

*DRAFT*

# **Guidelines for Health and Safety Standards in Early Years Programmes in the Independent Schools**

“Health is a state of complete physical, mental and social well-being, not merely the absence of disease or infirmity”  
(World Health Organization).

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The Supreme Education Council  
Education Institute  
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Early Years Un**

## **Table of Contents**

Page No.

Introduction

1. Child: Staff Ratios and Group Sizes
2. Staff Professional Development
3. Outdoor Space and Play Areas
4. Indoor Space and Learning Areas
5. Disease Prevention and Sanitation
6. Parent-School Communication
7. Transportation
8. Children with Special Needs
9. Emergency Plans and Procedures

### **APPENDICES**

Appendix A: References and supporting documents

Appendix B: Risk Assessment Form

Appendix C: Self-Assessment Checklist

Appendix D: Sample Integrated Teaching Units for Young Children

1. Traffic Safety
2. Fire Safety
3. Water Safety

Appendix E : Toxic Plant List

Appendix F : Excursion Procedure

Appendix G : Fire Evacuation

## **Introduction**

The Supreme Education Council regards the maintenance of health and safety standards for students in the Independent Schools to be a high priority. In order to prevent injury and the spread of illness and disease it is important that all teachers in Early Years classrooms have a sound knowledge of health and safety standards and that they demonstrate the skills necessary to promote developmentally appropriate learning experiences. Such standards are especially important for young children in the Early Years Programmes as they transition from home to school settings. Early Years Teachers must be supported by Administrators and School Leaders to establish and be accountable for policies and practices to ensure the health, safety and welfare of all children and staff in each Independent School. The purpose of this document is to provide a set of guidelines for Independent Schools Principals and Board of Trustees to establish safe and healthy indoor and outdoor learning environments for Early Years programs.

### **1.Child: Staff Ratios and Group Sizes**

Child: staff ratios and group sizes are two of the best indicators for determining the quality of an Early Years program. Ratios and group size significantly effect many other health and safety issues. For example, smaller group size is associated with a lower risk of infection among children in educational settings. Lower child: staff ratios reduce the transmission of disease because teachers are better able to monitor and promote healthy practices and behaviors.

Smaller group size improves the teaching behaviors of staff and the safety of children. Teachers and teacher assistants in small groups spend substantially more time interacting (praising, responding, comforting, questioning, and instructing) with children and are more actively involved with the children in their care .

Lower child: staff ratios are associated with fewer situations involving potential danger (such as children climbing on furniture). When Early Years Centers have insufficient staff, teachers are often burdened with the care of more children than they can manage, which increases their stress and makes it more likely that they will spend most of the day directing the children in large group, teacher –controlled activities, rather than child-focused, child-initiated learning opportunities.

Research has consistently shown that fewer students per teacher in the early grades can have a positive influence in many areas, including higher achievement and test scores, improved attendance, fewer discipline problems and greater engagement in school activities. In addition, smaller class size in the early grades will allow for increased teacher-child interaction, effective differentiation of curriculum and instruction and the promotion of children’s long-term development to ensure a productive future as a Qatari citizen.

**1.1 Recommended Child: Staff ratios and Group size for Early Years Educational Settings shall be maintained as follows during all hours of operation:**

Age	Child-staff ratio	Maximum group size
3 - 4 year olds	7:1	14
4- 5 year olds	10:1	20*
5 -6 year olds	12:1	22*
6 -7 year olds (Grade 1)	12:1	25**
7 -8 year olds (Grade 2)	15:1	25**

(When there are mixed age groups in the same room, the child: staff ratio and group size shall be consistent with the age of the majority of the children).

**\*Kindergarten:**

The recommended minimum indoor space standards that ensure academic achievement, health and safety for young children (age 3 to 6 years) in the Independent Schools is 2.5 square meters per child. The KG classrooms in the Independent Schools are approximately 55 sq. meters in size and therefore have adequate space for 22 children. This amount of space per child is necessary to implement the Early Years *Foundation Curriculum (2007)* which requires appropriate classroom space for learning centers and corners that are arranged to promote communication, exploration, creative expression and self-awareness. International standards recommend that class size for pre-school and KG not exceed 16 children in a group. It is recommended that Independent Schools consider reducing the number of children in KG classrooms to 16-18 by 2010.

**\*\*Grades One and Two**

The current recommended class size for primary grades is 25 children, with a strong recommendation to consider reducing the number of students in Grade One and Two classrooms to 20-22 (by 2010).

## **2. Staff Professional Development**

Teachers of young children need to be knowledgeable in all areas of safety, including fire safety, traffic safety, water safety, poison safety and personal safety. Early years programme staff are responsible for regularly checking the indoor and outdoor space for health and safety hazards and they must be able to teach children safe behaviors, including what to do in an emergency.

### **2.1 First Aid**

All staff should receive training in pediatric first aid that includes rescue breathing and choking. Teachers and assistants are informed of first-aid arrangements: location of equipment and supplies, facilities and first-aid personnel, and emergency procedures.

### **2.2 Risk Assessment**

Risk assessment is a careful examination of the hazards in a setting and an assessment of whether there are particular hazards that are likely to harm anyone. Risk assessments are followed with recommendations for what precautions should be taken to reduce the possibility of harm to individuals or property. All staff should be trained in risk assessment and the identification of potential hazards for young children. (See APPENDIX B for a sample risk assessment form)

### **2.3 Reporting Procedures**

All staff must be informed of school health and safety rules, policies and procedures, including reporting and documentation procedures for accidents, potential hazards, children's illness or health concerns, and suspected child abuse and/or neglect.

### **2.4 Child Health**

All staff should receive training in the recognition of infectious and non-infectious diseases e.g. asthma and the symptoms associated with allergic reactions common among young children e.g. food allergies such as peanut butter, seafood, milk products. Teachers should be vigilant about children's health status and respond quickly if symptoms of illness or disease are suspected.

### **2.5 Emergency Plans**

All staff and children should be trained on emergency procedures, including fire evacuation drills. See Appendix D for sample.

## **3. Outdoor Spaces and Play Areas**

Outdoor spaces for young children are an important component of high quality Early Years programmes and should be designed and maintained so that children have daily opportunities to explore, play and develop large motor skills in a safe environment. If outdoor play is not advisable on certain days due to weather conditions, then alternative arrangements must be made available to provide children with opportunities for gross motor (physically active) play.

### **3.1 Age Appropriate Playgrounds**

Preschool and school-age children differ dramatically not only in physical size and ability, but also in their cognitive and social skills. Therefore age-appropriate playground designs should accommodate these differences with regard to type, scale and the layout of the equipment. It is recommended that playground areas be designed and installed by professionals who adhere to high standards of safety. Playground areas should be kept free from small parts that may become detached during normal use or reasonably foreseeable abuse of the equipment and that present a choking, aspiration or ingestion hazard to a child.

The following is a brief recommended list of equipment designed **for age 3-5 year old children:**

Rung ladders, stepladders, stairways and ramps

Handrails (low and easy to grab)

Guardrails and protective barriers

Stepped platforms

Climbers – walking boards, balance beams

Horizontal ladders

Single –axis swings – include safety zone

Slides- single, double, curved

Tracks for tricycles, wagons etc.

The following is a brief list of playground equipment recommended for older **children age 6-12 years:**

Chain or cable walks

Free standing arch climbers

Free standing climbing events with flexible components

Fulcrum seesaws

Log rolls

Long spiral slides ( more than one turn-360°)

Overhead rings

Parallel bars

Track rides

Swings

For more information see website:

### **3.2 Injury Prevention/Safety Rules**

Outdoor space should be easily accessible and available for all young children, including those with physical or other disabilities. Safety rules should be posted and explained by teachers. Staff should conduct risk assessments regularly to ensure maintenance and safety of outdoor play areas. Anchored play equipment should not be placed over or immediately adjacent to hard surfaces. Studies have shown that the primary equipment related injury on playgrounds results from falls from equipment. A fall onto a shock absorbing surface is less likely to cause a serious injury than a fall onto a hard surface. The shock absorbency of the selected surfacing material needs to be calculated and adjusted by the playground design team to meet the age and developmental needs of the children. Resilient surfaces should extend at least 4 feet beyond the fall zone of the equipment.

### **3.3 Play Equipment**

Equipment should be sturdy and free of sharp points or corners, splinters, protruding nails or bolts, loose rusty parts, hazardous small parts, or paint that contains lead or other poisonous materials. All play equipment should be constructed and installed in such a manner as to be safe for use by children ( e.g. height should not be excessive; handrails should match the developmental levels and the equipment should not be a source of potential entrapment). There should be no pinch, crush, or shear points on or underneath equipment that would be accessible by children.

Outdoor play equipment should not be coated or treated with toxic materials.

### **3.4 Environmental Considerations/Hazards**

Outdoor activity space is enclosed by structures and/or fences and gates that are maintained so that children cannot leave without an adult's help. All areas for play are well-drained and suitably surfaced with impact-absorbing materials to reduce risk of injury. All pieces of playground equipment should be surrounded by a resilient, non-combustible surface. Hard surfacing materials, such as asphalt or concrete, are

unsuitable for use under and around playground equipment unless they are required as a base for shock absorbing material such as rubber mats. Earth surfaces such as soils or hard packed dirt are not recommended because they have poor shock absorbing properties. Similarly grass and turf are not recommended because wear and environmental conditions can reduce their effectiveness in absorbing shock during a fall.

Other hazards include impact by swings and other moving equipment and collisions with stationary equipment or support structures that are not wrapped in impact absorbing material. **Fatal injuries** reported most commonly on playgrounds include falls, entanglement of clothing in ropes tied or caught on equipment, head entrapment in openings, impact from equipment tip over or structural failure and impact by moving swings.

### **3.5 Shade and Coverings for Outdoor Play Areas**

Outdoor play areas should offer sufficient shade (natural landscaping, trees and/or tented structures) covering at least 50% of the play area so that children can spend time outdoors without being in the direct sunlight for extended periods.

Children should be encouraged to wear a hat when playing in un-shaded areas.

### **3.6 Adult Supervision**

Indoor and outdoor playgrounds that meet basic health and safety standards may still present hazards to children in the absence of adequate supervision. Because all playgrounds present some challenge and because children can be expected to use equipment in unintended and unanticipated ways, adult supervision is recommended at all times. It is important to recognize that children aged 3-6 years will require more attentive supervision on playgrounds than older children.

### **3.7 Pest Control**

Outdoor play spaces should be kept free of animal wastes and sand box areas need to be covered when not in use. Pesticides should not be used on or near surfaces where children play.

### **3.8 Maintenance**

All outdoor activity areas should be maintained in a clean and safe condition by removing debris, dilapidated structures, broken or worn play equipment, building supplies, glass, sharp rocks, twigs, toxic plants, and other injurious materials. The area should be well-drained with no standing water.

See Appendix E –Toxic Plant list.

## **4. Indoor Spaces and Learning Areas**

### **4.1 Space Standards**

Internationally, the recommended minimum indoor space standards that ensure academic achievement, health and safety for young children (age 3 to 6 years) in the is 4 square meters per child. Some countries use standards that are more or less than

this amount. In the Independent schools the current accepted minimum space amount for primary children is 2.5 square meters per child.

#### **4.2 Windows and Doors**

All windows above ground level in areas used by children under 5 years of age should be constructed, adapted, or adjusted to limit the exit opening accessible to children to less than 6 inches, or to be otherwise protected with guards that do not block outdoor light.

Strings and cords ( e.g. those that can be found on window shades) that are long enough to encircle a child's neck ( 6 inches or more) should not be accessible to children.

No lock or fastening should be installed that prevents free escape from the interior of the building. All door hardware in areas used by school-age children should be within reach of the children.

Any glassed area accessible to children is safety glazed or effectively guarded by barriers which prevent a child from striking or falling against the glass.

#### **4.3 Stairs**

All stairs used by children on a daily basis should be equipped with age appropriate height handrails and non slip material.

#### **4.4 Electrical Fixtures and Outlets**

Electrical outlets accessible to children should be covered with child-resistant covers or be of the child-proof type.

#### **4.5 Heating, Ventilation and Cooling**

All rooms used by children should be heated, cooled and ventilated to maintain a comfortable temperature (19 degrees is recommended), humidity level and air exchange and to avoid the accumulation of objectionable odors and harmful fumes.

#### **4.6 Water Temperature**

The temperature of all warm water taps accessible to children is no higher than 40 degrees C.

#### **4.7 Pest Control**

Classroom and outdoor spaces should be kept free of animal wastes, insect, rodents, or other pest infestations, and shall not provide shelter to pests.

#### **4.8 Classroom Arrangement**

Classroom furniture needs to be arranged so as to provide unobstructed views for teachers at all times. Cubicles, storage cabinets and shelving needs to be stable and secured to the floor or wall to prevent danger from tipping over. Equipment such as

computers and televisions must be secured to carts or tables to prevent these items from falling on children.

#### **4.9 Indoor Playground**

Indoor floor covering should consist of vinyl or rubber coating which has some ability to cushion children from falls while running/ playing. Floor surfaces should be adequately slip resistant under all conditions of normal use and easily cleaned.

Climbing equipment must have shock absorbing mats or cushioning that extends at least 4 feet beyond the fall zone.

Concrete pillars or other central hard structures need to be covered with cushioning or impact resistant material.

#### **4.10 Equipment, Toys and Materials**

Toys or objects having a diameter of less than 1 and ¼ inch, objects with removable parts and a diameter less than 1 and ¼ inch, toys with sharp points and edges, plastic bags, and Styrofoam objects should not be accessible to children under 4 years of age. Young children should not be permitted to inflate balloons or to have access to deflated or under-inflated balloons.

Furniture, furnishings, fittings, equipment and materials are kept safe, hygienic and maintained in good condition. Positive steps are taken to prevent damage to people and property resulting from unsecured heavy furniture, fixtures and equipment falling.

#### **4.11 Cleaning of Equipment, Toys and Materials**

Indoor environmental surfaces associated with children's activities, such as table tops, should be cleaned and disinfected when they are soiled or at least daily. All frequently touched toys shall be cleaned daily and other toys and materials cleaned weekly.

#### **4.12 First Aid Supplies**

A readily available first aid kit should be maintained by each Early Years Program, one to be taken on field trips and outings away from the site. Each kit shall be a closed container for storing first aid supplies, accessible to staff and out of reach of children. Kits shall be restocked after each use and inventory should be conducted monthly. For a specific list of items to include in the kit see APPENDIX C Self – Assessment Checklist.

### **5. Disease Prevention and Sanitation**

#### **5.1 Hand washing**

**Wash hands often.** Most adults understand that the most important thing you can do to keep from getting sick is to wash your hands, but kids need to be taught this message and then have it frequently reinforced. People pick up germs from other

sources and then become infected when they touch their eyes, nose or mouth (or put infected toys and other items in their mouths as commonly occurs with youngsters). Germs are easily spread directly to others or onto surfaces that people touch, and more than a common cold can be caught through the spread of germs--some serious diseases such as hepatitis A, meningitis, and infectious diarrhea are easily spread.

Children should be reminded to wash their hands before, during and after food is prepared; before and after you eat; after using the bathroom; after handling animals or animal waste such as changing a cage or cat box; whenever hands are dirty or kids have been outside playing; and more frequently when anyone in the classroom, or home is sick.

### **5.2 Cover a cough.**

Children need to be taught how to do this to help prevent spread of germs. Inevitably, young children aren't near a tissue when the urge to cough or sneeze occurs, and spread (or literally spray) germs by unwittingly infecting others. Teachers should teach children to cough into the crook of their arm, into their sleeve, or even in their hand, and then to immediately wash their hands. Some teachers have turned "cover your cough" into a game or type of positive reinforcement when kids are caught covering their cough correctly.

### **5.3 Toilets**

Toilet rooms, flush toilets and toilet training equipment and fixtures should be cleaned and sanitized at least daily and when obviously soiled and shall be maintained in good repair.

Toilets and sinks for young children should be child-scaled and need to be separate from adult toilets , or from toilets used by security staff or visitors.

Toileting areas need to be distinctly separate from food preparation areas to diminish the chance of staff inadvertently going directly from toileting areas to food preparation areas without hand washing

It is recommended that the site provides one toilet, sink and drinking fountain for every 12 children. Separate boys and girls facilities should be available for Kindergarten children.

### **5.4 Food Preparation and Safety**

Children should not be allowed into food preparation areas without adult supervision. When food is prepared it is served at times and in variety, quantity and quality so as to meet the nutritional needs of the children. Food is prepared, served and stored hygienically. When food is provided by the parents, guidelines are offered that promote healthy eating habits.

Children are supervised while eating in order to minimize the risk of children choking.

An ample supply of potable drinking water is available to children at all times and older children are able to access this water independently.

### **5.5 Universal Precautions**

Staff shall adopt universal precautions and all spills of body fluids shall be cleaned and disinfected immediately.

## **6. Parent-School Communication**

### **6.1 Medical Records/Medications**

The child's medical history and general health status is to be documented in the school enrolment form. Any ongoing medication and procedures e.g for asthma, diabetes are to be provided to the school nurse and to be shared with appropriate classroom

### **6.2 Developmental Progress**

Early and ongoing communication with parents i.e. structured parent consultations are scheduled to discuss the child's growth and development, child guidance techniques, specific health issues and developmental concerns

### **6.3 Illness policies/Injury Log**

These are to be kept by the school nurse and shared with teachers where relevant.

### **6.4 Medical and Dental Emergencies**

Emergency contact numbers should always be available in the children's enrolment form. These numbers should be current. The school nurse is to contact emergency services in consultation with Senior management.

## **7. Transportation**

### **7.1 Vehicle and Traffic Safety rules**

If the school has school buses, children should be taught bus and traffic safety rules. See Appendix D – traffic Safety Teaching Unit

### **7.2 Field trips: policy and procedure**

Field Trips are an important part of the children's learning. They reinforce knowledge, give first hand experience and are interesting, exciting and fun experiences for young children. These trips should be planned appropriately in order to maintain safety. They should be relevant and age appropriate.

See Appendix F for sample policy and procedure.

## **8. Children with Special Needs**

### **8.1 Access**

The Early Years classrooms and outdoor areas will be accessible for all children, including children who use wheelchairs or have other disabilities. Accessibility

includes access to buildings, toilets, sinks, drinking fountains. All exits and steps should be unobstructed and have approved ramps for evacuation.

## **8.2 Hearing and Vision Screening**

If a child seems to tune things out, the problem might be with his hearing. Although there are classic symptoms of hearing loss, they often go unnoticed or are written off as slow development in young children. The truth is that hearing loss can be the cause of slow development. If left undetected it can lead to speech and language disorders, poor performance in school and delayed social skills.

## **8.3 Emergency Medical Procedures**

All children with special medical needs or conditions should have a written plan for emergency medical backup or medical procedures. The plan should describe the special emergency procedures that will be used by the teacher or assistant or by a physician or nurse.

## **9. Emergency Plans and Procedures**

Designated areas for evacuation purposes do not unnecessarily place children at further risk. Staff and children are familiar and comfortable with evacuation procedures and practice drills regularly.

## **APPENDICES**

### **APPENDIX A :References**

US Consumer Product Safety Commission <http://www.cpsc.gov>

US Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, *“Stepping Stones to Using Caring for our Children”*, National Health and Safety Performance Standards Guidelines for Out-of-Home Child Care Programs

### **APPENDIX B: Risk Assessment Form**

### **APPENDIX C: Self-Assessment Checklist**

### **APPENDIX D: Sample Teaching Units**

**Traffic Safety**

**Fire Safety**

**Water Safety**

### **APPENDIX E: Toxic Plant List**

### **APPENDIX F: Excursion Policy and Procedure**

### **APPENDIX G: Fire Evacuation Procedure**