

Activity/ Situation	Extreme Heatwave 18 th and 19 th July			
Location	Heath Lane Nursery School			
Persons at Risk	Pupils <input checked="" type="checkbox"/>	Employees <input checked="" type="checkbox"/>	Visitors <input type="checkbox"/>	Contractors <input type="checkbox"/>
HAZARD(S)	<p><i>Note: this list is not exhaustive and must be adapted for your own needs</i></p> <ul style="list-style-type: none"> * Extreme external temperatures exceeding 30 degrees * Children getting burned by the sun. * Children getting burned by resources/equipment * Poor ventilation * Playground area with limited shade * Children 4 yrs and under unable to regulate their temperature fully. * Staff becoming unwell due to heat 			
CONTROL MEASURES	ADDITIONAL INFORMATION	YES	NO	N/A
<p><i>Note: you must amend and adapt this generic risk assessment to suit your own needs by selecting the controls from the examples provided (adding and amending others where necessary) and then evaluate the overall risk for the activity/situation.</i></p>				
Windows and doors open as early as possible to let the morning air cool and circulate around the building. Monitor indoor temperatures at regular intervals to assess safety.	Paul to carry this out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children to have lotion reapplied if staying beyond the morning session and more frequently if involved in water play.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offer Paddling tough trays to keep the children outside cool.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locate any outdoor play in the garden to provide shelter from the sun		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide unlimited amounts of water for children and staff in order for them to keep hydrated.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitor wellness of staff and children to ensure no one becomes unwell.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ring the parent/care-giver of any child if we become at all concerned about their wellness or welfare		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All children outside MUST wear a hat and time outside MUST be closely supervised by adults.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vigorous play to be actively discouraged-adults to engage children in calmer engagement outdoors.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remove all metal resources outside areas Including water equipment trolley and tough tray stands.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Block off the slide and continually monitor the bridge.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Continually monitor the heat of the artificial grass in the garden		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Empty hose of hot water, safely, prior to use.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check any still water (water trays/tough spots) to ensure water is at safe temperature.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Store packed lunch boxes in a cool place (desk in the office) to minimise food spoiling.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONSIDER

Have you consulted with the people/representatives undertaking the activity as part of the preparation of this risk assessment	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
What is the level of risk for this activity/situation with existing control measures	High <input checked="" type="checkbox"/>	Med <input type="checkbox"/>	Low <input type="checkbox"/>
Is the risk adequately controlled with existing control measures	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Have you identified any further control measures needed to control the risk and recorded them in the action plan	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	

ACTION PLAN (insert additional rows if required)	To be actioned by	
Further control measures to reduce risks so far as is reasonably practicable	Name	Date

State overall risk level assigned to the task AFTER implementation of control and action plan measures taken as a result of this risk assessment	High <input checked="" type="checkbox"/>	Med <input type="checkbox"/>	Low <input type="checkbox"/>
Is such a risk level deemed to be as low as reasonably practical?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Is activity still acceptable with this level of risk?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
If no, has this been escalated to senior leadership team?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Assessor(s):	H Yendell	Signature(s):	<i>Hayley Yendell</i>
Position(s):	Headteacher		
Date:	16 th July 2022	Review Date:	Ongoing


Distribution: All staff and CoG

Risk rating	Action
HIGH	Urgently review/add controls & monitor, notify H&S Team (if Likely or Highly Likely – stop work, seek competent advice)
MEDIUM	Review/add controls (as far as reasonably practicable) & monitor
LOW	Monitor control measures

POTENTIAL OUTCOME

Catastrophic	Fatal injury/permanent disability
Major	RIDDOR reportable Specified Injury/ Disease/Dangerous Occurrence
Moderate	RIDDOR reportable over 7 day injury
Minor	Minor injury (requiring first aid)
Insignificant	Minor injury

LIKELIHOOD

Highly likely	More likely to occur
Likely	
Possible	
Unlikely	
Remote	
	Less likely to occur

POTENTIAL OUTCOME

Catastrophic					
Major					
Moderate					
Minor					
Insignificant					
	Remote	Unlikely	Possible	Likely	Highly Likely

LIKELIHOOD