HEALTH AND SAFETY INDUCTION CHECKLIST FOR NEW STAFF BRANSTY PRIMARY SCHOOL NAME OF NEW EMPLOYEE/VOLUNTEER **DATE OF COMMENCEMENT POSITION HELD Identities and Roles of Key Personnel: HEAD TEACHER Joanne Fearon DEPUTY / ASSISTANT HEAD TEACHER(s) / SENIOR TEACHER** Laura Bell SCHOOL BUSINESS MANGER / OFFICE MANAGER / **Catherine Johnson ADMINISTRATOR** SITE MANAGER / CARETAKER **Barbara Rae Catherine Johnson HEALTH & SAFETY COORDINATOR EDUCATIONAL VISITS COORDINATOR Charlotte Mullen / Claire Parr DESIGNATED SAFEGUARDING LEAD** Joanne Fearon **DEPUTY DESIGNATED SAFEGUARDING LEAD** Laura Bell John Lee **GOVERNOR RESPONSIBLE FOR LIAISING WITH LA AND/OR** Stephen Jackson PARTNER AGENCIES ON ISSUES OF CHILD PROTECTION **FIRE SAFETY MANAGER(S) Barbara Rae FIRE WARDENS Barbara Rae WORKPLACE FIRST AIDERS** PAEDIATRIC FIRST AIDERS (if relevant) **Refer to First Aider list OTHER FIRST AIDERS (if relevant)** John Lee - Forest Schools **CHAIR OF GOVERNORS** Stephen Jackson **Steve Walker HEALTH & SAFETY GOVERNOR**

N/A

TRADE UNION OR STAFF APPOINTED H&S

REPRESENTATIVE(S)

| TO BE COMPLETED PRIOR TO APPOINTMENT | | | | |
|--------------------------------------|------------|--|-----------------|--|
| NAME | | | | |
| SUBJECT | | ACTION | ✓ WHEN COMPLETE | |
| | | Enhanced disclosure for Regulated Activity seen and verified by a member of Senior Management (NOTE: can be verified after appointment, providing new staff member is subject to reasonable supervision and the Children's Barred List has been checked - https://www.teacherspensions.co.uk/employers/training-and-resources/references/tp-online.aspx) Children's Barred List Check | | |
| | | Prohibition Check (if teaching staff) | | |
| | | • Staff Suitability Declaration completed (by relevant staff) (in line with The Childcare (Disqualification) and Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendments) Regulations 2018) | | |
| Safeguardin Protection | ng / Child | Section 128 Direction (for relevant persons in management positions) – Academies & Independent Schools ONLY | | |
| Protection | | Section 128 Direction (for ALL Governors appointed from 01/09/14) – Maintained Schools ONLY | | |
| | | • Identification verified – address/dob | | |
| | | Relevant qualifications (if relevant) verified | | |
| | | Right to work in the UK verified | | |
| | | References verified | | |
| | • | Medical Clearance obtained | | |
| | | • Staff member cleared to work in educational establishment | | |
| | | NOTE: Subscribing Schools are advised to use the SCR check lists available to download from the KAHSC website in order to ensure that all necessary information has been collated for future entry to the Single Central Record | | |

TO BE COMPLETED ON THE FIRST DAY OF EMPLOYMENT **POST NAME** ✓ WHEN **SUBJECT ACTION COMPLETE** Induction Induction process explained to new starter Made aware of the Designated Safeguarding Lead and the Designated **Child Protection** Teacher for Looked after or previously Looked after Children Identification ID Badge issued Operation of any security systems explained Security Instructions given regarding parking on site Parking & Movement of Parking permit issued **Vehicles** Arrangements for the movement of vehicles on site explained Given a tour of the building and grounds **Facilities** Shown the location of toilets, changing areas and the staff room **Smoke free Workplace** Smoke free Workplace Policy explained **Fire Alarm** Sound of the fire alarm demonstrated Fire Evacuation & Shown the location and operation of fire exits and the fire assembly point **Assembly** First Aid What to do if first aid is required for themselves or a child explained **Supervision** Meeting with Mentor arranged Explanation of any variations to working practices, procedures and risk **Variations** assessments (an example would be protective measures in place regarding pandemics). Head teacher or Health & Safety SIGNED: DATE: Coordinator **SIGNED Employee** DATE:

TO BE COMPLETED WITHIN FIRST WEEK

| NAME | POST | | |
|---|---|-----------------|--|
| SUBJECT | ACTION | ✓ WHEN COMPLETE | |
| Day One Induction | Check new starter has fully understood the 1 st day's induction | | |
| School Health & Safety Policy | Provide a copy to read and/or show where held | | |
| Supervision | Supervision/Mentoring arranged and dates for next three months Induction organised | | |
| Fire & Evacuation Procedure | Shown location and operation of fire alarm manual call points Shown how to raise the alarm in absence of above Shown location of fire extinguishers and different types/uses explained School fire evacuation procedures explained in depth including new starter's own role and responsibilities Shown the fire evacuation assembly point(s) | | |
| First Aid | Shown locations of First Aid box(es) and told who to report missing items to Safe practices and use of additional PPE if required explained | | |
| Supporting Pupils with Medical Conditions | Made aware of the School Policy for Supporting Pupils with Medical Conditions including procedures for administering general medicines, safe practices and use of additional PPE if required and procedures for making school meal providers aware of pupils with specific food related allergies | | |
| Risk Assessments | Shown where risk assessments are kept Risk Assessment process explained | | |
| COSHH assessments | Shown where COSHH assessments & Material Safety Data Sheets are held COSHH assessment procedures explained | | |
| Panic alarms | • Provided with a panic alarm (where relevant) • Shown locations and procedure for use explained | | |
| Special hazards and risks within School | Explained (where relevant) | | |
| Accidents | Shown location of Accident Books and Accident/ Forms Accident Reporting & Investigation Procedure explained | | |
| Hazards and Faults | Hazard and fault reporting procedures explained Shown location of Hazard/Defect Report Book (where relevant) | | |
| Violence at Work | Shown location of Accident Reporting Forms Violent Incident Reporting Procedure explained | | |
| Physical Intervention | Shown procedures and Incident Record sheets for completion | | |
| Vaccinations | Advice given on vaccinations for Hepatitis, Tetanus etc. (where applicable) | | |
| Electrical Safety | Advice given on safe use and regular checking of electrical equipment Correct start up and stopping procedures of equipment explained (where relevant) | | |

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| | | TO BE CON | APLETED WITHIN | FIRST WEEK | | |
| NAME | | | POST | | | |
| SUBJECT | | ACTION | | | | ✓ WHEN COMPLETE |
| Manual Har | ndling | Shown copy and rea of Loads (or similar | d KAHSC General Safety guidance) | Series G23 – Manual H | landling | |
| Working at Height | | Shown copy and read KAHSC General Safety Series G19 – Working at Heights (or similar guidance) Shown location of step ladders and safe use of equipment explained | | | | |
| Personal Pro Equipment | Size required ordered or issued If issued, use, care and disposal explained | | | | | |
| Display Scre Equipment | een | G13 [or similar g | ment of own Workstation done (see KAHSC General Safety Series or similar guidance]) ments of Workstation explained (including provision of eye tests ers') | | | |
| Safeguarding/Child Protection | | | | | | |
| Equality | | Information provided about the Single Equality Scheme & Objectives Broad definition of 'Equality' explained Procedures for reporting incidents of racism, harassment or other forms of discrimination explained | | | | |
| SIGNED: | | | Head teacher or Healt Coordinator | h & Safety | DATE: | |
| SIGNED | | | Employee | | DATE: | |

| TO BE COMPLETED WITHIN FIRST THREE MONTHS | | | | | |
|---|---|--|-----------------|--|--|
| NAME | | POST | | | |
| SUBJECT | | ACTION | ✓ WHEN COMPLETE | | |
| Week One Induction | | Check new starter has fully understood the 1 st week's induction | | | |
| Communication and Consultation | | Explained how system of communication/consultation of safeguarding and health and safety issues operates Encouraged to raise any concerns about any issue (open door policy) | | | |
| Panic Alarms | S | Experienced panic alarm drill (where applicable) | N/A | | |
| Wellbeing | | Made fully aware of the School Policy, Risk Assessments, control measures and alerting systems in place to reduce stress and promote the wellbeing of staff | | | |
| Common Lav | N | "Duty of Care" explained | | | |
| School Health and Safety Policy | | Shown and read School Health and Safety Policy Aware of health and safety responsibilities of Head teacher Aware of health and safety responsibilities of Health and Safety Coordinator Had their own, other employees and employers responsibilities explained | | | |
| Aware of the school Emergency/Contingency Plans (including Plans to offer Remote Education) School Emergency/ Aware of the SEMT (School Emergency Management Team) and their roles Aware of any specific roles they may be required to fulfil during emergencies | | | | | |
| Competent Health and Safety Service Provider/Advice | | Cumbrian Community and Voluntary Controlled Schools: Aware of the role of the Corporate H&S Team AND Kym Allan Safeguarding, Health and Safety Consultants Ltd. and how to contact them Shown how to access the CCC School Portal and the KAHSC website and the and aware of their contents Fully aware that these guidance documents are available to all staff at anytime | | | |

TO BE COMPLETED WITHIN FIRST THREE MONTHS NAME **POST ✓ WHEN SUBJECT ACTION** COMPLETE **Cumbria County Council** Been shown copy of Cumbria County Council Health and **Health and Safety Policy** Safety Policy Poster Shown the location of the Health and Safety Law Poster **HSE Law Poster/Leaflet** Been given or shown a copy of 'Health and Safety Law what you should know' leaflet Click here to access Sickness absence procedures along with Back to Work **Absence** Interviews Specific hazards relating Shown appropriate risk assessments and understood associated control measures to individual job Safeguarding/Child Suitable Safeguarding Training undertaken **Protection Supporting Pupils with** Additional training needs agreed with regard supporting children with specific or complex medical conditions **Medical Conditions Further Training** Agreed training needs with set priorities – see Agreed Training Needs overleaf required Head teacher or Health & Safety SIGNED: DATE: Coordinator DATE: **SIGNED Employee**

| AGREED TRAINING NEEDS | | | | | | |
|--|-------------------|--------------------------------|-----------------|-------|-----------------|--|
| NAME | | POST | | | | |
| SUBJECT | | ACTION | | | ✓ WHEN COMPLETE | |
| Risk Assessn | nent | | | | | |
| Variations to working practices (an example would be pandemics) | | | | | | |
| Safeguarding Training to appropriate level | | | | | | |
| Safer Recruitment | | | | | | |
| 'Prevent' Awareness | | | | | | |
| Manual Handling | | | | | | |
| Educational | Visits | | | | | |
| Managing Vi | olence | | | | | |
| Team Teach, | Positive Handling | | | | | |
| Supporting Pupils with medical conditions: General awareness of school Policy & procedures Safe practices and use of additional PPE if required Administration of basic medicines Specific training from health professional | | | | | | |
| First Aid to appropriate level | | | | | | |
| Food Hygiene to appropriate level | | | | | | |
| Allergen Awareness | | | | | | |
| Fire Safety Awareness | | | | | | |
| Fire Warden | | | | | | |
| Minibus Driver Assessment | | | | | | |
| Any other identified H&S training needs | | | | | | |
| SIGNED: | | Head teacher or Coordinator | Health & Safety | DATE: | | |
| SIGNED | | Employee | | DATE: | | |