



Accessibility Plan Policy

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Created/Amended	Date	Staff responsible
Created	Feb 2017	SMB, Deputy Head Academic, Senior School SJR, Assistant Bursar, Operations
Amended	February 2017	SLT
Amended	September 2018	SLT
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Amended	September 2020	SLT
Next Review	January 2022	

APPROVED BY SLT

Name:	Signature:	Date:
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1. ETHOS AND AIMS OF WELLINGBOROUGH SCHOOL

Wellingborough School aims to offer the highest quality of teaching and learning and support all pupils in the pursuit of academic and personal excellence. There are high expectations for all of our pupils and every effort is taken to ensure that each and every pupil can take part in the whole school curriculum. The diversity of our school community is seen positively and the School appreciates the contribution that pupils with special educational needs (SEN) and/or disabilities can bring to school life. The Equality Act 2010 defines a disability as 'a physical or mental impairment which has substantial and long term adverse impact on a person's ability to carry out normal everyday activities'. This has some overlap with the definition of 'special educational needs' in the Families Act 2014. The School's Admissions Policy and criteria seeks to remove barriers to entry to Wellingborough School for pupils with special needs and/or disabilities.

The Admission Policy states:

Wellingborough School aims to be an inclusive co-educational school where every pupil feels valued by all with whom they come into contact during their time at the School. The School is committed to treating all pupils with the same level of care and respect whatever their skills, attainments, disabilities or differences. We have an Admissions Policy to ensure that all entrants are considered fairly and in an appropriate manner with respect to their point of entry to the School.

2. FUNDAMENTAL BRITISH VALUES

The importance of using language that does not offend amongst both our staff and our pupils is inherent in our behaviour policy.

3. OVERVIEW AND MONITORING

Wellingborough School does not have large numbers of pupils or parents with major disabilities other than Specific Learning Difficulties, addressed elsewhere. Where there is a temporary difficulty, e.g. a short term injury, then steps are taken for the duration of the problem (see **Appendix 1** PEEPs Questionnaire and **Appendix 2** PEEPs Evacuation Plan). Arrangements are made on an individual basis and tailored to the specific needs of the individual. Pupils and individual education plans are monitored to assess progress relating to their individual targets.

There are several pupils who have a range of diagnoses including dyslexia, visual impairment etc, and these are detailed on our Learning Development Register. All our pupils are fully integrated into School life and participate in the whole curriculum including extra-curricular activities (such as school trips, sport etc).

4. RECRUITMENT OF STAFF

A fully inclusive approach is taken to staff recruitment and appointments are offered to the best person based on their skill set and qualifications and regardless of any disability he/she might have. The School's equal opportunities policy for staff is actively implemented in the day-to-day management of Wellingborough School.

5. HEALTH & SAFETY COMMITTEE

The remit of the Health & Safety Committee, chaired by the Assistant Bursar, addresses matters relating to access and safety for those who have disabilities of any nature, including pupils, parents/carers and visitors. The termly meetings of this Committee receive information from all parts of the School and any areas causing concern would be addressed as a matter of urgency, unless able to be addressed immediately as part of the maintenance undertaken by the Estates Department.

Regular reviews of the School are undertaken, and steps taken to improve the physical environment of the School in order to increase the extent to which disabled pupils and parents/carers are able to take advantage of education and associated services offered by the School.

6. 2019/20:

There is currently one pupil in the school who has an EHCP. There is no funding attached to this as no additional resources are required for the pupil.

The Learning Development department regularly reviews and updates measures in place to support all pupils in accessing the site and the curriculum. Teaching strategies are reviewed and updated to ensure potential barriers to learning are minimised, ensuring all pupils are able to participate fully in school life.

Appendix 1

PERSONAL EMERGENCY EVACUATION PLANS (PEEP) – STUDENT FORM

EMERGENCY EVACUATION QUESTIONNAIRE

Why you should fill in the form

Knowing how to respond to emergency alarms in any building can be a matter of life or death. This is true when you are in School buildings, but also when you use any other building, e.g. for shopping, entertainment or business. In emergency situations, you will be able to make informed decisions if you understand something about the way buildings are equipped with fire protection systems.

Whilst you are a pupil at Wellingborough School, we have a legal responsibility to protect you from fire risks and to ensure your health and safety. In order to do this, we need to know what assistance you would require during an emergency

You should complete this form with your class teacher/tutor/Housemaster/Housemistress/line manager, and they should enter their details below:

Name

Email

Telephone

What will happen when you have completed the form?

The School will be able to provide you with any information you need about the emergency evacuation procedures in the building(s) in which you study.

If you need assistance to leave buildings in an emergency, we will be able to work out a 'Personal Emergency Evacuation Plan' for you.

To do this we will discuss the best ways of getting you to a place of safety quickly and comfortably. We will involve you, your carer (if applicable) and the person(s) in charge of the building(s) in which you study.

For more information please refer to the School's Fire Evacuation Policy.

NAME	
ADDRESS	
Contact Telephone Number	
Mobile Telephone Number	
E-mail Address	
Date:	
Form completed by:	1
	2
	3
Nature of Disability	
School – Class / House / Year Group	

Where are you based for most of the time at the School?					
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Building					
Floor					
Room Number					
Time of Day					
Attach timetable					
If you attend at evenings or at weekends, please give details:					
AWARENESS OF EMERGENCY EVACUATION PROCEDURES					
				YES	NO
Are you aware of the emergency evacuation procedures which operate in the building(s) in which you work and / or live?					
Do you require written emergency evacuation procedures?					
DO YOU REQUIRE WRITTEN EMERGENCY EVACUATION PROCEDURES TO BE:					
Supported by British Sign Language Interpretation?					
In Braille?					
On disk?					
In large print?					
If so, please specify what type and size of font you prefer?					

SIGNAGE		YES	NO
Are the signs which mark the emergency exits and the routes to the exits visible to you?			
If no, in which specific buildings?			
a.			
b.			
c.			
EMERGENCY ALARM			
	YES	NO	DON'T KNOW
Can you hear the fire alarm(s) provided in the buildings in which you study and / or live?			
If there are specific problem areas in a building, please GIVE DETAILS			
		YES	NO
Could you raise the alarm if you discovered a fire? (for example by breaking a red break glass call point)			
ASSISTANCE			
Do you need assistance to get out of any buildings in an emergency?			
Is anyone designated to assist you to get out in an emergency?			
If so, please give their name			
Telephone Number			
Are they with you at all times?			
In an emergency, could you contact the person(s) in charge of evacuating the building(s) in which you study or live and tell them where you were located? (for example by use of a mobile phone) Have you checked the mobile phone signal works in the building?			
GETTING OUT			
Can you move quickly in the event of an emergency?			
Are you a wheelchair user?			
Do you find stairs difficult to use?			
Are there any doors that you are unable to open alone or without difficulty?			

Other

If there is anything else that we need to know that would be relevant in an emergency situation, then please give details

Thank you for completing this questionnaire. The information you have given will help the University to meet any needs for information or assistance you may have.

Appendix 2

PERSONAL EMERGENCY EVACUATION PLAN (PEEP)

Name:	
Area: Lower Prep/ Prep/ Senior / Support / WSEL	
Buildings Covered by this plan:	

ALARM SYSTEM:

I am informed of an emergency by: (tick all that apply)

Existing Alarm System	<input type="checkbox"/>	Any other notes or comments:
Visual Alarm System	<input type="checkbox"/>	
Pager Device	<input type="checkbox"/>	
My carer or buddy	<input type="checkbox"/>	
Other: Please specify	<input type="checkbox"/>	

DESIGNATED ASSISTANCE:

The following people have been designated to give assistance when I need to get out of a building:

Name(s)	Contact Phone Number
1.	
2.	
We have decided on a pre arranged meeting points for all locations:	YES NO

EQUIPMENT PROVIDED:

I need to use the following equipment: (please tick all that apply)

ResQmat	<input type="checkbox"/>	Any other notes or comments: Training needed? Y/N
Mechanical Hoist	<input type="checkbox"/>	
Vibrating Pager (Deaf Alerter System)	<input type="checkbox"/>	
Other: Please specify below	<input type="checkbox"/>	

None required		
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I need the equipment as listed above to be available in the following places:

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CONFIRMATION OF USE OF EQUIPMENT :	YES	NO
The use of the equipment I need has been explained to me		
I would like further training on the use of evacuation equipment		

EVACUATION PROCEDURE:	
These are step by step instructions beginning from the sound of the first alarm:	
1.	
2.	
3.	
4.	
5.	
6.	

AWARENESS OF PROCEDURE:		
I have received a copy of information about the emergency evacuation procedures in:		
In Braille		Any other notes or comments:
In British Sign Language		
In print		
In large print		
On Disk		
Other – see opposite		

CONFIRMATION OF RECEIPT AND USE OF PEEP:
I understand that I am responsible for keeping my PEEP as accurate as possible and drawing attention to changes in circumstance that should prompt a review.
The data provided by you on this form will only be available to Wellingborough School staff, who may need to use it for the purpose of ensuring your health and safety whilst you are at the School. It may also be shared with the emergency services if necessary. It will be stored in accordance to the Data Protection Policy.

I understand the above notice and give my consent to my data being shared as detailed above.

My line manager or contact for this is:

Signature of *Parent/Pupil/Staff:	Signature of Teacher / House Master/ Line Manager
Date:	Date:

*Parent needs to sign for pupil if they are under 16.