any injury likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding) which:
  - Covers more than 10% of the whole body's total surface area; or
  - Causes significant damage to the eyes, respiratory system or other vital organs
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours

➤ Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the Deputy Head of Centre will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident

➤ Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include, but are not limited to:

- Carpal tunnel syndrome
- Severe cramp of the hand or forearm
- Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
- Hand-arm vibration syndrome
- Occupational asthma, e.g. from wood dust
- Tendonitis or tenosynovitis of the hand or forearm
- Any occupational cancer
- Any disease attributed to an occupational exposure to a biological agent

➤ Near-miss events that do not result in an injury but could have done. Examples of near-miss events relevant to Centres 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

## **Learners and other people who are not at work (e.g. visitors): reportable injuries, diseases or dangerous occurrences**

These include:

- Death of a person that arose from, or was in connection with, a work activity
- An injury that arose from, or was in connection with, a work activity and the person is taken directly from the scene of the accident to hospital for treatment

An accident “arises out of” or is “connected with a work activity” if it was caused by:

- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip)
- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors)

Information on how to make a RIDDOR report is available here: [How to make a RIDDOR report, HSE](#)

## **19. Training**

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

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

## **20. Monitoring**

This policy will be reviewed by the Deputy Head of Centre every 3 years.

At every review, the policy will be approved by the Governing body of Red Balloon Worthing.

## **21. Links with other policies**

This health and safety policy links to the following policies:

- First aid
- Risk assessment
- Supporting learners with medical conditions
- Accessibility plan

## Appendix 1. Fire safety checklist

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

