HEALTH, SAFETY AND WELFARE

POLICY



THE BISHOP FRASER TRUST
A CHURCH OF ENGLAND MULTI-ACADEMY TRUST

Health, Safety and Welfare Policy

Policy type	Trust Mandatory Supports safe, healthy and effective education and workplace environments across the Trust.
Author Owner In Consultation With	Chris Green, Director of Estates and Facilities Director of Estates and Facilities Don Jones, CISCO Tuesday Humby, CEO Director of Safeguarding Representative school business leaders and site team
Approved by	Trustees, 27/08/2026
Review date	Policies will be reviewed in line with the Trust's internal policy schedule and/or updated when new legislation comes into force
Description of changes	• New Health, Safety and Welfare Policy aligned to the Trust's wider governance framework. Replaces the previous corporate policy as the overarching framework, with detailed operational requirements moved into supporting procedures, standards and local arrangements

Statement of Intent

The Bishop Fraser Trust is committed to ensuring, so far as is reasonably practicable, the health, safety and welfare of its employees and the health and safety of pupils, contractors, visitors and others who may be affected by Trust activities.

The Trust will provide and maintain safe and healthy environments, suitable arrangements for identifying and controlling risk, competent advice, appropriate information, instruction, training and supervision, adequate resources, effective consultation and reliable arrangements for monitoring and review.

This statement is supported by the organisational responsibilities and arrangements set out in this policy and its supporting procedures, standards and local arrangements.

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1 Introduction & Definitions

1.1 The Bishop Fraser Trust, referred to as “the Trust”, relies on safe premises, effective risk management, competent staff, suitable well-maintained equipment and well-managed activities in order to educate pupils, safeguard children, employ and support staff, manage resources, fulfil statutory duties and operate effectively across its schools and central services.

1.2 Health, safety and welfare are essential to maintaining safe and effective school operations. Weak or poorly governed arrangements can lead to injury, ill health, safeguarding concerns, service disruption, damage to premises or equipment, enforcement action, financial cost and loss of confidence.

1.3 The Trust is therefore committed to maintaining practical, proportionate and risk-based arrangements to protect pupils, staff, contractors, visitors and others who may be affected by its activities, premises or services.

1.4 This policy sets out the Trust’s framework for managing health, safety and welfare across its schools and central services. Strong health and safety arrangements support education delivery, safeguarding, workforce wellbeing, public confidence and effective Trust governance.

1.5 The Trust operates a model of central standards with local implementation. Trust-wide expectations, minimum controls, oversight and specialist support are coordinated centrally, while schools remain responsible for effective day-to-day local implementation within that framework.

1.6 This policy forms part of the Trust’s wider governance framework and should be read alongside related policies governing premises, contractor management, medical conditions, security, emergency planning, business continuity, safeguarding, HR, records retention, data protection and incident management.

1.7 This policy will be reviewed in line with the Trust’s internal policy schedule and may also be updated earlier where required by legislative change, regulatory guidance, organisational change, audit findings, significant incidents or identified operational need

1.8 In this policy:

1.8.1 “Health, safety and welfare” means the arrangements used to identify, assess and control risks to the health, safety and welfare of employees and to protect pupils, visitors, contractors and others who may be affected by Trust activities, premises or services.

1.8.2 “Risk assessment” means an assessment of foreseeable hazards, the people who may be harmed, the controls required and the actions needed to reduce risk.

1.8.3 “Competent person” means a person with sufficient training, knowledge, experience and other relevant qualities to provide appropriate advice, undertake a task safely or support the Trust in meeting a health and safety requirement.

1.8.4 “Health and safety incident” means an event, concern, weakness, accident, near miss, dangerous occurrence or suspected failure relating to the health, safety or welfare of any person affected by the Trust’s activities.

1.8.5 “Near miss” means an event that could reasonably have resulted in injury, ill health, damage or other harm but did not do so on that occasion.

1.8.6 "Approved system of record" means the system, controlled repository or record location designated by the Trust for a defined type of health, safety or welfare information.

1.8.7 "CISCO" means the Trust's Chief Information, Security and Compliance Officer.

1.8.8 "Director of Estates and Facilities" means the Trust's central professional lead for health and safety, estates, premises compliance and related operational assurance

1.8.9 "Dutyholder" means a person or organisation with specific legal or contractual responsibility for managing a defined risk, premises, activity, project or safety requirement.

Purpose, Scope and Application

Purpose

1.9 This policy sets out how the Trust manages health, safety and welfare across its schools and central services.

1.10 Strong health, safety and welfare arrangements help the Trust protect pupils, staff and others affected by its activities, maintain safe and effective education delivery, reduce avoidable harm, support workforce wellbeing, protect premises and resources, and maintain confidence in the Trust. Strong health, safety and welfare arrangements also support the Trust in meeting statutory requirements relating to health and safety.

1.11 This policy provides the Trust's core framework for achieving those outcomes in a lawful, practical and proportionate manner.

1.12 It establishes common expectations across all schools while recognising that day-to-day implementation takes place within schools and central services.

Scope

1.13 This policy applies to all staff, Governors, Trustees, Members, volunteers, contractors, agency workers and others undertaking activity on behalf of, or within, the Trust.

1.14 It applies to health, safety and welfare risks arising from Trust premises, work activities, educational activities, equipment, substances, services and operations.

1.15 It applies whether activity takes place:

1.15.1 within schools

1.15.2 within central Trust teams

1.15.3 when working remotely or off site for Trust purposes

1.15.4 during educational visits, work experience, extracurricular activity or other off-site provision

1.15.5 through lettings, shared use arrangements or community use of Trust premises

1.15.6 through contractors, suppliers or other third parties acting on behalf of the Trust

1.16 The policy applies whether risks affect a single school, multiple schools, central services or Trust-wide operations.

1.17 The Trust is the employer for its schools and retains overall accountability for health and safety arrangements. Specific legal duties relating to premises, fire safety, construction, leased accommodation, shared sites or specialist activities may sit with different

dutyholders depending on the circumstances. Relevant responsibilities must be understood, agreed and documented through the applicable Trust procedures and local arrangements.

Trust Operating Model

1.18 The Trust operates a model of central standards with local implementation.

1.19 This means Trust-wide policy, minimum health, safety and welfare expectations, specialist oversight, assurance requirements and strategic control are coordinated centrally, while schools remain responsible for effective local delivery, cooperation and sensible day-to-day safety practice.

1.20 Schools may maintain additional local arrangements where helpful to their context, provided these remain consistent with this policy and do not create avoidable legal, operational or reputational risk.

1.21 Where historic local custom, informal practice or legacy arrangements conflict with this policy, this policy will take precedence unless an alternative arrangement has been formally approved by the Trust.

1.22 The Trust recognises that schools may have differing premises, facilities, local risks, staffing structures and inherited arrangements. Local variation may therefore be necessary in how controls are implemented. However, variation must not weaken the Trust's minimum standards, prevent effective assurance or result in unmanaged risk.

Supporting Documents and Procedures

1.23 This policy forms part of the Trust's wider health, safety and welfare framework and should not be read in isolation.

1.24 It should be read alongside relevant policies, procedures, standards and local arrangements relating to premises, contractors, fire safety, asbestos, water hygiene, medical conditions, first aid, educational visits, security, emergency planning, business continuity, safeguarding, HR, records retention, data protection and incident management.

1.25 Where a supporting document sets out more specific operational requirements, those requirements must be followed in addition to this policy.

1.26 Where an apparent inconsistency arises, the more specific approved document will ordinarily apply to the subject matter concerned, provided that it does not reduce a legal requirement or an expressly stated Trust standard in this policy. Uncertainty must be escalated to the Director of Estates and Facilities before relying on an alternative approach.

Individual Responsibility

1.27 Everyone working for, on behalf of, or within the Trust has a role in supporting safe and healthy environments.

1.28 Staff must follow relevant policies, procedures, risk assessments, training and local arrangements; use equipment and substances safely; report hazards, incidents and concerns promptly; and seek advice where uncertain.

1.29 Managers and leaders must ensure that appropriate controls, supervision, training, information and local arrangements are in place within their areas of responsibility.

1.30 No person should continue an activity, use equipment, enter an area or permit work to proceed where they reasonably believe there is a serious and unmanaged risk to health

or safety. Concerns must be raised promptly through local and Trust escalation routes. See Sections 7 and 11 for further information on escalation routes and contacts.

Proportionality and Practical Application

1.31 This policy will be applied in a practical, proportionate and risk-based manner.

1.32 Greater care, stronger controls and earlier escalation will normally be required where matters involve:

1.32.1 risk of serious injury, ill health or fatality

1.32.2 pupils, vulnerable individuals or persons with additional needs

1.32.3 fire, asbestos, legionella, gas, electricity, structural safety or dangerous substances

1.32.4 construction, contractors, work at height, lifting operations or specialist equipment

1.32.5 significant premises failure or inability to evidence statutory compliance

1.32.6 major events, educational visits, off-site activity or shared-site arrangements

1.32.7 serious incident, enforcement risk, insurance exposure or significant reputational sensitivity

1.32.8 health information, medical plans, accident records or other sensitive personal data

1.33 Where risks cannot be removed immediately, the Trust may require temporary controls, restriction of use, competent advice, additional monitoring, action planning or central escalation. Temporary arrangements must be proportionate, documented, time limited and owned by an identified person.

1.34 Cost, convenience, staffing pressure or historic practice must not be relied upon to justify uncontrolled safety risk.

2 Health, Safety and Welfare Framework

2.1 The Trust will maintain arrangements to ensure that health, safety and welfare are managed in a consistent, practical and proportionate manner across all schools and central services.

2.2 Health, safety and welfare management includes the identification and control of risk, maintenance of safe premises and equipment, competent advice, suitable local arrangements, effective communication, reliable records, incident learning and governance assurance.

2.3 These arrangements support the Trust's central standards with local implementation model. They are intended to protect pupils, staff, contractors, visitors and others affected by Trust activities, while supporting effective education delivery, safeguarding, workforce wellbeing and responsible stewardship of Trust resources.

Core Components

2.4 The Trust's arrangements will include:

2.4.1 clear leadership accountability, delegation and dutyholder arrangements

2.4.2 suitable risk assessment, safe systems of work and proportionate control measures

2.4.3 effective management of premises, equipment, maintenance, statutory compliance and specialist risks

2.4.4 competent advice, role-specific competence and appropriate supervision

2.4.5 contractor, supplier, construction and shared-site management arrangements

2.4.6 first aid, medical conditions, welfare and inclusion arrangements

2.4.7 emergency planning, security, business continuity and crisis response arrangements

2.4.8 reporting, investigation and learning from accidents, incidents, near misses and dangerous occurrences

2.4.9 suitable systems for recording actions, inspections, training, evidence and assurance

2.4.10 appropriate handling, sharing, retention and disposal of health, safety and welfare records

2.4.11 staff training, communication, consultation and reporting culture

2.4.12 monitoring, audit, escalation, review and continuous improvement

2.5 The Trust will maintain adequate and appropriate first-aid arrangements, based on assessment of need, for employees and will take account of pupils, visitors and others who may be affected by Trust activities.

2.6 The Trust will maintain a hierarchy of supporting documents to ensure that governance requirements, detailed controls and local evidence remain clear and manageable.

2.7 This policy provides the framework for accountability, standards, escalation and assurance. Supporting policies, procedures and standards will set out detailed requirements for specific subject areas. Local arrangements will include school plans, risk assessments, registers, checklists, permits, inspection records and other evidence needed to demonstrate effective implementation.

2.8 The Director of Estates and Facilities will maintain a controlled Health, Safety and Welfare Requirements and Assurance Register.

2.9 The Register will identify material legal, regulatory and Trust requirements, the supporting procedure or standard, operational owner, evidence required, approved system of record, assurance frequency, escalation route and review date.

2.10 The Register will ensure that detailed controls remain allocated and evidenced without reproducing every operational requirement in this policy.

2.11 The Register may be updated in response to legislative or regulatory change, school growth, estate change, system change, audit findings, incidents, new activities or identified operational need. Changes must not reduce a legal requirement or an expressly stated Trust standard without formal approval.

Accountability and Local Delivery

2.12 Headteachers, central service leaders and managers are responsible for ensuring that Trust requirements are implemented effectively within their areas of responsibility.

2.13 Schools must maintain suitable local arrangements that reflect their premises, activities, staffing, pupils, facilities and foreseeable risks. Local arrangements must be sufficiently clear for staff to understand what is expected, sufficiently practical to be followed in day-to-day operations and sufficiently evidenced to support Trust assurance.

2.14 The Director of Estates and Facilities will maintain professional oversight of the Trust's health, safety and welfare framework, premises compliance arrangements, specialist risks and improvement priorities.

2.15 The CISCO will support executive oversight, governance assurance, information governance alignment, system oversight and escalation of material or cross-functional risks.

2.16 Where a school identifies a risk, control failure or compliance gap that cannot be resolved safely at local level, it must be escalated promptly through Trust arrangements. Local ownership of an issue does not remove the need for central support, challenge or intervention where risk is material.

Review and Culture

2.17 The Trust will review and strengthen its health, safety and welfare arrangements in response to legislative or regulatory change, incidents, audit findings, organisational growth, estate change, workforce feedback, identified operational need or emerging risk.

2.18 The Trust expects a positive reporting culture in which staff raise hazards, concerns, near misses and weaknesses promptly and in good faith. Reporting should support timely action, learning and improvement rather than blame for genuine mistakes.

2.19 Where recurring weaknesses, avoidable risk, poor evidence, delayed escalation or inconsistent local practice are identified, the Trust may require proportionate corrective action at school, service or Trust-wide level.

2.20 Leaders at all levels should promote a culture in which health, safety and welfare are understood as integral to effective education, safeguarding, workforce support and sound Trust governance.

3 Roles and Responsibilities

3.1 Clear roles and accountability are essential to effective health, safety and welfare management. Weak ownership, uncertainty of responsibility, avoidable delay or inconsistent decision-making can increase risk, prevent timely action and make effective assurance difficult.

3.2 Responsibilities are therefore set out below so that strategic oversight, professional leadership, operational management, specialist advice and local implementation remain clear, distinct and effective.

Trust Board

3.3 The Trust Board holds overall accountability for ensuring that appropriate health, safety and welfare arrangements are in place across the Trust.

3.4 This includes satisfying itself that the Trust maintains an effective policy framework, suitable leadership accountability, proportionate resources and appropriate assurance arrangements.

3.5 The Trust Board may receive assurance regarding material risks, serious incidents, recurring weaknesses, significant compliance concerns, improvement activity, investment requirements or matters of material reputational significance where appropriate.

3.6 The Trust Board does not ordinarily direct day-to-day health and safety management, which remains a management responsibility unless strategic escalation is required.

Committees of the Board

3.7 Where detailed oversight is delegated, the relevant committee may provide scrutiny of health, safety and welfare risk, assurance, control effectiveness and improvement activity within its remit. Committees of the Trust Board include the Finance and Resources Committee, the Education and Standards Committee, the People Committee, and the individual Local Governing Bodies of each school.

3.8 Committees will receive reports regarding material incidents, unresolved risks, statutory compliance concerns, significant audit findings, recurring weaknesses, investment needs or wider governance concerns, escalating matters to the Trust Board where appropriate.

Chief Executive Officer

3.9 The Chief Executive Officer is responsible for executive leadership of the Trust and for ensuring that significant health, safety and welfare risks are addressed appropriately.

3.10 This includes ensuring that leaders across the Trust understand their responsibilities and that material risks, serious incidents, unresolved control failures or significant operational concerns receive appropriate executive attention.

3.11 The Chief Executive Officer may be briefed on matters requiring executive visibility, cross-Trust coordination, strategic decision-making, external communication or reputational management.

Chief Information, Security and Compliance Officer

3.12 The CISCO is responsible for executive oversight, governance coordination and assurance support for the Trust's health, safety and welfare framework.

3.13 The CISCO will support cross-functional coordination where health, safety and welfare matters overlap with safeguarding, HR, estates, legal, insurance, cyber security or wider operational risk.

3.14 The CISCO does not replace the need for competent health and safety, estates, fire, asbestos, water hygiene, occupational health, legal or other specialist advice where this is required.

Director of Estates and Facilities

3.15 The Director of Estates and Facilities is the Trust's central professional lead for health and safety, estates, premises compliance and related operational assurance.

3.16 This includes maintaining the Trust's health, safety and welfare framework, providing professional leadership on premises and specialist risk, coordinating Trust-wide oversight of statutory compliance and planned maintenance, and supporting schools to implement Trust requirements effectively.

3.17 The Director of Estates and Facilities will identify material premises, contractor, maintenance or compliance risks requiring central intervention, specialist advice or escalation, and will provide assurance and management information to the CISCO, CEO, relevant committees and the Trust Board as appropriate.

3.18 The Director of Estates and Facilities may nominate appropriate officers or competent specialists to support operational delivery but retains responsibility for professional leadership and coordination of the Trust-wide framework.

Headteachers and Central Service Leaders

3.19 Headteachers and leaders of central services are responsible for ensuring that this policy and related Trust requirements are implemented effectively within their areas of responsibility.

3.20 This includes maintaining suitable local arrangements, ensuring that staff understand the procedures and emergency arrangements relevant to their role, addressing poor practice or unsafe conditions promptly, and escalating risks or concerns that cannot be resolved safely at local level.

3.21 Headteachers and central service leaders may delegate specific tasks to appropriate staff. Delegation does not remove responsibility for ensuring that suitable arrangements remain in place and operate effectively.

Local Governing Bodies

3.22 Local Governing Bodies provide local challenge and assurance in accordance with the Trust's Scheme of Delegation and agreed governance arrangements.

3.23 This may include considering local health, safety and welfare information, challenging unresolved risks, reviewing themes arising from incidents or audits, and escalating material concerns through Trust governance routes where appropriate.

3.24 Local Governing Bodies do not ordinarily direct day-to-day health and safety management unless a specific role has been formally delegated and supported by clear authority, competence and reporting arrangements.

School Business Leaders, Site Teams and Facilities Leads

3.25 School business leaders, site teams and facilities leads are responsible for delivering the health, safety and premises responsibilities delegated to them within their school or service area.

3.26 They are expected to maintain appropriate local records, support compliance activity, identify defects and unsafe conditions, coordinate contractors and planned maintenance activity, implement immediate controls where needed and escalate matters that cannot be resolved safely within their authority or competence. See Sections 7 and 11 for further information on escalation.

3.27 These roles must operate within approved Trust procedures and seek specialist advice where a matter exceeds their competence or authority.

Managers, Curriculum Leaders and Activity Leads

3.28 Managers, curriculum leaders and activity leads are responsible for ensuring that work, teaching, activities and areas under their control are managed safely.

3.29 They must ensure that relevant risk assessments, safe systems of work, information, supervision and training are in place, understood and followed. They must also report hazards, incidents, concerns and unmet training needs promptly.

Appointed Persons and Specialist Roles

3.30 The Trust and its schools may appoint individuals to undertake specific health, safety and welfare roles, including first aiders, fire wardens, educational visits coordinators, radiation protection supervisors, evacuation assistants and other designated roles.

3.31 Appointed persons must receive appropriate training, information, support and time to carry out their duties effectively. Appointment to a specialist role does not remove the

responsibility of leaders and managers to ensure that suitable arrangements, resources, supervision and escalation routes remain in place.

All Staff

3.32 Employees must take reasonable care of their own health and safety and that of others who may be affected by their acts or omissions.

3.33 All staff, contractors, volunteers and others working for or on behalf of the Trust must follow applicable Trust controls, cooperate with reasonable health and safety arrangements and report hazards or concerns promptly.

3.34 Staff must follow relevant Trust policies, procedures, risk assessments, training and local arrangements. They must use equipment, substances and protective measures safely, report hazards, defects, unsafe conditions, incidents and near misses promptly, and seek advice where uncertain.

Contractors, Suppliers and Third Parties

3.35 Contractors, suppliers and other third parties undertaking work for, or within, the Trust must comply with relevant legal duties, contractual requirements, site rules, risk controls and Trust procedures.

3.36 Trust leaders commissioning work or services must ensure that appropriate approval, competence, coordination, communication and monitoring arrangements are in place.

3.37 Contractors must not begin work where required information, approvals, controls, access arrangements or permits are absent or where conditions are unsafe.

Shared Responsibility

3.38 Effective health, safety and welfare management depends on leadership, informed judgement, suitable controls, reliable records and prompt cooperation.

3.39 No single role, school or central team can manage health, safety and welfare in isolation. Safe and effective practice requires coordinated action by trustees, leaders, staff, site teams, specialist advisers, contractors, pupils and others working within the Trust community.

3.40 Everyone with a role in Trust operations is expected to play their part by following agreed arrangements, reporting concerns promptly, supporting improvement and acting in a way that protects the health, safety and welfare of others.

4 Health, Safety and Welfare Principles and Risk Management

4.1 The Trust's approach to health, safety and welfare is based on practical, proportionate and risk-based decision-making.

4.2 The Trust's aim is to provide safe, healthy and supportive environments for pupils, staff and others affected by its activities. This requires sensible planning, competent leadership, effective local controls, reliable evidence and prompt action where concerns arise.

4.3 The objective is not to eliminate all risk or create unnecessary bureaucracy. Rather, it is to identify foreseeable hazards, assess the risks arising from them and eliminate or reduce those risks so far as is reasonably practicable.

4.4 Health, safety and welfare arrangements should support effective education delivery. They must not be treated as a separate administrative exercise, nor should they be applied in a way that creates unnecessary barriers to reasonable, inclusive and well-managed activity.

Risk Appetite and Preventative Approach

4.5 The Trust has an adverse risk appetite for health, safety and welfare.

4.6 The Trust will avoid risk where this is reasonably practicable. Where risk cannot be eliminated, it must be reduced to the lowest level reasonably practicable through suitable controls, competent management, appropriate supervision and effective monitoring.

4.7 Cost, convenience, staffing pressure, historic custom or operational difficulty must not be relied upon to justify uncontrolled risk or the continued use of unsafe premises, equipment, activities or arrangements.

4.8 The Trust will seek to prevent harm before it occurs. This includes considering health, safety and welfare at an early stage when planning activities, changes to premises, procurement, staffing arrangements, curriculum delivery, events, visits, contractor work, new equipment, systems or services.

Risk Assessment and Control

4.9 Risk assessments must be suitable and sufficient for the activity, premises, people and circumstances concerned. They must take account of foreseeable harm, existing controls, additional measures required, the people responsible for action and the need for review when circumstances change.

4.10 Risk assessments should focus on significant risks with the potential to cause real harm. They should be clear, practical and proportionate to the activity concerned.

4.11 Generic risk assessments, guidance and standard operating procedures may support consistent practice. However, local assessment and adaptation will be required where the activity, people, premises, equipment or circumstances create additional or different risk.

4.12 Where control measures are required, the Trust will normally seek to eliminate hazards first. Where this is not reasonably practicable, risks should be reduced through safer methods, suitable equipment, physical controls, competent supervision, information, training and personal protective equipment where appropriate.

4.13 Personal protective equipment must not be treated as the default control where more effective measures are reasonably practicable.

Competence, Supervision and Specialist Advice

4.14 The Trust will ensure that those with health, safety and welfare responsibilities receive appropriate information, instruction, training, supervision and support.

4.15 The level of competence required will depend on the nature of the role, activity or risk. More specialist or higher-risk work may require appointed competent persons, external specialists, formal qualifications, technical inspection or professional advice.

4.16 Staff and managers must not undertake work, make decisions or provide assurances beyond their competence or authority. Where uncertainty exists, or where a matter involves specialist risk, advice must be sought promptly through approved Trust arrangements.

4.17 Where risk assessment or specific legal requirements identify the need for health surveillance, the Trust will provide appropriate occupational health or specialist health-surveillance arrangements. Relevant findings must inform review of risk controls and be handled confidentially through approved arrangements.

Individual Needs, Inclusion and Welfare

4.18 Health, safety and welfare arrangements must take account of physical and work-related mental health risks, including work-related stress, together with the needs of individuals who may be affected by Trust activities.

4.19 Where the Trust is notified that an employee is a new or expectant mother, or where it employs or provides a placement for a young person, apprentice or work-experience participant, it must assess any additional or specific risk and take appropriate action to remove, reduce or control that risk.

4.20 The Trust will also ensure that risk assessments and local arrangements take appropriate account of pupils who are pregnant or have recently given birth, pupils with medical conditions, special educational needs or disabilities, staff with disabilities or health conditions, visitors, contractors, young persons, lone workers and others who may require additional support, information, supervision or adjustments. Any arrangements relating to a pregnant pupil or pupil who has recently given birth must be managed sensitively and in conjunction with appropriate safeguarding, medical, pastoral and educational arrangements.

Temporary Controls and Restriction of Use

4.21 Where a risk cannot be controlled immediately, the Trust may introduce temporary controls while a longer-term solution is developed and implemented.

4.22 Temporary controls must be proportionate to the risk, documented, time limited, assigned to an identified owner and monitored until the matter is resolved.

4.23 Where a critical safety control, required inspection, competence requirement, maintenance activity or safety record cannot be evidenced, the Trust will normally consider restriction of use, additional controls, competent advice, central escalation or suspension of the activity until safe operation can be demonstrated.

4.24 The Trust will not treat the existence of a risk assessment, policy statement or action plan as sufficient evidence that a control is operating effectively.

Managing Change, Procurement and New Activities

4.25 Health, safety and welfare risks must be considered when the Trust introduces or materially changes premises, equipment, work activities, curriculum activities, suppliers, contractors, staffing arrangements, systems or services.

4.26 Where the Trust acquires, opens, merges with or assumes responsibility for a school, building, service or significant new activity, it must complete proportionate health and safety due diligence.

4.27 This must identify relevant dutyholders, critical controls, available compliance evidence, immediate risks, material gaps and a time-bound improvement plan. Where critical controls cannot be demonstrated, the Trust must consider restriction of use, temporary controls, competent advice or central escalation until safe operation is evidenced.

4.28 Where the Trust commissions construction work, engages contractors or external providers, lets or shares premises, or operates alongside another employer, landlord, tenant or dutyholder, the relevant responsibilities, information-sharing, co-ordination,

emergency arrangements and control measures must be agreed and recorded before activity begins.

4.29 Leaders, managers and those commissioning work must consider whether new or changed activity requires risk assessment, specialist advice, training, consultation, revised local arrangements, contractor controls, additional maintenance arrangements or changes to emergency planning.

4.30 Where a proposal creates material health, safety, welfare, operational or reputational risk, it must be reviewed through appropriate Trust routes before implementation.

4.31 Curriculum, co-curricular and off-site activities must be planned to enable pupils to participate safely. Where risk is foreseeable, arrangements must address appropriate competence, supervision, equipment, provider assurance, emergency planning and reasonable adjustments.

4.32 Detailed requirements for educational visits, work experience, practical curriculum activity, sport, swimming and other specialist activity will be set out in supporting procedures and local arrangements.

Information Governance and Record Keeping

4.33 Health, safety and welfare arrangements depend on accurate, secure and accessible records.

4.34 The Trust will maintain proportionate arrangements for the creation, use, sharing, storage, retention and disposal of health, safety and welfare information. This may include risk assessments, inspection records, accident reports, first-aid records, medical information, training records, contractor information, maintenance evidence, action plans and emergency records.

4.35 Information must be recorded in an approved system of record. The relevant supporting procedure or Health, Safety and Welfare Requirements and Assurance Register will identify the approved record for each control.

4.36 Health, safety and welfare records may contain personal data, including special category health information. Such records must be handled in line with the Trust's data protection, information security and records retention requirements.

Risk Review and Continuous Improvement

4.37 Risk controls must be reviewed where there is reason to believe that they are no longer effective or where circumstances have changed.

4.38 Reviews may be required following incidents, near misses, audit findings, staff feedback, changes to activities or premises, changes to equipment or substances, changes in the needs of pupils or staff, changes to legislation or guidance, or identification of poor evidence or recurring weakness.

4.39 The Trust will use findings from risk assessments, inspections, incidents, audits, training, maintenance activity and assurance reporting to strengthen arrangements over time.

4.40 Where recurring weaknesses, avoidable risk, poor evidence, delayed action or ineffective local controls are identified, the Trust may require proportionate corrective action at school, service or Trust-wide level.

5 Local Delivery, Operational Control and Evidence

5.1 The Trust's health, safety and welfare framework depends on effective local delivery. Policies, risk assessments and procedures provide the framework, but they do not by themselves demonstrate that controls are understood, implemented or working in practice.

5.2 Schools and central service teams must therefore maintain suitable local arrangements that reflect their premises, activities, staffing, pupils, equipment, facilities and foreseeable risks.

5.3 Local arrangements should be practical, current and accessible to those who need to use them. They should support safe day-to-day operation rather than exist solely for compliance or audit purposes.

Local Arrangements

5.4 Each school must maintain arrangements that enable staff, contractors and visitors, and pupils where age and activity appropriate, to understand the controls that apply to them.

5.5 This will normally include local responsibility arrangements, emergency information, risk assessments, relevant registers, inspection records, action plans, contact arrangements and other documents required by Trust procedures or the particular risks within the setting.

5.6 Local arrangements must be reviewed where there is material change to premises, staffing, activities, equipment, pupils' needs, contractors, legal requirements or risk profile.

5.7 Schools may adopt local formats and supporting materials where these improve clarity and usability. However, local arrangements must remain consistent with Trust policy, approved procedures and minimum control standards.

Operational Control

5.8 Health, safety and welfare controls must be embedded within normal school and Trust operations.

5.9 This includes the day-to-day management of premises, equipment, activities, maintenance, contractors, educational visits, medical needs, emergency arrangements, staff welfare, security and other foreseeable risks.

5.10 Those responsible for local delivery must ensure that actions are completed within appropriate timescales, controls remain suitable for the circumstances and unresolved concerns are escalated promptly. See Sections 7 and 11 for further information on escalation.

5.11 Where work, activity or premises use relies on specific competence, inspection, maintenance, approval, supervision or specialist advice, this must be in place before the activity proceeds.

5.12 The Trust recognises that schools may need to respond quickly to operational issues. Immediate action should be taken where necessary to protect people from harm. This may include stopping work, restricting access, withdrawing equipment from use, isolating an area, changing arrangements or seeking urgent competent advice.

Local Variations and Temporary Arrangements

5.13 Local arrangements may vary where premises, activities or operational circumstances differ between schools. Such variation must be based on risk, remain consistent with Trust requirements and be capable of effective assurance.

5.14 Where a school needs to operate a temporary arrangement because a permanent control is unavailable or incomplete, the arrangement must be documented, time limited, assigned to an identified owner and monitored.

5.15 Temporary arrangements must not become an indefinite substitute for required maintenance, statutory compliance, suitable staffing, competent advice or other critical controls.

5.16 Where a local arrangement creates material risk, conflicts with Trust requirements or cannot be evidenced as safe, the matter must be escalated promptly. See Sections 7 and 11 for further information on escalation including escalation routes and contacts.

Records and Systems of Record

5.17 Health, safety and welfare records are an important part of safe operation, accountability and assurance. Records should enable the Trust and its schools to demonstrate what was identified, what action was taken, who was responsible, when the action was completed and whether the control remains effective.

5.18 Records must be accurate, proportionate, securely maintained and accessible to authorised persons when needed.

5.19 The Trust will maintain approved systems of record for health, safety and welfare information. The Director of Estates and Facilities, with CISCO support, will maintain a controlled evidence and systems schedule identifying the approved system of record for each material control.

5.20 The Trust may use different approved systems for different record types, including pupil medical information, workforce health records, statutory compliance evidence, contractor records, safeguarding information, controlled documents and Trust-wide assurance activity.

5.21 Where the Trust replaces, consolidates or materially changes a system used to manage health, safety and welfare information, it must maintain appropriate access, integrity, security, retention, audit trail, record continuity and assurance throughout the transition. The migration plan must identify the accountable owner, critical records, validation approach, contingency arrangements, staff communication and final acceptance criteria.

Evidence and Assurance

5.22 The Trust will maintain proportionate evidence requirements for significant health, safety and welfare controls.

5.23 Evidence may include risk assessments, inspection reports, certificates, maintenance records, contractor documentation, training records, action plans, incident records, emergency exercise records, audit findings, photographs, permits, registers, meeting records or other information appropriate to the control concerned.

5.24 The absence of a record does not automatically establish that a control has failed. However, where a critical control cannot be evidenced, the Trust cannot provide assurance that it is operating effectively. This must be assessed promptly and may

require further investigation, temporary controls, restriction of use, competent advice or escalation.

5.25 Schools and central service teams must cooperate with reasonable requests for evidence, inspection, audit, data validation or assurance activity.

5.26 The Trust may issue an evidence schedule, compliance calendar, reporting requirement or local assurance return to support consistent implementation and oversight.

Action Management and Escalation

5.27 Actions arising from risk assessments, inspections, audits, incidents, maintenance activity, contractor work, staff feedback or other assurance activity must be assigned, monitored and closed only when there is suitable evidence that the required action has been completed.

5.28 Actions must not be closed solely because a deadline has passed, an issue has become less visible or responsibility has moved between staff.

5.29 Overdue actions must be reviewed according to risk. Critical or high-risk actions require prompt escalation where they cannot be completed within the required timescale or where the delay creates unmanaged risk. See Sections 7 and 11 for further information on escalation.

5.30 The Trust may require additional support, monitoring, review or intervention where local arrangements are repeatedly incomplete, evidence is unreliable, actions remain overdue or significant risks are not being managed effectively.

Document Control and Accessibility

5.31 Health, safety and welfare documents must be controlled so that staff can identify the current approved version, understand whether a document applies to them and access relevant information without unnecessary delay.

5.32 Superseded documents, duplicate local copies and informal amendments must not create confusion about the controls that apply.

5.33 Detailed document-control requirements, retention periods and access arrangements will be set out through the Trust's records retention, information governance and supporting health and safety procedures.

6 Incident Reporting, Emergency Response and Escalation

6.1 The Trust will maintain effective arrangements to ensure that accidents, incidents, near misses, dangerous occurrences and related health, safety and welfare concerns are identified, reported, assessed, managed, recorded and reviewed appropriately.

6.2 These arrangements are intended not only to support legal and regulatory compliance, but also to reduce harm, protect pupils and staff, support effective recovery, strengthen organisational resilience and maintain confidence that concerns are managed responsibly.

6.3 The Trust's approach is based on prompt reporting, immediate protection of people from harm, proportionate assessment, clear ownership, suitable investigation and practical learning. Incidents should be addressed promptly, but not reactively, and decisions should be recorded appropriately.

6.4 Not all incidents carry the same level of seriousness. Some may be minor and resolved quickly through suitable local action. Others may require urgent escalation, specialist

advice, central coordination, emergency response, restriction of activity, external reporting or wider Trust intervention.

6.5 Some incidents may overlap with safeguarding, HR, premises, insurance, information governance, security, business continuity, legal proceedings or criminal matters. Where this occurs, the Trust will seek a joined-up response across relevant functions while maintaining clear ownership and avoiding duplication or delay.

6.6 Nothing in this policy prevents immediate action where necessary to protect a pupil, employee, visitor or other person from harm.

Reporting Concerns

6.7 All staff must report accidents, incidents, near misses, dangerous occurrences, hazards, unsafe conditions and suspected control failures promptly through approved Trust arrangements.

6.8 Staff are not expected to make final technical, legal or regulatory judgements before reporting a concern. Where there is reasonable doubt, the matter should be reported so that an informed assessment can take place.

6.9 The Trust encourages good-faith reporting of genuine mistakes, concerns and near misses. Early reporting will ordinarily place the Trust in a stronger position than delayed escalation after harm has increased, evidence has been lost or further people have been exposed to risk.

6.10 Staff must not assume that another person has reported a matter, delay reporting while attempting to investigate personally or seek to manage a potentially serious matter informally.

6.11 Deliberate concealment, reckless delay, destruction of relevant records or repeated failure to follow reporting expectations may be addressed through appropriate management, disciplinary, contractual or governance processes.

Immediate Action and Initial Assessment

6.12 Where an incident occurs, the immediate priority is to protect life, prevent further harm and secure the area or activity where this can be done safely.

6.13 This may include seeking first aid support, contacting emergency services, stopping work or activity, restricting access, withdrawing equipment from use, isolating a hazardous area, securing relevant information or seeking urgent competent advice.

6.14 Initial assessment should consider the nature of the event, the people affected, the likely severity of harm, any continuing risk, the need for specialist support, the possibility of statutory reporting and whether other Trust arrangements need to be activated.

6.15 The Trust will maintain suitable procedures for serious and imminent danger and danger areas. These will include appropriate evacuation, restriction of use, emergency communication and necessary liaison arrangements with emergency services, first-aid providers and other external responders.

6.16 Staff must use the escalation routes set out in this policy and supporting procedures. Urgent matters must be escalated without delay. See also Section 11.

Investigation and Corrective Action

6.17 The Trust will investigate incidents proportionately to understand what happened, identify immediate and underlying causes, determine whether controls were suitable and identify actions needed to prevent recurrence.

6.18 Investigations should focus on learning, control improvement and accountability rather than blame for genuine mistakes reported responsibly.

6.19 The level of investigation will depend on the seriousness, complexity and potential learning from the event. More significant matters may require central coordination, competent specialist advice, formal evidence gathering, insurer involvement, legal advice or engagement with external authorities.

6.20 Corrective actions must be assigned to an identified owner, proportionate to the risk, monitored to completion and supported by evidence that the required action has been taken.

6.21 Where an incident identifies a wider weakness in policy, training, supervision, maintenance, contractor control, premises management or local practice, the Trust may require wider review or improvement activity.

RIDDOR, Insurance and External Reporting

6.22 The Trust will assess relevant incidents against the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations and other applicable reporting requirements.

6.23 Where an incident is reportable, the required report must be made by an authorised responsible person within the applicable statutory timescale.

6.24 Not every serious incident is reportable under RIDDOR. Equally, the absence of a RIDDOR report does not remove the need for appropriate internal investigation, corrective action, insurance notification or Trust assurance.

6.25 Potential insurance, regulatory, enforcement, police, local-authority or other external reporting requirements must be considered promptly where relevant.

6.26 No member of staff should make formal commitments, admit liability, provide unauthorised external statements or submit formal notifications on behalf of the Trust unless authorised through the relevant Trust arrangements.

Joined-up Incident Management

6.27 A health, safety or welfare incident may require more than one response route.

6.28 An incident involving a pupil may also require safeguarding action, medical support, communication with parents or carers, review of individual healthcare arrangements or educational adjustments.

6.29 An incident involving a member of staff may also require HR support, occupational-health advice, workplace adjustments, absence-management arrangements or wellbeing support.

6.30 An incident involving accident records, medical information, CCTV, visitor information, contractor documentation or other personal data may also require assessment under the Trust's Personal Data Breach and Incident Management Policy.

6.31 Where an incident has implications for more than one function, relevant leaders must cooperate promptly and share information lawfully, proportionately and on a need-to-know basis.

6.32 Safeguarding action must never be delayed because health and safety reporting, data protection assessment or other administrative processes are still being considered.

Emergency Response, Business Continuity and Crisis Management

6.33 The Trust will maintain suitable arrangements for emergency response, business continuity and crisis management.

6.34 Schools must maintain workable local emergency arrangements that reflect their premises, pupils, staffing, communication methods and foreseeable risks. These arrangements must align with Trust requirements and be capable of supporting a coordinated response where disruption affects more than one school or central service.

6.35 Where an incident materially affects safe operation, access to premises, communications, staffing, critical systems, safeguarding arrangements or public confidence, relevant business continuity and crisis-management arrangements may be activated.

6.36 Health and safety response, emergency planning and business continuity arrangements must operate together. Decisions about whether to restrict activity, close part of a site, relocate provision, change working arrangements or communicate externally must be made through appropriate Trust routes and with due regard to safety, safeguarding, welfare and operational continuity.

Records, Decision Logs and Learning

6.37 The Trust will maintain appropriate records of accidents, incidents, near misses, dangerous occurrences, investigations, actions and material decisions.

6.38 Records must be factual, proportionate, securely maintained and sufficient to show what occurred, the immediate action taken, the assessment made, the people responsible, the actions required and the basis for closure.

6.39 Incident actions and assurance information must be recorded in the relevant approved system of record.

6.40 The level of record keeping should reflect the seriousness and complexity of the matter. More significant incidents will ordinarily require fuller documentation, decision logs, evidence retention and review than minor matters resolved quickly with little or no realistic risk.

6.41 The Trust will review incident themes, near misses, recurring weaknesses and control failures to identify improvement opportunities, training needs, assurance priorities and wider risks.

6.42 The purpose of incident management is not merely to record events. It is to protect people, reduce harm, strengthen controls, improve resilience and support continuous improvement across the Trust.

7 Training, Competence, Consultation and Communication

7.1 Effective health, safety and welfare management depends not only on policies, procedures and technical controls, but also on informed staff, clear leadership expectations and sound day-to-day judgement.

7.2 Even well-designed arrangements can be undermined by misunderstanding, poor habits, uncertain responsibilities, insufficient supervision or lack of confidence. Training, communication and consultation are therefore important preventative controls.

Training and Competence

7.3 The Trust will maintain proportionate arrangements for health, safety and welfare induction, refresher activity, role-specific training, practical instruction and specialist development.

7.4 The level of training and competence required will depend on the nature of the role, the risks involved, the level of responsibility held and the extent to which an individual may affect the health, safety or welfare of others.

7.5 All staff must complete mandatory health, safety and welfare training relevant to their role and must follow any additional instruction, guidance or local arrangements that apply to their work.

7.6 Those with management, supervisory, appointed or specialist responsibilities must receive suitable information, instruction, training and support to carry out those responsibilities effectively. This may include first aid, fire safety, educational visits, premises management, contractor control, asbestos awareness, water hygiene, working at height, manual handling, dangerous substances, radiation protection, evacuation support or other specialist areas.

7.7 Where practical competence is required, completion of e-learning or attendance at a course will not ordinarily be treated as sufficient evidence of competence on its own. Managers must ensure that individuals are appropriately supervised, understand the relevant arrangements and can apply them safely in practice.

7.8 Staff must not undertake work, provide assurance or make decisions beyond their competence or authority. Where uncertainty exists, advice must be sought promptly through approved Trust arrangements.

Induction and Local Awareness

7.9 Health, safety and welfare information must form part of induction for new staff, temporary staff, volunteers, contractors and others working within the Trust where relevant.

7.10 Induction should ensure that individuals understand the local emergency arrangements, reporting routes, relevant risks, key contacts, site rules and any role-specific controls that apply to them.

7.11 Headteachers, central service leaders and managers must ensure that staff are made aware of local arrangements relevant to their work and are informed when those arrangements change.

Consultation and Communication

7.12 The Trust must consult employees on health and safety matters that may affect them. Where recognised trade union safety representatives or elected employee representatives are in place, consultation must be undertaken through those arrangements as applicable.

7.13 Consultation should support practical improvement by identifying concerns early, testing whether arrangements are workable and ensuring that those affected by a change have an opportunity to raise relevant issues.

7.14 Staff should be encouraged to raise hazards, concerns, near misses, training needs and suggestions for improvement promptly and in good faith.

7.15 The Trust will communicate relevant health, safety and welfare information in a manner that is clear, proportionate and accessible to those who need it. This may include policies, local arrangements, risk assessments, briefings, signage, training materials, emergency information, staff meetings, induction materials and targeted communications.

7.16 Communication must be sufficient to support safe action. Information should not be treated as communicated merely because it has been uploaded to a system or made available in a location that staff are unlikely to access.

7.17 This policy and relevant supporting arrangements must be made accessible to staff, communicated through induction and highlighted where material changes are made.

Training Records and Monitoring

7.18 The Trust will maintain proportionate records of mandatory training, role-specific training, competence checks and related assurance activity.

7.19 The Trust's approved health and safety assurance system will ordinarily be used to support monitoring of training and associated compliance activity. Other approved systems may remain the formal system of record where they are more appropriate for the information concerned.

7.20 Managers and leaders must review training completion, competence gaps and overdue requirements within their areas of responsibility and take proportionate action where concerns are identified.

7.21 Where training, competence or supervision requirements cannot be evidenced for a safety-critical role or activity, the Trust may require additional controls, supervision, restriction of activity, competent advice or escalation until suitable assurance is available.

Support, Improvement and Corrective Action

7.22 The Trust recognises that capability develops over time and that staff may require additional support where roles change, risks develop, incidents occur, procedures are revised or confidence is limited.

7.23 Where recurring misunderstandings, weak practice, incomplete training, poor supervision or capability gaps are identified, the Trust may require targeted guidance, additional training, practical support, increased monitoring or other proportionate corrective action.

7.24 Persistent failure to complete mandatory requirements, follow agreed controls or implement required improvements may be addressed through appropriate management, HR, contractual or governance routes.

7.25 Leaders should promote a culture in which staff are able to ask questions, raise concerns and seek support without fear of criticism for genuine uncertainty or good-faith reporting.

8 Governance Assurance, Audit, Review and Improvement

8.1 The Trust will maintain appropriate governance oversight of health, safety and welfare matters.

8.2 Assurance activity helps the Trust understand whether controls are operating effectively, whether risks are being managed appropriately, whether schools and central services can demonstrate compliance, and where further action may be required.

8.3 The purpose of assurance is to strengthen safety, improve consistency and support informed decision-making. It must not be treated as a paper exercise or as a substitute for effective local control.

Assurance Sources

8.4 Assurance may be informed by a range of proportionate sources, including incident trends, near misses, risk assessments, inspection findings, statutory compliance activity, maintenance records, contractor performance, training completion, action management, emergency exercises, audit activity, workforce feedback and local assurance returns.

8.5 The Trust's approved health and safety assurance system will ordinarily support Trust-wide monitoring of compliance activity, actions, training, inspections, evidence and assurance information. Other approved systems may provide relevant evidence where they are the appropriate system of record.

8.6 The Trust recognises that no single source of information provides complete assurance. A completed task, policy statement or dashboard status may demonstrate activity or progress, but it does not necessarily show that a control is suitable, understood or operating effectively in practice.

8.7 Where a critical control cannot be evidenced, the Trust must assess the risk promptly and determine whether further investigation, temporary controls, restriction of use, competent advice or escalation is required.

Monitoring and Reporting

8.8 Material health, safety and welfare matters may be reported to senior leaders, relevant committees or the Trust Board through periodic assurance reporting or ad hoc escalation where the level of risk requires.

8.9 Reporting may include significant risks, serious incidents, recurring weaknesses, statutory compliance concerns, overdue critical actions, audit findings, training or competence gaps, contractor performance, investment requirements, improvement programmes and emerging legal or regulatory issues.

8.10 Reporting should be proportionate and should support challenge, action and improvement rather than create unnecessary administrative burden.

8.11 The Trust will provide the Chief Executive Officer, Executive Leadership Team and Trustees with meaningful assurance that risks are understood, controls are developing and material matters are escalated appropriately.

8.12 The Trust Board will receive at least annual assurance on the overall performance and effectiveness of the health, safety and welfare framework, with more frequent reporting where the level of risk requires.

Audit and Thematic Review

8.13 The Trust may undertake proportionate audits, inspections, thematic reviews, self-assessments or independent competent-person reviews to test whether health, safety and welfare arrangements are suitable and effective.

8.14 Audit activity may consider governance, local arrangements, premises compliance, records, training, contractor controls, risk assessments, incident management, emergency preparedness, action closure or other areas of material risk.

8.15 Schools and central service teams must cooperate with reasonable assurance activity and provide accurate information, evidence and access where required.

8.16 Where an audit, inspection or review identifies a weakness, the responsible leader must ensure that proportionate corrective action is agreed, assigned, monitored and evidenced to completion.

Improvement and Escalation

8.17 The Trust will use evidence from incidents, audits, inspections, training, staff feedback, maintenance activity and assurance reporting to identify opportunities for improvement.

8.18 Where serious, repeated or systemic issues are identified, the Trust may require additional controls, targeted training, specialist advice, local review, audit activity, investment, central support or escalation to the relevant senior leader, committee or Trust Board.

8.19 Persistent failure to implement agreed improvements, maintain reliable evidence or address material risk may result in intervention through management, governance, contractual or other appropriate Trust routes.

8.20 Improvement activity should be proportionate, evidence-led and focused on reducing meaningful risk rather than creating additional process for its own sake.

Review of the Framework

8.21 Findings from planned assurance activity and governance oversight will inform review of this policy and the wider health, safety and welfare framework.

8.22 The Trust will review the effectiveness of its wider health, safety and welfare framework through planned assurance activity and governance oversight.

9 Related Policies, Standards and Guidance

9.1 This policy forms part of the Trust's wider governance and operational control framework. It should be read alongside relevant policies, procedures, standards, local arrangements and specialist guidance.

9.2 Health, safety and welfare matters may overlap with safeguarding, medical needs, premises management, security, emergency planning, business continuity, HR, records management, data protection, insurance, procurement and contractor management.

9.3 Where responsibilities overlap, the Trust will seek a joined-up approach while maintaining clear ownership, proportionate decision-making and effective escalation.

9.4 Relevant Trust policies and arrangements may include those relating to:

9.4.1 Safeguarding and child protection

9.4.2 Supporting pupils with medical conditions, medicines and allergy safety

9.4.3 Premises, estates and contractor management

9.4.4 Security, site access and protective preparedness

9.4.5 Emergency planning, business continuity and crisis management

9.4.6 Data protection, information security, records retention and personal data incident management

9.4.7 HR, occupational health, wellbeing and absence management

9.4.8 Procurement, contract management and insurance

9.4.9 Risk Management

9.5 The Trust may maintain supporting procedures, standards and local arrangements covering specific health, safety and welfare matters. These may address risk assessment, premises compliance, incident management, training, emergency arrangements, specialist activities and other areas of material risk.

9.6 Where a supporting document sets out more specific operational requirements, those requirements must be followed in addition to this policy.

9.7 Where an apparent inconsistency arises, the more specific approved document will ordinarily apply to the subject matter concerned, provided that it does not reduce a legal requirement or an expressly stated Trust standard in this policy. Uncertainty must be escalated to the Director of Estates and Facilities before relying on an alternative approach.

9.8 Questions about the relationship between documents or the requirements that apply should be raised through normal Trust escalation routes.

10 Contact and Escalation

10.1 Questions regarding this policy or local health, safety and welfare arrangements should ordinarily be raised through line management, the relevant Headteacher, school business leader, site or facilities lead, or central service leader.

10.2 Premises compliance, contractor, maintenance, fire, asbestos, water hygiene, electrical, gas, structural or other specialist safety concerns should be escalated promptly to the Director of Estates and Facilities or through approved Trust arrangements.

10.3 Material governance, assurance, information governance, system, business continuity or cross-functional concerns should be escalated to the CISCO or the appropriate central Trust lead.

10.4 Safeguarding concerns must be escalated immediately through the Trust's safeguarding procedures. Health and safety, information governance or administrative processes must not delay action needed to protect a child or vulnerable person from harm.

10.5 Where there is immediate danger or a medical emergency, staff must take appropriate emergency action, including contacting emergency services where necessary, before completing reporting or administrative requirements.

10.6 Staff must escalate without delay where there is credible risk of serious harm, critical control failure, inability to evidence safe operation, suspected statutory non-compliance, potential RIDDOR, significant fire, asbestos, water hygiene, gas, electrical, structural, food safety or dangerous-contractor concern, or where an area, activity or site may need to be restricted.

10.7 Staff must not provide unauthorised external statements, admit liability, make formal notifications to regulators or insurers, or make commitments on behalf of the Trust unless authorised through the relevant Trust arrangements.

10.8 Current reporting routes, escalation arrangements, contact details, templates and supporting guidance will be maintained through approved Trust communications, procedures and internal systems.