Role Responsible:	Vice Principal (Director of Finance & Resources)
Written by:	Tim Greaves (Harbour Health & Safety)
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STATEMENT OF INTENT:

Itchen College is committed to ensuring the health, safety, and welfare of all employees, students, visitors, contractors, and others who may be affected by our activities. We recognise our legal and moral responsibilities under the Health and Safety at Work etc. Act 1974 and are dedicated to achieving compliance with all relevant health and safety legislation, as well as promoting a culture of continuous improvement in our safety management systems.

As part of our commitment to health and safety, we will:

- Provide a Safe and Healthy Environment – Maintain a safe and secure learning and working environment by identifying, assessing, and mitigating risks associated with our operations.
- Set Clear Responsibilities – Ensure that all levels of management and staff understand their health and safety responsibilities and are equipped to fulfil them.
- Engage and Consult – Promote effective communication and consultation with staff, students, trade unions, and other stakeholders on matters affecting their health and safety.
- Training and Competence – Provide appropriate information, instruction, training, and supervision to ensure that all staff and students can work and learn safely.
- Risk Management – Implement and maintain an effective risk assessment process to identify and manage hazards associated with our college activities.
- Fire, Emergency, and First Aid Preparedness – Ensure appropriate arrangements are in place for fire safety, emergency response, and first aid provision.
- Health and Wellbeing – Promote the physical and mental well-being of all members of the college community through proactive health and safety initiatives.
- Monitoring and Review – Regularly review our health and safety performance through inspections, audits, and accident investigations, making improvements where necessary.
- Legal Compliance – Comply fully with statutory health and safety requirements and recognised best practices within the education sector.
- Leadership Commitment – Ensure senior leadership demonstrates a visible commitment to health and safety, providing the necessary resources and support to uphold our high standards.

This Statement of Intent will be reviewed annually and revised as necessary to reflect changes in legislation, organisational structure, or operational activities. All staff and students are expected to play their part in maintaining a safe and healthy college environment.

Signed:
Alex Scott (Principal)
Review Date: May 2026

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HEALTH & SAFETY RESPONSIBILITIES

Board of Governors

- Provide strategic oversight and ensure compliance with health and safety legislation.
- Approve the college's Health and Safety Policy and monitor its implementation.
- Ensure adequate resources (financial, human, and training) are allocated for health and safety.
- Hold the Principal and Senior Leadership Team accountable for health and safety performance.
- Regularly review reports on health and safety performance, incidents, and risk management.

Principal

- Provide overall leadership and ensure the integration of health and safety into all college operations.
- Approve the Health and Safety Policy and ensure resources are in place for effective implementation.
- Promote a positive health and safety culture across the college and lead by example.
- Ensure legal compliance and accountability at the highest level.
- Review health and safety performance reports and take necessary actions to address risks.
- Ensure a Health and Safety Committee is in place and functioning effectively.

Deputy Principal

- Support the Principal in implementing and reviewing health and safety strategies.
- Ensure health and safety policies and procedures are effectively communicated and followed across departments.
- Monitor and improve college-wide health and safety performance, including risk assessments.
- Ensure that safety training is provided and that key risks are managed proactively.
- Oversee the coordination of emergency response plans and business continuity planning.

Vice Principal

- Ensure that all areas under their responsibility comply with health and safety policies and procedures.
- Foster a culture of continuous improvement in health and safety management.
- Work closely with curriculum and support teams to ensure risk assessments are effectively managed.
- Support health and safety audits and inspections, ensuring corrective actions are implemented.
- Monitor accident and incident trends and work to reduce risk exposure in learning environments.

Finance Director (Health and Safety Lead)

- Develop, review, and maintain the college's Health and Safety Policy and procedures.
- Conduct risk assessments, audits, and inspections across all departments.
- Provide expert advice and guidance on health and safety compliance and best practices.
- Investigate accidents, near misses, and incidents, ensuring that corrective actions are implemented.
- Ensure compliance with fire safety, first aid, COSHH, and other key regulations.
- Deliver health and safety training to staff and students as required.
- Liaise with external enforcement agencies such as the HSE, Fire Service, and Local Authorities.
- Report on health and safety performance to the Senior Leadership Team and Board of Governors.
- Lead on emergency planning, business continuity, and crisis management.

Directors of Curriculum (DOCS)

- Ensure that health and safety requirements are fully embedded into curriculum delivery.

- Oversee practical learning environments, ensuring they meet safety standards.
- Support teaching staff in implementing safe working practices in their curriculum areas.
- Ensure that subject-specific risk assessments (e.g., for science, engineering, and creative arts) are up to date.
- Work with Curriculum Managers to provide staff training on health and safety.

Student Support / SENDCO

- Ensure that students with additional needs have appropriate health and safety support.
- Conduct risk assessments and implement necessary adjustments for SEND students.
- Collaborate with staff, parents, and external agencies to ensure compliance with safety requirements.
- Arrnage personal emergency evacuation plans (PEEPs) for students with disabilities.
- Ensure that mental health and wellbeing considerations are included in safety planning.

Curriculum Managers

- Implement and monitor safe systems of work within their curriculum areas.
- Ensure that risk assessments are completed, reviewed, and followed by staff.
- Provide training and support to teaching staff on best health and safety practices.
- Ensure that specialist learning environments (e.g., labs, workshops, and studios) are risk-managed effectively.
- Conduct regular safety checks and liaise with Estates/Facilities teams to report hazards.

Estates Manager

- Oversee maintenance, facilities management, and fire safety compliance.
- Ensure that the college estate (buildings, grounds, and infrastructure) meets legal safety standards.
- Manage contractors and external service providers, ensuring compliance with college policies.
- Oversee the maintenance of fire alarms, emergency lighting, and safety systems.
- Ensure that the college environment is accessible, well-maintained, and safe for all users.
- Implement and maintain security measures to safeguard students and staff.

Teaching and Support Staff

- Follow health and safety procedures and ensure you and students adhere to them.
- Conduct dynamic risk assessments where necessary in practical teaching environments.
- Report hazards, incidents, or safety concerns to management immediately.
- Participate in health and safety training and promote a safe working and learning environment.
- Encourage safe student behavior and educate students on risk awareness.

Contractors

- Follow college health and safety policies and procedures while on-site.
- Provide risk assessments and method statements (RAMS) before carrying out their work.
- Ensure all work is conducted safely and does not pose a risk to staff, students, or visitors.
- Report any hazards, accidents, or near misses to the Estates team.
- Follow the college's permit-to-work system where required.

Students

- Follow the college's health and safety rules and instructions from staff.
- Report any hazards, accidents, or unsafe conditions to a member of staff.
- Take reasonable care for their own safety and the safety of others.
- Participate in safety inductions and training relevant to their studies.
- Use personal protective equipment (PPE) where required.
- Behave responsibly in classrooms, workshops, and communal areas to minimize risks.

PLAN-DO-CHECK-ACT CYCLE (HSG65) FOR HEALTH & SAFETY MANAGEMENT

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to outline the implementation of the Plan-DoCheck-Act (PDCA) cycle in health and safety management, ensuring compliance with HSG65 guidance from the Health and Safety Executive (HSE). The PDCA cycle provides a structured Procedure for continuous improvement in health and safety performance.

2. Scope

This SOP applies to all staff, students, contractors, and visitors within the college and covers:

- Planning health and safety management
- Implementing controls and procedures
- Monitoring and reviewing safety performance
- Continuous improvement through corrective action

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure a structured health and safety management system is in place.
- Allocate resources for health and safety planning, implementation, and monitoring.
- Promote a culture of continuous improvement in health and safety.

3.2 Finance Director (Health and Safety Lead)

- Develop, implement, and review health and safety policies and procedures.
- Conduct risk assessments and ensure compliance with safety legislation.
- Monitor health and safety performance and drive improvements based on findings.

3.3 Estates and Facilities Team

- Maintain health and safety compliance for buildings, equipment, and emergency systems.
- Implement safety measures as per risk assessments and audit findings.
- Ensure statutory maintenance, inspections, and servicing are completed.

3.4 Line Managers and Supervisors

- Implement safety controls and procedures within their areas of responsibility.

- Ensure staff and students follow health and safety policies.
- Monitor workplace hazards and report any safety concerns.

3.5 Staff, Students, and Contractors

- Comply with health and safety policies and procedures.
- Report hazards, near misses, and incidents promptly.
- Participate in training and risk assessment processes.

4. Plan-Do-Check-Act (PDCA) Cycle

4.1 PLAN – Setting the Health and Safety Procedure

- Establish health and safety policies in line with legal requirements.
- Identify hazards, assess risks, and define control measures.
- Set clear health and safety objectives and performance indicators.
- Allocate responsibilities and resources for health and safety management.

4.2 DO – Implementing Safety Measures

- Develop and deliver health and safety training for staff and students.
- Implement risk control measures and ensure safe working practices.
- Maintain clear emergency procedures and provide appropriate first aid provisions.
- Ensure contractors and third parties comply with health and safety requirements.

4.3 CHECK – Monitoring and Reviewing Performance

- Conduct regular workplace inspections and safety audits.
- Monitor accident reports, near misses, and trends in incidents.
- Assess compliance with policies, procedures, and legal requirements.
- Gather feedback from staff and students on health and safety concerns.

4.4 ACT – Continuous Improvement and Corrective Action

- Review safety performance and identify areas for improvement.
- Implement corrective actions based on audit findings and incident reports.
- Update health and safety policies and procedures to reflect lessons learned.
- Communicate changes and improvements to all stakeholders.

5. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct annual reviews of the PDCA cycle implementation.
- Audits will be used to assess the effectiveness of control measures and policy adherence.
- Non-compliance may result in additional training, policy updates, or disciplinary action where necessary.

6. Training and Awareness

- Provide health and safety training tailored to roles and responsibilities.
- Conduct refresher training following significant incidents or procedural changes.

7. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or policy changes occur.

RISK ASSESSMENT

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to outline the process for conducting risk assessments within the college to ensure compliance with the Management of Health and Safety at Work Regulations 1999. The SOP aims to identify, assess, and control hazards to maintain a safe environment for staff, students, and visitors.

2. Scope
This SOP applies to all staff responsible for identifying and managing risks in the workplace, including:

- General workplace risk assessments
- Task-specific and activity-based risk assessments
- Fire risk assessments
- Manual handling and ergonomic DSE assessments

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with health and safety regulations.
- Allocate resources for risk assessment training and control measures.
- Oversee the effectiveness of the risk assessment process.

3.2 Finance Director (Health and Safety Lead)

- Develop and implement the risk assessment Procedure.
- Conduct periodic reviews of risk assessments.
- Provide training and guidance on risk assessment procedures.
- Monitor compliance and investigate incidents linked to risk failures.

3.3 Line Managers and Supervisors

- Support risk assessments for their respective departments.
- Ensure control measures are implemented and reviewed.
- Report any new hazards or changes that may require reassessment.

3.4 Staff and Students

- Follow risk control measures and report hazards.
- Participate in risk assessment training where required.
- Adhere to safe working practices and procedures.

4. Risk Assessment Process

4.1 Identify Hazards

- Walk through the work area or task and note any potential hazards.
- Consider risks associated with equipment, environment, and human factors.
- Review past incidents and near misses.

4.2 Determine Who May Be Harmed and How

- Identify groups at risk (staff, students, visitors, contractors).
- Consider vulnerable individuals (pregnant employees, those with disabilities, young persons).
- Assess potential severity and type of harm.

4.3 Evaluate Risks and Implement Controls

- Use the Hierarchy of Control to mitigate risks:
    1. **Eliminate** – Remove the hazard where possible.
    2. **Substitute** – Replace hazardous materials or processes.
    3. **Engineering Controls** – Use guards, barriers, ventilation.
    4. **Administrative Controls** – Implement procedures and training.
    5. **Personal Protective Equipment (PPE)** – Use as a last resort.

4.4 Record and Review the Assessment

- Document risk assessments using the college-approved template.
- Include control measures, responsibilities, and review dates.
- Review risk assessments:

○ Annually ○ When significant changes occur (new equipment, new staff, accidents, etc.).

5. Risk Rating System

- Use a risk matrix to assess the likelihood and severity of hazards.
- Prioritise high-risk activities for immediate action.
- Ensure residual risk is as low as reasonably practicable (ALARP).

6. Training and Awareness

- Provide risk assessment training for all staff responsible for conducting assessments.
- Offer refresher training annually or when significant changes occur.
- Ensure risk assessment findings are communicated to relevant stakeholders.

7. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct audits of risk assessments.
- Line managers must ensure compliance within their areas of responsibility.
- Non-compliance with risk assessment procedures may result in corrective actions.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

COSHH ASSESSMENTS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a clear process for conducting Control of Substances Hazardous to Health (COSHH) assessments. This ensures compliance with the COSHH Regulations 2002 and other relevant legislation to protect staff, students, contractors, and visitors from harm when handling hazardous substances.

2. Scope

This SOP applies to all college activities involving hazardous substances, including but not limited to:

- Science laboratories
- Art and design workshops
- Cleaning and maintenance activities
- Catering and food preparation
- Storage and disposal of hazardous materials
- Use of hazardous substances by external contractors

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure COSHH compliance is integrated into the college's health and safety policies.
- Allocate resources for COSHH training, controls, and monitoring.
- Approve high-risk COSHH assessments where necessary.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the college's COSHH risk assessment procedure.
- Provide training and support for staff handling hazardous substances.
- Monitor compliance and review COSHH assessments periodically.
- Investigate incidents involving hazardous substances and implement corrective actions.

3.3 Heads of Department / Directors of Curriculum (DoCs)

- Ensure COSHH assessments are completed for all departmental activities involving hazardous substances.
- Implement and monitor control measures to minimise exposure.
- Ensure staff are trained in COSHH procedures and safe handling practices.

3.4 Staff, Supervisors, and Technicians

- Complete COSHH assessments for substances they handle if nominated by their DOC seeking support from COSHH Advisor when required.
- Ensure control measures are followed and report hazards or concerns.
- Maintain accurate records of hazardous substance use.

3.5 Maintenance and Estates Team

- Ensure proper storage and disposal of hazardous substances.
- Ensure ventilation, safety equipment, and spill containment measures are in place.

3.6 Students and Visitors

- Follow all safety instructions when handling hazardous substances.
- Wear required personal protective equipment (PPE).
- Report any spills, leaks, or incidents involving hazardous substances.

4. COSHH Assessment Process

4.1 Identify Hazardous Substances

- Obtain safety data sheets (SDS) for all hazardous substances used on campus.
- Identify substances that are harmful by inhalation, ingestion, or skin contact.

4.2 Assess Risks

- Determine who may be affected, including staff, students, and visitors.
- Evaluate exposure risks based on how substances are used, stored, and disposed of.

4.3 Implement Control Measures

- Apply the hierarchy of control:

    1. Eliminate the hazardous substance where possible.
    2. Substitute with a less hazardous alternative.
    3. Implement engineering controls (e.g., fume hoods, ventilation systems).
    4. Apply administrative controls (e.g., training, safety signage, restricted access).
    5. Require appropriate PPE (e.g., gloves, masks, safety goggles) as a last resort.

4.4 Record and Review COSHH Assessments

- Document all findings using the college's COSHH assessment template.
- Maintain a central record of all COSHH assessments.
- Review and update assessments regularly or when new substances are introduced.

5. Special Considerations

5.1 Emergency Procedures

- Establish clear spill response and decontamination procedures.
- Ensure first aid arrangements for exposure to hazardous substances.
- Train staff and students on emergency response actions.

5.2 Storage and Disposal

- Store hazardous substances in designated, labelled, and secure areas.
- Dispose of substances following environmental and legal guidelines.
- Maintain records of hazardous waste disposal.

5.3 Health Surveillance and Monitoring

- Conduct health surveillance for staff regularly exposed to hazardous substances.
- Provide medical assessments if required by COSHH regulations.

- Monitor exposure levels and adjust controls as necessary.

6. Monitoring and Compliance

- The Finance Director (Health and Safety Lead) will conduct audits of COSHH assessments.
- Department Heads must ensure compliance with control measures.
- Incident reports will be reviewed to assess COSHH effectiveness.
- Non-compliance may result in disciplinary actions or additional training.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative or operational changes occur.

STAFF AND STUDENT SAFETY INDUCTION

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a structured safety induction process for all staff and students to ensure awareness and compliance with health and safety policies, emergency procedures, and risk management protocols. This SOP aligns with the Health and Safety at Work Act 1974 and other relevant legislation.

2. Scope

This SOP applies to all new and existing staff, students, contractors, and visitors undertaking activities on college premises. It covers:

- General health and safety awareness
- Emergency procedures and fire safety
- First aid provisions
- Workplace and classroom safety
- Reporting hazards and incidents

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure safety induction procedures comply with legal and regulatory requirements.
- Allocate resources for health and safety training and awareness initiatives.
- Promote a culture of safety throughout the institution.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the safety induction Procedure.
- Provide training and guidance on workplace safety.

3.3 Line Managers

- Complete induction as required for new starters to the college.
- Provide training and guidance on workplace safety for their department area.
- Pass records onto the HR department.

3.3 Human Resources (HR) and Student Services

- Ensure all new staff and students complete the required safety induction.
- Maintain records of completed safety training.
- Schedule refresher safety sessions for ongoing compliance if required.

3.4 Line Managers, Teaching Staff, and Supervisors

- Ensure staff and students understand emergency procedures and reporting protocols.
- Monitor compliance with safety practices in classrooms, workshops, and workspaces.

3.5 Staff, Students, and Contractors

- Attend and actively participate in safety induction sessions.
- Follow all safety guidelines and report hazards or concerns.

- Comply with emergency procedures and workplace safety requirements.

4. Safety Induction Procedures

4.1 General Safety Induction

- Overview of health and safety responsibilities and legislation.
- Tour of the premises, identifying key safety locations (fire exits, first aid stations, assembly points).
- Introduction to the Finance Director (Health and Safety Lead) and key contacts.
- Induction form is held 'Google slides' presentation.

4.2 Emergency Procedures

- Explanation of fire evacuation procedures, alarms, and assembly points.
- Response to medical emergencies, including first aid locations and procedures.
- Lockdown and security protocols for various emergency scenarios.

4.3 First Aid and Medical Awareness

- Location of first aid kits and designated first aiders.
- Reporting procedures for accidents, injuries, and near misses.
- Awareness of individual medical needs (e.g., students or staff with EHCPs or IHCP s).

4.4 Workplace and Classroom Safety

- Proper use of personal protective equipment (PPE) where required.
- Safe handling of materials and equipment.
- Procedures for reporting faulty equipment or unsafe conditions.

4.5 Risk Awareness and Reporting

- Identifying and reporting workplace hazards.
- Understanding risk assessments and their role in maintaining safety.
- Reporting mechanisms for safety concerns and near misses.

4.6 Additional Inductions for High-Risk Areas

- Laboratory safety protocols for science and engineering students.
- Workshop safety for vocational courses (e.g., Art and Design, Sports, Photography).
- IT and data security awareness for office-based staff and students.

5. Training and Awareness

- All staff and students must complete a general safety induction within their first week.
- Departmental or role-specific safety training must be completed where applicable.
- Safety bulletins and notices will be provided to communicate any changes in safety policies.

6. Monitoring and Compliance

- HR and Student Services will maintain attendance logs for safety training.
- Non-compliance with safety procedures may result in additional training or disciplinary action

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

STAFF SAFETY TRAINING

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a structured and consistent approach to staff safety training within the college. This ensures compliance with health and safety legislation, reduces workplace hazards, and promotes a culture of safety awareness.

2. Scope

This SOP applies to all staff, including full-time, part-time, temporary, and contract workers. It covers:

- General health and safety awareness
- Role-specific safety training
- Emergency response and first aid training
- Fire safety and evacuation procedures
- Manual handling and ergonomic safety
- Risk assessment and hazard reporting
- Refresher training and compliance monitoring

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with legal and regulatory requirements related to staff safety training.
- Allocate resources for training, assessments, and refresher courses.
- Promote a culture of continuous safety education.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain with HR the staff safety training Procedure.
- Conduct risk assessments to determine training needs.
- Provide training sessions and ensure staff compliance with this SOP.
- Monitor and review the effectiveness of safety training programs.

3.3 Human Resources (HR) Department

- Maintain training records and ensure new staff complete mandatory safety induction.
- Schedule refresher training and updates based on regulatory changes.
- Assist with onboarding processes, ensuring safety requirements are met.

3.4 Line Managers and Supervisors

- Ensure team members complete required safety training.
- Monitor staff adherence to safety procedures in daily operations.
- Identify additional training needs based on workplace risks.

3.5 Staff Members

- Attend all required safety training sessions.

- Follow safety policies and procedures.
- Report hazards and request additional training if needed.

4. Staff Safety Training Program

4.1 Induction Training

- Mandatory for all new staff members within the first month of employment.
- Covers general health and safety policies, emergency procedures, and incident reporting.
- Includes site tours to identify fire exits, first aid stations, and safety contacts.

4.2 Role-Specific Safety Training

- Tailored training based on job functions (e.g., laboratory safety, working at height, handling chemicals).
- Provided upon job assignment and reviewed annually.

4.3 Emergency Response and First Aid Training

- Fire safety, evacuation drills, and use of fire extinguishers.
- Basic first aid and CPR training for designated first aiders.
- Lockdown procedure training where applicable.

4.4 Manual Handling and Ergonomic Safety

- Proper lifting techniques to prevent musculoskeletal injuries.
- Workstation ergonomics for office-based staff.
- Use of mechanical lifting aids where applicable.

4.5 Risk Assessment and Hazard Identification

- Staff training on conducting basic risk assessments.
- Procedures for identifying and reporting hazards.
- Legal responsibilities under the Health and Safety at Work Act 1974.

4.6 Refresher Training and Continuous Learning

- Annual refresher training sessions to reinforce safety procedures.
- Updates provided based on changes in legislation or operational risks.
- Ongoing e-learning modules for self-paced training.

5. Training Delivery Methods

- In-person training sessions with hands-on demonstrations.
- Online learning modules and self-assessment quizzes.
- Toolbox talks and safety briefings during team meetings.
- External training courses for high-risk activities (e.g., working at height, COSHH handling).

6. Monitoring and Compliance

- The Finance Director (Health and Safety Lead) will audit staff training records.

- HR will maintain a database of completed and outstanding training sessions.
- Line managers will ensure staff adhere to training guidelines in daily tasks.
- Non-compliance may result in retraining, disciplinary action, or restricted work assignments.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or training requirements change.

ACCIDENT AND NEAR MISS REPORTING

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to outline the process for reporting, investigating, and recording workplace accidents and near misses in compliance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). This SOP ensures that all incidents are properly documented, investigated, and used to improve workplace safety.

2. Scope

This SOP applies to all staff, students, contractors, and visitors on college premises or engaged in collegerelated activities. It covers:

- Workplace injuries and illnesses
- Near misses and unsafe conditions
- Dangerous occurrences (as defined by RIDDOR)
- Occupational diseases and exposure incidents

3. Definitions

- **Accident:** An unplanned event that results in injury, illness, damage, or loss. Examples include slips, trips, falls, equipment malfunctions, or exposure to hazardous substances.
- **Near Miss:** An unplanned event that, while not resulting in injury or damage, had the potential to do so. Examples include a falling object narrowly missing a person or a faulty machine that could have caused harm but did not.
- **Dangerous Occurrence:** A serious event specified under RIDDOR that does not always result in injury but must be reported due to its hazardous nature (e.g., an explosion, structural collapse, or major gas leak).

4. Roles and Responsibilities

4.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with RIDDOR 2013 and other health and safety regulations.
- Allocate resources for investigation and corrective actions.
- Oversee serious incident reporting to regulatory authorities.

4.2 Finance Director (Health and Safety Lead)

- Develop and maintain the accident and near miss reporting Procedure.
- Conduct risk assessments and oversee compliance with this SOP.
- Ensure RIDDOR reportable incidents are notified to the Health and Safety Executive (HSE).
- Investigate serious incidents and recommend corrective measures.

4.3 Line Managers and Supervisors

- Ensure all accidents and near misses are reported promptly.
- Conduct initial incident investigations and implement immediate control measures.
- Maintain records of incidents and follow up on corrective actions.

4.4 Staff, Students, and Contractors

- Report all workplace accidents, injuries, and near misses immediately.
- Participate in investigations and provide accurate information.
- Follow safety procedures and use Personal Protective Equipment (PPE) as required.

5. Accident and Near Miss Reporting Procedures

5.1 Immediate Actions

- Ensure the safety of affected individuals and prevent further harm.
- Administer first aid if required and seek medical assistance if necessary.
- Secure the area and preserve evidence for investigation.
- Notify the Finance Director (Health and Safety Lead) or line manager immediately.

5.2 Reporting an Incident

- Complete an accident or near miss report form within 24 hours.
- Include key details:
  - Date, time, and location of the incident
  - People involved
  - Description of the event
  - Immediate actions taken
- Submit the report to the Finance Director (Health and Safety Lead) for review.

5.3 Investigation and Corrective Actions

- Conduct a formal investigation for all accidents and high-risk near misses.
- Identify root causes and contributing factors.
- Recommend corrective and preventive measures.
- Communicate findings and lessons learned to relevant stakeholders.

5.4 RIDDOR Reporting

Under RIDDOR 2013, the following must be reported to the HSE:

- Work-related fatalities
- Specified serious injuries (e.g., fractures, amputations, serious burns)
- Occupational diseases (e.g., carpal tunnel syndrome, dermatitis, asthma)
- Dangerous occurrences (e.g., gas leaks, building collapses, equipment failures)
- Incidents requiring an employee to be off work for more than seven consecutive days

Reporting to HSE:

- Reports must be submitted via the HSE's online reporting system within set timeframes.
- Fatal and serious incidents must be reported by telephone immediately.
- A copy of all RIDDOR reports must be retained for a minimum of three years.

RIDDOR Reporting Lines Table

Role	Responsibility	Reporting Line
Staff Member / Student / Contractor/Visitor	Report all accidents, injuries, near misses, and dangerous occurrences.	Notify Line Manager or Site Supervisor immediately.
Line Manager / Site Supervisor	Ensure incident is logged, initiate internal investigation, and inform H&S Lead.	Report incident to Finance Director (H&S Lead).
Finance Director (Health & Safety Lead)	Assess whether the incident is RIDDOR reportable. Complete online report to HSE. Investigate and implement corrective actions.	Report directly to HSE via HSE RIDDOR Portal.
Principal / Senior Leadership Team (SLT)	Oversight of serious incidents. Ensure resources for compliance and corrective action.	Informed by H&S Lead. Final accountability.
HSE (External Authority)	Receives statutory reports of specified injuries, diseases, and dangerous occurrences.	Responds with enforcement, advice, or inspection as needed

RIDDOR Reportable Incident Timescales

Type of Reportable Incident	Description	Timeframe to Report to HSE	Reporting Method
Fatality	Death of a worker or non-worker arising from a work-related accident.	Immediately (by phone), followed by written report within 10 days.	Online form or telephone (0345 300 9923)
Specified Injuries to Workers	Fractures (except fingers, thumbs, toes), amputations, loss of sight, crush injuries, burns, scalping, unconsciousness, etc.	Within 10 days of the incident.	Online form
Over 7-Day Injuries	Injuries that cause an employee to be off work (or unable to perform normal duties) for more than 7 consecutive days.	Within 15 days of the incident.	Online form
Injuries to non-Workers (e.g. Students)	A member of the public is taken directly from the scene to hospital for treatment (not observation only).	Within 10 days of the incident.	Online form
Dangerous Occurrences	Near-miss events like structural collapse, fire/explosion, electrical incidents, equipment failure, gas leaks.	Immediately (where possible), written report within 10 days.	Online form
Occupational Diseases	Diagnosis of work-related illnesses like carpal tunnel, dermatitis, asthma, tendonitis, occupational cancer, etc.	As soon as diagnosed by a doctor.	Online form
Gas Incidents	Death, unconsciousness, or hospitalisation due to gas leak or exposure.	Immediately	Online form and Gas Safety Reporting Line

RIDDOR 2013: Public & students

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 is a UK legislation that requires the reporting of work-related accidents, diseases, and dangerous occurrences. It applies to all work activities but has specific implications for public members and educational settings like schools.

Cases involving children/students are reportable to HSE if an accident, injury, or death occurred as a direct consequence of a school activity or lack of sufficient safety measures.

If a member of the public/Student is injured due to a work-related accident (where the work/college activity directly contributes to the accident) and they are taken directly from the scene of the accident to the hospital for treatment (other than for observation), the incident must be reported under RIDDOR.

- Was there a failure in the way a work activity (such as a school trip) was organised?
- Were work-related substances or equipment used incorrectly?
- Was the incident caused by poorly maintained school premises or equipment?
- Was the activity that led to the accident poorly supervised?

Examples of Reportable Accidents:

- PE lesson accident: A student slips on a wet gym floor, fracturing her wrist as a result. The cause of the accident was the freshly mopped floor that hadn't been given enough time to dry before the lesson. Poor management of a school activity is to blame, which is a reportable incident.
- Workshop accident: A student suffers a cut hand due to poorly maintained equipment or lack of supervision, visits hospital directly from the scene of the accident and receives stitches.
- Electric shock accident: A faulty computer cable was unplugged by the IT teacher during a lesson but accidentally plugged back in by a student who receives an electric shock requiring hospital treatment. Poor management of a hazard at school is to blame, which is a reportable incident.
- Supervision: The College had not provided adequate supervision, e.g. where particular risks were identified but no action was taken to provide suitable supervision.

Examples of Non-Reportable Accidents:

- Pre-existing medical conditions that are triggered by something NOT related to how the educational establishment operates.
- Precautionary hospital visits where no treatment was given.
- Sports injuries caused by normal 'rough and tumble' rather than as a result of the school's risk management.

- Playground accidents due to slips, trips, falls or collisions unrelated to student supervision or the physical condition of the premises.
- Violence between students.
- Injuries occurring as a result of a road traffic accident while travelling on a college bus. This type of incident is investigated by the police.

It is vital that if a student visits hospital after a visit that the accident is followed up to determine the outcome of the visit and if treatment was given.

6. Follow-Up and Record-Keeping

- Maintain records of all accident and near miss reports.
- Regularly review trends and implement risk reduction measures.
- Conduct annual incident analysis to improve workplace safety.

7. Training and Awareness

- Provide training on accident reporting procedures and RIDDOR compliance.
- Conduct refresher courses and safety briefings for staff and students.
- Display reporting procedures and emergency contacts in high-risk areas.

8. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits of incident records.
- Senior leadership will review incident trends and ensure continuous improvement.
- Non-compliance with reporting procedures may result in disciplinary action or retraining.

9. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or regulatory changes occur.

FIRST AID PROVISIONS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure the provision of appropriate first aid facilities, personnel, and procedures within the college. This SOP ensures compliance with the Health and Safety (First Aid) Regulations 1981 and other relevant legislation.

2. Scope

This SOP applies to all staff, students, visitors, and contractors on college premises and during off-site activities. It covers:

- First aid equipment and facilities
- Designated first aiders
- Response to medical emergencies
- Reporting and record-keeping of incidents
- Training requirements

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure first aid policies comply with legal requirements.
- Allocate resources for first aid facilities, training, and equipment.
- Support the implementation of emergency procedures.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the first aid procedure.
- Conduct risk assessments for first aid provisions.
- Ensure appropriate training for designated first aiders.
- Monitor compliance with this SOP and review incidents.

3.3 College Nurse, First Aiders

- Provide immediate first aid assistance when required.
- Maintain first aid qualifications through regular training.
- Ensure first aid kits are stocked and in good condition.
- Record and report first aid incidents in accordance with college policy.

3.4 Staff and Students

- Be aware of first aid provisions and emergency procedures.
- Report injuries or health concerns to designated first aiders.
- Follow instructions from first aiders in case of medical emergencies.

3.5 Facilities and Estates Team

- Ensure first aid rooms and equipment are properly maintained.
- Assist in emergency evacuations and access for emergency services.

4. First Aid Procedures

4.1 First Aid Needs Assessment

- Conduct a risk assessment to determine first aid requirements based on activities, number of people on site, and specific risks.
- Ensure adequate first aid coverage across all college areas.

4.2 First Aid Equipment and Facilities

- Maintain well-stocked first aid kits in key locations (e.g., classrooms, offices, workshops, sports facilities).
- Provide a designated first aid room with essential supplies.
- Ensure automated external defibrillators (AEDs) are accessible and maintained where required.

4.3 First Aid Response and Emergency Procedures

- In case of an injury or medical emergency:
    1. Assess the situation and ensure the safety of the injured person and others.
    2. Call for a designated first aider, if necessary, by calling **246** internal phones.
    3. Provide first aid following training guidelines.
    4. Contact emergency services (999) for serious injuries.
    5. Inform the Finance Director (Health and Safety Lead) of the incident if ambulance called.
- For minor injuries, administer basic first aid and advise on follow-up care.

4.4 First Aid for Off-Site Activities and Events

- Ensure first aid provisions are in place for trips, sports activities, and events.
- Assign a trained first aider for off-site activities based upon risk assessment.
- Carry a portable first aid kit for field trips and remote activities.

4.5 Incident Reporting and Record-Keeping

- Record all first aid incidents in the accident log.
- Report serious injuries to the Finance Director (Health and Safety Lead).
- Follow RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) requirements where applicable.

5. Training and Certification

- Provide first aid training for designated staff members.

- Ensure refresher training is conducted every 12 months re-certificated every 3 years.

6. Monitoring and Compliance

- The Finance Director (Health and Safety Lead) will conduct audits of first aid provisions.
- Regular checks of first aid kits, defibrillators, and facilities will be carried out.
- Non-compliance with first aid procedures may result in corrective actions.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

FIRE SAFETY MANAGEMENT

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a Procedure for fire safety management within the college to ensure compliance with the Regulatory Reform (Fire Safety) Order 2005. This SOP aims to prevent fire incidents, protect lives, and minimise property damage.

2. Scope

This SOP applies to all staff, students, contractors, and visitors within college premises. It covers:

- Fire risk assessments
- Fire prevention measures
- Fire detection and warning systems
- Emergency evacuation procedures
- Emergency lighting
- Fire safety training and compliance monitoring

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with fire safety legislation and best practices.
- Allocate resources for fire safety equipment, training, and risk assessments.
- Oversee the effectiveness of fire safety procedures.

3.2 Finance Director (Health and Safety Lead)

- Develop and implement fire safety policies and procedures.
- Arrange fire risk assessments and ensure compliance with this SOP.
- Monitor fire safety equipment maintenance and ensure regular testing.
- Investigate fire incidents and implement corrective actions.

3.3 Estates and Facilities Team

- Maintain fire detection, alarm systems, and firefighting equipment.
- Conduct routine checks of fire exits, escape routes, and emergency lighting.
- Ensure clear signage for evacuation routes and fire assembly points.
- Ensure emergency lighting is functional and regularly tested.

3.4 Fire Marshals

- Assist with fire evacuations and ensure designated areas are clear.

- Report fire hazards and ensure compliance with fire safety policies.
- Participate in fire safety training and drills.

3.5 Staff, Students, and Contractors

- Follow fire safety procedures and emergency evacuation plans.
- Report fire hazards or faulty fire safety equipment immediately.
- Participate in fire safety training and evacuation drills.

4. Fire Risk Assessment and Prevention

4.1 Fire Risk Assessment

- Conduct regular fire risk assessments for all college buildings.
- Identify potential fire hazards and implement control measures.
- Maintain records of assessments and review them annually or when changes occur.

4.2 Fire Prevention Measures

- Keep fire exits and escape routes unobstructed.
- Store flammable materials safely and away from ignition sources.
- Implement no-smoking policies in prohibited areas.
- Ensure electrical equipment is tested and maintained regularly.

5. Fire Detection and Emergency Response

5.1 Fire Detection and Alarm Systems

- Maintain operational fire alarms and smoke detectors.
- Test alarm systems weekly and log results.
- Investigate and address false alarms promptly.

5.2 Firefighting Equipment

- Provide and maintain fire extinguishers, blankets, and hose reels.
- Ensure staff and fire marshals are trained in their proper use.

5.3 Emergency Evacuation Procedures

- Display fire evacuation plans in key locations.
- Conduct fire drills termly or minimum per year.
- Designate fire assembly points and ensure all individuals are accounted for.
- Implement Personal Emergency Evacuation Plans (PEEPs) for individuals with disabilities.

5.4 Emergency Lighting

- Ensure emergency lighting is installed in all required areas, including stairwells, hallways, and exits.
- Conduct monthly inspections of emergency lighting systems.
- Maintain a log of emergency lighting tests and promptly address any failures.
- Ensure emergency lighting remains operational during power failures.

6. Fire Safety Training and Awareness

- Provide mandatory fire safety training for all staff and students.
- Conduct refresher training annually.
- Ensure fire marshals receive additional training on fire response and evacuation procedures.

7. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic fire safety audits.

8. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

PERSONAL EMERGENCY EVACUATION PLANS (PEEPS)

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to establish a structured approach for developing and implementing Personal Emergency Evacuation Plans (PEEPs) to ensure the safe evacuation of staff, students, and visitors with disabilities or mobility impairments. This SOP aligns with the Regulatory Reform (Fire Safety) Order 2005 and the Equality Act 2010.

2. Scope
This SOP applies to all staff, students, and visitors who may require assistance during an emergency evacuation. It covers:

- Identification and assessment of individuals requiring PEEPs
- Development and implementation of PEEPs
- Training and awareness
- Compliance monitoring and periodic reviews

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with fire safety and accessibility legislation.
- Allocate resources for evacuation aids, training, and accessibility improvements.
- Oversee the implementation of PEEPs across the institution.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the PEEP Procedure and ensure compliance.
- Conduct risk assessments for individuals requiring evacuation support.
- Ensure fire marshals and staff are trained in implementing PEEPs.
- Regularly review and update PEEP procedures.

3.3 Estates and Facilities Team

- Maintain accessible evacuation routes and emergency exits.
- Ensure evacuation chairs and other assistive devices are available and in working order.
- Conduct regular maintenance checks on emergency equipment.

3.4 Line Managers, Academic Staff, and Student Services

- SENCO receive EHCP and identify those students who may require a PEEP and notify student support
- Line Managers Identify istaff who may require PEEPs and complete the PEEP for as required.
- Ensure affected individuals understand their PEEP and are comfortable with evacuation procedures.

3.5 Fire Marshals and Support Staff

- Assist individuals with PEEPs during emergency evacuations.
- Follow assigned evacuation procedures and provide necessary support.
- Report any challenges or issues encountered during drills or real evacuations.

3.6 Staff, Students, and Visitors Requiring PEEPs

- Inform the college of any mobility or health conditions that may require a PEEP.
- Participate in evacuation drills and cooperate with designated assistants.
- Provide feedback on the effectiveness of their PEEP.

4. PEEP Development and Implementation

4.1 Identification and Assessment

- New staff and students are asked about potential evacuation assistance needs upon enrolment or hiring.
- Visitors requiring assistance should inform reception upon arrival.
- Risk assessments are conducted to determine the level of support needed.

4.2 PEEP Development

- A tailored PEEP is developed for each individual, detailing:

○ Primary and secondary evacuation routes ○ Designated support personnel ○ Use of assistive equipment (e.g., evacuation chairs, lifts, alarms with visual indicators) ○ Procedures for different emergency scenarios

- The individual's consent and input are considered when finalising the plan.

4.3 Implementation and Training

- PEEPs are communicated to relevant staff and fire marshals.
- Staff assigned to assist individuals receive training on procedures and equipment.
- Regular fire drills include testing PEEPs to ensure effectiveness.

4.4 Signage and Equipment

- Clearly marked accessible evacuation routes are maintained.
- Emergency evacuation chairs and refuges are strategically placed and maintained.
- Personal alarm systems (e.g., vibrating alarms for those with hearing impairments) are provided where necessary.

5. Emergency Evacuation Procedures

- Staff and students with PEEPs should follow their designated escape plan.
- Fire marshals and designated assistants provide support as required.
- In the event of an obstruction or equipment failure, an alternative escape strategy is activated.
- All PEEP evacuations are recorded and reviewed for effectiveness.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct regular audits of PEEPs and related procedures.
- Estates and Facilities will maintain records of evacuation chair maintenance and accessibility improvements.
- Non-compliance with PEEP procedures may result in further training or procedural adjustments.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or individual needs change.

STUDENT MEDICAL DECLARATION AND CONSENT FORMS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to provide a clear process for the collection, storage, review, and use of student medical declaration and consent forms. This ensures that the college can effectively support students with medical needs and respond appropriately in the event of an emergency, while maintaining compliance with the Data Protection Act 2018 and safeguarding obligations.

2. Scope

This SOP applies to all students enrolling at the college, and covers:

- Collection of medical information and consent
- Use of information for educational and extra-curricular planning
- Secure storage and sharing protocols
- Emergency access and response procedures

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure that policies comply with relevant health, safety, and data protection legislation.
- Allocate resources for appropriate student medical care and emergency preparedness.

3.2 Student Services and Admissions Team

- Distribute and collect medical declaration and consent forms during the enrolment process.
- Ensure completed forms are stored securely and reviewed by appropriate staff.
- Flag relevant medical needs or emergency care plans to designated staff members.

3.3 College Nurse

- Advise on the management of medical conditions and emergency planning.
- Support the development of Individual Healthcare Plans (IHCPs) where necessary.
- Ensure first aid staff are informed and trained to respond to declared medical conditions.

3.4 First Aiders and Safeguarding Team

- Respond to medical incidents based on provided information and care plans.
- Maintain awareness of students requiring additional medical support. • Report incidents and ensure post-incident review and record-keeping.

3.5 Parents/Guardians and Students

- Provide accurate and up-to-date medical information.
- Consent to the administration of first aid and emergency treatment.
- Notify the college of any changes to medical conditions or emergency contacts.

4. Collection and Management of Medical Forms

4.1 Medical Declaration Forms

- Issued to students at the point of enrolment or prior to any off-site activity.

Must include:

- Medical conditions and allergies
- Medication being taken
- GP or medical contact details
- Emergency contact details

4.2 Consent Forms

Include permission for the administration of first aid and emergency medical treatment.

Additional consents may be required for:

- Participation in off-site visits
- Use of medication during school hours
- Involvement in physical or high-risk activities

5. Secure Storage and Confidentiality

- Medical records are stored securely (digitally and/or in locked filing systems).
- Access is restricted to authorised staff on a need-to-know basis.
- All records are managed in accordance with GDPR and the Data Protection Act 2018.

6. Use of Information in Educational and Extra-Curricular Activities

- Staff organising trips, placements, or activities must review relevant medical and consent information.
- Medical needs must be considered in risk assessments.
- Emergency plans should include steps for managing known medical conditions.

7. Emergency Situations

- First aiders must follow college procedures and care plans in responding to emergencies.
- Consent forms allow for first aid and calling emergency services when required.
- Parents/guardians must be informed of all significant medical incidents.

8. Review and Updates

- Medical and consent forms must be reviewed annually or at the start of each academic year.
- Students and parents are responsible for updating the college if changes occur.

9. Compliance and Auditing

- The Health and Safety Lead will conduct periodic audits of medical and consent processes.
- Student Services will ensure compliance with data protection and safeguarding standards.
- Any discrepancies or omissions must be rectified promptly.

EDUCATIONAL HEALTHCARE PLANS (EHCP) AND INDIVIDUAL HEALTH CARE PLANS (IHCP)FOR STUDENTS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a clear Procedure for the management, implementation, and review of Educational Healthcare Plans (EHCP) and Individual Health Care Plans (IHCP) within the college. This SOP ensures compliance with the Children and Families Act 2014, the SEND Code of Practice 2015, and relevant health and safety legislation.

2. Scope

This SOP applies to all students requiring EHCPs or IHCP s and involves staff, parents/guardians, healthcare professionals, and external agencies. It covers:

- Identification of students requiring EHCP or IHCP support.
- Procedures for developing, reviewing, and implementing plans.
- Roles and responsibilities of staff in supporting students with EHCPs and IHCP s.
- Emergency response procedures for students with medical conditions.

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure EHCP and IHCP policies align with legal requirements.
- Allocate resources for staff training and student support.
- Oversee the implementation and monitoring of EHCPs and IHCP s.

3.2 Special Educational Needs Coordinator (SENDCO)

- Lead the identification, creation, and review of EHCPs in coordination with external agencies.
- Ensure all relevant staff are informed and trained on EHCP requirements.
- Upload to Pro Monitor under the student record.
- Outcomes and Teaching Strategies are summarised into a simple document on Pro Monitor.
- Act as the primary contact for students, parents/guardians, and health professionals.
- Maintain accurate and up-to-date records of EHCPs.
- Review EHCP annually.

3.3 College Nurse

- Lead the identification, creation, and review of IHCPs as identified through enrolment and medical consent forms.
- Ensure all relevant staff are informed and trained on IHCP requirements.
- Upload to Pro Monitor under the student record.
- Outcomes put into a simple document on Pro Monitor
- Act as the primary contact for students, parents/guardians, and health professionals.
- Maintain accurate and up-to-date records of IHCPs.
- Review IHCP annually or dependant on medical condition.

3.3 Finance Director (Health and Safety Lead)

- Support the implementation of medical-related Emergency Care Plans.
- Conduct risk assessments for students requiring emergency medical support.
- Ensure staff are trained in emergency procedures for students with IHCP s.

3.4 Teaching and Support Staff

- Implement EHCPs and IHCP s as part of daily teaching and student support.
- Monitor student progress and report concerns to the SENDCO.
- Be aware of emergency response protocols for students with medical conditions.
- Attend training sessions on SENCO awareness

3.5 Parents/Guardians and External Agencies

- Provide up-to-date medical and educational information for EHCP and IHCP development.
- Engage in regular reviews and updates of student plans.
- Collaborate with the college to ensure effective support and care.

4. EHCP and IHCP Development Process

4.1 Identification and Assessment

- Students requiring additional educational or medical support are identified through referrals from staff, parents, or external professionals or through the enrolment process.
- An assessment is conducted to determine the level of support needed.
- The SENDCO/College Nurse collaborates with parents, students, and professionals to develop a tailored plan.

4.2 Development of EHCPs

- EHCPs outline educational, health, and care needs, setting specific outcomes and support strategies.
- Plans are created in partnership with local authorities, healthcare providers, and educational staff.
- Parents and students are consulted throughout the process.

4.3 Development of IHC s

- IHCP s are developed for students with medical conditions requiring emergency intervention (e.g., epilepsy, severe allergies, diabetes).
- Plans include step-by-step emergency response instructions, medication management, and designated staff responsibilities.
- Staff are trained in emergency procedures specific to each IHCP.

4.4 Implementation and Monitoring

- EHCPs and IHCP s are communicated to all relevant staff.
- Staff ensure accommodations and support measures are in place for affected students.
- Regular monitoring and assessment of student progress take place.

4.5 Annual Reviews and Updates

- EHCPs are reviewed annually to ensure they continue to meet student needs.
- IHCP s are reviewed as needed or when a student's medical condition changes.
- Amendments are made in consultation with parents, healthcare providers, and staff.

5. Training and Awareness

- Provide EHCP and IHCP training for all staff, with specialized training for those directly supporting students.
- Conduct refresher training annually or when plans are updated.
- Ensure staff have access to digital and printed copies of relevant student plans.

6. Compliance and Auditing

- The SENDCO will conduct audits of EHCP and IHCP implementation and effectiveness.
- Regular reviews of student records will be undertaken to ensure compliance.
- Non-compliance with EHCP and IHCP procedures may result in further training or policy adjustments.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or student needs change.

DELIVERING EDUCATIONAL VISITS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure the safe and efficient planning, approval, and delivery of educational visits using the EVOLVE visits system. This SOP ensures compliance with relevant health and safety regulations and best practice guidelines for off-site visits.

2. Scope

This SOP applies to all college staff involved in the planning, approval, and supervision of educational visits, including:

- Local day visits
- Residential trips
- Overseas visits
- High-risk activities (e.g., outdoor adventure trips, hazardous environments)
- Work placements and educational partnerships

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure educational visits align with college policies and strategic objectives.
- Approve high-risk and overseas visits.
- Allocate resources for trip planning, risk management, and training.

3.2 Educational Visits Coordinator (EVC)

- Oversee the implementation of EVOLVE visits for all educational trips.
- Ensure trip organisers complete all required risk assessments and documentation.
- Provide training and support on the use of EVOLVE visits.
- Monitor compliance with this SOP and review visit reports.

3.3 Trip Organisers (Teaching and Support Staff Leading Visits)

- Plan and submit visit proposals via the EVOLVE visits system.
- Conduct pre-visit risk assessments and complete relevant documentation.
- Ensure appropriate supervision levels and emergency procedures are in place.
- Communicate visit details and expectations to students and parents/guardians.

3.4 Support Staff and Volunteers

- Assist trip organisers in managing student supervision and welfare.
- Volunteers must undergo a DBS check.
- Follow risk management and emergency procedures.
- Report any incidents or concerns during the visit.

3.5 Students and Parents/Guardians

- Follow instructions and safety guidelines provided by staff.
- Submit consent forms and any required medical information.
- Report concerns or issues to trip organisers.

4. Educational Visit Planning Process

What is Evolve?

Evolve is an online platform used by schools and colleges to plan, manage, and approve **educational visits**, trips, and off-site activities. It helps ensure that trips are well-organised, risk assessed, and compliant with health and safety regulations and college policies.

What is Evolve Used For?

- **Planning Educational Visits**
  Staff can submit details of planned trips (e.g., date, destination, purpose, transport, supervision) for internal approval.

- **Managing Risk Assessments**
  Evolve provides a structured way to attach or create risk assessments, ensuring that hazards are considered, and controls are in place.

- **Approval Workflow**
  Evolve routes trip requests through the correct approval channels (e.g., Line Manager, EVC, Principal) and logs the status at each stage.

- **Collecting Consents**
  Helps generate or record parental/carer consent (where required), medical details, and emergency contact information.

- **Audit Trail and Reporting**
  Provides a clear record of all visits, including who approved what and when, which can be used for inspections, audits, and post-trip reviews.

4.1 Submitting a Visit Proposal

- Log into the EVOLVE visits system and create a new visit entry.
- Provide details such as visit purpose, location, dates, transport, and participant list.

4.2 Risk Assessment and Control Measures

- Conduct a risk assessment covering travel, activities, accommodation, and student needs.
- Identify hazards and implement control measures (e.g., first aid provisions, supervision ratios, emergency contacts).
- Upload completed risk assessments to EVOLVE
- Submit the proposal to the EVC for initial review.

4.3 Approval Process

- Low-risk visits: Approved by the EVC and Principal.
- High-risk visits (e.g., adventure activities, overseas trips): Requires EVC, SLT and LA approval.

4.4 Pre-Visit Communication and Preparation

- Notify parents/guardians and obtain consent forms via EVOLVE visits.
- Arrange travel, accommodation, insurance, and emergency provisions.
- Brief students and staff on visit expectations, itinerary, and safety procedures.

5. Visit Supervision and Safety

- Maintain appropriate staff-to-student supervision ratios.
- Ensure first aid kits and emergency contact lists are available.
- Follow planned risk management and emergency procedures.
- Report incidents and concerns via EVOLVE visits upon return.

6. Post-Visit Review and Reporting

- Complete a post-visit report on EVOLVE visits, noting any incidents or lessons learned.
- Identify areas for improvement and update risk assessments if necessary.
- Share feedback with the EVC and relevant departments.

7. Emergency Procedures

- Follow pre-established emergency contact protocols.
- In the event of a serious incident, contact emergency services and notify college leadership.
- Log incidents in EVOLVE visits and complete follow-up reports.

8. Training and Awareness

- Provide EVOLVE visits training for all trip organisers and relevant staff.
- Conduct refresher training periodically.
- Ensure guidance on educational visit planning is accessible to all staff.

9. Compliance and Auditing

- The EVC will conduct audits of the EVOLVE visits system to ensure compliance.
- Regularly review visit approvals and incident reports for best practice improvements.
- Non-compliance with procedures may result in trip cancellation or additional training requirements.

10. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or technological changes occur.

ARRANGING WORK EXPERIENCE (WEX)

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to outline the process for arranging and managing work experience (WEX) placements for students in compliance with Health and Safety Executive (HSE) guidance for education. This SOP ensures that placements provide a safe, structured, and beneficial learning environment while minimising risks.

2. Scope
This SOP applies to all staff involved in arranging, approving, and monitoring work experience placements for students. It covers:

- Employer selection and suitability assessment
- Health and safety risk assessment and due diligence
- Student preparation and safeguarding
- Monitoring and feedback processes

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with HSE guidance and educational policies.
- Allocate resources for managing work experience placements.
- Oversee the effectiveness and safety of work experience programmes.

3.2 Work Experience Coordinator

- Identify and liaise with potential employers.
- Receive potential WEX placement suggestions from Students.
- Ensure all placements are appropriate for the student.
- Ensure risk assessments and health and safety checks are completed.
- Maintain accurate records of placements and employer agreements.
- Provide guidance and training to students before and during placements.
- Manage the “GrowFar” WEX Platform.

3.3 Finance Director (Health and Safety Lead)

- Conduct risk assessments for WEX placements in line with HSE requirements.

- Ensure employers meet legal obligations regarding workplace safety.
- Monitor any incidents and implement corrective actions if required.

3.4 Employers and Host Organisations

- Provide a safe and structured working environment.
- Assign students appropriate tasks and supervision.
- Adhere to safeguarding and workplace health and safety regulations.
- Report any incidents or concerns to the college.

3.5 Staff, Students, and Parents/Guardians

- Ensure students understand health and safety expectations and "Learner Worker Agreement" before placement
- Report any issues encountered during the placement.
- Follow workplace and college policies on behaviour and conduct. **4. Arranging Work Experience Placements via Grow Far**

What is Grow Far?

Grow Far is a digital platform designed to help schools, colleges, and training providers manage work experience and industry placements for students. It brings together students, staff, and employers in one place, making it easier to organise, track, and support meaningful work-based learning opportunities.

What is Grow Far Used For?

- **Organising Work Experience**

Helps education providers manage and match students with suitable work experience opportunities.

- **Connecting with Employers**

Stores a database of employers, making it easy to keep in touch, manage placements, and generate necessary paperwork.

- **Tracking Progress and Compliance**

Ensures all documentation (e.g. risk assessments, employer agreements, parental consent) is completed and logged in one place.

- **Supporting Students**

Allows staff to monitor how students are getting on, log feedback, and ensure placements are appropriate and successful.

- **Reporting and Auditing**

Produces reports and evidence for internal tracking, inspections, and funding requirements (like TLevels or Gatsby Benchmarks

4.1 Employer Selection and Suitability Assessment

- Conduct pre-placement employer checks, ensuring alignment with industry standards.
- Confirm that employers have valid insurance (Employer's Liability Insurance required).
- Review previous placements and feedback to assess suitability.

4.2 Health and Safety Risk Assessment and Due Diligence

- The Employer receives a WEX guidance booklet (Safeguarding and General Good WEX practice)
- The employer must complete a 'Employer Agreement form' for the student's role.
- Work Experience Coordinator to confirm that appropriate safety controls are in place.
- Additional safety measures to be implemented for high-risk industries (e.g., construction, manufacturing).

4.3 Student Preparation and Safeguarding

- Conduct a pre-placement briefing covering workplace safety, behaviour expectations, and emergency procedures.
- Ensure students understand their rights and how to report concerns.
- Provide contact details for emergency support during the placement.
- Assign additional safeguarding support for vulnerable students where necessary.

4.4 Monitoring and Incident Reporting

- Maintain regular contact with employers and students during placement.
- Conduct mid-placement check-ins to assess progress and resolve issues.
- Encourage students to provide feedback on their experience.
- Investigate any incidents or complaints and take corrective action as needed.

5. Emergency Procedures

- Employers must have clear emergency procedures in place and communicate them to students.
- Students must report any accidents or safety concerns immediately.
- The college must investigate and document incidents, implementing improvements where required.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct regular audits of work experience procedures.
- Work Experience Coordinators must maintain a database of approved employers and risk assessments via "Grow Far".
- Failure to comply with work experience policies may result in placement suspension or further training requirements.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or HSE guidance changes occur.

DRIVING FOR WORK

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to outline the requirements and responsibilities for staff driving for work, including the use of the minibuses. This SOP ensures compliance with road safety legislation, the Highway Code, and college policies to minimise risks associated with work-related driving.

2. Scope

This SOP applies to all staff who drive for work purposes, including:

- The use of personal vehicles for work-related travel.
- College-owned or leased vehicles.
- Minibuses leased through the MIDAS scheme.
- Transporting students, staff, or equipment.

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with all legal requirements related to driving for work.
- Allocate resources for vehicle maintenance, driver training, and insurance.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the college's driving for work procedure.
- Ensure compliance with the training and certification requirements where required.
- Investigate driving-related incidents and implement corrective measures.

3.3 Estates and Facilities Team

- Oversee the maintenance and inspection of college vehicles. (carried out by Hampshire Transport Management)
- Manage vehicle booking systems and availability of the estates minibus.
- Approve staff members authorised to drive college vehicles.

3.4 Staff Approved to Drive for Work

- Complete the necessary driving assessments, MIDAS certification for minibus use for regular drivers.
- Ensure vehicles are roadworthy before each journey using the checklist.

- Adhere to speed limits, driving laws, and road safety regulations.
- Report vehicle defects, accidents, or incidents immediately.

3.5 Passengers and Students

- Follow safety instructions provided by the driver.
- Wear seat belts at all times while in a vehicle.
- Report concerns regarding vehicle safety or driver behaviour.

4. Driving for Work Procedures

4.1 Driver Requirements

- Only authorised staff with valid driving licences may drive for work purposes.
- Staff driving a minibus under the MIDAS scheme must complete the MIDAS training and assessment. • All other drivers must hold the relevant D1 license requirements to be validated by the Estates Manager.
- Drivers must declare any medical conditions or penalties that may affect their ability to drive.

4.2 Vehicle Checks and Maintenance

- Conduct pre-use vehicle checks, including:
    - Tyres, brakes, and lights. ○ Fuel levels and fluid levels.
    - Seat belts and emergency equipment.
- Report any defects or concerns to the Estates and Facilities Team before use.
- Regular servicing and inspections will be managed by the Estates and Facilities Team.

4.3 MIDAS Leased Minibus Scheme

- Minibus drivers must hold a valid UK driving licence with D1 entitlement or meet MIDAS requirements.
- MIDAS training must be renewed in line with local council guidelines.
- The minibus must not exceed passenger or weight limits.
- A journey log must be completed for every minibus trip.
- Staff must ensure emergency contact details and a first aid kit are available on board.

4.4 Safe Driving Practices

- Follow all road safety laws, including adherence to speed limits.
- No use of mobile phones while driving unless using a hands-free system.
- Take regular breaks during long journeys to prevent fatigue.
- Drive according to weather and road conditions.

4.5 Accident and Incident Reporting

- In the event of an accident:

    - Ensure the safety of all passengers.
    - Contact emergency services if required.
    - Report the incident to the Finance Director (Health and Safety Lead) and Estates Team immediately.
    - Complete an accident report form and submit it within 24 hours.

5. Training and Awareness

- Provide MIDAS training for all minibus drivers.
- Conduct periodic refresher training on driving for work safety.
- Display key driving safety information in vehicles.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits of driving for work procedures.
- The Estates Team will maintain records of vehicle inspections, driver training, and incident reports.
- Non-compliance with this SOP may result in suspension of driving privileges.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or vehicle policy changes occur.

SAFE USE OF WORK EQUIPMENT (PUWER 1998)

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure the safe use, maintenance, and inspection of work equipment in compliance with the Provision and Use of Work Equipment Regulations 1998 (PUWER). This SOP aims to prevent accidents, injuries, and equipment-related hazards within the college.

2. Scope

This SOP applies to all staff, students, and contractors who use or maintain work equipment, including but not limited to:

- Machinery and power tools
- Office equipment (e.g., printers, shredders)
- Laboratory and workshop equipment
- Vehicles and lifting equipment
- Electrical tools and appliances

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure work equipment policies comply with PUWER 1998 and other safety regulations.
- Allocate resources for equipment maintenance, training, and risk assessments.
- Approve work equipment purchases to ensure compliance.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the work equipment safety Procedure.
- Conduct risk assessments and ensure compliance with this SOP.
- Investigate work equipment-related incidents and implement corrective measures.

3.3 Estates and Facilities Team

- Conduct periodic maintenance and servicing of equipment.
- Monitor inspection records and maintenance schedules.
- Maintain records of inspections, servicing, and repairs.
- Ensure defective or unsafe equipment is taken out of use until repaired.

3.4 Supervisors and Line Managers

- Ensure staff and students are trained in the safe use of work equipment.
- Monitor adherence to safety procedures in daily operations.

- Identify additional training needs for specific work equipment.

3.5 Staff, Students, and Contractors

- Use work equipment only if trained and authorised.
- Conduct pre-use checks and report defects or hazards.
- Follow manufacturer guidelines and college policies for equipment use.
- Wear appropriate Personal Protective Equipment (PPE) as required.

4. Work Equipment Safety Procedures

4.1 Equipment Selection and Procurement

- All major new equipment mute be approved by SLT, approved by finance, DOCS,
- The Head of Estates should be informed as required to ensure suitability of equipment and comment as required prior to purchase.
- Only purchase work equipment that meets safety and PUWER requirements.
- Conduct risk assessments before introducing new equipment.
- Ensure new equipment is tested, inspected, and documented before use as required.

4.2 Training and Competency Requirements

- All users must receive adequate training before operating work equipment.
- Training should cover correct usage, emergency shutdown, and risk mitigation.
- Records of completed training must be maintained by HR and line managers.

4.3 Inspection and Maintenance

- Work equipment must undergo regular safety inspections.
- Estates and Facilities Team will maintain a register of inspections and servicing as per the manufacturer's instructions.
- Faulty or defective equipment must be taken out of service and repaired before reuse.

4.4 Safe Use of Equipment

- Always follow manufacturer's instructions and safety guidelines.
- Ensure guards, safety devices, and emergency stops are in place and functional.
- Use correct PPE, including gloves, goggles, and protective clothing.
- Never bypass safety features or use equipment for unintended purposes.

4.5 Reporting Defects and Incidents

- Any defects, near misses, or equipment-related injuries must be reported immediately.
- Finance Director (Health and Safety Lead) will investigate and take corrective actions.
- Equipment-related incidents will be documented and reviewed for process improvements.

5. Emergency Procedures

- In case of equipment failure, turn off power and secure the area.
- If an injury occurs, provide first aid and contact emergency services if needed.

- Report all incidents to the Finance Director (Health and Safety Lead) for further investigation.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits to ensure compliance with PUWER.
- Estates and Facilities Team will oversee routine checks and equipment maintenance.
- Non-compliance may result in additional training, disciplinary action, or equipment removal.

7. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

SAFE USE OF LIFTING EQUIPMENT (LOLER 1998)

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to ensure the safe use, maintenance, and inspection of lifting equipment in compliance with the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER). This SOP aims to prevent accidents, injuries, and equipment-related hazards within the college.

2. Scope
This SOP applies to all staff, students, and contractors involved in the use, maintenance, and inspection of lifting equipment, including but not limited to:

- Patient Hoists
- Accessibility lifts

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure lifting equipment policies comply with LOLER 1998 and other safety regulations.
- Allocate resources for equipment maintenance, training, and risk assessments.
- Approve lifting operations and authorise necessary safety measures.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the lifting equipment procedure.
- Conduct risk assessments and ensure compliance with LOLER.

3.3 Estates and Facilities Team

- Conduct periodic maintenance and servicing of lifting equipment.
- Maintain records of thorough examinations, servicing, and repairs.
- Ensure defective or unsafe equipment is taken out of use until repaired.
- Monitor inspection records and maintenance schedules.
- Investigate lifting equipment-related incidents and implement corrective measures.

3.4 Supervisors and Line Managers

- Ensure staff and students are trained in the safe use of lifting equipment.
- Monitor adherence to safety procedures in daily operations.
- Identify additional training needs for specific lifting equipment.

3.5 Staff, Students, and Contractors

- Use lifting equipment only if trained and authorised.
- Conduct pre-use checks and report defects or hazards.
- Follow manufacturer guidelines and college policies for equipment use.
- Wear appropriate Personal Protective Equipment (PPE) as required.

4. Lifting Equipment Safety Procedures

4.1 Equipment Selection and Procurement

- Only purchase lifting equipment that meets safety and LOLER requirements.
- Conduct risk assessments before introducing new equipment.
- Ensure new equipment is tested, inspected, and documented before use.

4.2 Training and Competency Requirements

- All users must receive adequate training before operating lifting equipment.
- Training should cover correct usage, emergency shutdown, and risk mitigation.
- Records of completed training must be maintained by HR and line managers.

4.3 Inspection and Maintenance

- Lifting equipment must undergo thorough examination by a competent person: ○ Every 6 months for lifting accessories.
  - Every 12 months for lifting machines.
- Estates and Facilities Team will maintain a register of inspections and servicing.
- Faulty or defective equipment must be taken out of service and repaired before reuse.

4.4 Safe Use of Lifting Equipment

- Always follow manufacturer's instructions and safety guidelines.
- Ensure proper load assessments before lifting operations.
- Never exceed the Safe Working Load (SWL) of lifting equipment.
- Use appropriate lifting accessories and secure loads correctly.
- Ensure a clear area around the lifting operation to prevent injuries.

4.5 Reporting Defects and Incidents

- Any defects, near misses, or equipment-related injuries must be reported immediately.
- Finance Director (Health and Safety Lead) will investigate and take corrective actions.
- Equipment-related incidents will be documented and reviewed for process improvements.

5. Emergency Procedures

- In case of equipment failure, halt the operation and secure the area.
- If an injury occurs, provide first aid and contact emergency services if needed.
- Report all incidents to the Finance Director (Health and Safety Lead) for further investigation.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits to ensure compliance with LOLER.
- Estates and Facilities Team will oversee routine checks and equipment maintenance.
- Non-compliance may result in additional training, disciplinary action, or equipment removal.

7. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

CONTROLLING NOISE AND VIBRATION AT WORK

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to establish guidelines for managing and controlling noise and vibration exposure within the workplace. This ensures compliance with the Control of Noise at Work Regulations 2005 and the Control of Vibration at Work Regulations 2005, reducing risks to staff, students, and contractors.

2. Scope
This SOP applies to all staff, students, and contractors exposed to workplace noise and vibration, including but not limited to:

- Machinery and equipment operation
- Construction and refurbishment activities
- Workshops and laboratories
- Music and performing arts departments
- Grounds maintenance activities

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure noise and vibration policies comply with health and safety regulations.
- Allocate resources for noise reduction measures and hearing conservation.
- Approve high-risk activities that may exceed safe noise and vibration limits.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the noise and vibration control Procedure.
- Conduct risk assessments and ensure compliance with this SOP.
- Monitor noise and vibration levels in the workplace.
- Implement control measures and provide training.

3.3 Estates and Facilities Team

- Ensure regular maintenance of machinery and equipment to minimize noise and vibration levels.
- Implement engineering controls such as soundproofing, anti-vibration mounts, and enclosures.
- Ensure compliance with safe exposure limits for noise and vibration.

3.4 Line Managers and Supervisors

- Ensure staff and students are trained in noise and vibration safety.
- Monitor adherence to control measures in daily operations.
- Provide hearing protection and vibration-damping equipment where necessary.

3.5 Staff, Students, and Contractors

- Use noise and vibration-generating equipment only if trained and authorised.
- Wear appropriate Personal Protective Equipment (PPE) such as ear defenders or anti-vibration gloves.
- Report any noise or vibration hazards or equipment faults.
- Follow safe working practices and exposure limits.

4. Noise and Vibration Control Procedures

4.1 Risk Assessment and Monitoring

- Identify employees or activities at risk of exposure exceeding action values (80 dB(A) for noise, 2.5 m/s^2 A(8) for vibration).
- Maintain records of monitoring and exposure levels.

4.2 Noise Control Measures

- **Elimination:** Avoid using noisy equipment where possible.
- **Engineering Controls:** Install noise barriers, enclosures, silencers, and damping materials.
- **Administrative Controls:** Limit exposure times, implement quiet zones, and schedule noisy tasks outside peak hours.
- **PPE:** Provide and enforce the use of earplugs or earmuffs where required.

4.3 Vibration Control Measures

- **Elimination:** Use alternative processes that generate less vibration.
- **Engineering Controls:** Use anti-vibration mounts, dampers, and ergonomic tools.
- **Administrative Controls:** Rotate tasks and limit exposure durations.
- **PPE:** Provide anti-vibration gloves where necessary.

4.4 Safe Use of Equipment

- Always follow manufacturer's instructions and safety guidelines.
- Ensure proper maintenance of tools and machinery to minimize noise and vibration emissions.
- Use damping materials and isolation mounts where applicable.
- Never bypass safety features or use equipment for unintended purposes.

4.5 Training and Awareness

- Provide mandatory training on noise and vibration safety for high-risk exposure.
- Conduct refresher training sessions for high-risk activities.
- Display safety signage in noisy or vibration-prone areas.

4.6 Reporting and Compliance

- Report defective equipment and excessive noise or vibration immediately.
- Finance Director (Health and Safety Lead) will conduct investigations for reported concerns.
- Non-compliance with control measures may result in corrective actions or retraining.

5. Emergency Procedures

- If an employee experiences hearing loss symptoms or vibration-related injuries, they must report to the HR department who will engage Occupational Health.
- Conduct immediate noise/vibration exposure assessments and implement corrective actions.
- Review risk assessments and update controls as needed.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits of noise and vibration control measures.
- Records of assessments, training, and PPE distribution must be maintained.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

LEGIONELLA MANAGEMENT

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a clear process for managing the risk of Legionella bacteria within the college's water systems. This ensures compliance with the Health and Safety at Work Act 1974, the Control of Substances Hazardous to Health (COSHH) Regulations 2002, and the Approved Code of Practice (ACoP) L8.

2. Scope

This SOP applies to all college water systems, including but not limited to:

- Hot and cold-water systems
- Showers and taps
- Cooling towers and air conditioning units
- Water storage tanks
- Any other sources where Legionella bacteria could proliferate

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure Legionella management aligns with health and safety regulations.
- Allocate resources for Legionella risk assessments, monitoring, and control measures.
- Approve high-risk Legionella assessments and remedial actions.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the college’s Legionella risk assessment Procedure.
- Ensure monitoring, control, and remedial actions are implemented.
- Provide staff training on Legionella awareness and safe water management.

3.3 Maintenance and Estates Team

- Arrange external contractors to complete risk assessments in line with ACoP L8
- Conduct routine inspections, temperature monitoring, and flushing regimes.
- Ensure water systems are maintained, cleaned, and treated as required.

- Implement and document Legionella control measures.

3.4 External Water Hygiene Contractors

- Carry out Legionella risk assessments and water quality testing.
- Provide expert advice on control measures and remedial actions.
- Ensure compliance with all relevant health and safety legislation.

3.5 Staff and Building Users

- Report any issues related to water hygiene, such as discoloured water or unusual odours.
- Follow instructions regarding water system safety and hygiene practices.

4. Legionella Risk Assessment Process

4.1 Identify Water Systems at Risk

- Survey all college water systems to determine potential Legionella growth areas.
- Identify high-risk systems, such as warm water storage tanks and infrequently used outlets.

4.2 Assess Risk Factors

- Evaluate temperature control (Legionella thrives between 20-45°C).
- Assess water stagnation risks in storage tanks and unused pipework.
- Identify areas where biofilm, scale, or sludge could accumulate.

4.3 Implement Control Measures

- Maintain hot water at a minimum of 60°C and cold water below 20°C.
- Flush infrequently used outlets weekly.
- Conduct regular cleaning and descaling of showerheads and taps.
- Install and maintain water treatment systems where necessary.
- Conduct routine temperature checks and record results.

4.4 Monitoring and Testing

- Conduct Legionella sampling as per the written scheme.
- Maintain logs of temperature monitoring, flushing, and maintenance activities.
- Review water quality results and implement corrective actions if required.

4.5 Record Keeping and Review

- Maintain a Legionella control logbook via google drive.
- Review risk assessments annually or sooner if changes occur in water systems.
- Document and act on any test results indicating Legionella presence.

5. Emergency Response

- If Legionella bacteria are detected, take immediate remedial action (e.g., thermal disinfection, chemical treatment).

- Isolate affected water systems where necessary.
- Notify relevant authorities and stakeholders if required.
- Conduct a post-incident review

6. Training and Awareness

- Provide Estates Staff with Legionella Training
- Ensure maintenance personnel are trained in Legionella control procedures.

7. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits of Legionella management practices.
- External audits and inspections may be conducted to ensure compliance.

8. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

ASBESTOS MANAGEMENT

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to outline the management of asbestos-containing materials (ACMs) within the college estate to ensure compliance with the Control of Asbestos Regulations 2012 and to protect staff, students, contractors, and visitors from asbestos exposure.

2. Scope
This SOP applies to all college buildings and facilities where asbestos-containing materials (ACMs) may be present, including but not limited to:

- Structural materials (e.g., insulation, cement products, roofing materials)
- Flooring and ceiling tiles
- Pipe insulation and lagging
- Fireproofing materials
- Electrical panels and equipment

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure asbestos management is incorporated into the college's health and safety policies.
- Allocate resources for asbestos risk assessments, monitoring, and remedial actions.
- Approve high-risk asbestos assessments and removal plans.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the college's Asbestos Management Plan (AMP).
- Conduct and review asbestos risk assessments in accordance with regulatory guidelines.
- Ensure asbestos surveys are conducted and updated regularly.
- Provide asbestos awareness training for relevant staff.
- Ensure the safe handling, removal, and disposal of ACMs where necessary.

3.3 Estates and Facilities Management Team

- Maintain an up-to-date Asbestos Register.
- Conduct regular inspections of known ACMs.
- Ensure ACMs remain undisturbed and in good condition.
- Implement control measures to manage the risk of asbestos exposure.
- Liaise with licensed asbestos contractors for testing, encapsulation, and removal if required.

3.4 External Asbestos Contractors

- Conduct asbestos surveys, sampling, and testing.
- Carry out licensed asbestos removal and disposal in compliance with HSE regulations.
- Provide certification and records of asbestos work completed.

3.5 Staff and Building Users

- Report any suspected damaged or deteriorating ACMs.
- Follow asbestos management procedures and avoid disturbing suspected materials.
- Adhere to any restricted access areas due to asbestos risks.

4. Asbestos Management Procedures

4.1 Asbestos Surveys and Register

- A Management Survey must be conducted to identify the presence of ACMs in college buildings.
- Refurbishment and Demolition Surveys must be completed before any significant construction work.
- The Asbestos Register must be maintained and reviewed annually.

4.2 Risk Assessments and Control Measures

- Assess the condition and risk level of ACMs.
- Implement control measures such as encapsulation, labelling, and restricted access.
- Plan for the safe removal of ACMs where necessary, ensuring compliance with regulations.

4.3 Safe Work Practices and Permit-to-Work System

- Contractors must obtain a permit-to-work before conducting any work in areas where ACMs are present.
- Only licensed asbestos contractors may handle or remove high-risk ACMs.
- Staff and students must not disturb any suspected asbestos materials.

4.4 Asbestos Removal and Disposal

- Removal must be conducted by licensed asbestos contractors following HSE guidelines.
- Air monitoring and clearance testing must be completed post-removal.
- All waste must be disposed of at a licensed hazardous waste facility.

5. Emergency Procedures

- If suspected asbestos disturbance occurs: ○ Evacuate and restrict access to the affected area. ○ Notify the Estates and Health & Safety Team immediately.
    - Conduct air monitoring and arrange for professional remediation.
- Report incidents of suspected asbestos exposure following incident reporting protocols.

6. Training and Awareness

- Provide asbestos awareness training for staff likely to encounter ACMs.
- Ensure maintenance and facilities staff receive additional training on managing ACMs safely.
- Regularly review and update training materials in line with regulatory changes.

7. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits of the Asbestos Management Plan.
- External audits and inspections may be carried out to verify compliance with regulations.
- Non-compliance with asbestos management procedures may result in remedial action or disciplinary measures.

WORK AT HEIGHT, STEPS, LADDERS, AND TOWERS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to outline the safe use of ladders, step ladders, and access towers when working at height within the college. This ensures compliance with the Work at Height Regulations 2005 and protects staff, students, and contractors from falls and related injuries.

2. Scope

This SOP applies to all work at height activities within the college, including but not limited to:

- Use of ladders and step ladders
- Mobile scaffold towers
- Roof access and maintenance
- Installation, repair, or servicing of equipment at height

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure work at height policies comply with legal requirements.
- Allocate resources for training, equipment, and risk assessments.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the Work at Height safety procedure.
- Conduct risk assessments and monitor compliance with this SOP.
- Provide training and guidance on the safe use of ladders, towers, and platforms.
- Investigate incidents involving work at height and implement corrective measures.

3.3 Estates and Facilities Team

- Ensure ladders, step ladders, and access towers are properly maintained and inspected via a register.
- Ensure risk assessments in place for all work at height activities.
- All roof access, high risk work at height work is sub-contracted out to specialist contractors.

3.4 Staff and Contractors

- Conduct work at height activities only when trained and authorised.
- Carry out pre-use checks on all access equipment.
- Use ladders, step ladders, and towers in accordance with training and manufacturer instructions.
- Report any defects or hazards to the Estates and Health & Safety lead.

4. Work at Height Procedures

4.1 Risk Assessment and Planning

- Conduct a risk assessment before any work at height is carried out.
- Ensure that work at height is only performed if no safer alternative exists.
- Identify hazards such as uneven surfaces, poor weather conditions, or fragile structures.

4.2 Ladder and Step Ladder Safety

- Use ladders and step ladders only for short-duration work (under 30 minutes).
- Ensure ladders are positioned on a stable and level surface.
- Maintain three points of contact when using ladders.
- Never overreach or carry heavy loads while on a ladder.
- Do not use ladders near electrical hazards or in adverse weather conditions.

4.3 Mobile Scaffold Tower Safety

- Only trained and competent individuals may assemble, inspect, and use mobile scaffold towers.
- Ensure towers are built on a stable, level surface and locked in place.
- Do not exceed the weight capacity of the scaffold tower.
- Never climb the outside of a scaffold tower; always use internal access.
- Inspect towers before use and after any significant alterations.

4.4 Roof Work and Fragile Surfaces

- Access to roofs must be controlled and authorised by the Estates Team.
- Use fall protection measures, such as guardrails or harness systems.
- Never walk on fragile surfaces unless protective measures (e.g., crawl boards) are in place.

4.5 Inspections and Maintenance

- Conduct formal inspections of ladders, step ladders, and scaffold towers regularly.

- Record inspections in an equipment maintenance log.
- Remove and tag defective equipment out of service until repaired or replaced.

5. Emergency Procedures

- In case of a fall, provide immediate first aid and call emergency services if required.
- Report all work at height incidents to the Health & Safety Lead.
- Investigate following an incident to prevent recurrence.

6. Training and Awareness

- Provide PASMA mobile scaffold training
- Ensure refresher training is conducted periodically.
- WAH/Step ladder and Ladder Awareness training

7. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct audits of work at height activities.
- Periodic external safety inspections may be required.
- Non-compliance with work at height procedures may result in disciplinary action.

8. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

MANUAL HANDLING

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to outline safe manual handling practices within the college to prevent injuries and ensure compliance with the Manual Handling Operations Regulations 1992 and other relevant health and safety legislation.

2. Scope
This SOP applies to all staff, students, and contractors involved in manual handling tasks, including but not limited to:

- Lifting, carrying, pushing, or pulling loads
- Handling heavy or bulky items
- Repetitive movement tasks
- Moving furniture, equipment, or stock

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure manual handling policies comply with legal requirements. • Allocate resources for training, equipment, and risk assessments.
- Promote a culture of safety regarding manual handling practices.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the manual handling safety Procedure.
- Conduct risk assessments and monitor compliance with this SOP.
- Provide training and guidance on safe manual handling techniques.
- Investigate incidents related to manual handling and implement corrective measures.

3.3 Estates and Facilities Team

- Ensure mechanical aids (e.g., trolleys, hoists) are available and maintained.
- Conduct regular inspections of manual handling equipment.
- Implement appropriate control measures to prevent injuries.

3.4 Staff and Contractors

- Conduct manual handling tasks only when trained and authorised.
- Assess loads and risks before lifting or moving objects.
- Use mechanical aids where possible to reduce manual effort.
- Report any defects or hazards to the Estates and Health & Safety Team.

4. Manual Handling Procedures

4.1 Risk Assessment and Planning

- Conduct a risk assessment before any manual handling activity.
- Identify hazards such as heavy or unstable loads, awkward movements, or restricted access.
- Plan the lift by assessing the route and ensuring it is clear of obstacles.

4.2 Safe Lifting Techniques

- Adopt a stable stance with feet shoulder-width apart.
- Bend at the knees, not the back, keeping the load close to the body.
- Maintain a straight back and use leg muscles to lift.
- Avoid twisting movements; turn by pivoting with the feet.
- Keep movements smooth and controlled.
- Lower the load carefully using the legs, not the back.

4.3 Use of Mechanical Aids

- Use lifting aids (e.g., trolleys, hoists) where appropriate.
- Ensure lifting equipment is in good condition before use.
- Report any defects or maintenance issues immediately.

4.4 Team Lifting and Assistance

- Use team lifting for heavy or awkward loads.
- Designate one person to coordinate movements.
- Communicate clearly throughout the lift.

4.5 Handling Specific Objects

- **Furniture and Equipment:** Disassemble where possible and use lifting aids.

- **Stock and Materials:** Store heavier items at waist height to minimise bending.
- **Repetitive Tasks:** Rotate tasks among workers to reduce strain.

5. Inspections and Maintenance

- Conduct regular inspections of manual handling aids and lifting equipment.
- Maintain records of training and risk assessments.
- Remove and tag defective equipment out of service until repaired or replaced.

6. Emergency Procedures

- If an injury occurs, provide immediate first aid and seek medical assistance if required.
- Report all manual handling incidents to the Health & Safety Manager. • Conduct an investigation following an incident to prevent recurrence.

7. Training and Awareness

- Provide mandatory manual handling training for staff and contractors.
- Ensure refresher training is conducted periodically.
- Display safety signage in all areas where manual handling tasks occur.

8. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct audits of manual handling activities.
- Periodic external safety inspections may be required.
- Non-compliance with manual handling procedures may result in disciplinary action.

9. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

DISPLAY SCREEN EQUIPMENT (DSE)

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to outline the safe use and management of Display Screen Equipment (DSE) within the college to prevent work-related musculoskeletal disorders, eye strain, and other health issues. This SOP ensures compliance with the Health and Safety (Display Screen Equipment) Regulations 1992.

2. Scope
This SOP applies to all staff and students who regularly use DSE as part of their daily tasks, including but not limited to:

- Desktop computers and monitors
- Laptops and tablets
- Mobile devices used for prolonged periods
- Multi-screen workstations
- Other visual display units (VDUs)

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure DSE policies comply with legal requirements.
- Allocate resources for ergonomic equipment, assessments, and training.
- Promote a culture of safe DSE usage.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the DSE assessment Procedure.
- Conduct DSE risk assessments and monitor compliance with this SOP.
- Provide training and guidance on safe DSE use and workstation ergonomics.
- Investigate DSE-related health complaints and implement corrective measures.

3.3 IT Training Development and DSE Assessor

- Arrange the DSE assessment process and invite staff to complete the DSE Self-Assessment.
- Conduct DSE risk assessments with staff if requested or if issues highlighted during self-assessment.
- Provide training and guidance on safe DSE use and workstation ergonomics.
- Investigate DSE-related health complaints and implement corrective measures.

3.3 IT and Facilities Team

- IT to Ensure that DSE workstations and equipment meet ergonomic standards.
- Estates to provide adjustable desks, chairs, and accessories where required.
- Both IT and Estates to maintain and update DSE-related equipment as needed.

3.4 Staff

- Complete a DSE risk assessment if using display screens for prolonged periods.
- Set up workstations correctly, following ergonomic best practices.
- Take regular breaks and change position frequently.
- Report any discomfort or health concerns related to DSE use.

4. DSE Risk Assessment Process

4.1 Identifying DSE Users

- Identify staff who use DSE for more than one hour continuously or for a significant part of their workday.
- Determine whether any additional ergonomic adjustments are required and invite for assessment.

4.2 Conducting a DSE Risk Assessment

- Assess workstation setup, including screen height, keyboard position, and chair adjustability.
- Identify risks related to poor posture, screen glare, or prolonged use.
- Implement control measures to reduce strain, such as footrests, monitor risers, and wrist supports.

4.3 Implementing Ergonomic Control Measures

- Ensure chairs and desks are adjustable to support a neutral posture.
- Position screens at eye level to reduce neck strain.
- Provide document holders for prolonged data entry tasks.
- Encourage movement breaks every 30-60 minutes.

4.4 Reviewing and Updating Assessments

- Conduct reassessments if an employee reports discomfort or workstation changes occur.
- Maintain records of all DSE assessments and actions taken.

5. Workstation Setup Best Practices

- Screen Position: Place the top of the monitor at eye level and approximately arm's length away.
- Keyboard and Mouse: Keep wrists in a neutral position; use wrist rests if needed.
- Seating Position: Adjust chair height so feet are flat on the floor or use a footrest.
- Breaks and Movement: Take short breaks to stand, stretch, and adjust posture.
- Lighting and Glare: Position screens perpendicular to windows to reduce glare and adjust brightness settings as needed.

6. Training and Awareness

- Provide DSE training for all staff and students who regularly use display screens (covered in Ihasco H&S Training).
- Ensure refresher training is conducted periodically (annual)
- Display guidance on workstation ergonomics in DSE-heavy areas.

7. Monitoring and Compliance

- The Finance Director (Health and Safety Lead) will conduct audits of DSE risk assessments.
- Regular workstation reviews will be performed in DSE-intensive environments.
- Non-compliance with DSE procedures may result in further training or workstation adjustments.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or technological changes occur.

TRAFFIC MANAGEMENT

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish guidelines for the safe and effective management of traffic within the college premises. This SOP ensures compliance with relevant road safety legislation and best practices to minimize risks to staff, students, visitors, and contractors.

2. Scope

This SOP applies to all vehicular and pedestrian movement within the college, including but not limited to:

- Staff and student parking
- Delivery and contractor access
- Pedestrian walkways and crossings
- Emergency vehicle access
- Traffic flow control and signage
- Speed limits and parking enforcement

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure traffic management policies comply with health and safety regulations.
- Allocate resources for infrastructure, maintenance, and enforcement.
- Approve any major changes to the traffic management plan.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the traffic management Procedure.
- Conduct risk assessments and monitor compliance with this SOP.
- Investigate traffic-related incidents and implement corrective actions.

3.3 Estates and Facilities Team

- Maintain road markings, signage, and traffic-calming measures.
- Ensure parking areas, access roads, and pedestrian pathways are safe and well-maintained.
- Oversee contractor and delivery access arrangements.
- Monitor and enforce parking regulations.
- Control vehicle access during peak times/events.
- Respond to traffic-related incidents and escalate issues where necessary.

3.4 Staff, Students, and Visitors

- Follow designated parking and traffic flow rules.
- Observe speed limits and pedestrian priority zones.
- Report any hazards or concerns related to traffic management.

4. Traffic Management Procedures

4.1 Traffic Flow and Signage

- Install clear signage for parking, pedestrian crossings, speed limits, and restricted zones.
- Implement a one-way system where necessary to improve flow and reduce congestion.
- Ensure disabled parking bays and drop-off zones are clearly marked and enforced.

4.2 Parking Management

- Assign designated parking areas for staff, and visitors. No Student Parking
- Implement parking systems where applicable e.g. for visitors.
- Unauthorised parking and obstructive vehicle positioning should be reported to Reception.

4.3 Pedestrian Safety Measures

- Maintain well-marked pedestrian crossings and pathways.
- Install barriers or bollards where necessary to separate pedestrian and vehicular areas.
- Ensure safe pedestrian access to and from car parks and building entrances.

4.4 Contractor and Delivery Access

- Schedule large deliveries outside peak times to reduce congestion.

- Large deliveries to be booked where possible.
- Require contractors and delivery drivers to report to reception upon arrival.

4.5 Speed Limits and Traffic-Calming Measures

- Enforce a campus-wide speed limit (e.g., 5 mph).
- Install speed bumps, other measures where necessary.
- Use CCTV and signage to deter reckless driving and speeding.

5. Emergency Vehicle Access

- Maintain clear emergency vehicle routes at all times.
- Mark emergency access points and ensure they are free from obstruction.
- Train staff on emergency evacuation routes and procedures.

6. Incident Reporting and Response

- Report all traffic-related incidents to the Finance Director (Health and Safety Lead).
- Investigate near misses and accidents to identify corrective actions.
- Implement remedial measures to prevent recurrence.

7. Training and Awareness.

- Communicate traffic rules to all staff, students, and visitors.

8. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct regular audits of traffic management procedures.
- Parking and security teams will monitor compliance daily.
- Non-compliance with traffic regulations may result in penalties or removal of parking privileges.

9. Review and Update
This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

MANAGING INFECTIOUS DISEASES

1. Purpose
The purpose of this Standard Operating Procedure (SOP) is to outline the procedures for managing infectious diseases within education and childcare settings to ensure the health and safety of staff, students, and visitors. This SOP aligns with UK government guidance, UKHSA including the Health Protection (Notification) Regulations 2010, UKHSA guidelines, and local authority protocols.

2. Scope
This SOP applies to all staff, students, contractors, and visitors within the college and childcare facilities. It covers:

- Prevention and control measures
- Identification and reporting of infectious diseases
- Response procedures for outbreaks
- Communication and notification protocols
- Cleaning and decontamination measures

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure policies comply with UK health and safety legislation and public health guidance.
- Allocate resources for infection control measures.
- Approve and oversee emergency response procedures during outbreaks.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain the infectious disease management procedure.
- Conduct risk assessments and ensure compliance with this SOP.
- Liaise with UKHSA and local authorities when required.
- Oversee training on infection prevention and control.

3.3 College Nurse

- Initial support for students with suspected infectious diseases.
- Advise Finance Director (Health and Safety Lead) of outbreaks of infectious diseases and advise on notifications.
- Follow specific advice of “Managing specific infectious diseases: A to Z”
- Engage Estates and Facilities team to assist in clean-up operations.
- Record incident on Pro Monitor under the student record.

3.4 Estates and Facilities Team

- Ensure regular cleaning and decontamination procedures are in place.
- Maintain supplies of hand sanitiser, PPE, and hygiene equipment.
- Implement infection control measures in communal areas.

3.5 Line Managers and Supervisors

- Ensure staff and students adhere to infection prevention protocols.
- Monitor and report any suspected cases of infectious disease.
- Support staff and students affected by illness.

3.6 Staff, Students, and Visitors

- Follow hygiene protocols, including handwashing and respiratory etiquette.
- Report symptoms of infectious diseases promptly.
- Adhere to isolation and exclusion requirements if unwell.

4. Prevention and Control Measures

4.1 General Hygiene Practices

- Encourage regular handwashing with soap and water. • Provide alcohol-based hand sanitiser at key locations.
- Promote respiratory hygiene (e.g., ‘Catch it, Bin it, Kill it’ approach).
- Ensure proper ventilation in indoor spaces.

4.2 Vaccination and Immunisation

- Staff and students to follow national immunisation schedules as appropriate.
- Support vaccination campaigns in collaboration with public health authorities.

4.3 Personal Protective Equipment (PPE)

- Provide PPE for staff in high-risk roles (e.g., first aiders, cleaners).
- Ensure proper disposal of PPE after use.
- Offer guidance on the correct use of masks and gloves when required.

5. Identification and Reporting of Infectious Diseases

- Staff and students must report symptoms of infectious diseases immediately.
- Line managers should monitor illness trends and report suspected outbreaks.
- Finance Director (Health and Safety Lead) will liaise with local health authorities if necessary.

5.1 Common Infectious Diseases in Education Settings

- **Respiratory illnesses** (e.g., flu, COVID-19, tuberculosis)
- **Gastrointestinal infections** (e.g., norovirus, salmonella, E. coli)
- **Skin infections** (e.g., chickenpox, measles, impetigo, scabies)
- **Bloodborne infections** (e.g., hepatitis, HIV) – managed through standard precautions

Full list of how to manage specific outbreaks.

- https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcarefacilities/managing-specific-infectious-diseases-a-to-z#conjunctivitis

6. Response Procedures for Outbreaks

6.1 Initial Response

- Identify affected individuals and isolate if required.
- Report confirmed cases to the Finance Director (Health and Safety Lead).
- Notify UKHSA if an outbreak is suspected.

6.2 Outbreak Control Measures

- Implement heightened hygiene measures (e.g., enhanced cleaning, PPE use).
- Restrict gatherings or close affected areas if necessary.
- Reinforce public health messaging across the institution.
- Work with PHE or HPT to coordinate testing and response strategies.

6.3 Communication and Notification

- Inform staff, students, and parents/guardians of necessary precautions.
- College nurse will liaise with appropriate DOC and inform of the outbreak based on advice from UKHSA.
- Provide clear guidance on symptoms, self-isolation, and return-to-work/school policies.
- Maintain confidentiality and adhere to GDPR when sharing health information.

7. Cleaning and Decontamination Measures

- Clean frequently touched surfaces regularly with approved disinfectants.
- Deep clean affected areas during an outbreak.
- Properly dispose of biohazardous waste in designated containers.
- Use appropriate cleaning agents for different types of infectious agents.

8. Training and Awareness

- College Nurse to conduct refresher awareness courses following outbreaks or policy updates as required.
- Display hygiene and infection control signage across premises.

9. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct regular audits of infection control measures.
- Estates and Facilities will ensure compliance with cleaning and PPE protocols.
- Non-compliance with infectious disease policies may result in corrective actions or additional training.

10. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or public health guidance changes occur.

PROVISION OF PERSONAL PROTECTIVE EQUIPMENT (PPE)

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a Procedure for the provision, use, and maintenance of Personal Protective Equipment (PPE) to ensure compliance with the Personal Protective Equipment at Work Regulations 2022 (as amended). This SOP ensures that appropriate PPE is provided, used correctly, and maintained effectively to protect staff, students, and contractors from workplace hazards.

2. Scope

This SOP applies to all staff, students, and contractors required to use PPE within the college premises. It covers:

- Identification of PPE requirements
- Procurement and provision of PPE
- Training and proper use of PPE
- Maintenance, storage, and disposal of PPE
- Compliance monitoring

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with PPE regulations and workplace safety standards.
- Allocate resources for PPE procurement and maintenance.
- Support training initiatives on PPE use and effectiveness.

3.2 Finance Director (Health and Safety Lead)

- Conduct risk assessments to identify PPE requirements.
- Develop policies and procedures for the proper use of PPE.
- Monitor PPE compliance and investigate safety incidents.
- Ensure staff and students receive training on correct PPE usage.

3.3 Estates and Facilities Team

- Oversee the procurement and distribution of PPE.
- Maintain PPE stock levels and ensure availability.
- Arrange inspections, servicing, and replacement of PPE when required.

3.4 Line Managers and Supervisors

- Ensure employees and students use PPE as required.
- Conduct regular checks to verify PPE is worn correctly.
- Report any PPE deficiencies or non-compliance to the Finance Director (Health and Safety Lead).

3.5 Staff, Students, and Contractors

- Wear PPE as required and follow instructions for proper use.
- Inspect PPE before each use and report defects immediately.

- Store PPE properly after use and ensure its upkeep.

Attend PPE training sessions as required.

4. PPE Identification and Procurement

4.1 Risk Assessment for PPE Requirements

- Conduct risk assessments to determine appropriate PPE for specific tasks.
- Identify hazards related to chemical, biological, mechanical, and physical risks.
- Ensure PPE selection aligns with regulatory and industry standards.

4.2 PPE Types and Uses

- **Eye Protection**: Safety glasses, goggles, face shields for laboratory and workshop activities.
- **Respiratory Protection**: Masks, respirators for airborne hazards.
- **Hand Protection**: Gloves for handling hazardous materials, heat, or sharp objects.
- **Head Protection**: Helmets and bump caps for construction and maintenance work.
- **Hearing Protection**: Earplugs and earmuffs for high-noise environments.
- **Foot Protection**: Safety boots and anti-slip footwear for hazardous work areas.
- **Protective Clothing**: Overalls, high-visibility vests, flame-resistant clothing as needed.

4.3 PPE Procurement and Distribution

- PPE must be sourced from approved suppliers meeting British/European Standards.
- All issued PPE must be recorded and assigned to individuals where necessary.
- Employees and students must be fitted with PPE appropriate for their tasks.

5. PPE Usage and Training

- Training must be provided on PPE selection, fitting, and proper usage.
- Employees and students must be aware of the limitations of PPE.
- Refresher training sessions should be conducted periodically.

6. PPE Maintenance, Storage, and Disposal

- PPE should be regularly inspected for wear, damage, or contamination.
- Damaged or expired PPE must be removed from use and replaced immediately.
- Proper storage facilities must be provided to prevent PPE degradation.
- Disposable PPE must be safely discarded following relevant waste disposal guidelines.

7. PPE Compliance Monitoring

- Line Managers and Supervisors will conduct routine PPE compliance checks.
- The Finance Director (Health and Safety Lead) will review PPE records and address non-compliance.
- Disciplinary action may be taken for repeated failure to use PPE correctly.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or workplace changes occur.

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MANAGING GAS SAFETY

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure the safe use, maintenance, and management of gas systems and appliances within the college premises. This SOP aligns with the Gas Safety (Installation and Use) Regulations 1998 and other relevant health and safety legislation.

2. Scope

This SOP applies to all college-owned and operated gas installations, including:

- Boilers and heating systems
- Gas-fired catering equipment
- Laboratory gas supplies • Catering equipment
- Portable gas appliances
- Gas storage facilities

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with gas safety regulations and allocate resources for maintenance and training.
- Oversee the implementation of gas safety policies and procedures.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain gas safety policies and procedures.
- Conduct risk assessments related to gas installations and appliances.
- Monitor gas safety compliance and liaise with relevant authorities.

3.3 Estates and Facilities Team

- Arrange for the installation, maintenance, and inspection of gas heating appliances by Gas Safe registered engineers.
- Maintain records of servicing, inspections, and gas safety certificates.

3.3 Catering and Science Department

- Arrange for the installation, maintenance, and inspection of gas appliances by Gas Safe registered engineers as required by the science and catering departments.
- Maintain records of servicing, inspections, and gas safety certificates.
- Ensure safe storage and handling of gas cylinders.

3.4 Teaching and Catering Staff

- Use gas appliances in accordance with training and manufacturer instructions.
- Report any faults or suspected leaks immediately.

- Ensure gas shut-off valves are accessible and used correctly.

3.5 Contractors and Gas Engineers

- Must be Gas Safe registered and comply with college safety protocols.

Carry out gas-related work following industry standards and legal requirements.

- Provide certificates and documentation for all gas installations and inspections.

4. Gas Safety Procedures

4.1 Installation and Maintenance

- Only Gas Safe registered engineers are permitted to install, service, or repair gas appliances.
- Routine servicing of boilers, heating systems, and gas appliances must occur annually.
- Maintenance records must be kept for a minimum of five years.

4.2 Gas Leak Detection and Emergency Procedures

- Staff must report any suspected gas leaks immediately to Estates and Facilities.
- If a gas leak is suspected:
  - Evacuate the area and prevent ignition sources. ○ Shut off the gas supply using the emergency control valve. ○ Contact the Gas Emergency Service (0800 111 999) and Estates Manager.
  - Do not re-enter the area until it is declared safe by a qualified engineer.

4.3 Safe Use of Gas Appliances

- Gas appliances must not be used without prior safety checks.
- Staff must be trained in the proper use of gas appliances.
- Gas supply to laboratories and catering areas must be turned off when not in use.

4.5 Emergency Shut-Off Systems

- Clearly label gas isolation valves and emergency shut-off points.
- Ensure emergency gas shut-off training is provided to relevant staff.
- Regularly test gas shut-off systems to confirm functionality.

5. Training and Awareness

- Provide gas safety training for relevant staff, including kitchen, laboratory, and estates teams.
- Conduct refresher training on gas emergency procedures annually.
- Display gas safety signage and emergency contact numbers prominently.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic gas safety audits.
- Estates and Facilities will maintain records of gas inspections and servicing.

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- Any non-compliance must be rectified immediately, with potential disciplinary action for repeated violations.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

MANAGING CONSTRUCTION & REFURBISHMENT PROJECTS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure that all construction and refurbishment projects within the college comply with the Construction (Design and Management) Regulations 2015 (CDM 2015). This SOP also outlines procedures for minimising noise, disruption, and ensuring safety during project execution.

2. Scope

This SOP applies to all construction and refurbishment projects within the college estate, including but not limited to:

- New building construction
- Major refurbishments and renovations
- Structural alterations and maintenance works
- Installation of new systems (HVAC, electrical, plumbing, etc.)
- External works, including landscaping and car park modifications

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure all construction projects comply with CDM 2015 regulations.
- Approve major projects and allocate necessary resources.
- Oversee risk management and project governance.

3.2 Finance Director (Health and Safety Lead)

- Monitor compliance with CDM 2015 and health & safety regulations.
- Ensure risk assessments, method statements, and safety plans are in place.
- Conduct audits and inspections to identify and mitigate risks.
- Review contractor compliance with college safety policies.

3.3 Estates and Facilities Team

- Act as the primary liaison between contractors and college management.
- Ensure site access control and security measures are enforced.
- Coordinate scheduling to minimise disruption to college operations.
- Oversee project progress and compliance with noise and disruption mitigation plans.

3.4 Principal Designer (as required by CDM 2015)

- Plan, manage, and monitor health and safety in the pre-construction phase.
- Ensure designers comply with their duties under CDM 2015.
- Identify foreseeable risks and eliminate or control them at the design stage.

3.5 Principal Contractor (as required by CDM 2015)

- Plan, manage, and monitor health and safety in the construction phase.
- Ensure site induction and worker competence verification.
- Implement site safety controls, including fencing, signage, and traffic management.

Provide appropriate PPE and enforce safe working procedures.

3.6 Staff, Students, and Visitors

- Follow designated access routes and avoid restricted areas.
- Report any construction-related hazards or concerns to the Estates Team.
- Adhere to noise and disruption mitigation instructions.

4. CDM 2015 Compliance Procedures

4.1 Project Planning and Pre-Construction Phase

- Appoint a Principal Designer for all projects involving multiple contractors.
- Conduct pre-construction information gathering, including surveys and assessments.
- Identify and mitigate foreseeable risks through design modifications.
- Develop a Construction Phase Plan detailing risk controls and safety measures.

4.2 Risk Assessments and Method Statements (RAMS)

- Require all contractors to submit detailed RAMS before work commencement.
- Ensure RAMS cover hazards such as working at height, asbestos, electrical safety, and confined spaces.
- Review and approve RAMS before granting work authorisation.

4.3 Site Safety and Security

- Establish secure site boundaries with fencing and warning signage.
- Restrict access to authorised personnel only.
- Conduct daily site safety inspections and maintain a safety log.
- Implement fire safety controls, including designated fire escape routes and extinguisher placements.

5. Noise and Disruption Mitigation

- Schedule high-noise activities outside peak operational hours.
- Use noise-reducing equipment and temporary sound barriers where possible.
- Communicate upcoming noisy works to staff and students in advance.
- Implement dust suppression measures to prevent air quality issues.

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6. Environmental Considerations

- Ensure responsible waste disposal in compliance with environmental regulations.
- Implement measures to prevent water and soil contamination.
- Use energy-efficient materials and sustainable construction practices where feasible.

7. Incident Reporting and Emergency Procedures

- All incidents, near misses, and safety concerns must be reported to the Finance Director (Health and Safety Lead) immediately.
- Implement emergency response plans for incidents such as fire, structural failures, or hazardous material exposure.
- Conduct post-incident reviews to prevent recurrence.

8. Project Completion and Handover

- Conduct a final site inspection and snagging process before project sign-off.
- Provide operational and maintenance documentation for installed systems.

- Ensure compliance with post-construction safety measures.
- Conduct a post-project review to evaluate success and lessons learned.

9. Training and Awareness

- Provide CDM 2015 awareness training for staff involved in project oversight.
- Conduct safety briefings for contractors and workers before project commencement.
- Ensure ongoing communication with staff and students regarding project developments.

10. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits to ensure adherence to CDM 2015.
- Estates and Facilities will review contractor compliance and performance.
- Non-compliance with safety regulations may result in project suspension or penalties.

11. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or environmental changes occur.

ELECTRICAL SAFETY

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure compliance with the Electricity at Work Regulations 1989 by establishing procedures for the safe use, inspection, testing, and maintenance of electrical installations and equipment. This SOP aims to prevent electrical hazards, ensure equipment integrity, and promote workplace safety.

2. Scope

This SOP applies to all staff, students, and contractors who interact with electrical systems within the college. It covers:

- Fixed electrical installations (wiring, sockets, distribution boards, etc.)
- Portable Appliance Testing (PAT) for electrical equipment
- Electrical safety inspections and maintenance
- Emergency procedures for electrical hazards
- Staff responsibilities and training

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with electrical safety regulations.
- Allocate resources for inspection, maintenance, and staff training.
- Oversee risk management related to electrical safety.

3.2 Finance Director (Health and Safety Lead)

- Develop and enforce electrical safety procedures.
- Conduct risk assessments on electrical hazards.
- Ensure compliance with inspection and testing schedules.
- Investigate incidents involving electrical hazards.

3.3 Estates and Facilities Team

- Arrange periodic fixed electrical installation testing.
- Ensure PAT testing is conducted at appropriate intervals for general college assets.
- Maintain records of inspections, servicing, and compliance reports.
- Coordinate with approved contractors for electrical maintenance.

3.4 IT and Technical Support Staff

- Ensure IT and AV equipment is tested for electrical safety.
- Monitor staff compliance with safe usage of electrical devices.

3.5 Staff, Students, and Contractors

- Use electrical equipment only as instructed.
- Report electrical faults, damaged equipment, or hazards immediately.
- Do not attempt electrical repairs unless authorised and trained.
- Follow procedures for the safe use of electrical appliances.

3.6 Approved Electrical Contractors

- Conduct periodic inspections of fixed electrical systems.
- Carry out repairs and maintenance in compliance with legal standards.
- Issue compliance certificates for electrical installations and PAT testing.

4. Electrical Safety Procedures

4.1 Fixed Electrical Installations

- All fixed electrical systems must comply with BS 7671 Wiring Regulations.
- Electrical installations must be inspected and tested at least every five years.
- All modifications to electrical systems must be performed by a qualified electrician.
- Distribution boards and electrical panels must be locked and accessible only to authorised personnel.

4.2 Portable Appliance Testing (PAT)

- Electrical appliances must undergo PAT testing at intervals based on risk assessment and frequency of use.
- PAT is spilt and conducted between departments.
- All portable electrical equipment must be visually inspected before use.
- PAT testing records must be recorded and uploaded to the google drive for H&S oversight.
- Faulty or failed appliances must be removed from service immediately.

4.3 Safe Use of Electrical Equipment

- Do not overload sockets or use multi-adapters without surge protection.
- Ensure trailing cables do not create tripping hazards.
- Switch off and unplug appliances when not in use.
- Keep electrical equipment away from water and flammable materials.
- Only use extension leads that are fully unwound and rated appropriately for the load.

4.4 Reporting Electrical Hazards and Faults

- Any suspected electrical faults must be reported to the Estates and Facilities Team immediately.
- Do not attempt to use damaged or faulty electrical equipment.
- Electrical incidents, such as shocks or burns, must be reported to the Finance Director (Health and Safety Lead).

4.5 Emergency Procedures

- If an electrical fire occurs:
    - Do not use water to extinguish it.
    - Use a CO_2 or dry powder fire extinguisher if safe to do so.
    - Evacuate the area and call emergency services.

- In case of an electric shock:
    - Turn off the power supply immediately if it is safe to do so. ○ Do not touch the victim while they are in contact with the electrical source. ○ Seek medical assistance immediately and inform the Finance Director (Health and Safety Lead).

5. Training and Awareness

- Staff must receive training on the safe use of electrical equipment and hazard reporting.
- Electrical safety awareness briefings must be provided annually.
- Specialist training must be provided for staff working in high-risk areas (e.g., laboratories, workshops).

6. Compliance and Auditing

- Fixed electrical testing must be conducted by qualified contractors at required intervals.
- PAT testing schedules must be maintained and reviewed annually.
- Estates and Facilities Team must keep records of all electrical safety checks and remedial actions.
- Non-compliance with electrical safety procedures may result in disciplinary action or retraining.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

MANAGEMENT OF PROTECTED TREES (TPO)

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to outline the management, maintenance, and legal requirements for trees protected under Tree Preservation Orders (TPOs) within college grounds. This SOP ensures compliance with local council regulations, the Town and Country Planning Act 1990, and the Wildlife and Countryside Act 1981.

2. Scope

This SOP applies to all protected trees within the college estate, including:

- Trees covered by a Tree Preservation Order (TPO)
- Trees located within designated Conservation Areas
- Veteran trees and trees of significant ecological or historical value
- Trees requiring maintenance, pruning, or removal
- Emergency procedures for hazardous or storm-damaged trees

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with local council regulations regarding TPOs.
- Allocate resources for the maintenance and protection of TPO trees.
- Authorise major tree works, ensuring necessary permissions are obtained.

3.2 Estates and Facilities Team

- Maintain records of all TPO trees on campus.
- Conduct regular inspections to assess tree health and safety.
- Ensure appropriate applications are submitted for any tree work requiring council approval.
- Engage qualified arborists for maintenance and risk assessments.

3.3 Finance Director (Health and Safety Lead)

- Conduct risk assessments for hazardous or damaged trees.
- Ensure emergency tree work is carried out safely and legally.
- Investigate and report incidents involving protected trees.

3.4 Contractors and Arborists

- Must be qualified and hold necessary certifications for tree work.
- Adhere to local council regulations and best practices for tree maintenance.
- Provide written assessments and recommendations before undertaking work.

4. TPO Compliance and Maintenance Procedures

4.1 Identification and Record Keeping

- Maintain an up-to-date register of all TPO and Conservation Area trees.
- Clearly mark protected trees on site maps and communicate their status to relevant personnel.
- Review council TPO lists and legal updates annually.

4.2 Routine Inspection and Maintenance

- Southampton County Council manager all TPO
- Monitor trees for signs of disease, decay, or structural weakness.
- Arrange professional arboriculturally assessments when necessary.
- Apply for council approval before conducting any maintenance work beyond minor deadwood removal.

4.3 Tree Works Application Process

- Submit applications to the local council for pruning, felling, or other works on TPO trees as per guidance from
- Provide justification and evidence (e.g., safety concerns, disease diagnosis) to support the application.

Allow up to 8 weeks for council approval before proceeding with work.

- Display public notices if required by local authority regulations.

4.4 Emergency Tree Works

- If a protected tree becomes an immediate hazard (e.g., storm damage, structural failure), emergency works may proceed without prior consent.
- Notify the local council as soon as possible, providing photographic evidence and a professional arborist's report. Ensure emergency tree work is carried out by a certified contractor.

4.6 Ecological and Seasonal Restrictions

- Avoid tree works during bird nesting season (March to August) unless essential for safety.
- Consider the impact on local wildlife, protected species, and biodiversity.
- Adhere to the Wildlife and Countryside Act 1981 to prevent harm to nesting birds, bats, or other species.

5. Reporting and Documentation

- Maintain a log of all tree inspections, maintenance activities, and applications.
- Keep records of council approvals, professional assessments, and contractor reports.

6. Training and Awareness

- Provide training to Estates and Facilities staff on TPO compliance and tree health monitoring.
- Ensure contractors are informed of legal obligations when working on campus trees.

7. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits of tree management records.
- Non-compliance with TPO regulations may result in fines or legal action from the local council.
- Corrective actions must be implemented immediately for any breaches of legislation.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or council regulation changes occur.

SUPPORTING NEW AND EXPECTANT MOTHERS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure the safety, health, and wellbeing of new and expectant mothers within the college environment. This SOP aligns with the Management of Health and Safety at Work Regulations 1999, the Equality Act 2010, and other relevant legislation.

2. Scope

This SOP applies to all staff and students who are new or expectant mothers, including those who are pregnant, have recently given birth, or are breastfeeding. It covers:

- Risk assessments and workplace adjustments
- Health and safety considerations
- Maternity and pregnancy-related absence management
- Emergency procedures

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with health and safety laws concerning pregnancy and maternity.
- Allocate resources for necessary workplace adjustments.
- Promote a supportive and inclusive environment for new and expectant mothers.

3.2 Finance Director (Health and Safety Lead)

- Ensure risk assessments for new and expectant mothers are completed.
- Ensure appropriate workplace adjustments are implemented.
- Provide guidance and training on pregnancy-related health and safety issues.
- Monitor compliance with this SOP and review incidents.

3.3 Line Managers and Supervisors

- Ensure that risk assessments are carried out and reviewed regularly. • Support staff and students by implementing necessary adjustments.
- Encourage open communication regarding maternity needs and concerns.

3.4 Human Resources (HR) and Student Services

- Maintain records of maternity leave and adjustments.
- Provide information on rights, entitlements, and support services.

- Assist in managing return-to-work plans or academic support needs.

3.5 Staff and Students

- Inform the college as soon as possible about pregnancy, recent childbirth, or breastfeeding needs.
- Engage in risk assessments and communicate any health or safety concerns.
- Follow agreed-upon workplace or study adjustments.

4. Risk Assessment and Workplace Adjustments

4.1 Initial Risk Assessment

- A risk assessment must be conducted as soon as a staff member or student informs the college of their pregnancy.
- Factors assessed include:

○ Physical demands (e.g., standing for long periods, lifting heavy objects) ○ Exposure to hazardous substances ○ Work-related stress and mental wellbeing ○ Access to suitable rest areas ○ Fire safety and evacuation procedures

4.2 Workplace Adjustments

- Temporary changes to work duties to reduce risks (e.g., avoiding heavy lifting, prolonged standing).
- Flexible working arrangements, where possible.
- Access to rest areas and suitable facilities for breastfeeding.
- Modification of work or study schedules to accommodate medical appointments.

4.3 Regular Review

- Risk assessments must be reviewed regularly and updated as the pregnancy progresses.
- Further assessments should be carried out upon return to work/study, particularly for those who are breastfeeding.

5. Health and Safety Considerations

- Avoidance of exposure to harmful substances (e.g., chemicals, radiation, infectious diseases).
- Safe ergonomic adjustments for workstation use.
- Provision of additional breaks where necessary.
- Support for managing pregnancy-related fatigue or discomfort.

6. Maternity and Pregnancy-Related Absence Management

- Staff should liaise with HR to arrange maternity leave entitlements and discuss return-to-work plans.
- Students should contact Student Services to arrange academic adjustments if required.
- Reasonable adjustments should be made to support attendance and workload management.

7. Emergency Procedures

- If a medical emergency occurs, first aid must be administered, and emergency services contacted if necessary.
- Pregnant individuals should be given priority in evacuations, with appropriate assistance provided.
- A designated individual should be responsible for assisting new and expectant mothers during emergency situations.

8. Training and Awareness

- Provide training for managers and staff on pregnancy-related health and safety considerations.
- Conduct awareness sessions on legal rights, reasonable adjustments, and available support services.
- Ensure safety information is clearly communicated to all relevant staff and students.

9. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct periodic audits of risk assessments and workplace adjustments.
- HR and Student Services will maintain records of maternity-related accommodations.
- Non-compliance may result in further training, policy adjustments, or disciplinary action where necessary.

10. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or workplace changes occur.

MANAGING COLLEGE EVENTS (Open Days etc)

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to provide clear guidance on the planning, organisation, and execution of college events to ensure they are conducted safely and effectively while minimising risks to staff, students, and visitors.

2. Scope

This SOP applies to all college events, including but not limited to:

- Open days
- Student performances and exhibitions
- Sports events
- External speaker engagements
- Community events
- Fundraising activities
- Off-site educational visits

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Provide strategic oversight and ensure events align with college policies and legal requirements.
- Approve high-risk events, including those involving external organisations, public attendees, or high-profile guests.
- Ensure adequate resources are allocated for safe event planning and execution.

3.2 Directors of Curriculum (DoCs)

- Ensure that academic-related events align with the curriculum and offer educational value.
- Support risk assessments for curriculum-based events, ensuring compliance with health and safety regulations.
- Liaise with event organisers to ensure adequate staff supervision and student welfare.

3.3 SENDCO (SENCO) – Special Educational Needs Coordinator

- Ensure that event planning considers accessibility and inclusion for students with special educational needs and disabilities (SEND).
- Provide advice on reasonable adjustments and additional support where required.
- Collaborate with event organisers to ensure that students with SEND can participate safely and equitably.

3.4 Maintenance and Estates Team (college events only)

- Ensure venues are fit for purpose, including fire safety, accessibility, and capacity limits. ○ Provide logistical support, including set-up, takedown, and maintenance of temporary structures.
- Assist in emergency response planning, including evacuation procedures. ○ Conduct site safety checks before, during, and after events.

3.5 Community Manager

- Complete an Event Proposal Form and seek approval from the relevant line managers.
- Conduct a thorough risk assessment, including considerations for fire safety, first aid, crowd control, and safeguarding.
- Ensure appropriate supervision levels for student-led events.
- Liaise with relevant departments (e.g., Estates, SLT, SENDCO) for necessary support. ○ Implement control measures identified in risk assessments.
- Ensure external guests or contractors comply with college policies (e.g., safeguarding, data protection, and security).

3.6 Security and Emergency Planning

- Security personnel to be notified of event details where appropriate.
- Emergency plans, including first aid arrangements and evacuation procedures, to be established.
- Clearly communicate emergency procedures to staff and attendees.

4. Event Planning Process

1. **Proposal Submission**: Staff or students proposing an event must complete an Event Proposal Form, outlining objectives, logistics, and risk considerations.
2. **Risk Assessment**: A formal risk assessment must be conducted for all events, identifying hazards and necessary control measures.
3. **Approval**: The event proposal and risk assessment must be approved by the appropriate authority (SLT for high-risk events).
4. **Coordination & Communication**: Notify relevant departments (Estates, SENDCO, Security, First Aiders). Ensure all stakeholders understand their responsibilities.
5. **Pre-Event Checks**: Conduct safety inspections, confirm emergency procedures, and ensure necessary permissions/licences are obtained.
6. **Event Execution**: Implement planned controls, monitor safety conditions, and be prepared to respond to emergencies.

7. **Post-Event Review**: Assess successes and areas for improvement. Document and report incidents or near misses.

5. Risk Management and Safeguarding

- All staff and volunteers must be familiar with college safeguarding policies, particularly when working with under-18s and vulnerable adults.
- External speakers or performers must undergo appropriate vetting and adhere to Prevent Duty requirements. ○ Contingency plans must be in place for adverse weather, security threats, or medical emergencies.

6. Health and Safety Considerations

- Fire exits and emergency access routes must remain unobstructed at all times.
- Noise levels must be controlled to prevent disturbance to ongoing lessons or local residents.
- Food and beverage provisions must comply with hygiene regulations. ○ Any temporary electrical installations must be tested and approved by the Estates team.

7. Monitoring and Compliance

- The Finance Director (Health and Safety Lead) will conduct periodic reviews of event procedures and risk assessments.
- Feedback will be sought from attendees, organisers, and security teams to improve future events.
- Non-compliance with this SOP may result in event cancellation or disciplinary action.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative or organisational changes occur.

COLLEGE ACTING AS AN EXTERNAL VENUE HIRE

1. Purpose

The purpose of this SOP is to ensure the safe and compliant management of college facilities when used by external individuals, groups, or organisations for events, meetings, or activities. It aims to protect college staff, students, visitors, and property by setting out clear responsibilities and expectations for external hirers.

2. Scope

This SOP applies to all external bookings of college facilities, including:

- Lecture theatres and classrooms
- Sports facilities
- Performance spaces
- Meeting rooms
- Outdoor areas

It covers:

- Booking and approval processes
- Health and safety responsibilities
- Site security and supervision
- Insurance and liability requirements
- Emergency arrangements

3. Roles and Responsibilities

3.1 Principal / Vice Principal (SLT)

- Ensure college compliance with health, safety, and legal obligations.
- Approve high-risk or large-scale events.
- Allocate resources for coordination and supervision.

3.2 Venue Hire Coordinator / Lettings Officer

- Known as the Lettings Coordinator.
- Manage bookings, contracts, and enquiries.
- Ensure agreement is made and signed with external hirers.
- Conduct pre-event assessments.
- Liaise with Estates and Health & Safety lead as required.

3.3 Health and Safety Lead

- Review risk assessments for high-risk events if required.
- Advise on fire safety, first aid, and emergency arrangements.
- Ensure external parties are informed of health and safety policies.

3.4 Estates and Facilities Team

- Prepare facilities before and after events.
- Provide access and supervision.
- Manage equipment and utilities as required.
- A site team will be present during hire.

3.5 External Hirers

- Complete venue hire agreement and submit required documentation.
- Provide a risk assessment and evidence of public liability insurance (£5 million minimum).
- Comply with all college health, safety, and safeguarding policies.
- Complete an induction prior to event hire.

4. Booking and Approval Process

4.1 Booking Enquiry and Risk Assessment

- Submit enquiry through the college venue hire process.
- Include event details, attendee numbers, and equipment needs.
- Submit risk assessment, especially for high-risk activities if applicable.
- Hire is available for up to 5 sessions per week:
- Monday – Thursday: 5:30 PM – 10:30 PM
- Friday: Closed
- Saturday: 08:30 AM – 4:00 PM

- Sunday: Closed
- Hire will only proceed if two members of college staff are available.

4.2 Insurance and Documentation

- Provide public liability insurance certificate.
- Ensure relevant licences (e.g. music, alcohol) if applicable are available.
- College may decline high-risk bookings.

4.3 Terms and Conditions

- All bookings are subject to the college's terms and conditions.
- Damage or policy breaches may lead to charges or restrictions.

5. Site Supervision and Safety

5.1 Supervision and Access

- Hirers must nominate a responsible person for liaison.
- Access is limited to booked areas.
- Supervision may be provided by college staff or Estates Team.
- There is one main entrance for all hires.
- A college phone is held by the Estates Manager in the event of emergencies out of normal operational hours.
- Typically, a first aider will be on-site during hire events.
- At the beginning of each hire session, a pre-hire inspection is completed

5.2 Fire Safety and Emergency Procedures

- Hirers must be briefed on fire exits, assembly points, and emergency contacts.
- Follow emergency procedures at all times.
- First aid must be arranged unless otherwise agreed.
- A separate fire drill is carried out for external hire events.

5.3 Equipment and Facilities Use

- Only approved equipment and areas may be used.
- Electrical equipment must be PAT tested.
- Hazardous materials and open flames are prohibited unless approved.

6. Safeguarding and Conduct

- Events involving children or vulnerable adults must comply with safeguarding laws.
- Hirers may be required to provide evidence of DBS checks.
- Hirers are responsible for attendee behaviour.
- Alcohol/substance use is not allowed unless licensed and agreed in writing.

7. Post-Event Review and Feedback

- Estates team/College Staff will inspect facilities post-event.
- Feedback may be collected from hirers and staff.
- All incidents or near misses must be reported to the Health and Safety Lead.

8. Review and Update

This SOP will be reviewed annually or sooner if operational, legislative, or policy changes occur.

MANAGEMENT OF VISITORS ON CAMPUS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish clear guidelines for managing visitors on campus to ensure safety, security, and compliance with safeguarding policies. This SOP applies to all visitors, including external contractors, guest speakers, parents, and other non-staff individuals accessing college premises.

2. Scope

This SOP applies to all campuses, buildings, and facilities owned or managed by the college and covers:

- Guest speakers and educational visitors
- Parents and guardians
- Contractors and service providers
- Inspectors, auditors, and other official visitors
- Prospective students and open day attendees
- Any other external guests accessing college premises

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure visitor management policies align with safeguarding and security protocols.
- Approve visits from high-profile individuals or external organisations.

- Oversee the implementation of visitor safety measures across all sites.

3.2 Reception and Security Staff

- Ensure all visitors sign in and out at designated reception points.
- Issue visitor identification badges and ensure they are worn at all times.
- Verify the purpose of the visit and confirm appointments where applicable.
- Report any suspicious activity or unauthorised access attempts.

3.3 Event Organisers / Hosting Staff

- Notify reception of expected visitors in advance, including names and purpose of visit.
- Accompany visitors at all times unless otherwise authorised.
- Ensure visitors adhere to college policies, including health and safety guidelines.
- Provide relevant risk assessments for visiting contractors or external speakers.

3.4 SENDCO (SENCO) – Special Educational Needs Coordinator

- Ensure visitors engaging with students with SEND are appropriately briefed and supervised.
- Provide guidance on accessibility considerations for visitors where required.

3.5 Maintenance and Estates Team

- Ensure safe access routes and appropriate facilities for visitors, including accessibility measures.
- Oversee contractor permits and compliance with site-specific safety regulations.
- Conduct necessary security and safety checks before and after visitor access.

4. Visitor Procedures

4.1 Signing in and Identification

- All visitors must report to the reception desk upon arrival.
- Visitors must provide a valid form of identification where necessary.
- A visitor log must be maintained with details including name, purpose of visit, and host staff member.
- A visitor badge must be issued and displayed at all times while on campus.

4.2 Safeguarding and Security

- Visitors engaging with students must have appropriate safeguarding clearance where applicable.
- Guest speakers and external educators must be pre-approved, and content must align with college policies.
- Contractors must comply with health and safety regulations, and appropriate risk assessments must be provided in advance.
- Visitors must be accompanied by a member of staff at all times unless prior authorisation is granted.

4.3 Emergency Procedures

- Visitors must be briefed on emergency procedures, including fire evacuation routes and assembly points.
- In the event of an emergency, visitors must follow the instructions of college staff and security personnel.
- Any incidents or safety concerns involving visitors must be reported immediately to the relevant department.

4.4 Restricted Areas

- Visitors must remain in designated areas relevant to their visit.
- Access to secure or high-risk areas (e.g., laboratories, IT server rooms, maintenance zones) requires prior authorisation.
- Unauthorised visitors found in restricted areas may be asked to leave and reported to security.

4.5 Departure and Sign-Out

- Visitors must return their identification badges before leaving the premises.
- The visitor log must be updated to confirm departure times.
- Any follow-up actions (e.g., incident reports, feedback requests) must be noted by hosting staff.

5. Compliance and Monitoring

- Regular audits of visitor logs and compliance with this SOP will be conducted by the Health & Safety and Estates Teams.
- Non-compliance with visitor procedures may result in restricted access or further action where necessary.
- Feedback from visitors and staff will be collected to improve visitor management practices.

6. Review and Update

This SOP will be reviewed annually or earlier if legislative or operational changes occur.

STAFF CONSULTATION AND COMMUNICATION

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a structured approach to staff consultation and communication on health and safety matters, ensuring compliance with the Safety Representatives and Safety Committees Regulations 1977 and the Health and Safety (Consultation with Employees) Regulations 1996. This SOP aims to promote a collaborative culture of workplace safety and ensure that staff are informed and engaged in decision-making processes affecting their health and safety.

2. Scope

This SOP applies to all staff, trade union representatives, and management within the college. It covers:

- Methods of staff consultation
- Responsibilities of management and safety representatives
- Communication of health and safety policies, procedures, and changes

- Mechanisms for raising and addressing concerns
- Compliance monitoring and review

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with consultation and communication regulations.
- Promote a positive safety culture by supporting open dialogue.
- Allocate resources for staff engagement in health and safety matters.

3.2 Finance Director (Health and Safety Lead)

- Develop and implement consultation and communication Procedures.
- Organise regular health and safety meetings with staff representatives.
- Ensure feedback from staff is considered in health and safety decisions.
- Maintain records of consultations and policy changes.

3.3 Line Managers and Supervisors

- Facilitate two-way communication between staff and senior management.
- Ensure staff are aware of and understand health and safety policies.
- Encourage employees to raise concerns and report hazards.

3.4 Safety Representatives (Trade Union and Non-Union Staff Reps)

- Represent staff in health and safety discussions.
- Participate in safety committee meetings.
- Conduct workplace inspections and report concerns.
- Provide feedback on proposed safety measures.

3.5 Staff Members

- Engage with consultation processes and safety discussions.
- Follow health and safety policies and procedures.
- Report hazards, concerns, or incidents promptly.

4. Consultation Procedures

4.1 Formal Consultation Mechanisms

- Health and Safety Committees: Established where required, with meetings held at twice per year.
- Trade Union Safety Representatives: Consulted in line with the 1977 regulations.
- Direct Consultation: For workplaces without union representatives, employees must be consulted on health and safety matters directly.
- SLT weekly meetings take place discussing Health and Safety Matters
- Daily Staff briefings also take place where Health and Safety can be discussed.

4.2 Informal Consultation and Feedback

- Regular team meetings must include health and safety discussions.
- Staff briefings should highlight policy updates and risk assessments.
- Surveys or suggestion boxes may be used for anonymous feedback.

4.3 Communication of Health and Safety Information

- Policies, procedures, and risk assessments must be easily accessible to staff.
- Health and safety updates should be communicated via email, noticeboards, and staff intranet.
- Changes to safety policies must be discussed with employees before implementation.

4.4 Raising and Addressing Concerns

- Staff should report health and safety concerns to their line manager or safety representative.
- A structured process must be in place to investigate concerns and implement corrective actions.
- Outcomes of reported issues should be communicated back to employees.

5. Compliance and Monitoring

- The Finance Director (Health and Safety Lead) will track consultation records and staff engagement levels.
- Safety representatives and committees will review the effectiveness of consultation mechanisms.
- Non-compliance with consultation duties may result in review and corrective measures.

6. Training and Awareness

- Staff must receive training on their rights and responsibilities regarding health and safety consultation.
- Safety representatives should be provided with additional training on conducting inspections and raising concerns effectively.
- Managers must be trained on effective communication and engagement strategies.

7. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or workplace consultation requirements change.

MANAGEMENT OF STAFF AND STUDENT ANAPHYLAXIS AND ALLERGIES

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish a structured approach to managing anaphylaxis and allergies for staff and students. This ensures compliance with the Equality Act 2010, the Health and Safety at Work Act 1974, and best practices in medical emergency response. The SOP outlines preventive measures, emergency procedures, and responsibilities to ensure a safe environment for individuals with severe allergies.

2. Scope

This SOP applies to all staff, students, visitors, and contractors within the college premises. It covers:

- Identification and management of allergies
- Emergency response procedures for anaphylaxis
- Staff training and awareness
- Medication management, including auto-injectors (e.g., EpiPens)
- Risk reduction strategies

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with allergy management policies and legal requirements.
- Allocate resources for staff training and emergency response equipment.
- Oversee the effectiveness of allergy management strategies.

3.2 Finance Director (Health and Safety Lead)

- Develop and implement policies for allergy management and anaphylaxis response.
- Ensure risk assessments account for students and staff with severe allergies.
- Monitor incidents and implement improvements as required.

3.3 First Aid and College Nurse

- Maintain a record of individuals with severe allergies and allergy management plan as required.
- Ensure availability of emergency medication in key locations.
- Provide first aid and emergency medical support when required.
- Complete Incident report and log on student record.

3.4 Teaching and Support Staff

- Be aware of students/staff with known allergies and their emergency action plans.
- Take precautions during activities that may pose allergen exposure risks.
- Act swiftly in an emergency by administering medication and calling emergency services.

3.5 Catering and Facilities Team

- Ensure allergen information is clearly displayed on menus and food packaging.
- Implement safe food preparation practices to prevent cross-contamination.
- Work with students and staff to accommodate dietary requirements safely.

3.6 Parents/Guardians (for students under 18) and Affected Individuals

- Provide accurate medical information, emergency contacts, and medication.
- Update the college on any changes in allergy status.
- Ensure personal emergency medication is carried where required.

4. Identification and Risk Management

4.1 Allergy Register and Individual Care Plans

- The college will maintain an up-to-date records of staff and students with allergies.
- Plans will be created for those at risk of anaphylaxis.
- Plans should include triggers, symptoms, emergency response, and medication details.

4.2 Risk Reduction Measures

- Avoidance strategies should be implemented where possible (e.g., nut-aware policies in high-risk areas).
- Clearly label all food items in catering areas with allergen information.
- Ensure teaching activities (e.g., science experiments, cooking classes) consider allergy risks.
- Implement environmental controls to reduce allergen exposure (e.g., cleaning procedures).

5. Emergency Response Procedures 5.1 Recognising Anaphylaxis

Anaphylaxis symptoms may include:

- Swelling of the face, lips, or throat
- Difficulty breathing or wheezing
- Rapid or weak pulse
- Dizziness, confusion, or collapse
- Skin reactions (hives, redness)

5.2 Immediate Action

1. Call for help and inform the First Aid Team.
2. Administer the adrenaline auto-injector (EpiPen, Jext, Emerade) immediately if prescribed.
    a. Follow the individual's IHP instructions.
    b. Inject into the outer thigh and hold for as per manufactures instructions.
3. Call emergency services (999) immediately.
    a. State "Anaphylaxis" and provide details of the person affected.
4. Ensure the person is in a comfortable position (lying down with legs elevated if feeling faint).
5. Monitor breathing and be prepared to administer CPR if necessary.
6. If no improvement after 5 minutes, administer a second auto-injector if available.
7. Ensure emergency contacts (parents/guardians for students under 18) are informed**. 6.**

Medication Management

- Students and staff must carry their prescribed auto-injectors at all times.
- The college will keep spare adrenaline auto-injectors in designated locations for emergency use.
- All medications must be stored securely but easily accessible.
- Expiry dates must be monitored regularly, and replacements requested when needed.

7. Staff Training and Awareness

- The college nurse will offer awareness sessions to staff on allergy awareness and anaphylaxis response.

8. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct regular audits of allergy management policies.
- First Aid and College Nurse Teams will review all incidents to improve response measures.
- Any non-compliance with allergy safety procedures will result in additional training or corrective actions.

9. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or individual health requirements change.

MANAGEMENT OF IONISING RADIATION IN EDUCATIONAL SETTINGS

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure the safe management of ionising radiation within educational settings, ensuring compliance with the Ionising Radiations Regulations 2017 (IRR17), the Environmental Permitting Regulations 2016, and the Health and Safety at Work Act 1974. This SOP establishes procedures to minimise radiation exposure and protect staff, students, and visitors.

2. Scope

This SOP applies to all staff and students who may be involved in the use, handling, storage, or disposal of radioactive materials and radiation-emitting equipment in educational settings, particularly in:

- Science laboratories (e.g., physics experiments)
- Research facilities
- Storage and disposal of radioactive sources
- Compliance with regulatory requirements

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with all legal requirements for ionising radiation safety.
- Allocate resources for the safe management of radioactive materials.
- Oversee the effectiveness of radiation protection measures.

3.2 Radiation Protection Supervisor (RPS)

- Appointed member of staff responsible for day-to-day radiation safety.
- Ensures compliance with IRR17 and local rules for radiation use.
- Coordinates with the Radiation Protection Adviser (RPA) for expert guidance.
- Maintains an inventory of all radioactive sources and equipment.

3.3 Radiation Protection Adviser (RPA)

- External or internal qualified expert providing specialist radiation protection advice.
- Conducts risk assessments and radiation monitoring.
- Advises on safe handling, disposal, and emergency procedures.

3.4 Estates and Facilities Team

- Ensure storage areas for radioactive materials meet legal safety requirements.
- Maintain shielding, signage, and security measures for radiation sources.
- Dispose of radioactive waste following regulatory guidelines.

3.5 Science and Technical Staff

- Follow safety protocols when using radiation sources.
- Ensure students receive proper instruction and supervision during experiments.
- Report any safety concerns, incidents, or equipment faults.

3.6 Staff and Students

- Comply with radiation safety policies and procedures.
- Report any exposure concerns or suspected equipment malfunctions.
- Use personal protective equipment (PPE) where necessary.

4. Radiation Safety Procedures

4.1 Risk Assessments and Authorisation

- Conduct risk assessments before using any ionising radiation sources.
- Obtain approval from the RPS and RPA before introducing new radioactive sources.
- Document all risk control measures and keep records for inspection.

4.2 Storage and Security of Radioactive Materials

- All radioactive sources must be stored in a locked, shielded container.
- Access must be restricted to authorised personnel only.
- Regular audits of radioactive material inventories must be conducted.

4.3 Safe Use of Ionising Radiation

- Follow ALARP (As Low As Reasonably Practicable) principles to minimise exposure.
- Use shielding (e.g., lead screens) and distance controls to reduce radiation exposure.
- Limit the duration of exposure for staff and students.
- Maintain radiation monitoring devices where required.

4.4 Personal Protective Equipment (PPE)

- Staff and students must wear appropriate PPE, including gloves and lab coats.
- Where applicable, dosimeters must be worn to monitor radiation exposure levels.

4.5 Radiation Monitoring and Dosimetry

- Conduct regular monitoring of radiation levels in areas where ionising radiation is used.
- Maintain exposure records for all personnel working with radiation sources.
- Investigate any exposure levels exceeding the set thresholds.

4.6 Waste Disposal and Decontamination

- Dispose of radioactive waste in accordance with Environment Agency regulations.
- Label and segregate radioactive waste properly.
- Decontaminate work surfaces and equipment after use.
- Keep detailed records of radioactive waste disposal.

5. Emergency Procedures

5.1 Radiation Spill or Contamination

- Evacuate the area immediately and prevent further exposure.
- Notify the RPS and Finance Director (Health and Safety Lead).

- Use spill kits to contain contamination and follow decontamination procedures.
- Monitor affected individuals and areas for residual contamination.

5.2 Loss or Theft of Radioactive Material

- Report immediately to the RPS and the local radiation authority.
- Conduct an internal investigation and implement corrective actions.
- Review security measures to prevent recurrence.

5.3 Radiation Exposure Incident

- Seek immediate medical evaluation if exposure is suspected.
- Record exposure details and report to the RPS and RPA.
- Conduct a review to determine the cause and prevent future incidents.

6. Compliance and Auditing

- The RPS will conduct periodic audits of radiation safety procedures.
- The RPA will review and update risk assessments annually.
- Non-compliance with radiation safety protocols may result in disciplinary action or additional training.

7. Training and Awareness

- Staff and students must receive radiation safety training before using ionising radiation.
- Regular refresher training should be conducted for those working with radiation sources.
- Emergency response drills should be carried out annually.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or radiation safety requirements change

MANAGEMENT OF SHARPS AND BIOHAZARD WASTE

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to establish safe practices for the handling, disposal, and management of sharps and biohazard waste within educational settings. This SOP ensures compliance with the Health and Safety at Work Act 1974, the Control of Substances Hazardous to Health (COSHH) Regulations 2002, and the Environmental Protection Act 1990.

2. Scope

This SOP applies to all staff, students, contractors, and visitors handling sharps and biohazardous materials, including:

- Needles, syringes, and lancets
- Broken glass contaminated with biological material
- Blood and bodily fluids
- Microbiological cultures and laboratory waste
- Contaminated PPE (gloves, masks, gowns)

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with waste management regulations.
- Allocate resources for safe storage, disposal, and staff training.
- Oversee effectiveness of sharps and biohazard waste procedures.

3.2 Finance Director (Health and Safety Lead)

- Develop, implement, and review biohazard waste management policies.
- Conduct risk assessments on sharps and biohazardous waste handling.
- Ensure staff are trained in correct disposal methods and PPE use.

3.3 Estates and Facilities Team

- Maintain and monitor designated sharps disposal and biohazard waste bins.
- Ensure timely collection and disposal of hazardous waste through licensed contractors.
- Provide appropriate signage and designated disposal areas.

3.4 Laboratory and College Nurse

- Ensure correct handling, disposal, and documentation of sharps and biohazard waste.
- Follow hygiene and PPE requirements when working with biohazards.
- Advise the Finance Director (Health and Safety Lead) on any accidental exposures or contamination incidents and reporting (RIDDOR 2013)

3.5 Staff, Students, and Contractors

- Follow procedures for safe handling and disposal of sharps and biohazards.
- Use designated waste bins and report any spills or hazards.
- Attend relevant training on waste management and hygiene.

4. Sharps and Biohazard Waste Management Procedures

4.1 Identification and Segregation of Waste

- **Sharps Waste:** Includes needles, scalpels, glass, and sharp instruments. Must be disposed of in a **yellow sharp's container**.
- **Biohazard Waste:** Includes blood, bodily fluids, cultures, and PPE contaminated with biological materials. Must be disposed of in **yellow biohazard bags**.
- **General Laboratory Waste:** Non-hazardous items must be kept separate from biohazard waste.

4.2 Safe Handling of Sharps

- Do not recap needles after use.
- Use puncture-resistant sharps disposal containers.
- Keep sharps containers within easy reach but out of high-traffic areas.
- Seal sharps containers when 75% full and arrange for disposal.

4.3 Biohazard Waste Disposal

- Place all contaminated waste in yellow biohazard bags.
- Ensure biohazard bags are sealed and placed in secure in the first aid room.
- Arrange for waste collection by an approved hazardous waste contractor.
- Maintain waste disposal records as per collection company requirements.

4.4 Spill Management and Decontamination

- Contain and clean spills using biohazard spill kits.
- Wear appropriate PPE (gloves, eye protection, masks) when handling spills.
- Disinfect affected areas with an approved biocidal agent.
- Dispose of cleaning materials as biohazard waste.

5. Emergency Procedures

5.1 Sharps Injury or Exposure to Biohazards (dependent on individual)

- Encourage bleeding if pricked by a used sharp.
- Wash the affected area with soap and water.
- Seek immediate first aid and notify the Health and Safety Manager.
- If exposure involves blood or bodily fluids, follow post-exposure prophylaxis (PEP) protocols.
- Record the incident in the accident reporting system and investigate.

5.2 Biohazard Exposure Incident

- Remove contaminated clothing and wash exposed skin immediately.
- Report the incident and seek medical attention if necessary.
- Isolate the affected area and ensure proper decontamination.
- Review procedures and implement corrective actions if required.

6. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct audits of sharps and biohazard waste handling.
- Any breaches of procedure will result in additional training or corrective actions.

7. Training and Awareness

- Staff and students must receive training on sharps handling and biohazard safety.
- Annual refresher courses will be conducted for laboratory and medical staff.
- Signage and guidance documents must be displayed in relevant areas.

8. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

SCIENCE AUTOCLAVES & PRESSURE SYSTEMS SAFETY

1. Purpose

The purpose of this Standard Operating Procedure (SOP) is to ensure the safe operation, maintenance, and compliance of small science autoclaves and pressure systems within educational settings. This SOP aligns with the Pressure Systems Safety Regulations 2000 (PSSR), ensuring risk management and accident prevention associated with pressure equipment.

2. Scope

This SOP applies to all staff, students, and technicians involved in the use, maintenance, and management of autoclaves and pressure systems in science laboratories, covering:

- Safe operation and handling
- Inspection and maintenance
- Risk assessment and hazard identification
- Emergency procedures
- Compliance with legal and regulatory requirements

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with the Pressure Systems Safety Regulations 2000 (PSSR).
- Allocate resources for maintenance, inspection, and staff training.
- Oversee risk management related to pressure systems.

3.2 Finance Director (Health and Safety Lead)

- Develop and maintain pressure system safety policies and procedures.
- Conduct risk assessments for autoclaves and pressure vessels.
- Monitor compliance with legal requirements and conduct safety audits.

3.3 Laboratory Technicians & Science Staff

- Operate autoclaves and pressure systems following manufacturer guidelines.
- Conduct pre-use checks to identify faults or malfunctions.
- Ensure all safety controls and interlocks are functioning correctly.
- Report any issues to the Finance Director (Health and Safety Lead).

3.4 Laboratory Technicians /Estates and Facilities Team

- Arrange statutory examinations and servicing of pressure systems by a competent person.
- Maintain records of all inspections, servicing, and compliance checks.
- Ensure appropriate storage and disposal of steam and pressure-related waste.

3.5 Students and Staff Users

- Follow operating procedures and wear appropriate PPE.
- Report faults, leaks, or abnormal pressure readings immediately.
- Never operate pressure systems without appropriate training.

4. Safe Operation Procedures

4.1 Pre-Use Inspection

- Check pressure gauges and ensure readings are within safe operating limits.
- Inspect seals, valves, and locking mechanisms for signs of wear or damage.
- Ensure the chamber is not overloaded and that items are correctly placed.

4.2 Safe Use of Autoclaves

- Only trained personnel should operate autoclaves.
- Ensure the autoclave door is securely locked before starting a cycle.
- Use appropriate cycles for different materials (e.g., biological waste vs. sterilisation cycles).
- Allow the system to fully depressurise before opening the chamber.

4.3 Handling Pressure Systems

- Avoid overloading or exceeding pressure limits.
- Do not bypass safety interlocks or operate systems with known faults.
- Use pressure relief valves and safety mechanisms as required.
- Maintain a safe distance when operating high-pressure equipment.

4.4 Shutdown and Maintenance

- Allow the system to fully cool before handling or performing maintenance.
- Drain residual pressure safely before opening the vessel.
- Conduct routine cleaning and remove residues from autoclave chambers.

5. Inspection and Maintenance

5.1 Statutory Inspections

- All pressure systems must undergo thorough examination by a competent person at legally required intervals.
- Inspection certificates and reports must be stored for at least five years.
- Any system failing inspection must be taken out of service until repaired.

5.2 Routine Maintenance

- Scheduled maintenance should be performed according to manufacturer guidelines.
- Seals, pressure gauges, and relief valves must be checked regularly.
- Any worn or faulty components must be replaced promptly.

6. Emergency Procedures

6.1 Pressure System Failure or Leak

- Stop operation immediately and evacuate the area if necessary.
- Shut off the power and steam supply where applicable.
- Report the issue to the Health and Safety Manager and Estates Team.
- Allow only trained personnel or a competent engineer to inspect and repair the system.

6.2 Autoclave Malfunction

- If an autoclave does not depressurise, do not attempt to force the door open.
- Check control panel warnings and consult troubleshooting guidelines.
- Contact the designated service engineer for repairs.
- Keep all users informed of the issue and restrict access to the area.

6.3 Burns and Exposure to Steam

- Immediately place affected skin under cool running water for at least 10 minutes.
- Seek first aid assistance.
- Record the incident in the accident report log and notify the Health and Safety Manager.

7. Compliance and Auditing

- The Finance Director (Health and Safety Lead) will conduct audits of autoclave and pressure system compliance.
- Estates and Facilities will ensure that statutory inspections are up to date.
- Any non-compliance must be rectified with immediate effect, and disciplinary action may be taken if procedures are not followed.

8. Training and Awareness

- Staff operating pressure systems must receive formal training.
- Refresher training will be provided annually or upon updates to legislation.
- Clear signage and operating instructions must be displayed near pressure systems.

9. Review and Update

This SOP will be reviewed annually or sooner if legislative, operational, or safety requirements change.

MANAGEMENT OF BLOODBORNE VIRUSES (BBVs)

1. Purpose

This Standard Operating Procedure (SOP) outlines the college's approach to managing the risks associated with Bloodborne Viruses (BBVs), in accordance with the 2025 Health and Safety Executive (HSE) guidance. It aims to protect staff, students, and visitors from exposure to infections such as Hepatitis B, Hepatitis C, and HIV.

2. Scope

This SOP applies to all activities where there is a potential risk of exposure to blood and other potentially infectious materials (OPIM), including:

- First aid and injury response
- Science, health, and sports courses
- Cleaning and waste disposal
- Managing sharp injuries and biohazard spills

3. Roles and Responsibilities

3.1 Principal / Vice Principal (Senior Leadership Team - SLT)

- Ensure compliance with HSE guidance and health protection legislation.
- Allocate resources for BBV control measures and staff training.

3.2 Health and Safety Lead

- Maintain and implement BBV exposure policies and procedures.
- Conduct BBV risk assessments and update in line with HSE guidance.
- Provide or arrange training and ensure incident response protocols are in place.

3.3 RGN, First Aiders and Medical Response Staff

- Respond to incidents involving exposure to blood or OPIM using standard precautions.
- Complete and submit exposure incident reports.
- Refer affected individuals to occupational health or NHS services where necessary.

3.4 Cleaning and Estates Team

- Safely clean and disinfect areas contaminated with blood or bodily fluids.
- Dispose of contaminated materials using appropriate biohazard waste procedures.

3.5 Staff, Students, and Contractors

- Follow infection prevention and BBV safety procedures.
- Report injuries, especially sharps or exposure to blood/OPIM, immediately.
- Use PPE appropriately and comply with college health and safety policies.

4. Risk Assessment and Prevention

4.1 BBV Risk Assessment

- Identify staff and activities at potential risk of exposure.
- Consider health, science, and sports settings, and cleaning operations.
- Review risk assessments annually and after any BBV exposure incident.

4.2 Standard Infection Control Precautions (SICPs)

- Treat all blood and OPIM as potentially infectious.
- Wear disposable gloves and, where appropriate, aprons or eye protection.
- Cover all cuts/abrasions with waterproof dressings.
- Hand hygiene must be performed before and after any task involving blood. **4.3 Immunisation**
- Offer Hepatitis B vaccination to staff in higher-risk roles (e.g., first aiders, technicians).
- Maintain vaccination records and update where required.

5. Incident Management

5.1 Immediate Response to Exposure

- Encourage bleeding at puncture wounds but do not squeeze.
- Wash the area with soap and water (do not scrub).

- Flush splashes to eyes or mouth with clean water.
- Report to the Health and Safety Manager and seek medical attention immediately.

5.2 Reporting and Follow-Up

- Complete Incident Report Form.
- The Health and Safety lead will conduct a follow-up investigation.
- Referrals may be made to occupational health or GP services.

5.3 Post-Exposure Prophylaxis (PEP)

- PEP may be available following high-risk exposures (e.g., HIV).
- Ensure affected individuals attend A&E or an occupational health provider as soon as possible (ideally within 1–2 hours).

6. Waste Disposal and Cleaning

- Dispose of blood-contaminated waste using yellow biohazard bags or sharps bins.
- Use approved disinfectants effective against BBVs.
- Cleaning staff must be trained and equipped to manage biological contamination.

7. Confidentiality and Support

- Maintain confidentiality of individuals involved in BBV incidents.
- Provide support and guidance through college wellbeing or HR services.
- Avoid discrimination or stigmatisation related to BBV status.

8. Training and Awareness

- Provide BBV awareness training to relevant staff.
- Include BBV protocols in first aid and safeguarding training.
- Display BBV incident response guidance in key locations (first aid rooms, science labs, etc.).

9. Review and Update

This SOP will be reviewed annually or sooner in response to updated HSE guidance, BBV-related incidents, or changes in workplace activities.

Legal Register

Legislation	Summary	Applicability	HSE Guidance/ACoP Link
Health and Safety at Work etc. Act 1974	General duties of employers to ensure the health, safety and welfare of employees and others.	Applies to all college activities and premises.	View Guidance
Management of Health and Safety at Work Regulations 1999	Requires risk assessments, health and safety arrangements, and training.	All departments must undertake risk assessments and implement controls.	View Guidance
Control of Substances Hazardous to Health (COSHH) Regulations 2002	Requires control of exposure to hazardous substances.	Science labs, cleaning, art departments and maintenance.	View Guidance

Provision and Use of Work Equipment Regulations 1998 (PUWER)	Ensures work equipment is safe and maintained.	Workshops, kitchens, cleaning and maintenance equipment.	View Guidance
Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)	Regulates lifting equipment safety.	Applicable where hoists or lifting equipment are used (e.g., SEN support).	View Guidance
Electricity at Work Regulations 1989	Ensures electrical systems are safe and maintained.	Applies across all college facilities.	View Guidance
Fire Safety Order 2005	Requires fire risk assessments and fire precautions.	Entire college estate i	View Guidance
Regulations (RIDDOR) 2013	Requires reporting of specified incidents and injuries.	College-wide incident reporting procedures required.	View Guidance
Work at Height Regulations 2005	Requires planning and risk assessment for working at height.	Maintenance, caretaking, and any rooftop or ladder access work.	View Guidance

Manual Handling Operations Regulations 1992	Requires risk assessment and control of manual handling risks.	Caretaking, catering, technical and teaching staff.	View Guidance
Workplace (Health, Safety and Welfare) Regulations 1992	Covers workplace conditions including ventilation, temperature, lighting, and welfare facilities.	Applies to all buildings and facilities across the college.	View Guidance

Construction (Design and Management) Regulations 2015 (CDM)	Governs construction projects to ensure safe design and management.	Applicable to all construction, refurbishment, and maintenance projects.	View Guidance
Ionising Radiations Regulations 2017	Protects people from ionising radiation in workplaces.	Relevant where x-ray equipment or radioactive sources are used (e.g. science labs).	View Guidance
Pressure Systems Safety Regulations 2000	Ensures safety of pressure vessels and systems.	Applies to compressed air systems and pressure vessels in labs or workshops.	View Guidance
Gas Safety (Installation and Use) Regulations 1998	Requires gas systems to be installed and maintained safely by competent persons.	Relevant to all gas installations across the estate (e.g. kitchens, boilers).	View Guidance
Control of Asbestos Regulations 2012	Requires identification and management of asbestos-containing materials.	Applies where ACMs may be present in older college buildings.	View Guidance
Work at Height Regulations 2005	Requires planning, supervision and safe practices when working at height.	Maintenance, site services, and events setup where ladders or platforms are used.	View Guidance
The Personal Protective Equipment at Work Regulations 2022	Requires provision of suitable PPE to employees exposed to health and safety risks.	Applies to all college roles where hazards exist (e.g. labs, estates, workshops).	View Guidance
Control of Noise at Work Regulations 2005	Requires assessment and control of noise exposure in the workplace.	Music, performing arts, workshops, maintenance and estates teams.	View Guidance

Control of Vibration at Work Regulations 2005	Requires control of risks from hand-arm and whole-body vibration.	Grounds maintenance, estates and workshop activities.	View Guidance
Health and Safety (Display Screen Equipment) Regulations 1992	Requires risk assessment and control measures for DSE work.	Office-based and teaching staff using computers extensively.	View Guidance
Children and Families Act 2014 (SEND Code of Practice 2015)	Outlines duties to support students with EHCPs and special needs.	All staff supporting students with special educational needs.	View Guidance
Health and Safety (First Aid) Regulations 1981	Requires employers to provide adequate and appropriate first aid equipment, facilities and personnel.	Applies to all staff, students, and visitors across the college estate and during off-site activities.	View Guidance