

# Emergency Plan, including Heat Illness Medical Plan for off-site visits

Akrotiri Primary School



**Akrotiri School**

Approved by:	[Ben Turner]	Date: 14.11.24
Last reviewed on:	14.11.24	
Next review due by:	14.11.25	

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## 1. Educational visits

- For all visits, details of the visit and a list of all staff (with their mobile phone numbers) and participants are kept in the respective folder on the system (S:\Health and Safety\Educational Visits\Educational Visits 2022-2023). A paper copy is held in the red EVR folder in JB's office.
- During office hours, details of all staff and participants (including medical details, contact details of parents/next-of-kin records of parental consent (if applicable) are kept on Bromcom. Paper copy in Red folder on main office desk.
- Out of office hours, details of the visit and copies of the group list, staff mobile phone numbers and staff/participant details are held by the Emergency Contact(s) and by the visit leadership team (unless they are close to the school site and are able to access the records at any time, even when the site is closed).

## 2. Emergency Contacts

Emergency Contact phone numbers:

- Ben Turner (HT) 00447552972886 (office hours)
- Hannah Robinson (DHT) 00447792304427 (office hours)
- James Bennington (SHEF/AHT) 00447789454608 (office hours)
- Ben Turner (HT) 00447552972886 (out of office hours - mobile phone(s) to be carried by the Emergency Contact(s)).

During office hours, the Emergency Contact is Ben Turner (HT) deputised by Hannah Robinson (DHT) and James Bennington (SHEF/AHT). The Emergency Contact must remain on site until the group returns.

Any staff who might by chance take a call from a group must use **Medical Tracker** to record the incident, to take details of an incident and then alert the Emergency Contact (see above)

## 3. Practical Arrangements in an emergency (school site):

- Gate code can be accessed by contacting one of the Emergency Contacts above
- No building alarms are present
- Heating / air conditioning controlled by remote control in each room
- PC and printer in main office (room 13, building 801) to be used.
- Mobile phone in main office to be used for external communications
- Bromcom to be used to access relevant group information
- Contact parents via Seesaw for group messages, mobile phone for 1:1 contact
- Larger information to be disseminated on Seesaw / facebook
- how to access cash or credit card for emergency use
- how to obtain refreshments/catering

## 4. On receiving a call from a party on educational visit

### STAY CALM;

- **ASK** for details of the incident – record all information on **FIRST CONTACT FORM** [ANNEX A] and fill in details of injured person(s) on Medical Tracker ([school.medicaltracker.co.uk](http://school.medicaltracker.co.uk));
- **THINK** about the actions you need to take and the people you need to contact to help you (see Possible actions to take below);
- **DECIDE** what immediate help you need and contact those people;
- **TAKE CHARGE** of the incident until you clearly hand over to someone else - it is essential that one person is clearly designated as controller of the emergency response at any one time, and that it is clear to all who this is;
- **CONTACT** the group in difficulty to reassure them, get up to date information and keep them informed of your actions;
- **DELEGATE TASKS** as and when possible and appropriate to allow you to manage the situation and allow for concurrent activity.

## 5. Possible actions to take

Depending on the circumstances and the support required you may need to do some or all of the following (in liaison with the Headteacher/DCS as appropriate):

- Inform Ben Turner (HT) Hannah Robinson (DHT) or James Bennington (SHEF/AHT);
- Agree the protocol for keeping communications open (agree alternative/additional phone lines);
- Establish an Emergency Response Team, which may need to include the following roles (combine if insufficient staff are available):
- Establish an Incident Controller;
- Establish a coordinator/contact with group (try to keep the same person speaking to the visit leader);
- Logistics – arranging transport, accommodation, food/water provisions for group and any travelling team;
- Resources – e.g., office space, reception for any visitors (parents, media etc), refreshments/food;
- Seek expert advice from SHEF / Educational Visits Co-ordinator;
- Ensure all decisions and communications are logged. Consider establishing a log keeper;
- Inform DCS HQ (Damon Donaldson 00357 25962633) if you need their support, if the media might be involved, or if the incident is serious.
- Inform the station if their support is required (Wg Cdr OC BSW 00357 25275930)
- If necessary, the Headteacher/DCS will implement Business Continuity Plan (S:\Health and Safety\Emergency plan business continuity) – if so, agree whether the role of Incident Controller lies with you or them;
- Inform school governors
- Consider other means of communication such as WhatsApp, Seesaw, Facebook, email and text, but remember that some are more reliable and/or secure than others, and do not assume that a message has been received until it has been acknowledged;
- Liaise with emergency services, media, tour operators, insurance companies etc.;
- Carry out any actions necessary to support the visit leadership team;
- If necessary, organise a Travelling Team to provide support at the scene;
- Ensure the security of the school site and ensure the access gates are staffed to control access (elements of the media/press sometimes seek to gain access wherever they can);
- Make arrangements for relatives etc. to be catered for in the school hall while they wait for news;
- Arrange for the return or onwards travel of the party, and/or arrange transport for parents to the scene/hospital (contact MT Control Desk on 00357 25275722 or OC MT on 00357 25275724);
- Control/limit communications and the flow of information to the affected group, parents and other school pupils and staff (beware of pupils and staff inadvertently starting rumours circulating);
- Control information to the media – direct all media enquiries to [DCS/BFC media/communications officer];
- Make arrangements for meeting the group back from the visit and reuniting children with parents;
- Consider the possible need for immediate and/or future practical and emotional support for anyone involved (don't forget other staff, young people and the Emergency Response Team as well as parents and those directly involved)
- Arrange for, if necessary, a liaison person or counsellor to be allocated to specific people, including Station Welfare team.

## 6. Emergency Procedures at the Scene, including Heat Illness

The sequence of actions depends upon the nature of the emergency.

- Ensure your own safety.
- REMAIN CALM - Assess the situation.
- If possible, delegate actions to other leaders and participants so you can keep an overview, and to allow concurrent activity.
- Ensure the safety of the group. Make sure everyone is accounted for and adequately supervised.
- Call relevant emergency services if necessary - 112.
- First responder to summon qualified first aider.

### 6.1 The aims of first aid are to:

1. **Preserve** life:
  - a. Casualties need to be able to breathe – if they are unconscious put them into a safe airway position.
  - b. Try to find and stop any serious external bleeding.
2. **Prevent** the condition worsening:
  - a. Protect the casualty from the environment - keep them warm and dry.
  - b. Monitor their condition.
3. **Promote recovery**:
  - a. Talk to them, reassure them, hold their hand, and provide emotional support.

### 7.3 Urgent Action

Take stock and plan, delegating where possible.

Call your establishment's Emergency Contact if any of the following apply (see phone numbers above):

- You need support;
- The emergency services are involved;
- The incident is serious;
- The press/media are involved.

Liaise with, and take advice from, the emergency services if they are involved.

Address the urgent needs of the group:

- Ensure adequate supervision;
- Ensure they understand what to do to remain safe;
- Physical needs, e.g., shelter, food and drink, transport;
- Emotional needs, e.g., remove them from the scene, provide reassurance and emotional support (they can often do this for each other), give them useful things to do, protect them from intrusion.

Control communications – prevent group members from using phones or social media unsupervised, or talking to the media, until the establishment, employer and affected parents have been informed, and explain to them the importance of not spreading inaccurate information.

Start a written log of actions taken and conversations held, with times [Emergency Information Log \[APPENDIX C\]](#)

### 7.4 Further Actions and Follow-Up

- Deal with any casualties who are in the care of the emergency services, allocating a member of staff to accompany them to hospital. Keep track of who is where.
- Consider the needs of yourself and fellow leaders – are you/they coping?
- Liaise with the school – hand over what you can to them, to reduce the stress on you.
- Continue the written log with all details of the incident of the actions taken, including names and contact details of any witnesses.
- Address the further needs of the group, for example information about the incident and what is happening;
- Toilets, washing facilities, clean/dry clothes.
- Refer all media, parental or other enquiries to the school.
- Keep receipts for any expenses incurred.
- Add any further information to your log of actions.

## Appendix A. First Contact Form

Name of caller/year group/visit:	Incident date and time:
Location of incident:	
Incident details: (provide as much information as possible – write on back of sheet if necessary, including times)	
How it happened:	
Injured persons (names and ages):	

Depending on the circumstances and the support required you may need to do some or all of the following (in liaison with the Headteacher/DCS as appropriate):

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- Establish an Incident Controller;
- Establish a coordinator/contact with group (try to keep the same person speaking to the visit leader);
- Logistics – arranging transport, accommodation, food/water provisions for group and any travelling team;
- Resources – e.g., office space, reception for any visitors (parents, media etc), refreshments/food;
- Seek expert advice from SHEF / Educational Visits Co-ordinator;
- Ensure all decisions and communications are logged. Consider establishing a log keeper and record communications and decisions on [Emergency Information Log \[APPENDIX C\]](#);
- Inform DCS HQ (Damon Donaldson 00357 25962633) if you need their support, if the media might be involved, or if the incident is serious.
- Inform the station if their support is required (Wg Cdr OC BSW 00357 25275930)
- If necessary, the Headteacher/DCS will implement Business Continuity Plan (S:\Health and Safety\Emergency plan business continuity) – if so, agree whether the role of Incident Controller lies with you or them;
- Inform school governors
- Consider other means of communication such as WhatsApp, Seesaw, Facebook, email and text, but remember that some are more reliable and/or secure than others, and do not assume that a message has been received until it has been acknowledged;
- Liaise with emergency services, media, tour operators, insurance companies etc.;
- Carry out any actions necessary to support the visit leadership team;
- If necessary, organise a Travelling Team to provide support at the scene;
- Ensure the security of the school site and ensure the access gates are staffed to control access (elements of the media/press sometimes seek to gain access wherever they can);
- Make arrangements for relatives etc. to be catered for in the school hall while they wait for news;
- Arrange for the return or onwards travel of the party, and/or arrange transport for parents to the scene/hospital (contact MT Control Desk on 00357 25275722 or OC MT on 00357 25275724);
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- Arrange for, if necessary, a liaison person or counsellor to be allocated to specific people, including Station Welfare team.

## Appendix B. Emergency Information Log

Time	Communication / decision

## Appendix C. Defence Activity Control Measures

**Policy statements 1-7** (You must do the following – they apply to all Defence activity)

1. A commander or manager must be appointed to command or supervise any activity where the risk of heat illness exists. Those taking part in an activity must know who the commander or manager is.
2. The risk of heat illness must be considered in the risk assessment for all Defence activities. The risk assessment must as a minimum consider the following risk factors: a. Acclimatisation b. Clothing and equipment c. Expected work rate d. Environment e. Individual risk factors f. Education and training g. Medical plan h. Fluid requirements.
3. In the case of physically demanding selection events and fitness tests, as well as considering the factors at Policy Statement 2, the following factors must also be considered (see Commanders guide below).
4. The controls in the risk assessment must be complied with. If the control measures in the risk assessment or any other aspect of this heat illness prevention policy cannot be complied with, the commander or manager must pause or stop the activity.
5. All activity must be dynamically risk managed, if heat illness symptoms are observed: a. The activity must be paused, must be dynamically risk assessed and further control measures must be applied. b. The activity must only be restarted once further control measures have been applied and with the approval of the commander or manager at Policy Statement 1. c. All suspected and confirmed heat illness casualties must be reported and investigated in accordance with the Defence organisations Policy
6. Those involved in planning or undertaking activities which involve risk of heat illness must receive suitable training
7. The commander or manager, together with their chain of command, must make sure that this policy is followed and provide assurance of this.



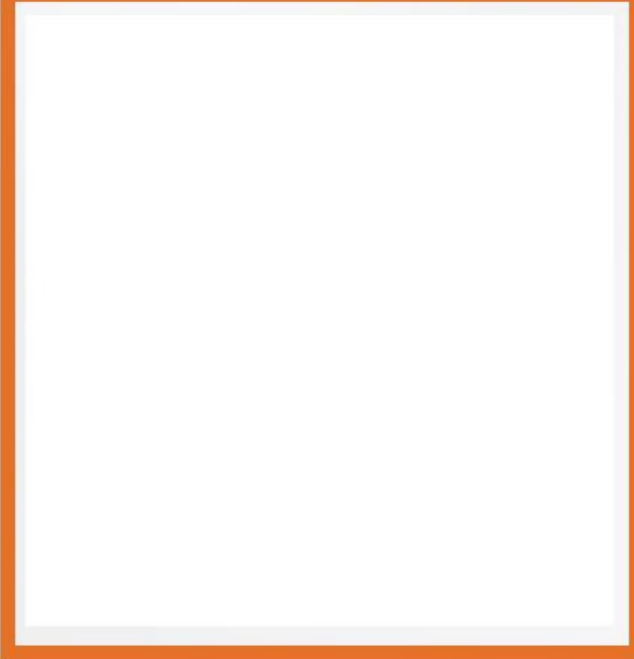
## Appendix D. Higher risk activities/personnel:

- Physical education and playground activities
- New starters
- Peripatetic staff
- Forest schools
- 0-4s – greater risk of febrile convulsions
- People with certain medical conditions
- People aged 65 or older
- People who are overweight/obese
- People on prescription drugs
- People who have not acclimatized
- People who have consumed alcohol the previous day
- New and expectant mothers
- Outdoor workers
- People with mental health problems
- Workers setting up for sports days, fetes, etc.
- Caretakers and cleaners
- Any area which normally has air conditioning, but now it's defective.
- Returning to work after illness
- People who have suffered previous episodes of heat illness

# Heat Exhaustion

# Heat Stroke

**ACT FAST**



*Dizziness*

*Thirst*

*Heavy Sweating*

*Nausea*

*Weakness*

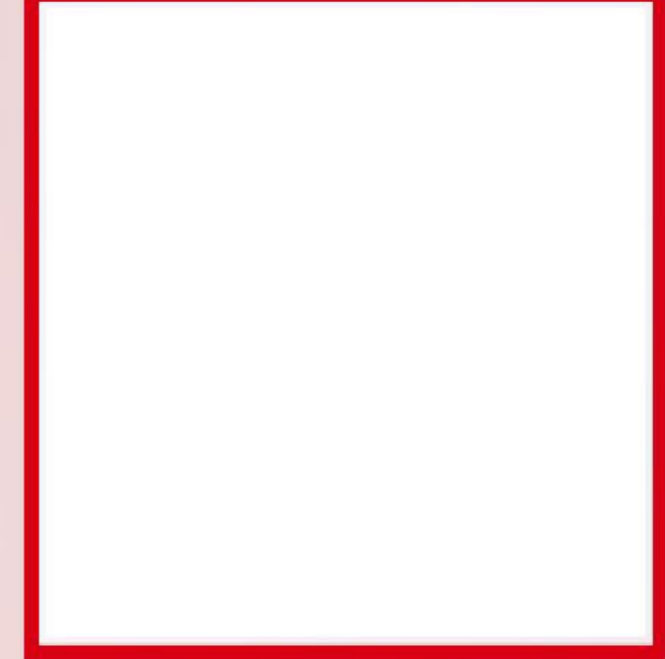


*Confusion*

*Dizziness*

*Becomes Unconscious*

**ACT FAST**



*Heat exhaustion can lead to heat stroke.*

*Heat stroke can cause death or permanent disability if emergency treatment is not given.*

**If the casualty loses consciousness, open the airway and check breathing!**

For more information please check the First Aid Manual located in the School Office.

Report **all** suspected and confirmed cases of heat illness to the Headteacher/SHEF.



(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)
Ref	Activity / element (Step 1a)	Hazards identified (Step 1b)	Who or what might be harmed and how, e.g. • Military personnel - fatality • Civ staff / contractors - injury • General public - injury • Environment - spill (Step 2)	Existing control measures (Step 3a)	Assessment with existing controls			Is residual risk acceptable in the context of risk appetite for the activity? (Yes / No) – Refer to Risk Score Calculation above If Yes, move to column (n). If No, identify additional controls (Step 3e)	Reasonable additional controls that can be implemented to reduce risk to ALARP (Step 3f)	Reassessment with additional control measures			List required action(s) to instigate controls (Step 3j)
					L (1 to 5) (Step 3b)	I (1 to 5) (Step 3c)	Score (L x I) (Step 3d)			L (1 to 5) (Step 3g)	I (1 to 5) (Step 3h)	Score (L x I) (Step 3i)	
1	Planning and preparation.	Heat exertion leading to an uncontrolled rise in body temperature.	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Adherence to DCS outdoor learning and visits policy, and Safeguarding policy. 2. Professionally competent staff – HIT training completed by all, with SLT completing Module 2. 3. Suitable and sufficient risk assessments for learning in school, playtimes and educational visits. 4. Emergency preparedness is addressed (phone numbers, medical arrangements, first-aid) 5. An adequate number of supervisory adults on duty. 6. Use of the HSE <a href="#">workplace-temperature-checklist</a> 7. Use of Akrotiri School Emergency Plan, including Heat Illness to identify an appropriate response to any casualties or medical incidents.	3	2	6						A child's ability to thermoregulate (control their core body temperature) is not the same as, or as effective as, an adult's.  All staff must complete mandatory training. This will tell them about: 1. risks of heat stress in their work 2. what symptoms to look out for 3. safe working practices 4. emergency procedures 5. The school must have a copy of the 11 <sup>th</sup> edition first aid manual. 6. Allow workers/pupils to acclimatise to their environment and identify which ones are assessed as fit to work in hot conditions 7. There is no maximum temperature for workplaces.
2	Planning and preparation.	Temperature	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Attention paid to local weather forecasts, including, where possible, WGBT readings. 2. Where practicable, work is rescheduled to cooler periods of the day. 3. Frequent breaks arranged. 4. Sheltered rest areas provided. 5. Drinking water is readily accessible. 6. Sources of hot air are eliminated. 7. Hot air is extracted out of the workplace. 8. Air conditioning provided in higher risk areas.	3	2	6						
3	Planning and preparation.	Humidity	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Attention paid to local weather forecasts, including, where possible, WGBT readings. 2. Steam and moisture is extracted out of the workplace. 3. Air flow is increased by means of air conditioning or fans. 4. Staff and pupils instructed to wear thin and vapour permeable clothing.	3	2	6						

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)
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					L (1 to 5) (Step 3b)	I (1 to 5) (Step 3c)	Score (L x I) (Step 3d)			L (1 to 5) (Step 3g)	I (1 to 5) (Step 3h)	Score (L x I) (Step 3i)	
4	Planning and preparation.	Heat radiation	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Sunshades/shelters over working positions where practicable. 2. Staff and pupils instructed to wear light-coloured, loose-fitting clothing made from natural materials. 3. Children to wear a hat, ideally wide-brimmed to block sunlight on the face, and if possible the neck. Staff encouraged to wear a hat. 4. Pay attention to the UV index and enhance sunshade facilities and reduce out activity as appropriate.	2	2	4						
5	Planning and preparation.	Air movement	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Air flow increased with appropriate ventilation systems e.g. air-conditioning or fans. 2. Hot draughts are kept away from pupils and staff where practical.	2	2	4						
6	Planning and preparation.	Workload	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Mechanical aids provided for workers to minimise physical demand on them. 2. Work is reorganised to reduce the intensity and pace of physical movement of pupils and staff, where practical to do so.	2	2	4						
7	During school day	Clothing	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. School uniform suitable for the climate 2. Staff handbook shares ideas for suitable clothing to wear during hotter months. 3. Tasks requiring the wearing of thick or vapour impermeable clothing are rescheduled to cooler periods of the day.	2	2	4						

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)
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8	During school day	Acclimatisation	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Allow time for acclimatisation starting with lower workload and easier activities.  2. Shorter working duration, where appropriate, if working in heat.	3	2	6						
9	General administration (and individual risk factors)	Heat exertion leading to an uncontrolled rise in body temperature.	Pupils, staff, contractors and visitors.	1. Checking air conditioning units are maintained. 2. Relaxing formal dress codes to allow fewer or more layers of clothing 3. Insulating hot machinery or pipes 4. Moving workstations away from hot machinery or out of direct sunlight. 5. Personnel/children to utilise medical advice if adverse effects from heat	3	2	6						<ul style="list-style-type: none"> <li>- Staff and pupils might not know or adhere to policy and procedures.</li> <li>- Mild to serious illness or injury.</li> <li>- Not acclimatised.</li> <li>- Long-term fatigue.</li> <li>- Lack of sleep.</li> <li>- Air travel within the past 24 hours.</li> <li>- Poor nutrition or diet, or a missed meal in the previous 24 hours.</li> <li>- Recent vaccinations (for example, COVID-19 vaccinations)</li> </ul>




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10	Outdoor working and PESSPA	Heat exertion leading to an uncontrolled rise in body temperature.	Pupils, staff and the general public  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Learning/work/assemblies rescheduled to cooler times of the day 2. More frequent rest breaks provided and shading introduced in rest areas. 3. Regular access to cool drinking water provided. 4. Shading utilised. 5. All staff to have completed HIT Module 1 training – SLT to complete module 2, in order to identify early signs of Heat Illness	3	2	6						-Check weather forecast. -Obtain the Global Wet Bulb Temperature WBGT - Do not rely on sunscreen alone to protect from the sun. -Wear suitable clothing and spend time in the shade when the sun's at its hottest.  Warning signs of heat stroke may include: -an extremely high body temperature (above 39.5°C, orally) -red, hot and dry skin (no sweating) -rapid, strong pulse -throbbing headache -dizziness -nausea -confusion -unconsciousness.
11	Dehydration	Heat exertion leading to an uncontrolled rise in body temperature.	Pupils, staff and the general public  Not drinking enough water  Minor to serious (including fatalities) illness and injury: • Sun burn • Heat stress • Heat exhaustion • Heatstroke • Fainting • Dehydration • Sudden Cardiac Arrest	1. Staff and pupils encouraged to frequently drink cool water. 2. Drink in small amounts to compensate for the effects of sweating. 3. Staff or pupils exposed to heat stress conditions, encouraged to be adequately hydrated before they come to work/school.	3	2	6						-Staff must not rely on colleagues and pupils saying they are thirsty. It is not a good indicator of dehydration, more an early sign that they are starting to suffer from its effects. -When working at a high rate in heat stress conditions, staff should drink around 250 ml (half a pint) every 15 minutes.
14	Supervision	Heat exertion leading to an uncontrolled rise in body temperature.	Pupils  Injury, death	Ensure pupils sufficiently briefed and competent (any individual pupils for whom indirect supervision not suitable must be directly supervised).  Clear guidelines and emergency procedures set and understood.  Pupils remain in pairs or groups (e.g. buddy system - each responsible for named other).  Pupils know how to contact staff.	2	3	6						

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					L (1 to 5) (Step 3b)	I (1 to 5) (Step 3c)	Score (L x I) (Step 3d)			L (1 to 5) (Step 3g)	I (1 to 5) (Step 3h)	Score (L x I) (Step 3i)	
15	Medical conditions	<b>Heat exertion leading to an uncontrolled rise in body temperature.</b>	Pupils, staff, visitors and contractors.  Most vulnerable people are:  -Older people. -People with diabetes, kidney disease, mental health conditions -People who are on multiple medicines. -Menopause.	-Up to date Individual Health Care Plans.	2	3	6						
16	Emergencies	<b>Heat exertion leading to an uncontrolled rise in body temperature.</b>	Pupils, staff  Injury, death	<ol style="list-style-type: none"> <li>The school has an emergency plan for dealing with an incident on an outdoor visit.</li> <li>Contact details of parents, group leader, school and, if appropriate, head teacher/school contact's after-hours number are held by group leader and school contact.</li> <li>Leader and head/school contact has instructions as to what to do in an emergency.</li> <li>First aid trained staff.</li> <li>Knowledge of where the nearest AED can be found (on camp – Aki Gym / Med Centre / Officers Mess</li> </ol>	1	4	4						Remind all staff of what to do in the event of heat exhaustion and heat stroke:  <a href="#">Heat Exhaustion</a> <a href="#">Heat stroke</a>
17	Bus/Coach travel	<b>Heat exertion leading to an uncontrolled rise in body temperature.</b>	Pupils, staff  Injury, death	<ul style="list-style-type: none"> <li>-Coach meets required standard</li> <li>- If abroad, Coach and drivers' hours follow EC requirements .</li> <li>-Close supervision and head counts during any breaks in journey and getting in and out of bus.</li> </ul>	1	3	3						All staff have been provided a copy of the rules for coach travel





(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)
Ref	Activity / element (Step 1a)	Hazards identified (Step 1b)	Who or what might be harmed and how, e.g. • Military personnel - fatality • Civ staff / contractors - injury • General public - injury • Environment - spill (Step 2)	Existing control measures (Step 3a)	Assessment with existing controls			Is residual risk acceptable in the context of risk appetite for the activity? (Yes / No) – Refer to Risk Score Calculation above If Yes, move to column (n). If No, identify additional controls (Step 3e)	Reasonable additional controls that can be implemented to reduce risk to ALARP (Step 3f)	Reassessment with additional control measures			List required action(s) to instigate controls (Step 3j)
					L (1 to 5) (Step 3b)	I (1 to 5) (Step 3c)	Score (L x I) (Step 3d)			L (1 to 5) (Step 3g)	I (1 to 5) (Step 3h)	Score (L x I) (Step 3i)	
22	Failure to learn lessons	Heat exertion leading to an uncontrolled rise in body temperature.	Pupils and staff  Minor to serious illness or injury	<ol style="list-style-type: none"> <li>All incidents of heat illness are reported to the SLT.</li> <li>Investigations conducted.</li> <li>Risk assessments are reviewed and amended as necessary.</li> <li>Army Reporting Cell and HQ DCS informed as per SORs</li> <li>Updated control measure promulgated to all staff.</li> </ol>	2	4	8						<p>In the event of an accident or near miss, the responsible person will contact the school SLT, whereupon the Army Reporting Cell and DCS will be notified.</p> <p>In the event of fatalities, serious incidents and near misses the Defence Accident Investigation Branch (DAIB) must be informed on tel: <b>01980 348622</b> (do not delay notification).</p> <p>All suspected and confirmed cases of heat illness must be reported in-line with DCS occurrence-reporting procedures and the responsibility for this rests with the chain of command.</p> <p>As a minimum, reports should specify the time, location, WBGT reading, weather forecast (if available) and type of activity being undertaken.</p> <p>Personal details of the casualty should include their name, rank, service or staff number and a description of the illness or injury.</p>

Authorising Officer / Warrant Officer / NCO (at unit level)	No, Rank, Name	Post	Date	Signature <sup>1</sup>
Existing and additional controls agreed	Mr Ben Turner	Headteacher	3/7/23	
Where risk is elevated up the CoC, CO to confirm additional controls implemented				

Risk = Likelihood x Impact

Likelihood	Definition
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**Step 5** - Review the generic risk assessment and update if necessary - All generic risk assessments should be regularly reviewed at a frequency proportional to the risk prior to any controls being proposed. In practice generic risk assessments should be reviewed at least annually, or more frequently:

- where required by local instructions/procedures;
- if the safe execution of the activity relies on stringent supervision and/or adherence to a safe system of

<sup>1</sup> Can be electronic signature.

5	<b>Highly Probable (Almost Certain)</b>	Is expected to occur in most circumstances
4	<b>Probable</b>	Will probably occur at some time, or in most circumstances
3	<b>Possible</b>	Fairly likely to occur at some time, or some circumstances
2	<b>Unlikely</b>	Is unlikely to occur, but could occur at sometime
1	<b>Remote / Rare</b>	May only occur in exceptional circumstances

Impact		Definition (Health Safety and Environment)
5	<b>Critical</b>	<ul style="list-style-type: none"> <li>Multiple fatalities or permanent, life changing injuries.</li> <li>Permanent loss or damage beyond remediation of an important and publicly high-profile natural resource, area or species.</li> <li>Multiple incidents causing a major environmental impact.</li> </ul>
4	<b>Severe</b>	<ul style="list-style-type: none"> <li>A single death or multiple life-threatening injuries.</li> <li>Severe damage over a wide area and/or on a prolonged basis to a natural resource, including controlled waters, or geography requiring multi-year remediation.</li> <li>Single incident causing a major environmental effect or multiple incidents causing significant effect.</li> </ul>
3	<b>Major</b>	<ul style="list-style-type: none"> <li>Single life changing injury or multiple injuries which have a short-term impact on normal way of or quality of life.</li> <li>Moderate damage to an extended area and/or area with moderate environmental sensitivity (scarce/ valuable) requiring months of remediation.</li> <li>Single incident causing significant environmental impact.</li> </ul>
2	<b>Moderate</b>	<ul style="list-style-type: none"> <li>Multiple injuries requiring first aid.</li> <li>Moderate damage to an area, and that can be remedied internally.</li> <li>Multiple incidents causing minor environmental effect.</li> </ul>
1	<b>Minor</b>	<ul style="list-style-type: none"> <li>An Injury requiring first aid</li> <li>Limited short-term damage to an area of low environmental significance/ sensitivity</li> <li>Incidents causing minor environmental impacts</li> </ul>

work;

- if there is reason to doubt the effectiveness of the assessment.
- following an accident or near miss.
- following significant changes to the task, process, procedure, equipment, personnel or management.
- following the introduction of more vulnerable personnel (e.g. persons under 18 or pregnant persons).

Risk Management		
Risk Rating	Authorisation	How Risk should be managed
1 – 3 (Very Low)	LCpl to OF3 (Sub-unit Comd)	<b>Review periodically</b> to ensure conditions have not changed and working within ALARP and risk appetite.
4 – 9 (Low)	OF4 (CO, HoE or CI)	
10 – 14 (Medium)	OF5 / 1* Commander	<b>Good risk mitigations</b> to ensure that the impact remains ALARP and tolerable. Re-assess frequently to ensure conditions remain the same.
15 – 19 (Medium to High)	2* Div HQ	<b>Requires active management</b> – review of desired outcome with additional resources or change to output requirements.
20 (High)	3*/2* Commanders HC, Fd Army & JHC	<b>Contingency plans</b> may suffice together with limited risk mitigations to achieve risk ALARP and tolerable.
25 (Very High)	4* CGS	<b>Operational capability</b> where the required outcome impacts on defined military capability.