



Health and Safety Policy

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| Executive Leadership Team (ELT) Owner: | Chief Operations Officer |
| <i>Unless there are legislative or regulatory changes in the interim, this policy will be reviewed annually. Should no substantive changes be required at that point, the policy will move to the next review cycle.</i> | |

| Version Control | | |
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| Version | Date | Changes |
| 1.0 | 11/12/2025 | In-cycle policy review and re-approval |
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ADDITIONAL RESOURCES FOR INTERNAL USE:

Health and Safety Policy Operational Procedures can be accessed [here](#).

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1. Policy statement

E-ACT is committed to ensuring the health, safety, and welfare of all employees, visitors, and contractors. Our aim is to create a safe working environment and promote a culture of safety throughout the organisation.

Our Commitment:

- 1.1 Legal Compliance: We will comply with all relevant health and safety legislation and regulations, including the Health and Safety at Work Act 1974.
- 1.2 Risk Management: Regular risk assessments will be conducted to identify hazards and implement appropriate control measures to eliminate or minimise risks.
- 1.3 Employee Responsibility: All employees are encouraged to take personal responsibility for their health and safety and that of their colleagues.
- 1.4 Training and Awareness: We will provide necessary training, information, and resources to ensure that employees are equipped to work safely and understand their health and safety responsibilities.
- 1.5 Consultation and Communication: We are committed to maintaining open lines of communication regarding health and safety matters. Employees are encouraged to report hazards and contribute to safety discussions.
- 1.6 Continuous Improvement: We will regularly review our health and safety policies and practices to ensure their effectiveness and make improvements where necessary.
- 1.7 E-ACT are committed to promoting a health and safety culture through effective leadership.
- 1.8 A HSE approved Health and Safety Management system (Plan Do Check Act) is in place to ensure the above commitment can be achieved. All employees will play a part in its implementation.

This policy statement is endorsed by the leadership of E-ACT and is communicated to all employees. Together, we will work to maintain a safe and healthy workplace.

2. Policy scope and purpose

This policy outlines the Trust's responsibilities and obligations regarding health and safety. It also sets out the responsibilities of the individual to ensure compliance. The policy aims to ensure that everyone can work in a safe environment. This policy applies to all employees of E-ACT, contractors, agency staff, visitors, and students.

Related policies:

- Family Friendly Policies
- Equality and Diversity Policy
- Alcohol and Other Substance Misuse Policy
- Academy Visits Policy
- Minibus Policy
- Lettings Policy
- Fire Safety Policy

3. Roles and Responsibilities

3.1 Our Roles and Responsibilities summary sets out the specific health and safety duties allocated to particular roles within E-ACT.

3.2 Irrespective of the support and resources provided by central functions, each Headteacher remains responsible for applying the Health and Safety Policy, roles and responsibilities, and arrangements within their academy.

3.3 All senior roles and those with explicit health and safety responsibilities are expected to act as health and safety leaders, fostering a positive health and safety culture. They are accountable for effectively implementing the health and safety policy.

3.4 Each academy is required to complete the Academy Health and Safety Plan and review it annually, or sooner if changes occur that affect its application.

3.5 All members of the Trust, including employees, visitors, contractors and volunteers share responsibility for health and safety. We all have a duty to keep ourselves and others safe.

4. Health and Safety Arrangements

We maintain a Health and Safety page on Connect that provides access to the Trust's Health and Safety Arrangements and procedures.

This policy permits the development of local and trust-wide arrangements, procedures, and guidance without requiring separate approval by the Trust Board, unless the Board specifically requests it.

Any queries regarding health and safety documentation should be referred to the relevant academy's Health and Safety Committee, who will consult with the central team if necessary.

5. Monitoring, Consultation and Auditing

Effective monitoring and consultation are essential to maintaining a safe environment for all site users. This section outlines the processes for departmental meetings, health and safety committees, and auditing arrangements that ensure compliance with statutory requirements and Trust policies. These mechanisms provide structured oversight and enable timely identification and resolution of health and safety issues.

5.1 Departmental Meetings

- a. Academy departmental meetings are held at least termly or monthly for high-risk departments (e.g. Science, DT, Art, Cookery, PE)
- b. The purpose of the meetings is to review:
 - i. Departmental risk assessments and compliance tasks
 - ii. Discuss health and safety concerns raised by staff
 - iii. Update on training and competency requirements
- c. Minutes of the meetings should be shared with the Headteacher and uploaded to the designated health and safety system.
- d. Unresolved issues are escalated to the Health and Safety Committee

5.2 Health and Safety Committee Meetings

- a. Each academy will hold a Health and Safety Committee meeting at least three times a year (usually once per term).
- b. The Headteacher will chair the meeting.
- c. Membership should include, where possible (but not limited to):
 - i. Headteacher
 - ii. Estates Business Partner or Site Manager
 - iii. Health and Safety Coordinator
 - iv. First Aid Lead
 - v. Educational Visits Coordinator
 - vi. Key Department leads (High risk departments must attend)
 - vii. Radiation Protection Supervisor (where appropriate)
 - viii. Fire Safety Manager
 - ix. Union or Staff representative (where appropriate)
- d. The Health and Safety Committee discuss all matters relating to the health and safety of site users. This includes:
 - i. Accidents, incidents, and ill health
 - ii. Significant premises issues arising since the last meeting
 - iii. Internal & external Audits and action plan progress
 - iv. Premises/Estates Report
 - v. Departmental reports including educational visits
 - vi. Radiation protection update
 - vii. Training and competency update
 - viii. Matters raised by employees or union representatives
 - ix. Policy compliance

- x. Risk register and action plans
- e. Minutes should be shared with all staff
- f. Significant risks are escalated to the Chief Operations Officer and Education Director
- g. Separate Health and Safety Committee Procedures define detailed terms of reference, membership and reporting protocols.

5.3 Auditing

- a. External Audits
 - i. External audits are carried out by the Board's appointed competent Health and Safety advisor every two years across the Trust
 - ii. Each academy receives an individual audit report
- b. Internal Audit
 - i. An internal audit cycle operates to provide mid-cycle reviews and continuous assurance.
 - ii. Internal reviews complement external audits and verify compliance with statutory and Trust requirements.
- c. Action Tracking
 - i. The Headteacher should ensure completion of actions arising from audits
 - ii. Audit findings inform targeted training and system improvements.

6. Evaluation and Reporting

Continuous evaluation and reporting are essential to sustaining high standards of health and safety across the Trust. This section details the reporting requirements, internal assurance processes, and compliance monitoring systems that provide senior leaders with clear visibility of performance and risks. These arrangements ensure accountability and support ongoing improvement.

6.1 Termly Health and Safety Reports

- a. Headteachers provide termly health and safety reports, which include:
 - i. Key Risks, including accidents, incidents and near misses
 - ii. Outcomes of academy-level health and safety meetings
 - iii. Progress against external audits and fire risk assessments
 - iv. Compliance with educational visits requirements
 - v. Completion status of required health and safety tasks and risk assessments

6.2 Internal Assurance and Monitoring

- a. An internal assurance process operates alongside external audits and provides ongoing verification of compliance.
- b. Structured reporting lines and escalation protocols are in place to address compliance issues promptly.
- c. Insights from audits and reports inform training, provide targeted support, and drive system improvements.

6.3 Central Compliance Monitoring Systems

- a. E-ACT's central health and safety monitoring systems record audit outcomes and track compliance checks.
- b. Reporting from these systems supports termly governance reviews and health and safety meetings.

6.4 Annual Policy Review

- a. The health and safety policy is reviewed annually and updated sooner if:
 - i. Significant organisational changes occur
 - ii. New legislation or technology is introduced
 - iii. Audit findings or incidents indicate a need for change