

GENERAL SCHOOLS RISK ASSESSMENT

PART A. ASSESSMENT DETAILS:			
Area/task/activity: Working at Height			
Location of activity: Whole school site			
School name: Address & Contact details:	St Peter's C of E Primary School Fabians Way Henfield BN5 9PU	Name of Person(s) undertaking Assessment:	Cheryl Marrs
Head Teacher (Name):	Laura Roberts	Signature(s):	
Signature:		Date of Assessment:	2016
		Planned Review Date: (Minimum 12 months)	5 May 2017
How communicated to staff:	Email	Date communicated to staff:	18 Aug 2016

PART B. HAZARD IDENTIFICATION AND CONTROL MEASURES:			
Step 1 Identify significant hazards	Step 2 Identify who might be harmed and how	Step 3 identify precautionary measures already in place	
List of significant hazards (something with the potential to cause harm) (1)	Who might be harmed? (2)	Type of harm (3)	Existing controls (4) (Actions already taken to control the risk)
1. Working at Height	Staff, pupils, visitors, contractors	Fracture, bruises, cuts from objects falling, concussion, vertigo or dizziness resulting in falls	◆ Ladder inspection carried out each month and recorded on the monthly inspection sheet, signed by Caretaker, Reviewed by line manager. Damaged ladders and step ladders (dents, cracks or missing nonslip feet) removed from service ◆ Floor surfaces suitable (firm and even surface) ◆ No ladder work at key times:- lunch, break, start and end of school, when children are on playground/field, if working in that area ◆ No lone working ◆ Ladder training by professionals ◆ No ladder work higher than ground floor gutters, 7ft, in current school building ◆ Do not use chairs/tables or other inappropriate equipment to stand on when reaching. Use step ladders available from Premises Officer or mobile stools as provided. See attached HSE guide to using step ladders

Risk Rating: Working at Height

Please mark appropriate number (1 = very low, 5 = high) and Risk Priority Rating					
Likelihood	1	2	3	4	5
Risk (Likelihood x Severity)					
Risk Rating	High (16-25)		Medium (9 – 15)		Low (1 – 8)

I have read and understood the Risk Assessment and agree to adhere to the measures as detailed in this assessment.

Signed: Name:

PART C: ACTION PLAN

No.	Action required	Person(s) to undertake action?	Priority(1-5)	Projected time scale	Notes / comments	Date completed
1	Ladder training refresher every 3 years	Caretaker	4	3 years	SBM to arrange	
2	Working at height risk assessment for any individual tasks higher than 7ft	SBM to arrange. Caretaker to notify task	1	Adhoc		