The Apple International School

LEAMS Education Group

HEALTH, SAFETY & WELLBEING POLICY

Academic Year 2026–2027

Governance, Duty of Care, Safeguarding & Operational Safety Framework

Reference No.	AIS/HSP/02/2026-27
Version	4.0 – September 2026
Policy Owner	Executive Principal / MSO
Review Cycle	Annual and earlier where required
Classification	Confidential – Internal & Regulatory Use

REGULATORY POSITION

This policy is designed to support compliance with applicable UAE and Dubai education, child protection, occupational health and safety, fire and life safety, school health, transport, environmental health and data-protection requirements. Where an authority issues a more specific or updated requirement, that requirement takes precedence and this policy must be updated accordingly.

Reference No.	Version	Next Review
AIS/HSP/02/2026-27	3.0 — June 2026	June 2027

DOCUMENT CONTROL & APPROVAL

Role	Name	Signature	Date
Executive Principal	Dr. Jinto Sebastian		
MSO – Secondary	Mr. Allan Derick Okedi		
MSO – Primary	Mr. Jithu Vanaja Narayanan		
Health & Safety Officer	Ms. Summiya Zia		
Board / Group Representative	On behalf of LEAMS Education Group		

Regulatory and Governance Alignment

- Knowledge and Human Development Authority (KHDA) requirements and quality-assurance expectations applicable to Dubai private schools.
- Federal Law No. 3 of 2016 on Child Rights (Wadeema) and its Executive Regulation, together with applicable UAE child-protection requirements.
- Federal Decree-Law No. 33 of 2021 on the Regulation of Employment Relationships, as amended, and applicable occupational health and safety requirements.
- Dubai Civil Defence / UAE Fire and Life Safety requirements applicable to the premises.
- Dubai Health Authority school-health and clinic requirements applicable to the school.
- Dubai Municipality requirements relevant to food safety, environmental health, water quality, waste and pest control.
- Roads and Transport Authority and other applicable school-transport requirements.
- UAE personal-data protection requirements and lawful access controls for confidential information and CCTV.
- ISO 45001:2018 may be used as a management-system benchmark; it is not represented in this policy as a statutory school requirement unless separately mandated.

Compliance note: This policy deliberately avoids presenting school-selected KPIs, internal service levels or risk controls as statutory KHDA requirements unless the school holds a current authoritative source confirming that status.

1. PURPOSE, PRINCIPLES & SCOPE

The purpose of this policy is to establish a clear governance framework through which AIS protects students, staff, visitors and contractors; discharges its duty of care; prevents foreseeable harm; responds effectively to incidents; and continuously improves health, safety and wellbeing.

- Safety, safeguarding and wellbeing are leadership responsibilities and are integral to school improvement.
- Risk must be identified, assessed, controlled, recorded and reviewed proportionately.
- No operational target, timetable or convenience takes precedence over student safety.
- Students must receive age-appropriate supervision, with enhanced controls for Foundation Stage, younger pupils, Students of Determination and other individuals requiring additional support.
- All concerns, hazards, near misses and incidents must be reported promptly and acted upon.
- Confidentiality is maintained on a need-to-know basis, subject to safeguarding and legal reporting duties.

Scope: This policy applies to all AIS campuses and school-controlled activities, all students, employees, visitors, volunteers, contractors, transport providers and school-organised off-site activities. Campus-specific arrangements, emergency plans and risk assessments sit beneath this policy.

2. GOVERNANCE & ACCOUNTABILITY

2.1 Board / Governing Body

- Approve the policy and maintain strategic oversight of significant health, safety, safeguarding and wellbeing risks.
- Receive periodic assurance reports covering incidents, high-risk findings, statutory/compliance status, overdue corrective actions, emergency preparedness and material trends.
- Ensure appropriate resources and competent leadership are available.
- Challenge leaders where controls are ineffective, repeated incidents occur or actions remain overdue.
- Require evidence of closure and impact, not activity alone.

2.2 Executive Principal

- Holds executive accountability for implementation of this policy at school level.
- Ensures responsibilities are delegated clearly without transferring ultimate accountability.
- Ensures serious or reportable matters are escalated to the appropriate authority in accordance with current requirements.
- Approves emergency and critical-incident arrangements and ensures leadership readiness.
- Ensures student supervision, safeguarding and safe handover arrangements are implemented consistently.

2.3 Manager School Operations (MSO)

- Leads operational health and safety compliance, facilities risk management and contractor controls.
- Maintains the compliance tracker for licences, certificates, inspections and corrective actions.
- Ensures significant facilities risks are isolated or controlled pending rectification.
- Coordinates with the H&S Officer, security, transport, facilities, clinic and school leadership.
- Reports significant risks, non-conformities and overdue actions to the Executive Principal.

2.4 Health & Safety Officer

- Coordinates routine inspections, risk registers, incident records, training records and follow-up actions.
- Supports risk assessment and emergency preparedness and verifies that identified controls are implemented.
- Escalates high-risk findings immediately and tracks corrective actions to closure.
- Provides trend analysis to leadership and the H&S Committee.

2.5 SLT, Heads and Duty Leaders

- Ensure safe supervision and operational controls within their areas.
- Arrange replacement coverage where a duty holder is absent or delayed.
- Act promptly on concerns and ensure staff understand relevant procedures.
- Monitor implementation through walkthroughs, duty checks and follow-up.

2.6 All Staff

- Take reasonable care for their own safety and that of others.
- Maintain active supervision appropriate to role, age, activity and risk.
- Report hazards, near misses, incidents, safeguarding concerns and unsafe conditions promptly.
- Do not undertake technical, clinical or specialist tasks unless trained, competent and authorised.
- Follow emergency instructions and cooperate with investigations and improvement actions.

3. RISK ASSESSMENT & CONTROL

AIS uses a documented, proportionate risk-assessment process. Risk assessments are working controls, not compliance paperwork.

1. Identify the hazard and the people who may be harmed.
2. Assess likelihood and potential severity using the school-approved risk matrix.
3. Select controls using the hierarchy of controls, prioritising elimination and engineering controls where reasonably practicable.
4. Record responsible persons and target dates for actions.
5. Communicate controls to affected people.
6. Review after incidents, material changes, new information, or at the scheduled review point.

- High or critical residual risks must be escalated to the MSO and Executive Principal and the activity/area restricted where necessary.
- Risk assessments are required for significant curriculum activities, premises, events, trips, transport, contractors, maintenance, laboratories, PE/sports, swimming and other higher-risk activities.
- Students of Determination and persons requiring additional assistance must have individual safety/evacuation arrangements where needed.

4. SUPERVISION, DUTY OF CARE, ARRIVAL & DISPERSAL

Supervision is a safeguarding and duty-of-care control. Deployment must be risk-based and appropriate to student age, vulnerability, environment, activity, movement and foreseeable hazards.

- Published duty rosters identify locations, times, responsible staff and a Duty Lead.
- Duty staff report before the duty period begins and remain until relieved or the duty is complete.
- No student-facing duty point may be left unattended. Absence or late arrival must be escalated immediately and replacement coverage arranged.
- Foundation Stage and younger students are subject to controlled handover arrangements.
- Students are released only through the school's authorised collection or approved transport arrangements.
- Late or uncollected students remain under continuous supervision and are managed through the approved escalation procedure.
- Bus handover is staff-to-staff and discrepancies are resolved before departure.
- Shared spaces, toilets and changing areas are supervised in a way that protects safety, dignity and privacy.

- After-school activities remain under the organising staff member's responsibility until safe handover is complete.
- Changes to normal dispersal arrangements require appropriate verification and authorisation.

Evidence: arrival/dispersal duty rosters, authorised-handover registers, late/uncollected student records, transport handover records, exception logs and leadership duty checks.

5. SAFEGUARDING & CHILD PROTECTION

This section provides the health-and-safety interface with safeguarding. The detailed Child Safeguarding and Protection Policy remains the controlling procedure for child-protection concerns.

- All staff must act on concerns about abuse, neglect, exploitation, unsafe conduct or other risk of harm and follow the school's safeguarding reporting procedure without delay.
- Safeguarding information is recorded factually and stored securely with access restricted to authorised personnel.
- Staff must not conduct their own investigation beyond immediate fact gathering necessary to protect a child and make a report.
- Safer recruitment, staff conduct, visitor management, contractor access and supervision arrangements must support child protection.
- Corporal punishment, degrading treatment and any conduct that compromises student safety or dignity are prohibited.
- Safeguarding training is provided at induction and refreshed in accordance with the school's approved training matrix and current authority requirements.
- Where external reporting is required, the DSL/Principal follows the current UAE/Dubai child-protection reporting route and records the action taken.

6. EMERGENCY PREPAREDNESS, FIRE & EVACUATION

- A campus-specific Emergency Response Plan and fire/evacuation procedure must be current, accessible and consistent with applicable Civil Defence requirements.
- Emergency routes, exits, assembly points, alarms, emergency lighting and fire-fighting systems are maintained and inspected at required intervals.
- Staff and students participate in drills at a frequency determined by applicable requirements and the school's risk assessment; outcomes are documented and reviewed.
- Drill performance targets are internal improvement measures unless an authority specifies otherwise.
- Roll calls and missing-person escalation arrangements must be clear.
- Personal Emergency Evacuation Plans (PEEPs) are prepared where an individual requires additional assistance.
- No re-entry occurs until authorised by the designated emergency lead / competent authority.
- Emergency contact details and campus-specific assembly points must be completed in the Emergency Response Plan and verified at least termly.

7. MEDICAL, FIRST AID & STUDENT HEALTH

- The school clinic operates in accordance with applicable DHA licensing and school-health requirements.
- First-aid provision is determined by current regulatory requirements and a documented needs/risk assessment; the policy does not state an unverified universal 1:50 ratio.
- Only appropriately trained/authorised personnel provide first aid or clinical treatment within their competence.
- Prescription medication is administered and recorded in accordance with the school's clinic/medication procedure and applicable DHA requirements.
- Student medical information, allergies, chronic conditions and Individual Health Plans are maintained confidentially and shared only with personnel who need the information to keep the student safe.
- AED and first-aid equipment locations, quantities and inspection frequencies are maintained in the campus equipment register rather than left as placeholders in this policy.
- Medical emergencies are escalated immediately to the clinic/emergency services and parents/guardians as appropriate.

8. INCIDENT, ACCIDENT & NEAR-MISS MANAGEMENT

All accidents, incidents, near misses, dangerous conditions and occupational-health concerns must be recorded promptly in the school's approved system.

- Immediate priorities are to protect life, provide first aid/emergency response, secure the area and prevent further harm.
- Serious incidents are escalated immediately to the Executive Principal and MSO.
- External notification to KHDA, DHA, Police, Civil Defence, MOHRE or another authority is made where required by the current applicable reporting rule. The school must not rely on a generic '24-hour KHDA' rule unless the relevant requirement has been confirmed for the incident type.

- Investigations are proportionate to severity and seek root causes, contributing factors and systemic improvements rather than individual blame.
- Corrective actions have an owner, deadline and evidence of closure.
- Incident trends are reviewed regularly by leadership and the H&S Committee and trigger risk-assessment review where appropriate.

Terminology note: The UK RIDDOR framework is not used as a UAE statutory reporting basis. Where retained for internal benchmarking, it must be clearly identified as non-statutory; this revised policy therefore uses 'Incident Reporting and Investigation'.

9. MENTAL HEALTH & WELLBEING

- Student wellbeing is promoted through a whole-school, preventative and responsive approach aligned with the school's Wellbeing, Safeguarding, Inclusion and Anti-Bullying arrangements.
- Qualified counselling/pastoral personnel provide support within their professional scope and maintain confidential records.
- Wellbeing concerns are triaged, referred and followed up, with safeguarding escalation where risk of harm is identified.
- Wellbeing data, student/parent voice and school evidence are used to identify priorities and evaluate impact.
- Staff wellbeing is monitored through appropriate organisational mechanisms, while maintaining confidentiality.
- Individual counselling records are separate from general daily operational logs; general logs use case references rather than unnecessary sensitive details.

10. INCLUSION & STUDENTS OF DETERMINATION

- Health and safety arrangements are inclusive and do not create unnecessary barriers to participation.
- IEPs, IHPs, risk assessments and PEEPs incorporate relevant safety and emergency needs.
- Reasonable adjustments and accessible evacuation arrangements are planned in collaboration with relevant staff, families and professionals.
- Relevant safety information is communicated on a need-to-know basis to staff, clinic and transport teams.

11. SCHOOL TRANSPORT & TRAFFIC MANAGEMENT

- School transport providers, vehicles, drivers and attendants must meet applicable RTA/MOE/KHDA and contractual requirements.
- Pre/post journey checks, student counts, safe boarding/alighting, attendance/route records and end-of-route checks are maintained.
- Students are handed over only through approved transport and collection arrangements.
- Transport incidents and discrepancies are reported immediately and investigated.
- A current Traffic Management Plan addresses vehicle/pedestrian segregation, bus bays, emergency access, speed controls and arrival/dispersal risks.
- Specific fleet numbers, provider names and staffing numbers are maintained in operational records and contracts rather than hard-coded into this governance policy unless needed.

12. PLAYGROUND, PE, SPORTS & SWIMMING

- Facilities and activities are risk assessed and inspected before use as appropriate.
- Supervision levels are determined by age, competence, activity, environment, medical needs and current applicable guidance; unverified fixed KHDA ratios are not stated.
- Unsafe equipment/areas are taken out of use and reported.
- Heat, hydration and adverse-weather controls follow current UAE/Dubai authority guidance.
- Swimming operates under a separate Normal/Safe Operating Procedure with qualified supervision, rescue equipment, water-quality controls and emergency arrangements.
- Medical restrictions and individual needs are communicated appropriately.

13. EDUCATIONAL VISITS & OFF-SITE ACTIVITIES

- Visits require approval through the school's Educational Visits procedure and any external approval required for the specific activity.
- A trip-specific risk assessment, emergency plan, medical information arrangements and parental consent are completed where applicable.
- Supervision ratios are set by risk assessment and applicable current requirements; the policy does not represent fixed 1:12 or 1:15 ratios as universal KHDA requirements.

- Transport, venue, activity-provider competence and safeguarding arrangements are checked before approval.
- Incidents are reported promptly and a post-visit review informs future planning.

14. FACILITIES, MAINTENANCE & CONTRACTORS

- Critical systems are maintained through a documented Planned Preventive Maintenance programme aligned with manufacturer, competent-authority and statutory requirements.
- Only competent and authorised persons undertake electrical, mechanical, fire-system, lift, pool, HVAC and other specialist work.
- Contractors are approved, inducted and supervised; RAMS and permits to work are required for higher-risk work as appropriate.
- Contractor work is segregated from students and, where possible, scheduled outside high-occupancy periods.
- Restricted areas, plant rooms and work sites are secured against unauthorised access.
- Specific contractor names and frequencies are maintained in the PPM/compliance schedule so the policy does not become inaccurate when contracts change.

15. LABORATORY, DT, CHEMICAL & ELECTRICAL SAFETY

- Specialist areas operate under area-specific procedures, risk assessments and competent supervision.
- Chemical inventories, SDS information, storage, labelling and disposal arrangements are maintained in accordance with applicable UAE/Dubai requirements.
- PPE is selected by risk assessment and used as required.
- Students receive safety instruction before practical activities.
- Only competent and authorised persons undertake work on fixed electrical installations; defective equipment is isolated and removed from use.
- Any internal student-to-staff limit is identified as a school risk control, not a KHDA statutory ratio unless independently verified.

16. FOOD SAFETY, ALLERGIES, WATER, WASTE & PEST CONTROL

- Catering and food handling comply with current Dubai Municipality requirements and the school's food-safety system.
- Allergen controls, individual health plans and emergency medication arrangements are coordinated with the clinic and relevant staff.
- Water quality, tanks, dispensers and pool systems are inspected/tested in accordance with current competent-authority requirements and risk assessments.
- Clinical, hazardous, food and general waste are segregated and disposed of through approved arrangements.
- Pest control is undertaken by an appropriately licensed provider, with treatment records and safe re-entry controls maintained.
- Technical temperature/frequency requirements are maintained in current operational SOPs where they can be updated without reissuing the full policy.

17. SECURITY, CCTV, ACCESS CONTROL & VISITORS

- Access to campus and student areas is controlled through security, reception and visitor-management arrangements.
- Visitors and contractors sign in, are identifiable while on campus and are escorted/restricted according to risk and purpose.
- CCTV is operated for legitimate security/safeguarding purposes in accordance with applicable UAE data-protection and competent-authority requirements.
- CCTV retention periods and access permissions are defined in the school's CCTV/Data Protection procedure and verified against current requirements; this policy does not state an unverified universal 30-day minimum.
- Security incidents, suspicious activity and access-control failures are escalated immediately.
- Security coverage, patrols and overnight arrangements are documented in the site security plan.

18. DIGITAL SAFETY & DATA PROTECTION

- Digital safeguarding is governed through the school's Acceptable Use, Cyber Safety, BYOD, Social Media and Data Protection arrangements.
- Filtering and monitoring controls are age-appropriate, proportionate and reviewed.
- Cyberbullying, harmful content, online exploitation and privacy concerns are treated as safeguarding matters where relevant.
- Personal, medical, safeguarding and dispersal information is limited to what is necessary, access-controlled and stored securely.

- Staff must not use personal devices/accounts to store or transmit confidential student information except where expressly authorised by school procedure.

19. STAFF TRAINING, INDUCTION & COMPETENCE

Training requirements are maintained in a role-based training matrix. Frequencies reflect current legal/regulatory requirements, risk assessment, competence needs and school standards.

- All new staff receive health, safety, safeguarding and emergency induction before unsupervised duty.
- Role-specific training is provided for first aid, fire/emergency roles, safeguarding, laboratories/chemicals, food safety, manual handling, transport, maintenance, swimming and other specialist duties as applicable.
- Training completion, expiry and refresher requirements are tracked.
- Competence is verified through observation, drills, supervision, certification where required and follow-up—not attendance records alone.
- Support staff and contractors receive instructions in a language and format they can understand.

20. MONITORING, ASSURANCE & CONTINUOUS IMPROVEMENT

Leadership will use a balanced assurance framework. Targets below are school governance measures and are not represented as statutory KHDA thresholds unless separately confirmed.

Assurance Area	Evidence	Governance Expectation
Risk management	Risk register, reviews, high-risk actions	No unmanaged high/critical risk; overdue actions escalated
Incidents	Incident/near-miss trends, RCA, corrective actions	Timely reporting, learning and verified closure
Supervision	Duty rosters, handover registers, duty checks	No known supervision gaps; exceptions recorded and addressed
Emergency readiness	Drills, debriefs, ERP checks	Actions closed and readiness improved
Training	Training matrix and competence checks	Required training current for role
Compliance	Licences, certificates, inspections	No avoidable lapse; renewals tracked in advance
Wellbeing & safeguarding	Trend data, referrals, follow-up, student voice	Concerns acted on; impact and follow-up evidenced

- The H&S Committee meets at least termly or more frequently where risk requires.
- Leadership receives periodic dashboards with trends, material risks, overdue actions and assurance evidence.
- The Board/Governing Body receives strategic assurance and challenges unresolved or repeated concerns.
- Policy effectiveness is evaluated through evidence of reduced risk, improved practice and completed corrective actions.

21. RECORDS, CONFIDENTIALITY & RETENTION

- Records are accurate, dated, attributable and stored in approved systems.
- Sensitive medical and safeguarding records are separated from general operational logs.
- Retention periods follow applicable legal/regulatory requirements and the school's approved retention schedule; a blanket seven-year rule is not applied to every record type without verification.
- Access is role-based and records are disclosed externally only where lawful and authorised.

22. LINKED POLICIES & CONTROLLED PROCEDURES

- Child Safeguarding and Protection Policy
- Student Wellbeing / Mental Health Policy
- Anti-Bullying Policy
- Inclusive Education Policy
- School Clinic and Medication Procedures
- Emergency Response Plan and Fire/Evacuation Procedure
- Arrival, Dispersal and Authorised Handover Procedure
- Transport Safety and Traffic Management Plan
- Educational Visits Policy
- Laboratory / DT / Swimming / PE Safety Procedures
- Contractor Management and Permit-to-Work Procedure
- CCTV / Security / Access Control Procedure
- Data Protection, Acceptable Use, BYOD, Cyber Safety and Social Media Policies
- Safer Recruitment and Staff Code of Conduct
- Incident Reporting and Investigation Procedure
- Risk Assessment Procedure

23. POLICY REVIEW & VERSION CONTROL

- This policy is reviewed at least annually by the Executive Principal, MSO and H&S Officer with input from relevant leaders and the H&S Committee.
- Earlier review is required following a serious incident, material premises/operational change, significant audit finding, or relevant change in law/regulation/guidance.
- Changes are recorded in the version-control log and approved through the school's governance process.
- Superseded versions are archived in accordance with the school's document-retention schedule.

Version	Date	Key Change	Approved By
3.0	June 2026	Previous policy	Executive Principal
4.0	September 2026	KHDA-readiness review; regulatory references corrected; unverified prescriptive claims removed; governance/supervision strengthened	Pending approval

APPENDIX A – REQUIRED EVIDENCE FOR REGULATORY / GOVERNANCE REVIEW

- Current campus risk register and high-risk action tracker.
- Emergency Response Plan, evacuation maps, drill reports and action closure evidence.
- Arrival/dispersal duty rosters, safe-handover registers and late/uncollected student procedure.
- Security/access-control and visitor-management records.
- Safeguarding training, reporting routes and secure case-management evidence.
- Clinic licences, medical/first-aid arrangements and relevant equipment checks.
- PPM schedule, statutory/competent-person certificates and contractor records.
- Transport compliance records and traffic-management plan.
- Incident/near-miss register, investigations, trend analysis and corrective-action tracker.
- Staff training matrix and competence evidence.
- H&S Committee minutes and leadership/Board assurance reports.
- Wellbeing, inclusion and student-support monitoring evidence.

APPENDIX B – PRE-SUBMISSION VERIFICATION CHECKLIST

☐ All names, roles, campuses and policy dates are current.

☐ No placeholders remain in any document issued externally.

☐ Current emergency contacts and assembly points are held in the ERP.

☐ Regulatory citations have been checked against current official sources.

☐ No school-selected ratio, SLA, frequency or KPI is described as a KHDA statutory requirement without evidence.

☐ Linked policies named in this document exist, are current and use consistent terminology.

☐ Arrival/dispersal, safeguarding, transport and supervision procedures match actual practice.

☐ Board/Principal/MSO/HSO responsibilities are consistent across policies.

☐ Personal data, medical records and safeguarding records have appropriate access controls.

☐ Policy has been approved and signed before submission/use.