

HEALTH & SAFETY

SELF AUDIT

and

ACTION PLAN

| | | | |
|---|-----------------------|------------------|-------------|
| Name of Establishment | Etwall Primary School | Date | 24-10-19 |
| Carried out by: | Richard Ormiston | Job Title | Headteacher |
| Agreed by Headteacher / Centre Manager | Richard Ormiston | | |
| | SIGNATURE | | |
| Chair of Governors (for Schools) | Rishi Makwana | | |
| | SIGNATURE | DATE | |

Self Audit & Action Plan

If **NO** or **NOT SURE** are ticked then a 'Y' should be placed in the **ACTION REQ'D** column and this should be reflected in the Action Plan to be completed at the end of the Self Audit.

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|---------------------------------|---|----------|----|----------|-----|------------------|
| HEALTH AND SAFETY POLICY | | | | | | |
| 1 | Do you have a current health and safety policy? In line with CAYA format. | X | | | | |
| 2 | Does it contain a Safety Policy Statement outlining management commitment to health and safety and legislative compliance? | X | | | | |
| 3 | Has statement been signed and dated by current establishment manager and chair of governors for schools? | X | | | | |
| 4 | Does Policy contain an Organisation Section outlining responsibilities for Health & Safety attached to specific job roles? | X | | | | |
| 5 | Does the Policy contain a comprehensive list of arrangements for Health & Safety? <small>This should be a set of instructions / Codes of Practice which outline how health and safety is to be managed in your particular establishment.</small> | X | | | | |
| 6 | Do you have a mechanism for ensuring all staff are aware of the existence and contents of the Safety Policy? | X | | | | |
| 7 | Do you have a system for recording that all staff have been made aware of the Safety Policy and its contents and have agreed and abide by these? | X | | | | |
| 8 | When was the Policy last reviewed? <small>(The Policy should be reviewed at least every 2 years or if there are significant changes to your operating systems, it is has not been then action as required)</small> | 16-05-18 | | | | |
| Comments/Notes | | | | | | |
| MANAGEMENT/COMMUNICATION | | | | | | |
| 1 | Have you appointed someone at your establishment to co-ordinate Health & Safety issues on behalf of the Management? | X | | | | |
| 2 | Does this person have sufficient Authority/Standing to ensure Health & Safety actions necessary are carried out by whomever needs to do them? | X | | | | |
| 3 | Is the co-ordinator given specific, sufficient allocated time to deal with Health & Safety issues. | X | | | | |
| 4 | Is there a mechanism for staff to highlight Health & Safety issues as they arise. | X | | | | |
| 5 | Is Health & Safety a standing item at Staff Meetings (any action ???? in response to (4) above can be fed back to staff through this forum) | X | | | | |
| 6 | Is Health & Safety a standing item on Management/Governors meetings | X | | | | |
| 6a | For schools – Do you present an Annual Report to Governors on Health & Safety Performance? | | X | | | HT rept at govs |
| 7 | Are staff aware of the Guidance Available from the Local Authority and how to access it if necessary? | X | | | | |

Self Audit & Action Plan

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|---|---|-----|----|----------|-----|------------------|
| MANAGEMENT/COMMUNICATION (Cont.) | | | | | | |
| 8 | Does the Establishment have a Health & Safety Committee or Working Group made up of Management & Staff representatives | X | | | | |
| 9 | Is there a mechanism for communicating key Health & Safety information to Parents/Carers/Clients? | X | | | | |
| <p>Comments/Notes</p> <p>The resources committee complete an annual health and safety walk to look at any issues arising and repairs that are required. The school works programme is updated and implemented along with the SIP. This is then reported to governors and discussed at each resource committee meeting in place of an annual Headteacher's report.</p> | | | | | | |
| RISK ASSESSMENT | | | | | | |
| 1 | Has your establishment undertaken a process of Identifying all Hazards? <small>This would be anything either relating to the building or your activities with the potential to cause harm)</small> | X | | | | |
| 2 | Have you considered the above list and identified all those Hazards that present a significant risk? | X | | | | |
| 3 | Have you put in place suitable and sufficient risk assessments to ensure these risks are controlled to an acceptable Level? | X | | | | |
| 4 | Have Risk Assessments been shared with all staff who are affected by them? | X | | | | |
| 5 | Are Risk Assessments readily available to those affected by the Risk? | X | | | | |
| 6 | Have you a mechanism to record that all staff are aware of and have agreed to comply with findings of Risk Assessments? | X | | | | |
| 7 | Do you have a mechanism to ensure any new risks created (eg. From new areas of work) are identified and dealt with / assessed before anyone is exposed to them. | X | | | | |
| 8 | Do you have a system for reviewing Risk Assessments to ensure they remain suitable and sufficient? | X | | | | |
| 9 | Have staff received training in Risk Assessment as necessary? | X | | | | |
| 10 | Is there a mechanism for staff to identify new areas where assessments may be required or shortcomings in existing Risk Assessments? | X | | | | |
| 11 | Have you identified a responsible person (persons) to carry out Risk Assessments? | X | | | | |
| 12 | Have they received appropriate training to carry out Risk Assessments? | X | | | | |
| 13 | Have they been allocated sufficient time to carry out Risk Assessments? | X | | | | |
| <p>Comments/Notes</p> | | | | | | |
| TRAINING | | | | | | |
| 1 | Do all members of staff receive induction training including supply staff and volunteers? | X | | | | |
| 2 | Is there a mechanism to ensure as part of this induction key safety information is given to everyone before they commence work at your establishment? | X | | | | |

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| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|--|---|-----|----|----------|-----|------------------|
| TRAINING (Cont.) | | | | | | |
| 3 | Do you have a system for recording this induction training? | X | | | | |
| 4 | Do you have a Staff Development Plan which includes any necessary Health & Safety Training for Staff? | X | | | | |
| 5 | Do you have a system for recording all staff Health & Safety Training attended? | X | | | | * |
| 6 | Do staff have access to refresher training as necessary? | X | | | | |
| Comments/Notes * Health and safety training register needs updating | | | | | | |
| ACCIDENTS & ASSAULTS | | | | | | |
| 1 | Do you have established systems for reporting and recording accidents and assaults in line with county guidelines | X | | | | |
| 2 | Are all staff aware of the requirements to report all accidents/assaults | X | | | | |
| 3 | Do you have a nominated person(s) who record and report accidents | X | | | | MJ |
| 4 | Is this person(s) fully familiar with the county guidelines and RIDDOR legislation | X | | | | |
| 5 | Are all reportable accidents or other significant incidents investigated in line with county accident investigation protocols | X | | | | DCC policy |
| 6 | Are minor accidents and assaults records routinely investigated to identify any developing trends in minor accidents and assaults | X | | | | MJ |
| 7 | Is corrective action routinely taken to deal with issues highlighted from any investigations (as per question 4&5 above) | X | | | | |
| 8 | Are you and your staff familiar with the county's guidance on assaults and violence at work | X | | | | DCC policy |
| 9 | Are all assaults reported using the assault report form | X | | | | |
| 10 | Are assaults followed up by senior management and corrective actions put in place and documented. | X | | | | |
| Comments/Notes | | | | | | |
| ADMINISTRATION OF MEDICINES | | | | | | |
| 1 | Does the establishment have a clear Policy on Administering Medication in line with County Guidelines? | X | | | | |
| 2 | Is this Policy clearly communicated to all parents / carers and clients including the need for consent forms and that establishments cannot agree to administer medication without these? | X | | | | |
| 2a | What systems are in place if an Establishment has no one who will volunteer to administer medication? | | | | X | |
| 3 | Is there a robust system for recording all Administration of Medicines? | X | | | | |

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|--|---|-----|----|----------|-----|------------------|
| ADMINISTRATION OF MEDICINES (Cont.) | | | | | | |
| 4 | Have all staff involved in Administering medication received appropriate training from and been signed off as competent by a Health Professional? | X | | | | |
| 5 | Do these staff have access to refresher training as necessary / specified? | X | | | | |
| 6 | Are suitable storage facilities available for storing medicines (including locked storage for controlled drugs) | X | | | | |
| 7 | Are appropriate Healthcare plans in place for Young People with specified medical conditions, written by Health Professionals. | X | | | | |
| 8 | Are systems in place to ensure Young People have immediate access to Emergency medication at all times. | X | | | | |
| Comments/Notes | | | | | | |
| ASBESTOS | | | | | | |
| 1 | Does the establishment have an Asbestos Register? | X | | | | |
| 2 | Are all staff aware of the Asbestos Register and any Asbestos in their area of work? | x | | | | |
| 3 | Do all staff know not to interfere with any known asbestos and what to do if they find the asbestos has been damaged? | x | | | | |
| 4 | Does your establishment have a nominated Duty Holder for the Control of Asbestos (usually the most Senior Person on site) | X | | | | RO (SBe from Jan |
| 5 | Has the Duty Holder attended the compulsory all Training Course for Duty Holders? | | X | | | * |
| 6 | Are you operating the Permit to Work system in line with the Asbestos Policy for all Contractors who's work disturbs the fabric of the building? | X | | | | |
| 7 | Does the Duty Holder Review the Asbestos Register annually and carry out a visual survey of all recorded asbestos in line with the requirements of the Asbestos Policy? <small>(To ensure the information in the asbestos register and the condition of the recorded asbestos has not changed)</small> | X | | | | |
| Comments/Notes * RO to attend asbestos training | | | | | | |
| CONTRACTORS | | | | | | |
| 1 | Do you have a system for ensuring the competence of all Contractors used by the establishment? ie. building and extra curriculum activities. | X | | | | |
| 2 | Do you ask for and check all the contractor Health & Safety information relevant to the contracted work they are providing for you? <small>(This could include safety policy, method statement, risk assessments, safeguarding information, qualifications of staff, etc.)</small> | X | | | | Not if DCC staff |

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|---|--|-----|----|----------|-----|------------------|
| CONTRACTORS (Cont.) | | | | | | |
| 3 | Do you ensure that the contractor has in place sufficient insurance cover? | X | | | | |
| 4 | Do you have a pre-contract meeting with the contractors to discuss Safety issues relating to the work? | X | | | | |
| 5 | Do you have systems in place to ensure any relevant Health & Safety information relating to the contractors work is passed to the Contractor? | X | | | | |
| 6 | Do you have a system in place for monitoring the Work & Safety Performance of the Contractor as work progresses and to address any issues identified? | X | | | | |
| Comments/Notes Work done is generally carried out by registered DCC contractors. | | | | | | |
| CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH | | | | | | |
| 1 | Do you have an Inventory of all Hazardous Substances used or produced as a by product (eg. Wood dust from design & technology lessons) of operations at the establishment? | X | | | | |
| 2 | Have you challenged whether the use of each hazardous substance is necessary? | | X | | | |
| 3 | Have you investigated whether or not each hazardous substance could be replace by a safety alternative? | | X | | | |
| 4 | Do you have a copy of the material Safety Data sheet for each Hazardous Substance still considered as necessary? | X | | | | |
| 5 | Have COSHH Assessments in line with Authority Guidance been carried out for the specific use of each hazardous? | X | | | | |
| 6 | Are appropriate control measures from the COSHH Assessment communicated to all affected staff and copies fo the assessment made readily available to staff? | X | | | | |
| 7 | Are staff given any necessary training in order to ensure control measures are properly implemented? | X | | | | |
| 8 | Do you have monitoring systems in place to ensure control measures remain effective? | X | | | | HG & TH |
| 9 | Do you have a purchasing Policy in place and ensure new hazardous substances are not purchased if a school alternative is available? | X | | | | |
| 10 | Do you ensure a full COSHH assessment is carried out before new Hazardous Substances are used for the first time? | X | | | | |
| 11 | If identified as necessary do you ensure appropriate Personal Protective Equipment is issued (see below)? | X | | | | HG & TH |
| 12 | Is Personal Protective Equipment only issued as a last resort in line with Authority Guidelines? | X | | | | |
| 13 | If you are in Property Division's Cleaning/Caretaking contract, do you have their COSHH Assessments and are they completed? | X | | | | |

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|--|--|-----|----|----------|-----|------------------|
| CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (Cont.) | | | | | | |
| Comments/Notes | | | | | | |
| PERSONAL PROTECTIVE EQUIPMENT (PPE) | | | | | | |
| 1 | Is all Personal Protective Equipment issued assessed to ensure its suitability for the task in line with Authority Guidelines? | X | | | | |
| 2 | Are staff given sufficient information/instruction/training to enable them to wear and care for PPE correctly? | X | | | | |
| 3 | Is all PPE deemed necessary issued to staff free of charge, including replacements as necessary? | X | | | | |
| 4 | Is there a suitable storage facility available to ensure PPE does not become damaged? | X | | | | |
| Comments/Notes | | | | | | |
| DISPLAY SCREEN EQUIPMENT (DSE) | | | | | | |
| 1 | Have all designated DSE users been identified in line with Authority Guidelines? | X | | | | |
| 2 | Has a workstation assessment been carried out for all DSE users? | X | | | | |
| 3 | Have DSE users been given sufficient information along with the findings of the Assessment to ensure a safe workstation is maintained? | X | | | | |
| 4 | Have all DSE users been offered a free eyesight test and where necessary corrective glasses in line with Authority Policy? | X | | | | |
| Comments/Notes | | | | | | |
| EDUCATIONAL VISITS | | | | | | |
| 1 | Does the Establishment have a nominated Educational Visits Co-ordinator (EVC)? | X | | | | |
| 2 | Has the EVC received appropriate training from the Local Authority? | X | | | | |
| 3 | Are all Educational Visits planned and approved using the Evolve system? | X | | | | |
| 4 | Do you have a system for ensuring Group Leaders are competent to lead a visit / activity? | X | | | | |
| 5 | Are all visits planned and carried out in accordance with Authority guidelines? | X | | | | |
| 6 | Do you have a system for informing parents of all safety precautions / risk assessments in place for visits? | X | | | | |

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|-----------------------------------|---|-----|----|----------|-----|------------------|
| EDUCATIONAL VISITS (Cont.) | | | | | | |
| Comments/Notes | | | | | | |
| ELECTRICAL SAFETY | | | | | | |
| 1 | Is mains testing of your Establishment carried out by a competent person every 5 years (3 years for temporary buildings) in line with Authority guidelines? | X | | | | |
| 2 | Is there an inventory of all portable electrical appliances on site? | X | | | | |
| 3 | Are all portable electrical appliances periodically inspected and tested by a competent person and recorded. | X | | | | |
| 4 | Are records of all portable appliance testing kept? | X | | | | |
| 5 | Is there a system in place for staff to visually check any electrical appliance before it is used? | X | | | | |
| 6 | Is there a system in place to ensure all faulty electrical appliances are removed from use and labelled as faulty until it is either repaired or scrapped? | X | | | | |
| 7 | Are all mains electrical works only carried out by qualified and competent electricians who are NICEIC registered? | X | | | | |
| 8 | Are all electrical repairs only carried out by a competent person? | X | | | | |
| 9 | Do you have a system to prevent employees using their own electrical equipment until it is tested by a competent person? | X | | | | |
| 10 | Does the Establishment have an RCD device fitted or are RCD's used on High Risk Equipment? | X | | | | |
| 11 | Are all mains electrical isolation points clearly marked? Are staff who need to be aware of them familiar with their location? | X | | | | |
| 12 | Are electrical isolation points for individual workshops and laboratories, food preparation areas lockable and kept locked when not in use as necessary? | X | | | | |
| Comments/Notes | | | | | | |
| FIRE SAFETY | | | | | | |
| 1 | Do you have a senior member of staff nominated as Duty Holder in regards to Fire Safety? | X | | | | |
| 2 | Has this person attended the departments compulsory Fire Safety Management Course? | X | | | | |
| 3 | Has a suitable and sufficient operational Fire Risk Assessment been carried out by the Establishment? | X | | | | |

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|--|---|-----|----|----------|-----|------------------|
| FIRE SAFETY (Cont.) | | | | | | |
| 4 | Has a suitable and sufficient technical Fire Risk Assessment been carried out via. Property Division and combined with the Establishments Operational Risk Assessment? | X | | | | |
| 5 | Has the Fire Risk Assessment been reviewed? (This should be annually or sooner if there have been any significant changes in operational procedures, personnel or to the structure of the establishment) | X | | | | * |
| 6 | Are all staff aware of the Fire Evacuation Procedure and have staff received appropriate training? | X | | | | |
| 7 | Are nominated staff with specific roles in a fire evacuation aware of these roles and understand them? | X | | | | |
| 8 | Are Fire Evacuation Drills carried out at least twice a year and these drills and any significant findings recorded? | X | | | | |
| 9 | Are Fire Alarms, smoke alarms, emergency lighting and Fire Extinguishers tested by a competent person in line with manufacturers and County guidelines? | X | | | | |
| 10 | Are fire Alarms tested weekly by the establishments and a system in place for any faults identified and be highlighted and rectified? | X | | | | |
| 11 | Has the establishment considered staff who work out of normal hours (e.g. cleaners) or other out of hours use of the building and ensured that all the above precautions are in place for such people? | X | | | | |
| 12 | Are Personal emergency Evacuation Plans in place for any pupil/service users who require assistance due to disability? | X | | | | |
| Comments/Notes * Policy needs reviewing Term 3 annually | | | | | | |
| FIRST AID | | | | | | |
| 1 | Have you assessed the First Aid requirements of your establishment? | X | | | | |
| 2 | Based on the above, have you appointed an appropriate number of nominated staff with appropriate training to deliver First Aid? | X | | | | |
| 3 | If required, have you appointed trained Paediatric First Aider? | X | | | | |
| 4 | Do First Aiders keep full records of any First Aid administered? | X | | | | |
| 5 | Are First Aid boxes located where required? | X | | | | |
| 6 | Have you appointed people to check First Aid boxes and re-stock them as necessary? | X | | | | |
| Comments/Notes | | | | | | |

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|---|--|-----|----|----------|-----|------------------|
| GLAZING | | | | | | |
| 1 | Is there a full glazing survey in place for the establishment? | X | | | | |
| 2 | Have adequate precautions been taken to reduce the risks from any High Risk areas of glazing identified? | X | | | | |
| 3 | Have these measures been recorded? | X | | | | |
| 4 | When glass is replaced is there a system to ensure appropriate safety glass is put in its place where necessary? | X | | | | |
| 5 | Is the glazing survey updated as necessary as glass is replaced? | X | | | | |
| 6 | Are all ground floor windows that open onto walkways designed so that they don't present a risk of head injury or fitted with restrictors? | X | | | | |
| 7 | Are all windows above first floor in areas where young people have access fitted with restrictors or designed to open in such a way that there is no risk of young people climbing or falling out of them? | | | | X | |
| Comments/Notes | | | | | | |
| GROUNDS MAINTENANCE | | | | | | |
| 1 | If contractors, including Property Division, are used are you assessing their competence in line with county guidelines? | X | | | | |
| Comments/Notes | | | | | | |
| IF GROUNDS MAINTENANCE IS CARRIED OUT IN HOUSE | | | | | | |
| 1 | Are staff carrying out grounds maintenance adequately trained and competent and carry out the work – including any certification necessary? | | | | X | |
| 2 | Are all items of machinery safely stored so that they can only be used and accessed by competent people? | | | | X | |
| 3 | Are all machines checked before each use to ensure they are in a safe condition including fully guarded? | | | | X | |
| 4 | Are all machines serviced in accordance with manufacturers recommendations and this servicing recorded? | | | | X | |
| 5 | Is there a system for ensuring all unsafe/damaged machinery is appropriately labelled and removed from use until | | | | X | |
| 6 | Are suitable and sufficient operating procedures and Risk Assessment in place for all Grounds Maintenance operations? | | | | X | |
| 7 | Are all Hazardous and flammable chemicals fully assessed for their use? | | | | X | |
| 8 | Are all Hazardous & Flammable chemicals safely stored? | | | | X | |

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|--|--|-----|----|----------|-----|------------------|
| IF GROUNDS MAINTENANCE IS CARRIED OUT IN HOUSE (Cont.) | | | | | | |
| 9 | Is all necessary Personal Protective equipment provided? | | | X | | |
| 10 | Are noise and vibration assessments carried out as necessary? | | | X | | |
| Comments/Notes | | | | | | |
| LIFTING EQUIPMENT | | | | | | |
| 1 | Is all equipment used for lifting persons examined every 6 months by a competent person in line with LOLER Regulations? | | X | | | Annual check |
| 2 | Are all attachments such as slings examined as above? | | | X | | |
| 3 | Is Lifting Equipment only used by trained and competent persons? | X | | | | |
| 4 | Are appropriate assessments in place for use of Lifting Equipment in line with DIAG requirements? | | X | | | * |
| 5 | Have the Insurance Department been informed of the Lifting Equipment you have. | X | | | | |
| Comments/Notes * PEEPs are put in place for individual pupils when required | | | | | | |
| MANUAL HANDLING (Objects) | | | | | | |
| 1 | Have you identified all moving and handling activities which present a hazard? | X | | | | |
| 2 | Have moving and handling assessments been carried out for all activities which pose a significant risk? | X | | | | |
| 3 | Has a responsible person been identified and where necessary trained to carry out manual handling assessments? | X | | | | RO/MJ |
| 4 | Have the findings of any manual handling assessments and any necessary control measures to be implemented been fully communicated to those staff carrying out the handling activity? | X | | | | |
| 5 | Have staff carrying out the activity received any instruction/training if necessary? | X | | | | |
| Comments/Notes | | | | | | |
| MOVING & HANDLING (People) | | | | | | |
| 1 | Have all activities where moving and handling is required been identified? | X | | | | * |
| 2 | Has a full moving and handling assessment in line with DIAG requirements been carried out? | X | | | | * |
| 3 | Has a full environmental assessment in line with DIAG been completed? | X | | | | * |
| 4 | Have both of the above informed a personal handling plan for any individual requiring assistance to move? | X | | | | * |
| 5 | Is the personal handling plan available and shared across all those who are involved in providing care or assistance to the individual? | X | | | | * |

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| MOVING & HANDLING (People) (Cont.) | | | | | | |
| 6 | Have the findings of the assessments/handling plan been fully communicated to all those involved and has any necessary training to allow the findings to be properly implemented been provided? | | | X | | * |
| 7 | Has all equipment indicated as necessary been provided? | | | X | | * |
| Comments/Notes * No pupils with this area of need currently in school | | | | | | |
| MAINS SERVICES (GAS) | | | | | | |
| 1 | Are all gas isolation points clearly marked and their location made known to key staff? | X | | | | See office |
| 2 | Is there a plan with these points marked on which is kept in the Red Fire Folder? | X | | | | |
| 3 | Are there lockable gas isolation points for individual laboratories, workshops, food preparation areas, etc. | X | | | | |
| 4 | Are annual gas soundness tests for the establishment carried out? | X | | | | DCC |
| 5 | Are gas burning appliances subject to an annual inspection by a competent person? | X | | | | DCC |
| Comments/Notes | | | | | | |
| MAINS SERVICES (ELECTRIC) | | | | | | |
| 1 | Are mains electrical isolation points clearly marked and their location made known to key staff? | X | | | | |
| 2 | Is there a plan with these points marked on which is kept in the Red Fire Folder? | X | | | | |
| 3 | Are there lockable electrical isolation points for individual workshops, laboratories and food preparation areas? | X | | | | |
| Comments/Notes | | | | | | |
| MAINS SERVICES (WATER) | | | | | | |
| 1 | Are the mains water isolation points for clearly marked and their location made known to key staff? | X | | | | |
| 2 | Is there a plan with these points marked on which is kept in the Red Fire Folder? | X | | | | |
| 3 | Are local mains water isolation points for separate areas of the establishments clearly marked and their location made known to key staff? | X | | | | |
| Comments/Notes | | | | | | |

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|-----------------------|---|-----|----|----------|-----|------------------|
| LEGIONELLA | | | | | | |
| 1 | Has your water system been risk assessed by a competent person qualified to carry out this assessment? | X | | | | |
| 2 | Has the risk assessment identified any high risk areas and if so do you have a plan in place to reduce the risk | X | | | | |
| 3 | Do you have a water testing regime in place? | X | | | | |
| 4 | Has a competent person been identified to manage the water testing programme? | X | | | | |
| 5 | Is appropriate equipment available to allow water testing to be carried out? | X | | | | |
| 6 | Is the water testing carried out recorded? | X | | | | |
| 7 | Is there a protocol in place for dealing with any issues identified by the water testing? | X | | | | |
| 8 | Is there a re-assessment date specified for the water system risk assessment? | X | | | | |
| Comments/Notes | | | | | | |
| LONE WORKING | | | | | | |
| 1 | Have you identified all situations where staff are Lone Working? | X | | | | |
| 2 | Have staff been provided with suitable information/instruction on training on what they should and can't do as Lone Workers? | X | | | | |
| 3 | Has a suitable risk assessment been carried out for the Lone Working activity? | X | | | | |
| 4 | Have staff involved in Lone Working been given suitable safety equipment as identified in the risk assessment and instructed in its use? | X | | | | |
| 5 | Is there a system for periodically checking on the wellbeing of Lone Workers? | X | | | | |
| 6 | Is there a system in place for ensuring Lone Workers have successfully and safely completed their work including Lone Workers who work out of normal working times? | X | | | | |
| Comments/Notes | | | | | | |
| EXTERNAL AREAS | | | | | | |
| 1 | Do you have a system in place and inspect external areas on a regular basis in line with county guidance? | X | | | | |
| 2 | Is there a system in place and make safe any defects identified until they can be permanently repaired / made safe? | X | | | | |
| 3 | Are inspections of external areas recorded in line with County Guidance? | X | | | | |
| 4 | Is external lighting periodically inspected to ensure it is working effectively? | X | | | | |
| Comments/Notes | | | | | | |

Self Audit & Action Plan

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|--------------------------------|---|-----|----|----------|-----|------------------|
| TRANSPORT ON SITE | | | | | | |
| 1 | Is there effective physical separation of vehicles and pedestrians on site? | | X | | | |
| 2 | If there is not, separate vehicle/pedestrian routes on site do you have a system for managing vehicular access onto site to achieve this? | X | | | | |
| 3 | Are site vehicle rules effectively communicated to all site users? | X | | | | |
| Comments/Notes | | | | | | |
| EXTERNAL PLAY EQUIPMENT | | | | | | |
| 1 | Has external play equipment been installed by a competent person? | X | | | | |
| 2 | Does external play equipment comply with relevant British and European Standards? | X | | | | |
| 3 | Is there a system in place for external play equipment to be regularly inspected for obvious defects and this be recorded? | X | | | | |
| 4 | Is there a system in place for play equipment to be inspected annually by a competent person? | X | | | | TH |
| 5 | Are rules in place to ensure safe use of the equipment by those at the establishment? | X | | | | |
| 6 | Have rules concerning the use of the equipment by visitors to the establishment been clearly communicated to all? | X | | | | |
| 7 | Is appropriate safety surfacing in place where necessary? | X | | | | |
| Comments/Notes | | | | | | |
| PE EQUIPMENT | | | | | | |
| 1 | Is PE equipment regularly inspected and this inspection recorded? | X | | | | |
| 2 | Is PE equipment visually checked before each use? | X | | | | |
| 3 | Is PE equipment inspected and maintained annually by a competent person? | X | | | | |
| 4 | Is there a system for ensuring faulty PE equipment is removed from use and cannot be used again before it is repaired / scrapped? | X | | | | |
| 5 | Are there suitable and sufficient risk assessments in place for the use of PE equipment? | X | | | | |
| 6 | Is PE equipment safely stored and where necessary secured to prevent unauthorised use of the equipment? | X | | | | |
| Comments/Notes | | | | | | |

Self Audit & Action Plan

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|---|---|-----|----|----------|-----|------------------|
| OPEN WATER/POND ON SITE | | | | | | |
| 1 | Where there are areas of open water/pond on site are these appropriately reviewed and signed in line with county guidance wherever reasonably practicable. (NB All new areas of open water created must be suitably barriered or rendered safe by other means, e.g. grill) | X | | | | |
| 2 | Where it is not reasonably practicable to fence areas of open water has Risk Assessment of the area been carried out? | X | | | | |
| 3 | Have appropriate control measures been put in place to prevent unauthorised people accessing the area, in line with the above assessment. | X | | | | Locked gate |
| 4 | Has a risk assessment for use of the area by the establishment for educational purposes been carried out. | X | | | | |
| Comments/Notes | | | | | | |
| PRESSURE SYSTEMS | | | | | | |
| 1 | Have you identified all pressure systems at your establishment and informed DCC's Insurance Dept.? | | | X | | * |
| 2 | Do all pressure schemes have a written scheme of examination in place? | | | X | | * |
| 3 | Are all pressure systems inspected by a competent person in accordance with this scheme? | | | X | | * |
| Comments/Notes * RO to review and identify | | | | | | |
| STRESS MANAGEMENT | | | | | | |
| 1 | Do you have a stress management policy in place for the establishment? | X | | | | |
| 2 | Is the policy clearly communicated to all staff? | X | | | | |
| 3 | Have you carried out a stress risk assessment for all staff? | X | | | | |
| 4 | Are staff fully aware of all the support mechanisms in place for staff who feel they may be suffering from stress? | X | | | | |
| 5 | Are managers fully supportive of staff who report they are suffering from stress and are appropriate measures implemented to alleviate this stress? | X | | | | |
| Comments/Notes | | | | | | |
| WORKPLACE | | | | | | |
| 1 | Are regular inspections of the workplace carried out and findings acted upon? | X | | | | |
| 2 | Are records of these inspections and any actions taken kept? | X | | | | |
| 3 | Is there a system in place for staff to report any safety issues they identify? | X | | | | |
| 4 | Are staff encouraged to take responsibility for their own area of work? | X | | | | |
| 5 | Is housekeeping regularly inspected? | X | | | | |
| 6 | Is all lighting suitable for tasks carried out in the area? | X | | | | |

Self Audit & Action Plan

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|---------------------------------------|---|-----|----|----------|-----|------------------|
| WORKPLACE (cont.) | | | | | | |
| 7 | Can temperature and ventilation be adjusted to provide appropriate working conditions? | X | | | | |
| 8 | Is there access to suitable drinking water? | X | | | | |
| Comments/Notes | | | | | | |
| WORK EQUIPMENT | | | | | | |
| 1 | Has any work equipment used been assessed as suitable for the task? | X | | | | |
| 2 | Does all work equipment supplied, purchased, used, meet the necessary British/European standards and comply with The Provision and Use of Work Equipment Regulations. | X | | | | |
| 3 | Is work equipment regularly inspected and records of inspections kept? | X | | | | |
| 4 | Are users required to check work equipment before it is used? | X | | | | |
| 5 | Is work equipment maintained in accordance with manufacturers' instructions by a competent person and records kept? | X | | | | |
| 6 | Is work equipment only used / operated by competent/trained/authorised persons? | X | | | | |
| 7 | Are rules in place to prevent young people using prescribed dangerous machinery and those pieces of work equipment deemed inappropriate for their use? | | | | X | |
| Comments/Notes | | | | | | |
| WORK EXPERIENCE / YOUNG PEOPLE | | | | | | |
| 1 | Are specific risk assessment carried out for any person under 18 who you employ or take on work experience? | X | | | | |
| 2 | Does the Risk Assessment take into account their age and lack of knowledge/experience | X | | | | |
| Comments/Notes | | | | | | |
| WORK AT HEIGHT | | | | | | |
| 1 | Have all work at height tasks been identified? | X | | | | |
| 2 | Have unnecessary work at height tasks been avoided? | X | | | | |
| 3 | Have all work at height tasks been fully risk assessed by a competent person? | X | | | | |
| 4 | Are work at height tasks only carried out by authorised persons? | X | | | | |
| 5 | Have all staff working at height been given a copy of the Risk Assessment and any other instruction and information necessary? | X | | | | |

Self Audit & Action Plan

| | | YES | NO | NOT SURE | N/A | ACTION REQ'D Y/N |
|---------------------------------|--|-----|----|----------|-----|------------------|
| WORK AT HEIGHT (Cont.) | | | | | | |
| 6 | Have staff working at height received any specific training necessary in the task and in the use of any equipment? | | | X | | * |
| 7 | Is suitable equipment provided to allow the work at height to be carried out safely? | X | | | | |
| 8 | Is this equipment only used/operated by competent persons? | X | | | | |
| 9 | Are appropriate measures to prevent fall from height utilised where necessary? | X | | | | |
| 10 | Are ladders individually marked? | X | | | | |
| 11 | Are ladders and step ladders formally inspected and recorded at six monthly intervals? | X | | | | |
| Comments/Notes * RO to check | | | | | | |
| VIOLENCE | | | | | | |
| 1 | Do you have procedures for dealing with violence to staff? | X | | | | |
| 2 | Are staff aware of the procedures? | X | | | | |
| 3 | Have staff received any necessary training relating to the risks of violence? | X | | | | |
| Comments/Notes | | | | | | |
| SWIMMING POOLS | | | | | | |
| 1 | Do you have normal operating procedures for the swimming pool? | X | | | | |
| 2 | Do you have Risk Assessment in place for the use of the pool? | X | | | | |
| 3 | Do you have a trained and competent person to operate the pool plant? | X | | | | |
| 4 | Are COSHH assessments in place for the use and storage of pool chemicals? | X | | | | |
| 5 | Is water quality testing taking place and are records kept? | X | | | | |
| 6 | Are regular micro-biological water tests carried out by a competent person and records kept? | X | | | | |
| 7 | Is the pool area only accessible by young people and unauthorised persons under supervision? | X | | | | |
| | NB : High Risk Curriculum Areas will be subject to more details specific audits | | | | | |
| Comments/Notes | | | | | | |