

Langmoor Primary School



Risk Assessment Policy

Part of the OWLS Academy Trust



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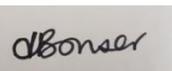
Statement of intent

At **Langmoor Primary School**, we are committed to providing a safe and healthy working environment that inspires and supports academic achievement. This policy sets out the procedure the school will follow in order to identify and manage the health and safety of staff members, pupils and visitors who may be affected by the school's activities.

The purpose of the risk assessment is to enable the school to determine what measures should be taken to comply with the duties under the relevant statutory provisions.

This policy will be adhered to by all staff members and the governing board at all times.

Signed by:



Headteacher

March 2018

Date:

Chair of governors

Date:

1. Legal framework

1.1. This policy has due regard to statutory legislation and guidance, including, but not limited to, the following:

- Health and Safety at Work etc Act 1974
- Management of Health and Safety at Work Regulations 1999
- Equality Act 2010
- Children and Families Act 2014
- Regulatory Reform (Fire Safety) Order 2005
- DfE (2014) 'Health and safety: advice on legal duties and powers'
- DfE (2016) 'Keeping Children Safe in Education'
- DfE (2015) '0-25 SEND Code of Practice'

2. Definitions

2.1. Risk assessment - A careful examination of what, in your work, could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm.

2.2. Hazard - Anything that may cause harm, such as chemicals, electricity, working from ladders, an open drawer, etc.

2.3. Risk - The chance, high or low, that someone could be harmed by these and other hazards, together with an indication of how serious the harm could be.

2.4. Dynamic risk assessment - An assessment that takes into account unexpected or short temporary changes that require immediate amendments to be made to risk assessment control measures.

2.5. Suitable and sufficient risk - An assessment that is proportionate to the risk and ensures that all relevant hazards are addressed, complies with statutory requirements, ensures all groups who are affected are considered, takes account of existing control measures and identifies further measures as necessary.

2.6. Generic risk assessment - An individual assessment covering the common significant hazards that staff and others face on a day-to-day basis, such as low risk activities or repeated activities that can be documented in another way.

3. Principles of risk prevention

3.1. The following are the key principles of risk prevention:

- If possible, avoid a risk altogether
- Avoid introducing new hazards
- Evaluate unavoidable risks via a risk assessment
- Combat risks at source

- Consult with those affected to adapt work to the requirements of the individual
- Take advantage of technological and technical progress
- Implement risk prevention measures within a policy
- Give priority to protection measures that safeguard the whole school
- Ensure that staff and pupils understand what they must do in order to minimise risk
- Develop a positive approach to health and safety within the school

4. Guide to undertaking a risk assessment

- 4.1. The first part of a risk assessment involves looking carefully at what, within the school environment, could cause harm to teachers, pupils or visitors to the school.
- 4.2. The second part of the process involves managing those risks by implementing safeguards to ensure nobody gets hurt or becomes ill through activities on school grounds.
- 4.3. The final part of a risk assessment is reviewing and updating if necessary. No risk assessment can be fool-proof and accidents may still happen. Reacting swiftly to accidents (as detailed in our complete Health and Safety Policy), is an important step on the road to risk control.
- 4.4. The important things you need to decide are whether a hazard is significant, and whether you have it covered by satisfactory precautions or controls so that the risk is small. You need to check this when you assess the risks. For instance, electricity can kill, but the risk of it doing so in an office environment is remote, provided that electrical equipment is suitable for the task, bought from a reputable supplier and is properly maintained.

5. Risk assessment process

- 5.1. The risk assessment process is designed to manage real risks while ensuring that learning opportunities are experienced to the full.
- 5.2. The process is as follows:
 - Look for the hazards
 - Decide who might be harmed and how
 - Evaluate the risks and decide on precaution
 - Keep records of how these are implemented
 - Review your assessment and update if necessary

6. How to assess the risks in the workplace

- 6.1. In most departments the hazards are easy to recognise. For example, in the science department, the use of toxic or dangerous chemicals should already have an assessment under the Control of Substances Hazardous to Health Regulations (COSHH).
- 6.2. Hazards that are already covered under other risk assessments may be ticked as 'checked' in the general risk assessment. There is no need to conduct a separate risk assessment.

7. How to assess risks to pupils' welfare

- 7.1. Where any of the following criteria are met, the school should conduct a risk assessment regarding pupils' welfare by following steps 1 – 5 in sections 7-11 below:
 - A pupil with a clinical predilection towards behavioural, social and emotional difficulties i.e. a pupil with autistic spectrum disorders (ASD).
 - A pupil with a historical tendency towards behavioural, social or emotional difficulties.
 - A pupil either returning to the school after a fixed-term exclusion or joining from another school after a permanent exclusion.
 - A pupil with either a clinical predilection or historical tendency towards behavioural, social or emotional difficulties is participating in any off-site school trips/visits.
- 7.2. All risk assessments regarding pupils' welfare should take into account previous behaviour, and outline specific measures, including both punitive sanctions and pastoral support, to ensure that the risk of the behaviour being repeated is minimised and managed.
- 7.3. Care will be taken to ensure that pupils with SEN will not be excluded from school activities as a result of behavioural difficulties, unless it is sufficiently severe as to directly interfere with the education of other pupils.
- 7.4. The school will liaise with both the school's Behaviour Mentor and the SEN Coordinator when undertaking an assessment of risks to pupils' welfare.
- 7.5. The school will refer to [Appendix C](#) when making risk assessment decisions regarding welfare/pastoral needs.

8. Step one – look for the hazards

- 8.1. Walk around your area of responsibility with fresh eyes to assess what could reasonably be expected to cause harm. Put yourself in the place of non-specialist staff and pupils to find the risks.
- 8.2. Ignore the trivial and concentrate only on significant hazards that could result in serious harm or affect several people.
- 8.3. Use the following examples to guide you:

- Slipping/tripping hazards (e.g. poorly maintained floors or stairs).
- Fire (e.g. from flammable materials).
- Chemicals (laboratories, etc.) and how they are used and in what quantities.
- Moving parts of machinery (faculty workshops).
- Work at height (scaffolding around experiments, etc.).
- Ejection of material (workshops, experiments, etc.).
- Pressure systems (laboratories, etc.).
- Vehicles (e.g. fork lift trucks, minibuses).
- Electricity (e.g. poor wiring, portable appliances, electrical experiments).
- Dust (e.g. metal grinding, cement, etc.).
- Fume (e.g. welding, chemicals, etc.).
- Manual handling.
- Noise (noisy machinery or process).
- Poor lighting, low temperature, etc.
- Biological hazards (lab work, gardening, contact with body fluids, etc.).
- Kicking/hitting.
- Running away.
- Verbal abuse.
- Threats/aggression.
- Destruction of property/vandalism.
- Bullying.
- Prior exclusion.
- Stealing.
- Inappropriate sexual behaviour (refer to [Appendix A](#), [Appendix B](#) and [Appendix D](#)).

9. Step two – decide who might be harmed and how

9.1. In addition to staff, think about people who may not be in the workplace all the time e.g. cleaners, visitors, contractors, maintenance personnel, etc.

9.2. Include pupils, members of the public or people that share your workplace, if there is a chance they could be hurt by your activities.

9.3. Groups of people to think about:

- Office staff.
- Operators.
- Maintenance personnel.

- Cleaners.
- Contractors.
- Members of the public.

9.4. Also consider the following vulnerable groups:

- Staff and students with disabilities.
- Inexperienced staff.
- Visitors.
- Lone workers.
- Pregnant workers.

10. Step three – evaluate the risks

10.1. Evaluate the risks arising from the hazards and decide whether existing precautions are adequate or more should be done.

10.2. Even after all precautions have been taken, usually some risk remains.

10.3. Decide for each significant hazard whether the residual risk is high, medium or low.

10.4. First, ask whether you have done all the things that the law says you have to do. For example, there are legal requirements relating to fire safety, statutory inspection of plant and equipment, water systems to prevent legionella risks, exclusions, the use of force, SEN provision, etc.

10.5. You must consider whether generally accepted industry standards are in place and whether you have done all that is reasonably practicable to keep the workplace safe.

10.6. Ensure that managing additional hazards does not interfere with other control measures such as fire safety.

10.7. Check that you have the following in place:

- Adequate information, instruction or training.
- Adequate systems or procedures.

10.8. Do the precautions:

- Meet the standards set by a legal requirement?
- Comply with the recognised industry standard?
- Represent good practice?
- Change existing precautions in place?

10.9. If you find that something needs to be done, ask yourself:

- Can I get rid of the hazard altogether?
- If not, how can I control the risks to ensure that harm is unlikely?

10.10. Reduce the risks as far as reasonably practicable.

11. Step four – record your findings

11.1. Write down the more significant hazards.

11.2. Record the most important conclusions.

11.3. You do not need to show how the assessment was carried out provided that:

- A proper check was made.
- The assessment details who might be affected.
- All the obvious significant hazards are considered, taking into account the number of people who could be involved.
- The precautions are reasonable and the remaining risk is low.

11.4. Assessments need to be suitable and sufficient, not perfect.

11.5. Ask yourself:

- Are the precautions reasonable?
- Is there something to show that a proper check was made?

11.6. Where a crime is committed against a member of the party, it will be reported to local police as soon as possible.

12. Step five – review your assessment and revise it if necessary

12.1. Reviewing and revision should take place on a case-by-case basis when new machines, substances and/or procedures are introduced.

12.2. General reviewing should take place on an annual basis.

12.3. Assessments should be dated and initialled when reviewed.

13. Training

13.1. Those tasked with carrying out risk assessments are required to be competent, and training will be made available to anyone tasked with carrying out risk assessments.

13.2. Staff members will also be trained on how to manage behavioural incidents, as part of their continuous professional development.

14. Specific risk assessments

14.1. Specific risk assessments must be conducted under the following regulations:

- Control of Substances Hazardous to Health Regulations 2002 (as amended)
- Control of Noise at Work Regulations 2005
- Control of Vibration at Work 2005
- Manual Handling Operations Regulations 1992
- Health and Safety (Display Screen Equipment) Regulations 1992
- Personal Protective Equipment at Work Regulations 1992
- Work at Height Regulations 2005 (as amended)
- Regulatory Reform (Fire Safety Order) 2005
- Genetically Modified Organisms (Contained Use) Regulations 2014

Appendix A: Sexual Behaviour Checklist

Secondary aged child	Indicators		
	Healthy	Problematic	Harmful
Type of sexual behaviour	Normal sexual behaviour as detailed in our Sex and Relationships Policy .	Behaviour which indicates a need for monitoring and assessment.	Displaying entirely inappropriate adult activity e.g. intercourse, oral sex, etc. (actual or simulated).
Context of behaviour	Behaviour is mutual and consent given.	Behaviour appears to be peer influenced and an isolated incident.	Elements of threatening behaviour and coercion. Behaviour is secretive and planned. Previous concerns or convictions for sexual behaviour.
Response of other young person	Young person is happy and comfortable. May be embarrassed if behaviour is discovered by adults.	Embarrassed and ashamed. Displays remorse.	Denies responsibility and blames the victim. Shows little concern about being caught. Shows pride in harmful behaviour.
Response of other party	Young person is happy and comfortable. May be embarrassed if behaviour is discovered by adults.	Uncomfortable or irritated, but not fearful or anxious. Feels able to tell someone.	Uncomfortable, fearful and anxious. Avoids the young person.
Relationship between the children	Behaviour is between two persons within the same peer group who would normally socialise together.	Factors suggest one young person is more in control than others. Young persons would not normally socialise.	Clear power imbalances are displayed and/or there are clear differences in size, strength, etc.
Persistence of the behaviour	The behaviour is short-term, infrequent and the child is interested in other things.	Interest in sexual behaviour is higher than is considered healthy as detailed in our Sex and Relationship Policy .	Young person is obsessed with sexual thoughts and pornography. The focus on sexual behaviour is

			<p>imbalanced with other aspects of their life. The behaviour appears to be a way to cope with negative emotions.</p>
<p>Other behavioural problems</p>	<p>No other behavioural problems.</p>	<p>Young person has poor sexual boundaries and displays difficulties coping with emotions.</p>	<p>Young person has a diagnosis of depression or other significant mental health disorders. May have a history of cruelty to animals or a self-reported sexual interest in children.</p>
<p>Background Information known</p>	<p>No significant family history or indicated risk factors.</p>	<p>Parents show no concern for the victim and are angry.</p>	<p>Child has a pattern of discontinuity of care. There is a known background of high levels of trauma e.g. physical, emotional, sexual abuse, neglect, witnessing domestic violence.</p>

Appendix B: Checklist of Sexual Behaviour in Pupils with Special Educational Needs and Disabilities (SEND)

Child with SEN	Indicators		
	Healthy	Healthy	Healthy
Type of sexual activity	Exploratory, age appropriate and mutual.	Inappropriate for their age or displays some adult knowledge or language.	Displaying entirely inappropriate adult activity e.g. intercourse, oral sex, etc. (actual or simulated).
Context of behaviour	Light hearted and spontaneous.	Behaviour is infrequent. Behaviour is self-directed. Behaviour is restricted to a specific setting.	Elements of threatening behaviour and coercion. Behaviour is secretive and planned. Previous concerns or convictions for sexual behaviour.
Young person's response	Happy and freely engaging.	The child displays embarrassment and shame related to the behaviour. The child has some awareness of the consequences of their actions and displays concern for the victim.	The child attaches little meaning to the behaviour and rejects all concerns expressed.
Response of others	Similar ages and abilities playing together.	The child concerned is uncomfortable, but not fearful or anxious.	The child concerned is uncomfortable, fearful and anxious.
Relationship between the young people	The behaviour is infrequent and the child is interested in other things.	Child usually associates with children three or more years younger. There is a clear power imbalance.	Evidence of targeting on the basis of perceived vulnerability. Clear power differences in the relationship.
Persistence of the behaviour	The behaviour is short-term, infrequent and the child is interested in other things.	Responds to complaints by stopping or changing behaviour. Intervention has some impact but behaviours may continue.	Evidence of a high level of sexual compulsivity. Behaviours have persisted despite significant negative consequences.

<p>Other behavioural problems</p>	<p>No other behavioural problems.</p>	<p>Child has significant history of behavioural problems and has generally positive relationships with peers.</p> <p>Access to others is well supervised or young person isolated in the community or has a very restricted lifestyle.</p>	<p>Concurrent diagnosis of significant mental health problems. Pattern of problematic sexual behaviours emerging in early childhood and continuing into adolescence. Viewed negatively in community due to sexual behaviours. History of fire setting. Long standing history of severely problematic or challenging behaviours.</p>
<p>Background information known</p>	<p>No significant family history. The child has at least one positive friendship. The child has access to social and leisure pursuits. The child has access to appropriate sex education.</p>	<p>Family is concerned regarding the child's development. Family experiencing high levels of stress. Siblings have experienced sexual abuse.</p>	<p>Previous experience of abuse, sexual, physical, and emotional or neglect. Violence in the household. Members of the family, including siblings, have a history of sexual offending. Distorted sexual boundaries in the family. Discontinuity of care.</p>

Appendix C: When to Conduct a Welfare/Pastoral Risk Assessment

Type of behaviour	Indicators	Outcomes and response
Healthy / OK sexual behaviours:	<ul style="list-style-type: none"> • Behaviour is mutual. • Behaviour is age appropriate. • Behaviour is consensual. • Behaviour is exploratory. • There is no intent to cause harm. • The behaviour is fun. • There is no power differential and the participants are part of the same peer group. • There are no other behavioural problems. • There is no significant family history. • The participants have access to appropriate sex/appropriate behaviour education. 	<p>Risk assessment is not necessary.</p> <p>The school will support child via:</p> <ul style="list-style-type: none"> • The school's Behaviour Policy (behaviour agreement plan if necessary). • Meet with parents to discuss. • Develop a plan to address child's additional support needs.
Problematic sexual behaviours:	<ul style="list-style-type: none"> • Behaviour is not age appropriate. • It is a one off incident or low key touching over clothes. • Behaviour is influenced by peers. • Behaviour is spontaneous. • Behaviour is self-directed; masturbation. • There are other balancing factors; no intent to cause harm, level of understanding, acceptance of responsibility. • Other pupils are irritated or uncomfortable but not scared; they feel free to tell someone. • The parents/carers are angry and show no concern for victim, and can be violent abusive. • The young person is confused as to sexual development and or boundaries. 	<p>Risk assessment is necessary.</p> <p>In addition, support child via targeted services such as:</p> <ul style="list-style-type: none"> • Use of the DfE 'Keeping children safe in education' guidance document. • Consultation with local authority child protection services.
Harmful sexual behaviours:	<ul style="list-style-type: none"> • Behaviour is not age appropriate. • There are elements of planning, secrecy, force, coercion. • There are power differentials; size, age, status, strength. • The behaviour causes the following in others; fear, anxiety, discomfort. • The young person blames others. 	<p>Risk assessment is necessary.</p> <p>In addition, the school will support the child via safeguarding specialists such as:</p> <ul style="list-style-type: none"> • Multi-agency input.

	<ul style="list-style-type: none">• They are frequent incidents and disproportionate to other aspects of their lives.• The young person is not easily distracted and continues the compulsive behaviour despite intervention.• The young person displays other difficult behaviours, conduct disorders, anger or poor peer relationships.	<ul style="list-style-type: none">• Referral to Police/ Children's safeguarding and Specialist Services.• Following outcome of the above, meet with parents and child to agree and implement revised approach.
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Appendix D: Identifying risks in the school setting

Identified as a risk?	Yes	No
Toilets		
Is the location of the toilets a concern?		N
Are they shared by more than one class?	Y	
Are they unisex?		N
When visiting the toilet, are pupils out-of-sight of school staff?	Y	
Is it possible to manage use of the toilets better?	Y	
Are staff allocated to monitor the toilets in an unobtrusive manner?		N
Classrooms		
Can children and staff be seen at all times?	Y	
Are there any unnecessary blind spots?		N
Are there areas where children can be observed but continue to remain creative?	Y	
Are you able to be flexible regarding the seating plan and layout of the classroom?	Y	
Are there procedures in place for children and staff leaving the classroom?	Y	
Have students been taught about personal safety?	Y	
Hallways and Walkways		
Are children supervised or able to be seen at all times (e.g. through windows)?	Y	
Are there any cupboards or empty rooms which could be accessible to children?	Y	
Outside Areas		
Are children supervised or able to be seen at all times (e.g. through windows) from all areas of the outside area/playground?	Y	
Do certain areas need to be designated 'out of bounds' either for the time being or permanently?		N
Are staffing levels adequate?	Y	
Can staff engage children in structured play, rather than leaving them open to inappropriate play?	Y	
Changing for PE and Swimming (onsite and off)		

Does the PE changing area pose risks?		N
Does the swimming changing area pose risks?		N
Are staff able to supervise changing appropriately and according to the needs and age of the children concerned?	Y	
Children/Young People		
Have all children been taught personal safety?	Y	
Are all children aware of who to talk to if they have concerns?	Y	
Do all children feel that they are listened to and are confident that appropriate action will be taken if necessary?	Y	
Have children been taught about E-safety?	Y	
If there have been safeguarding concerns, including notification of domestic violence, have children been appropriately supported within school?	Y	
Staff		
Are all staff aware of who the Designated Person for Child Protection is?	Y	
Are all staff aware of who to go to if the Designated Person for Child Protection is not available?	Y	
Are all staff aware of the need to record concerns and pass them on to the Designated Person for Child Protection?	Y	
Are all staff (including volunteers and governors) familiar with the contents of Child Protection Policy?	Y	
Have all staff, teaching and non-teaching, received Safeguarding Children Training within the last 3 years?	Y	
Have staff received training in safer working practice and the protective ethos?	Y	
Are all staff aware of, and feel confident in using, the Whistleblowing Policy?	Y	
Are all staff aware of who the Chair of Governors and the Designated Governor for Child Protection are?	Y	
Have all staff signed to say that they have read and understood the Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings?	Y	
Is there an Anti-bullying Policy that effectively deals with bullying?	Y	
Are school computers monitored to ensure that children and staff are following the school's Acceptable Use Policy?	Y	