Early Years Example Annual Audit/Premises Inspection Report Template

Introduction

The purpose of this Early Years Audit & Premises Inspection Report is to assist you in managing your working environment in a safe and healthy way, helping you to keep records of activities and check on some elements that are not in the general day to day of things. It is your choice to decide if you wish to commission an annual inspection by an external organisation or undertake this audit yourself or as part of a H&S leadership team, using this example audit/inspection document to assist you.

This annual inspection will help pinpoint both your strengths and weaknesses, enabling you to take appropriate action on negatives, congratulate yourselves on the positives and assure the person and/or organisation with final legal responsibility for H&S for your childcare provision of your efforts. In fact, if you undertake this annual audit/inspection in house, the person and/or organisation with final legal responsibility for H&S (business owner, chair of trustees, charity chair etc) should be included in the process.

Note: This is an example of an annual Audit & Premises Inspection Report that can be used for reference for your own annual H&S inspection. Each childcare provision will need to amend this document as necessary to encompass the things you wish to capture as part of this audit.

Audit Inspection of:	Date:
Addit inspection of.	Date

	~ I I I I / /	CNIT	\sim	JTD	
DUL	\mathbf{JUIV}	IENT	CUI	NIK	UL

Audit & I	Inspection of:	Name and	d address of nursery	/	
Audit & I	nspection by:				
Audit & I	nspection date:				
Reference	ce:				
DOCUMI	ENT DETAILS				
Docume	nt Title:	Safety ma	anagement system a	audit & inspection	report
Docume	nt Owner(s):				
Version	Number:				
Document Status:		Live (This is a living document that must be reviewed regularly, at least annually)			
Document Date:					
REVISIO	N HISTORY				
Version	Status	Author	Date	Notes	
NURSER	Y SIGNATURES -	- To be sig	ned off post audit		
	The OSHW (Occupational Safety, Health & Working Conditions) arrangements are to be reviewed annually to ensure that policies and procedures documented remain up to date and relevant.				
Business Owner/Chair of Trustees/Charity Chair signature:					Date:
Managers signature:					Date:

Contents

1.		Disclaimer	5
2.		Introduction	5
3.		Acknowledgements	6
4.		Background	6
5.		Aims and objectives	6
6.		Methodology	6
7.	. !	Scoring	7
8.		Findings of the Audit	8
	8.1	Policies, Procedures, Risk Assessments, Safe Systems of Work and Communication	8
	A.	Occupational Health Safety and Welfare (OHSW) Policy	8
	В.	Risk Assessments	9
	C.	Safe Systems of Work	10
	D.	Working at height	11
	E.	Manual Handling	12
	F.	Control of Substances Hazardous to Health (COSHH)	13
	G.	Chemical Storage	14
	Н.	Dealing with Accidents, Incidents and III-Health and First Aid	14
	I.	Communication, Consultation and Cooperation	17
	J.	Emergency Planning	18
	K.	Lockdown	18
	8.2	2 Buildings and Grounds	19
	A.	Fire Risk Assessment	19
	В.	Fire Logbook	20
	C.	Fire Alarm	22
	D.	Emergency Lighting	22
	E.	Fire Fighting Equipment	23
	F.	Means of Escape	23
	G.	Fire Drills	24
	Н.	Management of Asbestos	25
	I.	Legionella (Water Safety)	26
	J.	Air Conditioning	27
	K.	Ventilation	28
	L.	CCTV	29
	M.	Gas Safety: Systems and Appliances	29
	N.	Electrical Safety: Systems and Appliances	29
	Ο.	Display Energy Certificate	31
	P.	Folding Dining Tables	31

Date:

	Q.	Outdoor Play Equipment and Play Areas	31
	R.	Contractors on Site	32
	S.	Pedestrian and Vehicular Movement	32
	т.	Roller Shutters	33
	U.	Gates and Barriers	33
	V.	Security and Safeguarding	34
	W.	Intruder Alarm	35
	X.	Roofs, gutters, rainwater pipes, gullies, inspection chambers etc	35
	Y.	External Fabric of Building (Brickwork, render, windows, doors, external ground surfaces etc)	36
	Z.	Kitchen	37
	AA.	Pest Control	38
	BB.	LOLER Inspections (Lifting equipment)	39
	CC.	Welfare and Environment	40
	8.3	High Risk Curriculum Areas and Staff Training	41
	8.4	Performance Monitoring and Measurement	43
	8.5	Audit	44
	A.	Auditing and Reviewing the OHSWMS	44
	8.6	Paperwork review	44
	8.7	Physical Inspection – Observations and Recommendations	46
9.	Gı	uidance to nursery	48
10	. Ех	recutive Summary	48

1. Disclaimer

Every effort has been made to ensure that all statements and information offered in this report are accurate and true, and are related to, or qualified by observations made during the audit and inspection.

The audit may not confirm every activity affecting the nursery, although every effort has been made to identify a realistic picture. This document is a live document and we will add/omit or amend as necessary.

This report only comments on the conditions observed, information supplied, and impressions gained at the time of the inspection; it should not be taken as identifying all aspects of possible unsafe conditions and/or contravention of statutory requirements.

The accuracy of this audit report rests upon the representations made by the nursery being honest and truthful.

NB: Please note that this audit and inspection report represents a snapshot in time completed by

2. Introduction

As part of (Name of childcare provision) Occupational Health, Safety and Welfare (OHSW) monitoring process, we undertake this OHSW audit and inspection.

The audit and inspection were conducted by reviewing (Name of childcare provision) health and safety documentation and procedures. This was followed by a tour of the site and associated buildings.

The audit and inspection are tools used to determine the effective implementation of (Name of childcare provision) OHSW standards. This report has been prepared to identify the strengths and weaknesses in our Occupational Health, Safety and Welfare Management System (OHSWMS). It provides recommendations for consideration giving a basis from which continuous improvement to the standards of health safety and welfare can be made.

The purpose of this report is to provide the nursery leadership team and business owners/chair of trustees/charity chair etc, with an appraisal of the effectiveness of the nursery's health and safety management provisions. It would also be useful to share the report with staff as part of the nurseries' ongoing engagement with health, safety and welfare issues.

The report serves to highlight strengths and describe weaknesses in the nursery's management of occupational safety, health and welfare, and recommends solutions and timeframes for resolutions where deficiencies and issues are identified.

The format of the report takes the form of a more detailed RAG (Red, Amber, Green) report, which will help our nursery prioritise our actions in relation to specific areas of health, safety and welfare management improvements.

The report focuses on areas of significant quality management and highlights areas that require improvement. It is felt that this qualitative approach will help our nursery to grow stronger in the four management categories of Plan, Do, Check and Act, which can form the basis of the Occupational Health Safety and Welfare Management System.

3. Acknowledgements

The auditor would like to place on record, thanks to all staff who gave their time and assisted with the audit process.

In particular, the auditor would like to thank....

4. Background

This is the 1st (this number may change in each report) formal audit and inspection of the (Name of childcare provision) OHSWMS.

5. Aims and objectives

The primary aim of this audit and inspection is to provide an internal assessment of the OHSWMS and management arrangements developed by our nursery and the effectiveness of our implementation.

6. Methodology

The audit and inspection were carried out in two parts:

- a desktop audit of the nurseries' health and safety management system and
- 2) a physical inspection of the nurseries' premises.

During both activities, the auditor gathered evidence of the nurseries' approach to safety management by way of the following:

- a) Comprehensively reviewing safety management documents to check for: suitability and sufficiency and regular review and revision.
- b) Asking questions of key staff to check for an awareness and understanding of workplace health, safety and wellbeing provisions.
- c) Touring the workplace to check for a clean, tidy, healthy and safe work environment and to observe work processes to see whether procedures are followed and ensure that appropriate measures are in place to control hazards and mitigate risk.
- d) The audit and inspection has five distinct components.
 - (i) Policies, Procedures, Risk Assessments, Safe Systems of Work and Communication
 - (ii) Buildings and Grounds
 - (iii) High Risk Curriculum Areas (e.g., Forest Nurseries') and Staff Training
 - (iv) Performance Monitoring and Measurement
 - (v) Audit

The results from the above components combine to produce the Inspection and Audit Action Plan.

7. Scoring

The table below shows the categories of compliance for each of the audited/inspected areas.

KEY			
Non- compliance	There is a legal requirement to adhere to this element of the audit. The audit identified a breach that should be addressed. Failure to comply with health and safety requirements is a criminal offence.		
Partially complies	There are gaps in compliance with legal requirements. It is advised that action be taken to ensure full compliance with legislation.		
Requires Improvement	Although not in itself an offence, if proved that best practice was not being followed, a court could regard this as evidence of guilt. It is recommended that measures be put in place to improve the safety standards in this area.		
Complies	There is full compliance with the requirements of health and safety legislation.		
Adheres to best practice	Best practice is being followed. Although there is no legal requirement concerning this area of health and safety, it is considered that the attitudes to safety are at a high standard.		

<u>Important Note:</u> The following audit findings are examples only and are for guidance. Entries should be amended as necessary as part of your own audit and inspection. The rag rating system above has been used to identify non-compliance, partial compliance, requires improvement, compliance and adheres to best practise.

8. Findings of the Audit

8.1 Policies, Procedures, Risk Assessments, Safe Systems of Work and Communication

A. Occupational Health Safety and Welfare (OHSW) Policy

The Nursery has an OHSW (Occupational Health, Safety and Welfare) policy. The policy has recently been reviewed in May 2019. The policy complies with law and makes clear the organisational structure and arrangements for managing health, safety and welfare.

The OHSW policy describes in detail responsibilities and expectations of workers and managers, making it clear that performance will be monitored, and people held accountable. The nursery has added a site Supervisor Role and responsibilities that will help to promote their outstanding work.

There is a full Nursery induction process in place developed by the nursery business manager and staff are requested to sign to say they have read and understood the policies.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

BEST PRACTICE:

The OHSW policy should inform staff, on a practical level, of how they are expected to fulfil specific duties in accordance with the "nursery procedures and rules". The OSHW policy should be amended, therefore, when a significant change occurs, for example changes in workplace practices and procedures

WHAT THE LAW SAYS:

The OHSW policy should be consulted on with staff and Union representatives where possible and once the (business owners/chair of trustees/charity chair etc) have signed it off, it must be effectively communicated to all staff. This could be done for example, by letting the staff know that it is available on the shared drive or staff health and safety notice board.

LEGAL REFERENCE(S)

The Health and Safety at Work Act 1974, Section 2 (3)

'It shall be the duty of every employer to prepare and as often as may be appropriate revise a written statement of... general policy... and to bring the statement and any revision of it to the notice of all employees.'

Furthermore, **Section 2 (6)** outlines "the duty of every employer to consult on any such arrangements with a view to the making and maintenance of arrangements..."

FURTHER INFORMATION:

It is recommended that the OSHW arrangements be reviewed annually to ensure that procedures documented remain up to date and relevant.

Following this review the (business owners/chair of trustees/charity chair etc) must sign the policy.

B. Risk Assessments

Significant risks have been identified and a well-developed system for identifying hazards and evaluating risks relating to workers safety and health is in place. Preventative and protective measures are in operation and the hierarchy of controls are always observed. Site specific, generic and risk assessments for trips are in place and there is evidence that these are reviewed on a regular basis and that they give an accurate reflection of the risks and the control measures in place at the nursery.

Individual risk assessments are being carried out where required (e.g. known medical conditions where there are H&S implications, such as epilepsy etc.)

Staff are aware of the content and location of all relevant risk assessments.

In accordance with best practice, the Nursery Business Manager has completed a whole nursery risk assessment.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Risk assessments have been completed for most site-specific activities and are reviewed and regularly monitored by the Manager and the person/organisation with final and legal responsibility for Health and Safety (business owners/chair of trustees/charity chair etc). These are reviewed on an annual basis. Last reviewed in October 2019.

Risk assessments to be considered for:

- Opening and closing site
- Outdoor play area (see https://thehub-beta.walthamforest.gov.uk/earlyyearpoliciesandprocedures)
- Fabric of building (external and internal) inc. reporting maintenance repairs and monitoring any actions required
- Snow clearance

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

FURTHER INFORMATION:

Examples of policy prompts and risk assessments are available from https://thehub-beta.walthamforest.gov.uk/earlyyearpoliciesandprocedures.

A Health and Safety checklist for classrooms is available via the HSE.

WHAT THE LAW SAYS:

There is a legal obligation to record the control measures in place, and as such, care should be taken to ensure that risk assessments are relevant, in every detail, to the activity or area being assessed. Written risk assessments and the associated control measures must be reviewed regularly.

It is a legal requirement for every employer to assess the health and safety risks arising out of their work under regulation 3 of the Management of Health and Safety at Work Regulations 1999.

This means to assess the significant risks and to put into place suitable and sufficient control measures. In addition, there is a requirement to consult staff in this process and effectively communicate the findings of these assessments to them. Once in place, the risk assessments must be monitored and reviewed to ensure that they remain relevant. Risk assessments must be reviewed regularly, following an accident, and to reflect changes within the nursery, e.g. the introduction of new equipment, substance, change in policy/procedures, a change in legislation or advancement in technology, etc. Staff should be involved in this process.

C. Safe Systems of Work

Reviews and modifications to hazard prevention and control procedures or arrangements are not always carried out frequently with regard to necessity and timing. There was a lack of well-documented information maintained on safe work systems and nursery operating procedures (for example, missing child, working at height and lone working). A comprehensive and robust arrangements must be maintained for prevention, preparedness and response to accidents and incidents, and regularly maintained and tested. There was inconsistent awareness of the arrangements amongst staff.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

The Management of Health and Safety at Work Regulations 1999, Regulation 3 (4)

'Any assessment such as is referred to in paragraph (1) or (2) shall be reviewed by the employer or self-employed person who made it if a) there is reason to suspect that it is no longer valid; or b) there has been a significant change in the matters to which it relates; and whereas a result of any such review changes to an assessment are required, the employer or self-employed person concerned shall make them

The Health and Safety at Work Act 1974, Section 2 (2) (a)

An employer has the duty for '...the provision and maintenance of plant and systems of work that are, so far as is reasonably practicable, safe and without risks to health...

The Management of Health and Safety at Work Regulations 1999, Regulation 8 (1)

'Every employer shall a) Establish and where necessary give effect to appropriate procedures to be followed in the event of serious and imminent danger to persons at work in his undertaking..."

D. Working at height

There was a lack of robust policy (using the hierarchy of control – Avoid, Prevent and Minimise) for the justification of all working from height. All ladder work lasting less than 30 minutes should be competency based and risk assessed. Any activity that lasts longer than 30 minutes must have a full and considered risk assessment. Caretaker's/premises maintenance personnel's ladders should be subject to a 6 monthly visual recorded inspection by the responsible person. Duty holders must do all that is reasonably practical to prevent anyone falling from height or from a level surface to a depth, which are liable to cause injury.

The key responsibilities of the Duty Holder are to ensure that:

- All working at height is properly planned and organised
- The place where work at height is carried out is safe
- The equipment for work at height is appropriately inspected & maintained
- All working at height is carried out in a safe manner using appropriate work equipment
- All persons involved in working at height are suitably trained, competent and are supervised appropriately.
- Supervision should be carried out by a competent person
- The risks arising from fragile surfaces are properly controlled
- The risks arising from falling objects are properly controlled

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

FURTHER INFORMATION:

LBWF Corporate H&S team have developed Working at height policy and guidance notes at https://foresthub.walthamforest.gov.uk/services/health-and-safety/policies-and-guidance

E. Manual Handling

All significant examples of manual handling have been risk assessed and these risks assessments are regularly reviewed. Those staff who require training have been identified and these people have received training and instruction. The nursery use the **SMART** approach to lifting:

Size up that load

- · Assess the load (shape, size and weight)
- · Determine where the load needs to be moved and placed
- Determine whether you can carry the load/whether a mechanical aid should be used

Move the load as close to the body as possible

- Carry the load as close to the body as possible
- Secure your grip

Always bend your knees

- Keep feet apart in a comfortable position (usually in line with hips)
- · Minimise lower back bending
- Bend knees (squat or semi-squat position) Raise the load with your legs
- Lift the load with your legs, not your back, in a smooth motion (avoid twisting or jerky movements)
- · Maintain normal curvature of the spine

Turn your feet in the direction you want to move

- · Change direction by pointing your feet and not twisting your back
- To set the load down, squat down, keep your head up and allow your legs to carry the weight

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

FURTHER INFORMATION:

LBWF Corporate H&S team have developed Manual Handling policy and guidance notes at https://foresthub.walthamforest.gov.uk/services/health-and-safety/policies-and-guidance

F. Control of Substances Hazardous to Health (COSHH)

We keep an inventory of chemicals (both cleaning and maintenance products). Product safety data sheets have been obtained from the manufacturer for every substance used at the nursery, however COSHH risk assessments now need to be completed for all products and are to be made available for inspection in the Fire information file for the Fire and Rescue Service which is kept in the main office.

A copy of COSHH risk assessment is also kept in the cleaner's cupboard with the associated product for, ease of access especially during emergencies.

COSHH risk assessments should be completed for substances used in the following departments:

- Site supervisor
- Kitchen

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

If a container shows a warning symbol (see examples below), you must assess the risks to users.



WHAT THE LAW SAYS:

The Control of Substances Hazardous to Health (COSHH) Regulations stipulates that employers must:

- assess the risks to health from chemicals and decide what controls are needed.
- use those controls and make sure workers use them.
- make sure the controls are working properly.
- inform workers about the risks to their health; provide training for employees

Safety data sheets and/or COSHH risk assessments should be made available for users of hazardous substances.

FURTHER INFORMATION:

LBWF Corporate H&S team have developed Hazardous substances and COSHH policy and guidance notes at https://foresthub.walthamforest.gov.uk/services/health-and-safety/policies-and-guidance

G. Chemical Storage

Hazardous substances were not always being stored correctly We also noted that one hazardous substance could be replaced with a less harmful product, which we will arrange. Flammable substances were not kept securely in the fire-retardant and ventilated cupboard. Steps have been taken to ensure appropriate separation of hazardous substances to guard against accidental mixing. Although children could not access hazardous materials, the materials were not stored as should be.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

BEST PRACTICE:

Butane (blue cylinders) and propane (red cylinders) both of which can be used for running domestic type BBQs used at nursery fairs/fates should not be stored on nursery premises. Any solvent based products should be stored in lockable metal containers

WHAT THE LAW SAYS:

The Dangerous Substances and Explosive Atmospheres Regulations, 2002 require that flammable and highly flammable substances be controlled. These include petrol, LPG, solvent based paints, varnishes and some types of dust.

All hazardous substances must be stored appropriately e.g. secured out of the reach of children and all containers clearly labeled and marked (e.g. irritant, flammable)

Further information:

Regarding the control of hazardous substances can be obtained from www.hse.gov.uk/COSHH/index.htm and a COSHH assessment tool is available from www.coshh-essentials.org.uk.

LBWF Corporate H&S team have developed Hazardous substances and COSHH policy and guidance notes at https://foresthub.walthamforest.gov.uk/services/health-and-safety/policies-and-guidance

These are meant as guides only and provide a good indication of the hazards found in most nurseries. Any specific risk assessment MUST be modified to reflect the hazards found in your own nursery and the control measures that you have in place.

H. Dealing with Accidents, Incidents and III-Health and First Aid

ACCIDENT RECORDING:

The nursery records and reports accident injuries and dangerous occurrences to Ofsted, LADO (local Authority Designated Officer) and the H&S Executive as required and in line with our Accident and Incident Procedures/Policy.

Cuts, grazes and bumps are being managed appropriately via a locally held accident reporting system based at the nursery. Staff are aware of the procedures for reporting incidents as required

Staff are aware of the procedures for reporting incidents as required under the 'Reporting of injuries, diseases and dangerous occurrences

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

regulations (<u>RIDDOR</u>) and are able to properly identify accidents and incidents.

ACCIDENT REPORTING:

Staff are aware of the procedures for reporting incidents as required under the 'Reporting of injuries, diseases and dangerous occurrences regulations (RIDDOR) and are able to properly identify accidents and incidents and report them to the relevant organisations/people, in line with their accident and illness policy.

Our accident records are kept locally and monitored for trends.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
 Adheres to best practice

ACCIDENT/INCIDENT INVESTIGATION AND MONITORING

There were some gaps in our documented recording system to track and document accidents and incidents. The recording of information needs to be improved to comply with the law and provide a basis for effective analysis. It is recommended that an overview of accidents/incidents be regularly provided to the Manager and business owners/chair of trustees/charity trustees so that trends can be monitored.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

FIRST AID PROVISION - EARLY YEARS ONLY (UP TO 5 YEARS OLD)

It is a requirement of the statutory framework that a paediatric first aider is on nursery premises at all times when children are present (and at least one person with paediatric first aid on outings). The nursery has a sufficient number of paediatric first aiders.

Our first aid boxes are stored in appropriate places and maintained, with no unapproved content (medicines etc.)

First aid provision and training are excellent, and the nursery is highly proactive. Nursery trains all children in first aid.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

FIRST AID RECORDS

In addition to recording more serious incidents, minor injuries and any first aid, treatment given is locally recorded. During the audit, evidence was produced to show that any first aid treatment given is properly recorded in an accident book that is stored securely.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

ADMINISTRATION OF MEDICINES

Managing Medical Needs Policy is on the Website. The nursery has procedures in place to support children with health and medical needs. These include a written parental request form, a monitoring system and secure storage for medicines.

Children with medical needs and allergies are clearly identified and an annual review of care plans is undertaken for those with more significant needs. We provide annual training for all relevant staff in use of epipens and our medical procedures are up to date.

Also, our food operator aware of all food related allergies.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

BEST PRACTICE:

The Information Management Toolkit for Nurseries' (IRMS) is designed as guidance and sets out certain requirements for the keeping of records.

- For accidents involving adults in nurseries' it is the date of the accident + 6 years.
- For accidents involving children it is the Date of Birth + 25 years.
- Records relating to serious accidents and injury should be kept for date of incident + 12 years.

Example Information Management Toolkit Early Years Provision

https://www.kelsi.org.uk/__data/assets/pdf_file/0008/94751/Information-Management-Toolkit-Early-Years-Provision.pdf

Further information can be found here:

Ofsted requires all settings to have a set of policies and procedures which are detailed in the <u>Early years foundation stage statutory framework</u> (EYFS). London Borough of Waltham Forest (LBWF) have produced a range of <u>policy prompt documents</u> to support in delivering high quality childcare.

This includes

- LBWF Accident and Incident procedure prompt guidance
- III or Infectious Children Policy and Procedure prompt guidance

WHAT THE LAW SAYS:

The Management of Health and Safety at Work Regulations 1999, Regulation 8 (1)

'Every employer shall-

Establish and where necessary give effect to appropriate procedures to be followed in the event of serious and imminent danger to persons at work in his undertaking...'

The Health and Safety (First-Aid) Regulations 1981, Regulation 3

- '(1) An employer shall provide, or ensure that there are provided, such equipment and facilities as are adequate and appropriate in the circumstances for enabling first-aid to be rendered to his employees if they are injured or become ill at work.
- (2) Subject to paragraphs (3) and (4), an employer shall provide, or ensure that there is provided, such number of suitable persons as is adequate and appropriate in the circumstances for rendering first-aid to his employees if they are injured or become ill at work; and for this purpose a person shall not be suitable unless he has undergone:
 - a) such training and has such qualification as the Health and Safety Executive may approve for the time being in respect of that case or class of case, and
 - b) such additional training, if any, as may be appropriate in the circumstances of that case.'

The Social Security (Claims and Payments) Regulations 1979, Regulations 25 (3) '...every employer by whom 10 or more people are normally employed... shall, subject to the following provisions of this paragraph –

keep readily accessible a book... in which the appropriate particulars... of any accident causing personal injury to a person employed by the employer...

I. Communication, Consultation and Cooperation

Communication, consultation and cooperation are all essential elements of a robust health and safety ethos and is a legal requirement under the Management of Health and Safety at Work Regulations 1999.

Evidence of H&S discussed in minutes from November 2019.

Visual information and standardisation of H&S related information displayed around the site was outstanding and all up to date.

Staff are provided with health and safety information and able to raise any health and safety concerns: directly to the head, the site manager/caretaker, their line manager. Additional health, safety and welfare information is to be provided to staff by the installation of a staff notice board in the staff room. This board should contain the following: Risk assessments, The HS&W policy, The H&S at work poster Minutes of H&S meetings, Wellbeing information, Emergency arrangements, First aid arrangements.

We have a system whereby all defects found with equipment / plant /premises are notified to management and taken out of service if necessary.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

BEST PRACTICE:

Good communication of health and safety can be achieved in a number of ways. Staff can be provided with health and safety information through:

- · Staff meetings
- Departmental meetings
- Health and safety committees
- Leadership groups

There should be a clearly defined route through which staff can express health and safety concerns. Staff should feel confident that their concerns are dealt with and so ideally such suggestions should be recorded.

The staff handbook is a useful way to communicate health and safety procedures. This could be located on the staff shared drive and should include information on how staff can report health and safety concerns, how staff should report defects, risk assessments, emergency procedures, accident reporting and how staff can access health and safety related policies and procedures

ISO45001 Clauses 7.4.1 to 7.4.3

"The organisation must establish, implement and maintain a process or processes for internal and external communications relevant to the OH&S management system, which provides for the gathering, updating and dissemination of information and which encompasses the following: What topics to communicate on, when to communicate, with whom to communicate, how to communicate".

It is, therefore, a legal requirement to consult and communicate with employees in all aspects of health and safety provision within the nursery and is an essential element of creating a robust health and safety culture.

Employers have a duty to consult with their employees, or their representatives, on health and safety matters. Union safety representatives or employee safety representative can assist with this process as well as providing valuable guidance in health and safety matters.

WHAT THE LAW SAYS:

It is a requirement that employers must consult all their employees on health and safety matters, in particular, with regard to:

- i). the introduction of any measure which may substantially affect their health and safety, e.g. the introduction of new equipment or new systems of work.
- ii). the arrangements for getting competent people to help them comply with health and safety laws.
- iii). the risks that have been identified from risk assessments, the hazards and dangers employees will be exposed to, and the measures in place to reduce or remove the risks.
- iv). the planning and organisation of any health and safety training.
- v). the health and safety consequences of introducing new technology.

J. Emergency Planning

An emergency plan has been prepared so that staff are aware of the procedures to follow in a crisis. It is good practice to set out actions to be taken by designated staff during an emergency. The plan should cover minor incidents e.g. heating breakdown, no water, etc. when the nursery may have to close for a short time, to major incidents e.g. fire, fatality, etc. which may cause major disruption to the nursery. The emergency plan includes details of how the nursery will manage the dismissal of children and the collection arrangements for parents/carers.

Consideration has been given to including the following in the plan:

- how to respond efficiently during a crisis safeguarding children, staff and visitors, this should name individuals and their roles during the situation.
- preventing an escalation of the situation.
- arrangements to temporarily relocate children if necessary.
- contact details e.g. emergency numbers, Fire Service, Critical Incident Response Team, etc.
- emergency arrangements in case of an incident during an educational visit

Once the emergency plan has been ratified by the business owner/chair of trustees/charity trustees, it should be shared with all those with responsibilities so that they are aware of the procedures to follow in a crisis.

There is no alternative location other than the nursery fields. The nursery business manager can text the whole parent group from her phone.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

K. Lockdown

The first step in preparing a lockdown policy is to be realistic about the risks for the nursery and its children and will be linked to the ease of access into the nursery buildings. Whilst terrorism has prompted nurseries to consider a lockdown procedure, different nurseries will identify different risks and the likelihood of a negative event will vary. The risk may come from an intruder, aggrieved parent, or an incident in the immediate vicinity of the nursery.

A written lockdown plan is in place and has been signed off by the business owner/chair of trustees/charity trustees. The lockdown has a specific notification (air horn – outside and tambourine – inside) and has been tested on a regular basis in order that staff and pupils are familiar with the requirements. The lockdown plan includes the notification process for a return to normal. Drills and practices are recorded, and lessons learnt are observed and used to improve the plan when it is reviewed annually. Notification is 5 manual rings of the lesson plan. Tested in Autumn 2018.

The nursery has experienced an actual live lockdown event when a threat of violence was received. Lessons learnt have been followed up. Excellent practices noted.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

8.2 Buildings and Grounds

A. Fire Risk Assessment

FIRE RISK ASSESSMENT

The nursery does not have an up to date Fire Risk Assessment (FRA) in place, nor does the FRA appear to be suitable and sufficient as it was not clear to tell the main risks have been identified or when and if actions had been implemented. It has been agreed that the nursery will commission a new FRA to be undertaken by a suitably qualified fire risk assessor to ensure we have covered and implemented all necessary and reasonable actions.

The last FRA was completed in February 2018 and is currently out of date by 3 months.

We must review our Fire Safety processes to ensure that FRA's are clear and updated annually by a suitably qualified person/organisation. Our Fire Safety lead will be provided further training to ensure we comply with **The Regulatory Reform (Fire Safety) 2005 Order.**

Last annual FRA inspection date: Remedial works identified: Y/N Remedial works completed Y/N Next annual FRA inspection date: Contractor: "Fire Risk Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

Under **The Regulatory Reform (Fire Safety) 2005 Order** every premises with 5 or more employees must assess the risks from fire, record the findings and inform all staff of the outcome of the assessment.

Did you know: If there's a fire and you haven't met your legal duties to keep people safe, you could be fined and may even spend time in prison. Learn about your <u>legal obligations here</u>.

BEST PRACTICE:

A Fire Risk Assessment (FRA) is a legal requirement. If you are responsible for a building, for example a employer, owner or occupier of premises that aren't a 'single private dwelling' (a private home), you need to make sure a suitably competent person completes a Fire Risk Assessment. It is your duty to identify fire risks and hazards in your premises and take appropriate action. Make sure you review your risk assessment regularly and whenever significant changes have been made that would have an impact on it. It's good business sense as well as a legal requirement, often businesses don't recover after a fire, and effective fire prevention starts with properly understanding the risks.

It is recommended that at least one FRA should be undertaken by suitably qualified fire risk assessor to ensure that all risks are identified. In the case of simple premises, this FRA can be reviewed by the nursery nominated fire lead annually if competent to do so, or when there are changes to the layout of the premises. In all other cases, where the premises are larger and more complex, or where nominated fire leads do not have enough experience to undertake an FRA, it is recommended that the nursery commission as suitably qualified fire risk assessor to undertake their FRA.

https://www.london-fire.gov.uk/safety/the-workplace/fire-risk-assessments-your-responsibilities/

Covid19 Fire Risk Assessment checklist

Your FRA review should consider the following:

- How many people you have on the premises at a time and if there are enough of trained people to co-ordinate or carry out an evacuation, if needed?
- Is there still the capacity to help people with a disability and any persons who may require assistance in an emergency?
- Has social distancing created any lone working situations?
- Have there been any changes in working practices due to coronavirus and how might they affect your risk assessment?
- Have you had to increase your stock levels, and do you need to adjust control measures accordingly?
- If you are cooking on your premises, is your kitchen catering extraction ductwork clean?
- Have you been able to test during lockdown? Do you need to carry out testing before reoccupation? Do your testing maintenance regimes need to change?
- Do you need additional staff training, including fire wardens or fire marshals? Do you need to train more people if people are working at varying times?
- Have you factored in social distancing to your emergency evacuation plan including RVPs?
- Are there any changes to Firefighter access and facilities? Are any changes needed?

This isn't everything you need to consider, but it should get you thinking about what you might need to consider. As changes are announced on lockdown please make sure you think about your fire safety arrangements. https://www.london-fire.gov.uk/safety/the-workplace/coronavirus-back-to-business/business-reopening-fire-risk-assessment-checklist-after-covid19/

B. Fire Logbook

We reviewed our Fire Logbook which we keep to record and monitor ALL fire safety related test/inspection certification, fire drill/training records etc, was not up to date with the relevant information.

- Noncompliance
- Partially complies
- Requires Improvement

We will ensure that our Fire Logbook is kept up to date by the fire lead and fire lead deputy. This will be monitored by our H&S lead responsible person on a monthly basis.

- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

There is no statutory requirement to maintain a fire safety log book, but Article 17 of the Regulatory Reform (Fire Safety) Order 2005 requires the 'responsible person' for premises to ensure that all fire safety facilities, equipment and devices are maintained in efficient working order and in good repair.

Additionally, Article 21 states that where there are employees, they should be provided with adequate safety training.

The Order also requires that tests, maintenance and safety training are capable of being audited to ensure they are being carried out.

The most effective way of demonstrating compliance with these particular Articles is to keep records, and a logbook is one way of doing it.

BEST PRACTICE:

Having an up to date fire safety logbook will also enable building owners, managers and other responsible persons to demonstrate their commitment to fire safety legislation.

Early Years Childcare and Business Development requires all childcare providers in receipt of FEEE funding to keep a fire safety logbook and although there is no direct requirement to keep maintenance records within the Fire Safety Order the responsible person is required to record significant findings from any fire risk assessment. The installation of an automatic fire alarm system or the need for emergency lighting would be deemed as significant and the British Standards which covers the installation, testing and maintenance of this equipment clearly states records should be kept.

Therefore, the most effective way of demonstrating compliance is to keep records, and a Logbook is one way of doing it.

Staff should also be aware that it is an offence to make in any register, book, notice or other document required to be kept, served or given by or under, the fire safety order, an entry which he or she knows to be false.

Your fire safety logbook should remain on the premises at all times. The logbook assists in proving compliance with Fire Safety Regulations and should be completed following the inspection, testing or maintenance of any of the Fire Safety provisions required by the Fire Safety law.

Detailed information in relation to the testing and maintenance of specific items can be obtained by referring to the relevant standard and/or the manufacturers' instructions.

The level of necessary safety (or service) must be dictated by the findings of your risk assessment, so you may need to do more or less than that specified in any particular standard referred to. You must be prepared to show that what you have done complies with the requirements of the law irrespective of whether you have relied on any particular standard.

ADDITIONAL HELP

The Early Years, Childcare & Business Development Service have created an **Example Fire Logbook**, which is available to download from our Education HUB under <u>Early Years Policies</u> and <u>Procedures</u>

C. Fire Alarm

FIRE ALARM – TESTING AND MAINTENANCE BY A COMPETENT PERSON

Our fire alarm is serviced every 6 months by a competent engineer, in line with the requirement for a battery backed up system. Service records were available to evidence this was tested on 24.06.2019. Our nursery is considering a mains system going forward.

Last inspection date:

Remedial works identified: **Y/N** Remedial works completed **Y/N**

Next inspection date: Contractor: "Fire Alarm Ltd"

We also undertake weekly tests where we test a manual call point during working hours to cheek that the control panel and alarm sounders operate satisfactorily. Each week, a different manual call point should be tested.

The fire alarm sounder can be heard right across the nursery premises.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

D. Emergency Lighting

EMERGENCY LIGHTING TESTING AND MAINTENANCE BY A COMPETENT PERSON

Although records were available in the Fire Safety file, the emergency lighting certificate was out of date by 4 months and as such invalid. It was also noted that the emergency lighting certificate included some remedial works that had not been completed. Apart from the fire risk associated with this, it could negate our insurance cover.

A new Emergency Lighting inspection has been commissioned and any necessary recommendations will be actioned. The nurseries nominated fire safety lead has developed a monitoring process for reviewing certificates and reminders prior to when they are due for renewal to prevent this from happening again. We have also agreed that a reminder will be sent from our external emergency lighting engineer.

Last inspection date:

Remedial works identified: Y/N Remedial works completed Y/N

Next inspection date:

Contractor: "Emergency Lighting Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

EMERGENCY LIGHTING - CHECKS BY THE NURSERY

Emergency lights were not being tested monthly, or daily as part of our daily risk assessments. We have reviewed our risk assessments to ensure that there is a visual inspection undertaken daily and a test of emergency lighting units on a monthly basis which is recorded. Staff have been informed of the changes and we have arranged for our Emergency Lighting engineer to visit to train staff on how to undertake the daily and monthly checks. Our Fire Safety policy will be updated with these improvements.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Our emergency lighting is tested (a full discharge) annually by a competent emergency lighting engineer as part of the annual service.

In line with our FRA we ensure that all areas of the nursery used outside of ambient daylight hours have emergency lighting available on escape routes

WHAT THE LAW SAYS:

All emergency lights must be checked each month to ensure continued operation of all assets. Results should be recorded, and faults rectified immediately.

E. Fire Fighting Equipment

FIRE- FIGHTING EQUIPMENT - SERVICE BY A COMPETENT PERSON

There are appropriate fire extinguishers available, and they are inspected annually. Fire-fighting equipment has been serviced in the last 12 months and service records were available to evidence this. February 2019.

Last annual inspection date: Remedial works identified: Y/N Remedial works completed Y/N Next annual inspection date:

Contractor: "Fire Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

CALL POINTS - CHECKS BY THE NURSERY

A different call point is tested weekly and the results recorded. The Fire Authority will ask to see evidence that these tests are carried out when the nursery is inspected. Failure to produce written evidence could result in an improvement notice. It is an offence to falsify records. A Different point was checked each week by the site supervisor 04.11.19

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

F. Means of Escape

MEANS OF ESCAPE - CHECKS BY THE NURSERY

The nursery checks the facilities, equipment and devices (e.g. fire exits, fire doors, exit routes) provided for fire safety are inspected daily for damage, blockages and ease of access and there is a written record of these findings. As part of this inspection, we check that all internal fire doors close and are working properly. This is completed daily by our H&S lead as part of our opening and closing risk assessment.

We have actioned all the recommendations from our latest FRA. We have undertaken a signage audit as part of our last FRA to ensure all signage is appropriate and clear.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

As part of our FRA, we ensure that all areas of the nursery used outside of ambient daylight hours have emergency lighting available on escape routes

There is a documented nursey evacuation plan in place.

Our evacuation plan also considers individuals who may need specific assistance during evacuation (e.g., due to mobility impairment etc.) and have completed a Personal Emergency Evacuation Plan (PEEP) for those individuals.

The site plan which is located next to the fire panel in the lobby needs to have a key added as follows showing the location of all utilities/services; Gas (Yellow G), Electricity (Red E) Water (Blue W) and COSHH chemicals (Orange C). This is in order that the Fire and Rescue Service can quickly identify key areas in the nursery.

The Nursery Business Manager is very keen to find best value from service providers and this is adding value and saving the nursery a lot of money.

WHAT THE LAW SAYS:

It is a legal requirement to ensure that facilities, equipment and devices provided for fire safety are checked on a weekly basis. For example, that emergency exit routes are not blocked, that final exit routes and stairwells are free from combustible material and that fire doors are in good working order. Regular checks must be included in an effective fire prevention monitoring routine.

G. Fire Drills

FIRE DRILLS

Timed emergency evacuation drills are carried out each term and are properly recorded. 20.11.2018. The evacuation was timed at 2.31. Any resultant issues identified as a result of Fire Drills are discussed with staff and resolved.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

BEST PRACTICE:

Guidance in relation to the display of children's work in in accordance with the Fire and Regulatory Reform Order 2005 and as agreed by OFSTED, Chief Fire Officers Association and the Department for Education should be reviewed.

Further information can be found at:

https://www.gov.uk/workplace-fire-safety-your-responsibilities

https://www.ife.org.uk/Fire-Risk-Assessors-Register

https://www.firesafe.org.uk/child-minders-and-day-care-providers/

https://www.gov.uk/government/publications/fire-safety-risk-assessment-educational-premises

https://www.firesafe.org.uk/fire-emergency-evacuation-plan-or-fire-procedure/

https://www.firesafe.org.uk/emergency-lighting/

Audit Inspection of:	Date:	
H. Manage	ment of Asbestos	
The premises we such must have have found that landlord did not. We have urgent premises. It is do Asbestos Manage Containing Mate the asbestos in the asbestos in the asbestos in the grovide guidance. We are urgently Asbestos Policy • meet with annually nursery. • Meet our • si • th • or • A • or • A • Our H&S lead is	e occupy were constructed prior to the year 2000 and as an Asbestos Management survey in place, however, we the asbestos management survey provided to us by the cover the nursery part of the property. It is to be completed within the next two months. The gement survey will notify our nursery of any Asbestos brials (ACM's). It will include a plan for the management of the nursery, where staff and visitors to the nursery factors) can be made aware of the location of any asbestos the risks involved in any accidental disturbance. It will e on any actions required such as monitoring ACM's. Teviewing and improving our existing Management of and processes. We will ensure that we: In business owners/chair of trustees/charity trustees or when any refurbishment work is due to take place in the regal duty to ensure that: Itaff and contractors are made aware of the location/type of CM. The condition of ACM's must be monitored and changes in ondition should be reported immediately and recorded on the management plan or in an asbestos log. The survey and risk register is updated following the removal fany ACM's by a competent person/company. In asbestos permission to work system is used on every coasion before any work is conducted on building fabric. This applies equally to the site team as to contractors) our H&S lead and Manager are clear on the location of any CM's remaining in situ and the limitations of the asbestos management survey? Tesponsible for the asbestos management in our nursery vided with online "Asbestos Awareness" training to	 Non-compliance Partially complies Requires Improvement Complies Adheres to best practice

Best Practice

The person who you nominate as responsible for asbestos management must have suitable knowledge and understanding of the role they have been asked to undertake. They should be provided with appropriate Asbestos Awareness training.

Asbestos awareness

Information, instruction and training for asbestos awareness is intended to give workers and supervisors the information they need to avoid work that may disturb asbestos during any normal

support our understanding of this element of H&S.

work which could disturb the fabric of a building, or other item which might contain asbestos. It will not prepare workers, or self-employed contractors, to carry out work with asbestos-containing materials. If a worker is planning to carry out work that will disturb ACMs, further information, instruction and training will be needed.

Information, instruction and training about asbestos awareness should cover the following:

- the properties of asbestos and its effects on health, including the increased risk of developing lung cancer for asbestos workers who smoke
- the types, uses and likely occurrence of asbestos and asbestos materials in buildings and plant
- the general procedures to deal with an emergency, eg an uncontrolled release of asbestos dust into the workplace
- how to avoid the risk of exposure to asbestos

Online learning (often referred to as e-learning) is increasingly used as a method of providing asbestos awareness training. HSE recognises the use of e-learning as a viable delivery method, among others, for asbestos awareness training, provided it satisfies the requirements of Regulation 10 of the Control of Asbestos Regulations 2012 and the supporting Approved Code of Practice L143 'Managing and working with asbestos'.

Workers who plan to carry out work that will disturb asbestos require a higher level of information, instruction and training, in addition to asbestos awareness. This should take account of whether the work is non-licensed; notifiable non-licensed work (NNLW); or licensed work and should be job specific.

https://www.hse.gov.uk/asbestos/training.htm#type

WHAT THE LAW SAYS

The Control of Asbestos Regulations 2012 states:

"The measures to be specified in the plan for managing the risk shall include adequate measures for

- a) monitoring the condition of any asbestos or any substance containing or suspected of containing asbestos.
- b) ensuring any asbestos or any such substance is properly maintained or where necessary safely removed; and
- c) ensuring that information about the location and condition of any asbestos or any such substance is:
 - (i) provided to every person liable to disturb it
 - (ii) made available to the emergency services."

I. Legionella (Water Safety)

We hold an up to date legionella risk assessment (Water Risk Assessment **WRA**) and written scheme that was undertaken/updated by a suitably qualified competent water risk assessor.

All necessary action points highlighted have being acted upon by the nursery accordingly. In line with the WRA recommendations, we continue to ensure we:

- Maintain our on-site showers (flushed and cleaned on a weekly basis).
- Keep records for our regular flushing regime for all little used outlets

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

- Keep records for the monthly water temperature checks to ensure any deviances from the correct hot & cold-water temperatures are picked up early and reported to the H&S lead -Where non-compliant temperatures are identified we notify our heating engineer but also implement other actions to reduce risks such as increasing our flushing regime, raising calorifier temperature etc.
- The temperature and condition of our cold-water storage tanks are conducted annually.

We have provided an online **legionella awareness training** our H&S lead via a quality supplier. This provides our nominated lead with a basic understanding of water safety (legionella) to support them in this part of their H&S role.

Last inspection date:

Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed **Y/N**Next annual inspection date:
Contractor: "Water Ltd"

Concerns raised in the risk assessment and action plan have been dealt with satisfactorily by the service provider. Any further concerns raised either in the risk assessment or in the scheduled checks must be dealt with according to the priority ratings shown.

Further advice is available on the management of Legionella is available at:

https://www.hse.gov.uk/legionnaires/index.htm https://www.legionellacontrol.org.uk/

WHAT THE LAW SAYS:

It is a requirement to make a suitable and sufficient assessment of the risk of exposure to legionella bacteria from work activities or water systems. It is the responsibility of the duty holder to ensure this is carried out by a competent person and reviewed regularly or following a significant change.

J. Air Conditioning

The nursery has five air conditioning units. These units are inspected every six months through a suitably qualified and registered air conditioning engineer in line with the Governments guidance on air conditioning inspections in buildings. Any resulting recommendations are actioned within agreed timescales.

Last inspection date:

Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed Y/N

Next inspection date: Contractor: "Air Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS

Anyone who manages or controls an air conditioning system must understand their obligations under the Energy Performance of Buildings (England and Wales) Regulations 2012, as amended in 2020 (the EPB regulations).

An air conditioning system inspection by an accredited air conditioning energy assessor (the energy assessor) is designed to improve efficiency, reduce energy consumption, reduce operating costs and reduce carbon emissions. The energy assessor will highlight how the operation of existing systems can be improved or opportunities to replace older, less energy efficient systems, or oversized systems, with new energy efficient systems.

BEST PRACTICE:

Regular servicing improves the efficiency of your air conditioning. Professional advice says that for every year of operation in which you do not service your air-conditioning it loses 5% of its efficiency. By law any cooling or heating systems with more than 3kg of ozone depleting substances including HCFCs and HFCs must be checked annually for leakage. F-Gas Regulations contain requirements for labelling, leak checking, record-keeping and maintenance staff qualifications. All air conditioning systems with an effective combined rated output of more than 12kw must be regularly inspected by an energy assessor. The inspections must be no more than five years apart.

Further Guidance can be found at:

https://www.gov.uk/government/publications/air-conditioning-inspections-for-buildings/a-guide-to-air-conditioning-inspections

https://www.gov.uk/get-your-air-conditioning-system-inspected

https://find-energy-certificate.digital.communities.gov.uk/

K. Ventilation

This is particularly important during the Covid pandemic.

We ensure there is adequate natural ventilation through high level windows, trickle vents in windows and mechanical ventilation.

Ventilation units and internal surfaces of ductwork are inspected and cleaned 6 monthly by an external company. Records are maintained.

During the Covid pandemic, mechanical ventilation between internal rooms is shut off/closed to reduce air being mixed between rooms.

Last inspection date:

Remedial works identified: Y/N Remedial works completed Y/N

Next inspection date:

Contractor: "Ventilation Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

L. CCTV

We have a service contract for the testing and maintenance of our CCTV security system, including detectors, cameras and panels.

This is carried out every six months.

Last service test date:

Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed Y/N

Next service test date: Contractor: "CCTV Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

M. Gas Safety: Systems and Appliances

Our Gas Safe inspection certificate is up to date and kept on file. We have mains fitted CO2 sensors in the kitchen and boiler room.

Last service test date:

Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed **Y/N**Next service test date:23.01.20
Contractor: "Gas Safety Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS

The Gas Safety (Installation and Use) Regulations 1998 place duties on gas consumers, installers, suppliers and landlords. These regulations link with other safety controls on combustion equipment, eg the Building Regulations, which are standards for ventilation and flues.

IMPORTANT: If your landlord does not undertake this role, you will be responsible for arranging for all gas equipment to be tested by a <u>Gas Safe engineer</u> annually and any recommendations resulting from that inspection. If your landlord is responsible, you still have a legal responsibility to monitor and ensure that annual inspections take place. Invalid certification could invalidate your insurance.

Further information can be found at:

https://www.hse.gov.uk/gas/domestic/newschemecontract.htm

https://www.hse.gov.uk/gas/gas-safe-register-check.htm

https://www.gassaferegister.co.uk/

N. Electrical Safety: Systems and Appliances

FIXED ELECTRICAL INSTALLATION

The fixed electrical installation certificate (Electrical Installation Condition Inspection report) was out of date by 5 months (due every 5 years) and was therefore invalid. We have commissioned a new Electrical Installation Condition Inspection report and will undertake any required remedial actions following receipt of that inspection report. (Due to be completed

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

February 2021). We have taken steps to ensure that we have a robust reminder process in place to avoid our inspection certificate expiring, through an online calendar reminder, wall chart showing when certificate renewals are due and also arranging for the gas inspection company to send us a reminder. We have provided further inhouse training for our inhouse H&S lead to ensure this is monitored.

Last service test date:

Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed Y/N

Next service test date: Contractor: "Eclectic Ltd"

PORTABLE ELECTRICAL APPLIANCES

The nursery has a suitable and valid PAT certificate in place to ensure that equipment is tested by a competent person. A competent person has completed the testing within the last year and defective equipment has been permanently removed.

Last certificate test date:

Remedial works identified: Y/N Remedial works completed Y/N

Next test date:

Contractor: "PAT Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

BEST PRACTISE

Visual inspections of electrical equipment and fixed electrical installation should be included as part of nursery risk assessments. How often depends on the size and condition of the installation but it would seem appropriate that room leads undertake a daily visual inspection of the areas they are responsible for, further backed up by a monitoring monthly inspection by the nominated responsible person.

IMPORTANT: If for whatever reason, a landlord does not undertake or agree to undertake the **FIXED ELECTRICAL INSTALLATION**, as you have clear responsibilities for the H&S of children and staff under The H&S at Work Act, you will be responsible for arranging the fixed electrical installation inspection, through a suitably qualified electrical engineer before the existing inspection certificate expires. You will also be responsible for any Code 1 or Code 2 remedial actions resulting from that inspection and must ensure they are completed within the priority given. If your landlord is responsible, you still have a legal responsibility to monitor and ensure that annual inspections take place. Invalid certification could invalidate your insurance as well as present a danger to staff and children.

To find a suitably qualified electrical engineer https://www.electricalcompetentperson.co.uk/

Further information can be found at:

https://www.hse.gov.uk/electricity/

https://www.hse.gov.uk/pubns/indg236.htm

https://www.hse.gov.uk/toolbox/electrical.htm

https://www.hse.gov.uk/electricity/information/testing.htm

O. Display Energy Certificate

We have a valid energy certificate displayed (DEC) on site in the staff room and entrance lobby.

Last inspection date:

Next inspection date: Contractor: "DEC Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

P. Folding Dining Tables

We commission an external company to undertake an annual inspection for our dining room folding tables. Folding tables are placed in the corner of the dining area and secured in place.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Q. Outdoor Play Equipment and Play Areas

As part of our practice, we undertake a formal prior to use inspection of the playground equipment on a daily basis by supervising staff. Monthly recorded inspections are undertaken and recorded, and records are available to verify this.

Additionally, an annual inspection by an insurance approved contractor is carried out. Any issues raised have been dealt with accordingly. Last annual inspection date:

Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed **Y/N** Next annual inspection date:

Contractor: "Play Ltd"

However, we noted that we have not been formally undertaking an external risk assessment that looks at playground surfaces, external fabric of building, including high level items such as gutters/roof tiles etc. We have now updated our external play area risk assessment to cover all areas by using and adapting the LBWF External play area risk assessment template.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

In 2015, we commissioned a tree survey which was conducted by a registered arboriculturist. This highlighted some works at the time and the identification of plants that may be harmful to humans. However, we have not had an inspection since then. We will be commissioning a new survey and will address any recommendations and ensure that a tree survey is undertaken every 2 years.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies

Adheres to best practice

BEST PRACTICE:

The LBWF have provided "External play area risk assessment template" for providers to use as well as other useful policy prompts and guidance. https://thehub-beta.walthamforest.gov.uk/earlyyearpoliciesandprocedures

R. Contractors on Site

We use contractors that have not come from any approved list, so care is taken to ensure that contractors meet certain criteria including:

- what experience they have in the type of work we want done.
- · what their health and safety policies and practices are.
- examples of their recent health and safety performance (number of accidents etc.).
- · what qualifications and skills they have.
- their selection procedure for sub-contractors.
- · their safety method statements.
- what health and safety training and supervision they provide.
- their arrangements for consulting their workforce.
- if they have any independent assessment of their competence.
- if they are members of a relevant trade or professional body.

We then decide how much evidence needs to be sought in support of what prospective contractors have stated.

When awarding contracts directly health and safety is included in specifications and contract conditions.

All contractors who attend our site are shown the asbestos management survey prior to undertaking any works, to satisfy ourselves that asbestos materials will not be accidentally damaged.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

S. Pedestrian and Vehicular Movement

We have provided electronic gates to reduce the opportunity of parents entering site in vehicles. There are regular updates to parents regarding safe parking. Safety bollards are place to help prevent accidents. Parents are encouraged to park on the road safely and not obstructing any traffic or pedestrians. We are currently looking into having a Policy that may help improve access to and from the site whereby a site-specific risk assessment where high risks have been identified. Pedestrian walkways are provided and clearly defined to ensure staff, children, parents and visitors have a safe route into and out of the nursery building.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Children's areas are properly separated from car parks and other vehicle movement areas such as deliveries and refuse collection.

- Non-compliance
- Partially complies
- Requires **Improvement**
- Complies
- Adheres to best practice

Т. **Roller Shutters**

Our roller shutters serviced at least annually.

Last annual inspection date: Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed Y/N Next annual inspection date: Contractor: "Roller Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies Adheres to best practice

WHAT THE LAW SAYS:

Design, manufacture, supply and installation of roller shutters comes under Supply of Machinery (Safety) Regulations 2008 but there is no specific health and safety legal requirement dictating how often roller doors should be inspected or tested. LBWF recommends an annual safety and maintenance inspection under PUWER (1998) which requires that work equipment is safe to use on installation and maintained in safe condition for use. Also, regulation 5 of the Workplace (Health, Safety and Welfare Regulations), 1992 states that any powered door needs to be "maintained in an efficient state...subject to a suitable system of maintenance".

BEST PRACTICE:

BS standard EN 12635:2002 provides guidance on documentation, operation, use and maintenance including requirements for a logbook which should detail; operating instructions, maintenance and repair visits, details of work undertaken, details of changes/upgrades, name date and signature of responsible person.

U. **Gates and Barriers**

The nursery has suitable and sufficient gates and barriers providing adequate security. All gates and barriers are checked annually by a competent contractor. The fence line is also checked weekly by the Site Supervisor that is beyond requirements.

ACCESS CONTROL:

The main gate from the public highway is a powered gate with force limitation and safety controls installed, however, we noted that it was not operating as it should. This should have been picked up as part of our daily opening and closing risk assessments and reported immediately. We are reviewing that risk assessment process and providing all staff with additional training to ensure this is picked up by everyone. We are looking into installing an audible buzzer in our reception to highlight when the gate does not close properly.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

It is worth noting that the legal position is that powered gate systems are considered machinery. The HSE has lead responsibility for enforcement of legislation, which has been transposed in UK law as the Supply of Machinery (Safety) Regulations, 2008.

We have an electronic entry door system at our front entrance, on the main entrance doors and the double doors from the entrance lobby to the nursery. These were operating as they should and are tested and inspected by an external company annually. Latest service report showed all working as should and no actions required.

Last annual inspection date:

Remedial works identified: Y/N

Contractor appointed to undertake remedial if not part of service: Y/N

Remedial works completed **Y/N**Next annual inspection date:
Contractor: "Access Ltd"

BEST PRACTICE:

Gates and fences in a primary nursery should as a minimum conform to BS EN 1176 and be RoSPA approved.

V. Security and Safeguarding

There are clear signage directing visitors to the main reception. We have our access to the nursery adequately controlled through an entry door system. There is a clearly defined route between site entrance and reception with direct access to children avoided by way of a secure entrance lobby where visitors can only gain access if allowed by a member of staff. All other external doors are secure so that access cannot be gained from the outside. This includes our external play areas.

All gates and perimeter fencing are of an adequate height and well maintained. We have one electronic powered gate with force limitation and safety controls. This will be checked daily to ensure it is working properly. We are looking into installing an audible buzzer in our reception to highlight when the gate does not close properly.

Access to low roofs are adequately restricted with anti-climb paint/ anti-scale devices and where installed, clearly signed.

We have a single fragile roof surface to the rear exit door which is an older canopy. This is identified by signage.

Our external waste bins are secured and located away from buildings to prevent people using them to climb and also as a fire safety precaution.

We have adequate external lighting in place.

We do review our security protocols regularly and ensure all electronically operated doors and gates are checked via opening/closing risk assessment and maintained. The dangers of tailgating are discussed with staff at our regular H&S meetings.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies Adheres to best practice

Managers regularly monitor our security protocols processes to ensure staff are continuously adopting them. Managers also review staff risk assessments to ensure they are being undertaken to the agreed level and of a quality.

W. Intruder Alarm

We have an intruder alarm installed throughout the premises. We have a service contract in place for the testing and maintenance of the system, cameras and panel.

Last inspection date:

Remedial works identified: Y/N Remedial works completed Y/N

Next inspection date: Contractor: "Intruder Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

X. Roofs, gutters, rainwater pipes, gullies, inspection chambers etc

Our visual inspection of our roofs, gutters, rainwater pipes and gullies highlighted the following repairs required (we undertook this inspection from the ground and from upper floor windows).

- There was a build-up of debris in the gutters overlooking the outdoor
 play area and over the main entrance, with evidence of rainwater
 overflowing from the gutter down the face of the external wall. We will
 arrange for this to be cleaned as it is causing damage to the fabric of the
 building.
- Two external rainwater pipes were damaged, and rainwater had been leaking onto the face of the external wall turning it green. We will arrange for this to be repaired as we noted that there was damp beginning to show internally. NB: We have subsequently discovered that a crack has formed in the external brick wall of the property that is quite extensive and has been caused by the rainwater pipes that had been leaking over a long period of time, causing the ground to become waterlogged, which in turn cause the ground to swell and movement in that external wall.
- 3 external gullies were cracked (not in the children's external play area) These will be replaced immediately.
- There were some slipped roof tiles wedged into the gutter above the external play area – These tiles slipped will be removed short term to reduce the risk of them falling and the repairs carried out as soon as possible.
- There was ponding of rainwater in the children's play area. We will arrange for the drains to be rodded, jetted or cleaned.

Going forward, we will be reviewing our daily/weekly/monthly R A's to include inspecting the external fabric of the premises, especially for the entrance and external play area and ensure staff report any findings to management.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Y. External Fabric of Building (Brickwork, render, windows, doors, external ground surfaces etc)

Our visual inspection of the external fabric of the premises highlighted the following repairs/investigation.

- As mentioned above under "Roofs, gutters, rainwater pipes, gullies, inspection chambers etc", following the rainwater pipe that was found to be damaged (for some time), we subsequently discovered that a crack has formed in the external brick wall of the property that is quite extensive. This has been caused by the rainwater pipe that had been leaking over a long period of time, causing the ground to become waterlogged, which in turn cause the ground to swell and movement in that external wall. The rainwater pipe will be repaired, the green growth cleaned off the brickwork and the crack will be filled.
- Two high level windows over the children's play area looked rotten and there was loose material and paint. This will be inspected when the children are not in the play area to remove and loose material and for follow up with repairs.
- The rendered(plastered) area above the external door by the kitchen had
 a crack in it and looked as if it had come away from the brickwork in
 places. This will be inspected to remove any loose material and for follow
 up with repairs.
- The paint was peeling quite badly to the external door to the children's play area. Loose paint will be scraped off and redecoration arranged.
- There were a few loose and missing bricks to low level around the children's outdoor play area, as well as some loose brickwork pointing. Loose and friable material will be removed, and repairs arranged.
- The paving footpath from our entrance gate to the front entrance was uneven and some paving slabs moved underfoot. We will arrange for the loose slabs to be repaired and uneven slabs to be raised/lowered as necessary.
- The external play area is showing signs of wear, particularly the safety surfacing. There were small areas that were deteriorating which could potentially be a trip hazard. The external canopy was leaking through the canopy and damaging the steel framework supporting structure. – These items will be inspected further and repaired.

As per the "Roofs, gutters, rainwater pipes, gullies, inspection chambers etc" section above, we will be reviewing our daily/weekly/monthly R A's to include inspecting the external fabric of the premises, especially for the entrance and external play area and ensure staff report any findings to management.

Some items above, could have been picked up earlier to avoid further costly damage to the external fabric of our premises.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Z. Kitchen

Access: During the inspection we found the door to the kitchen wedged open. This is a fire hazard (it is the main source of fire in the building) and a high-risk area access to the kitchen. For those reasons alone the door must be closed at all times and secure so that children cannot access the area. We immediately closed the door and reminded staff of the risks and followed with a staff meeting to remind all staff of these fire safety and safeguarding requirements in line with our Fire Safety Policy and Safeguarding Policy. We have added this particular point to our monthly fire safety meetings and ensured that our nominated fire safety person is vigilant monitors this regularly going forward.

Any staff or visitors entering the food preparation area should wear appropriate Personal Protective Equipment such as slip resistant footwear. Hair must be tied back and covered with a hat to avoid contaminating food.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

There were a few minor recommendations from our last Food Safety report that were addressed immediately and recorded.

Our catering providers have a food safety management system compliant with HACPP (hazard analysis and critical control point).

Date of last Food Safety inspection: Recommended actions found: Y/N Recommended actions completed: Y/N

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
 Adheres to best practice

Extractor Hoods: The extractor hood has not been cleaned. We noted that the annual service had not taken place and was overdue by two months. We must ensure that the recommended system is cleaned and serviced to the standard in TR19 guidance. We highlighted this as a red because of the fire risk, even though this is a best practise item.

Last inspection/cleaning date: Next inspection/cleaning date: Contractor: "Hood Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

BEST PRACTICE:

Extractor hoods and local exhaust ventilation systems should be cleaned and serviced by a competent person at least annually.

Kitchen equipment: The kitchen equipment is inspected every day as part of our opening/closing regime. Equipment is also tested annually.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
 Adheres to best practice

Kitchen drains: Our kitchen drains and gullies (internal and external) are inspected and cleaned every 3 months and recorded, however, it was noted at the time of this inspection that the external drain had evidence of fat being emptied into it (it had solidified over the grate). Kitchen staff will be reminded that when fat cools down, it solidifies in the drain and can cause expensive blockages. We are looking at installing a grease/fat trap. Fat traps provide an easy way to capture fat and grease, rather than pouring it down the kitchen sink.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
 Adheres to best practice

Kitchen hygiene: Improvements will be made regarding the cleanliness of the kitchen including minor repairs to broken tiles and flooring. Cleaning regimes must be recorded, monitored, and include the removal of the unit plinths to clear any debris beneath units, plus areas between units and appliances.

Two areas of flaking paint will be repaired. It was noted that high level sections of the walls had not been cleaned.

A deep clean will be arranged immediately to the entire kitchen. We have reviewed our cleaning regime to ensure that kitchen walls above 2m high are cleaned at least every 12 months, which will be linked with the fan and canopy cleaning.

Kitchen staff have been provided with further inhouse training to ensure cleaning is of the highest importance. NB: Our last food rating was 4 stars. We aim to improve to 5.

We aim to redecorate the kitchen every 3 years with a good quality washable paint. The last time we decorated was 2019 and apart from the two small areas highlighted above, has held up well as is regularly cleaned.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
 Adheres to best practice

BEST PRACTICE:

https://www.food.gov.uk/sites/default/files/media/document/food-safety-checklist.pdf

AA. Pest Control

Pest Control: We have a pest control contract in place and there have been no observations of rodent activity. Pest control contract is monitored by our H&S lead and kitchen staff. Records of inspections are kept in our H&S files for reference. We include own pest control inspections as part of our daily opening risk assessments, including the kitchen and food stores.

Last inspection date:

Remedial works identified: Y/N

Remedial works completed: Y/N/DATE

Remedial works completed Y/N

Next inspection date: Contractor: "Pest Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
 Adheres to best practice

WHAT THE LAW SAYS:

Please review the following

https://www.food.gov.uk/sites/default/files/media/document/Chapter6-Pest_control_0.pdf

The law around employing a pest control company at your childcare provision if you prepare food

Your food business does not legally have to have a pest control contract in place, although you do have a legal obligation to manage pests and have a documented procedure in place to show how you are doing so. The procedure must outline preventative measures and what action you will take should you identify a pest problem.

Identifying a pest problem requires you to monitor your establishment pests and one of the main ways to do this, is to have a contract with a pest control company to visit on a regular basis to inspect, bait and report. Reputable pest control companies know what to look for and where to look.

If the L.A subsequently find evidence of pests, Environmental Health can assume that you are not following your documented procedure and could potentially close you, or at the very least award low food safety rating that you will then need to address. They can also instruct you to get a pest control contractor in to treat.

To summarise, whilst it is not a statutory requirement that you have a pest control contract in place, it would be difficult, if not impossible for you to evidence due diligence if Environmental Health ever had to take formal action.

This would have an effect on the terms and conditions oy your FEEE contract with the L.A, should Environmental Health serve notice on you or award a low food safety rating. Our Environmental Health notify our service of cases such as these.

Best Practise

- Commission a quality pest control company to regularly monitor pest activity
- Act on any findings
- Have a pest control policy in place
- Have pest control procedures in place
- Nominate a lead in your organisation to be responsible for pest control
- Train staff to know what to look for (signs of rodents or other pests) and include pest control in your regular risk assessments.
- Keep on top of hygiene

BB. LOLER Inspections (Lifting equipment)

We have a lift that is tested every 6 months and a record kept of these tests. We also have a protocol for protocol for responding to passenger alarms.

Last inspection date:

Remedial works identified: **Y/N** Remedial works completed **Y/N**

Next inspection date: Contractor: "Lift Ltd"

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

Lifting equipment within a nursery that lifts people including passenger lifts and hoists mechanical needs to be tested every 6 months as do lifting accessories, including slings, shackles, hooks and chains. The inspected and testing is a requirement of the Lifting Operations and Lifting Regulations, 1998.

CC. Welfare and Environment	
We have installed finger guards installed on all vulnerable doors and they	
are inspected as part of our daily risk assessments.	
All staff computer users have had their workstations assessed	

DD. Glazing

We commissioned a safety glazing audit in 2017 and replaced some glazing with safety glazing, while other glazing was filmed with a safety film. All of the safety glazing installed as well as existing glazing filmed was installed to BS 6206, BS 6262 or EN 14449 in vulnerable areas reported in our safety glazing audit.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

EE. Internal and External Housekeeping

General Housekeeping:

Our general housekeeping was less than satisfactory at the time of this audit. We have taken measures to review our cleaning contract and also to discuss with staff at our next H&S meeting.

We noted that resources storage areas had become difficult/unsafe to access because of poor storage practice. Some of the resources were no longer fit for purpose. We have arranged for a day when staff review and sort through all storage/resources to tidy these areas. We will add this to our monthly risk assessments.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Floors, Stairs and Landings:

We came across a few minor trip hazards on door thresholds and a few stair treads that we will immediately repair. The rest of the flooring is maintained in good condition and free of slip hazards. We have non-slip flooring in all wet areas (toilets, kitchen, and wet play areas).

Trip hazard repairs have been booked in to be completed on

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Item stored at height:

We came across unsecure items stored at height (files/folders on shelves in office and resources on shelves in play areas. These were dealt with immediately, but this will be on the agenda at our next H&S meeting with staff. This has been added to our daily risk assessments.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Boiler room and electrical intake cupboard:

We inspected the boiler rooms and electrical intake areas and noted that there was a small amount of combustible materials stored there. These were removed of the time of the audit. This will be on the agenda at our next H&S meeting with staff. This has been added to our monthly risk assessments.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

Internal and External Decorations:

We annually inspect internal and external finishes, including tiling, masonry and paintwork to highlight any major defects and/or serious damage.

Last inspection date:

Remedial works identified: Y/N Remedial works completed Y/N

During this inspection we noted the internal walls to play areas are looking tired with peeling paint. We also noted that some of our external timber windows paintwork was in poor condition with peeling paint and loose window putty/rotten timber.

We have arranged for any loose material to be removed immediately and obtain quotations to repair and redecorate those areas.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

8.3 High Risk Curriculum Areas and Staff Training

A. Health and Safety Training: Induction Training

New staff receive health and safety information during their induction period. Induction training includes procedures for emergency evacuation, a copy of or access to the nurseries' health, safety and welfare policy, accident reporting procedure, location of asbestos containing material, how to report maintenance issues, etc. A formal record of the information given is be placed on staff's personal records. Staff are asked to sign that they have read and understood the HS&W policy.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

It is a legal requirement that all new staff receive health and safety induction training. Keeping induction-training records enables the nursery to demonstrate that health and safety training has been given. It is recommended that a record of the health and safety induction information given be kept on employees' personal files.

The Health and Safety at Work Act 1974, Section 2 (2) (c) 'Without prejudice to the generality of an employer's duty under the preceding subsection, the matters to which that duty extends include in particular—...

...The provision of such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of his employees...'

The Management of Health and Safety at Work Regulations 1999, Regulation 10 'Every employer shall provide his employees with comprehensible and relevant information'

The Management of Health and Safety at Work Regulations 1999, Regulation 13 (2) 'Every employer shall ensure that his employees are provided with adequate health and safety training...on their being recruited into the employer's undertaking; and on their being exposed to new or increased risks..."

B. General health and safety training

All staff have received some health and safety training, and this is recorded in a training matrix and kept up to date by the Nursery Business Manager/Training Coordinator.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

The Health and Safety at Work Act requires employers to 'provide whatever information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of your employees'.

This is expanded by the Management of Health and Safety at Work Regulations, which identify situations where health and safety training is particularly important, e.g. when people start work; because of being transferred or given a change of responsibilities; the introduction of new work equipment or a change to existing work equipment; and or where existing skills may have become rusty or need updating.

You should assess the risks to employees while they are at work and to any other people who may be affected by the way the work is carried out. This will identify the required information, instruction or training required to enable employees to carry out their work safely. Refresher training should also be provided as necessary.

As an employer, you must appoint a competent person or people to help you meet your health and safety legal duties

A competent person

A competent person is someone who has sufficient training and experience or knowledge and other qualities that allow them to assist you properly. The level of competence required will depend on the complexity of the situation and the particular help you need.

When getting help, you should give preference to those in your own organisation who have the appropriate level of competence (which can include the employer themselves) before looking for help from outside. You must consult health and safety representatives in good time on the arrangements for competent help.

Although the HSE states that it's not usually essential for them to have formal qualifications, it can help. The nominated person/s need to be provided with suitable training to allow them to undertake the role they have been nominated for. For example, you wouldn't nominated a person to be responsible for the management of asbestos or legionella in your premises if they do not have sufficient training and experience or knowledge and other qualities that allow them to undertake that role. That is why it is important to provide those nominated for those particular roles basic training such as asbestos awareness and legionella awareness.

Training may include but are not limited to the following:

Fire Safety training (Leadership team or H&S lead person – **Best practise** IOSH Managing safely in nurseries': https://www.iosh.com/training-and-skills/ioshtraining-courses/managing-safely/)
Fire Warden training (all staff)

Working with hazardous materials (nominated responsible person/h&s lead/cleaners) Ladder/access equipment (all staff/cleaners)

Asbestos awareness training (nominated person responsible for management of asbestos and H&S lead)

Water Safety (Legionella) training (nominated person responsible for Water Safety [Legionella] and H&S lead)

8.4 Performance Monitoring and Measurement

A. Active Monitoring

Monitoring of the working environment and review of work systems, premises, plant and equipment are recorded, frequent and systematic. The nursery management team are highly proactive, and any defects are reported and acted upon on a daily basis. We will also be pursuing repairs that have been identified during the H&S walk around and as part of this annual Audit & Premises Inspection Report.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice
- The nursery undertakes a health and safety walk around with the H&S (governor/business owner/chair of trustees/charity chair etc) every term, which is attended the manager and lead H&S personnel. A record is kept of this walk around and an action plan is drawn up and worked through in a prioritised fashion.
- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

The Management of Health and Safety at Work Regulations 1999, Regulation 5

- '(1) Every employer shall make and give effect to such arrangements as are appropriate, having regard to the nature of his activities and the size of his undertaking, for the effective planning, auditee, control, monitoring and review of the preventive and protective measures.
- (2) Where the employer employs five or more employees, they shall record the arrangements referred to in paragraph (1).'

B. Reactive Monitoring

Investigations are conducted for all accidents and incidents. They are proportionate to the event and look to identify root cause and corrective actions. We are also able to seek the advice of the Place Development & Premises Manager for the LBWF Early Years, Childcare & Business Development manager at any time for queries relating to premises compliance and H&S.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

The Social Security (Claims and Payments) Regulations 1979, Regulations 25 (1) 'Every employer shall take reasonable steps to investigate the circumstances of every accident of which notice is given to him...'

8.5 Audit

A. Auditing and Reviewing the OHSWMS

Internal termly walk round inspections of the OHSWMS take place in the form of documented site inspections and formulated action plans, which are reviewed to ensure that corrective action is taken where necessary. A key part of this process is the annual review of the HS&W policy and associated procedures and assessments to ensure that these are current and specific to the nursery.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

An external annual audit and inspection of the OHSWMS takes place and this is completed by a qualified service provider. The audit recommends improvements to HS&W practices and gives timeframes for implementation. These recommendations have been adopted by the nursery within the time frames

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

WHAT THE LAW SAYS:

The Management of Health and Safety at Work Regulations 1999, Regulation 5 'Every employer shall make and give effect to such arrangements as are appropriate, having regard to the nature of his activities and the size of his undertaking, for the effective planning, auditing, control, monitoring and review of the preventive and protective measures.

Management reviews are systematically undertaken by the Head teacher and Nursery Business Manager. They consider HS&W performance indicators such as number of accidents, location of accidents and trend analysis. There is also evidence that audit findings, nursery improvement plans, accident and incident investigations and condition surveys are reviewed and prioritised by the Head teacher and Board of Governors.

- Non-compliance
- Partially complies
- Requires Improvement
- Complies
- Adheres to best practice

8.6 Paperwork review

Paperwork Review	Dates and Notes
------------------	-----------------

Minutes documenting H&S	May 2019
Site Specific Risk Assessments	November 2019
Last fire drill	20.11.2018 timed at 2 minutes 31 seconds
Fire alarm test	Every Monday morning 04.11.19 Engineer called
Emergency lighting test	Emergency Lighting Annual certificate
Fire extinguishers inspection	04.11.19
Firefighting equipment annual contractor inspections	Fire Ltd 02.2019
Last test of lockdown procedures	Autumn 2018
Legionella prevention/water contractor checks	Legionella Ltd 07.11.21
Gas Appliances Inspection	Gas Ltd 02.10.20
Electrical Tests (5 yearly fixed wiring)	Electrical Ltd June 2021
PAT Testing external testing	PAT Ltd 08.2019
Stage Lighting/rigging	Some older items to be sold. Checked in 2018 and due to be re-tested.
Roller Shutters	Not applicable
Gates and Barriers contractor checks	Gates and Barriers Ltd 11.2019
Play equipment contractor checks	Play Ltd 02.2019
First Aid Log	06.11.19
Air conditioning units	Air Con Ltd 04.06.20
LOLER Inspections	Lifts Ltd October 2019

8.7 Physical Inspection – Observations and Recommendations

8.7	Location – Observ	Defect	Remedy	Time Frame
1.	Nursery wide	Too much paper displays along evacuation routes – Fire safety	Short Term – use flame retardant spray on displays Long term – make breaks in displays every 3 metres of at least 1 metre	2 weeks 3 months
2.	Conference room and other areas	Socket covers	Remove all socket covers Protective socket covers for 13-amp power outlets RoSPA recommends that all electrical equipment is stored safely away when not in use and children are supervised and warned to keep away from plug socket outlets until they are capable of understanding the risks and are able to use them safely. 13-amp power sockets made to BS 1363 incorporate a shutter mechanism, which prevents inappropriate access to the live connectors. RoSPA therefore does not consider it necessary to recommend the use of socket covers.	Immediate
3.	Office store cupboard	Light needs diffuser and smoke detection required	Install diffuser and alarm	1 week/ 1 month
4.	Teaching rooms	Board cleaner/spray stored at low level	Store all cleaning products/sprays on higher level shelving out of reach of children	Immediate
5.	Back of site managers office	Signage	Fire door Keep Clear (Blue Sign)	1 week
6.	ICT suite	Signage	Fire door Keep Clear (Blue Sign)	1 week
7.	Carousel suite	Signage	Fire door Keep Clear (Blue Sign)	1 week
8.	Teaching room 4L	Tidiness	Clear store cupboard of trip/slip hazards	1 week
9.	Teaching room 4S	Diffuser	Put diffuser in place in store cupboard	1 week

10.			Recorded checks	
	Any ladders above 3 steps	Inspection	every 3 months	immediate
11.	Boiler room	Switch room	The switch room needs to have all materials removed from this location and a lock put on the door and signage reading "authorised access only".	ASAP maximum 1 month
12			There are loose slates in the gutter above the external play area and also above the front entrance that must be removed/repaired	Immediate
			There is large vertical crack in a boundary brick wall that needs to be investigated to determine if the wall is safe.	1 month
	External structure of building and boundary		There were several leaks to the back of rainwater pipes and gutters that need repairing as they are damaging the structure internally and externally.	1 week/3 months
			We noted large plant growth at high level from brickwork. Have been advised to remove as it will damage brickwork and could present a potential risk of falling brick/mortar debris.	1 month
			There was a build- up of leaves in gutters and downpipe offsets which can cause dampness internally due to rainwater being obstructed. This is generally picked up by our	1 week /ongoing

Nudit I	nspection of:	Date:			
			maintenance person but needs to be actioned as regular as possible.		
9.	Guidance to nursery				
	On reviewing this audit and inspection report, the Nursery Manager should report to the appropriate committee (owner/chair of trustees/charity chair etc) and if necessary, a landlord.				
	Referencing the recommendations, the nurseries' leadership team should put together a prioritised action plan to rectify the identified deficiencies. The plan should set out clear actions, identify task completers and associate target timescales.				
10.	Executive Summary				

Insert Nursery Name and Date

11. Inspection and Audit Action Plan					
Item	Actions required	Time Frame	Date Completed		
OSH&W Policy	The policy should be updated to include and acknowledge the extensive activities of the Nursery Business Manager and nominated H&S lead.	Next Review			
Risk Assessment	Whole nursery risk assessment to be reviewed annually	annually			
Chemical safety – Control of Substances Hazardous to Health (COSHH)	COSHH risk assessments should be completed for all products used on site and a copy of these made available in the fire book and in the location where these chemicals are stored/the Site Supervisors Office.	1 month			
Health and safety training	Produce an induction package for new and supply staff that includes essential information on health and safety and review the health and safety training needs of employees and arrange for them to receive the necessary training.	1 month			
Communication and consultation	Arrange to install a bespoke health safety and wellbeing notice board in the staff room to that it is easy to consult with staff, and to share information regarding all health and safety matters.	3 weeks			
Fire Safety Management	 Arrange for the necessary fire safety signs on the exterior doors of main buildings. Arrange for the switch room to be cleared of all combustible materials and the door locked shut with appropriate signage 	2 weeks ASAP			
Asbestos	An asbestos management survey is to be commissioned asap and the management of asbestos policy/procedures reviewed and improved. Report condition and location annually to business owner/chair of trustees, charity chair etc.	Annually			

Audit and Inspection of:

Legionella / water	 Implement any actions identified in the legionella risk assessment as described by the competent person Report outcome of management regime on an annual basis to a full meeting of Governors 	Annually	
--------------------	--	----------	--

Audit & Premises Inspection Report date.....

Page **31** of **31**