RISK ASSESSMENTS

V8 SEPTEMBER 2026

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Version 2 Jun24	Significantly expanded Responsibilities section: clarified roles of Directors, COO, Training & Quality Manager, First Aider/Fire Warden; added governance, business continuity, and compliance duties. Added sections on risk assessing staff, contractors/visitors, ad hoc activities, and young people leaving premises. Introduced detailed Risk Register categories with examples, controls, and monitoring processes. Added Appendix 3 – Risk Assessment with example risks, scoring, control measures, and monitoring/treatment actions. Added Appendix 4 – DBS Waiver.
Version 3 Sep24	Expanded and clarified several risk categories in the Risk Register and Appendix 3 with additional examples, controls, and monitoring actions. Added/updated financial risk controls including onboarding of new finance staff, improved contract use, and new finance system.
Version 4 Nov24	Added references to the Sexual Harassment Policy and Positive Interactions Policy in relevant risk categories. Updated Risk Register with additional examples and refined control measures, including training, supervision, and safeguarding oversight.
Version 5 Sep25	Added Appendix 5 – Activity Risk Assessment Planner and Checklist. Expanded E-Safety risks to include AI, misinformation/fake news, online content, and VR. Introduced additional control measures for emerging technology risks, including critical thinking/digital citizenship training, AI-enabled abuse awareness, and VR supervision.
Version 6 Oct25	Added separate risk entries for traffic movement and physical premises safety, refined Young People section to include bullying, cyberbullying, sexting, and pupil-to-staff harassment, and strengthened controls for supervision, logging, and environmental safety. Encompassed Tilford House and Redlands Lodge activities.
Version 7 Dec25	Updated the Risk Assessment so it relates to new premises at Tilford House and Redlands; Updated the Activity Risk Assessment Planner and Checklist to new form design.
Version 8 Sep 26	Updated legal framework and roles and responsibilities. Introduced revised definitions and risk assessment procedures. Replaced the Company Risk Assessment with a new corporate risk assessment and Risk Register, including strengthened safeguarding, Prevent, online safety, business continuity, financial, premises and operational risks. Updated learner and activity risk assessment arrangements and aligned the policy with current organisational practice and statutory guidance.

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1. INTRODUCTION

Overworld AMP Limited ("the Provision") has a legal duty to protect the health, safety and welfare of its employees and anyone who may be affected by its activities, including learners, parents/carers, contractors, visitors, commissioners and members of the public. Effective risk management also supports the Provision's ability to deliver safe, high-quality education and services, maintain business continuity and safeguard learners, staff and the wider community.

2. SCOPE

- This policy applies to all activities undertaken by the Provision, including education, alternative provision, community activities, off-site visits, and business operations.
- It applies to all Directors, employees, volunteers, contractors, agency staff, visitors and learners who access or deliver services on behalf of the Provision.
- This policy covers:
    - strategic, operational and financial risks;
    - health, safety and welfare risks;
    - safeguarding and young person protection risks;
    - premises, equipment and environmental risks;
    - information security and business continuity risks; and
    - activity-specific and individual learner risk assessments.
- Risk assessment is a continuous process and forms part of everyday practice. Risk assessments will be reviewed regularly and whenever there is a significant change, following an incident or near miss, or where new hazards are identified.

3. LEGAL FRAMEWORK AND GUIDANCE

This policy is informed by, but not limited to, the following legislation and statutory guidance:

- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Control of Substances Hazardous to Health Regulations 2002 (COSHH)
- Regulatory Reform (Fire Safety) Order 2005
- Equality Act 2010
- Children Act 1989
- Children Act 2004
- Care Act 2014 (where applicable)
- Keeping Children Safe in Education 2026
- Working Together to Safeguard Children 2026
- Counter-Terrorism and Security Act 2015 (Prevent Duty)
- Data Protection Act 2018
- UK General Data Protection Regulation (UK GDPR)
- Corporate Manslaughter and Corporate Homicide Act 2007
- Health and Safety Executive (HSE) guidance on managing risks in education and other relevant HSE guidance
- Relevant local authority, commissioning body and Department for Education guidance.

4. ROLES AND RESPONSIBILITIES

4.1. The Directors have overall responsibility for health, safety and risk management throughout the Provision. They are responsible for:

- Legally responsible for the health, safety and welfare of employees, learners and others affected by the Provision's activities.
- Taking reasonable steps to prevent sexual harassment in the workplace, including harassment by third parties.
- Ensuring compliance with relevant legislation, statutory guidance and internal policies.
- Overseeing the corporate Risk Register and the implementation of risk management arrangements.
- Ensuring suitable arrangements are in place for premises, fire safety and business continuity.

4.2. The Chief Operations Manager

- Monitor and mitigate financial and strategic risk
- Support the Directors with finance and Business development
- Support implementation of the Business Continuity Plan.

4.3. The Senior Leadership Team (SLT)

- Create and maintain learner and activity risk assessments.
- Maintain the corporate Risk Register and Company Risk Assessment.
- Monitor compliance with this policy.
- Support staff to identify and manage risk.
- Facilitate inspections and audits.
- Maintain the Business Continuity Plan.
- Submit RIDDOR reports where required.
- Ensure statutory fire safety arrangements are maintained.
- Maintain Personal Emergency Evacuation Plans (PEEPs).
- Liaise with contractors regarding site safety.
- Monitor learner engagement, attendance and reporting to identify and mitigate safeguarding, quality and organisational risks.

4.4. The Education Team

- Maintain the Provision's approval and recognition with awarding organisations and ensure ongoing compliance with awarding organisation requirements.
- Ensure new qualifications and programmes are approved, implemented and monitored in accordance with awarding organisation and regulatory requirements.

4.5. The Outdoor Learning Lead

- Completing and reviewing activity-specific and dynamic risk assessments, ensuring fire safety measures are in place where relevant.
- Checking outdoor areas for hazards, maintaining designated fire areas, and ensuring tools and equipment are safe and used appropriately.
- Ensuring safe staffing ratios, briefing staff on their roles, and supporting training in safe outdoor practice.
- Lead emergency procedures during outdoor activities where appropriate.

- Recording and responding to incidents or near misses and updating practice accordingly.

4.6. Employees working directly with Young People

- Review and contribute to individual learner risk assessments and report any changes promptly.
- Obtain approval before taking learners off-site unless this forms part of an agreed programme or activity.
- Maintain appropriate supervision of learners and ensure safe arrival, departure and transitions.
- Review and follow any off-site activity Risk Assessment that you are tasked to perform in discussion with the CEO and/or a member of the SLT.
- Ensure all cooking sessions are risk assessed, fire safety measures (e.g. extinguishers, fire blankets) are in place, and food hygiene standards are followed.
- Ensure gym sessions are adequately risk assessed, with particular attention to physical injury, behaviour management, and hydration.
- Plan and deliver high quality holistic and educational sessions to maintain engagement and learner progression.
- Produce high quality, meaningful session reports.

4.7. All staff

- Follow this policy and all relevant procedures.
- Report hazards, accidents, near misses and emerging risks promptly.
- Be familiar with emergency procedures and fire evacuation arrangements.
- Support safe evacuation, including implementation of PEEPs where applicable.

4.8. All parent/carers, Young People, visitors, contractors and members of the public are expected to:

- Co-operate with managers on health and safety matters;
    - Review this Policy and declare if their visit poses an extra risk e.g. sever allergy to nuts, use of cleaning equipment
    - Not enter the centre if suffering from a contagious disease
    - Comply with on-site fire procedures and follow staff direction in the event of an evacuation.

5. DEFINITIONS

5.1. Risk

- The likelihood that a hazard or threat will cause harm, together with the severity of the potential consequences.

5.2. Risk assessment

- A systematic process of identifying hazards, evaluating the level of risk and implementing appropriate control measures to reduce the risk to an acceptable level.

5.3. Dynamic Risk Assessment

- An ongoing assessment undertaken during an activity to identify and respond to changing hazards or circumstances.

5.4. Risk Register

- A document used by the Provision to record, monitor and review strategic, operational and organisational risks together with existing controls and planned actions.

5.5. Hazard

- Anything with the potential to cause harm, including injury, ill health, damage to property, equipment or the environment.

5.6. Likelihood

- The probability of a hazard or identified risk occurring.

5.7. Risk Matrix

- A tool used to evaluate the level of risk by considering the likelihood and potential impact of an identified hazard. The Provision uses risk matrices appropriate to the purpose of the assessment. The scoring methodology is set out within the relevant risk assessment template or Risk Register and may vary depending on the type of assessment being undertaken.

6. GENERAL GUIDANCE

- The Provision maintains a range of risk assessments and a Corporate Risk Register covering its activities, premises and operations. This includes site-specific risk assessments for Tilford House, Redlands Lodge and any other premises used by the Provision, together with activity-specific and individual learner risk assessments.
- These are live documents and will be reviewed regularly and whenever significant changes, incidents or new hazards arise.
- Staff responsible for completing risk assessments must use the Provision's approved templates and implement appropriate control measures to reduce identified risks.
- All staff, contractors and visitors have a responsibility to cooperate in maintaining a safe environment by following risk assessments, reporting hazards and complying with health and safety procedures.
- Contractors must be informed of any relevant site risks before commencing work and must notify the Provision of any hazards their work may introduce so that appropriate control measures can be agreed and implemented.

7. RISK ASSESSMENT PROCEDURE

7.1 Identify the Hazards

- When completing a risk assessment, identify any hazards that could reasonably cause harm. Consider both obvious and less obvious risks by:
    - inspecting the area, activity or equipment;
    - speaking to colleagues involved in the activity;
    - reviewing previous accidents, incidents and near misses;
    - considering long-term health risks, such as noise, dust, manual handling or repetitive tasks;
    - checking whether the venue or provider has its own risk assessment for off-site activities;
    - considering whether any changes to legislation, guidance or working practices create new risks.

7.2 Decide Who May Be Harmed and How

- Consider who may be affected by each hazard and how they could be harmed. This may include:
    - learners;

- staff;
- volunteers;
- contractors;
- visitors; and
- members of the public.

- Take account of anyone who may be more vulnerable, including those with SEND, medical conditions, pregnancy or other individual needs.

7.3 Evaluate the Risk and Identify Control Measures

- Consider whether existing control measures are sufficient to reduce the risk to an acceptable level. Ask yourself:
  - Can the hazard be removed altogether?
  - Can the activity, equipment or environment be made safer?
  - Are further control measures required, such as supervision, training, barriers, or changes to the way the activity is carried out?
  - Are existing control measures being followed and maintained?

7.4 Record Your Findings

- Record the significant hazards, who may be harmed and the control measures required using the Provision's approved risk assessment template.
- Where further action is required:
  - identify who is responsible;
  - set a realistic timescale;
  - implement any immediate safety measures without delay; and
  - ensure staff involved understand the control measures.

7.5 Review the Risk Assessment

- Risk assessments are live documents and must be reviewed:
  - at least annually;
  - following an accident, incident or near miss;
  - where new hazards are identified;
  - following significant changes to the activity, equipment, environment or staffing;
  - where a learner's needs or circumstances change; or
  - whenever the assessment is no longer considered accurate.

8. THE RISK REGISTER AND OVERALL RISK ASSESSMENT

- Conducted and managed by Senior Management Team
- Managed live within the shared drive and reviewed and amended if necessary:
  - after an accident, incident or significant near miss;
  - after any significant changes have been made, e.g. notification of staff pregnancy or disability, introduction of a new working method or piece of potentially hazardous equipment;
  - at least annually.

9. RISK ASSESSING NEW ACTIVITIES

1. Consult the CEO for approval.
2. Review any existing site-specific and activity-specific risk assessments to determine whether the activity is already covered or requires a new or amended assessment.
3. If this is a new activity, you may source the risk assessments from the provider if available or modify an existing template.
4. Can the venue provide assurance that DBS checks are in place for employees see Appendix 3 – DBS company waiver.
5. Check evacuation procedures at the venue being visited and review against individual PEEPs.
6. All completed risk assessments should remain on the shared drive as word documents.
7. Risk Assessments are not a once-and-for-all activity; they should be 'living documents' that are reviewed and amended if necessary:
    a. after an accident, incident or significant near miss;
    b. after any significant changes have been made, e.g. change of staff, introduction of a new working method or piece of potentially hazardous equipment;
    c. at least annually.
8. The review will be conducted by member of SLT.

10. RISK ASSESSING A NEW YOUNG PERSON

1. Each new student will have a template folder personalised for them on OneDrive
2. Each student folder has a template risk assessment to personalise within the folder “Risk Assessment”
3. All completed risk assessments should remain on the shared drive as word documents.
4. Where relevant, PEEPs must be reviewed as part of the risk assessment process.
5. Risk assessments are 'living documents' that are reviewed and amended if necessary:
    a. after an accident, incident or significant near miss;
    b. after any significant changes have been made, e.g. change of staff, introduction of a new working method or piece of potentially hazardous equipment;
    c. at least annually.
6. The review will be conducted by a member of SLT.

11. RISK ASSESSING A MEMBER OF STAFF

1. Members of staff with medical conditions and/or disabilities, that may require extra support are requested to disclose this to the Directors so that they can prepare a Risk Assessment and if necessary, a Personal Emergency Evacuation Plan (PEEP).
2. Where relevant, PEEPs must be created or reviewed as part of the risk assessment process.
3. The completed risk assessments will remain on the Employee’s personnel file.
4. Risk Assessments are 'living documents' that are reviewed and amended if necessary:
    a. after an accident, incident or significant near miss;
    b. after any significant changes have been made, e.g. change of staff, introduction of a new working method or piece of potentially hazardous equipment;
    c. at least annually.
5. The review will be conducted by a member of SLT.

12. RISK ASSESSING A CONTRACTOR, VISITOR OR AD HOC ACTIVITY

1. Contractors/Visitors with medical conditions and/or disabilities, that may require extra support are requested to disclose this to the Directors so that they can assess risk and if necessary, prepare a Personal Emergency Evacuation Plan (PEEP)
    a. Any documentation produced will be stored in line with the *Data Protection and GDPR Policy*
2. Contractors must disclose to the Directors, any activity, equipment or chemical that poses a risk to health and safety so that a risk assessment maybe produced
    a. In the case of a regular activity e.g. cleaning, the risk assessment will be stored electronically as a word document in the "Activities" folder on OneDrive and kept in line with the *Data Protection and GDPR Policy*
3. Any Ad Hoc activity such as DIY, which needs to be carried out during opening hours must be risk assessed.
    a. the risk assessment will be stored electronically as a word document in the "Activities" folder on OneDrive and kept in line with the *Data Protection and GDPR Policy*

13. RISK ASSESSING YOUNG PEOPLE LEAVING THE PREMISES

1. If a young person is leaving the premises during their session, including for a planned activity, SLT must be satisfied that it is safe for them to do so based on their individual risk assessment and current presentation.
2. Before a planned activity, staff consider the young person's presentation on the day, staff/young person pairing, any changes in risk and any changes to the activity, journey or venue. If there are concerns, arrangements are changed, SLT advice is sought or the activity does not go ahead.
3. Routine, established low-risk activities do not require a Planner each time. Staff must continue to dynamically assess risk before and throughout the activity.
4. An Activity Risk Assessment Planner and Checklist is completed for new, higher-risk, unfamiliar or significantly changed activities, or where required by an individual or activity risk assessment. Completed Planners are stored in the Activities folder on OneDrive.
5. If it is not safe for the young person to leave, staff follow the *Positive Interactions Policy*. If they leave without agreement or supervision, staff follow the *Missing Young Person Procedure* within the *Young Person Protection Policy*.

14. MONITORING AND REVIEW

- The Directors have overall responsibility for monitoring the effectiveness of this policy and the Provision's risk management arrangements.
- The Senior Leadership Team will monitor compliance through routine supervision, incident reporting, audits, inspections and review of risk assessments.
- The Risk Register will be reviewed termly by the Senior Leadership Team and annually by the Directors, or sooner following any significant incident, legislative change or emerging risk.
- Individual learner, activity, staff and site-specific risk assessments are live documents and will be reviewed in accordance with this policy and whenever significant changes, incidents, near misses or new hazards arise.
- This policy will be reviewed annually or earlier where changes to legislation, statutory guidance or Provision practice require.

APPENDIX 1 - RISK REGISTER

This Risk Register provides a high-level summary of the Provision's principal organisational risks identified within the detailed Company Risk Assessment. It outlines the main areas of risk, their potential causes and the key controls in place. The register should be read alongside the full Company Risk Assessment, where individual hazards, control measures and risk ratings are recorded. The Risk Register is reviewed termly by the Senior Leadership Team and annually by the Directors, or sooner following any significant incident, emerging risk or legislative change. Staff and young people are encouraged to report hazards, concerns and near misses to support the ongoing review of organisational risk.

Risk Main Category	Example	Risk Cause	Controls in Place
Young People	Poor engagement or attendance; safeguarding concerns; online harm; peer-on-peer abuse; exploitation; radicalisation; dysregulation; injury during practical, outdoor or off-site activities	Anxiety, SEND, trauma, poor attendance, unsafe online activity, incomplete referral information, unsafe environments, peer conflict, accidents during activities	Robust admissions and induction. Individual learner risk assessments. Positive Interactions, Attendance, Online Safety and Safeguarding Policies. High staff-to-young person ratios. EHCP-informed planning. DSL oversight. Filtering and monitoring systems. Activity-specific risk assessments. Staff safeguarding, Prevent and first aid training. Strong communication with parents/carers, commissioners and external agencies. Multi-agency working where appropriate.
Staffing	Staff shortages; inadequate recruitment; poor performance; misconduct; wellbeing concerns; insufficient training	Recruitment difficulties, absence, poor performance, burnout, safeguarding failures or inappropriate conduct	Safer Recruitment Policy. Employee Handbook and Code of Conduct. Induction and probation. Mandatory safeguarding and statutory training. Supervision, appraisal and CPD. BrightHR support. Mental Health First Aider. High staffing ratios and succession planning.
Governance	Safeguarding failure; statutory or regulatory non-compliance; legal claims; inadequate insurance; loss of Directors; DfE/Ofsted compliance	Failure to comply with legislation, safeguarding duties or governance responsibilities	Robust governance arrangements led by the Directors. Annual policy review. Internal audits. Safeguarding oversight. BrightHR and Markel support. Appropriate insurance. Business Continuity Plan. Oversight by the Directors, Chief Operations Manager and Senior Leadership Team.
Physical	Fire; unauthorised access; slips, trips and falls; unsafe premises; pool safety; medication incidents; infectious disease; accessibility	Building failure, unsafe environments, equipment failure, poor housekeeping, unauthorised access or inadequate maintenance	Annual Fire Risk Assessments. Health and Safety Risk Assessments. Fire Safety Maintenance Schedule. Secure premises. CCTV. Business Continuity Plan. Regular maintenance and inspections. Pool maintenance programme. Medication procedures. Accessibility arrangements. Infection prevention measures.
Infrastructure	Loss of premises; IT failure; cyber incident; communication failure; emergency closure	Loss of utilities, IT systems, communications or buildings	Microsoft 365 cloud systems. Cyber security controls. Multi-factor authentication. Disaster recovery arrangements. Business Continuity Plan. Remote working capability. Regular testing of communication systems and backups.

Financial	Loss of funding; unpaid placements; inaccurate or late invoicing; cash flow pressures; overspending	Contractual issues, delayed payments, commissioning changes or poor financial management	Robust admissions and contract processes. Purchase Orders or written funding approval before placement. Financial oversight by the Chief Operations Manager. Internal and external audits. Appropriate insurance. Regular budget monitoring and financial reporting.
Strategic and Reputational	Loss of funding; adverse inspection outcomes; awarding organisation sanctions; reputational damage	Poor quality, governance failures, safeguarding incidents, financial irregularities or changing commissioning arrangements	Strong relationships with commissioners. Preferred supplier status. Quality assurance. Compliance with awarding organisation requirements. Strategic business planning. Professional HR and legal support. Directors and Chief Operations Manager oversight.

APPENDIX 2 – OVERWORLD AMP LIMITED RISK AND IMPACT ASSESSMENT

Part 1 Main Risk Assessment

Location / Site	Tilford House and Redlands Lodge – Premises of Overworld AMP	**Date of assessment**	04Aug2026	**Name of Assessor(s)**	Emma Rothery and Sara Kinge	**Assessment Title / No**	Company / 001
Project	Entire Company	**Team**	All Staff	**Business**	Overworld AMP Ltd	**Date of Review**	04Aug2026
						Next Review Date	04Aug2027
Task Assessed Describe the task in this section with as much detail as possible	This Risk Assessment applies to: • Strategic and Reputational • Physical • Infrastructure • Governance • Staffing • Young people • Financial						

STRATEGIC AND REPUTATIONAL RISKS										
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating**	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating**
			Use the risk matrix to determine values				Use the risk matrix to determine values		
Loss of funding	Reduction in provision available	Maintain good relationships with clients; competitive pricing; accreditation Awarding Organisation offering qualifications and certified programmes	4	2	8	Continue with good governance	4	1	4

Unsatisfactory external audit; inadequate leadership; inadequate student progress	LA removes approval of provision	Performance management and termly CPD; Directors involved on a daily basis; admissions process; young people work flow; young people planners; young people session and termly reports; constant review of policies and procedure;	4	2	8	Heads of Care and Head of Education to review sessions on a regular basis; all staff inspection ready attitude Continued scrutiny of quality and outcomes by Directors.	4	1	4
Poor local reputation	Lack of student admissions	Ensure continued positive engagement with local community; keep social media and website updated with success stories; good client communication; preferred supplier status with local LA's	4	2	8	Continued engagement with LAs; regular review of local social media. Continued strategic engagement with commissioners and partners.	4	1	4
Non-compliance with statutory or safeguarding requirements	Reputational damage, regulatory intervention or loss of confidence.	Governance oversight of safeguarding and compliance frameworks. Regular internal and external audits. Assurance that staff training, policies and procedures are current and compliant. Senior leadership provide safeguarding assurance to Directors.	5	2	10	Continue with staff training; ensure new staff receive fill induction; policies and procedures updated when necessary and reviewed annually. Prompt response to changes in statutory guidance.	5	1	5
Accusations of criminal activity such as financial fraud	Serious reputational damage and potential legal consequences.	Financial best practices in place; internal audits; accounts submitted to Companies House; DBS on all staff;	5	2	10	Ongoing review of financial governance and audit outcomes. Maintain staff awareness of reporting and whistleblowing processes.	4	1	4
Reporting of a RIDDOR	Reputational impact and potential loss of staff or commissioner confidence.	Adequate insurance in place; staff receive training on Health and Safety; Heath and Safety Policy reviewed annually and updated as and when necessary	5	2	10	Continued review of incident trends and audit findings. Ensure learning from incidents informs strategic oversight.	4	1	4
Recruitment of employees convicted of child offences	Severe reputational damage and significant safeguarding risk.	Safer recruitment procedures, inc. DBS Checks, single central record, staff involved in recruitment take Safer Recruitment training	5	2	10	Continued audit and assurance of recruitment processes. Ensure all staff responsible for recruitment undertake Safer Recruitment training. Regular review of recruitment compliance by senior leadership.	4	1	4
Staff misconduct or negligence	Reputational damage; risk to young people	Safer recruitment procedures. Probation. Robust management and oversight structure. Employee Code of Conduct. Whistleblowing. Sexual Harassment Policy. Tackling Bullying Policy. Staff involved in recruitment take Safer Recruitment training	5	2	10	Ensure all staff responsible for recruitment undertake Safer Recruitment training. Ongoing review of misconduct trends and learning at leadership level. Ensure robust escalation and accountability processes remain effective	4	1	4
Qualification boards sanction	Strategic and reputational damage; reduced credibility of qualifications offered.	Internal Quality Assurance in place; good relationships with examining boards, regular review of compliance with awarding body requirements.	4	2	8	Continued monitoring of IQA outcomes and awarding body feedback. Ensure governance oversight of qualification delivery standards.	3	1	3

PHYSICAL RISKS										
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating**	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating**
			Use the risk matrix to determine values				Use the risk matrix to determine values		
Unauthorised access	Unauthorised intruders could get into the building and subsequent risk imposed to staff, young people and visitors on site	Invacuation Procedure. A secure system is in place to prevent unauthorised access into the building during opening and closed hours. CCTV installed. All visitors are required to sign in and show identification, as necessary. Staff are required to wear a staff lanyard, for identification purposes. All visitors are to be supervised by Overworld AMP employees throughout. Windows are inaccessible. Designated staff to ensure that the building is secure when leaving at the end of the working day	5	2	10	Additional CCTV to be installed; additional entry systems for internal doors to be installed; recruitment of a receptionist for Tilford House; Administration Hub relocating to Redlands who can assist with visitors to site	4	1	4
Unsecured exits	A young person could abscond from the building	Secure system in place to prevent young people from unauthorised/unsupervised exit during opening hours. CCTV installed. Individual Risk Assessments to identify young people with prior incidents. Key-pad exit on all doors. Windows are inaccessible. Missing young person policy in place. Young people are closely supervised (usually 1:1 or 1:2).	5	2	10	Ensure young people's individual risk assessments are updated following an incident; ensure all external doors are locked (except fire exits)	3	1	3
Harm or injury to a young person or staff member whilst off-site	Harm, injury or even death to staff, young people and visitors	Risk assessments are completed for all off site activities and in additional all young people have individual risk assessments; monitored constantly	5	2	10	Ensure risk assessments are updated following any incidents	4	2	8
Staff or young person drowning in the pool when participating in swimming activities at Redlands; slips trips or falls around	Harm, injury or even death to staff, young people and visitors	Risk assessment and SOP is in place for the swimming pool at Redlands. Signage in place; no chemicals in the pool area; maintenance carried out weekly by swimming pool contractor; reporting procedure in place if pool not deemed safe	5	2	10	Review of risk assessment and SOP following an incident and in any event annually; review of maintenance company's records on a regular basis by Site Supervisor	5	1	5

the pool; chemical burns									
Staff, young people or visitors suffer electric shock when using electrical equipment	Harm, injury or even death to staff, young people and visitors	Ensure all electrics comply with legislation and inspections are up to date; PAT testing to be completed as per legislation; electrical sockets not to be overloaded; equipment is checked prior to use for faults. All electrical faults are reported to the Site Supervisor and/or the Administration Hub who in turn will organise necessary inspection. Defective electrical equipment is clearly identified, labelled as 'out of use' and stored separately to prevent accidental use; the Site Supervisor and/or the Administration Hub will arrange appropriate disposal; Damaged appliances will either be repaired where possible or replaced.	5	2	10	Maintain a maintenance contract for regular inspections of electrical installation and contract for PAT testing	5	1	5
Water ingress	Damage to property and potential harm, injury or death to staff, young people and visitors	Regular building inspection by the Site Supervisor and/or the Administration Hub; any issues to be reported immediately to the Site Supervisor and/or the Administration Hub. Landlord, Store Property, is responsible for the building Tilford House; Directors are responsible at Redlands; Business Continuity Plan	5	2	10	Continue with current monitoring and vigilance	5	1	5
Flood	Damage to property and potential harm, injury or death to staff, young people and visitors	Properties are not within an area prone to flood; Invacuation and evacuation procedures. Business Continuity Plan	5	2	10	Continue with current monitoring and vigilance	5	1	5
Gas Leak; explosion or inhalation of gas	Damage to property and potential harm, injury or death to staff, young people and visitors	There is no gas at Tilford House so there is no risk Redlands there is gas for domestic use only; Invacuation and evacuation procedures. Business Continuity Plan	5	1	5	Continue with current monitoring and vigilance	5	1	5
Injury from slip, trip or fall	Harm, injury or death to staff, young people and visitors	Health & Safety Policy in place and all staff responsible at all times; Risk Assessment in place for Outdoor Learning at Redlands; Housekeeping on both sites maintained to a high standard. Spills cleared immediately; Cables tidied or covered; site maintenance undertaken; any potential hazards reported to the Site Supervisor and/or Administration	5	3	15	Continue with current monitoring and vigilance	4	2	8

		Hub and/or Outdoor Learning Lead and actioned accordingly							
Restricted or unsafe access or egress	Delayed escape in the event of a fire or other emergency; Smoke inhalation; burns; slips trips and falls ; Poor lighting on access/egress routes (inside and outside Strained eyes, depreciation in eyesight.	Health &Safety policy in place and all staff responsible at all times. Fire Safety Policy – trained Fire Wardens. PEEPs in place. Housekeeping maintained to a high standard. Spills cleared immediately. Cables tidied or covered. Building maintenance. Salt for exits during freezing conditions; regular inspection of all fire exit signs and lighting by external company	5	3	15	Continue with current monitoring and vigilance	3	2	6
Damaged doors, windows, furniture, fittings, equipment and general fabric of the building.	Harm, injury or even death caused by damaged items	Regular checks for damage as part of whole company Health and Safety Policy; structural insures reported to the Landlord; damage to non fixed items to be reported to the Site Supervisor and/or Administration Hub	5	2	6	Continue with current monitoring and vigilance	2	2	4
Inadequate layout of workstations	Repetitive strain injury (RSI); upper limb pain and discomfort; poor working posture; visual issues	Individual HSE workstation risk assessment undertaken by all staff using computers and VDUs.	5	2	6	Continue with current monitoring and vigilance	2	2	4
Inadequate breaks from VDUs	Eye strain; Eye fatigue; Headaches	Where Visual Display Unit (VDU) work is intensive, or continuous (>1 hour) adequate breaks are taken to rest eyes. Individual HSE workstation risk assessment undertaken by all staff using computer and VDUs and on behalf of the young person they are working with	5	2	6	Staff to encourage young people and other staff to take more frequent screen breaks; Continue with current monitoring and vigilance	2	2	4
Dogs (e.g. therapy animals or staff dogs if permitted to bring on site)	Staff, student or visitor risk of allergic reaction, fear response, or harm, injury or even death from unexpected interaction with a dog.	Only authorised persons are permitted to brin dogs onto site; dogs must remain supervised at all times; all dogs to be insured and if a visitor is bringing their dog(s) onto site for a therapy session or similar they must be DBS checked, have public liability insurance and are fully qualified, and all such documentation to have been approved by the Site Supervisor and/or the Administration Hub.	5	3	15	Maintain records for young people regarding allergies; records of young people who do not wish to meet the dogs	4	2	8

Access for disabled/ neurodivergent people	Individuals who are pre- or non-verbal, hearing and/or visually impaired, have physical and/or learning differences, and/or experience mental ill health may face barriers to physical, sensory, or digital access within the setting.	Physical Accessibility Ramp access to reception. Lift suitable for wheelchair users to the second floor. Wheelchair-accessible male and female lavatories. Adjustable workstations. Signage includes visual symbols and is placed at accessible heights. Annual accessibility audits of the physical environment Digital Accessibility & Communication Annual accessibility audits of digital environments. Accessible formats of learner-facing documents (e.g. large print, easy-read, audio). Visual access guides for new young people, including plain-English instructions and images. Formal learner feedback processes in place to identify and address accessibility barriers. Online sessions offered when required. Assistive Technology & Equipment Headphones, sensory aids, hearing loops, and adaptable gaming equipment available. Training & Inclusion Staff receive training on common SEND conditions and reasonable adjustments. Tailored training is provided for any specific learner needs. Staff training includes neurodivergent-led input or lived experience Sensory Environment & Regulation Sensory audits of key rooms (lighting, noise, seating) support proactive adjustments Emergency Evacuation Personal Emergency Evacuation Plans (PEEPs) in place and reviewed. Evacuation chair available for individuals unable to use stairs. Staff trained in PEEP implementation and equipment use. Clearly marked and maintained refuge points	2	2	4	No additional controls are required beyond maintaining current good practice and ensuring regular review of procedures as part of ongoing accessibility and inclusion audits.	2	2	4

Poor housekeeping	Slips, trips, and falls; fire risk due to accumulation of flammable materials; blocked fire exits; cluttered workspaces leading to injury or restricted movement; hygiene risks due to unclean or poorly maintained areas.	Daily cleaning schedule for all communal and learner areas. Designated staff responsible for regular visual checks of key areas (e.g. corridors, stairways, breakout spaces). Clear walkways and escape routes maintained at all times. Regular removal of rubbish and recycling; bins emptied daily. Storage areas kept tidy and organised, with heavy items stored at waist height or lower. Spills cleaned immediately using appropriate equipment; signage used for wet floors. All staff and young people encouraged to take responsibility for tidying their own spaces after use. Signage in place to promote tidy workspaces and responsible use of shared areas. Maintenance team logs and responds to reported hazards (e.g. frayed carpet, loose cables). Fire exits checked weekly to ensure they are unobstructed	5	3	15	Current controls are effective and risks are being appropriately managed.	4	2	8
Outbreak of contagious disease	Transmission of illness between young people and staff; potential for severe illness in vulnerable individuals; disruption to learning; increased staff absence; safeguarding or supervision concerns due to staff shortages.	Management of Communicable Diseases Policy in place and followed. PPE available on-site, including masks and gloves for staff where appropriate. Hand sanitiser provided at every desk and in communal areas. Staff and young people encouraged and reminded to maintain good hand hygiene. Cleaning protocols increased during known outbreaks (e.g. more frequent disinfecting of high-touch surfaces). Staff trained on recognising symptoms and reporting protocols. Young people supported to stay at home when unwell, with remote engagement available if needed. Reporting systems in place to monitor and respond to illness trends. Communication protocols established for informing families, staff and local authorities when needed. Ventilation encouraged in shared spaces (e.g. open windows, use of mechanical ventilation where available).	5	4	20	Current controls are appropriate and in line with best practice and public health guidance.	3	3	9
Storage, handling or loss of medication	Medication may be lost, stolen, accessed by unauthorised persons, administered incorrectly or unavailable when required, resulting in harm to young people or others.	First Aid and Medical Needs Policy. Medication stored securely and only accessible to authorised staff. Medication records maintained. Administration recorded where applicable. Regular stock checks undertaken. Medication returned to parents/carers or disposed of safely when no longer required.	5	2	10	Continue regular audits of medication storage and records. Review procedures following any medication error, loss or near miss. Reinforce staff training during induction and refresher training.	5	1	5

INFRASTRUCTURE RISKS										
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating** Use the risk matrix to determine values	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating** Use the risk matrix to determine values
Disaster e.g. fire, flood, major system failure	Loss of financial, operational or personal data that cannot be recovered; disruption to education provision; potential safeguarding and GDPR breaches; reputational damage.	Majority of data stored on secure cloud-based systems (e.g. Microsoft 365). Business Continuity Plan in place. Cyber Security for Schools training provided to all staff. Staff awareness of data protection responsibilities. Data recovery and disaster recovery testing. Off-site backups. Clear incident response roles and responsibilities communicated to staff.	5	3	15	Annual testing and review of the Business Continuity Plan.	4	2	8
Loss of or unauthorised access to IT systems	Data breach involving personal or sensitive information; loss of access to essential systems; interruption to teaching, safeguarding and administration; potential non-compliance with GDPR.	Cloud-based IT systems (e.g. Microsoft 365) with secure access controls. Business Continuity Plan in place. Cyber Security for Schools training for all staff. Staff guidance on data protection and acceptable use of IT systems. Multi-factor authentication (MFA) for all staff accounts. Regular audits of user access and permissions. Clear procedure for reporting suspected cyber incidents or data breaches.	5	3	15	Enforce regular password changes and strong password requirements.	3	2	6
Centre closed (temporary or emergency closure)	Disruption to young people' education; reduced access to support services; safeguarding concerns; financial impact; reputational risk.	Cloud-based systems allow continued access to key information. Business Continuity Plan in place. Good communication systems with young people, parents/carers and other stakeholders. Some staff have laptops, enabling limited remote sessions where appropriate. Regular testing of communication channels (email, phone, virtual platforms).	4	3	12	Ensure all staff laptops are encrypted and suitable for remote working. Remote learning procedure in Qualifications, Certificated Learning & Exams Policy	3	2	6
Failure of communication systems	Inability to contact parents/carers, staff or external agencies; safeguarding concerns during incidents or closures.	All staff have mobile phones, enabling direct communication if primary systems fail. Student data stored securely on cloud-based systems accessible via 4G mobile networks. Key systems can be accessed remotely if on-site internet is unavailable. Contact details for staff, parents/carers and key agencies are maintained and regularly updated.	4	3	12	Continue routine testing of access to cloud-based systems via mobile data. Maintain up-to-date contact lists and communication protocols.	3	2	6

		Business Continuity Plan includes communication arrangements during disruption.				Review communication arrangements following any incident or disruption.			
GOVERNANCE RISKS									
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating** Use the risk matrix to determine values	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating** Use the risk matrix to determine values
Safeguarding or child protection breach	Failure to follow safeguarding legislation and statutory guidance, resulting in harm to a child or young person; regulatory action; reputational damage.	Safeguarding and child protection policies in place. Designated Safeguarding Lead arrangements established. Staff training and clear reporting procedures. Ongoing monitoring of safeguarding practice and policy compliance. Regular updates in line with changes to legislation and statutory guidance (e.g. KCSIE).	5	3	15	Review procedures and training following any safeguarding incident or near miss.	4	2	8
Third-party claim against the business	Parent, member of the public or staff member makes a claim against the organisation, resulting in financial loss, reputational damage and management time diverted from core provision.	Robust internal management systems and documented policies. Contracts in place with commissioning clients. Clear complaints procedure and Subject Access Request (SAR) process. HR compliance supported through BrightHR. Appropriate levels of insurance in place. Access to Markel legal and HR consultations.	5	3	15	Review policies, procedures and training following any claim. Record learning outcomes and implement corrective actions where required.	4	2	8
Legal action due to governance or employment failures	Legal proceedings arising from failure to meet health and safety duties, or failure to put suitable protections in place against sexual harassment or discrimination; financial and reputational impact.	Robust governance, safeguarding and employment policies, reviewed annually. Staff induction and refresher training programme. Dynamic risk assessment process in place. BrightHR used to support HR compliance. Appropriate insurance cover and access to Markel consultations.	5	3	15	Review governance arrangements and training effectiveness following any legal action. Update risk assessments and policies in response to legislative or sector changes.	4	2	8
Statutory or regulatory non-compliance	Failure to comply with statutory obligations (e.g. tax, VAT, GDPR,	Robust internal financial and governance systems. VAT registered and compliant. Chief Operations Officer is a Chartered Accountant. External	5	3	15	Continue routine monitoring of statutory and regulatory requirements. Act promptly on any changes to legislation or guidance.	4	2	8

	Companies Act), leading to enforcement action, fines or reputational damage.	professional advice accessed where required. Scheduled compliance reviews. Ongoing monitoring of changes to statutory requirements.				Record compliance checks and outcomes for audit and assurance purposes.			
Loss of one or both Directors	Disruption to strategic leadership due to long-term illness, leave or death; potential governance instability.	Business Continuity Plan in place. Chief Operations Officer identified to temporarily assume operational leadership. Senior managers able to diversify responsibilities to maintain continuity. Understanding that the company and directors are separate legal entities. Provision for legal heir to appoint directors if both directors were to die.	5	3	15	Continue to review succession and continuity arrangements as part of business planning.	5	2	10
Inadequate insurance cover	Insurance cover is insufficient, incorrect or outdated, exposing the organisation to financial risk.	Insurance cover fully compliant with statutory requirements and enhanced protections. Insurance arrangements checked by commissioning clients. Access to advice and consultation from current insurers (Markel). Annual insurance review and renewal. Cover reviewed following any significant organisational change.	5	3	15	Continue annual review of insurance cover to ensure it remains appropriate to risk. Review insurance arrangements following any material change to provision or operations.	5	2	10
Ofsted Illegal Schools Taskforce / DfE compliance breach	Breach of DfE statutory guidance relating to unregistered provision, resulting in enforcement action or reputational damage.	Preferred provider status with several local authorities who monitor compliance. Clear admissions and referral processes. Robust auditing of hours requested and delivered. Clear challenge to commissioning bodies requesting more than 15 hours for under-16s. No limits placed on provision for young people aged 16+. Successfully passed inspection in July 2023.	4	3	12	Continue monitoring DfE guidance and Ofsted expectations. Register as an independent school if this becomes a legal requirement.	5	2	10
RISK TO STAFF AND STAFFING RISKS									
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating** Use the risk matrix to determine values	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating** Use the risk matrix to determine values
Poor staff performance	Reduced quality of education and support; inconsistency in practice; potential safeguarding concerns; negative impact on	Recruitment and Selection Policy aligned with Safer Recruitment guidance. Employee Handbook and Code of Conduct. Structured induction programme. Ongoing training and professional development. Support workers required to hold at least a Level 2 Award in Mentoring if not teaching qualified. Regular	4	3	12	Continue to review recruitment and selection processes to ensure best fit and quality.	3	2	6

	learner outcomes and reputation.	1:1 supervision meetings and support. Standard Operating Procedures (SOPs). Six-month probation period with option to extend. Annual appraisal process. BrightHR used for performance management and documentation. Senior staff present in all work areas.Clear hierarchy of support and chain of command.							
Breach of Code of Conduct	Unprofessional behaviour; safeguarding concerns; reputational damage; potential disciplinary or legal action.	Clear Code of Conduct within the Employee Handbook and safeguarding policies. Code of Conduct covered during induction and reinforced through training. Regular supervision and oversight by senior staff. Clear reporting and disciplinary procedures supported by BrightHR.	4	3	12	Ongoing reinforcement of expectations through supervision and training. Review procedures following any breach to identify learning and improvements.	3	2	6
Multiple staff absence	Interruption to education provision; reduced continuity for young people; increased pressure on remaining staff.	High staff-to-learner ratios. Qualified teachers oversee support workers. Support workers hold at least Level 2 Award in Mentoring. Graduate subject specialists deployed on the floor. Flexible staffing arrangements and redeployment where appropriate. Back to work interviews and disciplinary procedures for repeat absence.	4	3	12	Ongoing monitoring of staffing levels and absence trends. Review contingency arrangements during periods of sustained absence.	3	2	6
Inadequate recruitment	Interruption to education provision; increased pressure on remaining staff.	Robust recruitment and safer recruitment procedures. Constant upskilling of existing staff into teaching and management roles. Internal talent development and succession planning.	4	2	8	Continue reviewing recruitment outcomes and retention data. Adjust recruitment strategies in response to workforce needs.	3	1	3
Staff mental health and wellbeing	Poor mental health, stress or burnout leading to reduced performance, increased absence, errors in judgement, or reduced capacity to support young people effectively.	Mandatory training for staff to spot signs of poor mental health in colleagues. Mental health support available through BrightHR. Trained Mental Health First Aider. Regular supervision and 1:1 support meetings. Supportive leadership presence and clear escalation routes. Workload monitoring and flexible responses where appropriate.	4	3	12	Continue monitoring staff wellbeing through supervision and absence data. Review wellbeing arrangements in response to feedback or emerging trends.	3	3	9
Inadequate staff training (e.g. safeguarding, child protection)	Breaches of legislation, statutory guidance or internal policy; safeguarding failures; reputational damage; regulatory action.	Mandatory safeguarding and child protection training including SEN and Prevent. Dedicated HR team & BrightHR advisors. Senior staff oversee compliance and quality. Regular internal audits and external inspections. Ongoing CPD programme for all staff.	5	3	15	Continue monitoring training compliance and refresh cycles. Update training promptly in line with legislative or guidance changes.	4	2	8
Unexpected death or serious injury of a	Emotional impact on staff and young people;	Robust risk assessment processes in place. RIDDOR reporting procedures established. Mental health	5	3	15	Continue wellbeing monitoring and staff support arrangements.	4	2	8

young person, staff member or person known well to the company	operational disruption; potential reporting and compliance requirements.	support available through BrightHR. Trained Mental Health First Aider on site. Safeguarding policies and Designated Safeguarding Lead arrangements in place. Senior leadership oversight and incident response procedures.				Review risk assessments and support processes following any serious incident.			
RISKS TO YOUNG PEOPLE									
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating** Use the risk matrix to determine values	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating** Use the risk matrix to determine values
Poor engagement	Young person does not engage effectively, leading to limited progress, risk of placement breakdown and loss of educational opportunity.	Tour and taster sessions to assess mutual suitability. Assessment period of up to 7 weeks. Person-centred plan developed for each learner. Placement and session plans co-produced with the young person, family and commissioners. Positive Interactions Policy. Well-trained staff with senior oversight. Online sessions offered where a learner is unable to attend in person. Dynamic provision mapping. Termly reports and full annual review reports including attendance.	4	3	12	Continue reviewing engagement strategies in response to learner feedback and attendance trends. Adjust provision flexibly to maintain engagement and suitability.	3	2	6
Poor attendance	Interrupted education, reduced progress, safeguarding concerns and increased likelihood of placement breakdown.	Attendance Policy in place and shared with families and commissioners. Daily attendance tracking and follow-up. Daily attendance monitoring: reasons for missed sessions recorded and trends analysed. Commissioners informed when attendance falls below 80%. Flexible delivery options, including online sessions where appropriate.	4	4	16	Continue to analyse attendance data to identify patterns and barriers. Review attendance strategies collaboratively with families and commissioners where attendance concerns persist.	3	3	9
Radicalisation and Extremism	A learner may be exposed to extremist ideologies or online content that could lead to radicalisation, exploitation, safeguarding concerns or criminal behaviour.	Safeguarding and Child Protection Policy. Prevent Duty training for staff. DSL oversight. Online Safety Policy. Filtering and monitoring systems. Staff trained to recognise indicators of radicalisation and make appropriate referrals. Young people supported to develop critical thinking, digital literacy and respectful discussion of different viewpoints. Multi-agency working with Children's or Adult Social Care, Police and other safeguarding partners where appropriate	4	4	16	Continue annual Prevent training. Review filtering and monitoring arrangements. Maintain strong multi-agency links. Continue individual risk assessment and targeted support for vulnerable young people. Review emerging risks through safeguarding supervision and DSL meetings.	4	1	4

Child Criminal and Sexual Exploitation (CCE/CSE)	Young people may be groomed, exploited or coerced into criminal or sexual activity, including county lines, online exploitation, trafficking or inappropriate relationships, resulting in significant physical, emotional or psychological harm.	Safeguarding and Young Person Protection Policy. DSL oversight. Staff receive safeguarding, CCE, CSE and contextual safeguarding training. Individual learner risk assessments. Strong relationships with parents/carers, commissioners and external agencies. Multi-agency working with Children's or Adult Social Care, Police and other safeguarding partners where appropriate. Attendance and welfare monitoring. Online Safety Policy and filtering and monitoring systems.	4	4	16	Continue safeguarding training in line with KCSIE. Review individual risk assessments following safeguarding concerns. Maintain multi-agency working and information sharing. Continue educating young people about healthy relationships, online safety and exploitation risks through PSHE and mentoring	4	2	8
High noise levels / sensory distress	Sensory overload leading to dysregulation, distress, disengagement or incidents	Environment designed to accommodate sensory needs. Quiet areas and single rooms available where required. Sensory aids provided. All staff read EHCPs and individual plans. Full risk assessments in place. Staffing ratios of 1:1 and no less than 1:3. Positive Interactions Policy with de-escalation strategies. Regular movement breaks. Senior staff support available at all times.	4	3	12	Ongoing review of environmental arrangements in response to individual sensory needs. Continue staff training in autism-affirming and sensory-informed practice.	3	3	9
Online safety and digital risks	Exposure to harmful online content, misinformation, fake news, unsafe AI-generated content, deepfakes, sexting or unsafe VR environments.	Online Safety Policy and Gaming Policy in place. Internet access filtered and monitored. Staff and young people trained in online safety, digital literacy and recognising AI-enabled abuse. Young people taught critical thinking, digital citizenship and recognising misinformation. Access to AI and VR tools supervised, risk-assessed and restricted to age-appropriate educational use. Multi-agency working with Children's or Adult Social Care, Police and other safeguarding partners where appropriate	5	4	20	Maintain up-to-date staff CPD on emerging technologies and safeguarding implications. Annual review of filtering and monitoring systems to ensure coverage of AI-enabled and VR risks.	4	2	10
Accident or incident off-site	Injury to a young person while being transported or attending off-site activities; safeguarding and reputational risks.	Robust activity and off-site risk assessments. Lone working procedures. First aid trained staff. Knowledge of fire and emergency procedures at off-site venues. Staff carry mobile phones. Driver Code of Conduct. Vehicles insured, roadworthy, MOT and tax compliant.	5	3	15	Continue reviewing off-site risk assessments following activities or incidents. Ensure transport arrangements remain appropriate to individual learner needs.	4	2	8
Peer-on-peer bullying	Verbal, physical, emotional or social bullying causing distress, reduced self-esteem, disengagement or safeguarding concerns.	Tackling Bullying, E-Safety, Risk Assessment and Positive Interactions Policies. Highly experienced DSL available for consultation. Safeguarding and behaviour management training at induction and termly refreshers. Senior staff stationed in all operational areas.	5	3	15	Strengthen pupil voice through wellbeing surveys and structured feedback. Reinforce expectations of respect during induction and reviews.	4	2	8

Physical aggression towards others by a young person	Actual bodily harm to peers or staff; safeguarding concerns; potential exclusion.	Positive Interactions, Tackling Bullying, Online Safety and Risk Assessment Policies. Experienced DSL oversight. Staff training at induction and termly. Senior staff presence throughout the setting. Incident logging, tracking and learning via MyConcern. CCTV in place. Procedure for ending placement.	5	3	15	Continue analysis of incident data to identify patterns and preventative strategies. Review individual risk assessments following serious incidents.	4	2	8
Young person in distress or dysregulation or increased vulnerability	Physical injury, stress, damage to property, aggression, flight from the building or harassment of staff.	Positive Interactions Policy. Individual risk assessments for all young people. Activity risk assessments for off-site or alternative provision. Proactive co-regulation approach. Sensory equipment and quiet spaces available. Regular and responsive movement breaks. EHCP, medical and SEND information obtained in advance. Staff training in SEND and SEMH needs. MyConcern. CCTV in place.	5	4	20	Ensure all staff have read and understood learner profiles and individual risk assessments. Review support strategies following incidents to reduce escalation.	4	2	8
Cyberbullying and sharing nude images	Safeguarding risks, emotional harm, legal and reputational implications.	Online Safety Policy and Acceptable Use Agreements. Staff understand their responsibilities regarding filtering and monitoring systems. PSHE and digital citizenship education. Parental engagement. DSL oversight.	5	3	15	Continue staff CPD on online safeguarding risks.	4	2	8
Bullying or harassment of staff by a young person	Impact on staff wellbeing, safety and retention; breakdown in relationships.	Staff Code of Conduct and Positive Interactions Policies. Staff supervision and support. DSL and HR oversight. Incidents logged and followed up via MyConcern.	5	3	15	Explicit guidance on reporting staff harassment included in induction and annual safeguarding training.	4	2	8
Traffic movement on or near site	Risk of injury to young people, staff or visitors from moving vehicles during arrival, departure or deliveries.	Designated parking and turning areas. Signage and speed restrictions in place. Staff presence at key times. Visitor induction and escort procedures.	5	2	10	Continue monthly review of arrival and departure supervision and signage effectiveness.	4	1	4
Unsafe physical premises	Risk of harm from unsecured windows, uneven flooring, unsafe fixtures or other environmental hazards.	Health and Safety Policy in place. Premises Inspection Schedule and maintenance log. Annual Fire Risk Assessment and Health & Safety Risk Assessment. CCTV and incident reporting systems. External contractor compliance checks.	5	2	10	Continue scheduled maintenance programme and termly Health and Safety audits.	4	1	4
Outdoor learning	Risk of burns, cuts, falls or injury from tools, fire or uneven terrain; exposure to weather conditions or sensory triggers.	Outdoor learning risk assessed by designated lead. Designated activity areas. Staff trained in tool and fire safety. PPE available as required. First aid kit available. Dynamic risk assessments completed on the day.	5	3	15	Ongoing review of practice. Termly equipment checks and review of learning activities.	4	2	8

Food tech and cooking activities	Risk of burns, cuts, fire, allergic reactions or poor hygiene practices.	Fire blankets and extinguishers available. Sessions risk assessed. Ingredients and allergies known in advance. Staff trained in safe equipment use and food hygiene via BrightSafe.	5	2	10	Annual food safety refresher training. Continue fire safety checks in teaching areas.	4	1	4
Fire or emergency at off-site venue	Risk of injury, confusion or separation during evacuation at an unfamiliar venue.	Off-site activity risk assessments completed for activity, learner and on-the-day. Staff trained in dynamic risk assessment. Fire evacuation procedures checked at venues. High staff-to-learner ratios maintained.	5	3	15	Termly review of off-site visit procedures. Incorporate post-visit debriefs to identify learning.	5	2	10
Physical activity (gym, swimming, climbing, trampolining, bowling)	Risk of injury due to misuse of equipment, overexertion, slips or falls.	Supervision and safety briefings for all participants. Warm-up routines encouraged. Additional coaching for new participants. Equipment checked regularly and removed if unsafe. Swimming pool maintained by qualified external contractor. Sessions supervised by trained staff. VR use includes breaks and seated options.	5	3	15	Continue current monitoring and vigilance.	5	2	10
Knife use	Risk of injury through accidental cuts, intentional misuse, or increased risk for young people with a history of self-harm.	Individual risk assessments reviewed prior to participation. Staff-led knife handling or use of safety knives where appropriate. 1:1 supervision or equivalent during knife use. Knives stored securely and only accessed under direct supervision. Clear session rules communicated. Staff trained in de-escalation and safeguarding. Immediate access to first aid. Incident and near-miss reporting procedures in place.	5	3	15	Monitor emerging risks through regular review of individual risk assessments. Ongoing staff training in food preparation with vulnerable young people. Phased exposure to tools where appropriate. Reinforce safe behaviour and responsibility through PSHE or mentoring.	5	2	10
Sensory equipment (including VR headsets)	Risk of injury through misuse, trips or falls, or sensory overload leading to dysregulation.	Supervision at all times. Use restricted to carpeted areas. Warm-up routines encouraged. Sensory needs recorded on learner profiles. Individual risk assessments in place. Coaching provided for new users. Equipment cleaned between uses. Equipment checked regularly and removed if faulty.	4	2	8	Ensure all staff have read learner profiles and risk assessments.	3	1	3
3D Printing and Digital Fabrication	Risk of injury from hot nozzle or print bed; contact with moving parts; electrical faults; fire; inhalation of fumes or airborne particles; minor injuries during removal of printed items; damage caused by misuse of equipment.	Equipment used only under staff supervision. Staff trained in safe operation. Manufacturer's instructions followed. Printers located in a well-ventilated area. Young people receive a safety briefing before use. Hot components allowed to cool before handling where possible. Equipment visually checked before use and maintained in accordance with manufacturer guidance. PAT testing completed where required. Appropriate fire extinguisher available nearby. Removal tools used safely under supervision.	4	3	12	Review ventilation annually. Risk assess any new printer, filament or resin before use. Refresh staff training as required. Maintain routine servicing and inspection records. Review activity risk assessments before learner sessions.	4	2	8

Incomplete or inaccurate referral information	Failure to identify known safeguarding, behavioural, medical or other significant risks before placement, potentially resulting in harm to young people, staff or others, inappropriate placement decisions or inadequate support arrangements.	Admissions Policy. Referral information reviewed before placement, including EHCP, professional reports and risk assessments where available. Placement discussions held with commissioners, parents/carers and previous settings where appropriate. At least one on-site tour and taster session. Further taster sessions offered if necessary. Initial learner risk assessment completed and reviewed regularly.	5	3	15	Commissioners requested to provide all relevant information before placement commences. Any significant omissions or new information identified after admission are reviewed immediately, with learner risk assessments updated and placement suitability reconsidered where necessary.	5	1	5
FINANCE RISK										
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating** Use the risk matrix to determine values	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating** Use the risk matrix to determine values
Placement commences or continues without signed contract with or written funding authority	Non-payment for provision delivered; financial loss; disruption or premature ending of placement; adverse impact on continuity of education and learner welfare.	Admissions process. Offer letters agreed prior to placement. Placement paperwork reviewed. Finance oversight.	5	3	15	No placement commences without either: (1) fully executed contract, (2) a valid purchase order or (3) written funding approval/waiver from a senior authorised commissioner confirming liability for payment pending contract completion. Escalation to Directors where documentation is absent. Placement tracker reviewed weekly.	4	1	4
Cash flow – inaccurate or late invoicing	Incomplete, inaccurate or delayed invoicing impacting cash flow	Accurate reconciliation of attendance and invoicing records. Clear contracted hours and payment obligations. Independent quality check of invoices. Audit compliance. Oversight by Chief Operations Manager (Chartered Accountant).	3	2	6	No further action required.	3	2	6
Cash flow – late payment of invoices	Delayed income affecting operational stability.	Clear contracted payment terms. Offer letters agreed prior to placement. Late payment fees applied.	3	2	6	Improve consistency of contracts with private clients.	2	2	4
Overspending	Spending overruns due to unforeseen circumstances.	Tilford House owned and maintained by landlord not the Provision. Appropriate insurance cover. Reserve	3	2	6	Continue regular financial monitoring and review.	2	2	4

		funds in place. Financial oversight by Chief Operations Manager.										
OPPERATIONAL RISK												
What is the Hazard / Aspect	**What is the Risk / Impact**	**Current Control(s)** Procedures, training, PPE	**Severity (1-5)**	**Likelihood (1-5)**	**Inherent Risk Rating**	**Further Controls Required** Add additional control measures to lower the risk rating to an acceptable level	**Severity (1-5)**	**Likelihood (1-5)**	**Residual Risk Rating**			
			Use the risk matrix to determine values				Use the risk matrix to determine values					
Business development – changes in LA commissioning	Reduced demand due to local authorities moving away from EOTAS and independent AP provision.	Strong relationships with LA SEN and commissioning teams. Preferred supplier status. Competitive and transparent pricing. Transport offer. Strong post-16 provision. Unique and bespoke service model. Adaptable and scalable business model. Strong website and marketing presence.	3	3	9	Apply to LA procurement frameworks. Progress registration as an independent school (target 2026). Explore apprenticeship pathways. Continue monitoring SEND and AP Improvement Plans.	2	2	4			
Loss of assets (fraud or theft, including ideas)	Financial loss, data compromise or reputational damage.	Recruitment and Selection Policy. Online Safety Policy. Employee Handbook including whistleblowing and confidentiality. BrightHR. CCTV and robust security systems. Senior staff oversight. Appropriate insurance cover. Cyber safety training and regular auditing.	3	2	6	No further action required.	3	2	6			
Pandemic or forced closure	Loss of income and disruption to provision.	Business Continuity Plan. Ability to move provision online. Recognition that young people with EHCPs are likely to continue receiving provision.	3	3	9	No further action required.	3	3	9			

Who may be harmed? Mark x in appropriate box or boxes

Employees	X	Contractors	X	Other Tenants		Visitors	X	Members of the Public		Young Persons	X	New and Expectant Mothers		Client Employees	

Additional Information in case of Emergency Procedures

Pre-Session Preparation	• Conduct a pre-session visit to forest to the outdoor learning area to identify potential risks. • Share itineraries and risk assessments with all staff. • Obtain parental consent and ensure all medical forms are up to date. • Confirm transportation arrangements and accessibility accommodations.
Monitoring and review	• Staff will continuously monitor children's behaviour and environmental conditions during the session • Post-trip debriefs to evaluate risk management effectiveness and make improvements for future visits.
Emergency Procedures	**Communication –** Staff will carry fully charged mobile phones with emergency contact numbers programmed. **First Aid –** Designated first aiders will be present with fully stocked kits. **Missing Young Person Protocol –** Staff will implement a search procedure and contact emergency services if needed. **Incident Reporting –** All incidents will be recorded and reviewed post-visit. **In case of a medical emergency –** Attend to emergency following protocol, notify parents or guardians immediately and administrate first aid if needed while awaiting emergency services.

Part 1 Completion Notes

Assessors should complete Part 1 using guidance notes in this document and score the risk rating for each activity and its associated hazard(s). If the inherent risk rating score is above 5, the assessor should review the current controls to establish if additional controls can be identified that will reduce the risk rating to an acceptable level. If it isn't reasonably practicable to reduce the score to 5 or under, the assessor must complete Part 1 again and implement further control measures to reduce the risk to 5 or under before the activity can commence.

Risk Assessment Risk Matrix

People	Environment	Assets	Reputation	Severity		Certain	Very Likely	Likely	Possible	Unlikely
						5	4	3	2	1
Death, Serious Assault with weapon	Permanent: longer than 20 years	Severe Damage	Severe Impact		5	25	20	15	10	5
Major Injury/Assault, Sexual Assault /Physical Touching/Hijacking/Abduction	Long term: 10 to 20 years	Major Damage	Major Impact		4	20	16	12	8	4
Reportable Injury (Over 7 day lost), Minor Assault	Medium term: 5 to 10 years	Moderate Damage	Moderate Impact		3	15	12	9	6	3
Lost Time Injury (Under 7 days lost) Sexually Motivated Language, Racial Verbal Assault, (Being held Captive EMS only)	Short term: 1 to 5 years	Slight Damage	Slight Impact		2	10	8	6	4	2
Minor Injury (No lost time) Verbal Assault (general)	Temporary: Less than 1 year	No Damage	No Impact		1	5	4	3	2	1

Score	Risk	Breakdown/Action
1 to 5	Low	Adequate Control Measures may be in place - proceed with caution
6 to 9	Low / Medium	Additional Control Measures should be sought to reduce the risk before proceeding
10 to 15	Medium	Additional Control Measures should be sought to lower the risk as far as is reasonably practicable
16 to 19	Medium/high	Urgent Action Required Do Not Proceed – Use HSE Escalation process to seek further advice
20 to 25	High	Immediate Action Required Do Not Proceed

APPENDIX 3 – DBS WAIVER

Name of Company _____

I confirm that all necessary safeguarding/DBS checks on staff and volunteers are undertaken by the company and that a record of their DBS information is retained by the company.

Signature _____ Date _____

Print Name _____

Position _____

APPENDIX 4 - ACTIVITY RISK ASSESSMENT PLANNER AND CHECKLIST

Young Person/People Attending	
Activity Name	
Activity Date	
Activity Lead	
Location	
Staff Attending	
Transport Arrangements	

Activity Risk Assessment reviewed by:	
Individual Student Risk Assessments reviewed by:	
Please add any notes of concern	

Preparation Checklist

What is the planned activity? (Provide a brief description of the activity, including goals and purpose)
Special Considerations (hazards, toilet, weather, terrain, etc.)
Required equipment and clothing (e.g. wellies/walking boots, coat, sun protection, food, water, EpiPen, Inhaler, First aid kit, mobile phones etc)
Parental permission obtained (detail who contacted, and store any emails in student folder)
Check fire evacuation procedures at the venue being visited

Logistics

Departure Time	
Estimated Return Time	
Activity Duration	
Emergency Mobile Contact Number	

Senior Approval

Name	
Signed	
Position	
Date	

Post Activity

Summarise learning points; things that went well and/or things that could be improved

Updates to Risk Assessments? If yes;	YES / NO (please circle)
Activity Risk Assessment updated by	
Individual Young Person Risk Assessments updated by	
Photos added to Young Person's record	YES / NO (please circle)
Session notes added to individual Monitoring Forms	YES / NO (please circle)
If NO to either of the above, please give details	

Final Sign Off by Senior Staff Member

Name	
Signed	
Position	
Date	