

Health & Safety Documents

<p>OCC Health & Safety Policy (Part I) http://portal.oxfordshire.gov.uk/content/public/corporate/HealthSafety/2008/final_hands_policy_part1anosignv4.pdf</p>	2008
<p>Health & Safety Policy (Part II) Edition http://portal.oxfordshire.gov.uk/content/public/LandC/Resources/healthsafe/123/part2.pdf</p>	2008
<p>Learning & Culture Health & Safety Policies and Procedures Learning & Culture  Resources  Health & Safety  Procedures </p>	Current
<p>Learning & Culture Health & Safety Action Bulletins Learning & Culture  Resources  Health & Safety  Action bulletins </p>	Current
<p>Health and Safety Guidance for School Governors and Members of School Boards Health & Safety Commission (HSC) 1998 ISBN 0 7176-1218-8</p>	1998
<p>Management of Health & Safety in Schools Health and Safety Commission (HSC) 1995 ISBN 0 7176 07704</p>	1995
<p>Managing Work Related Stress - A Guide for Managers and Teachers in School. Health & Safety Commission (HSC) 1998 ISBN 0717612929</p>	1998
<p>Health and Safety of Pupils on Educational Visits http://www.dfes.gov.uk/h_s_ev/index.htm</p>	Current
<p>Out & About with Oxfordshire 3, Learning & Culture http://portal.oxfordshire.gov.uk/content/public/LandC/Resources/healthsafe/outabout/Out_And_About_3.pdf</p>	2003
<p>Health and Safety On-Site Work Learning & Culture  Resources  Health & Safety  Procedures  On site Works </p>	2006
<p>Property Maintenance Manual, Corporate Property Group</p>	2008
<p>Developing your emergency / critical incident plan Learning & Culture  Resources  Health & Safety  Procedures  Emergency Plans</p>	2006
<p>Fire Safety Folder Learning & Culture  Resources  Health & Safety  Procedures  Fire Safety </p>	2007
<p>Water Hygiene Folder, Oxfordshire County Council, Corporate Property Group</p>	2005
<p>Safety Practice in Physical Education British Association of Advisers & Lecturers in Physical Education. (BAALPE) 2004 ISBN 1 902523 68 7</p>	2004
<p>Make it Safe National Association of Advisers & Inspectors in Design Technology (NAAIDT) (Primary)</p>	2001
<p>Be Safe Association for Science Education (ASE) (Primary), 3rd Edition. ISBN 0 86357 081 X</p>	2001

Essentials of Health & Safety at Work

Health & Safety Executive (HSE) 1994. ISBN 0 7176 0716 X

1994

Safety in Science Education DfEE

Department for Education and Employment 1996 ISBN 0 11 270915 (Secondary)

1996

Topics in Safety

Association for Science Education 2001 (ASE) ISBN 086357 3169 (Secondary)

2001

Code of Practice for Health & Safety in Workshops of Schools and Similar Establishments

British Standards Institution BS 4163:2000

2000

HSE BOOKS, P O Box 199, Sudbury, Suffolk, CO10 6FS,

Tel: 01787 881 165

Fax: 01787 313995

Emergency Contact Persons

Appointed Persons:

Chair of Governors	Richard Howard	Tel: 01869 241403
Headteacher	Sean O'Sullivan	Tel: 07595 710837
Site Manager	Chris Aherne	Tel: 07986 385119
Clinical Nurse Specialist	Kerry Annesley	Tel: 07775 525136
Fire Warden:	Chris Aherne	Tel: 07986 385119
H&S Governor Representative:	Esther Palmer	Tel: 07912 325385

Emergency Isolation Points: Location

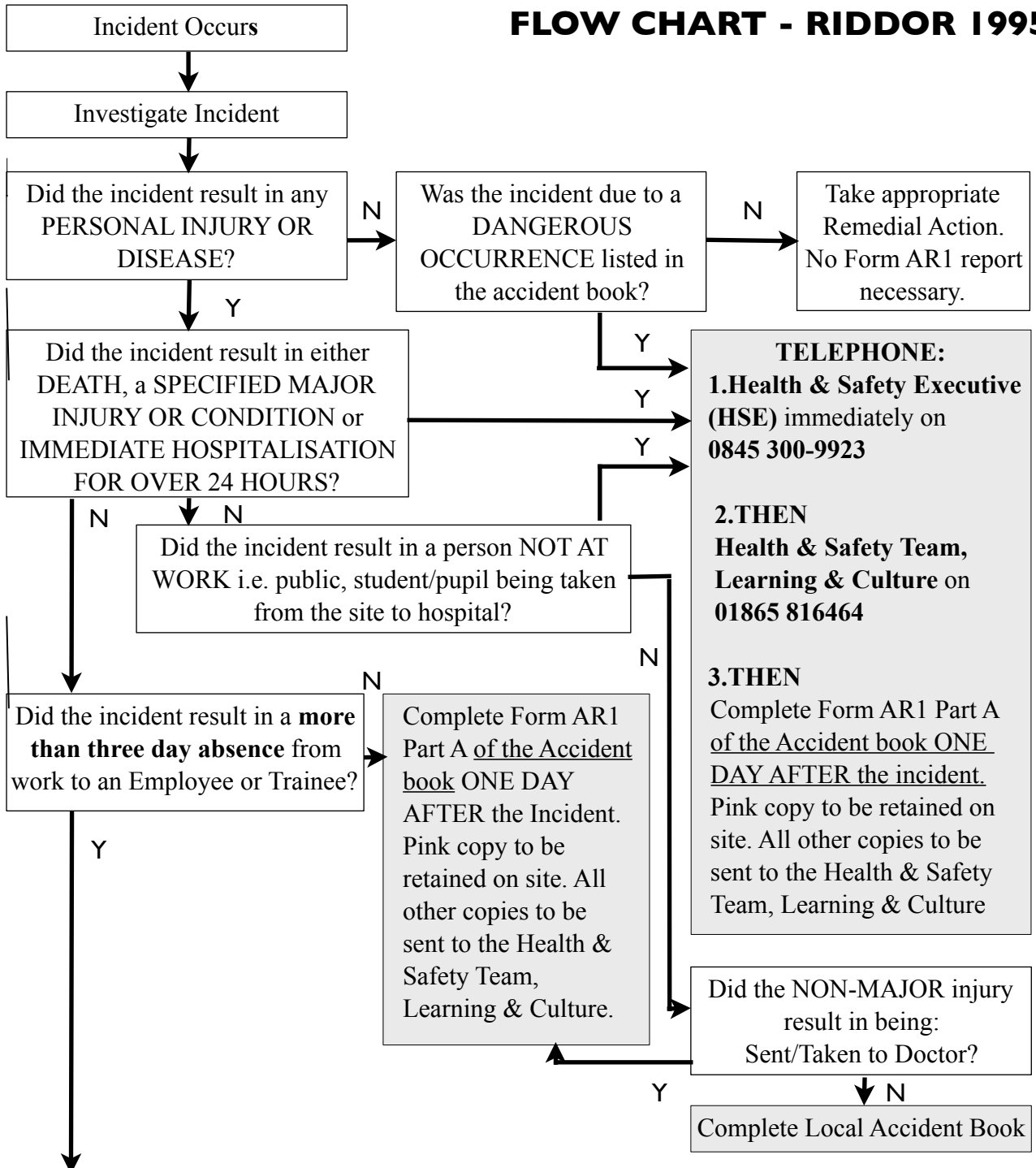
Water Isolation Point:	Cellar, boiler room Boiler room outside 5fg Plant room, GC PE cupboard
Electricity Isolation Point:	Cupboard in DT room Plant room, GC
Gas Isolation Point:	Cellar, boiler room Boiler room outside 5fg Plant room, GC Hydrotherapy pool plant room Outside hall kitchen door

Useful Numbers for Major Emergencies:

Fire Service Control	Tel: 01865 842999
Carillion (Property and Services)	Tel: 0808 1566659
Electrical & Heating Engineer:	Tel: 0800 7314637
Property Maintenance Surveyor:	Tel: 0800 7314637

Reporting Procedures for Injuries, Work Related Diseases and Dangerous Occurrences Regulations 1995

FLOW CHART - RIDDOR 1995



AR1 PART B - Time off following work related ill health/incident/injury at work. If the person is an **EMPLOYEE**, or a **TRAINEE**, and is **ABSENT FROM WORK**, whether immediately, or at a later stage, **FOR MORE THAN 3 DAYS** resulting from a work related incident, injury or ill health, complete Form **AR1 Part A and Part B**. Pink copy to be retained on site. All other copies to be sent to the Health & Safety Team, Learning & Culture.

**Reporting Procedures for Injuries,
Work Related Diseases and Dangerous
Occurrences Regulations 1995**

REPORTABLE MAJOR INJURIES

1. **ALL FATALITIES**
2. **MAJOR INJURIES**
 1. Any **FRACTURE** other than to fingers, thumbs or toes
 2. Any **AMPUTATION**
 3. **DISLOCATION** of the SHOULDER, HIP, KNEE or SPINE
 4. **LOSS OF SIGHT** (whether temporary or permanent)
 5. A **CHEMICAL** or **HOT METAL BURN** to the EYE or any **PENETRATING INJURY** to the EYE
 6. Any **INJURY** resulting from an **ELECTRIC SHOCK** or **ELECTRICAL BURN** (including any electrical burn caused by arcing or arcing products) leading to **UNCONSCIOUSNESS** or requiring **RESUSCITATION** or **ADMITTANCE OT HOSPITAL for more than 24 hours**
 7. **ANY OTHER INJURY**
 - a) leading to: **HYPOTHERMIA, HEAT-INDUCED ILLNESS** or to **UNCONSCIOUSNESS**
 - b) requiring **RESUSCITATION**
 - c) requiring **ADMITTANCE TO HOSPITAL for more than 24 hours**
 8. **LOSS OF CONSCIOUSNESS** caused by **ASPHYXIA** or **EXPOSURE** to a **HARMFUL SUBSTANCE** or **BIOLOGICAL AGENT**
 9. Either of the following conditions which result from the **ABSORPTION OF ANY SUBSTANCE** by **INHALATION, INGESTION** or **THROUGH THE SKIN**
 - a) leading to: **ACUTE ILLNESS** requiring **MEDICAL TREATMENT**
 - b) or **LOSS OF CONSCIOUSNESS**
 10. **ACUTE ILLNESS** requiring **MEDICAL TREATMENT** where there is reason to believe that this resulted from **EXPOSURE** to a **BIOLOGICAL AGENT** or its **TOXINS** or **INFECTED MATERIAL**

ACTION REQUIRED

1. **IMMEDIATELY Telephone: Health & Safety Executive 0845 300 9923**
2. **Telephone: Learning & Culture Health & Safety Team 01865 816464**
3. **Complete Accident Report Form ARI and send to Health & Safety Team.**

N.B. Failure to comply may lead to criminal proceedings.

RISK ASSESSMENT RECORD (RAI)

Activity / Process / Operation (If the activity or process is complex it may require more than one risk assessment)	
Identify the hazards (anything that can cause harm):	
Who might be harmed and how? ¹	Estimate risk level H/M/L ²
What measures are in place to reduce the risk? ^{3 4 5 6 7 8 9 10 11}	Estimate risk level now ¹²
What further action is needed to reduce the risk? (State actions)	Specify dates

1. Consider the number of people exposed
2. Estimate initial risk High, Medium or Low
3. Has all the health and safety information been obtained including policies, procedures etc?
4. Can the hazard be eliminated or safer substitution achieved?
5. Consider all necessary control measures including procedural and technical controls
6. Are controls to the required standard and regularly maintained?
7. Have emergency action plans been considered?
8. Is training and instruction adequate and information available?
9. Is supervision adequate?
10. Is PPE required?
11. Is health surveillance required?
12. Estimate risk level achieved – High, Medium or Low

Relevant employees who need to be informed of this risk assessment (employees to sign when they have read).

Name	Signature	Name	Signature
1		8	
2		9	
3		10	
4		11	
5		12	
6		13	
7		14	

Where more than 14 employees need to be informed how will this be done?

Any new or revised Risk Assessment will be notified to staff during monthly Staff Meetings. Any staff not present are required to read minutes of the meeting afterwards. All Risk Assessments can be found as printed copies in the School Office, and digitally on the school server in the Master Templates folder, labelled 'Risk Assessments'.

How will you ensure it has happened?

Through minutes of Staff Meetings.

Monitoring Arrangements (eg Before each use/occasion, during handover/staff meeting, weekly, monthly, quarterly, annually during site inspection etc)	
Review Date/Frequency	
Name of Assessor	Signed (Manager / Head of Establishment / Setting)
Job Title	Name
Date of Assessment	Date

CPMI

CONTRACTOR PERFORMANCE MONITORING FORM

Monitoring Form

For Use by School Governors, Management Committees & Heads of Establishment

Use this form to comment generally on:

Contractor's overall performance, upon completion of a project or to report any specific problems.

Name of Contractor:

Details of Contract:

Quality of Work	V. Good (5)	Good (4)	Average (3)	Poor (2)	V.Poor (1)
Attitude & Performance	V. Good (5)	Good (4)	Average (3)	Poor (2)	V.Poor (1)
Health & Safety Standards	V. Good (5)	Good (4)	Average (3)	Poor (2)	V.Poor (1)

Overall Comment/Problem(s):

.....
.....
.....
.....

Signed: Post held: Date:

Establishment Name: Tel:

When an establishment has used a County Council approved contractor and wishes to comment on their performance, whether good or compliant, a copy of form CPMI should be sent to the County Council.



APPENDIX G

October 2016

FORM HR I

One copy to be retained by the establishment after approval

One copy to be returned to hirer after approval

Applications must be accompanied by the correct payment and should be made at least 21 days in advance to the Head of Establishment. Applicants are advised not to make any arrangements regarding their booking until they receive a confirmation copy of this application.

Frank Wise School, Hornbeam Close, Banbury, Oxon OX16 9RL				
Name of Hiring Organisation/ Individual Hirer				
Name and Address of Contact Person			Tel. (Day) Tel. (Eve.) Email	
Type of Use: (e.g. Public Event/Club Meeting/Vocational Study/Personal Event)			Age Range	
Days and Dates of Hire			No. of occasions	
ACCOMMODATION REQUIRED (Details of Facilities Booked/Specify names/number as appropriate)	Times From - To	Fixed rate per session	Rate per hire	Charges
Hydrotherapy Pool with Hall				
Hydrotherapy Pool				
Hall				
iWise				
Other facilities (give details)				
VAT has been charged where appropriate and is included in the total charge. A VAT invoice may be issued, if required, upon separate application by the hirer	TOTAL HIRING CHARGE PUBLIC LIABILITY INSURANCE FEE* (if applicable) TOTAL CHARGE			£

Cheques to be made payable to: **Frank Wise School**

And enclosed with this application.

I have read, and will ensure observance by persons using the premises of, the Council's and School's conditions of hire (copies enclosed to be retained by hirer). I agree to be responsible for making good any loss or damage to the premises or equipment resulting from this hiring, and will ensure that the premises are in good order.

Insurance Cover (delete (a) or (b) which is not applicable):

a) I have arranged public liability insurance cover for a minimum of £5.0 million.
I enclose a copy of the certificate of insurance.*

OR

b) I agree to pay the additional fee for public liability insurance cover arranged by Oxfordshire County Council.

Name (print in full)

Signature

Date

Position held:

For official use

I approve this hire on behalf of the Governors of Frank Wise School and confirm that any necessary licence and insurance cover are held* for the purpose of the hire.

Name Sean O'Sullivan

Signature

Date

Position Held: Headteacher