

# TOM POUCE HEALTH AND SAFETY POLICY

10 September 2018

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## 1. General vision on safety and health

TOM POUCE feels that small risks are necessary for children to discover the world. All physical and social risks are identified with input from our teams and we periodically update this policy. We try to prevent major risks.

At the BSO, we offer children a safe environment. We do our utmost best to prevent risks that could cause great and serious injury. At the BSO we do encourage play that involves risks where we allow the children to challenge their own boundaries and we are on hand to help build their self-confidence. However, we do not take any unnecessary risks.

Health and Safety Policy are completely identical between TOM POUCE and the Lycée Français, in order not to confuse staff or children. A test exercise is carried out annually, with participation of staff and children.

## 2. Cyclical monitoring and updating

The inventory in August 2018 resulted in this policy. This risk inventory was conducted by the director. This policy is always subject of discussion in the team meeting (every 6 weeks). At least once a year the policy is evaluated and updated, based on a new inventory.

The current version of the health and safety protocol is available on the website for the parents. Parents can ask the director for information about the last evaluation.

If a (new) risk occurs in the meantime that must be directly dealt with, staff members report this immediately to the director. If there are made changes to the building, then we will reassess the risks and implement actions to deal with this. The staff members are responsible for this in practice, the director has ultimate responsibility.

## 3. First Aid

We take every measure at TOM POUCE to ensure that a child will not suffer an injury. Should a child suffer an injury, then all staff members have a BHV-certificate (BHV) with special attention to first aid for small children. So we can ensure that there is always someone on hand who can and may administer first aid.. The location is equipped with the required first aid kits and these are checked each quarter and replenished where necessary.

The security policy with actions to take in case of emergencies or injuries is posted in the staff room. Emergency numbers are recalled on each telephone to call outside.

#### 4. SAFETY - Major risks

<b>SAFETY Risk description</b>	<b>taken measures</b>
<b>Unauthorized persons in building</b>	<p>All the people coming to pick up children at TOM POUCE must be known, authorized persons, parents and professionals. The door is not be opened to unknown persons. It is necessary to verify the identity of those who come to the intercom. They must introduce themselves. It is only after having checked this verification that they can be authorized to enter by the professional who answers the intercom.</p> <p>Everybody must close the door behind them and do not keep it open to strangers. This instruction must be recalled to the parents orally and by mail. They should also be reminded that they must.</p>
<b>Choking/ Asphyxiation</b>	<p>Food must be eaten properly and not rushed. Together at the table under the direct supervision of the staff member. Large pieces should be cut up according to the age of the children.</p>
<b>Accidents from falling</b>	<p>Supervision by staff member is important to prevent children to seriously hurt themselves. Staff members correct the children if they act too risky. The College check regularly the state of the floor and the external structures. Children play inside in case of heavy rain.</p> <p>If the child is tired or too excited tell him to make a quiet game in order to prevent him from falling or fighting.</p>
<b>Poisonous substances</b>	<p>Cleaning products are out of reach of the children. There are no poisonous plants. Medicines and cigarettes are out of reach of the children.</p>
<b>Burn injuries</b>	<p>Children can only be in the kitchen under supervision. Staff members ensure that hot drinks (like tea) are out of reach of the children and are only drunk once cooled down.</p> <p>Matches or lighters are kept out of reach of children.</p> <p>When playing outdoors, children apply sun screen in the summer months a half an hour before going outside.</p> <p>Electric appliances are always operated under the supervision of an staff member.</p>
<b>Drowning</b>	<p>Only children who have a swimming diploma are allowed to participate in a swimming activity.</p>
<b>Traffic</b>	<p>Children can not open the front door themselves.</p> <p>Parents/education staff members ensure that they do not let any children go outside unattended.</p>
<b>Missing child</b>	<p>Using a pick-up list we collect the children at the school. If a parent has not called regarding a child's non-attendance and the teacher confirms the child was at school during the day, the parent is called.</p> <p>During the afternoon the staff member regularly does a head-count.</p> <p>If a child is picked up by the parent, this is marked on the pick-up list.</p>

## 5. HEALTH - Major risks

<b>HEALTH Risk description</b>	<b>taken measures</b>
<b>wrong medication</b>	<p>Only give medication if the director gives permission that TOM POUCE can handle the responsibility of giving the medication. When giving medication, always use the medication form with a signature of the parent.</p> <p>Use only medication in the original packaging containing the name of the child.</p> <p>Never use medication for the first time at TOM POUCE, make sure the child already started it at home.</p>
<b>no attention for allergies</b>	<p>Record allergies in the child's dossier.</p> <p>A list hangs at the kitchen with the special needs per child. This list is updated when children leave and new children arrive. If something changes, change or add to the list and inform colleagues and director.</p>
<b>no clean/fresh air</b>	<p>Make sure the rooms are ventilated.</p> <p>Monitor temperature and humidity of areas.</p>
<b>infectious diseases</b>	<p>Inform parents about any illnesses etc. via e-mail and include any recommendations from the National Institute of Public Health and Environmental Protection (RIVM).</p> <p>Take measures to avert further infection.</p>
<b>Insect bites</b>	<p>Pay attention to the child if he eats or drinks something sweet.</p> <p>Avoid flower plants near playgrounds.</p> <p>Be alert during gardening sessions.</p>

## 6. Unacceptable behaviour of staff members and children

<b>Unacceptable behaviour Risk description</b>	<b>taken measures</b>
<b>Unacceptable behaviour among the children</b>	<p>Mention behaviour (e.g. bullying) and explain why this is not tolerated.</p> <p>We teach the children to respect each other. We learn them norms and values.</p> <p>We encourage children to say it when they do not want to do something (make them more outspoken).</p>
<b>Unacceptable behaviour staff members towards children</b>	<p>Continuous screening is done through PRK.</p> <p>We stimulate regular feedback to each other and encourage open and frank discussions. We discuss this issue in team meetings regularly.</p> <p>Staff members are never alone with the children, there is always a colleague in the area.</p> <p>If unacceptable behaviour is signalled by a colleague or parent, this must be reported to the director. The director will discuss this with the staff member involved and makes an agreement to correct this.</p> <p>If correction is not possible further steps are discussed with the proviseur of the Lycée.</p>
<b>Child abuse &amp; domestic violence</b>	<p>When there is suspicion of child abuse or domestic violence staff members must inform the director. They will use the Protocol 'Reportingcode domestic violence and child abuse'.</p>

## 7. Minor risks

We want to provide children with the safest possible environment, but we also want to teach the children how to deal with minor risks. A bump, scratch, a cut or something similar can always happen. Children will even learn from these incidents. Therefore, we accept the minor risks and we teach the children to follow certain rules to deal with them. On the start of each year we sit with the children to create the list of rules for that year. By putting together the list together, it is a good learning experience for the children.

Staff members setting a good example also helps.

<b>MINOR RISKS</b>	<b>taken measures</b>
<b>Fingers between the door</b>	Doors should be opened and closed with care.
<b>Falling/bumping/splinters/cuts</b>	To prevent glass being broken, slipping and falling, children are not allowed to run, cycle or throw balls indoors. Children put his clothes on the coats doors and put the bags on the sides, so nobody trips. We don't run inside (except in de sporting area) We put the games away when we're done playing with. We only play with foam balloons inside. We don't leave the building or a room or go to the toilet without permission. Toys must be put away so that nobody trips on them. The floor isn't mopped/wet if children are playing in the area. Knives are only allowed on the tables if an educational staff member is at the table. As soon as you walk away from the table, knives must be put in a safe place.
<b>Contamination risk</b>	Hands must be washed before: preparing food, eating, visiting the toilet. Staff members check regularly if there is enough handsoap in the toilet and that children use it. Toys are washed before or after each holiday. Coughing and sneezing should be done into the arm or in a tissue. Repeat and show again and again to the children. Also explain why it has to be done this way. Keep children's noses as clean as you possibly can. Use only paper tissues, no fabric type cloths.
<b>Bad food</b>	Check the date of food, before using it. Use clean instruments/tools to prepare food and a clean worktop. If the children's activity involves cooking, there is a strict hygiene policy in place which also teaches children that a "clean" kitchen also means healthy food.
<b>Illnesses within the group</b>	Inform parents about any illnesses etc. doing the rounds via email/message on the Facebook community page and include any recommendations from the National Institute of Public Health and Environmental Protection (RIVM). Take measures to avert further infection.

## 8. How to handle cases of emergencies

### Overview

- Evaluate the situation quickly. Avoid an accident (protect children & protect themselves)
- Know how to give the alert: call a second person

⇒ make an alert to 112

Call a person from the BHV of the school or from the police

- Who: give his name, his function and tel coordinates
  - What: illness, accident (+/- associated risks: fire, ..)
  - Where: precise location (address and useful indications)
  - How to: give the age of the child, describe the signs ...
  - Answer questions, do not hang up before instructions.
- Reassure the child & warn parents

### 1. Big Trauma

- always inform parents
- single shocks or falls from a low height ⇒ bumps & hematomas (except open fracture and / or deformity): ⇒ to warn the parents (and note the evolution (binding book)).
- if a violent fall or shock (+/- open fracture and / or deformity) or if 1 disturbing sign: behavioral changes (sleep, comprehension, language, attitude), loss of consciousness \*, vomiting, big, soft lump ⇒ call 112

Children can have different reactions :

- if the child immediately cries and has a lump, apply ice protecting the skin with a cloth.
- if the child is crying but has no lump or lesion, apply ice all the same, protecting the skin with a cloth.
- even if the child does not seem to be affected by his fall, it is best to have him examined by a doctor. Especially since the severity of the consequences is not proportional to the height of the fall.
- some signals are to be taken very seriously:
  - excessive sleepiness;
  - difficulty waking up;
  - unusual agitation;
  - appearance of vomiting, at a distance from the fall;
  - repeated vomiting;
  - complaints, moans;
  - difficulty of vision, asymmetry of the pupils;
  - appearance of convulsions;
  - difficulties in speaking or language problems in a child who is already talking;
  - difficulty in mobilizing one of its members.
- If the child has any of these symptoms or unusual behavior, call 112
- If he remained unconscious, even a few seconds, such 112
- If the child is unconscious: put him in the side safety position and call 112
- If the child does not want or can not move, be very careful considering the risk of fracture: do not try to mobilize and talk to him calmly while waiting for help
- If the child has hit the jaw, one of his teeth may be affected.
- If the tooth is broken, pick up the piece and place it in a saline or milk bath. If the gum bleeds, apply ice with a cloth.

- If the child has cut, rinse the wound with soapy water or disinfect with a mild antiseptic. Compress it for 10 minutes with a clean compress or cloth to stop the bleeding. Avoid cotton.
- Cover the wound with a large dressing of sterile gauze and plaster.
- If the cut is deep, bleeds profusely or a fingernail is removed, take the child to the emergency room.
- Trauma to the spine (neck or back): do not handle.
- Head trauma: any violent shock on the head, even without loss of consciousness or associated sign, 6 o'clock surveillance

## 2. Wounds

- always inform parents
- use gloves or wash hands with soap or disinfectant
- clean the wound with water and hypoallergenic liquid soap
- disinfect with aqueous chlorhexidine \* (check the absence of contraindications)
- small wound: hypoallergenic dressing
- more important wound: cover with sterile compresses and compress if bleeding important, give warning
- Special wounds
  - Fingers: touch as little as possible, run the disinfectant over, wrap (sterile compresses), do not cut a flap of skin.
  - IF SECTION: NO DISINFECTION, wrap the fragment (compress then plastic bag placed on ice)
  - ⇒ tel at 112

## 3. Mouth or ear canal:

- small, simple wound, external: clean / compress + cold water + soap,
- if shock on the teeth (tooth of milk expelled or intruded) put the tooth in milk ⇒ see dentist.
- if penetration of object, shock on the cartilage of the ear, wound of language or internal ⇒ call 112

## 4. Eye & eyelids: significant risks

- cover with a sterile compress ⇒ tel at 112

## 5. Nosebleed

- use gloves.
- Blow your nose if possible.
- Sit the child leaning forward.
- Compress the nostril \* with a finger for 10 minutes. Position of the thinker
- Inform parents.
- If worry ⇒ tel at 112

## 6. Insect bites

- Bee: push the sting outwards, remove it without tightening
- To avoid breaking it with a splinter (or tweezers).
- Wasps and hornets do not lose their sting.
- Cool with an ice cube to calm the pain
- Monitor occurrence of an allergic reaction (PAI?)

- if 1 ominous sign: respiratory discomfort (hoarse cough, wheezing), malaise (until unconsciousness), sweating, swelling (edema) of the lips, eyelids, extremities, digestive signs (vomiting, abdominal pain, diarrhea) eruption
- Note the evolution on the liaison book
- Inform parents

#### 7. Allergic reaction

- Risk of angioedema or asthma attack.

Signs:

- breathing difficulty: hoarse or dry cough, whistling
- discomfort (until loss of consciousness)
- sweats
- swelling (edema) of the lips, eyes, extremities
- digestive signs (vomiting, abdominal pain, diarrhea)
- rash, itching.
- Tel 112, specify if known allergy and if there is PAI.
- If breathing difficulties: leave sitting.
- If you lose consciousness: lateral safety position \*.
- Inform parents.

#### 8. hyperthermia

- Temperature measurement:
- Confirmed fever  $\geq 38.5$  ° C.
- Isolate the child (rest and contagiousness).
- Discover the fogging child, fresh linen on the forehead, ...).
- Suggest to drink & renew regularly.
- Inform parents
- Note evolution, if worry  $\Rightarrow$  tel to parent

#### 9. Diarrhea

- $\geq 3$  loose stools (+/- fever +/- vomiting).
- Risk = deshydration.
- Isolate the child and take the temperature.
- Inform parents.
- Stop the milk and offer to drink every 5 minutes
- Note the evolution, if 1 ominous sign: vomiting,
- refusal to drink, greyish complexion, dark circles, marbled skin, persistence
- skin fold \*, agitation or apathy
- Emergencies tel 112

#### 10. Toxic absorption

- Do not induce vomiting.
- Do not drink.
- Tel 112
  - and give :
  - Age & Weight of the child
  - Product Name
  - Quantity absorbed
  - Time of absorption
  - Describe the signs ...

- Inform parents

#### 11. Burns

- Run cool water (15 ° C) 5 to 10 minutes, plus high than the burned area (let run along the segment).
- Apply Vaseline sterile & cover with sterile compress if minimal injury.
- If burn / corrosive product, significant lesion, extent, or critical areas: hands, eyes, genitals, mouth (absorption of burning liquid) ⇒ tel at 112.
- If burning under clothing: do not remove quickly and never remove if synthetic garment
- Inform parents.

#### **"CONFINEMENT"** (French Lycee safety Procedures):

The children are immediately grouped in their section supervised by the professionals who are in charge. They close the access of the establishment

=>) Keeping people away from windows and doors • Calm people and ask for silence • Reassure people for each sheltering room, what to do to barricade and protect themselves, and how to best protect them use furniture and fittings that are useful for these purposes: extinguish lights, arrange tables and cabinets, close curtains; • Maintain contact with the police to indicate the places of shelter • Wait for the instructions of the police to evacuate.

**When is this required?** In cases of terrorist action, national or regional weather Alerts.

**How to give Alert?** Alert is initiated by a staff member of Tom Pouce or the Lycee Français. There are 3 locations where Alerts can be started. The Alert is given via a loud siren, and verbally through loudspeakers.

EVACUATION: Implementation of the evacuation procedure provided for in the security protocol posted in the staff room.

=>) Follow the guidelines of rescue services and law enforcement when they are known • Take the least-exposed and closest exit • Request absolute silence • Choose a meeting point outside the facility in a safe area Report to rescue services and law enforcement the location of the assembly point =>) have identified the exact location of the hazard; the possibility, for the majority of the people present on the site, to escape without risk.

**When?** In case of a fire alert

**How and Where?** There are 8 different Fire Alert Start Points conveniently located near classrooms and high traffic areas. Pressing the button on any of these will start the fire evacuation alert (continuous siren).and supervised by the firemen from den Haag.

parents should not come to the scene or be clogged with telephone lines; the professionals are in contact with the authorities and the children are under their protection; information will be communicated to parents as soon as the situation allows;