



MBIS Health and Safety Policy

Rationale

Maadi British International School Mission Statement

'Learning for Life...'

Maadi British International School provides children with the knowledge, skills and understanding that will empower them to be well-rounded, successful members of an ever changing, culturally diverse world community.

At MBIS we are committed to providing a happy, positive learning environment where children, teenagers and adults are:

- *Successful, independent and collaborative learners*
- *Confident, cooperative team players and responsible leaders*
- *Flexible, resourceful and resilient*
- *Reflective, honest and trustworthy*
- *Responsible, caring global citizens*

Introduction

MBIS strives to secure a safe environment for all members of the school community. The purpose of this Health and Safety Policy is to make clear and to promote common understanding of the way in which MBIS manages the health, safety and environmental aspects of all its activities. It provides a reference point for all stakeholders to help ensure that due regard is paid to health and safety in accordance with required policies.

The aim of the policy is to:

- Ensure that all reasonably practical steps are taken to ensure the health, safety and welfare of all persons using the premises.
- Ensure that all reasonably practical steps are taken to ensure the health and safety of staff, children and other supervising adults participating in off-site visits.
- Establish and maintain safe working procedures amongst staff and children.
- Develop safety awareness amongst staff, children and other supervising adults.
- Implement effective procedures for use in the event of fire and other emergencies.
- Lay down procedures to be followed in case of accident

The School Health and Safety Policy is in addition to any relevant documents/policies issued by the British Embassy, ISI and COBIS. Copies of such documents will be located in the staffroom, the Head of School's Office, on the shared drive area for staff and on the school website.

In the event of an injury/sickness, the school and the school doctor will follow the procedure outlined in Appendix 5. (MBIS Clinic Procedure)

1. Responsibilities

The maintenance of a healthy and safe school is the shared responsibility of the whole school community. More specifically:

The **Senior Leadership Team/ Designated Member of School Board** will:

- Advise policy.
- Give strategic guidance.
- Monitor and review health and safety issues through termly reviews
- Ensure adequate resources for health and safety are available.
- Recognise their responsibility so far as is reasonably practicable to:
 - ▶ Provide plant, equipment and systems of work, which are safe, and without risks to health.
 - ▶ Make arrangements for handling, storage and transportation of articles and substances.
 - ▶ Provide adequate training, information, instruction and supervision to enable all staff employed in the school and children to perform their work safely and efficiently.
 - ▶ Promote the development and maintenance of sound safety, health and welfare practices.
 - ▶ Maintain the premises in a condition that is safe and without risks to health and the maintenance of access to and egress from the premises.
 - ▶ Provide and maintain a working environment that is safe, without risk to health and adequate as regards welfare facilities for staff, pupils and other supervising adults.
 - ▶ Ensure sufficient funds are available to provide, as necessary, protective clothing/equipment to all staff employed in the school, for the safe use of machinery, equipment and substances.
 - ▶ Maintain a close interest in all the health and safety matters in so far as they affect activities in the premises under the control of the school.

The **Head of School** will:

- Be responsible for the day-to-day implementation of school safety organisation.
- Develop a culture of safety throughout the school.
- Conduct a termly site check with the Head of Primary, Head of Secondary and Site Manager (*Appendix 3*)
- Report to the School Board on pertinent issues as a matter of routine and through termly reviews.
- Liaise with outside agencies able to offer expert advice.
- Ensure that all staff fulfil their duties to co-operate with the policy.
- Formulate and co-ordinate safety procedures.
- Review first aid, fire/evacuation and risk assessment procedures with relevant staff, on an annual basis, or as and when necessary, reporting back to the School Board.
- Ensure HSE is a regular focus in staff meeting agendas.
- Ensure relevant staff have access to appropriate training (including updating first aid training every 3 years)
- Ensure new staff are inducted in school health and safety matters.
- Report to the Head of Administration any defects and hazards that are brought to notice.

The **Head of Administration** will:

- Ensure they are familiar with the school's Health and Safety Policy.
- Conduct a termly health and safety site survey with the Head of School, Head of Primary, Head of Secondary and Site Manager (*Appendix 3*).
- Meet with the Head of School, Head of Primary and Head of Secondary on an ongoing basis to manage site issues.
- Meet with the School Site Manager and Contractors (cleaning and security) representatives on a monthly basis to manage site issues.
- Meet with the School Site Manager to conduct preventative fire checks on a termly basis.
- Ensure relevant staff have access to appropriate training (including updating first aid training every 3 years).
- Ensure lists of First Aiders are posted in the School Clinic, School Office, Staff Room and key learning bases (Swimming Pool, Science Room, DT Room, Cookery Room) and in the Staff Handbook.
- Ensure that all cleaning staff are aware of any implications of the Health and Safety Policy as it affects their work activities e.g. storage arrangements for materials, equipment, substances etc.
- Report to the Head of School any defects and hazards that are brought to her notice.
- Ensure that everything received from suppliers (for direct school use), machinery, equipment, substances etc. is accompanied by adequate information and instruction prior to use.
- Arrange the testing of the fire bells and fire doors monthly.
- Inform the Head of School, Head of Primary and Head of Secondary whenever contractors are due to enter the school to undertake maintenance, service or works contracts.
- Maintain a record of hazardous substances used for cleaning and similar purposes.
- Liaise with the Head of School, Head of Primary and Head of Secondary when organising health and safety works.
- Report to the Head of School on any financial implications for HSE issues.
- Ensure persons booking the school for a letting will be sent a summary copy of the Health and Safety Policy.

The **Head of Primary and Head of Secondary** will:

- Conduct a termly health and safety site survey with the Head of School, Head of Administration and Site Manager.
- Coordinate Educational Visits
- Act as Designated Safeguarding Leads
- Ensure staff and any other supervising adults are aware of any matters pertaining to Health and Safety in their phases/areas of school:
- Report to the Head of School any defects and hazards that are brought to their notice.

The **School Maintenance Team and Security Team (led by the Site Manager)** will:

- Ensure that the highest standards of cleanliness, hygiene and safety are followed in maintaining the school premises
- Report any health and safety concerns to the Site Manager and the Head of School.

The **School Doctor** will:

- Collect medical information forms in September and communicate a medical register – including those children on Individual Health Plans (eg. epilepsy, diabetes, asthma) to all staff through staff room notices/forms and on the shared online drive/by email.
- Directly support children with medical conditions
- Take charge when someone is injured or becomes unwell
- Keep a log of all injuries and illnesses
- Train staff in the use of epipens
- Provide parents with medical information on a needs basis (eg. incidence of chicken pox in school, head-lice, etc)
- Provide general medical information to parents
- Undertake regular stock checks
- Maintain First Aid boxes around school/trip-packs
- Contact parents after a student attends the clinic for an injury or sickness

Staff trained in First Aid will:

- Give immediate help to children with common injuries or illness and incidents arising from specific hazards at school

All **Staff** will:

- Ensure that they have read the Health and Safety Policy.
- Fully support all health and safety arrangements.
- Take reasonable care of their own health and safety and that of children and others who may be affected by their actions.
- Ensure, as far as is reasonably practicable, that their classroom or office is safe.
- Use equipment safely.
- Ensure, as far as is reasonably practicable, that children use equipment safely.
- Report situations that may present a serious or imminent danger to the SLT or Site Manager as soon as possible.
- Report any defects and hazards to the Head of Administration/Site Operations Manager through direct communication or via the Site Support Help Desk.
- Report any concerns of abuse to children to the Head of Primary/Head of Secondary who are the Designated Safeguarding Leads.
- Bring to the attention of the School Doctor any children with medical needs or who may need specific handling, to ensure the health and safety of children or staff.

All **Short-term Staff** are expected to:

- Familiarise themselves with the summary Health and Safety Policy and adhere to the directives therein.

Students are expected to:

- Exercise personal responsibility for the safety of themselves and classmates.
- Observe standards of dress consistent with safety and/or hygiene.
- Follow the safety rules of the school and in particular the instructions of teaching staff given in an emergency.
- Use and not willfully misuse, neglect or interfere with items/equipment provided for their safety.

Parents are expected to:

- Support the school in any health and safety matters reported to them on newsletters.
- Report to the school any medical and/or behaviour issues regarding their children that may have bearing on health and safety.

2. Health and Safety Arrangements at MBIS

(2.1) Accidents and Incident Reporting

- Any child complaining of illness or who has been injured is sent to the School Doctor to be treated.
- All incidents, ailments and treatment are reported on the Accident/ Injury Record Sheet by the School Doctor.
- Parents are contacted by telephone and by a standard letter if the condition may need further medical attention or if there are any concerns about the child. This should be recorded on the Accident/ Injury Record Sheet.
- If a child sustains a head injury, parents are informed by telephone and by a standard letter. The letter outlines the injury and symptoms to look out for. This should be recorded in the Accident/ Injury Record Sheet by the School Doctor. The class teacher should be informed, along with the Head of Primary or Head of Secondary, depending on the age of the student (see MBIS Head Injury Policy)
- The School Doctor will contact parents by telephone if they have any concerns about an injury.
- If a serious injury has been sustained, the child should not be moved. The School Doctor may be contacted by mobile or by a (preferably adult) messenger.
- In the event of a serious incident, an ambulance is called and a member of staff accompanies the child to hospital. Parents are contacted immediately by the School Office and requested to go to the hospital. It may be appropriate to transport a child to hospital without using an ambulance. This should be on a voluntary basis.
- Serious accidents or incidents of violence are recorded on the 'Incident Report Form' in the School Clinic and on the Teacher Drive.
- If staff are concerned about the welfare of a child they should contact the Class Teacher and Deputy Head of School immediately.
- Staff should complete the Accident/Injury Record Sheet for employees if they sustain an injury at work. An injured member of staff or other supervising adult should not continue to work if there is any possibility that further medical treatment is needed. The member of staff or other supervising adult concerned

should seek medical advice without delay.

See ***Different Types of Accidents, Conditions and First Aid Practicalities*** (Appendix 1)

(2.2) Administration of Medicines

- Parents give written consent to authorise School Doctor/First Aiders/Adult in Charge to administer medication.
- The School Doctor administers medicines for chronic or long-term conditions.
- Medicines are stored in a locked cupboard. Staff record the time medication is given and sign the record sheet.
- Medication for asthma and epi-pens are stored in an unlocked cupboard in the School Clinic. Children are supervised by a Doctor/First Aider when taking their asthma medication.
- Full details can be found in ***Guidance on Medicines in School*** (Appendix 2).

(2.3) Atmospheric Issues

From time to time, Cairo is subject to extreme atmospheric conditions – ie. intense heat and dust storms. The School Doctor will monitor the situation on such days and advise the SLT if all children should remain inside at break times, or those with breathing conditions. In the case of the latter, the children are supervised in the main library. **(See MBIS Air Quality and Pollution Policy)**

(2.4) Communication of Information to Users of the Premises

Any contractors on site will receive a summary copy of this Health and Safety Policy from the Head of Administration.

(2.5) Control of Hazardous Substances

All chemicals, including strong adhesives, solvents, varnishes, washing liquids and cleaning materials should be labeled, locked away and only accessible to authorized people. Cupboards with hazardous substances are marked with an identifying label

(2.6) Cooking

All staff who use the Cookery Room are required to familiarize themselves with the Normal Operating Procedures for this specialist facility.

- Cookers should not be used without essential fire precautions being immediately available e.g. fire blanket, fire extinguisher.
- Staff should ensure pupils receive instructions and on-task training to enable them to be safe during a cooking activity.
- An adult must be in direct supervision of children using the school cookers

(2.7) Clothing

All children are required to wear school uniform to ensure appropriate, comfortable clothing/shoes. Parents will be emailed by the class teacher if clothing is deemed to be inappropriate. Children are required to change into school PE/outdoor clothing for such sessions.

Teachers should, where possible, change into appropriate clothing for PE/outdoor games. This sets a good example to the children and allows a greater degree of maneuverability for demonstrating skills, or accessibility to a child should an accident occur

(2.8) Curriculum

Staff employ appropriate assessments/control measures when planning activities in higher risk activities in Science, Design Technology, Art and PE. See ***Managing Risk in the Curriculum*** (Appendix 6).

(2.9) Disposal of waste

All persons must ensure that materials, substances or items are disposed of in a safe manner and in accordance with legislation relating to health and safety, the environment and pollution.

(2.10) Earthquake Procedure

In the event of an earthquake, adults in charge of children will:

- ✓ Reassure the group and maintain calm
- ✓ Direct them to **not run** outside – but to take shelter in the place they are in: under tables and in doorways: **DROP - COVER - HOLD**
- ✓ All other adults should seek similar shelter immediately
- ✓ Direct children who are outside to areas away from windows, buildings, pylons, etc and to **DROP - COVER - HOLD**

Once the tremors have subsided, all adults and children should evacuate the building in an orderly manner. See ***MBIS Earthquake Policy***,

(2.11) Educational Visits

Please refer to the ***MBIS Educational Visits Policy*** when organising a visit.

(2.12) E-Safety

The school has systems and procedures in place to afford e-safety to all members of the community. (See ***MBIS E-Safety Policy***)

(2.13) Electrical Testing

All items of portable electrical apparatus and equipment in use at the school are inspected and checked annually. The fire alarms are checked monthly.

(2.14) Exposure to the sun

The school is very aware of the dangers of exposure to the sun. Consequently:

- Shaded areas have been provided in all the school play areas.
- An adequate supply of or access to liquids is always made available.

- Parents are encouraged to ensure that the children
 - ▶ wear suitable protective clothing and appropriate headwear to school
 - ▶ apply sunscreen before the school day if desired.
- The school operates a strict 'no cap, no play' policy in summer months.
- The school promotes the self-administration of sun cream by children under supervision. Teachers will help apply sun cream for the very young children and children with special needs. Teachers or Teacher Assistants should not do this whilst alone with a child.
- As far as possible, learning activities across the school will avoid unnecessary exposure to the sun. In the case of children with particular sensitivity to the sun, extra care will be taken, if parents have informed the school staff personally. When the temperature reaches 40 degrees Celsius, children remain in classrooms during break time.

(2.15) Evacuation of the Building

- ***The MBIS Fire Evacuation policy and procedure*** states clearly the course of action in such situations. Procedures for evacuation are displayed by the door of each room in the school buildings
- Fire exits are clearly labelled.
- A fire drill is practised once a term. The Head of School provides a report to the School Board.

(2.16) Fire Safety

MBIS will ensure, so far as reasonably practicable, that all staff, children, parents, contractors and visitors are protected from the risks of fire whilst on the school site. **See *MBIS Fire Evacuation policy and procedure.***

(2.17) First Aid Provision (See Accidents & Incident Reporting)

- MBIS has one full-time doctor on site
- The Head of Administration is responsible for ensuring that there is an adequate number of qualified First Aiders. Their names are displayed in the School Office, Staff Room and the School Clinic.
- First Aid is administered in the School Clinic.
- Portable First Aid kits are taken on educational visits and are available from the School Clinic. They are also located at key points around the school
- All staff will be trained in any aspects of First Aid deemed necessary e.g. asthma, epilepsy, the use of an epipen, etc.
- At least one qualified First Aider should go on any educational visit.
- **All first-aid boxes contain the following items:**
 - ▶ First aid instructions
 - ▶ Gloves
 - ▶ Band-aids
 - ▶ Plaster roll

- ▶ Antiseptic cream
 - ▶ Allergex cream
 - ▶ Antiseptic wipes
 - ▶ Gauze swabs
 - ▶ Tape
 - ▶ Bandages - assorted
 - ▶ Eye pads and patch
 - ▶ Mask
- Each school bus must carry a first-aid pack
 - First aid boxes must accompany any group of children off site (sporting match, day trip, residential)
 - Responsibility for checking and restocking the first-aid containers with the School Doctor.

(2.18) Hand washing

- To ensure high standards of personal hygiene, the children are required to wash their hands before eating.

(2.19) Hazardous Areas

- All potentially hazardous areas (Science Room, Cookery Room, DT Room) have code locks to prevent unsupervised entrance by children.

(2.20) Head Injuries

- Parents are informed of a head injury by phone call and letter from the School Doctor. The letter outlines the nature of the injury and the symptoms to look out for. Concussion tests may be carried out for 10 days regarding on the nature of the injury (please refer to the **MBIS Head Injury Policy** for more details)
- Outside of the normal school day (e.g. day trip) First Aiders contact parents by phone.

(2.21) Head Lice

- If eggs are noticed in a child's hair a letter is sent home informing the child's parents.
- A general letter is sent to the parents of all children in a class if there is a case of head lice in the group.

- If live lice are noticed in a child's hair the parents are contacted by telephone and asked to collect him/her from class.

(2.22) HIV

- No person must treat any child or adult who is bleeding, without protective gloves.
- Protective gloves are stored in the School Office and in every classroom/teaching bases
- Sponges and water buckets must never be used for first aid to avoid the risk of HIV contamination.

(2.23) Helmets

All adults are required to wear a protective helmet when riding a bicycle to/from school.

(2.24) Hot Drinks

Staff are provided mugs with sealed lids. These must be used during the school day if the drink is to be taken out of the staffroom. Hot drinks should not be consumed during lesson time.

(2.25) HSE Information

- The Head of Administration and the Head of School will advise staff of HSE matters accordingly.
- Relevant Health and Safety posters are displayed in the Staff Room and key areas (eg Cookery Room) as appropriate.
- Health and Safety features as a regular agenda item in staff meetings.

(2.26) Lockdown

The school has measures in place to achieve a partial or a full lockdown of the site. See ***MBIS Lockdown Policy***

(2.27) Manual Handling

Children, staff and any other supervising adults should only lift equipment and furniture within their own individual capability. Children should be reminded how to lift equipment properly at the beginning of each school year in PE sessions.

(2.28) Movement Around School

- When moving around school as a class, the children should walk in single file or with a partner and stand in single file/with partner when waiting.
- Children should not play in areas marked by yellow boxes.

(2.29) On Site Vehicle Movements

Contractors who come onto the premises when loading/unloading equipment must park outside of the school where directed. They can only gain access by contacting a member of staff.

(2.30) Parental Consent

- Parents give prior written consent for the administration of routine medicines. Parents give specific written consent for the administration of special medicines, such as insulin injections. Medicines can only be administered by a qualified medical practitioner i.e. the school doctor or the school doctor.
- Teachers or other staff are not allowed to administer medicines of any kind to any child. Teachers running school trips may request that parents complete a medical form for their child for the purposes of the trip. Such information is held in strict confidence.
- The School Doctor will contact parents by telephone before administering routine medicines, as a back-up procedure. Parents will then receive a note from the Doctor, which will have details of the medicine administered, the dosage, the time and circumstances. The School Clinic will also keep notes on this.

See ***MBIS Guidance on Medicines in School (Appendix 2)***

(2.31) PE Equipment

Sports equipment is checked annually by a contractor and repaired or removed as appropriate. The PE Teacher is responsible for reporting equipment issues as they arise to the Head of Administration.

(2.32) Pest Control

The school employs a specialist company to manage potential pests, such as snakes, cockroaches, rats, ants, flies, etc. The company visits the site frequently and uses measures safe for humans.

(2.33) Playground See *MBIS Playground Supervision Policy (Appendix 4)*

- Staff should encourage children to play safely and discourage play-fighting or other rough games.
- Three to four members of staff supervise the playgrounds at the start of the day and at the first and second breaks (Teachers and LSAs)
- A member of the teaching staff is responsible for alerting the relevant Head of Primary/Secondary if an individual on duty has not reported to the playground.
- Staff should actively patrol the areas of the playgrounds to ensure full supervision.

(2.34) Pregnant Workers and Nursing Mothers

The Head of Administration will carry out a risk assessment in such situations. Appropriate action will be taken to ensure the member of staff is not exposed to any significant risks.

(2.35) Registers

A class registration system is followed to ensure a full daily record of children's attendance across the academic year. This information assists evacuation

procedures and the identification of educational/welfare issues.

(2.36) Risk Assessments

Risk assessments are carried out at termly and when circumstances dictate (eg. through the staff meeting standing agenda item on HSE; site maintenance help- desk system) by the Senior Leadership Team. Recommendations on measures needed to prevent or control risks are acted upon as soon as possible.

(2.37) Road Use

In the interests of safety for all, the school will provide clear guidance to the parent community regarding use of the road outside the school premises. Security staff will strive to uphold this guidance with road-users on a daily basis.

(2.38) Safeguarding

The Head of Primary and Head of Secondary are the appointed Designated Safeguarding Leads. All staff receive Level 1 Child Protection training. A School Board Member is also trained at this level.

(2.39) Safe Stacking and Storage

Equipment should be stored at an appropriate level and position relative to its height, weight and bulk.

(2.40) Security

A security team is in operation day and night. A photo ID system is in place for all members of the school community. All individuals who enter the school are required to comply with the entry/exit procedures. The SLT assess school security arrangements on an ongoing basis, with advice from experts as needed.

(2.41) School Doctors

The school has the doctor on site during normal school hours - including ASAs - and also during special events (such as Halloween).

(2.42) Slips, Trips and Falls

It is unrealistic to expect children never to fall, especially at playtime. However, staff or other supervising adults should report any conditions considered hazardous e.g. uneven surfaces, holes, wet/slippery surfaces, worn carpet, trailing cables to the Head of Administration.

All staff are required to ensure that all potential hazards are removed to avoid slips, trips and falls (trailing cables, uneven carpet, etc).

(2.43) Swimming

Swimming takes place at the school pool on school site. Swimming instruction is provided by qualified swimming instructors.

- The pool water is maintained to a high standard:
- ▶ Emptied twice a year (April & August); tiles cleaned walls washed; repairs made; water changed; new chemicals added

- ▶ Temperature maintained to a constant recommended level
- ▶ Records of all chemical checks kept
- ▶ Water analysis twice-annually
- ▶ Protocols for human waste accidents
- A qualified lifeguard is on duty at all times (certs renewed appropriately inc first aid course)
- Life saving equipment is in place (depth markings, telephone, life saving poles, buoyant throwing aids)
- Access is strictly controlled

(2.44) Smoking

Smoking is not allowed anywhere on the school premises. Signs clearly indicate this ruling to visitors. No smoking signs are also displayed on school buses.

(2.45) Supervision of Children

1. Staff and other supervising adults should maintain good order and discipline, safeguarding their own and the children's health and safety at all times.
- 2. No child should be left unsupervised at any time.**
3. Staff should be in class when children come into class in the morning.
4. Staff should be punctual in collecting children from the playground.
5. Staff should not leave a class unattended at any time.
6. The same duty of care applies when staff supervise children in After School Activities.
7. If a member of staff knows that s/he is unable to undertake a duty s/he should inform the Head of Primary/Head of Secondary who will arrange cover.
8. Other staff on duty should inform cover teachers of their duties regarding supervision.
9. If a parent fails to collect a child after school, Administration Staff should make every effort to contact the parent. If a parent cannot be contacted, the emergency procedure displayed on the School Office notice board should be followed.

(2.46) Transporting Children

- When traveling on buses, all children and adults must wear a seat belt.
- No child under the age of 5 is allowed to travel without a car seat provided by the parents.
- The bus will not leave unless all passengers are secure in their seats.
- Children must not play with, or open, the windows whilst on the bus.
- Children enter and leave the bus in an orderly manner, and walk to a meeting point.
- At drop-off, a child who reaches home to find no-one present will re-board the bus until contact is made with a parent/guardian.
- In the event of a bus breakdown:
 - ▶ The teacher must not leave the children on their own.
 - ▶ The driver is responsible for dealing with the breakdown.

(2.47) Working at Height

Staff and other supervising adults should use stepladders when working at height e.g. displaying work. Chairs and tables should not be used for this purpose.

(2.48) Working During the Evening

Staff sometimes stay late at school. During these times the Security Team is on site and supervises the school entrances. Staff should alert the Security Guard on duty that they are staying late so that he can ensure they remain safe.

(2.49) Visitors

- All visitors to school are required to register at arrival and departure at the security gates.
- Regular visitors and other users of the premises (eg. contractors and delivery men) are expected, as far as reasonably possible, to observe the rules of the school.
- The school also has responsibility for contractors on the school sites, both for their place of work and for articles, substances and equipment that they use and should therefore ensuring that contractors conduct themselves in a sensible and safe manner and according to the Health & Safety Policy of the company they are employed with.

3. Review and Monitoring of the Policy

The School Senior Leadership Team and the School Board will undertake a review of the policy annually. Any new legislation or directives will be incorporated into the policy as necessary.

Date of Policy: November 2022

Reviewed in November 2024.

This policy will be reviewed again in November 2025.

Appendix 1

Different Types of Accidents, Conditions and First Aid Practicalities

A. Heat Exhaustion

Warning signs:

1. Tired and faint, headache, nausea.
2. Red, hot face.

First Aid:

1. Sit in cool, shaded spot.
2. Rest and fluids (may add ½ tsp salt to water).

Prevention:

1. Wear light clothing.
2. Take rests in shade.
3. Drink fluids freely with added salt.

B. Fainting

1. As soon as person feels faint, lay them down and raise legs a little or bend fully with head between knees.
2. Tell them to breathe slowly.
3. Loosen tight clothes.
4. As they improve, give them water to drink slowly.

C. Medical Emergencies

(1) Diabetes

Warning signs of hypoglycaemia:

1. Weak, shaky, sweating, pallor.
2. Poor concentration, yawning and poor co-ordination.
3. Clumsy, unreasonable behaviour.

What to do:

1. Give 6 lumps of sugar in a glass of water (2tbsp).
2. If sugar not available, give chocolate, cake or bread.
3. If unconscious, DO NOT give anything by mouth. Put in recovery position until medical help arrives.

(2) Asthma

In case of a severe attack of wheezing and fighting for breath:

1. Loosen tight clothes.
2. Sit up with back straight but try to relax.
3. Tell him to try to take deep breaths from waist level.
4. Ask if they have an inhaler with them.
5. Let in fresh air.
6. Drink of strong coffee may sometimes offer relief.

(3) Epilepsy or Fits

In jerking phase:

1. Mop away froth from the mouth.
2. Protect limbs from injury by moving away furniture or putting rolled up cloth between the limbs and surface knocked.

In relaxed phase:

1. Put in a recovery position.

When they come to, do not let them resume normal activity. Check for injuries.

(4) Wounds, Bleeding and other Injuries

General Wounds:

- 1- Sit patient down
- 2- Clean skin around the wound, but not the open wound itself. Use soap and water or Savlon swabs. Start at edge of wound and move away.
- 3- Place protective layer of gauze over wound, then apply thick pad of gauze or cotton.
- 4- Cover with bandage (not too tight).

If Object in the Wound:

- 1- If small and lying loosely in wound flick it away with clean piece and gauze.
- 2- If embedded in wound leave it there. Cover it loosely with gauze.
- 3- Seek medical help.

Eye Wounds:

- 1- Do not attempt to clean wound. Cover the eye with a smooth pad and lightly bandage.
- 2- If movement of eye is painful cover both eyes (as they move together).
- 3- Seek medical advice.

Wound Bleeding:

- 1- Pinch edges of wound firmly together with fingers or press on wound hard.
- 2- Keep pressure and elevate the bleeding part.
- 3- Slip a pad or dressing under your hand (maintaining pressure all the time), then tie bandage. If no dressing available improvise clean cloths, towels, fabrics. Do not let patient apply pressure himself.
- 4- Cover patient. If wound still bleeding do not undo bandage. Put another thick pad over it and bandage firmly.
- 5- Keep injured part as still as possible.

Nose bleeds:

- 1- Sit patient down, lean forward.
- 2- Press the whole soft lower part of the nose between thumb and fore finger without interruption for 10 minutes.
- 3- If bleeding still continues. Continue for another 10 minutes.

*** When to suspect internal bleeding?**

1- Faintness, restlessness, thirst, pallor, sweating, weak and fast pulse, breathlessness (gasping for air)

*** How to Manage:**

- 1- Transfer to hospital.
- 2- Keep patient lying down with head low and legs raised.
- 3- Undo any tight clothing.
- 4- Cover warmly but loosely.

Burns:

Cool the burn. If small area, hold under tap water. If large area, immerse in a bucket of tap water or cover with a thick cloth soaked in cold water. Continue for at least 10 minutes (do not use ice).

- 2- Anticipate swelling. Remove jewellery, tight clothes. Keep burnt part elevated.
- 3- Dress the burn with widest clean cloth available. Bandage loosely.
- 4- Clothes on fire: Smother the flames with first, thick, large cloth available. Better if wet.
- 5- Give patient half cup of water with a little sugar and a pinch of salt slowly over 10-15 minutes.

Scalds:

- Remove at once any non-adherent clothing hot from boiling fluids or steam.
- As above.

Blisters:

- 1- Do not break.
- 2- If broken, clean with soap and water and apply dressing.

Sprains:

- 1- Cooling affected joint with cold compresses during first half hour.
- 2- Soak a thick cloth in cold water, wring it out and place it over joint.
- 3- Renew when it becomes dry or warm.

Muscle Cramps:

- Stretch the affected muscle.
- Rubbing the area may help.

Appendix 2

Maadi British International School Guidance on Medicines in School

In the event of a child taking medicines to the school the parents are asked to fill in a form which states that the school will administer medicines, but the parents take full responsibility. The parents should authorize and supply the drug in appropriate doses with written instructions about when the child should take it (a form for this authorisation can be obtained in the School School Clinic).

The School Doctor should supervise the child taking any medications and notify parents in writing on the day the pain killers were taken. A child under 16 should never be given aspirin or medicines containing Ibuprofen unless prescribed by a doctor.

Non-prescribed medicines.

The school will not take responsibility for any non-prescribed medicines parents may bring or send into school to help with minor ailments. These will be kept by the School Doctor in a locked area and returned to the parent in person.

Controlled drugs:

No child should be given medication without written consent from the parents. Parents will need to fill in a medicine request form which can be obtained at the School Offices. Medicines should only be taken to school when essential - where it would be detrimental to a child's health if the medicine were not to be administered during the school day. They should be brought to the school, by the parent or other responsible adult, and handed to the appropriate class teacher. The school will only accept medicines that have been prescribed by a doctor, dentist, doctor prescriber or pharmacist prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The container should be labeled with the child's name, the type of medicine and dosage instructions. In cases where there is doubt about the correct dosage, advice should be sought before medication is given.

A controlled drug should never be passed on to another child for use. As this is an offence, the relevant parents and police have to be notified.

If a child refuses to take medication, staff should not force them to do so. Record the reason for refusal of medication. The school should inform the child's parents as a matter of urgency. If necessary, the school should call the emergency services.

Administering medicines

The following standard practice should be followed by school staff when administering medicines. They must:

- Check written instructions received by the school and confirm with details on the medicine container
- Check the prescribed dosage.
- Check the expiry date of the medicine.
- Check the timing/frequency details
- Check record of last dosage given.
- Check the child's name of the medicine again.
- Complete written record of dosage given, including date, time and signature.

If the member of staff is in any doubt about any of the details, they should check with the child's parent or doctor before giving the medication.

Appendix 3

**Maadi British International School
Site Inspection Checklist**

SCHOOL SITE INSPECTED.....

INSPECTED BY.....

DATE

FIRE PRECAUTIONS		Y	N	N/A	COMMENTS / ACTIONS NEEDED
	FIRE ALARM CALL POINTS TESTED MONTHLY AND RECORDED?				
	TERMLY FIRE DRILLS CONDUCTED AND RECORDED?				
	FIRE ALARM AUDIBLE IN ALL AREAS?				
	EMERGENCY LIGHTING TESTED MONTHLY?				
	FIRE DOORS (INTERNAL AND FINAL EXIT) OPERATIONAL AND UNOBSTRUCTED?				
	EVACUATION NOTICES POSTED IN EACH CLASSROOM AND FIRE ACTION NOTICES ADJACENT TO CALL POINTS?				
	EMERGENCY EXITS / ROUTES CLEARLY SIGNED?				
	FIRE EXTINGUISHERS SUITABLE, IN PLACE AND TESTED ANNUALLY? (DATE WILL BE IDENTIFIED ON FIRE EXTINGUISHERS.)				
	ELECTRICITY CUPBOARD AREAS KEPT FREE OF COMBUSTIBLE MATERIALS?				

FIRST AID / MEDICATION		Y	N	N/A	COMMENTS / ACTIONS NEEDED
	FIRST AID BOXES IN APPROPRIATE PLACES AND MAINTAINED, NO UNAPPROVED CONTENT (MEDICINES ETC.)?				
	EYEWASH FACILITIES EASILY ACCESSIBLE AND KEPT STERILE?				
	MEDICINES (INCLUDING EPI-PENS ETC.) STORED APPROPRIATELY?				
	NAMES OF FIRST AIDERS DISPLAYED?				
	EMERGENCY NUMBERS DISPLAYED?				
HOUSEKEEPING & GENERAL ENVIRONMENT		Y	N	N/A	COMMENTS / ACTIONS NEEDED

	WORK AREAS & WALKWAYS FREE FROM RUBBISH AND OBSTRUCTIONS?				
	FLOORING IN GOOD CONDITION AND FREE OF SLIP / TRIP HAZARDS (EG NO RIPPED CARPETS, BROKEN TILES)?				
	TEACHING AND COMMUNAL AREAS CLEAN AND TIDY?				
	ITEMS STORED AT HEIGHT (EG FILES/FOLDERS ON SHELVES) ARE ACCESSIBLE, SECURE AND SAFE?				
	WALLS / WALL COVERINGS CLEAN AND IN GOOD CONDITION (EG PAINT NOT FLAKING, NO DAMP ETC)?				
	LIGHTING ADEQUATE?				
	DOOR MATS IN GOOD CONDITION (MAT WELLS PRESENT TRIP HAZARD)?				
	FURNITURE IN GOOD CONDITION?				
	AIR CONDITIONERS FUNCTIONING CORRECTLY?				
	WINDOWS OPENING ONTO EXTERNAL WALKWAYS / PLAY AREAS RESTRICTED / BARRIERS IN PLACE?				
	GLAZING FILMED / SAFETY GLAZING TO BS 6206 IN VULNERABLE AREAS?(E.G. PANES >250MM WIDE IN OR ADJACENT TO DOORS, PE AREAS ETC.)				
	NO SMOKING SIGNAGE IN PLACE AT ENTRANCES?				
	STORAGE SAFE AND SECURE, ACCESS RESTRICTED TO AUTHORISED PERSONS?				
	WASTE CONTAINERS ADEQUATE AND EMPTIED REGULARLY?				

ELECTRICAL / GAS		Y	N	N/A	COMMENTS / ACTIONS NEEDED
	EMERGENCY SHUT OFFS CLEARLY IDENTIFIED AND FUNCTIONING?				
	GAS SUPPLIES TESTED ANNUALLY BY REGISTERED ENGINEER?				
	PORTABLE APPLIANCES (ITEMS WITH A PLUG) TESTED ANNUALLY BY A QUALIFIED PERSON AND HAVE A STICKER TO IDENTIFY THEY HAVE BEEN TESTED?				
	PLUGS, SOCKETS, SWITCHES ETC IN GOOD CONDITION (NOT BROKEN, CRACK ED OR LOOSE ETC/) AND CHECKED PRE-USE BY STAFF?				
	LEADS AND CABLES ARE NOT STRAINED/CAUSING TRIP HAZARDS?				

THE USE OF EXTENSION LEADS IS KEPT TO A MINIMUM, NOT OVERLOADED AND NOT 'DAISY CHAINED'. (NOTE: ONLY DOUBLE INSULATED/FUSED EXTENSION LEADS SHOULD BE USED)				
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TOOLS / EQUIPMENT		Y	N	N/A	COMMENTS / ACTIONS NEEDED
ARE TOOLS & EQUIPMENT (INCLUDING LADDERS) STORED SECURELY & OUT OF REACH OF UNAUTHORISED PERSONS?					
LADDER REGISTER AND CHECKLIST IN PLACE AND REVIEWED TERMLY?					
OPERATING INSTRUCTIONS AVAILABLE AND DISPLAYED ADJACENT TO MACHINERY (WHERE APPROPRIATE)?					

HAZARDOUS SUBSTANCES		Y	N	N/A	COMMENTS / ACTIONS NEEDED
INVENTORY OF CHEMICALS AND MATERIAL SAFETY DATA SHEETS AVAILABLE?					
HAZARDOUS SUBSTANCES STORED IN A LOCKED ROOM / CUPBOARDS?					
ALL CONTAINERS CLEARLY MARKED WITH LABEL TO IDENTIFY THE CONTENTS?					
MAX OF 50L OF HIGHLY FLAMMABLE LIQUIDS TO BE STORED IN WORKROOM WITHIN METAL CABINET?					
BOTTLES > 1L STORED AT LOW LEVEL?					

WELFARE		Y	N	N/A	COMMENTS / ACTIONS NEEDED
CLEAN DRINKING WATER AVAILABLE AND LABELLED AS SUCH?					
SELDOMLY USED WATER OUTLETS IDENTIFIED AND FLUSHED WEEKLY?					
WATER TEMPERATURES ADEQUATE (MAX 43 DEG C IN AREAS WHERE VULNERABLE PUPILS MAY COME INTO CONTACT)?					
FINGERS GUARDS IN PLACE ON VULNERABLE DOORS I.E. TOILET & CLASSROOMS IN DOCTORRY, KS1 / SPECIAL SCHOOLS ?					
SUITABLE AREA FOR STAFF MEMBERS TO REST AND EAT? (CLEAN, WITH SEATING)					
SUFFICIENT TOILET FACILITIES?					
ADEQUATE WASHING FACILITES AVAILABLE? (INC SOAP, HOT WATER AND DRYING FACILITES)?					

GENERAL ENVIRONMENT		WORK			Y	N	N/A	COMMENTS / ACTIONS NEEDED
	HAVE THERE BEEN COMPLAINTS BY STAFF MEMBERS REGARDING LIGHTING, HEATING AND VENTILATION WITHIN THE SCHOOL?							
	ADEQUATE SPACE FOR SIZE OF CLASS AND ACTIVITIES CONDUCTED?							
	IS THERE SUFFICIENT EQUIPMENT TO ASSIST WITH MANUAL HANDLING TASKS? (EG TROLLEYS, SACK TRUCKS, HOISTS)							

OUTDOOR AREAS		Y	N	N/A	COMMENTS / ACTIONS NEEDED
	ARE PATHWAYS / WALKWAYS STABLE UNDERFOOT AND WITHOUT SIGNIFICANT TRIP HAZARDS? (EG NO POTHOLES, NO RAISED /SUNKEN SLABS)				
	PEDESTRIAN ROUTES CLEARLY DEFINED AND SEGREGATED FROM VEHICLES?				
	SCHOOL RECEPTION CLEARLY SIGNED?				
	ADEQUATE ACCESS FOR EMERGENCY SERVICES?				
	IS OUTDOOR PLAY EQUIPMENT ADEQUATELY MAINTAINED AND IN GOOD CONDITION?				
	EXTERNAL LIGHTING ADEQUATE?				
	GATES AND FENCING ADEQUATELY MAINTAINED?				
	FRAGILE ROOF SURFACES IDENTIFIED BY SIGNAGE ON SITE ?				
	ACCESS TO FRAGILE / LOW ROOFS RESTRICTED?				
	EXTERNAL STORAGE / WASTE BINS SECURED AND LOCATED AWAY FROM BUILDINGS?				

OTHER ITEMS		Y	N	N/A	COMMENTS / ACTIONS NEEDED
	CAR PARKING SIGNAGE IN PLACE/VISIBLE?				

Appendix 4

MBIS Playground Supervision Guidelines

All staff on break time duty are responsible for the health and safety of the children. **Proactive supervision is required.** Please note the following:

- Staff should arrive promptly and patrol their assigned area wearing a fluorescent band: *'See and be seen'*
- The teacher on duty is responsible for checking that all duty staff are present, and informing the Head of Primary or Head of Secondary if they are not.
- Duty staff should actively encourage children who are frequently isolated to interact with their peers.
- Duty staff should be aware of potential hazards in their assigned area (eg. climbing frames, toilets, painted grids) and should ensure children do not engage in harmful behaviours (eg. fighting games; picking up other children)
- In the case of a significant incident, a whistle blast should be used to stop activity in the playground.
- Children who are genuinely injured or unwell should be sent to the School Doctor.
- The bell should be rung promptly at the end of breaks.
- As soon as the bell is rung all children must line up in a quiet and orderly manner under staff supervision.
- **IMPORTANT....Duty staff are obliged to intervene upon witnessing or being informed of inappropriate behaviour.** Wherever possible, minor matters should be settled in the playground. Where appropriate, matters should be referred to Class Teachers/Tutors.
- **DUTY STAFF MUST BE VIGILANT AT ALL TIMES**

1. Emergency Action Plan

MINOR EMERGENCIES

Minor incidents or emergencies, if handled properly, will not result in a life threatening situation eg. a child slipping on poolside, a minor cut or bruise. To ensure an appropriate response, the adult in charge of the child at the time will:

- Notify other staff that they need to respond to an incident
- Other staff will move to cover the group or request additional assistance if necessary
- The first aider will administer aid
- The child will be moved to an appropriate location
- Accident/ incident report completed as necessary

MAJOR EMERGENCIES

A situation is deemed a major emergency if a child is in danger or sustains a serious injury. In a major emergency the following 3 principles apply:

- ▶ Sound the emergency whistle signal – to alert all staff/clear the pool
- ▶ Remove person in difficulty from further danger/provide first aid
- ▶ Ensure safety of class/pool users

Before each swimming session, the swimming teachers will know their roles within the team – Person A, B and C. The lifeguard is fully qualified in lifesaving and first aid.

Person A (Lifeguard) – prepare for basic life support or first aid

Person B (Teacher) – Clear the pool. Assemble students in an area away from the pool and supervise

Person C (Assistant) – Get assistance (eg, doctor, call ambulance)

2. Reporting incidents

All incidents must be reported to the Head of School using the appropriate forms. If the class teacher is requested to file a report, the school leadership team will assist.

3. Risk Assessment

Before each session, the teacher will make his/her own risk assessment taking into account the conditions of the day. Any potential hazards recognized by the adults and children should be reported immediately to the School Leadership Team. Each year, before the swim sessions commence in Term 1, a full risk assessment will be carried out by the School Leadership Team and the PE Department.

4. Medical Information

The class teacher is responsible for ensuring that any relevant medical

information regarding the children is known to the swimming teachers. Any such information should be included in the class swimming register.

5. Ratios

The team of 3 adults matched with MBIS class sizes affords an adult child ratio well within recommended numbers (ASA, UK)

6. Pool Information

- There is a lifeguard on duty at all times.
- There are two entries to the pool, all doors and windows will be kept locked.
- The pool is size 25m by 12m. The depth of the pool at the shallow end is 75cm; at the deep end is 1.8m. Signage indicating depths is clearly marked on the floor.
- The first aid box is located on the wall at the shallow end.
- The pool has 2 lifesaving rings and 2 rescue harnesses
- There are separate changing rooms for boys and girls outside the pool area.
- .
- The lifeguard checks the pool safety equipment/gates and look for potential hazards each day.
- A telephone is located in the pool area.

7. After School Activities

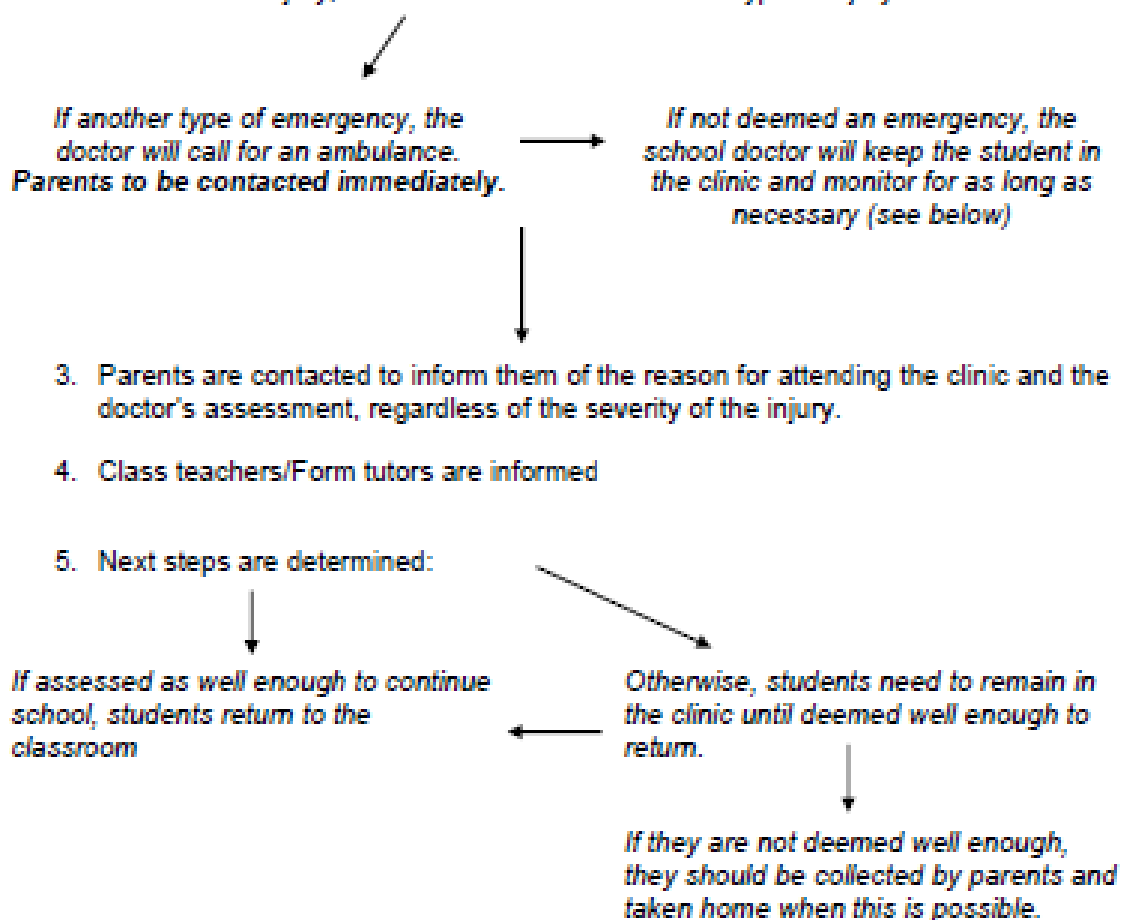
This guidance applies to the conduct of all After School Activities that make use of the pool area. ASA leaders / swimming staff are responsible for changing room supervision and the locking of the internal and external changing room doors as well as the main door to the pool area.

MBIS Clinic:Procedure

MBIS Clinic Procedure

If a student attends the clinic with an injury/sickness, the procedure is as follows:

1. School doctor to attend to the student who attends the clinic. If a head injury, please refer to the MBIS Head Injury Procedure.
2. If not a head injury, the school doctor assesses the type of injury and sickness.



Appendix 6

Maadi British International School – Managing Risk in the Curriculum

