

Broad Lane, Sheffield
Telephone: +44 (0) 114 289 2000
Facsimile: +44 (0) 114 289 2500



**Falls from Height: Evaluation of a Pilot Project to
Address Falls in the Classroom**

HSL/2007/27

Project Leader: **Richard Snodgrass MSc C Psychol AFBPsS**
Author(s): **Joanne White MSc, Richard Snodgrass**
Science Group: **Human Factors**

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EXECUTIVE SUMMARY

Background

HSE designed and produced two posters and a leaflet to remind classroom staff of the dangers of classroom falls. These were piloted for two school terms, in all schools in three Local Education Authority areas. The posters and leaflets were distributed in January 2004 and the pilot continued to the end of the summer term.

Purpose

To allow HSE to consider whether the posters/leaflet campaign was working and whether it should be expanded for use within all education authorities in Great Britain.

Objectives

- To provide information on lessons learned and recommendations resulting from the assessment of the campaign, including recommendations for improvements, should it be launched nationwide.
- To assess the effectiveness of the posters and leaflets as a way of increasing teachers' awareness of the dangers and reducing their propensity to fall.

Methodology

Focus groups were arranged through LEA contacts, each comprising eight teachers/classroom assistants from infant, junior and secondary schools. In addition, two or three visits to schools were arranged to interview head teachers. Due to a limited response from one LEA area, a questionnaire was developed, along similar lines to the focus group question set, and was sent to schools. There were ten unofficial 'piloteers' (Local Education Authority/college contacts who had requested the posters and leaflet but who were not officially part of the pilot project) who were telephoned for their views. The total sample, including the focus groups, school interviews, questionnaire, and 'unofficial piloteers', was 101 respondents

Results were thematically analysed and a summary of the focus group and head teacher interviews in each of the pilot areas was produced. These were themselves thematically analysed to produce a composite summary of all responses across the three pilot areas and the unofficial group.

Main Findings

The objective of this work, to evaluate the effectiveness of the poster campaign and the actual posters and leaflet, has been completed but in the process of conducting the evaluation, other more general and underlying issues were uncovered, that impact on such poster campaigns.

Results indicated that not all respondents saw falls from height as a major issue in classrooms/schools. With regards to the actual posters and leaflet there were some positive and negative comments as to how successful they had been, or would be. Results indicated that a poster campaign aimed at increasing teachers' awareness of unsafe practices when working at heights in the classroom is not, by itself, going to work. There seemed to be underlying issues intrinsic to safety culture in schools that would need to be addressed first relating to:

- management,
- budgets,
- building design,
- the perceived pressures on teachers to provide a rich and stimulating classroom environment in limited time,
- the acceptance of risk, by both teachers and head teachers, as an everyday part of the job.

Although there are building design issues inherent in the majority of Local Authority schools, a cultural change is needed in such schools if accidents are to be reduced. The same underlying constraint would be encountered by any of HSE's Priority Programmes, e.g. slips and trips, in attempting to intervene to reduce classroom accidents. Any change must start with management both at the Local Authority and school level.

Recommendations

- The Falls from Height Priority Programme liaises with other Priority Programmes, which are targeting the educational sector, to produce a common policy for intervention.
- Disseminate the findings of this report and liaise with the Education Sector and DfES to look at the issues raised.
- Produce a strategy in conjunction with Local Authorities to promote an improved health and safety culture within schools.

1 INTRODUCTION

1.1 BACKGROUND

The purpose of the Health and Safety Executive's (HSE) Falls from Height Priority Programme is to help HSE meet its targets for the reduction of deaths and injuries in the workplace as a result of accidents. Over the last five years, an average of nearly 70 people have died and 5,000 have suffered a major injury annually as a result of a fall from height in the workplace. Falls from height are the most common cause of fatal injuries and the second most common cause of major injuries for workers.

In the last six years, analysis of RIDDOR data has identified five deaths and over 3000 major and over 3-day injuries in the education sector (<http://www.hse.gov.uk/falls/issues.htm>), as a result of falls from height. According to an article in Health and Safety at Work in March 2004, in the last five years, over 450 primary school teachers and over 200 secondary school teachers were injured in falls from height accidents.

Because of such statistics, the HSE and Local Education Authorities (LEA's) have jointly piloted a safety campaign which has included posters and leaflets designed to remind classroom staff of falls from heights. The safety campaign has been launched to reduce the number of deaths and injuries caused by falls in the classroom and aims to reduce injury rates by 5% in 2005 and a further 10% by 2009 (Health and Safety at Work, March 2004 and HSE Press Release, 21 January 2004). The campaign has been piloted for two school terms, in three areas (Glasgow, Sheffield and Trafford), and includes a leaflet and poster (published by HSE) highlighting the problem of falls in schools. The leaflet can be accessed via <http://www.hse.gov.uk/pubns/schoolsfall.pdf> and the poster can be accessed via <http://www.hse.gov.uk/pubns/schoolfallposter.pdf>.

An article in Health and Safety at Work (March 2004) stated that posters would provide teachers with strong visual reminders, alerting them to the dangers of using inappropriate equipment, such as a table or chair, to carry out activity at height. In addition, guidance leaflets would set out good practice and suggest simple solutions, to avoid accidents and prevent an injury that could cause long-term ill health and long-term absence. Simple solutions included:

- Identifying whether working at height is necessary in the first place,
- Putting up displays at ground level where they can be easily reached,
- Using properly designed step ladders,
- Ensuring that all staff, including caretakers, receive training on how to work at height,
- Identifying risks and signalling them clearly.

1.2 PURPOSE

The pilot project, described above, required evaluation to allow HSE to consider whether the posters/leaflet campaign was effective before being expanded for use within all education authorities in Great Britain. The pilot poster campaign evaluation needed to identify whether the posters/leaflets raised awareness of falls in the classroom as an issue, and the measures that can be taken to avoid falls. An assessment of how the posters/leaflets could be improved was also required.

1.3 OBJECTIVES

The objectives of the evaluation were:

- To provide information on lessons learned and recommendations resulting from the pilot, including recommendations for improvements to the project before launching it nationwide.
- To assess the effectiveness of the posters and leaflets as a way of improving teachers' awareness of the dangers, hence reducing classroom falls.

1.4 METHODOLOGY

The posters and leaflets were distributed in January 2004 and the pilot continued to the end of the summer term. In the Sheffield and Trafford areas, evaluation of the project began at the end of June 2004, just before the end of the summer term. In the Glasgow area, evaluation of the project took place at the end of August 2004, at the start of their new school year.

HSL proposed to undertake focus groups and school visits in order to complete this evaluation. Health and Safety Officers in each of the pilot Local Education Authority (LEA) areas (Sheffield, Trafford and Glasgow) were identified by the customer. These contacts were then approached to ascertain their support in setting up focus groups and school visits. Each contact agreed to organise three different times and locations for focus groups and to send out a letter of invitation to a random sample of schools, in their region, that were involved in the pilot (see appendix 1). The focus groups were to comprise of approximately eight teachers/classroom assistants from infant, junior and secondary schools. In addition, the LEA contacts agreed to arrange two or three visits to schools in the pilot areas in order for HSL researchers to interview head teachers. However, in the Sheffield area the project team contacted the schools themselves to arrange school visits.

1.4.1 Materials

HSL researchers constructed a focus group/interview question set (see Appendix 2) using the research specification. This was submitted to the customer and subject matter experts in the Falls from Height Priority Programme team and was refined incorporating suggestions by the customer. In this way, the final question set reflected the information needed in order to address the issues and concerns under investigation and achieve the goals of the research (Robson, 2002). The questions followed an open-ended format to give all respondents the opportunity to express their views fully.

Unfortunately, there were problems obtaining a good sample in the Sheffield area. When arranging school visits, there was evidence that many schools did not know of the poster pack or said they had not received it, which made it difficult to get many volunteers for the head teacher interviews. In addition, there were very few volunteers for the Sheffield focus groups. Therefore, to try and increase the Sheffield sample, a questionnaire was developed along very similar lines to the focus group question set and was sent to Sheffield schools (see appendix 3).

1.4.2 Sample

The total sample, including the focus groups, school interviews, questionnaire, and unofficial pilots, was 101 respondents. Of the 220 questionnaires that were distributed, 67 questionnaires were received back, giving a response rate of 30%. Twenty-four participants volunteered to take part in the focus groups across the three pilot areas. All focus group respondents were volunteers from schools in the pilot areas. In total, six schools were visited,

including four primary schools and two secondary schools. However, head teachers were interviewed in only four of those schools. Notes were taken at each focus group and interview as a record of the issues discussed. Where possible, taking into account time constraints, the focus group notes were sent to the participants in order to verify that what was recorded was accurate. This also gave participants an opportunity to add any extra comments that they had thought of since the focus group.

1.4.3 Analysis

Results were thematically analysed (Ritchie, Spencer and O'Connor, 2003) and a summary for the focus groups and head teacher interviews in each of the pilot areas was produced. These were themselves thematically analysed to produce a composite summary of all focus groups and all head teacher interview responses across the three pilot areas (see appendices 5 and 6). The Sheffield questionnaire results were entered into SPSS 12.0.1. Quantitative questions were analysed descriptively and qualitative questions were thematically analysed. An overall summary of all the findings from the focus groups, head teacher interviews and Sheffield questionnaire is reported in Section 2.

1.4.4 Feedback of Unofficial Piloteers

Discussions with the customer highlighted that there were some extra Local Education Authority/college contacts who had requested the posters and leaflet but who were not officially part of the pilot project. It was decided that it would be useful to collect the views of these unofficial piloteers. Therefore, brief telephone interviews were conducted with those extra contacts that had requested the information pack, using a revised version of the focus group question set (see appendix 4).

There were ten unofficial piloteers who were telephoned for their views. Telephone interviews were conducted with five of these and one provided written feedback by post. Three of the unofficial piloteers were colleges or schools and resulted in no response at the time that we called and one contact had left the company. The results of these interviews are reported in section 2.2.

2 RESULTS

Discussions then took place with the key stakeholders for this study, to determine the completeness of the responses, face validity, reliability and the need for further interviews to take place (Robson, 2002). The methodology dictates that data collection continues until there is no new information being gathered (Moser and Kaltman 1979). The key stakeholders would decide if there were any gaps in the information obtained and/or if the information obtained pointed to the need for further enquiry (Robson 2002).

The focus groups, head teacher interviews, telephone interviews with the unofficial-piloteers, and the questionnaire in Sheffield were considered to have achieved the purpose of this evaluation in respect to the information they produced. No further enquiry was considered necessary.

Results of the thematic analysis of focus group and head teacher interview responses can be seen as a combined response across the three pilot areas in Appendices 5

Responses were consistent across the three pilot areas and across the different focus groups and interviews, whilst allowing for some local divergence. Furthermore, the questionnaire results in the Sheffield area and the non-piloteer telephone interviews supported the data already received. This consistency increases the robustness of the evaluation and hence the confidence to generalize the findings more widely.

2.1 OVERALL PILOT FINDINGS

2.1.1 The problem of falls in classrooms

One main finding suggested that few people thought there was a major problem with falls in schools or classrooms. Accidents were seen to be rare and so falls were not seen as an issue. However, there was some acknowledgement of the possibility of falls being a problem and of the possibility of underreporting of near misses or minor accidents. Indeed, some examples of accidents were reported.

It seemed that, in primary and junior schools particularly, it is part of the school culture that the risk of falls are a part of the job. In contrast, it appeared that secondary schools might have better management structures to deal with health and safety issues and less need to work at heights. Furthermore, comments received about tertiary education suggested that they are more health and safety aware as they are more vocational and operate more to industrial standards.

It was found that the falls from height issue could affect different types of staff from teachers to office staff and caretakers. However, the most prevalent response was that classroom assistants/technicians would be affected the most, especially given the new Teaching Reforms that place more emphasis on assistants doing display work etc.

It was thought that the risks of falling from height came mainly from putting up displays and Christmas decorations. Retrieving items from storerooms or opening windows were also cited.

2.1.2 Impact of poster campaign

It was found that most people had seen the posters and had displayed them in staff rooms, although concern was raised as to whether all staff see or read such information, and whether

the issue is given sufficient emphasis. There was some suggestion that the issue is raised at staff meetings but this was not universal. However, there was also some evidence of schools saying they had not received the pack.

Various issues were raised that impacted on the effectiveness of such a poster campaign. For example, head teachers are inundated with literature every day and it was felt that if they can 'bin' anything that seems unimportant, they will. Furthermore, it was thought that posters would only have a 'limited lifespan' before being taken over by other information and the focus on them lost. It was also felt that there is a considerable amount of pressure of time on staff to put up classroom displays (e.g. only have a few minutes during lunch or break periods). It was commented that where ladders/steps are locked away (to keep them out of reach of children), it takes time to find the keys and then go to where ladders etc are kept. Therefore, chairs and tables are used, as it is quicker and more convenient. Some respondents reported a storage problem and it was recognised that some schools do not always have enough space for 'extra' equipment in the classroom (e.g. steps). Other issues that were raised included school budget constraints restricting the purchase of ladders etc, health and safety checks only considering the premises rather than teaching practice, using chairs instead of ladders and the age and design of the building, lack of storage space, possibly presenting difficulties etc.

With regards to the actual posters and possible improvements, it was felt that the posters and leaflet were quite good. For example, the wording is appropriate for teaching staff (although ensuring that health and safety representatives do have answers for staff before saying 'go to your representative' on the poster would be useful), the captions are good (although the words 'health and safety' may have more impact), they are quite visual and there is some useful information given. However, it was thought that they do not address other staff in the school, they could be brighter and clearer and the writing bigger, and they could perhaps show positive 'working at height correctly' activity and equipment or the 'wider picture' so that staff can associate their tasks with working at height.

While the posters were thought to be quite effective, a good proportion of the respondents also suggested other initiatives for the awareness campaign. For example, videos might be a useful medium; posters might be more effective if they were changed every so often to sustain attention (e.g. monthly or termly); training sessions would be better possibly using the posters as supplementary material; putting leaflets in staff payslips; spending money on providing more step ladders than on producing posters; or using signs such as the fire sign or a 'use stepladders' sign. The targeting of posters was also considered important (e.g. sending them to the most appropriate people or to both head teacher and health and safety representative, locating them in classrooms or storerooms rather than staff rooms, and timing their distribution to fit in with certain school activities etc). Few respondents mentioned using the Internet for distribution.

2.1.3 Impact on behaviour/good practice

The main finding here was that many respondents felt there had not been many changes to awareness, behaviour or attitudes, and no major changes in good practice, as a result of the poster campaign. Other initiatives, such as the Teaching Reform, were seen to be more influential by some respondents. It was felt that most teachers/classroom assistants etc. are aware of the risks of taking shortcuts by using a chair or a desk but they still do it. Furthermore, it was suggested that some head teachers also do it, or have done it and are aware that their staff take shortcuts but 'turn a blind eye'. However, a few respondents mentioned purchasing stepladders, trying to use ladders more, sending staff on training courses or staff asking for the school working at height policy.

Nevertheless, it was recognised that there was a need for good practice principles. Suggestions included: ladder training, similar to that given to caretakers/janitors, an improved culture of working safely and asking for help if needed, ensuring two people are present when working at height, conducting informal risk assessments whilst working and better health and safety management systems and procedures. Finally, it was mentioned by some respondents that while schools/head teachers are not liable for accidents (i.e. claims for compensation are dealt with by the Local Education Authority), schools would not have any incentive to fully address such health and safety issues.

2.1.4 Distribution

The main finding regarding who is the best person to send such health and safety information to was that, as head teachers have sole responsibility for health and safety, information should be sent to them. However, some respondents felt someone with specific health and safety responsibility would be more appropriate. For example, it seemed that in secondary schools head teachers are more likely to delegate issues such as health and safety to other more appropriate staff (e.g. a school manager responsible for non teaching aspects). Health and safety officers at the Local Education Authority were also cited.

2.2 UNOFFICIAL PILOTEER FEEDBACK FINDINGS

Responses from the unofficial piloteer telephone interviews were consistent with the focus group, head teacher interview, and questionnaire findings, further increasing the robustness and confidence of the evaluation outcome.

All of the unofficial piloteers had downloaded the posters from the HSE website. There were mixed responses as to whether the unofficial piloteers had sent the posters/leaflet to schools. Half of the unofficial piloteers had sent them out to schools, including primary schools, secondary schools, a college and some youth clubs. The other half, however, did not for various reasons. For example, one respondent from Wales simply showed it to a teaching union health and safety committee because posters needed to be bilingual to be displayed in Welsh schools, another respondent decided not to use the posters, as they did not print well, and another simply showed them at various meetings with schools, as they did not have many copies. One respondent also referred to them and handed them out at training sessions.

With regards to whom is at most risk from falls and which activities lead to the greatest risk of falls, the answers were mixed. Some respondents suggested teachers (especially young, inexperienced, or female teachers and those from primary schools) while others suggested caretakers, cleaners or kitchen staff. One respondent mentioned assistants but mainly in terms of the fact that they are not part of a professional body, like teachers, so they rely on information from other sources to inform them of these sorts of issues. Similarly, the majority of unofficial piloteers saw putting up displays and opening windows as the main risks but activities such as reaching high shelves and maintenance and cleaning were also mentioned.

Only a couple of unofficial piloteers, who had sent the posters to schools, said that they had received some feedback on the posters. There appeared to be about equal positive and negative comments and impressions of the posters. For example, schools were aware of the issue, they thought it was a good idea to get the message across and reinforce it, and some staff wanted kick steps. However, on the negative side, it was thought to be acceptable, more convenient and quicker to stand on chairs (and possibly safer in the case of some tables), the head teacher may be reluctant to buy steps due to budget constraints and the posters could get ignored (indeed one respondent could not remember the posters enough to comment). With regards to the posters, while generally they were thought to be at the right level and to the point, one respondent felt

that they were not clearly associated with education and Welsh versions were needed. However, a couple of unofficial piloteers did feel that the posters had direct appeal to teachers, because they mentioned schools and were clearly aimed at teachers and classroom assistants.

All of the unofficial piloteers thought the posters would raise staff awareness of falls. However, there was some uncertainty as to whether they would change actual behaviour, as most staff just wanted to get on with their work. Furthermore, suggestions for campaign improvements were also made. For example, it was mentioned that training (possibly complemented by the posters or leaflets) and stronger management, who believe in the message and take action, is needed. Also, disseminating the message through the DFES is believed to have more impact and free pre-printed professional copies of the posters would help to overcome possible local printing problems.

3 DISCUSSION

The objective of this work was to evaluate the effectiveness of the posters and leaflet that has been produced to address falls from height in classrooms. This objective has been completed. However, in conducting the evaluation of the pilot many other, more general and underlying issues were uncovered that impinge on the likelihood of the poster campaign fulfilling its objectives.

3.1 POSTER/LEAFLET FINDINGS

With regards to the poster campaign and the actual posters and leaflet, there were some positive and negative comments as to how successful it had been or would be. Generally, the posters were considered favourably but the general consensus amongst participants was that the posters by themselves were not going to have an impact. Participants made a number of observations about the posters. These included:

- **Brightness.** The posters were considered to be too dark for a lot of schools and would not be seen easily against the background.
- **Display life.** The majority thought that after a short time the posters would 'blend into the wallpaper' and not be seen and would also be competing against a lot of other information on notice boards. This may make them less effective. Some suggested that new posters should be produced every term but others did not think this would work.
- **Wording.** This was considered favourable by most participants but some suggested that the wording on one poster, 'Go to the bottom of the class', was unacceptable in schools as it gave over the wrong kind of message e.g. failure.
- **Location.** Participants suggested that one poster per classroom should be available whereas others thought that there was not enough space in classrooms to put them up. Suggestions were that enough should be produced to put them up in strategic places around the school, e.g. doors of store cupboards.

The majority of participants considered the leaflets favourably; they felt that the content was good and appropriate. They also thought that one per staff member should be produced. The only criticism was that the wording on the cover, 'Advice to teachers and classroom assistants', was too specific and the majority thought the leaflet should be inclusive of all staff.

Participants were generally supportive of other suggestions for improving the campaign, such as using videos, electronic email/Internet information, or training sessions. However, there was still some concern as to whether other mediums would have the desired effect and whether the underlying issues discussed in section 3.2 would still be present.

3.1.1 Distribution

It was found that while arranging school visits in Sheffield, many of the schools contacted were not even aware of the posters, which suggests an issue with the distribution, either with the Local Education Authority or in the individual schools. Findings regarding distribution suggested that head teachers would still want to see any health and safety information that is sent to schools, as they are ultimately responsible for the school. However, sending packs to a named health and safety representative or to the Local Education Authority to distribute was considered to be useful as well to ensure that such campaign information is distributed to the right people and is followed up (see also Snodgrass 2004 for the importance of follow up to campaigns).

3.2 GENERAL UNDERLYING ISSUES

3.2.1 Awareness

The findings generally reflect a lack of awareness that falls from height could be a problem in the education sector, which appears to stem partly from the fact that, despite the available statistics, falls are quite a rare event within schools. Indeed, it seemed from the views given that the issue is not given sufficient emphasis. However, it was acknowledged by some respondents that there might be underreporting of near misses or minor accidents, which may cloud the extent of the problem in schools. It also became apparent that actual experience of injury or major injury, either personally or by knowing someone else that has been injured and off work, highlights the problem more successfully. Indeed, one example in the Sheffield questionnaire findings actually reported that a local case of a fall had a greater impact in raising awareness and making changes than the posters did.

The main perceived reasons for working at height was the putting up of classroom displays. There seemed to be slightly divergent findings from Glasgow, where secondary schools have been privatised under the Public/Private Partnership Initiative (PPP). Here, outside contractors are responsible for equipment, repair and maintenance in schools. Teachers are only responsible for the educational side. Restrictions are, therefore, placed on teachers as to what can be put on walls. They are also restricted as to opening windows; if the window catches are above a certain height the janitor has to be called to either open or close them.

3.2.2 Time

There appeared to be a major issue of time and information overload. Teachers already reported not having enough time to do the tasks they have to do and attend to the large amount of information they receive. There are pressures on teachers' time to provide the stimulating environment required by OFSTED in the classroom in the time available, which is why they take risks. Sanctions can be imposed by OFSTED if the classroom/school has not met prevailing standards, e.g. a stimulating environment for the schoolchild (through displays) and so time to do things was seen as a major factor in taking short cuts. Teachers and classroom assistants mainly put up displays when children are not there, e.g. break time. If it means going to the other end of the school to get stepladders, which are locked away, they would not do this.

3.2.3 Budgets

Furthermore, where the problem of falls is recognised, the issue of budget constraints was seen to be a barrier to being able to either send staff on training or purchase more stepladders etc. The head teacher is responsible for budget allocation to various activities including training and building maintenance for the school. They have to decide if money is to be spent on, for example, repairs or health and safety.

3.2.4 School Design

The design of some schools also impinges on safety standards. Some classrooms/schools do not have adequate storage space, so even if proper equipment for working at heights was bought, there would be nowhere to store it safely (bearing in mind school children have to be prevented from playing on it). In some schools, cupboards are built out from the wall making it necessary to climb on the cupboards to gain access to wall space. Using ladders would mean having to lean across a cupboard (unbalanced) to put things up. In Glasgow, where teachers have been consulted in re-designing the refurbished schools, it was the general impression that little or no

notice was taken of their views. Design of schools should be based on functionality and the end users needs, e.g. teachers should be consulted at the design stage.

3.2.5 Culture

The findings of this evaluation also seemed to reflect a culture issue. It appeared to be accepted that the nature of teaching work, involving for example putting up displays or retrieving items from cupboards etc, could lead to working, and hence falls, from height. In addition, it was recognised that while staff are probably aware of the dangers of standing on chairs or tables, as opposed to proper stepladders fit for purpose, they still do it. Classroom teachers and assistants see themselves as professionals, their main concern being the education of pupils. They are prepared to take risks (they see these risks as no more than they take at home) to get the job done, even though they know they should use proper equipment. They would, however, take action if they saw a pupil behaving in a dangerous manner. Teachers also reported that they do take extra care to exhibit safe behaviour if pupils are around. Furthermore, head teachers are appointed who have usually come up through this system that accepts risks as a normal part of the job e.g. using chairs and tables to put up classroom displays. It seems for the majority of head teachers also accept this risk both for themselves and their staff. Although head teachers may give general warnings with regards to unsafe practices, this appears to be as far as it goes.

For the majority of respondents, it was not felt that a poster/leaflet campaign would change actual behaviour or encourage increased good practice. Generally, there appears to be a need for some intervention at the higher management level in order to address the risks of falls from height in the education sector. For example, encouraging a culture of working safely with ongoing risk assessment of all tasks.

3.2.6 Management

One other issue of note concerns management. Accidents that occur in Local Authority schools are the concern of the Local Authority, not the head teacher. It is the Local Authority who is responsible for any litigation consequences of accidents (although it is the school budget that bears the costs of replacement staff). Health and safety is also the responsibility of the Local Authority. It appears that head teachers are only responsible for the day to day running of the school in terms of educational activity. Head teachers, certainly in infant, junior and secondary schools are appointed from an educational background, not a management background (this research did not look at available management training for head teachers). In secondary schools, school managers may be appointed to manage all non-educational activities and in primary schools, caretakers can take on extra responsibility for some of these activities. The tertiary sector, by contrast, has an independent management structure and their own responsibilities for health and safety, and, as industrial courses are run, industrial standards are applied. In Glasgow, however, it was noted that head teachers appear to be more comfortable in referring to themselves as managers. In addition, as head teachers are not usually from a managerial background, it is unlikely (and no instances were reported) that they would bring sanctions against teachers acting in an unsafe manner (unlike industry). In Glasgow there were indications that head teachers may take matters further.

These findings all indicate that, in some schools, there seemed to be a need for stronger management commitment to the issue of falls from height and better health and safety management systems/procedures in schools. There appeared to be a need for greater 'leading by example' from head teachers, as well as greater action against staff who do not act in a safe manner and greater health and safety representation among teachers. Furthermore, greater input from higher-level management, such as the Local Education Authority, may be required.

4 CONCLUSIONS AND RECOMMENDATIONS

4.1 GENERAL CONCLUSIONS

The objectives of this work, to evaluate the effectiveness of the poster/leaflet pilot, have been completed but in the process of conducting the evaluation other more general and underlying issues were uncovered that impact on such poster campaigns.

Results indicated that none of the respondents saw falls from height as a major issue in classrooms/schools. With regards to the actual posters and leaflet, there were some positive and negative comments as to how successful they had been, or could be, but results indicated that a poster campaign aimed at increasing teachers' awareness of unsafe practices when working at heights in the classroom is not, by itself, going to work. There seemed to be underlying issues intrinsic to safety culture in schools that have to be addressed first. These issues relate to:

- management,
- budgets,
- building design,
- the perceived pressures on teachers to provide a rich and stimulating classroom environment in limited time,
- the acceptance of risk, by both teachers and head teachers, as an everyday part of the job.

Although there are design issues inherent in the majority of Local Authority schools, a cultural change is needed in such schools if accidents are to be reduced. The same issues would be encountered by any of HSE's Priority Programmes, e.g. slips and trips, in attempting to intervene to reduce classroom accidents. Any change must start with management both at the Local Authority and school level.

4.2 RECOMMENDATIONS

This report recommends the following:

- The Falls from Height Priority Programme liaises with other Priority Programmes, which are targeting the educational sector, to produce a common policy for intervention.
- Disseminate the findings of this report and liaise with the Education Sector and DfES to look at the issues raised.
- Produce a strategy in conjunction with Local Authorities to promote the development of a health and safety culture within schools.

5 APPENDICES

5.1 APPENDIX 1: EXAMPLE INVITATION LETTER FOR FOCUS GROUPS

Trafford Town Hall
Talbot Road, Stretford
Greater Manchester
M32 OYZ

Telephone
Fax
E-mail
Web site

HEALTH AND SAFETY UNIT

All Head teachers

When calling or telephoning on this matter please ask for XXX

Our Ref: HS/RL

Your Ref:

Date: 1st June 2004

Dear Colleague,

Falls from Height in Schools

A short time ago I wrote to you regarding a pilot study that the Health and Safety Executive (HSE) were undertaking regarding falls from height in schools.

A poster and an information leaflet were sent to all schools at this time to raise awareness of this issue amongst teachers, classroom assistants, learning mentors etc.

The HSE now want to carry out some evaluation on this particular project and have asked for a volunteer (either a teacher, classroom assistant or learning mentor) from your school to take part in a focus group.

The focus groups will last approximately 2 hours and be held at Sale Waterside (Sale Town Hall). Please select one date and return the attached slip to XXX.

Yours sincerely

XXX
Senior Health and Safety Adviser

Falls from Height Evaluation Session

Name

School

Position

I will attend the focus group session on (please choose one of the following)

21st June 2004 13.00 - 15.00 Room 3, Sale Waterside

21st June 2004 16.00 - 18.00 Room 3, Sale Waterside

22nd June 2004 13.00 - 15.00 Room 3, Sale Waterside

22nd June 2004 16.00 - 18.00 Room 3, Sale Waterside

Please return to:

XXX

5.2 APPENDIX 2: FOCUS GROUP QUESTION SET

INTRODUCTION:

- **Thanks for coming**
- Introduce research team, explain roles, housekeeping regarding venue (toilets etc), etc.
- **Explain Background**
Analysis of RIDDOR data has identified falls from height as a risk in the education sector (i.e. 5 fatal accidents and 3000 major and over 3-day injuries). Therefore, the Health and Safety Executive set up a pilot for two school terms to assess the impact of a poster and leaflet highlighting the problem of falls in schools.
As you are probably aware, your Local Education Authority has been involved in this pilot and the posters and leaflets on falls in education were distributed early this year. We have now been tasked with evaluating the impact of these posters/leaflets, with a view to rolling them out to all Local Education Authorities (LEAs).
- Explain purpose of the focus groups, including that they will focus on issues regarding the effectiveness of the posters/leaflets and possible improvements.
- Explain how the focus group will be run and that responses will be reported anonymously.
- Inform participants that the session will last for no more than 2 hours.
- Obtain consent for use of tape recorder to aid note taking??
- **Ask whether there are any questions or points that need clarifying.**
- **Ask participants to introduce themselves: name, position, school, how long they have been in position etc.**

Key Question 1:

How big a problem do you think that falls are in the classroom / in schools?

Sub-questions/prompts:

Who is it a problem for? Teachers? Classroom Assistants? Caretaker staff? Etc

What sorts of reasons might classroom staff have for working at heights? Our assumption is that working at height is related to putting up displays, opening windows, retrieving things from cupboards etc – Is this true in practice?

Are certain working at height activities more common than others?

Do you have any examples of real working at height accidents that have occurred in your schools?

Key Question 2:

What do you feel has been the impact, if any, of the pilot, and the posters/leaflets?

Sub-questions/prompts:

Have the posters/leaflets raised awareness of falls as an issue/problem/danger?

Have the posters/leaflets been effective? How effective? Why are they effective or not?

Have the posters/leaflets reduced falls in schools? Or do you think they will? Or have they reduced the propensity/tendency to fall?

What are your thoughts on the effectiveness of the posters/leaflet for raising awareness as compared to other potential strategies such as case studies, video clips, information on DfeS website or from the Local Education Authority (LEA) etc?

Key Question 3:

What, if any, measures/good practice for preventing falls have arisen/have you learnt about from the pilot and the posters/leaflets?

Sub-questions/prompts:

Has the pilot project and the posters/leaflets had any impact on the behaviour of staff in the classroom in relation to working from height?

Have they led to actual changes in behaviour/attitude, and if so what?

Are you more aware/encouraged on how to avoid falls? How?

Key Question 4:

What are the positive and negative aspects of the pilot and the posters/leaflets?

Sub-questions/prompts:

How could the posters/leaflets be improved?

What lessons have you learnt (or not) from the pilot and the posters/leaflets?

What mediums for dissemination of this sort of health and safety information do you think would be best (e.g. poster/leaflet, videos, websites etc)?

Final Questions:

In your opinion, who do you think is the best person to send the poster/leaflet packs to? Headteachers? Other staff with responsibility for health and safety? Other?

CLOSING COMMENTS:

- **NB: Summarise discussions, and ask how well it captures what was said.**
- Ask if there is anything else participants would like to add about the posters/leaflets that they feel is important to discuss in front of the group. Say they can speak to us afterwards or contact us if there is anything else they wish to discuss individually.
- Remind participants that the results of the focus groups will be summarised, interpreted, and reported to HSE.
- We will probably send focus group participants a copy of the focus group analysis for their comments - to check that what we have reported is accurate, to check if there are any other comments they want to make, and to aid validity of the results (get emails or addresses of participants?).
- Any final questions?
- Thank you for attending.

5.3 APPENDIX 3: SHEFFIELD QUESTIONNAIRE

Analysis of accident data has identified falls from height as a risk in the education sector (i.e. 5 fatal accidents and 3000 major and over 3-day injuries). Therefore, the Health and Safety Executive set up a pilot for two school terms to assess the impact of 2 posters and a leaflet highlighting the problem of falls in schools.

As you may be aware, your Local Education Authority has been involved in this pilot and the posters and leaflet on falls in education were distributed early this year. We have now been tasked with evaluating the impact of these posters/leaflets, with a view to rolling them out to all Local Education Authorities.

PLEASE ANSWER THE FOLLOWING QUESTIONS AS HONESTLY AS POSSIBLE. ALL ANSWERS WILL BE COMPLETELY CONFIDENTIAL AND ANONYMOUS.

PLEASE RETURN YOUR COMPLETED QUESTIONNAIRES TO JOANNE WHITE, WORK PSYCHOLOGY, HEALTH AND SAFETY LABORATORY, BROAD LANE, SHEFFIELD, S3 7HQ

Thinking about your School:

1. Are falls from height a problem in the classroom / school?

YES NO

2. If so, who is it a problem for: teachers, [] assistants, [] caretaker staff, [] midday staff, [] others, []

Please tick as appropriate

3 What sorts of reasons might staff have for working at heights: e.g. putting up displays, [] opening windows, [] retrieving things from cupboards, [] other, []

Please tick as appropriate

3b Are certain working at height activities more common than others?

4. Can you give any examples of falls accidents that have occurred in your school?

5. Have you received the HSE posters and leaflet?

YES NO

5a If Yes, did you display the posters?

YES NO

5b If No why did you choose not to?

6. Have the posters/leaflets been effective?

YES NO

6a If Yes, How? If No, Why?

7. What are your thoughts on the effectiveness of the posters/leaflet as compared to other potential mediums for disseminating health and safety information e.g. case studies, videos, information on DfeS website or from the LEA etc.?

8. Are you / your staff more aware / encouraged on 'how' to avoid falls as a result of the posters/leaflet?

YES NO

9. What, if any, measures / good practice / lessons for preventing falls have arisen or have you learnt from the pilot and the posters/leaflets?

10. Have the posters/leaflets led to actual changes in behaviour / attitude by yourself and/or your staff?

YES NO

10a. If Yes, what changes have there been?

11. How could the posters/leaflets be improved?

12. Have the posters/leaflets raised awareness of falls as an issue / problem / danger?

YES NO

13. Do you think the posters/leaflets will reduce falls in schools?

YES NO

Please say why or why not?

14. In your opinion, who would be the best person to send poster/leaflet packs to (e.g. headteachers, staff with health and safety responsibility, other)?

Please feel free to make any further comments or observations on this issue

MANY THANKS FOR YOUR TIME AND EFFORT IN COMPLETING THIS QUESTIONNAIRE

5.4 APPENDIX 4: QUESTION SET FOR TELEPHONE INTERVIEWS

Telephone interviews for LEA contacts who requested the posters but where not part of the Pilot.

Hello, my name is I am a Psychologist with the Health and Safety Laboratory. Recently you contacted the Health and Safety Executive to request posters, for use in schools, dealing with classroom falls. I have been asked by HSE to evaluate the effect of those posters in raising awareness of classroom falls for teachers and classroom assistants.

Is it convenient for you to give me a few minutes of your time at this point or if not, could I ring you again at a more convenient time.?

If **YES** proceed if **NO** make an appointment to ring back.

The information you provide will help HSE in evaluating the effectiveness of the posters/leaflet and decide if this is the most effective way of raising awareness of classroom falls for teachers and classroom assistants. The information you provide will be confidential and will not be attributed to you.

Name:.....

1. **After contacting HSE did you download the posters from the HSE website?** Yes No

If not why not?

Finish. Thank you for your help.

If Yes.

2. **Where the posters sent to schools/colleges to be displayed? (Probe) infant/junior/secondary/tertiary.** Yes No
3. **Do you have any feedback from the schools on the posters?** Yes No.
4. **What comments have been made? (Probe).**
5. **What are your own impressions of the posters? (Probe) What needs to be changed?**
6. **In your opinion have the posters raised teachers/classroom assistants awareness of falls?** Yes No
7. **In your opinion who is at the biggest risk from falls in schools? (Probe) teachers, classroom assistants, others.**
8. **What are the activities that lead to the greatest risk of falls in classrooms?**

Close

Many thanks for your time and help. Once again let me reassure you as to the confidentiality of this conversation.

5.5 APPENDIX 5: FOCUS GROUPS THEMATIC ANALYSIS - SUMMARY OF COMBINED RESPONSES

5.5.1 The Problem of Falls in the Classroom

5.5.1.1 *How big a problem do you think that falls are in the classroom?*

The majority of respondents felt that there was not an issue of falls from height in schools, especially if display boards are at a reasonable height and are used properly. Some respondents felt this to be the case because not many falls seem to occur or are reported. However, it was acknowledged by many respondents that there could be an issue with falls and it was recognised that the issue is not taken seriously enough.

5.5.1.2 *Who do you feel are affected or potentially affected by the falls issue in schools?*

Most respondents felt that classroom assistants would be most affected by the falls issue. Some respondents also mentioned teachers and caretakers, as teachers still help put up displays and caretakers may work at height doing repairs etc. Some respondents also thought that other staff (e.g. external contractors or staff particularly in primary schools) would be affected by the falls issue. It was also noted in one group that it is really ‘all’ staff who could be affected by a fall.

5.5.1.3 *What reasons are there for working at height in schools?*

The majority of respondents thought that putting up displays on walls and ceilings were the main reason for working at height. Opening windows or retrieving items was mentioned but with far less frequency. Many respondents also mentioned other reasons such as changing light bulbs or cleaning. However, some respondents recognised that proper ladder equipment is used where possible (e.g. in store rooms) and some schools have certain equipment for such tasks as opening windows (e.g. winding handles or poles), which reduces the need to work at height.

5.5.1.4 *Do you have any examples of working at height accidents that have occurred in your schools?*

There were mixed responses as to whether respondents had examples of accidents. Many respondents did not have examples of accidents to report and were not aware of any ‘major’ accidents, but there were some accident examples given from both teachers and other support staff. However, it was recognised by some respondents that there may be many near misses or unreported accidents.

5.5.2 Impact of the Poster Campaign

5.5.2.1 *Have the posters/leaflets been seen, displayed, or discussed in the school?*

The majority of respondents reported having seen or displayed the posters. However, some respondents said that they had not seen the poster/leaflet. Furthermore, the concern was raised as to whether all staff see or read such information. Responses were mixed as to whether staff had discussed the campaign within school. Half of the respondents reported not discussing the

issue and there were concerns raised as to whether the issue is taken seriously enough, even when it was discussed.

5.5.2.2 What are your opinions on the actual posters/leaflet?

There seemed to be fairly equal comments regarding whether the posters/leaflet were good or not. Some respondents reported that the posters and leaflet were good. For example, they gave some useful information, they were quite visual and eye-catching, the captions were good and they were relevant to schools/teachers. Other respondents reported problems with the posters, such as the writing on the posters being too small, the posters not being very bright, the table on one poster not being very clear or the leaflet not mentioning all staff for whom falls may be a risk

5.5.2.3 Have the posters/leaflets raised awareness of falls or resulted in any positive changes etc?

Many respondents felt that such posters would have a limited lifespan and may only be attended to for a fairly short period of time. This links to the comments regarding the amount of information that schools receive that some respondents mentioned. It was recognised that schools receive a lot of information, which means that such posters are often easily ignored, thrown away, or are lost within all the information that is displayed. The majority of respondents also felt that there was a time issue: teachers and assistants do not have much time for all the tasks they do and so it is seen to be quicker and more convenient to use a chair or table than getting ladders from a caretakers room, for example.

Many respondents mentioned a training issue. It was felt that linking the posters to training days that increase the awareness of such issues, or providing more health and safety or ladder training, might be more useful. However, it was recognised that it can be hard for teachers to have the time to attend training. Many respondents also reported the problem of funding, in terms of training or buying proper ladder equipment. Fewer respondents reported the problem of storage, although it was recognised that some schools may have less storage than needed and a fall hazard could be presented if items cannot be stored properly. Finally, some other issues were reported that were thought to impact on the effectiveness of the poster campaign. These included the age and design of the school building as some buildings may have higher windows or obstructions to using ladders etc; personal pride in doing a good display may encourage assistants to go outside of the display boards; and the fact that health and safety checks do not normally consider height hazards and so the issue is not really thought about.

The majority of respondents did not believe that the posters would not have affected anyone, made a difference, raised awareness or resulted in any changes to the way teachers/classroom assistants went about their duties. It was thought by a couple of respondents that this may be due to the fact that major injury is quite rare and few people have direct experience of having or seeing an injury. Nevertheless, it was recognised that some form of message dissemination is worth it as it is never a waste of time to try and get people's attention about an issue; a proactive approach to tackling the issue before it becomes too serious is needed. Furthermore, some respondents felt that other initiatives, such as the Workforce Reform whereby assistants are more responsible for displays, or a reviewed claims system whereby the actual school are financially penalised for a health and safety breach rather than the council, would have more of an impact than the posters. Despite such negative comments, a couple of respondents did mention that changes in terms of purchasing stepladders or trying to use ladders more were thought to be partly attributable to the poster campaign.

5.5.2.4 How could the posters/leaflet be improved?

Despite some comments regarding the effectiveness of the actual posters/leaflet, all respondents reported certain improvements that could be made. These included bigger or less writing, or revised wording, at the bottom of the posters; including the words ‘health and safety’ in the captions; making the posters clearer with brighter colours etc; providing leaflets to every member of staff; ensuring that posters and health and safety are raised at staff meetings; ensuring posters are located well such as in storerooms etc; portraying a positive rather than negative image showing how to work at height correctly and what is the correct equipment; and perhaps showing the ‘wider picture’ (i.e. a lady falling off a chair but showing her putting up a display) so that staff are better able to associate their work with working at height. Furthermore, if the issue of falls does apply to all staff and not just teachers (e.g. office staff or caretakers), it was felt that such staff should be shown on the posters or mentioned in the leaflet.

5.5.2.5 What other ways of disseminating the falls in classrooms message may be more effective than the poster campaign?

The majority of respondents mentioned that thinking carefully about where, when and to whom the poster campaign was targeted was an important issue. For example, raising the profile by targeting unions or governing bodies/governors, placing more accountability on senior management or health and safety co-ordinators, or locating the posters in more effective positions within the school such as classrooms or storeroom doors. Furthermore, the timing of such campaigns was thought to be important, such as targeting such poster campaigns at certain times of the school year when working at height occurs more often or aligning such campaigns with other relevant initiatives such as the recent Teaching Reforms (which is changing the emphasis for display work to assistants rather than teachers).

The majority of respondents also reported that video could be a useful medium for disseminating such health and safety information and may have more impact. However, concern was still expressed as to how hard hitting such videos should be and whether video would have more affect on actually changing behaviour. A few respondents felt that posters might be more effective and may raise more awareness if they were part of a rolling programme (i.e. having a series of posters with different colours and layouts sent to schools each term). The Internet was mentioned much less as a useful alternative medium for disseminating such health and safety information.

The majority of respondents made some other useful suggestions for campaign improvements. For example, using signs like the fire signs or a ‘use a stepladder’ sign, ensuring an official headed letter is sent before or with the posters, sending two packs to both the head teacher and a health and safety representative so that it is seen by more than one person or putting notices/leaflets highlighting the falls issue in staff payslips to ensure that everyone sees the message. Some respondents even suggested putting a television advertisement between evening programmes (e.g. between soap operas that many people watch), as it was felt that this may grab attention more like the smoking adverts do, or introducing health and safety to teacher training courses. Finally, some respondents made the suggestion that, given budget constraints in schools, money may be better spent on providing schools with more ladders or kick step stools so that there can be one set in each classroom/stockroom etc.

5.5.3 Impact on Behaviour and Good Practice

5.5.3.1 *Have the posters/leaflets had any impact on staff behaviour/attitudes to working at height?*

The majority of respondents thought that the poster campaign would not change the attitudes or behaviour of staff, partly because it was thought that staff already know what they should do but they 'just do it' anyway, i.e. the wrong way. No respondents gave any examples of where a change in behaviour or attitude had occurred or might occur as a result of the poster campaign. Some respondents felt that other intervention is needed, such as ladder training for all staff, ensuring that there is a culture of asking for help if needed and getting more steps for classrooms.

5.5.3.2 *Have the posters/leaflets resulted in any measures/good practice being used?*

Few respondents reported any measures of good practice that are being used as a result of the poster campaign. The only measures that were suggested was conducting informal risk assessments more often now and trying to work in pairs more often. Most respondents were not aware of any good practice that had been induced from seeing the posters and leaflet.

5.5.4 Distribution

5.5.4.1 *Who is the best person to send such health and safety information to?*

The majority of respondents felt that the head teacher was the best person to send health and safety information to, partly because it was thought that they would want to see such information. However, some respondents wondered whether the head teacher would be too busy to be able to act on such information quickly. Some respondents considered sending such information to a health and safety representative or the Local Education Authority to be useful. School governors were not considered to be a useful route for this sort of information.

5.6 APPENDIX 6: HEAD TEACHER INTERVIEWS THEMATIC ANALYSIS – SUMMARY OF COMBINED RESPONSES

5.6.1 The Problem of Falls in the Classroom

5.6.1.1 *How big a problem do you think that falls are in the classroom?*

Some respondents acknowledged that the nature of the job could introduce some problems with falls in the classroom. However, the majority of respondents felt that falls from height was not an issue in schools, despite some comments about teachers and assistants standing on tables and chairs etc. Some respondents felt that other hazards were more of a risk in schools, such as slips and trips or stress.

5.6.1.2 *Who do you feel are affected or potentially affected by the falls issue in schools?*

The majority of respondents thought that classroom assistants would be the most affected by the falls problem. It was recognised that classroom assistants are probably affected more now due to the recent Teaching Reforms that have meant that jobs such as display work are no longer done by teachers. However, teachers were still cited by a reasonable number of respondents, as it was believed that they would still help with displays etc. Furthermore, caretakers were also cited by a reasonable number of respondents, as they are more likely to work at height, although it was recognised that caretakers are also more likely to have had specific access equipment training. A few respondents thought that the falls issue would affect primary schools more than secondary schools, as there is more emphasis on displays in primary schools.

5.6.1.3 *What reasons are there for working at height in schools?*

The majority of respondents reported that putting up displays or decorations etc was the main reason for working at height in schools. However, retrieving items (from cupboards or the school roof etc) and opening or closing windows were also mentioned by some respondents, although these were not thought to be common reasons for working at height. This appeared to be mainly because some schools have special catches for windows or because the caretaker carries out these tasks.

5.6.1.4 *Do you have any examples of working at height accidents that have occurred in your schools?*

There were equal numbers of respondents citing or not citing examples of accidents that have occurred in their schools as a result of a fall. For example, items falling on staff when retrieving things from a cupboard or standing on tables or chairs to put things up or reach things. However, some of these were ‘potential’ accidents and respondents did not seem to be aware of any ‘major’ accidents.

5.6.2 Impact of the Poster Campaign

5.6.2.1 *Have the posters/leaflets been seen, displayed, or discussed in the school?*

The majority of respondents reported that they had seen or displayed the posters. Fewer respondents seemed to have seen the leaflet. However, while a few respondents said that they

did discuss the posters, more respondents said that they had not discussed the posters or the falls issue within staff meetings etc.

5.6.2.2 *What are your opinions on the actual posters/leaflet and how could they be improved?*

Few opinions were expressed about the actual posters or leaflet. However, of those who did express an opinion, respondents reported that the posters were good and that few, if any, improvements were needed to the actual posters or leaflet.

5.6.2.3 *Have the posters/leaflets raised awareness of falls or resulted in any positive changes etc?*

Many respondents thought that the intent of the poster campaign was fine but expressed concern that the posters would have a 'limited lifespan'; that is, they may be attended to initially but would then get ignored or forgotten especially when lots of other new information comes in. Indeed, the problem of schools receiving too much information to attend to all of it fully was expressed as a barrier to these sort of campaigns by the majority of respondents.

Other barriers to such campaigns that were expressed by the majority of respondents concerned time and budget constraints. It was felt that teachers and classroom assistants etc have many tasks to complete, do not have enough time to do them, and have very little spare time, which means that shortcuts will inevitably be taken in order to find the quickest way to do something. This could lead to less concern for health and safety. Unrealistic expectations from OFSTED to have stimulating displays etc were thought to add to this pressure.

Also, schools often have tight budgets and so have to prioritise purchases and ladders may not have a high enough priority. Furthermore, it was recognised that schools may not be able to afford to fully address an issue such as falls, e.g. it was mentioned that for high hall ceilings, scaffolding could be used but this is expensive. Possible problems with the storage of ladder equipment etc, especially in smaller schools, were also identified but only by a few respondents. Finally, it was recognised by a few respondents that while schools do have health and safety checks, they do not often consider height hazards and are more concerned with the physical premises than the hazards arising from practice of teaching.

The majority of respondents suggested that the poster campaign had no impact or did not lead to any changes etc. Furthermore, most respondents felt that other issues are more important and have more of an impact than the posters. For example, most respondents felt that the recent Teaching Reforms (whereby classroom assistants should do displays rather than teachers) had been more influential in changing how staff worked.

5.6.2.4 *What other ways of disseminating the falls in classrooms message may be more effective than the poster campaign?*

The majority of respondents thought that video may be a useful medium for disseminating this sort of health and safety information. However, there was some concern if such methods were still optional. Some respondents thought that an ongoing 'rolling' programme of posters showing different posters over a series of months would be more effective. Only a few respondents reported other mediums as possibly being more effective (e.g. Internet and ensuring that posters etc are located in the most effective places such as classrooms or sent to the most relevant people). Finally, a few respondents felt that incorporating the falls issue into training sessions, and perhaps using the posters as a back up to training, would be more useful. A few

respondents felt that the posters were as effective, if not more effective, than other media would be.

5.6.3 Impact on Behaviour and Good Practice

5.6.3.1 *Have the posters/leaflets had any impact on staff behaviour/attitudes to working at height?*

All respondents thought that there had been no changes in attitudes or behaviour of the staff in their schools. It was thought that people know that they should not stand on chairs or tables but they 'just do it'. The majority of respondents felt that other interventions were needed in order to have more of an impact. For example, culture changes (such as not putting things at height or having a better health and safety management system such as that found more in colleges); initiatives such as the recent Teaching Reforms; raising the profile of such issues 'from the top'; or introducing specific procedures for dealing with potential height activities.

5.6.3.2 *Have the posters/leaflets resulted in any measures/good practice being used?*

Approximately half of the respondents reported that certain measures and good practice are used to deal with the falls issue. For example, attempting to have two people present when working at height, encouraging the acceptance of asking for help if needed, and ensuring areas are clear of children before undertaking such activities. However, these measures were not necessarily thought to have arisen as a result of the posters and leaflet.

5.6.4 Distribution

5.6.4.1 *Who is the best person to send such health and safety information to?*

The majority of respondents felt that the head teacher was the best person to send such health and safety information to. This was because it was felt that it is protocol for the head teacher to see all information that comes to the school, as they are ultimately responsible for health and safety. The Local Education Authority was also mentioned as a potential route for information given the support and contact that schools have with the LEAs.

5.6.5 APPENDIX 7 ANALYSIS OF POSTAL QUESTIONNAIRE

5.6.6 The problem of falls in classrooms

Ninety four percent of respondents reported that falls from height were not a problem in schools or classrooms. However, of the few respondents who answered the question about 'who falls is a problem for', the majority of responses reported that teachers and classroom assistants were most at risk. A minority of respondents also mentioned caretakers or cleaners.

Putting up displays was considered to be the most risky activity in terms of falls from height (86.6%). About half of respondents (46.3%) considered retrieving items to be a risky activity and about a third (29.9%) suggested opening windows. In the 'other' category changing light bulbs was mentioned. Similarly, when asked whether certain activities were more common than others, putting up displays was reported by 56% of the sample. Again, retrieving items or cleaning/maintenance was also mentioned but only by 10%. Just over three quarters of respondents reported no falls accidents. However, when accidents were reported, approximately 60% were from chairs or tables and 40% were from proper equipment.

5.6.7 Impact of the poster campaign

About 72% of respondents reported that they had received the posters and the majority of these (70%) reported displaying the posters. One respondent said they had not displayed the posters as they only received the leaflet. Also, a reasonable number of respondents reported not receiving the poster pack at all (28%).

There seemed to be mixed reports as to whether the posters had been effective or not. About 34% of respondents thought they had been effective while nearly the same amount of respondents (about 33%) reported not really knowing whether they have been effective. The main way that the posters were considered to have been effective was through raising awareness or giving reminders to staff of working safely (40%). Rating the effectiveness in terms of whether the issue was discussed or whether actual behavioural changes had occurred was only mentioned by 10% and 12% respectively. A fairly high proportion of respondents reported that they did not know how effective the posters had been because there had been no accidents prior to the posters for comparison, (31%).

Supporting the finding above, the majority of respondents thought the posters and leaflet did raise awareness of falls as a hazard (57%). A reasonable number of respondents also thought that the posters would reduce falls (39%), but there seemed to be less certainty with this. Reasons why the posters may not raise awareness or lead to reduced numbers of falls included staff being too busy, the posters will only have an impact in the short term and then be forgotten unless they are followed up more or are part of a wider programme and staff will still use chairs and tables anyway.

Half of the responses reported that the posters were thought to be a good medium for disseminating this kind of message. However, 15% of responses did not think the posters were good. When asked how the posters could be improved, the majority of respondents reported either not knowing how or that they were all right as they are (47%). Nevertheless, some possible improvements were suggested, such as changing posters periodically, putting flyers in pay slips, having larger written information, or putting the words 'health and safety' in the poster captions. Twenty one percent of responses reported that other mediums might be better (e.g. video, case studies or more active communication, such as training).

5.6.8 Impact on behaviour and good practice

About half of respondents (50.7%) thought that staff would now be more aware of how to avoid falls. Other respondents thought that they would not be more aware or they weren't sure.

In terms of what measures for preventing falls had been learnt from the poster campaign, 35% simply reported learning that incorrect equipment not designed for climbing on should not be used and stepladders etc should be provided. Other measures reported included ensuring there is continual repetition of the message, providing guidelines and training, ensuring that there are two people present when working at height, reconsidering school working at height policies and conducting informal risk assessments whilst working.

The responses regarding whether the posters and leaflets would lead to changes in behaviour or attitude were mixed. About a third of respondents (31%) did not think that behaviour would change. Sixteen percent of respondents believed behaviour would change or were not sure. Where respondents reported changes in behaviour would occur or have occurred, the most common changes were no longer using incorrect equipment or requesting steps etc and people being more aware of the danger. Discussion of the issue, working together, or seeking advice or training were also reported but with much less frequency.

5.6.9 Distribution

Nearly 54% of respondents thought that the head teacher is the best person to send such health and safety information to and nearly 45% of respondents felt that a member of staff with health and safety responsibility would be the most appropriate. About a quarter of respondents also cited other appropriate people to send health and safety information to, such as the caretaker/building supervisor (47%), governors (29%) or other people such as the bursar or local education authority (18%).

6 REFERENCES

Health and Safety at Work – Training Supplement. (March 2004). Safety campaign aims to reduce classroom accidents.

HSE Press Release E008:04. (21 January 2004). Poster and leaflet campaign aims to prevent falls in the classroom. [Http://www.hse.gov.uk/press/2004/e04008.htm](http://www.hse.gov.uk/press/2004/e04008.htm). Other information relating to the falls in the classroom campaign can be found at <http://www.hse.gov.uk/falls/issues.htm>

Moser, C. Kaltman, G, 1979 Survey Methods in Social Investigation 2nd edition London Heinemann

Robson, C. (2002). *Real World Research (2nd Edition)*. Blackwell: Oxford.

Ritchie, J., Spencer, L., and O'Connor, W. (2003). Carrying out qualitative analysis. In Ritchie, J. and Lewis, J. (eds). *Qualitative Research Practice: A guide to Social Science Students and Researchers*. Sage Publications: London.

Snodgrass, R. (2004) Slips and Trips Priority Programme: Baseline evaluation of awareness, knowledge and attitudes held by industry to inform the Slips and Trips priority Programme evaluation. HSL report WP/04/07.