OneSchool Global

Health and Safety Policy

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Health and Safety Policy

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Policy author Rui Martins, Regional Facilities Manager *Updated by Crysp Ltd (Incumbent WHS consultant)*	**Approved by:** OneSchool Global UK Board on 09/2026	
Enquiries contact: support@uk.oneschoolglobal.com	**Associated documents** Risk Assessment Policy Lockdown Evacuation Procedures Whistleblowing Policy Health and Safety Statement of Intent Supervision of Students Policy Work Health Safety Policy Fire Safety Prevention Policy Security and Visitors Policy Environmental Policy Inclement Weather Procedure Emergency Management and Business Continuity Plan	

1. POLICY STATEMENT

1.1 OSG UK and its affiliated Campuses recognise that they have a legal duty of care to protect the health, safety and welfare of its employees, students and others who may be affected by the organisation's and Campus' activities.

1.2 OneSchool Global UK recognises that the legal framework differs between England, Wales, Scotland and Northern Ireland. It will ensure that its common organisational arrangements are supported by jurisdiction specific procedures, competent advice and compliance monitoring where the applicable legislation or regulatory framework differs.

1.3 In order to discharge its responsibilities, OSG UK will:

1.3.1 Comply with the requirements of the global standards set out in the OneSchool Global Work Health and Safety Policy approved by the Board of Trustees.

1.3.2 Bring this Policy Statement to the attention of all employees.

1.3.3 Carry out and regularly review risk assessments to identify proportionate, workable, and effective ways of reducing risk.

1.3.4 Communicate and consult with employees on matters affecting their health and safety.

1.3.5 Comply with the health and safety, fire safety, education, safeguarding, food safety and related legal and regulatory requirements applicable in England, Wales, Scotland and

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Northern Ireland, according to the location and activities of each campus.

1.3.6 Eliminate risks to health and safety, where practicable, through selection and design of materials, buildings, facilities, equipment, and processes.

1.3.7 Secure the health and safety of students, teachers, and volunteers on Campus trips.

1.3.8 Encourage staff to identify and report hazards so that everyone contributes towards improving safety.

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1.3.9 Ensure that emergency procedures are in place for dealing with all health and safety issues.

1.3.10 Maintain premises and provide and maintain safe plant and equipment.

1.3.11 Engage contractors who demonstrate due regard to health and safety matters.

1.3.12 Provide adequate resources to control the health and safety risks arising from each Campus' activities.

1.3.13 Provide adequate training and ensure that all employees are competent to do their tasks.

1.3.14 Provide an organisational structure that defines the responsibilities for health and safety.

1.3.15 Provide information, instruction, and supervision for employees to ensure that all its employees are aware of their legal duties and responsibilities.

1.3.16 Monitor performance regularly and revise policies and procedures to pursue a progra mme of continuous improvement.

1.4 Where risks are identified that cannot be eliminated, they will be minimised by substitution, the use of physical controls or, through safe systems of work or, as a last resort, use of personal protective equipment.

1.5 This Health and Safety Policy will be reviewed at least annually and revised as necessary to reflect changes to the Campus activities or legislation. Any changes to the Policy will be brought to the attention of all employees.

2. ROLES AND RESPONSIBILITIES

2.1 Campus Support Team

2.1.1 OneSchool Global UK, as the employer, retains overall legal responsibility for health and safety. The Regional Board provides strategic governance, leadership and oversight and must satisfy itself that suitable organisational arrangements, competent support and adequate resources are in place.

2.1.2 The Board delegates responsibility for the day-to-day implementation of this policy through the relevant organisational management structure, including the Campus Principal and designated Campus Premises Manager. Delegation of specific functions does not remove the employer's overall responsibility or the Board's governance and oversight responsibilities.

2.1.3 The Campus Support Team will ensure that:

2.1.3.1 They provide a lead in developing a positive health and safety culture throughout the Campus.

2.1.3.2 Any decisions reflect its health and safety management intentions.

2.1.3.3 Adequate resources are available for the implementation of health and safety.

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2.1.3.4 An effective management structure for the implementation of health and safety is established.

2.1.3.5 They will promote the active participation of employees in improving health and safety performance.

2.1.3.6 Adequate guidance is provided for the safe management of educational trips and activities.

2.1.3.7 The health and safety performance of the Campus is reviewed annually following termly reports from the Campus Premises Manager and safety improvements are planned for the following year.

2.1.3.8 They are provided with enough information to ensure the Campus Premises Manager is performing their role.

2.1.3.9 Campus Premises Managers are adequately competent to undertake their role and suitable training will be provided where necessary.

2.1.3.10 The Campus Support Team will ensure that health and safety performance is considered across all UK campuses and that signification differences in the legal and regulatory requirements of England, Wales, Scotland and Northern Ireland are identified, communicated and implemented.

2.1.3.11 The Campus Support Team will receive sufficient information on significant risks, incidents, enforcement contact, overdue statutory compliance actions and emerging legal requirements to enable effective oversight and informed decision making.

2.2 Campus Premises Manager

2.2.1 The Campus Premises Manager is a member of staff who provides a link between the Campus Support Team and Campus Principal. The Campus Premises Manager is the campus-level coordinator for the implementation and monitoring of the organisation's health and safety arrangements. The role supports the Campus Principal, the CST and other responsible managers but does not replace the legal responsibilities of OneSchool Global UK as the employer or those of persons who control premises, activities, departments or work.

2.2.2 The identity of any responsible person, duty holder or appropriate person for the purposes of fire safety or other legislation will be determined by the applicable legislation, the extent of control exercised and the management arrangements at the campus.

2.2.2.1 Any duties allocated to them by the Campus Support Team are completed.

2.2.2.2 Regular updates are given to the Campus Support Team to ensure they are aware of any health and safety issues, actions or concerns raised.

2.2.2.3 They are available to provide support to the Campus Support Team and other employees in health and safety matters and maintaining campus compliance using the Online Safety Portal (Donesafe).

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2.2.2.4 They are suitably trained and competent to complete any tasks they are asked to perform.

2.2.2.5 The Health and Safety Policy is implemented, monitored, developed, communicated effectively, reviewed, and amended as required.

2.2.2.6 A health and safety plan of continuous improvement is created and that progress in achieving agreed targets is monitored.

2.2.3 Suitable and sufficient funds, people, materials, and equipment are provided to meet all health and safety requirements.

2.2.3.1 The Campus Principal is provided with support to enable health and safety objectives to be met.

2.2.3.2 A positive health and safety culture is promoted and that employees develop a pro-active safety culture which will permeate throughout the Campus.

2.2.3.3 A system of communication and consultation with employees is established.

2.2.3.4 The Campus Support Team is kept informed of the implications in changes in health and safety legislation and best practice that impact on the Campus and its activities.

2.2.3.5 Health and safety standards at events run on the premises out of Campus time are managed in line with the Campus' health and safety policies and procedures.

2.2.3.6 Effective training programmes have been put into place and are actioned to ensure
staff are competent to undertake their roles, all relevant staff should be trained in how to access the Online Safety Portal (Donesafe) and the
health and safety documents.

2.2.3.7 The Campus buildings, plant and equipment are maintained in a safe condition and records updated on the Online Safety Portal (Donesafe).

2.2.3.8 Welfare facilities provided are maintained in a satisfactory state.

2.2.3.9 All contractors are reputable, are competent for the work they complete, demonstrate a good health and safety record, and are informed of the Campus' health and safety rules and procedures.

2.2.3.10 The Campus Support Team will ensure that regular inspections and audits are undertaken to monitor health and safety standards and provide a healthy and safe workplace. An in-house audit is undertaken on a monthly-basis and recorded on the Online Safety Portal (Donesafe). Any issues found will be reported to the Campus Support Team and appropriate action taken.

2.2.3.11 An annual report on the safety performance of the Campus is presented to the Trust.

2.2.3.12 Monthly monitoring reports on the safety performance of the Campus are presented to the Trust.

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2.2.3.13 The health, safety, welfare, premises and standards applicable to the campus are identified and complied with. These include the relevant independent school standards and inspection arrangements in England, Wales, Scotland and Northern Ireland.

2.2.3.14 For campuses in England, this includes the Education (Independent School Standards) Regulations 2014 and the applicable ISI inspection framework. For campuses in Wales, Scotland and Northern Ireland, the relevant national registration, inspection and school standards requirements will apply.

2.2.3.15 There is input into the Campus Improvement Plan with regard to H&S facilities and management.

2.2.3.16 A full and proper formal handover of duties is undertaken with the incoming Health and Safety (H&S) appointed person and the Regional Support Office is informed of these changes to personnel.

2.2.3.17 They are aware of their responsibilities as Campus Premises Manager.

2.3 Campus Principal

2.3.1 The Campus Principal has a responsibility to ensure compliance with health and safety legislation for the day-to-day running of the Campus but may delegate the responsibility for implementation to Heads of Departments (any delegation must be approved by the H&S appointed person prior to any action).

2.3.2 The Campus Principal will assist the H&S appointed person/Premises Manager to ensure that:

2.3.2.1 The Health and Safety Policy is implemented, monitored, developed, communicated effectively, reviewed, and amended as required.

2.3.2.2 A health and safety plan of continuous improvement is created and that progress in achieving agreed targets is monitored.

2.3.2.3 All relevant staff are trained in how to access the Online Safety Portal (Donesafe) and the health and safety documents.

2.3.2.4 Employees designated with health and safety responsibilities are provided with training and support to enable health and safety objectives to be met.

2.3.2.5 A positive health and safety culture is promoted and that employees develop a pro-active safety culture which will permeate into all activities undertaken and reach all personnel.

2.3.2.6 A system of communication and consultation with employees is established.

2.3.2.7 Regular meetings are held where health and safety issues can be discussed, progress made against objectives, plans monitored, and actions decided in conjunction with the Campus Support Team.

2.3.2.8 Risk assessments are completed, recorded, reviewed regularly and any change s are brought to the attention of staff who may be affected.

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2.3.2.9 Completed risk assessments are implemented and any action required is monitored.

2.3.2.10 Health surveillance as identified by COSHH, or risk assessments are carried out.

2.3.2.11 Health and safety records are kept up to date.

2.3.2.12 Health and safety notices are displayed.

2.3.2.13 Accidents, incidents, ill health, dangerous occurrences and 'near misses' are promptly recorded in the Online Safety Portal (Donesafe); where required serious incidents, accidents, dangerous occurrences, and near misses are thoroughly investigated and reported where relevant to the H&S Officer, the Campus Principal and the RDO.

2.3.2.14 Contact with external organisations such as the emergency services is coordinated.

2.3.2.15 Adequate arrangements for fire and first aid are established, to include maintaining the Fire records and Incident/Accident reports logged as required, in the Online Safety Portal (Donesafe).

2.3.2.16 A procedure is established for the reporting of health and safety issues and that issues raised are considered for action.

2.3.2.17 A report on the safety performance of the Campus is prepared with the H&S appointed person to present to the Trust at the end of every month.

2.3.2.18 Students have opportunity within the curriculum and Campus environment to be informed of health and safety issues and encouraged to promote a safe and secure environment.

2.4 Head of Department / Line Managers / Subject Leaders / Teachers

2.4.1 Head of Department / Line Managers / Subject Leaders / Teachers will ensure that in their areas of responsibility:

2.4.1.1 They actively promote the implementation of the Health and Safety Policy

2.4.1.2 Students and staff have adequate supervision to work safely, providing increased supervision for new and young workers.

2.4.1.3 Safe systems of work are developed and implemented.

2.4.1.4 Risk assessments are completed, recorded, and regularly reviewed.

2.4.1.5 Audits, checks and inspections are completed in line with risk assessments and the health and safety management system. Curriculum leaders may be required to undertake termly audits to check the management of health and safety within their subject areas.

2.4.1.6 Promptly report accidents, incidents, ill health, dangerous occurrences and 'near misses' in the Online Safety Portal (Donesafe); where required serious incidents, accidents, dangerous occurrences and near misses are thoroughly

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investigated and reported where relevant to the H&S appointed person, the Campus principal and the RDO. They communicate and consult with staff on health and safety issues.

2.4.1.7 They encourage students and staff to report hazards and raise health and safety concerns.

2.4.1.8 Safety training for staff is identified, undertaken, and recorded to ensure staff are competent to carry out their work in a safe manner.

2.4.1.9 Issues raised by anyone concerning safety are thoroughly investigated and, when necessary, further effective controls implemented.

2.4.1.10 Work equipment is maintained in a safe condition.

2.4.1.11 Statutory examinations are planned, completed, and recorded.

2.4.1.12 Where personal protective equipment (PPE) is provided, staff and students are instructed in its use and records are kept up to date in the Online Safety Portal (Donesafe).

2.4.1.13 Adequate arrangements for fire and first aid are established.

2.4.1.14 Any safety issues that cannot be dealt with are referred to the Campus Principal / Campus Support Team for action.

2.4.1.15 Hazardous substances are stored, transported, handled, and used in a safe manner according to manufacturers' instructions and the COSHH assessment.

2.4.1.16 Agreed safety standards are maintained, particularly those relating to houseke eping.

2.4.1.17 All relevant safety documents including CLEAPSS, DfE Guides, etc. are maintained and made available to all employees.

2.4.1.18 Health and Safety rules are followed by all staff, students, and visitors.

2.5 Premises Manager

2.5.1 The Premises Manager will ensure that:

2.5.1.1 The Campus premises and equipment are maintained in a safe condition and a ppropriate records are kept.

2.5.1.2 The schedule of statutory examinations of plant and equipment is maintained in line with legal requirements and defects addressed as appropriate.

2.5.1.3 Communication with the H&S appointed person/Premises Manager and Campus Principal is effective and gives them information on any issues that may affect health and sa fety.

2.5.1.4 A system is in place to control and monitor the Health and Safety of volunteers and contractors.

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2.6 Transport Manager

2.6.1 The Transport Manager, is accountable for all matters concerning the health and safety of students and other personnel travelling on buses and other Campus owned or organized transport, including ensuring that:

2.6.1.1 OSG UK Campus vehicles are maintained in a safe condition and that log book s kept up to date.

2.6.1.2 Insurance for OSG UK fleet and pool car vehicles are adequate, current, and up to date.

2.6.1.3 MOT tests are carried out as and when required and certificates are kept on file

2.6.1.4 Vehicles are currently licensed, including bus permits where appropriate.

2.6.1.5 Drivers of Campus vehicles are adequately trained and that records are kept up to date.

2.6.1.6 Regular (daily) vehicle checks are completed and kept on file.

2.6.1.7 All drivers must undergo the appropriate safeguarding, identity, eligibility and criminal record checks required for their role and jurisdiction. This will normally involve the Disclosure and Barring Service in England and Wales, Disclosure Scotland and the Protecting Vulnerable Groups Scheme in Scotland, or AccessNI in Northern Ireland. Evidence of the required checks must be recorded in the campus's applicable safeguarding record.

2.6.1.8 The Transport Manager oversees the Bus Coordinators and is responsible for ensuring that all parties comply with the instructions set out in OneBus Ltd Handbook and any Campus owned/ managed or operated vehicles are suitably insured and maintained.

2.7 Bus Coordinator

2.7.1 Each Campus has a Bus Coordinator who will ensure that:

2.7.1.1 Before preparing a driver rota that every driver is approved for driving a OneBus or Campus operated vehicle.

2.7.1.2 Driver rotas, phone numbers and passenger lists are compiled and issued to the appropriate persons.

2.7.1.3 The driver checklist is received from the drivers and the end of week report is completed with mileage and checks submitted online to OneBus or held at the Campus if Campus owned/ operated vehicle.

2.7.1.4 Risk assessments are completed on pickups, drop offs and route planning.

2.7.1.5 Seats are allocated to students and two bus monitors are appointed to report any unsatisfactory behaviour.

2.7.1.6 Buses are fitted with a fire extinguisher, high visibility safety vest, safety reflectors, sick bags, stocked first aid kit and driver checklists/ report sheets.

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2.7.1.7 Unsatisfactory behaviour is reported to the Transport Manager immediately.

2.7.1.8 Arrangements are made for vehicle defects to be rectified as soon as possible.

2.7.1.9 Secure parking is available when the bus is not in use.

2.8 Event Manager/ Coordinator

2.8.1 The Event Manager/ Coordinator is responsible for ensuring that all fundraising and all other similar events run on Campus premises are managed in line with the Health and Safety Policy, and in particular to ensure that:

2.8.1.1 An event notification form is completed and sent to the Insurance Brokers / Regional Support Office at least 7 days prior to an event to ensure adequate insurance cover is in place.

2.8.1.2 Risk assessments for each event are completed, implemented, and brought to the attention of key personnel.

2.8.1.3 The event is suitably planned in good time to ensure that all issues have been considered and key personnel advised of what is happening.

2.8.1.4 Emergency arrangements are developed for all events as appropriate.

2.8.1.5 The provision of adequate first aid facilities are provided.

2.8.1.6 The provision of adequate insurance/licenses are in place.

2.9 Educational Trips and Visits – Trip Leader

2.9.1 The Trip Leader will ensure that:

2.9.1.1 Prior approval for each visit is obtained following the educational visits procedur e.

2.9.1.2 Risk assessments are carried out for educational trips and that appropriate safety measures are in place and that training needs have been addressed.

2.9.1.3 Trips and visits have a specific and stated objective, and that the Campus Principal/ trip leader follows the Health and Safety Policy and guidelines.

2.9.1.4 An educational visit should be notified on the Smartsheet link to the Regional S upport Office.

2.10 First Aider

2.10.1 The First Aiders will ensure that:

2.10.1.1 First aid treatment and guidance/ advice are given to any staff members, students and members of the public who may need it.

2.10.1.2 All accidents that required first aid treatment are promptly recorded in the Online Safety Portal (Donesafe) and where in place, the accident book is completed.

2.10.1.3 They are suitably trained and qualified in line with the First Aid Policy to perfor m their duties.

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2.11 Employees and Volunteers

2.11.1 All employees and volunteers must:

2.11.1.1 Take reasonable care of their own safety.

2.11.1.2 Take reasonable care of the safety of students under their control and others affected by their actions.

2.11.1.3 Observe the safety rules.

2.11.1.4 Comply with the Health and Safety Policy and Procedures

2.11.1.5 Conform to all written or verbal instructions given to them to ensure their personal safety and the safety of others.

2.11.1.6 Make themselves aware of any risk assessments and controls that should be implemented in relation to their area of work.

2.11.1.7 Dress sensibly and safely for their working environment or occupation.

2.11.1.8 Conduct themselves in an orderly manner in the workplace and refrain from any antics or pranks.

2.11.1.9 Use safety equipment and/or protective clothing as directed.

2.11.1.10 Avoid improvisations of any kind which could create an unnecessary risk to their personal safety and the safety of others.

2.11.1.11 Ensure all equipment is in good condition and report defects.

2.11.1.12 Report any safety risk, hazard, or malfunction of any item of plant or equipment.

2.11.1.13 Promptly report incidents, injuries, ill health, dangerous occurrences and 'near misses' in the Online Safety Portal (Donesafe).

2.11.1.14 Attend any health and safety training as requested.

2.11.1.15 Observe the fire evacuation procedure and the position of all fire equipment and fire exit routes.

2.12 OSG UK Regional Support Office

2.12.1 The Regional Support Office will ensure:

2.12.1.1 The implementation of the Health and Safety programme is monitored in all affiliated Campuses.

2.12.1.2 The audit schedule is rolled out across all Campuses.

2.12.1.3 Communication links with the appointed Health and safety consultants are maintained.

2.12.1.4 That any accidents, incidents, ill health, dangerous occurrences and 'near misses' logged in the Online Safety Portal (Donesafe) are monitored, where required investigated and reported to the enforcement authorities.

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2.12.1.5 An annual review of the Health and Safety Policy and Procedures is carried out in conjunction with the appointed Health and safety consultants.

2.13 OSG UK Regional Facilities Manager

2.13.1 The Regional Facilities Manager will work with the person(s) based at each OSG UK Campus who are responsible for the buildings maintenance to ensure that:

2.13.1.1 That site boundaries are fully maintained to deliver a secure site that safeguards the welfare of the students at all times.

2.13.1.2 The CCTV installed at the site meets OSG UK standards and is properly maintained and managed.

2.13.1.3 Access control to the buildings is effective and prevents unauthorised entry.

2.13.1.4 Procedures for lockdown and/or lockout in the event of an emergency are in place and can be implemented to ensure the safety of all staff, students, volunteers, and visitors.

2.13.1.5 Electrical testing is carried out at the required frequency (annual Portable Appliance Testing and five yearly installation testing) and that certification is correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.6 That annual Gas Safety checks are carried out on sites that have gas installations and correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.7 The presence of Asbestos within the fabric of the building is properly recorded and managed in accordance with regulation and correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.8 Installed water systems are properly maintained e.g., water storage tanks flushed
through, and legionella checks undertaken and correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.9 Any other specific requirements required for compliance purposes are correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.10 Installed fire alarm systems meet standards and are properly maintained and tested at the required frequency, and correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.11 Installed burglar alarm systems are fully working and maintained, and correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.12 The agreed annual maintenance programme is effectively carried out in a timely manner and correctly recorded in the Online Safety Portal (Donesafe).

2.13.1.13 Records of the work done are retained/recorded in the Online Safety Portal (Donesafe).

2.13.1.14 All sites are consistently presented at the expected OneSchool standard of cleanliness, tidiness presentation internally and externally.

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2.13.1.15 The annual proactive property maintenance budget is delivered efficiently and within budget.

2.13.1.16 Reactive maintenance is carried out in a cost effective and appropriate mann er.

2.13.1.17 Identify and progress, in collaboration with OSG finance and Buildings leads, opportunities for centralized efficiency and procurement of maintenance, servicing and supply contracts including but not limited to:

- Fire and smoke maintenance
- Security
- Cleaning
- M&E
- CCTV/Access control
- Utilities
- Grounds maintenance
- Furniture supply
- Renewable energy opportunities

2.13.2 Health & Safety: Online Safety Portal (Donesafe) – work with the person(s) based at each OSG UK Campus who are responsible for health and safety to ensure that:

2.13.2.1 Weekly, bi-weekly, monthly and six-monthly checks are appropriately carried out and recorded in the Online Safety Portal (Donesafe).

2.13.2.2 That any accidents, incidents, ill health, dangerous occurrences and 'near mis ses' are promptly logged in the Online Safety Portal (Donesafe), and monitored where required, investigated and reported to the enforcement authorities.

2.13.2.3 That work equipment checks are carried out and correctly recorded on the Online Safety Portal (Donesafe).

2.13.2.4 That risk assessments are both written and reviewed in a timely manner for id entified risks.

2.13.3 Work with the appointed H&S Consultants / Competent Persons to develop an effecti ve working relationship with the H&S Consultants to ensure that:

2.13.3.1 Six-monthly audit visits by the Consultants are both scheduled with and attended by the relevant person(s) at each OSG UK Campus.

2.13.3.2 Those recommendations arising from audit reports are carried out in a timely manner at each campus and corrective actions recorded the Online Safety Port al (Donesafe) are updated accordingly.

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2.13.3.3 Training H&S zoom calls are scheduled and communicated out to all campuse s.

2.13.3.4 Ensuring that incidents recorded within the Online Safety Portal (Donesafe) are reviewed promptly to determine whether they meet the applicable statutory reporting criteria.

2.13.4 Coordinating access to competent health and safety assistance in accordance with regulation 7 of the Management of Health and Safety at Work Regulations 1999 in England, Wales and Scotland and regulation 7 of the Management of Health and Safety at Work Regulations (Northern Ireland) 2000 in Northern Ireland.

2.13.5 The appointment of competent health and safety assistance supports OneSchool Global UK in meeting its duties but does not transfer the employer's legal responsibilities to the appointed person.

2.13.5.1 Review of Health and Safety Policy on an annual basis.

2.13.5.2 Review of Risk Assessments in line with changes required by law or independent Campus Regulation change.

2.13.5.3 Ensuring that reportable incidents are notified within the required timescale to the relevant enforcing authority under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 in England, Wales and Scotland or the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997, as amended, in Northern Ireland.

2.13.5.4 Advice and support to RDO on the investigation and reporting incidents and injuries to the HSE under the Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 2013.

2.14 Health & Safety Consultants

2.14.1 One visit per Campus, per annum to conduct a health and safety audit and fire risk assessment.

2.14.2 Advisory service and support on H&S/Fire safety matters.

2.14.3 Fire Risk Assessment and Review process

2.14.4 Telephone advice helpline with no limit on number of calls.

2.14.5 Offsite assistance with accident investigations.

2.14.6 Access to online H&S management system – 'Online Safety Portal (Donesafe)'.

2.15 Health and Safety Rules

2.15.1 **General** – All employees and volunteers must:

2.15.1.1 co-operate with the Campus Principal in fulfilling all legal obligations in relation to health and safety.

2.15.1.2 not interfere with anything provided in the interests of health, safety, or welfare.

2.15.1.3 report any unsafe activity, item, or situation.

2.15.2 **Working Practices** - Employees and volunteers must:

2.15.2.1 not operate any item of plant or equipment unless they have been trained and authorised.

2.15.2.2 where equipment is guarded, employees and volunteers must make full and proper use of all the guarding.

2.15.2.3 not make any repairs or carry out maintenance work of any description unless competent and authorised to do so.

2.15.2.4 use all substances, chemicals, liquids etc., in accordance with Campus proced ures.

2.15.2.5 not smoke on Campus premises.

2.15.3 **Hazard / Warning Signs and Notices**

2.15.3.1 Employees and volunteers must comply with all hazard/warning signs and noti ces displayed on the premises.

2.15.4 **Working Conditions / Environment** – Employees and volunteers must:

2.15.4.1 make proper use of all equipment and facilities provided to control working con ditions/ environment.

2.15.4.2 keep exits, stairways and passageways clear, and work areas in a clean and tidy condition.

2.15.4.3 dispose of all rubbish, scrap, and waste materials within the working area, using the recycling and other facilities provided.

2.15.4.4 clear up any spillage or liquids in the prescribed manner.

2.15.5 **Protective Clothing and Equipment** – Employees and volunteers must:

2.15.5.1 use all items of protective clothing/equipment provided as instructed.

2.15.5.2 store and maintain protective clothing/equipment in the approved manner.

2.15.5.3 report any damage, loss, fault, or unsuitability of protective clothing/equipment to their supervisor.

2.15.6 **Fire Precautions** – Employees and volunteers must:

2.15.6.1 comply with all laid down emergency procedures.

2.15.6.2 not obstruct any fire escape route, fire equipment or fire doors.

2.15.6.3 not misuse any firefighting equipment provided.

2.15.6.4 report any use of firefighting equipment to their supervisor.

2.15.7 **Accidents** – Employees must:

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2.15.7.1 seek medical treatment for work related injuries they receive by contacting a designated first aider. Upon returning from treatment, they must report the incident to their Campus Principal who will in turn inform the Campus Support Team.

2.15.7.2 ensure that any accident or injury treatment is promptly and properly recorded on Online Safety Portal (Donesafe).

2.15.7.3 notify any incident in which damage is caused to property.

2.15.8 **Health**

2.15.8.1 Employees and volunteers must report any medical condition or medication that could affect the safety of themselves or others.

2.15.9 **Campus Transport** – Employees and volunteers must:

2.15.9.1 carry out prescribed checks of Campus vehicles prior to use and in conjunction with the prescribed checking procedure.

2.15.9.2 not drive or operate any vehicles for which they do not hold the appropriate driving license or permit.

2.15.9.3 drive and operate vehicles in line with the guidelines set out by the insurance company.

2.15.9.4 not carry unauthorised passengers, unauthorised loads or load vehicles above the stated capacity.

2.15.9.5 not use vehicles for unauthorised purposes.

2.15.9.6 not drive or operate vehicles if under the influence of drugs or alcohol or whilst suffering from a medical condition or illness that may affect their driving or operating ability.

2.15.10 **Rules Covering Gross Misconduct** - An employee will be liable to summary dismissal if found to have acted in any of the following ways:

2.15.10.1 A serious or wilful breach of Safety Rules.

2.15.10.2 Unauthorised removal or interference with any guard or protective device.

2.15.10.3 Unauthorised operation of any item of plant or equipment.

2.15.10.4 Unauthorised removal of any item of first aid, firefighting, or other safety equi pment.

2.15.10.5 Wilful damage to, misuse of or interference with any item provided in the interests of Health and Safety or welfare at work.

2.15.10.6 Unauthorised removal or defacing of any label, sign, or warning device.

2.15.10.7 Horseplay or practical jokes liable to cause an accident.

2.15.10.8 Making false statements or interfering with evidence following an accident or dangerous occurrence.

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2.15.10.9 Misuse of any item of equipment, utensil, fitting/fixture, vehicle, or electrical equipment.

2.15.10.10 Drive a Campus vehicle whilst under the influence of drugs or alcohol.

2.15.10.11 Deliberately disobeying an authorised instruction.

3. PURPOSE

3.1 This policy contains the health and safety information and procedures that allow OSG UK and affiliated Campuses to manage health and safety effectively. All staff members will be advised of the location of the Health and Safety Policy and the Health and Safety Notice board and will be required to sign to confirm that it has been brought to their attention. Staff who have any queries regarding the contents of this policy, should speak to the Campus Principal in the first instance.

3.2 OSG UK takes its responsibility for health and safety very seriously and is committed to a programme of progressive improvement that requires input from all its employees. Staff who see anything during their work that gives rise to a concern is positively encouraged to report it to their Premises Manager or Campus Support Team.

4. SCOPE

4.1 This policy applies to all stakeholders; safety is everyone's responsibitity. A copy of the Health and Safety Policy will be:

4.1.1 Maintained on the Online Safety Portal (Donesafe).

4.1.2 Displayed on the H&S Notice Board in the Campus.

4.1.3 Made available to all staff and volunteers.

4.1.4 Brought to the attention of visitors and contractors to the Campus site.

5. DEFINITIONS (IF APPLICABLE)

Term	Definition
Accident	An unplanned event that causes injury to persons, damage to property or a combination of both.
H&S	Health & Safety
Near Miss	An unplanned event that does not cause injury or damage but co uld do so.
Work Related Illnes s	A prescribed illness that is suffered by an employee through the course of work or from a non-employee as a result of activities carried out by the company.

5.1 **Online Safety Portal (Donesafe)**

5.1.1 Online Safety Portal (Donesafe) is a web-based system, providing a modern approach to health and safety management. Online Safety Portal (Donesafe) is a system

designed to record, store accident information, and to produce, hold and manage, risk assessments, clear due diligence trails and policy documentation. Online Safety Portal (Donesafe) monitors all work equipment and advises of impending inspections, M&E services, and maintenance.

5.1.2 All staff are made aware of Online Safety Portal (Donesafe) as part of their training and advised on where and how health and safety documentation can be accessed. Relevant staff will be classed as 'users' and have a unique username and password to the system; the dashboard provides them with access to relevant areas such as: risk assessments, policies, procedural documentation, as well as the checks to work equipment, Audits/ inspections, M&E services, and maintenance of tools/equipment.

5.1.3 OSG UK and the Appointed H&S Consultants have provided a library of information, guidance, checklists, and forms to aid with the management of health and safety in Campuses. This library sits on the Online Safety Portal (Donesafe) as the OSG UK Campuses supporting Documents module and is a reference point for anyone who nee ds further information or forms relating to health and safety. The documents have been chosen to be relevant to Campuses and where possible be OSG
UK specific, the names of documents are categorised into topic areas to make finding what you need easier.

5.1.4 References to documents are made throughout the Health and Safety Policy document to direct you to the additional information in the Supporting Documents module. You should ask for access to Online Safety Portal (Donesafe) from your Campus Principal.

5.2 Risk Assessment

5.2.1 In Campus settings it is the responsibility of the Campus Support Team and Campus Principal to ensure that the necessary risk assessments are conducted, in practice the actual assessment process may be delegated to Heads of Departments/ Subject Leaders or individual teachers.

5.2.2 General or Model risk assessments have been produced to assist with risk assessment and provide a basis for teachers or volunteers to consider their specific circumstances. Some assessments may not be relevant to your Campus and others may need customising to suit your specific location and/or work activity. Generic/Model risk assessments are available from RDO.

5.2.3 The forms are only partially completed and will need to be adapted by a competent person who can complete the rest of the form having considered the generic hazards, risks and control measures listed on the form and add any site-specific items identified. All should be amended and made specific to the Campus with the addition of the Campus name, persons undertaking assessment and the date it was undertaken.

5.2.3.1 Generic/Model risk assessments are acceptable as long as Campuses:

- Satisfy themselves that the 'model' risk assessment is appropriate to their work.
- Adapt the model to their own actual work situations.

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5.2.3.2 When completing risk assessments, it is necessary to refer to the relevant subject guides

5.2.4 Design & Technology

5.2.4.1 CLEAPSS Risk assessments in technology.

5.2.4.2 CLEAPSS has provision for generic MRATs (Generic Risk Assessments) and Safety Bulletins to support the practice of D&T lessons.

5.2.4.3 The CLEAPSS MRATs (Generic Risk Assessments) have been additionally downloaded and made available for subject teachers on the Online Safety portal (Donesafe) >> Documents >> Operations for downloading and adoption by subject teachers and other ancillary staff.

5.2.4.4 BS 4163:2021 Health and Safety for Design and Technology in Campuses and Similar Establishments – Code of Practice.

5.2.5 Art

5.2.5.1 National Society for Education in Art & Design (NSEAD) http://www.nsead.org/hsg/index.aspx

5.2.6 Physical Education

5.2.6.1 Safe Practice in Physical Education and Campus Sport http://www.afpe.org.uk/

5.2.7 Food Technology

5.2.7.1 CLEAPSS has provision for generic MRATs (Generic Risk Assessments) and S afety Bulletins to support the practice of Food Technology lessons.

5.2.7.2 The CLEAPSS MRATs (Generic Risk Assessments) have been additionally downloaded and made available for subject teachers on the Online Safety portal (Donesafe) >> Documents >> Operations for downloading and adoption by subject teachers and other ancillary staff.

5.2.8 Offsite visits

5.2.8.1 Health and Safety of Students on Educational Visits, DfE

5.2.8.2 Refer to:

- Risk assessment templates – Educational visits
- Supporting documents – Educational visits

5.3 Communication and Consultation

5.3.1 The Campus has established effective lines of communication so as to involve and consult our employees on issues affecting their health and safety and to take account of their views.

5.3.2 To achieve this objective, we will:

5.3.2.1 Display the Health and Safety Law poster in an accessible position.

5.3.2.2 Establish effective lines of communication between all employees.

5.3.2.3 Involve and consult with employees and key persons through:

- Individual conversations
- Notice boards
- Internal publications
- Staff meetings
- Health and Safety meetings
- Online Safety Portal (Donesafe)
- OSG UK Newsletters and Bulletins

5.4 Safety bulletins and alerts

5.4.1 Safety Alerts and Bulletins are used as a way of passing information to individual Campuses about key and relevant topic areas and provide guidance and best practice advice.

5.4.2 Safety Alerts are written by H&S Consultants or the Regional Support Office and emailed to the responsible person at each Campus. The person responsible will need to review the alert and then take the recommended action for the campus. Once action has been taken, th e Safety Alerts should be uploaded to the Online Safety Portal (Donesafe) – Document Library.

5.4.3 Safety Bulletins work in a similar way and provide information, but action is less critical than the Alerts, the bulletin should still be reviewed, and the information passed to relevant persons.

5.4.4 Safety Alerts and Bulletins should be reviewed as soon as practicable after they have been sent. They contain information aimed at helping Campuses manage health and safety about topic areas where issues have already been identified.

5.5 Training

5.5.1 All Campuses in conjunction with OSG UK will ensure that training is provided for all th eir staff and that such training is appropriate to their roles. This will ensure legal compliance and provide the knowledge and skills to enable staff to work safely.

5.5.2 Three categories of safety training for staff have been identified:

5.5.2.1 Induction

5.5.2.2 General

5.5.2.3 Specific

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5.5.3 Training records and certificates should be uploaded to the Online Safety Portal (Donesafe) – Document Library with appropriate dates selected for reminding users of r e-fresher training dates.

5.6 Induction

5.6.1 All new employees will undergo a health and safety induction to familiarise them with t he Campuses' safety arrangements. This will be carried out by the Campus Support Team,
Campus Principal or relevant manager and should be completed ideally within 14 days of starting. Health and Safety
induction will be provided by RDO and will include training on how to access and use the Online Safety Portal (Donesafe).

5.6.2 Refer to SUPPORTING DOCUMENTS: TRAINING – Induction checklist

5.7 General Training

5.7.1 In addition to the health and safety induction, Campus staff and relevant volunteers will also undertake the following training were deemed appropriate:

5.7.1.1 Fire Awareness Training – this is available via Flick Learning.

5.7.1.2 Fire Marshal Training – this is available via Flick Learning.

5.7.1.3 Manual Handling Training – this is available via Flick Learning.

5.7.1.4 Slips, trips, and falls – this is available via Flick Learning.

5.7.1.5 DSE training and assessment – this can be completed via Flick Learning.

5.7.1.6 Asbestos awareness Training – this is available via Flick Learning.

5.7.2 Completion is mandatory for all staff who require it based on their role and the training record will be recorded onto the Flick Learning system. A reminder will be sent to each member of staff as to when their refresher is due, the fire awareness, manual handling and DSE assessments completed via Flick Learning have a refresher period of 2 years.

5.8 Specific Training

5.8.1 Specific training can be subdivided into two main categories: job specific training and training for health & safety nominated persons.

5.8.2 Job specific training is necessary where there are significant health & safety risks attached to a specific environment, task, equipment, or role. Relevant employees therefore undergo more comprehensive training to lessen the chance of harm. For example, risk assessment training is required for those who carry out risk assessment, and the maintenance team may require working at height training.

5.8.3 The more common types of job specific training are listed in the Health & Safety Stand ards for School Campuses. Managers should then assess if other job specific training is also needed, and this should ideally
be identified at the beginning of employment or following a change of role.

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5.8.4 Training for Health & Safety nominated persons such as CAs, Fire Marshals and First Aiders must also be provided to ensure they understand their additional duties and can execute them efficiently. Occasionally such training needs can be identified at the start of
employment if the employee agrees to undertake any Health & Safety nominated perso n role.

5.8.5 The following roles require training to be completed:

5.8.5.1 Campus Support Team – requires training in how to use Online Safety Portal (Donesafe), they also may need additional training on Flick in health and safety management depending on their competency and work background.

5.8.5.2 First Aiders – all first aiders require formal training in first aid, they also need to be familiar with Incident reporting using the public link to report incidents, injuries and near misses in the Online Safety Portal (Donesafe).

5.8.5.3 Fire Marshals – all fire marshals require annual refresher training on their duties in the event of a fire, this can be carried out in-house but should be recorded. A formal fire marshal course is advisable where persons have not undertaken the role before or feel it would be beneficial.

5.8.5.4 Refer to Supporting Documents: Health & Safety Standards for School Campus

5.9 Competency Authorisation

5.9.1 Where training or experience is required before the use of specific equipment (for example wood working equipment, chainsaws, or access equipment), it is recommende d that an authorisation form is completed to record that the person has been witnessed as being competent to use the equipment. This process can be completed as a refresher and check of safe use following incidents/ accidents or after long periods of non-use.

5.9.2 Refer to Supporting Documents: Training – Competency Authorisation

5.10 Training Records

5.10.1 All health and safety training records will be maintained on the Flick Learning system; however, certificates should be uploaded and stored in the Online Safety Portal (Donesafe) – Document library. Personal training records can be viewed via your perso nal login credentials.

5.11 Training Need Review

5.11.1 Safety training for existing employees will be reviewed as required or at least annually by the Campus Support Team and as part of the audit process. It is important that appropriate safety training is provided if the role of the employee significantly chan ges; if new systems and/or processes have been introduced; if new equipment has been introduced or if new legislation dictates.

5.11.2 Other training programmes such as Food Hygiene and Safety, Design and Technolog y,

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IOSH Managing Safely and IOSH Working Safely are run, and initial enquiries should b e made to the Regional Support Office.

5.11.3 Once the training has been completed, this will be added to the individual's online training record. Refresher dates will also be inputted, as the refresher due date approaches, the online system will automatically send e-mail reminders to the Campus Support Team to ensure refresher sessions are arranged.

5.11.4 Refer to:

5.11.4.1 SUPPORTING DOCUMENTS: Health & Safety Standards for School Campus.

5.11.4.2 SUPPORTING DOCUMENTS: TRAINING – Induction checklist.

5.11.4.3 SUPPORTING DOCUMENTS: TRAINING – Competency Authorisation

5.12 Department for Education H&S Responsibility and Powers

5.12.1 The Department for Education provide guidance and information on the management of health and safety within Campuses.

5.12.2 Independent school inspection and registration arrangements differ across the United Kingdom. Each campus must identify and comply with the requirements of the relevant regulator or inspectorate. ISI requirements apply only to campuses that fall within the ISI inspection framework in England. Campuses in Wales, Scotland and Northern Ireland must comply with their respective national registration, inspection and independent school standards requirements.

5.12.3 The HSE website has an area designated to education and there is information, guidance, resources, and further assistance available.

5.12.4 Refer to HSE website: www.hse.gov.uk/services/education/index.htm

5.13 Accident, Incident and Ill-Health Recording, Reporting, and Investigation

5.13.1 This policy sets out the procedures that are to be followed when any employee, stude nt, visitor or contractor has an accident, near miss or dangerous occurrence on the Ca mpus's premises or when a work-related diseases or act of violence is reported.

5.13.2 It is important injuries, near misses, work related diseases and incidents of violence t o staff are reported as soon as possible.

5.13.2.1 To prevent further accidents under similar circumstances.

5.13.2.2 To compile statistics on accidents and identify problem areas.

5.13.2.3 To comply with the law.

5.13.3 Incidents, injuries, near misses must be promptly recorded in the Online Safety Portal (Donesafe). Incident review and Investigation are an integral part of the Incident reporti ng process, and campuses teams have the facility to initiate and assign review and investigation roles as required. RDO support is also available during this process.

5.14 Recording Incidents, Injuries and Near Misses

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5.14.1 All Incidents/Injuries and near misses must be promptly recorded in the Incident Reporting module of Online Safety Portal (Donesafe). All Incidents/Injuries should be recorded in the Online Safety Portal (Donesafe) within 7 days of the accident occurring.

5.14.2 Once the record has been added to the Online Safety Portal (Donesafe) this information will be reviewed by the relevant user to establish if further action may be necessary.

5.14.3 Each Campus should have at least one individual who is responsible for the logging Incidents in the Online Safety Portal (Donesafe). However, anyone has the ability to rep ort Incidents/Injuries and Near misses via the public link bit.ly/3RfMDs and this link is available in the First Aid List throughout the campus.

5.15 Reporting of Injuries (Accidents)

5.15.1 Certain work-related deaths, injuries, diagnosed occupational diseases and dangerous occurrences are reportable to the relevant enforcing authority. In England, Wales and Scotland, reporting will be undertaken in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013. In Northern Ireland, reporting will be undertaken in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (Northern Ireland) 1997, as amended.

5.15.2 Not every accident involving an employee, pupil, visitor or contractor is reportable. The Regional Facilities Manager, supported by the appointed Health and Safety Consultants where required, will determine reportability by reference to the applicable legislation and current regulator guidance.

5.15.3 Where an incident is reportable, the Regional Facilities Manager will coordinate notification to the relevant enforcing authority on behalf of OneSchool Global UK. The Campus Principal, Campus Premises Manager and other relevant senior personnel must provide all necessary information promptly. Copies of notifications, supporting evidence, investigation records and correspondence with the enforcing authority must be retained within the Online Safety Portal (Donesafe).

5.16 Dealing with Unprecedented Situations such as Pandemics – e.g., COVID-19

5.16.1 Where unprecedented situations arise OneSchool Global will act in the following man ner:

5.16.1.1 Follow Government guidance wherever practicable.

5.16.1.2 Undertake a risk assessment for example, operating during COVID-19 and review as necessary. This should cover all school activities.

5.16.1.3 Undertake audits where appropriate to check on compliance with the risk asse ssment.

5.16.1.4 Where staff return to work following periods of sickness screen them.

5.16.1.5 Provide suitable information for home workers and on-site staff.

5.16.1.6 Provide suitable information in key areas such as infection control and social distancing. This will cover guidance on classroom layout, layout of rest areas and communal areas for example.

5.16.1.7 Provide adequate information and instruction for staff for example in the format of posters and e-learning.

5.16.1.8 Provide information (to our staff, students and visitors) by displaying informative posters and notices in all of our sites. These will be displayed in a prominent place.

5.16.1.9 Provide suitable equipment to continue to operate such as cleaning equipment and PPE.

5.16.1.10 Review the efficacy of control measures in line with new guidance issued by t he Government or other reliable sources such as the World Health Organisation.

5.17 Investigations

5.17.1 All injury related accidents/incidents that are either notified to the Enforcing Authority or where a serious injury has occurred will be reviewed and investigated:

5.17.1.1 To ensure that all necessary information in respect of the accident or incident i s collated.

5.17.1.2 To understand the sequence of events that led to the accident or incident.

5.17.1.3 To identify the unsafe acts and conditions that contributed to the cause of the accident or incident.

5.17.1.4 To identify the underlying causes that may have contributed to the accident or i ncident.

5.17.1.5 To ensure that effective remedial actions are taken to prevent any recurrence.

5.17.1.6 To enable a full and comprehensive report of the accident or incident to be prepared and circulated to all interested parties.

5.17.1.7 To enable all statutory requirements to be adhered to.

5.17.2 The investigation will include obtaining signed witness statements, photographs, and drawings as appropriate. RDO and the H&S Consultants will offer support with the investigation process.

5.18 Who carries out any investigation?

5.18.1 Cases requiring further investigation should be referred to the CAMPUS SUPPORT TEAM and Campus Principal who will assign roles and/or investigate the Incident/Injury.

5.18.2 Remedial actions must be raised as corrective Actions and assigned to a relevant individual, who is also a used in the Online Safety Portal (Donesafe).

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5.18.3 The Campus Principal and Campus Support Team will be able to monitor the progress of the investigation, supported by the Regional Director of Operations and appointed Health and Safety Consultants.

5.18.4 A serious incident may result in contact, inspection or investigation by the relevant enforcing authority. This may include the Health and Safety Executive in England, Wales or Scotland, the Health and Safety Executive for Northern Ireland, a local authority or another relevant regulator.

5.18.5 The Campus Principal, Campus Support Team, Regional Director of Operations and appointed Health and Safety Consultants must be informed immediately of any regulatory contact. Details of visits, requests for information, verbal comments, written correspondence, notices or proposed enforcement action must be recorded and escalated in accordance with the organisation's incident and enforcement-response arrangements.

5.19 Accident Review

5.19.1 As part of the Incident reporting process, Incidents reported in the Online Safety Port al (Donesafe) will be reviewed. Some incidents will be escalated to the Campus Support Team and must be discussed in the H&S Committee to determine the nature and circumstances of the incident(s), and actions to be taken to prevent similar incidents. Depending upon their seriousness and relevance.
If required, the H&S Committee may initiate an investigation into the circumstances surrounding each or a specific incident.

5.19.2 Refer to:

5.19.2.1 SUPPORTING DOCUMENTS: Donesafe Instructions – Incidents (step-by-step guidance)

5.19.2.2 SUPPORTING DOCUMENTS: ACCIDENTS – RIDDOR HSE Guidance

5.19.2.3 SUPPORTING DOCUMENTS: ACCIDENTS – Accident Reporting Procedure

5.20 Allergens

5.20.1 OneSchool Global UK recognises that pupils with allergies may be at risk of serious illness or anaphylaxis and will maintain effective arrangements for identifying and managing those risks.

5.20.2 Each campus must implement the OneSchool Global UK Allergy Safety Policy and ensure that:

5.20.2.1 Leadership and operational responsibilities are clearly allocated.

5.20.2.2 Relevant allergy information is obtained, recorded, reviewed and communicated securely.

5.20.2.3 Individual Healthcare Plans or equivalent healthcare plans are prepared where required.

5.20.2.4 Staff receive allergy-awareness and emergency-response training appropriate to their role.

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5.20.2.5 Prescribed medication and adrenaline auto-injectors are accessible, stored appropriately and checked.

5.20.2.6 Arrangements cover classrooms, food provision, transport, educational visits, events, sports and other off-site activities.

5.20.2.7 Serious allergy incidents and near misses are recorded, investigated and used to improve arrangements.

5.20.2.8 Emergency procedures include contacting the emergency services and notifying parents or carers.

5.20.3 The legal and statutory guidance framework differs between England, Wales, Scotland and Northern Ireland. Campuses must follow the healthcare-needs and allergy requirements applicable in their jurisdiction.

5.20.4 In England, the Department for Education's Allergy Safety in Schools statutory guidance must be followed where it applies to the relevant category of school. At the date of this policy, the statutory guidance does not apply directly to independent schools. OneSchool Global UK will nevertheless adopt the principles of the guidance as its organisational standard.

5.20.5 Campuses in Wales, Scotland and Northern Ireland must follow the relevant national guidance concerning support for pupils with healthcare and medication needs. Application of the English allergy guidance in those jurisdictions will be as a OneSchool Global organisational standard and not on the basis that English statutory guidance applies outside England.

5.20.6 SUPPORTING DOCUMENT: OSG UK Allergy Safety Policy.

5.21 First Aid

5.21.1 Supporting documents: First Aid Policy

5.21.2 First-aid needs assessments and arrangements must comply with the Health and Safety (First-Aid) Regulations 1981 in England, Wales and Scotland and the Health and Safety (First-Aid) Regulations (Northern Ireland) 1982, as amended, in Northern Ireland.

5.21.3 First-aid provision for employees will be determined through a suitable first-aid needs assessment. Additional arrangements for pupils, visitors, contractors, educational visits and other school activities will be established through the organisation's duty of care, applicable education requirements and activity-specific risk assessments.

5.21.4 The assessment must consider campus size and layout, employee numbers, pupil needs, higher-risk curriculum areas, lone working, transport, educational visits, events, foreseeable absences and access to emergency medical assistance.

5.21.5 The Campus is committed to providing sufficient provision for first aid to deal with injuries that arise at work or as a consequence of Campus activities.

5.22 Infection control

5.22.1 Campus staff and students are from time to time at risk of infection or of spreading infection. Where a specific risk is identified a risk assessment will be completed. The Campus aims to minimise the risk of the spread of infection and will implement app ropriate policies and procedures.

5.23 Staff Illness and Reporting

5.23.1 Staff should notify the Campus Principal if they develop any of the following infectious diseases or symptoms:

5.23.1.1 Skin infections or exposed areas of infestation

5.23.1.2 Severe respiratory infection (e.g., pneumonia, TB)

5.23.1.3 Severe diarrhea

5.23.1.4 Jaundice

5.23.1.5 Hepatitis

5.23.1.6 Chicken Pox, Measles, Mumps, Rubella

5.23.1.7 HIV

5.23.1.8 Symptoms of infectious/respiratory diseases, such as COVID-19

5.23.2 Campus Principals will need to discuss with the individual suitable controls. In some cases, employees may need to be referred to an Occupational Health Practitioner or th eir GP for advice.

5.23.3 Staff must report any work-related ill health or diagnosed occupational disease that may be associated with their work. OneSchool Global UK will assess whether the diagnosis and relevant work activity meet the applicable statutory reporting criteria. A disease is not reportable solely because it appears on a general list; the statutory conditions concerning diagnosis, occupational exposure and work activity must also be met.

5.24 Management of Medicines for School Staff

5.24.1 Medicines should be safely stored in the interests of the safety of all stakeholders at OneSchool Global.

5.24.2 Campuses, consequently, Campuses must provide an appropriate location for personnel to store their prescriptions, only if the prescription requires medication to be taken during working hours.

5.24.3 Staff lockers would be necessary on campus to allow employees to store their medication and personal belongings (such as handbags, mobile phones, etc.). This ste p will enable compliance with the following criteria for the administration of medication in a school or whilst working as an employee during contracted hours.

5.24.4 Non-prescribed Medication

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5.24.4.1 Personal use non-prescription medication should not be accessible to students, staff, volunteers, visitors, or contractors and should be stored in a secure location.

5.24.4.2 In line with the point above, Medication should be stored in the Staff Locker located in the staff room/staff specific area or as directed in accordance with the requirements of the medication.

5.24.4.3 It is the responsibility of the staff member to keep their locker locked at all times whilst in use and to ensure the locker key is kept on their person at all times (i.e., attached securely to the lanyard) in order to prevent unauthorised access to any medication that they have stored in their locker.

5.24.4.4 Should the staff member mislay or lose their locker key, it is the staff members immediate responsibility to notify the Campus Principal and Premises Manager without fail.

5.24.4.5 Should the staff member mislay or lose their locker key, and it is not found, a n ominal fee of £10.00 for a replacement key will be charged.

5.24.5 Prescribed Medication

5.24.5.1 Details of Prescribed / Controlled Medication should be provided to the Campus Principal in confidence, who will meet with the respective employee to develop a Medication Risk Assessment and maintain a record of the arrangements in the respective Employees HR file.

5.24.5.2 The Medication Risk Assessment must include the staff name, medication name, treatment start/finish dates, list of the side effects or adverse reactions, emergency measures, and agreed protocol.

5.24.5.3 The Medication Risk Assessment is a confidential document that should only be shared with required professional staff members, such as the assigned and named CAO or assigned and named principal First Aider, so they are aware of the agre ed-upon control measures and know what to do in the event of an emergency.

5.24.5.4 Medical records, including the Medication Risk Assessment, will be kept strictly confidential and only be retained for the length of the treatment. As stated above, the main objective of this process is to provide a suitable and adequate respons e to any emergency situation and operate in collaboration with any required Emerge ncy Services by exchanging arrangements and details of any medications/treatment by a member of our staff.

5.24.5.5 It is the responsibility of the staff member to inform the Campus Principal of any changes so that records are kept up to date and the most recent versions of the Risk assessment are circulated to the relevant individuals on campus.

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5.24.5.6 Medication records including the Risk Assessment will be returned to the staff member or destroyed and disposed via the confidential waste disposal container. (This is in line with ICO/GDPR).

5.24.6 Staff will be asked to sign agreement of this procedure. If you have any concerns on the above, please speak to the Campus Principal who will consult with HR and advise.

5.24.7 Refer to Appendix 9 for further information and Generic Risk Assessment.

5.25 Occupational Health & Work-Related Stress

5.25.1 Employers have a legal duty to protect employees from stress at work by doing a risk assessment and acting on it.

5.25.2 HSE defines stress as 'the adverse reaction people have to excessive pressures or other types of demand placed on them'.

5.25.3 The wellbeing of staff is seen as an integral part of the Campus' H&S responsibilities. The CAs and Campus Principal have statutory obligations under a duty of care but also wish to promote an ethos of mutual respect and support across the staff team as a whole.

5.25.4 All staff have the right to a reasonable work-life balance and to expect appropriate support or intervention when they experience health or personal difficulties. Staff are encouraged to raise any concerns with the Campus Principal or line manager.

5.26 Fire

5.26.1 SUPPORTING DOCUMENTS: Fire Safety (Prevention) Policy

5.26.2 OneSchool Global UK will ensure that suitable fire safety arrangements are established, implemented, monitored and reviewed at every campus.

5.26.3 Fire safety legislation differs across the United Kingdom:

5.26.3.1 In England and Wales, the Regulatory Reform (Fire Safety) Order 2005, as amended, applies.

5.26.3.2 In Scotland, Part 3 of the Fire (Scotland) Act 2005 and the Fire Safety (Scotland) Regulations 2006 apply.

5.26.3.3 In Northern Ireland, the Fire and Rescue Services (Northern Ireland) Order 2006 and the Fire Safety Regulations (Northern Ireland) 2010 apply.

5.26.4 The person or body holding fire safety duties will be identified by reference to the applicable legislation and the degree of control exercised over the premises. This may include OneSchool Global UK as the employer, the owner, landlord, occupier, governing body or another person with control of all or part of the premises.

5.26.5 Each campus must have a suitable and sufficient fire risk assessment completed and reviewed by a competent person. Its findings must be implemented through a suitable action plan and supported by appropriate fire precautions, maintenance, staff information and training, evacuation arrangements, drills and monitoring.

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5.26.6 Where responsibility for premises is shared, relevant dutyholders must cooperate, coordinate and exchange information concerning fire risk and fire safety arrangements.

5.26.7 For campuses in England and Wales, all required fire safety information must be recorded in accordance with the Regulatory Reform (Fire Safety) Order 2005, as amended. This includes the fire risk assessment and its findings, fire safety arrangements, the identity of the person completing or reviewing the assessment and relevant cooperation and coordination arrangements.

5.26.8 Equivalent records required under Scottish or Northern Ireland fire safety legislation must be maintained for campuses in those jurisdictions.

5.26.9 All reasonable steps will be taken to prevent a fire occurring. In the event of fire, the safety of life will override all other considerations, such as saving property and extinguishing the fire. The details of managing fire risks and fire safety are set out in the Fire Safety (Prevention) Policy.

5.27 Liaising with Emergency Services

5.27.1 The senior person present will meet and liaise with the emergency services and any other interested parties, giving them pertinent information related to the emergency situation, such as location and details of emergency, location and presence of hazardo us and flammable materials, head count statistics, etc.

5.28 Emergency Procedures

5.28.1 Each campus must maintain a site-specific emergency plan addressing the foreseeable emergencies relevant to its premises, location, pupils and activities. This may include fire, gas escape, structural failure, hazardous-substance release, severe weather, flooding, loss of utilities, medical emergency, security threats, suspicious items, violence, terrorism, invacuation, lockdown, evacuation and public-health incidents.

5.28.2 Emergency plans must identify responsibilities, communication arrangements, assistance for people who may require additional support, liaison with emergency services, accountability arrangements, alternative accommodation and relevant business-continuity considerations.

5.28.3 Emergency procedures must be communicated, practised at a frequency determined by risk and applicable requirements, and reviewed following drills, actual incidents or significant changes.

5.28.4 Staff who are in charge of students at the Campus, or during a visit have a duty of car e
to make sure that the students are safe and healthy. They also have a common law dut y to act as a reasonably prudent parent would. Teachers should not hesitate to act in an emergency and to take life-saving action in an extreme situation.

UK Emergency Service	Emergency: Dial 999	Non-Emergency: Dial 101

Regional Director of Governance, Risk & Compliance	Will Baker	Day: 0330 055 5600	Will.baker@uk.oneschoolglobal.com
Regional Director of Operations	Brett Toole	Day: 0330 055 5600	Brett.toole@uk.oneschoolglobal.com

Insurer: UBT (Commercial/Combined)

- (Policy number: 02/ISS/0260134)
- Claims: 0345 603 8381 (8am - 6pm, Monday to Friday)

Health & Safety consultants – Crysp

- Help desk: 01274 056108 / safety@crysp.co.uk
- Chloe Rhodes, Chief Professional Services Officer: chloe@crysp.co.uk, T: 01274 056108, M: 07548 343697
- Sian Purver, National Business & Operations Manager: sian@crysp.co.uk T: 01274 056108
- Donna Storey, Senior Health and Safety Advisor: donna@crysp.co.uk, T: 01274 056108

5.29 Safety

5.29.1 The safety of students, whilst on work experience schemes, is recognised as of prime importance by OSG UK and it is important that Campuses appoint a named CST and Coordinator to action, control and assess their scheme.

5.29.2 They must also take reasonable steps to satisfy themselves that the placements they arrange will be safe. All Campuses involved in the work experience placement have responsibilities to ensure students are not exposed to significant risks to their health and safety.

5.29.3 Students on work experience placements with a host employer are regarded in health and safety law as their employees. The host employer therefore has a responsibility to ensure students are not exposed to significant risks to their health and safety.

5.29.4 Health and safety law define all those under 18 as a young person and therefore at potentially increased risk in a workplace environment due to their lack of experience and maturity.

5.29.5 For learners with learning difficulties and disabilities (LLDD) additional safeguards may be identified and thus placements should be considered, and risk assessed on an individual basis.

5.30 Key actions

5.30.1 Before a student is allowed to start on a programme of work experience the host employer must carry out a satisfactory risk assessment.

5.30.2 The Placement Employer Risk Assessment should be used for this purpose; Any risk s identified must either be controlled, or the student excluded from exposure to them.

5.30.3 The host employer must also provide the parents, or guardians, with the key findings of the risk assessment and the preventative and protective control measures introduced to minimise, or ideally eliminate any significant risks.

5.30.4 The parent or guardian must sign the risk assessment form and return it to the Camp us.

5.31 Induction

5.31.1 Students also need to be inducted by the employer on commencement.

5.31.2 The Student Induction Form should be used for this purpose. The induction should ta ke place on the day the student first attends the work placement and before the student is placed in any actual work situation.

5.32 Prohibited and Restricted Activities

5.32.1 Work experience placements must not take place where the work concerned is subje ct to a statutory restriction based on a young person's age, or is restricted more generally for activities that are:

5.32.1.1 Beyond their physical or psychological capacity.

5.32.1.2 Exposes them to substances chronically harmful to human health, e.g., toxic, or
carcinogenic substances, or effects likely to be passed on genetically or likely to harm an unborn child.

5.32.1.3 Exposes them to radiation.

5.32.1.4 Involves a risk of accidents which they are unlikely to recognise because of th eir lack of experience, training, or attention to safety.

5.32.1.5 Involves a risk to their health from extreme heat, noise, or vibration.

5.32.2 There is an exception to these restrictions. Young persons over the minimum Campu s leaving age, can carry out such work as long as it is necessary for their training, if they are supervised by a competent person, and any risk will be reduced to the lowest level that is reasonably practicable.

5.32.3 Restrictions also apply in the following cases:

5.32.3.1 Agriculture - restrictions on the employment of young people

5.32.3.2 Lead - prohibition of employment on employment in certain processes

5.32.3.3 Potteries - prohibition of employment on employment in certain processes

5.32.3.4 Wood Working Machinery - prohibition on employment of untrained young peo ple.

5.33 Preparation of and Support for Learners on Placements

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5.33.1 Campuses must brief students on:

5.33.1.1 Realistic expectations for their placement.

5.33.1.2 Supervision arrangements and health and safety responsibilities of students a nd employers.

5.33.1.3 Safeguarding arrangements

5.33.1.4 Arrangements for mid-placement visit and 'pastoral' support during the placement.

5.33.1.5 Arrangements for debriefing, assessment, and recording.

5.33.2 Campuses must make suitable arrangements to visit/monitor students on placement as they retain the duty of care for the student during the placement. The following frequency of revisits to check health and safety standards is recommended:

5.33.2.1 High Risk – at least every 12 months (1 yr.)

5.33.2.2 Medium Risk – at least every 24 months (2 yrs.)

5.33.2.3 Low Risk – at least every 48 months (4 yrs.)

5.33.3 The risk banding may need to be modified in the event of an accident, incident, concerns raised by visiting teachers, or feedback from students and/or their parents.

5.33.4 Host employers should be asked to report immediately (to a previously agreed contac t) full details of any accident involving a student.

5.33.5 Campuses must provide each student with emergency contact details for a member o f Campus staff who can be contacted should an incident occur or if significant concerns arise. This includes early mornings, evenings, and weekends, or if a student is attending their placement at irregular hours.

5.33.6 Emergency contact details must also be available and maintained in situations where a placement continues after the end of the Campus term into a holiday period.

5.34 Working hours

5.34.1 The Working Time Regulations apply to students on work placements. Students shoul d not work for more than five days in any consecutive seven-day period. However, the number of hours worked, and pattern of work is normally a matter for agreement by the placement provider, Campus, and students.

5.34.2 Students should not be asked to work excessively long hours, and should not work more than a standard eight-hour day.

5.34.3 Students may not be assigned to work during the 'restricted period' between 22:00 an d
06:00 (or after 11:00 or before 07:00 depending on the working pattern of the company)

5.34.4 Young persons are entitled to a daily rest period of at least 12 consecutive hours in each 24-hour period in which they are at work and to a weekly rest period of at least 48 hours in each seven-day period during which they are at work.

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5.34.5 Students are also entitled to rest breaks if their working time is more than four and a half hours. The rest break should be at least 30 minutes.

5.35 Safeguarding

5.35.1 All work placements and off-site activities must comply with the OneSchool Global UK Safeguarding Policy and the safeguarding requirements applicable to the jurisdiction in which the campus and placement are situated.

5.35.2 Campuses in England must have regard to the current edition of Keeping Children Safe in Education where it applies. Campuses in Wales, Scotland and Northern Ireland must follow their respective national safeguarding and child-protection legislation and statutory guidance. English safeguarding guidance must not be presented as the statutory framework for campuses outside England.

5.35.3 Refer to:

5.35.3.1 SUPPORTING DOCUMENTS: WORK EXPERIENCE – Student Induction For m

5.35.3.2 SUPPORTING DOCUMENTS: WORK EXPERIENCE – Placement RA Form

5.35.3.3 SUPPORTING DOCUMENTS: WORK EXPERIENCE – Be Safe Guidance

5.35.3.4 SUPPORTING DOCUMENTS: WORK EXPERIENCE – Vetting Form (Wales)

5.35.3.5 SUPPORTING DOCUMENTS: WORK EXPERIENCE – Policy and Forms

5.36 Educational visits

5.36.1 OneSchool Global UK will ensure that educational visits are planned, authorised, risk assessed, led and reviewed in accordance with this policy, the OneSchool Global Educational Visits Procedure and the national guidance applicable to the campus.

5.36.2 Department for Education guidance applies to campuses in England. Campuses in Wales, Scotland and Northern Ireland must follow the educational-visit requirements and recognised guidance applicable in their respective jurisdiction. Where the OneSchool Global procedure establishes a higher common organisational standard, that standard will apply unless it conflicts with the applicable national requirements.

5.36.3 Arrangements must take account of the purpose and nature of the visit, participant needs, staff competence, supervision, safeguarding, transport, first aid, medication, allergies, emergency communication, contingency arrangements, insurance and any higher-risk activities.

5.36.4 https://www.gov.uk/government/publications/health-and-safety-advice-for-schools/responsibilities-and-duties-for-schools

5.36.5 It covers:

5.36.5.1 The Law.

5.36.5.2 Assessing the Risk.

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5.36.5.3 Duties as an employer.

5.36.5.4 Duties as an employee.

5.36.5.5 Training.

5.36.5.6 Reporting injuries and accidents (RIDDOR).

5.36.5.7 Adventure activities using licensed providers.

5.36.5.8 Parental Consent for off-site activities.

5.36.5.9 Roles and Responsibilities.

5.36.6 A model or generic risk assessment may provide a starting point for a routine, low-risk visit, but it must be reviewed and adapted to reflect the actual participants, venue, travel arrangements, activities, foreseeable emergencies and current conditions. It must not be adopted without consideration of the circumstances of the individual visit.

5.36.7 Higher-risk, unfamiliar, residential, overseas or otherwise complex visits require a visit-specific assessment and additional approval in accordance with the Educational Visits Procedure.

5.36.8 To achieve its objective to ensure safety the Campus will ensure that:

5.36.8.1 All visits are educational based.

5.36.8.2 They fit within the hours of Campus (CST Permission is required for

extensions) 5.36.8.3 REC approval is required for overnight trips.

5.36.8.4 During the educational visit, all necessary School Policies apply, such as, but not limited to the Student Interaction Policy, Student ICT Policy (i.e., No mobile phones or smartwatches), Student Search Policy, Bullying and Behavioural Policies.

5.36.8.5 Campus uniform must be worn at all times, or PE Uniform except when directed by the Group Leader in charge.

5.36.8.6 The price is affordable for students and parents.

5.36.8.7 All visits are approved by the CSTs via the Educational Visit

Coordinator. 5.36.8.8 Visits do not take place on Zoom-free day, or no other school events are taking place that will be affected by the students' absence.

5.36.8.9 Visits do not normally take place within exam / study periods or lead up to this period.

5.36.8.10 All visits are planned.

5.36.8.11 All visits are conducted in line with the Campuses risk assessment for Camp us visits.

5.36.8.12 The Risk Assessment is personalised to suit the individual Educational Visit a nd reflects all activities being undertaken by the students.

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5.36.8.13 A Group Leader is appointed for each trip who will liaise with the Educational Visit Coordinator.

5.36.8.14 All employees, parent supervisors and volunteers are briefed prior to each visit, and this covers the risk assessment document.

5.36.8.15 Emergency arrangements are established for all visits and all persons are aware of these.

5.36.8.16 Within phone coverage. If not, a contact plan is in place for emergencies.

5.36.8.17 The ratio of adults to students is appropriate (a ratio of 1:20 as broad guidanc e, more in case of special needs)

5.36.8.18 Adequate insurance is in place, including evidence of 3rd party venues Publi c Liability Insurance.

5.36.8.19 Travel and Transport should be considered in the Risk Assessment including on Third Party and license checks, vehicle safety considerations if they are using staff or parents' vehicles to transport students.

5.36.8.20 Adequate child protection measures are in place.

5.36.8.21 Parents have signed consent forms on enrolment and are notified of all visits.

5.36.8.22 Arrangements are made for students with medical or special needs.

5.36.8.23 Adequate first aid is available.

5.36.8.24 Contingency plans are made covering communication, facilities, and methods whilst on Educational Visits and the emergency procedures that you have in place.

5.36.8.25 Safety during visits is monitored and reviewed.

5.37 Visit Procedure

5.37.1 The following steps outline the procedure to be followed for all visits:

5.37.1.1 At the start of each Campus year all parents will be asked to sign a letter agre eing to their child(ren) attending Campus visits throughout the Campus year.

5.37.1.2 Initial Approval by the Campus Support Team for each Campus visit planned for the Campus year.

5.37.1.3 There will be a named group leader for each visit, this will be the Campus Principal or Class Teacher who takes full responsibility for its organisation.

5.37.1.4 The Group Leader will consider whether a preliminary site visit is necessary. A preliminary visit must be undertaken where it is required by applicable national guidance, where the venue or activity is unfamiliar or higher risk, or where sufficient reliable information cannot otherwise be obtained. Where a physical preliminary visit is not reasonably practicable, the Group Leader must obtain

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sufficient information from reliable sources and record how the visit has been assessed.

5.38 Completion of a Campus visit management form

5.38.1 Notification of the proposed visit sent to the Regional Support Office on the EV Smartsheet (link below) at least 3 weeks before the planned trip: https://app.smartsheet.com/b/form?EQBCT=e9db22caf98049baae1044c4e042e2e8

5.38.1.1 Letter to parents to inform them of visit detail.

5.38.1.2 Brief staff, parent supervisors, volunteers.

5.38.1.3 Brief students.

5.38.1.4 Visit. Implement and monitor safety standards in line with risk assessment.

5.38.1.5 Review visit.

5.39 Insurance

5.39.1 OSG UK arranges a central insurance policy which covers for normal curriculum-based visits e.g., trips to museums, castles, sports centres, football pitches etc.

5.39.2 These trips are considered low risk by insurers and are covered by normal insurance and do NOT need to be advised to our insurers but must still be notified to the National Support Office via the EV Smartsheet.

5.39.3 Some activities such as Adventure Sport Activity Centres may be deemed to be of high risk and insurers insist on complete adherence to the Educational Visit Procedure when such an activity in being considered as well as the following points:

5.39.4 Assurance as part of your personalised Risk Assessment Process along with checking:

5.39.4.1 Their insurance.

5.39.4.2 They meet legal requirements.

5.39.4.3 Their health & safety and emergency policies.

5.39.4.4 Their risk assessments and control measures.

5.39.4.5 Their use of vehicles.

5.39.4.6 Staff competence.

5.39.4.7 Safeguarding.

5.39.4.8 Accommodation.

5.39.4.9 Any sub-contracting arrangements they have.

5.39.4.10 That they have a license where needed.

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5.39.4.11 Assurance that the Centre has the appropriate Public Liability Insurance and that evidence of this is retained as part of your personalised Risk Assessment Process.

5.39.4.12 As part of the Risk Assessment, you should have answers to the following questions what specific / special skills, qualifications or experience to the staff or group leader hold connected to high-risk activities. If you are relying on the Third-Party activity leader you will need evidence of competency checks on them for example experience, qualifications, accreditations, risk assessments, safety records etc.

5.39.4.13 When planning an adventure activity, you must be aware that there are further regulations surrounding certain activities.

5.39.4.14 (Visit http://www.hse.gov.uk/aala/activities.html for details on these activities). The group leader must check that the provider holds a current license as required by the adventure activities licensing regulations 2004. These regulations apply to adventure activities that take place in England, Scotland, and Wales. The type of accreditations that activity centres and staff need to hold are AALA (adventure activity licensing authority), council for outside the classroom, LOTC quality badge.

5.39.4.15 The Group Leader will make a site visit to the Centre and carry out their own Risk Assessment that is approved by the Campus Support Team.

5.39.4.16 Where a trip is likely to include water activities, it is recommended to plan boys' and girls' events separately.

5.39.5 The Educational Visit is notified to the Regional Support Office (RDO) on the EV Smartsheet- https://app.smartsheet.com/b/form?EQBCT=e9db22caf98049baae1044c4e042e2e8 and RDO approval will be sought when considering the following activities:

5.39.5.1 Visits to Parliament

5.39.5.2 Trips to London e.g., Imperial War Museum

5.39.5.3 It is the responsibility of the Trust to decide whether an activity is safe for students and staff, prior to notification to RDO the trust must have assured themselves that all the procedures have been followed.

5.39.5.4 The following are not permitted:

- Aircraft or flying
- Art galleries
- Boxing
- Break dancing
- Canyoning

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- Caving
- Dune buggies
- Fishing
- Gladiator games
- Go karts
- Golf, including Driving Ranges
- Hang gliding
- Para gliding
- Highwires / Ziplining / Confidence courses
- Horse riding
- Hot air ballooning
- Jet Boating
- Martial arts or boxing activities
- Motocross
- Motor races
- Motor rallies
- Motor speed tests
- Paintball / Laser Skirmish
- Parachuting
- Quad bikes/motorbikes
- Rifle/firearms
- Rock climbing
- Rodeo
- Scuba diving
- Shooting
- Skiing
- Tackle rugby league/union
- Trampoline parks/centres
- Tobogganing
- Vertical and horizontal bungee jumping,

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- White water rafting, canoeing/kayaking/rafting

5.39.6 The full Terms and Conditions including any Waivers of the Centre are understood (for example if an incident occurs where no negligence on the part of the Centre is apparent)

5.39.7 The Risk Assessment should give assurance that you are dealing with a well-run Centre and that the safeguarding, health and safety of the students will be in safe hands.

5.39.8 Refer to:

5.39.8.1 SUPPORTING DOCUMENTS: EDUCATIONAL VISITS – Parental Consent Form

5.39.8.2 SUPPORTING DOCUMENTS: EDUCATIONAL VISITS – Management Approval Form

5.39.8.3 SUPPORTING DOCUMENTS: EDUCATIONAL VISITS – Letter to Parents

5.39.8.4 SUPPORTING DOCUMENTS: EDUCATIONAL VISITS – DFEE Guidance

5.39.8.5 SUPPORTING DOCUMENTS: EDUCATIONAL VISITS – Plan

5.39.8.6 RISK ASSESSMENTS: EDUCATIONAL VISITS – General to be personalised for each Visit

5.40 Events

5.40.1 Campus premises and other venues are from time to time used to hold events for either fundraising or community activities and this covers the organisation, planning and running of such events to ensure that any health and safety risks that may be present are controlled as far as is reasonably practicable.

5.40.2 It is recognised that these events are charitable, or community based in nature and therefore no persons are employed and as such the Health and Safety at Work etc. Act 1974 does not apply however the Campus recognises that it still owes a duty of care to all those involved or attending.

5.40.3 The Campus aims to manage the health and safety risks associated with running events by ensuring:

5.40.3.1 All events receive the approval of the Campus Support Team.

5.40.3.2 An Event Manager is appointed to be responsible for each event.

5.40.3.3 An event plan is produced.

5.40.3.4 Relevant risk assessments are completed.

5.40.3.5 Members of the team running the event are properly briefed to include information arising from the risk assessments.

5.40.3.6 Adequate insurance is in place.

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5.40.3.7 An appropriate level of first aid provision.

5.40.3.8 Emergency procedures are in place.

5.41 Insurance

5.41.1 OSG UK insurance does not cover any high-risk activity.

5.41.2 It is important that you distinguish between a Campus event and a trading company event; an event form must be submitted 7 days prior to an event to ensure appropriate insurance is in place.

5.41.3 If an event is to be held anywhere other than on Campus premises, the owner of such land or premises should contact his Insurers and arrange adequate cover for the event. It is strongly recommended that this is in writing.

5.42 Event manager

5.42.1 The Event Manager will need to have a full list of all the activities taking place and kn ow who is responsible for each one. He must also ensure that there is adequate adult supervision. The Event Manager will delegate specific tasks to responsible people i.e., first aider, fire officer, food handler, car park security etc. It is imperative that these persons take their responsibilities seriously and that they are thoroughly briefed for the event by the Event Manager.

5.42.2 The Event Manager is responsible for ensuring that all written risk assessments are completed and brought to the attention of key people.

5.42.3 Before the event is formally announced, the Campus Support Team should be advised of the full details, including the names of those responsible in the management network for the event. The event should then be announced well in advance.

5.42.4 All checklists should then be completed, and any queries or problems found, attended to.

5.42.5 Refer to:

5.42.5.1 RISK ASSESSMENTS: Event Template

5.42.5.2 RISK ASSESSMENTS: Seminar Event

5.43 Performance Licenses

5.43.1 The legislation relating to the licensing of children for performances, paid modelling and sporting activities is complex and is contained in the Children and Young Persons Acts 1933 and 1963 and the Children (Performances) Regulations 1968 as amended by the Children (Performances) (Miscellaneous Amendments) Regulations 1998 and the Children (Performances and Activities) Regulations 2014.

5.43.2 The licensing of children is intended to safeguard their education, health and welfare and for this reason the local education authority is responsible for the issuing and supervision of licenses.

5.43.3 Most local authorities follow these guidelines:

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5.43.4 A license is usually not required:

5.43.4.1 If the performance is unpaid and no Campus absence is needed, and the performance lasts for four days or less and the child has not performed within the previous six months.

5.43.4.2 For Campus performances or those with organisations such as scouts, guides or a church.

5.43.5 A license is, however, required:

5.43.5.1 If the child receives payment for the performance.

5.43.5.2 If the performance involves absence from Campus, even if the assignment is unpaid.

5.43.6 Where a license is not required, standard conditions, to safeguard the child's health and welfare, apply:

5.43.6.1 Performances shall not exceed 3.5 hours in duration and each child shall not p erform for more than 2.5 hours during each performance. No child shall take part in more than two performances
on the same day and there shall be an interval of at least 1.5 hours between the child's parts in such performances.

5.43.6.2 No child shall be absent from Campus because of any performance or rehearsal, without the prior approval of the Campus.

5.43.6.3 No child under 14 years of age may remain at the place of performance after 10.00 pm, or 30 minutes after the end of his or her part in the performance is completed, whichever is the earlier.

5.43.6.4 There shall be at least one adult for every 12 children whose task will be to su pervise the children while not they are not actually involved in the performance.

5.43.6.5 No child shall share a dressing room with a child of the opposite gender or wit h adults.

5.43.6.6 No child should be allowed to perform when unwell, and appropriate first aid fa cilities shall be available in case of accident or injury.

5.43.6.7 No payment other than bona fide expenses should be made to any child in res pect of any performance.

5.43.6.8 No individual shall receive any payment in respect of the production except by way of defraying legitimate expenses.

5.43.7 To find out about performance/stage licenses for Campus age children in your area you need to approach your appropriate local authority. You can do this by going to: http://local.direct.gov.uk/LDGRedirect/index.jsp?LGSL=48&LGIL=8

6. GUIDELINES

6.1 www.hse.gov.uk/services/education/index.htm

6.2 CLEAPSS Risk assessments in technology http://www.cleapss.org.uk/

6.3 BS 4163:2014 Health and Safety for Design and Technology in Campuses and Similar Esta blishments

6.4 National Society for Education in Art & Design (NSEAD) http://www.nsead.org/hsg/index.asp x

6.5 Safe Practice in Physical Education and Campus Sport' BAALPE/afPE http://www.afpe.org. uk/

6.6 https://www.gov.uk/government/publications/health-and-safety-on-educational-visits

6.7 http://www.hse.gov.uk/riddor/

6.8 Health and safety: responsibilities and duties for schools 26.09.18

7. ASSOCIATED DOCUMENTS

7.1 Safeguarding Policy

7.2 Fire Safety (Prevention) Policy

7.3 First Aid Policy

7.4 Administration of Medicine Policy

7.5 Risk Assessment Policy

7.6 Health & Safety Handbook 2020-21

7.7 Security & Visitors Policy

7.8 Design and Technology Health and Safety Arrangements

7.9 Science Health and Safety Arrangements

7.10 Contractor Management Procedure

7.11 Work Experience and Work Placement Procedure

7.12 Supporting Pupils with Medical or Healthcare Needs Arrangements

7.13 Food Safety Policy and Food-Safety Management Procedures

7.14 Incident Reporting and Investigation Procedure

7.15 Educational Visits Procedure and Jurisdiction-Specific Guidance

7.16 Emergency, Lockdown and Invacuation Procedure

7.17 OSG UK Allergy Safety Policy

7.18 UK Legal and Regulatory Register

8. APPENDICES

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8.1 Appendix 1 Organisation Chart

8.2 Appendix 2 Health and Safety Arrangements for Design and Technology Curriculum

8.3 Appendix 3 Health and Safety Arrangements for Textiles Curriculum

8.4 Appendix 4 Health and Safety Arrangements for Food Safety Curriculum

8.5 Appendix 5 Health and Safety Arrangements for Physical Education Curriculum

8.6 Appendix 6 Health and Safety Arrangements for Science Curriculum

8.7 Appendix 7 H&S appointed person / H&S CST Meeting Agenda

8.8 Appendix 8 H&S CST Report to the Trust

8.9 Appendix 9 Management of Medicines for School Staff

9. VERSION CONTROL

Document Code	Date	Version No.	Nature of change
POL_UK_OP_Health_and_Safety_Policy	06/2019	7.1	Added sections on Occupational Health & Work related stress and Site Security
POL_UK_OP_Health_and_Safety_Policy	10/2019	7.2	Further guidance surrounding risk assessment of higher risk educational visit venues
POL_UK_OP_Health_and_Safety_Policy	01/2020	7.3	Updated DfE guidance around H&S responsibilities in schools
POL_UK_OP_Health_and_Safety_Policy	07/2020	8.0	Annual review, minor updates on roles, legionella guidance and responding to pandemics
POL_UK_OP_Health_and_Safety_Policy	06/2021	9.0	• Annual review, minor update on terminology • Included National Facilities Manager Role and Responsibilities • Creation of a hyper-linked contents grid.

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			• Under ASBESTOS – reference made to Asbestos Removal Co ntractors Association (ARCA). • D&T BSI – update on the date of Standard: BS4163:2014. • Update of the Appendix 1 – Or ganisation Chart.
POL_UK_OP_Health_and_Safety_Policy	08/2022	10.0	• Annual review, minor update on terminology • Updated National Facilities Manager Role and Responsibilities in line with the Competent Person role. • Removal of references to Sout hall's • Amendment of Safety Cloud with Online Safety Portal (Don esafe) • Update of the Appendix 1 – Or ganisation Chart.
POL_UK_OP_Health_and_Safety_Policy	01/2023	10.1	• Alignment with global excursion policy including upd ated list of exclusions. • Educational visits not to be planned on zoom free days. • Overnight trips must be signed off by REC. • RDO request for approval form must be completed at least 3 weeks before proposed trip

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POL_UK_OP_Health_and_Safety_Policy	07/2023	11.0	• Annual review, minor update on terminology • 2.3.2 – amendment of Fire logbook and accident book with Fire records and Incident/Accident r eports logged in the Online Safety Po rtal (Donesafe) • 2.13.3 – reference to correctiv e actions on findings from audits. • 2.13.4- amendment, and refere nce of H&S consultants action s and support to RDO on RIDDOR R eporting. • 4.5.2. – amended process for c ommunicate safety bulletins and further actions. • 4.6.3. – added point requestin g for training records and certificates to be added to Online Safety P ortal (Donesafe) • 4.7.1. - Amended/added H&S i nduction provided by RDO and will include Online Safety Porta l (Donesafe) training. • References made to the Health & Safety Standards for School Campus.

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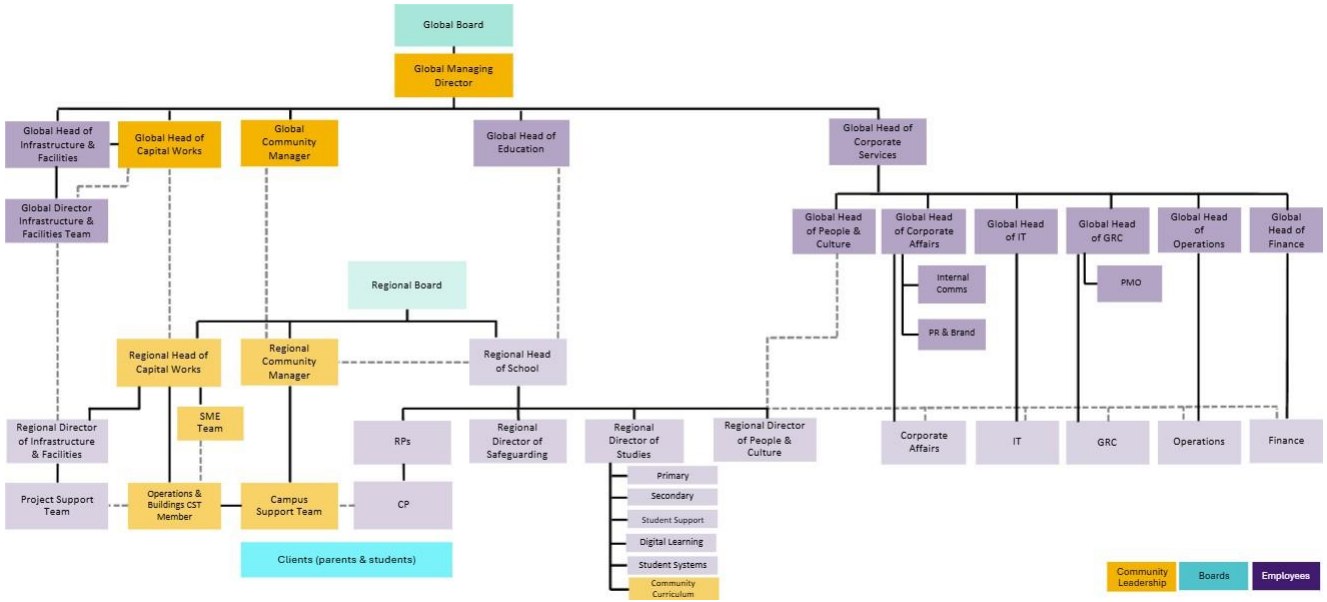
			• 4.14.3. / 4.16.2. – Amended to reflect the Incident review a nd investigation process. • 4.15.3. – amended to reflect th e Incident reporting via public lin k and first aiders signage. • 4.19. – Reference to the Onlin e Safety Portal (Donesafe) Inci dent Investigation and Correcti ve Actions process. • 4.20. – Amended to reflect the Incident reporting and review process. • 4.27. – added the H&S Consul tants details and contact infor mation. • 4.29. – Linked Be safe! an intr oductory guide to health and s afety guidance with booklet from Learning and Skill s Council. • 4.43. – Amended Child (Perfor mances) Amended Regs. 2000 with latest Child (Performances and Activities) Regs. 2014.
POL_UK_OP_Health_and_Safety_Policy	09/2024	12.0	Reviewing process and updates to terminology, such as: • Amended Policy author – removal of 'Ted Picton' added 'Rui Martins'

			• Point 2.14 Re: H&S Consultants: o Added reference to provision of H&S/Fire safety Advice. o ISO45001 Auditing o Fire Risk Assessments and Review process. • Point 2.21- Included Allergens legal requirements and reference made to the Allergens Policy. • Point 4.24 – Added Management of Medicines for school Staff – Appendix 9. Reference is also made to the external Appendix which contains the Risk Assessment template. • Point 4.29 – Emergency Procedures - Amended the contact details, as follows: o Removed: ‘Ted Picton’ o Added: ‘Rui Martins’ o Removed: ‘Adrian Diffey’ o Added: ‘Greg Patterson’ o Removed: ‘Stuart Harlow’ - Crysp o Added: ‘Sian Purver’ – Crysp • Point 4.3.6 – Reference made to CLEAPSS Risk Assessment

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			s for D&T; location of downloaded M RATs on Donesafe and links fo r access. • Point 4.3.9 – Reference made to CLEAPSS Risk Assessment s for Food Tech; location of downloaded MRATs on Dones afe and links for access. • Amendment of Organisation C hart. • Due to issues with the access of Policy appendices by campus staff inc. CPs and RPs for ISI i nspection, I have now added all appendices to the end of the Policy.
POL_UK_OP_Health_and_Safety_Policy	05/2025	12.1	Inserted Policy Disclaimer – OneScho ol Global Campuses in Wales
POL_UK_OP_Health_and_Safety_Policy	08/2026	13.0	• Full UK wide legal and regulatory review. • Added jurisdiction specific arrangements and corrected outdated or England only references. • Where necessary made chang es to contacts or job title changes.

Appendix 1: Organisation chart



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