Nursery premises, equipment and activities | RAA19

Health & Safety Risk Assessment			RAA19
Establishment name: The Orchard Nursery	Initial assessment	☐	Date of assessment: 17th November 2026
	Review	☒	Date to be reviewed by: August 2027
	Following a significant change	☐	Assessor(s): Emma Middleton
	Following an incident	☐	Joanne Martin
Area/Process/Equipment being assessed: Nursery premises, equipment and activities			

Introduction

Risk Assessment

What are the hazards?		Who might be harmed and how?	What are you already doing to control the risks?	Current risk level		
				L (1-3)	S (1-3)	R (1-9)
Administration of medication						
1.	**Administration of Medicines:** children being given incorrect mediation / missing medication	Children Ingestion of incorrect medication or dose / exacerbation of ailment due to under-treatment	• Administration of Medication policy in place. • Responsibility for the provision of medication remains the parent's responsibility. No medication is administered unless written parental consent is provided on the registration form and individual medical forms on eyLog. • Medicine will only be administered to a child where written permission has been obtained from parent and/or carer	1	2	2

			• All administration is recorded on eyLog. • Staff have sufficient information about the medical condition of any child with long-term medical needs including health issues such as allergies, food intolerances and asthma. This is completed on a health care plan. A risk assessment will be completed and all staff are made aware through email. • Appropriate arrangements in place for the safe storage of medication. Medicine is stored in the lockable cupboard in the corridor, or in the fridge in the outside cupboard. Asthma inhalers adrenalin auto injectors stored out of children's reach but close to hand for immediate access. Stored in lockable cupboard in the corridor. Out of date/redundant medication returned to parents. • Employees who administer specialist medications and invasive procedures (e.g. adrenalin injection, etc.) to receive appropriate training. Currently, these employees are all staff with first aid certificate, and are trained for the following functions Epi pen training. • Only senior members of staff to administer medicines. • Allergy and/or asthma action plans are in place for specific children. Relevant staff have been briefed in the contents of these plans and the actions to take in an emergency. • Staff will have training if the administration of medicine requires medical or technical knowledge • Setting staff have received allergy awareness training through the settings online training portal – NoodleNow. Responsibility is assigned at every meal / snack time for verifying that all food and drink served complies with any child specific dietary / health requirements. • At all meal / snack times children wear a rainbow allergy lanyard, highlighting the child's allergy, intolerance or preference and child's photo. • Asthma inhalers and adrenalin auto injectors stored out of			
Animals in nursery						

2.	**Animals:** exposure to disease from animals or physical injury	Children, employees Disease, bites, scratches, extreme distress	• Animal(s) purchased from reputable suppliers. • Children instructed to wash their hands before and after contact with animals. • Cuts and abrasions on exposed skin of hands and arms is covered. • Employees or children with known allergic reactions to animals, bedding, feed (such as nuts) to avoid contact. • Dogs (except guide and listening dogs, police dogs, therapy dogs) are not allowed on any part of the nursery site or premises during opening hours. • Arrangements are in place to clean and disinfect cages at regular intervals by employees. • Employee is made responsible for the welfare of the animals including weekend and holiday periods. • Appropriate arrangements for the disposal of animal waste/bedding and deceased animals. • In line with the EYFS statutory requirements, dogs subject to Section 1 of the Dangerous Dogs Act 1991, including the XL Bully type, are not permitted on the nursery premises at any time.	1	1	1
Caretaking and cleaning activities						
3.	**Caretaking and Cleaning**	Employees, children, contractors, members of the public	• Separate risk assessment completed for the activities of cleaning and caretaking staff employed by the nursery.	-	-	-
Hazardous substances						
4.	**Hazardous substances:** exposure to hazardous substances	Employees, children Inhalation/respiratory problems, chemical burns, ingestion of hazardous chemicals	• The cleaning function is contracted out to our cleaner. (Sophie Ellis) • Pest control around site contracted to competent external contractor (Pest Force) • Inventory kept of all hazardous substances used by employees along with the relevant Safety Data Sheet (SDS).	1	2	2

			• Any hazardous substances used on-site (whether by contractor or not) are stored in labelled containers and secured from unauthorised access in our locked cleaning cupboard. • Where hazardous chemicals are used in activities undertaken by employees, separate COSHH risk assessments are undertaken which are informed by the relevant SDS. These are recorded and stored in the office. • Staff briefed in findings including safe method of use, requirements for personal protective equipment (if any) and emergency arrangements including First Aid.			
Contractors on site						
5.	**Contractors:** injuries arising out of contractor activities on site.	Employees, children	• Contractors are required to comply with the [Health & Safety Policy and relevant risk assessments) and are informed of key aspects of this policy via email. Pre-contract meetings held with contractors to establish if they are going to create any hazards and how these will be controlled via risk assessment. • Contractors sourced from employer approved lists or via local contractor approval process if sourced locally. • Contractors informed on pre-contract information about hazards posed to them whilst on site. • Asbestos risks addressed as described above. • Contractors will be provided a reasonable timeframe for the safe completion of works. • Wherever possible, building or hazardous work carried out in nursery holiday period or weekend. Where not possible, work area will be clearly segregated. • Materials stored on site kept to a minimum in designated secure area. Contractor waste also stored in a secure area. • Appropriate welfare facilities will be provided for contractors on site. Where not possible, welfare facilities will be provided by the contractor and agreed in the contract. • Contractors are required to sign in and out as for all visitors. • DBS status indicated by emailing details and wearing a visitors lanyard whilst on site. Contractors are either asked to provide a	1	2	2
	injuries to contractors arising out of failure to communicate on-site hazards	Contractor staff Exposure to asbestos fibres, injuries arising from lack of knowledge of basic emergency procedures		1	1	1
	safeguarding	Children Safeguarding concerns		1	1	1

			DBS or letter of assurance stating their name, company name, address their job role and the work they are carrying out and the dates the work is being completed. This needs to be on company headed paper. • Contractors without DBS clearance will be accompanied at all times when on site. • Emma Middleton will ensure that large building projects are notified to the HSE as required by the Construction (Design & Management) Regulations 2015.			
Management arrangements and supervision						
6.	**Management Arrangements and Supervision:** injuries resulting from a lack, or suitability of supervision	Employees, children, Cuts, bruises, fractures	• Enhanced DBS / Barred list disclosure of all supervising employees who work directly with children and who work in the premises when children are present. Records are maintained. • All other people, such as contractors, who may have to visit the site at short notice will be supervised at all times whilst in the Nursery. • Clear handover procedures for employees. Children only handed over to a known adult. Wherever practicable, this known adult can only be changed with written permission from the parent/guardian. • Visitor controls in place at main reception of the Nursery. No external access to the unit without first going through main reception. External doors are secured unless supervising employees present e.g. at handover time etc. • Visitor lanyard with visitor badge worn at all times. • The staffing ratios described in the Statutory Framework for Early Years Foundation Stage are adhered to. • Each class or pupil group is led by a level 3 practitioner during all directed time. These employees are: Jo Martin, Kelsie Moss and Corinne Nye. • Employee to pupil ratios complies with EYFS Welfare Requirements. • Class sizes are appropriate for the space available.	1	1	1

	Outdoor Education and Off-Site Visits	Employees, children	• Separate Off-Site visit risk assessments undertaken in line with *Devon Outdoor Education, Visits and Off-Site Activities Health and Safety Policy* • A member of staff with a valid Paediatric First Aid certificate is always present. • Precise details will be identified in the SOP risk assessment for the visit concerned.	-	-	-
Display screen equipment						
7.	**Display Screen Equipment (DSE):** injuries arising out of using DSE.	Employees Fatigue, eye strain, upper limb problems and backache from incorrect postures.	• Separate DSE Assessment carried out on identified DSE users and issues identified in these assessments actioned accordingly.	-	-	-
Welfare and work environment						
8.	**Work environment:** inadequate welfare facilities	Employees, children Lack of thermal comfort, health problems, infection, scalding risk	• Adequate heating, lighting and ventilation maintained. • Ventilation systems / air conditioning units maintained by Neil Piper (NRP technical Service LTD) • Furniture arranged to allow safe circulation of employees and children. • Toilets supplied with hot and cold water, soap and drying facilities. • Children supervised when hand washing prior to eating and after curriculum activities and toileting. • Separate toilets provided for employees. • Toilet facilities for children meet the minimum 1 WC and hand basin for every 10 children over 2 years requirement. • TMVs installed and maintained to allow safe hand washing. • Potable water is available in multiple outlets and is identified by the drinking water units. • A space for staff to consume food/drinks and take breaks away from the workspace is provided. Located in the log cabin in the garden.	2	1	2

			• Daily cleaning of all areas through our daily cleaning regime and contracted cleaner out of nursery hours. • Cleaning monitored by employees on daily basis – daily visual inspections carried out prior to the commencement of each session to ensure facilities and furniture is in an acceptable clean condition. • Waste disposal arrangements in place			
9.	**Infection control:** exposure to infection	Employees, children Respiratory infection, gastroenteritis	• Stay at home if you have symptoms of an infection e.g. gastroenteritis (diarrhoea and vomiting) or influenza-like illness and not return to work until 48 hours have passed since last fever and diarrhoea and/or vomiting episode • Hand-hygiene and good respiratory hygiene: 'Catch it, bin it, kill it' messages promoted – signs and notices displayed. • Cleaning arrangements in place with as described in line 8 above. • Frequently touched surfaces will be cleaned often by our daily cleaner. • The uptake of vaccinations amongst staff will be encouraged. • Occupied spaces well-ventilated whilst maintaining thermal comfort. • Ventilation systems maintained as outlined in line 8 above. • Infection control procedures in place and followed for the cleaning removal of bodily fluids: suitable anti-bacterial cleaning product and disposable gloves provided. • Emma Middleton, will in the event of an outbreak follow guidance in Health protection in schools and other childcare facilities - GOV.UK (www.gov.uk) and implement recommendations. • *It is important that your business continuity plan identifies the settings actions in an outbreak situation DfE emergency planning and response* ***Ventilation*** • Ventilation and AC systems working optimally.	3	1	3

			• Heating used as necessary to ensure comfort levels are maintained when the building is occupied. • Keep windows open wide enough to provide some natural background ventilation and open internal doors to increase air flow. • Open windows fully when rooms are unoccupied for longer periods to purge the air (e.g., lunch times and before and after school). • Action taken to prevent occupants being exposed to draughts. For example, partially open high-level windows as opposed to low-level windows, close external doors and arrange the furniture if appropriate and possible. • Use air conditioning for good air circulation. • Air conditioning systems that normally run with a recirculation mode set up to run on full outside air. • Occupants encouraged to wear additional, suitable indoor clothing. (If they have to wear coats, scarves and other outdoor clothing the room would be considered too cold, and the above steps must be considered). • Ensure staff meetings and insets are in rooms with suitable and sufficient ventilation A robust risk assessment process should include the following: • How is each room in the establishment being ventilated? • How many people are going to be using the room – more people greater the risk • What activities are being done in that room – lots of people talking, shouting, more risk • C02 monitors are only a tool to identify poorly ventilated areas • HSE information on ventilation in the workplace *Overview - Ventilation in the workplace (hse.gov.uk)* • Simple resource to support schools with ventilation and CO2 monitoring*: CoSchools - tools for healthy schools*			

			•			
Fire and other emergencies						
10.	**Fire:** exposure to fire or smoke.	Employees, children, contractors, members of the public	• A separate Fire Risk Assessment (FRA) has been completed. FRA carried out in August every year and is located on the computer in the office. • A Fire Evacuation Plan has drawn up and shared with all employees. It includes a site plan which identifies the location of service isolation points.	-	-	-
11.	**Security:** major incident, exposure to violence, child absconding premises	Children, employees	• Emergency planning includes invacuation and lockdown arrangements. • Staff have been briefed in its contents and arrangements. • Procedures have been communicated and practiced by children. • **Evacuation to offsite location procedure** in place and all staff aware. • **Fire safety procedures** are in place and all staff are aware. • **Lock down procedure** is in place and all staff are aware.	-	-	-
First Aid						
12.	**First Aid:** inability to access first aid assistance.	Employees, children, contractors, members of the public. First aid not being available when needed.	• All Employees have received Paediatric First Aid training. Paediatric First Aider on site at all times when children are present. • Whilst children are eating, a member of staff with valid PFA certificate will be in the room. Responsibility is assigned at every meal / snack time for verifying that all food and drink served complies with children's individual dietary / health requirements. • Training is updated every 3 years. • Notices of current first aiders/emergency first aiders are displayed. • The nearest Minor Injuries Unit is Minor Injuries unit at Victoria Hospital at Wimborne	1	2	2

			• The nearest A&E is Royal Bournemouth Hospital, Castle Lane, 4.2 miles. • First aid boxes are marked and available in all main children's rooms, kitchen and outside area. • An employee is responsible for checking and filling first aid boxes. Corinne Nye. • All accidents recorded on our online recording system (EyLog), using tablets. Parents are also required to sign a separate acknowledgement form on collecting their child • Parents notified at handover if their child suffers a head bump, and a leaflet shared with the parent on signs and symptoms. • First Aid supplies taken out on every visit off the Nursery premises and adequately trained first aid cover arranged which will include a Paediatric First Aider. Details included in specific visit SOP risk assessment record. •			
Kitchen activities						
13.	**Kitchen activities**	Employees, children	• Separate risk assessment completed for the activities of kitchen staff employed by the nursery.	-	-	-
Lone working						
14.	**Lone working:** inability to access assistance when needed in an emergency.	Employees, contractors. Assistance not being available when needed.	• **Lone working procedure** in place and all staff are aware • Time spent working alone eliminated or reduced where possible • Communication arrangements in place with line manager / other employees if working alone or when meeting known aggressive parents. • Arrangements in place to notify manager at end of lone working activity and procedures to be followed if this notification is not received. • Only agreed tasks undertaken when working alone. • No work at height. • Other employees on site notified of location / estimated duration of task if working on site remote from others.	2	1	2

			• Adequate security in place; access to site controlled as outlined in the security risk assessment. • Use of visitor badges / signing in screen. Access not granted to unknown callers. • Key holders strictly controlled and numbers kept to a minimum. • In the blossom room (Speech and language room) door left open, where possible, and stair gate closed. *Viewing window located in the room.*			
Manual handling of objects and people						
15.	**Manual handling:** injures when moving loads or children.	Employees, children Back strains when handling, injuries to children when being handled. Child may incur an injury due to poor manual handling procedure. **Joint, bone and head injuries** **Lifting a child by the wrists/arms can result in a common injury called "nursemaid's elbow," also known as "pulled elbow."**	• Manual handling of items other than normal office type stationery or files avoided where possible. • Where appropriate, trolleys or sack truck used to transport heavy items. • Staff have received briefing in the safe use of any specific moving and handling devices. • Where possible, loads are split to reduce weights. • Team lifting is used as appropriate. • Staff involved in manual handling tasks given briefing in safe lifting techniques as part of manual handling training. • Individual assessments carried out on any young people requiring physical handling leading to a Handling Plan for the individual concerned. • Staff involved in the moving and handling of young people are trained in this plan. ▪ Children and young people (over 2 years old) should be encouraged to assist with their own mobility, whenever possible. ▪ Children and young people to use the steps on the nappy change unit when staff are changing their nappy. Children should be supervised whilst doing so. ▪ Individual Assessments carried out on any young people requiring physical handling leading to a Handling Plan for the individual concerned.	2	2	4

			▪ Children are never to be lifted up by the arms or wrists. The correct procedure is to lift them under the arm pits using both hands and pull them close into your body. See manual handling procedures. ▪ All moving and handling of a child or young person should be undertaken in a caring, sensitive manner, respecting their dignity at all times. ▪ Manual handling for childcare professional training through Noodle Now will be conducted at the start of employment and during induction. Regular face to face staff meetings/training sessions will be provided for ongoing training. ▪ Manual handling training records are held on the 'training matrix' on the office computer and the frequency for refresher training is every two years.			
Premises related hazards (external)						
16.	**Premises related hazards (External):** injuries sustained from building / play area fittings or fixtures	Children, employees Cuts, grazes, bruising, potential limb fracture	▪ Please see **Health and Safety Procedures and arrangements** specific for the nursery. ▪ Regular building and site inspections carried out by Emma Middleton ▪ Play equipment and safety surfacing is age-appropriate and installed and maintained to meet the BS EN 1176 and 1177 standards. ▪ Fixed (e.g. climbing frames) and mobile (e.g. scooters, tricycles etc) play equipment inspected visually each time it is used by supervising employees who are briefed about what to look for. ▪ Fixed and mobile play equipment inspected termly by Carol Bailey. ▪ Annual independent inspection of fixed equipment carried out by Sport Safe and report issued. ▪ Faulty items identified at any stage removed from use and reported to Emma Middleton. ▪ Children are involved in discussion about playing safely and understanding risk. ▪ Shaded outdoor play space provided to shelter children from excessive sun, using gazebos.	2	1	2

			▪ Plants which have highly poisonous elements such as yew, mezereum and laburnum will not be planted on the site. ▪ Children's access to other more common but mildly toxic plants such as tomato plants and daffodils will be controlled by monitoring, supervision and discussion with children. ▪ Play areas secured using fencing. Employee supervision in the vicinity of any gates. Gates leading out of the play space are secured. ▪ The outdoor play space is supervised by employees. Staff ratio complies with EYFS Welfare Requirements. ▪ Employees supervision accounts for all areas of the play space with specific attention given to any areas with restricted vision, especially at the end of the back garden. Appropriate additional measures in place eg staff to monitor closely. ▪ Children will have no unsupervised access to ponds. The play area is itself secured using fencing and the pond is located on the school field and is again secured using fencing ▪ No vehicular access to any part of nursery unit play area.			
	exposure to toxic plants	Children Severe sickness, vomiting		1	1	1
	injuries arising from misadventure/poor behaviour	Children Injuries arising from misadventure, physical conflict resulting in bruising, cuts				
	falling into ponds	Children Potential drowning, extreme distress		1	1	1
Premises related hazards (internal)						
17.	**Premises related:** injuries sustained from building services, fittings or fixtures.	Employees, children	• All building maintenance / inspection records maintained by Carol Bailey. • Regular building and site inspections carried out by Emma Middleton and Carol Bailey. • Defects reported to management immediately.	1	1	1

18.	**Glazing:** contact with hazardous glazing	Employees, children Cuts from broken glass	• Safety glazing (BS6206 or BS EN12600) or safety film used in all high-risk glazing areas. • Privacy film used on all windows exposed to public for safeguarding and privacy reasons.	1	1	1
19.	**Doors:** finger entrapment in doors.	Children Cuts, fractures, amputations	• Finger guards on door hinges for identified high-risk doors. These are located on all doors where children have access too.	1	1	1
20.	**Electricity:** exposure to live electricity	Employees, children, contractors Electric shock, potential death	• 5-yearly electrical installation undertaken by competent contractor. Report goes to the manager for action as appropriate. All code 1 and 2 non-compliances will be addressed. • Distribution board cupboards are labelled, secured against unauthorised access and are not used for the storage of combustible materials. • Sufficient sockets available to reduce use of extension cables and to avoid over-current. • All portable electrical appliances inspected and where applicable tested by annually by Stuart Marshall Electrical service. • Pre-user checks on hand-held electrical equipment. Staff briefed in what to look for. Employees to report defective plugs, leads, wires and cables to the manager. Defective items will be removed from use by the manager. • Staff personal electrical equipment not used unless subject to inspection / test. •	1	1	1
21.	**Water safety:** exposure to legionella bacteria	Employees, members of the public. Elderly building users or those with suppressed immune system.	• Separate legionella risk assessment and water hygiene logbook held on site in the office.	-	-	-

		Inhalation of water aerosol leading to bacterial infection, potential fatality	• A written scheme of management has been created which outlines local arrangements for the management of legionella. This is reviewed annually. • Flushing if little used outlet undertaken by management team on return after Christmas closure week. • Monthly water temperature carried out by Lorne Stewart. • 12-monthly reports go to Emma Middelton for action as required. • The following staff have undertaken Legionella Duty to Manage training Emma Middleton and Carol Bailey. • Thermostatic Mixing Valves (TMVs) fitted to prevent scalding on all hand wash basins. • TMVs maintained on an annual basis by Lorne Stewart • Findings go to Carol Bailey for remedial action, as necessary.			
	Scalding hazard	Children, employees		1	1	1
23.	**Asbestos:** exposure to asbestos fibre	Employees, contractors, Inhalation of asbestos fibres, asbestosis, potential for fatal lung cancers / mesothelioma	• No Asbestos on site.	-	-	-
24.	**Gas:** fire, explosion.	Children, staff, contractors Severe burns, potential fatality	• Annual gas maintenance and gas tightness testing by Gas Safe accredited technician (SDC Plumbing) Reports go to Emma Middleton / Carol Bailey for remedial action as necessary. • CO alarm installed.	1	1	1
			Slips, trips and falls			
25.	**Slips, trips and falls:** internal and external spaces and circulation routes	Employees, children, members of the public, contractors Cuts, grazes, bruising, potential limb fracture	• Slip/trip hazards controlled by process of regular site inspections. Reasonable housekeeping standards maintained and work areas kept tidy and clear of obstructions or objects lying around that may cause people to trip • Defects noticed by staff and reported to management.	2	1	2

	toilet areas	Employees, cleaning staff, children Cuts, grazes, bruising, potential limb fracture	• External pathways and steps are kept clear by regular maintenance. In icy conditions, Management teams to assess and use de-icer to make the areas safe. • Any specific high-risk areas in external circulation spaces are being managed such as potholes/broken tarmac/uneven paving slabs by using local trades people. • Corridors and internal circulation spaces are kept free from obstacles and a trip hazards. • Trailing cables are avoided by providing sufficient socket outlets to minimise trailing cables crossing circulation spaces. Where these cannot be avoided cables are bound together using spiral wrapping bands or placed behind furniture. • Floor surfaces and carpets maintained in good condition. • Sufficient barrier matting is provided at entrances to soak up rainwater ingress. • Slip resistant flooring is provided where water contamination is unavoidable such as circulation spaces, toilet areas, sink areas, eating areas. • The following specific arrangements for the response to ad hoc contamination/spills elsewhere around the nursery. Signs to be erected and spills cleaned up and dried immediately. • Wet cleaning methods only used out of opening hours times.			
Vehicle and transport issues						
26.	**Vehicles:** vehicle pedestrian conflict in nursery car park	Employees, children, members of the public, contractors Impact injuries, limb fractures, potential fatality	• Pedestrians and vehicles are kept apart as far as possible by: barriers, segregated footpaths, signage and zebra crossings. • Clear warning signs and speed reduction measures are in place • Parking bays clearly marked. • Arrangements in place for large deliveries to be made out of peak activity times. • Where appropriate, shrubs are cut back/reduced in height to improve vision. • No parents allowed on site car park.	1	1	1
Vulnerable persons and stress						

27.	**Vulnerable persons:** people at greater risk within the workplace	Employees, young employees / work experience placements Strains, fatigue, potential fatalities	• Separate Risk Assessment carried out on all expectant mothers and, where appropriate, alternative tasks arranged. • Separate Risk Assessment carried out if Work Experience students have a work placement at the nursery. This will be returned to the secondary school / college for parental information. • Work experience students will be inducted in H&S arrangements, safeguarding and supervised at all times. • Separate Personal Emergency Evacuation Plans (PEEP) in place for any member of staff whose disability limits their ability to follow the general Fire Evacuation Plan.	-	-	-
	work related stress	Employees Mental and physical ill health	• Employer policy for management of stress available to guide local management arrangements. • Nursery managers are aware of indications of stress in others. • Return to work procedure following sickness absence will identify need to stress risk assessment. • Stress risk assessment carried out where appropriate and additional support obtained as required.	-	-	-
			Work equipment			
28.	**Work equipment:** injury caused by damaged or defective equipment	Employees Cuts, bruising, electric shock.	• Work equipment on site will be used for the purpose for which it was designed. • Staff receive verbal briefing in safe working method based on manufacturer's instructions. • Staff instructed to carry out pre-user checks on hand-held tools and know to report defects. • Any guards supplied with machinery will be kept in place and in working order. • Work equipment is maintained eg JLA or Caterworx for kitchen equipment • Personal protective equipment provided for use of work equipment as appropriate.	1	1	1

Work at height						
29.	**Working at height:** falls from stepladders / kickstools whilst accessing shelving and storage areas, putting up displays	Departmental staff Substantial injury: bone fracture, sprains / bruising, concussion, potential fatality	• Only lower-risk working at height activities < 30 minutes duration and using stepladders / kickstools equipment < 2 m in height will be undertaken by nursery staff. Higher risk tasks > 2 m will be undertaken by school care taker or local trades men. • Storage of items in cupboards / shelving is arranged to reduce the need for working at height. • Notice / display boards are located to reduce working at height risks, where possible. • Safe means of access for working at height is ensured by the provision of step ladders that comply with either BS14183, euro GS, or BS/EN131 standards. • All access equipment is inspected at regular intervals to ensure the equipment continues to be safe to use step ladder checklist each term, which is recorded in the office. All equipment is checked prior to use by the end-user. Any equipment deemed as unsafe to use is immediately put out of use. • Makeshift access equipment (chairs, tables etc.) will never be used to access displays / shelves.	1	1	1
Extreme heat						
30.	**Work environment:** Extreme heat weather events	Employees, children Heat exhaustion, heat stroke, dehydration, reduced concentration leading to accidents.	• Daily weather forecasts and heat alerts are monitored by the manager, this is completed by checking the Met Office forecast daily during warmer months or signed up for Met Office weather warnings and heat alerts - Weather-Health Alerting system registration form). • Indoor and outdoor temperatures in occupied areas are monitored using digital thermometers during periods of hot weather. • The nursery adjusts outdoor activities during periods of extreme heat. Decisions are based on the level of risk to children, staff, and visitors, considering the nature and duration of the activity,	1	1	1

			availability of shade, and access to drinking water (during periods of amber and red weather warnings). • Air Conditioning units are installed in all rooms. These are maintained every 6 months by NJP technical services. • Staff are instructed to open windows and doors where safe to do so, taking account of safeguarding, security, and fire safety requirements. • Sleeping rooms remain cool and are well ventilated during days of extreme heat. Air conditioning units are installed in sleep rooms. Temperature should be maintained of between 16-20 • Blinds, curtains, are closed and solar control film are utilised to reduce solar heat gain al all windows around the building. • Drinking water is readily available throughout the building. • Children monitored to encourage regular fluid intake and for signs of dehydration. • Appropriate adjustments are made for children and staff who may be more vulnerable to the effects of high temperatures. • The nursery communicates hot weather precautions to staff, pupils, and parents/carers using established communication systems via email or eyLog. Guidance includes the importance of hydration, use of sun protection, appropriate clothing, recognition of heat-related illness, and any temporary changes to nursery activities. Regular reminders are issued during periods of elevated temperatures. • First aiders are present and trained to recognise the signs and symptoms of dehydration and heat-related illness. Individuals displaying signs of dehydration are encouraged to drink water, rest in a cool area, and receive first aid support.			

Action Plan

Row number	What further action do you need to take to control the risks?	When is the action needed by?	Who needs to carry out the action?	Completed	Remaining risk level		
					L (1-3)	S (1-3)	R (1-9)
	Ensure all new children have Health Care Plans, and old children removed.	September 2026	EM / CB	Yes	1	1	1
15	All staff to complete manual handling and fire safety	September 2026	EM	Yes	2	1	2
6	All first aid kits checked and also in outings bag	August 2026	CN	Yes	2	1	2
29	Step ladder Inspection checklist to be added to termly check list of equipment to be checked.	September 2026	CB	Ongoing	1	1	1
7	DSE Assessment completed by Emma Middleton and Carol Bailey	September 2026	EM	Yes	1	1	1

Signed: E.Middleton Dated: 17/11/26

Risk Descriptors

Likelihood (L)		Severity (S)	
1	LOW: it is unlikely that the event will happen	1	LOW: minor injuries not requiring external medical assistance
2	MEDIUM: it is reasonably likely that the event will happen	2	MEDIUM: an injury requiring external medical assistance and/or a RIDDOR incident
3	HIGH: it is very likely that the event will happen	3	HIGH: could result in death, paralysis, or long-term ill-health

Risk Matrix

Likelihood (L)				
	3	3	6	9
	2	2	4	6
	1	1	2	3
		1	**2**	**3**
		Severity (S)		

Use the descriptors above to help assess the level of Likelihood (1-3) and Severity (1-3). Multiply the two elements together to identify the overall Risk (1-9). For example:

Likelihood 2 x Severity 3 = Risk 6

Once the risk level is identified, use the follow up response table below as a guide for what to do next.

Follow Up Response

1	No action required
2	Continue activity with safe working procedure
3	Monitor carefully to ensure strict adherence to safe working procedures
4	Improvements required within a reasonable timeframe
6	Immediate action required to the reduce risk
9	STOP activity until remedial actions carried out