

 BRIGHTON COLLEGE ABU DHABI A Bloom Education Initiative	BRIGHTON COLLEGE ABU DHABI		Doc No. BCAD-ADOSH-POL-01	
	INTEGRATED MANAGEMENT SYSTEM		Issue No.	01
	(ISO 9001:2015, ISO 14001:2015, ISO 45001:2018, ISO 41001:2018, ADOSHAD SF)		Rev. No.	13
	BCAD ADOSH POLICY		Date	06-10-2026

1. Policy commitment and scope

Brighton College Abu Dhabi (BCAD) is committed to preventing injury and ill health, protecting wellbeing and providing a safe, healthy and secure environment for pupils, employees, contractors and visitors. The Head Master and Governing Body share ultimate accountability for school health and safety, including school-related activities off campus.

BCAD will identify and control risks, meet applicable legal and regulatory requirements, provide competent personnel and sufficient resources, consult those affected, set and monitor safety objectives, and improve its arrangements through inspections, reporting and learning. Staff may stop an activity or withdraw from immediate danger and must promptly inform the Clinic, HSE Officer, MSO and CLT. Staff who report safety concerns in good faith will be supported.

This policy applies to the campus, transport arrangements, trips, events, co-curricular activities, contracted services and authorised use of the premises outside school hours. It sets out the school's overall safety arrangements, with detailed instructions provided in approved specialist procedures. Activities must not proceed where essential controls are missing.

2. Framework and terminology

ADOSH-SF means the Abu Dhabi Occupational Safety and Health System Framework. ADPHC means the Abu Dhabi Public Health Centre; ADEK means the Abu Dhabi Department of Education and Knowledge. OSHMS means Occupational Safety and Health Management System; SRA means Sector Regulatory Authority; and DoH means Department of Health. In this policy, HSE Officer means the school's appointed Health and Safety Officer. The Manager of School Operations (MSO) holds delegated authority for operational implementation and oversight.

The HSE Officer maintains the legal and compliance register, including the school's officially notified risk classification, applicable ADOSH-SF requirements, current ADEK policies, authority circulars, licences and reporting obligations. The recorded classification must match the latest authority notification. Changes to applicable requirements are checked at least quarterly and whenever an update is received; the register is reviewed in full annually. External references are listed in Section 14.

3. Leadership, responsibilities and consultation

The organisation chart identifies the current approved postholders, reporting lines, deputies and contact details. The Head Master and Governing Body retain ultimate accountability.

Role	Responsibilities
Governing Body and nominated safety governor	Approve the policy and oversee its implementation, resources and performance. Challenge unresolved significant risks and review reports, audit findings and overdue actions. The nominated governor liaises with the Head Master and MSO and participates in the agreed inspection and committee programme.
Head Master	Ensure safe school operations; appoint competent personnel and deputies; approve delegations; provide resources; oversee emergency planning, regulatory compliance and management review; escalate significant matters to the Governing Body.

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Role	Responsibilities
MSO / OSH management representative	Lead operational implementation of this policy and exercise delegated authority over facilities, security, transport and contractor activities. Direct operational teams and require departments and contractors to implement approved safety controls. Approve operational risk assessments, safe systems of work and permits to work within the MSO's delegated remit, following review by the HSE Officer and relevant competent persons. Stop unsafe work, restrict access, direct the isolation of unsafe equipment and temporarily suspend the use of unsafe facilities or the conduct of unsafe activities. Authorise resumption only after a competent person verifies that the required controls are effective. Prioritise maintenance, allocate approved operational resources, set corrective action deadlines, require supporting records and verify that corrective actions have been completed. Require corrective action for contractor non-compliance and escalate persistent or serious breaches. Monitor performance, report significant risks to the Head Master immediately and submit performance reports at least quarterly. Exercise these powers under the Head Master's approved delegation. Procurement, expenditure and contractual commitments remain subject to the current delegated authority matrix.
HSE Officer	Coordinate the safety system, advise departments, review assessments, maintain registers, lead inspections and proportionate investigations, monitor corrective actions, maintain the reporting calendar and submit required notifications. Escalate urgent concerns directly to the Head Master when necessary.
Facilities Team	Plan and document maintenance, inspections and testing; manage defects and safe isolation; check contractor controls; maintain asset and PPM records; and oversee cleaning, welfare facilities and premises safety. Verify completion of work before equipment or facilities return to service.
Heads of School, Heads of Department and activity leaders	Manage risks in their areas. Prepare and implement activity assessments, provide safe supervision, complete local checks and ensure staff competence. Escalate concerns promptly and complete assigned actions. Teachers check their teaching areas and equipment before use.
Clinic doctor and nursing team	Lead clinical and first-aid arrangements within their authorised scope; maintain healthcare plans, consent records, medication records, first-aid supplies and confidential medical records; coordinate medical emergencies and appropriate communication with parents.
Human Resources (HR), Information Technology (IT), Procurement, Security and transport leads	HR maintains appointment and competence records; IT supports secure records and display screen equipment (DSE) arrangements; Procurement verifies supplier requirements; Security controls access and supports emergencies; and transport leads oversee safe transport and traffic arrangements. Each works with the HSE Officer and MSO.
All staff, pupils, contractors and visitors	Follow instructions, use controls correctly, report hazards and incidents and avoid putting others at risk. Pupils' responsibilities are appropriate to their age and ability. Staff retain supervision and safeguarding duties. Contractors remain responsible for risks arising from their work.

The role of HSE Officer is a dedicated full-time position. The appointed officer must be competent and remain on school premises throughout the school day. Health and safety must remain the priority if additional relevant duties are assigned. A competent deputy covers short absences. HR and the Head Master verify qualifications, registration requirements, eligibility for the school's risk classification, and any conditions or expiry dates attached to authority approval.

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The Health and Safety Committee meets at least once each term and, where needed, after a serious event. Its membership includes school leadership, the HSE Officer and representatives from the Facilities Team, Clinic, safeguarding team and staff. The committee reviews concerns, assessments, incidents, inspections, training and progress on corrective actions. Minutes record decisions, responsible persons and completion dates. Staff are consulted before relevant changes and may raise concerns directly or through their representative.

4. Risk assessment and management of change

The department or activity owner prepares the risk assessment with competent staff and those affected by the activity. The HSE Officer checks its adequacy, advises on controls and records it in the central risk register. The relevant Head of School or MSO approves assessments within their delegated area of responsibility; significant unresolved risks are referred to the Head Master. All approvals are recorded centrally.

- Assess who may be harmed and how, including pupils, people with additional learning or medical needs, pregnant workers, contractors and visitors. Include routine, non-routine, off-site and emergency conditions.
- Prioritise eliminating the hazard, then reducing exposure through safer alternatives, physical controls and safe working arrangements. Personal protective equipment (PPE) supplements other controls where needed.
- Record existing and additional controls, responsible persons, completion dates, residual risk, approval and the review date. Explain the relevant controls to those carrying out the activity.
- Review assessments at least annually, before introducing new or changed activities, layouts, equipment, substances, staffing or contractors, and after incidents, control failures or regulatory changes. Reassess unexpected changes during an activity.
- Do not begin or restart an activity where significant risks remain uncontrolled. The responsible manager authorises the activity to restart after a competent person verifies that the controls are effective.

The HSE Officer maintains one controlled risk register; departments retain access to their current approved assessments. The Facilities Team is responsible for maintenance and cleaning assessments. Risk checks form part of project planning, procurement, handover and commissioning, including any changes affecting escape routes, occupancy or accessibility.

5. Hazard, incident and near-miss reporting

5.1 Immediate response and internal reporting

Protect people first: raise the alarm, obtain medical or emergency assistance and isolate the area where it is safe to do so. Inform the HSE Officer and MSO immediately of any serious incident or imminent danger, and notify the Head Master without delay. Emergency assistance must not wait for management approval. Use the published duty contacts and deputy arrangements if the primary contact is unavailable.

Staff report all hazards, injuries, work-related illnesses, dangerous occurrences and near misses through the school's designated central reporting channel as soon as practicable, normally on the same working day. If the system is unavailable, report by telephone or email and ensure that the report is subsequently entered into the system. Minutes of departmental meetings support follow-up but do not replace the formal incident record.

5.2 Classification, notification and investigation

The HSE Officer maintains the incident and occupational injury registers, determines whether external reporting is required and coordinates investigations. The MSO oversees corrective actions, while the Head Master oversees serious cases and communications. The Clinic leads on clinical matters, and safeguarding concerns follow the safeguarding procedure in parallel. The designated deputy makes the required notifications during the HSE Officer's absence.

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Reporting requirement	Baseline deadline and responsibility
Serious OSH incident: fatality	The HSE Officer or deputy notifies the relevant SRA and other required authorities as soon as practicable, within 24 hours, using the prescribed notification route and Form G.
Other serious OSH incident	Notify as soon as practicable, within 3 days. This includes a reportable serious injury, dangerous occurrence or occupational illness or disease. Apply the definitions in the current ADOSH-SF Mechanism 11.0.
Serious-incident investigation	Submit the investigation report and Form G1 to the relevant SRA within 30 calendar days of the incident, subject to any earlier deadline directed by the authority.
Other incidents and near misses	Record and investigate proportionately. Use Form G2 for applicable non-serious injury records and the prescribed internal record for other events.

These are the ADOSH-SF baseline timescales set out in Mechanism 5.0, clause 2.1(a)(vi)–(vii). The current reporting calendar must also identify the applicable ADEK, ADPHC, DoH and other authority notification routes, forms, deadlines and deputies. A pupil incident must not be treated as exempt from reporting solely because it does not involve an employee’s occupational injury.

Preserve evidence without delaying rescue or risk control. Record the causes, corrective and preventive actions, responsible persons and deadlines. Retain relevant photographs and records securely. Verify the effectiveness of actions before closing them, escalate significant overdue actions and share lessons learned without disclosing unnecessary personal information. The Clinic and school leadership coordinate communication with parents in accordance with the circumstances and relevant procedures.

6. Contractors, maintenance and premises

6.1 Contractor and project controls

Procurement, the MSO and the Facilities Team select and manage contractors in accordance with the approved delegated authority matrix. Before work starts, verify competence, licences, insurance, relevant safety arrangements, and safeguarding and access requirements. Review task risk assessments and method statements, confirm supervision arrangements and obtain permits where required, including for hot work, roof access, electrical isolation and other high-risk activities.

Contractors receive site induction and emergency instructions, sign in and out, wear identification, and work within agreed hours and segregated areas. Work arrangements must protect pupils and keep emergency routes clear. The Facilities Team monitors compliance and coordinates work with school activities. Anyone may report an immediate danger; authorised staff stop unsafe work promptly. Work may restart only after controls have been verified and authorisation has been documented. Completion includes safe handover, testing and the removal of waste and hazards.

6.2 Planned maintenance and defect control

The Facilities Team maintains an asset register and a planned preventive maintenance (PPM) schedule covering applicable building, electrical, mechanical, fire, water, pool, playground and other safety-critical systems. Each task record identifies the basis and frequency of the task, the competent provider, due date, completion evidence, findings, next due date and verification. Frequencies follow current local requirements, manufacturers’ instructions and advice from competent persons based on the risks involved.

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Fixed electrical installations and portable equipment are inspected and tested in accordance with this maintenance regime. Defective equipment is labelled, isolated or removed from use, and the defect is entered in the action register. Staff must not attempt unauthorised repairs or introduce personal electrical equipment without approval. The Facilities Team escalates overdue critical servicing and arranges safe alternatives or restricts use until the issue is resolved.

Keep premises clean and maintain pest-prevention measures, safe drinking water, suitable ventilation, indoor conditions and lighting, and hygienic welfare facilities. Record checks and resolve defects. Licensed providers carry out regulated waste disposal, including the disposal of hazardous and electrical waste. Catering and food hygiene follow the approved food-safety arrangements. Monitor required licences, certificates and service contracts so that they are renewed before expiry.

7. Safe working practices

Activity	Required arrangements
Work at height	Avoid work at height where practicable. Only competent, authorised persons may use suitable, inspected access equipment in accordance with an assessed method. Staff request support from the Facilities Team for displays and tasks at height. Standing on furniture, overreaching and improvising access are prohibited. Ladder use follows the manufacturer's instructions and the applicable safe working procedure. Work on towers or roofs requires task-specific controls and rescue arrangements where necessary.
Lone and out-of-hours work	Obtain authorisation from the line manager and agree the location, permitted tasks, check-in intervals, departure time and an emergency contact. Security holds attendance and contact information and responds to missed check-ins. Test communication arrangements. High-risk work must not be carried out alone. Provide additional supervision where the risk assessment requires it.
Manual handling	Avoid or reduce hazardous lifting, use handling aids and trained assistance, and assess non-routine tasks. Staff seek help from the Facilities Team with heavy or awkward items. Pupils must not move heavy or unwieldy furniture or equipment.
DSE and ergonomics	Managers arrange workstation assessments with IT and HSE support for regular computer users. Provide a suitable workstation set-up, equipment, information and changes of activity. Review any reported discomfort or changes in needs and refer staff for appropriate support. Use laptops on stable, suitable work surfaces.
Hazardous substances	The department owner maintains an inventory and current safety data sheets, assesses risks before purchase or use, and controls storage, labelling, access, handling, spills and disposal. The Facilities Team oversees cleaning and maintenance chemicals; laboratories and other specialist departments are responsible for their own materials. Only trained, authorised users handle hazardous substances.
PPE	Provide suitable PPE, training, maintenance, storage and replacement at no cost to employees. Record the issue of PPE where required. Stop the affected task if protection is absent or unsuitable. Address fit, accessibility and understanding before considering disciplinary action. No person may continue an unsafe activity.

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8. Clinic, first aid, inclusion and wellbeing

The Clinic maintains the required DoH facility and professional licences and clinical procedures, and ensures that competent medical cover is available. A first-aid needs assessment determines the trained personnel, equipment and cover required during the school day, trips, events and authorised activities outside school hours. The Clinic maintains a current register of first aiders and first-aid locations, displays relevant contact details and checks kit contents and expiry dates monthly and after use. The Facilities Team supports signage and accessibility.

The Clinic manages medication arrangements in accordance with DoH requirements and individual healthcare plans. Obtain the required parental consent and renew it each term or whenever medication changes. Authorised personnel check, administer and record medication within their competence and in accordance with the applicable clinical procedure. The person administering medication must observe the pupil taking it and confirm that it has been taken correctly; handing it to a pupil does not complete administration. Any authorised self-administration follows the documented healthcare plan. Suspected unauthorised medicines are referred promptly to the Clinic and MSO.

In a medical emergency, summon the Clinic team and emergency assistance immediately. The available medical professional leads clinical care and coordinates ambulance assistance. If no medical professional is available, staff activate the emergency response and trained first aiders provide help within their competence. Do not delay emergency assistance while seeking routine consent or internal approval. The Clinic arranges contact with parents and records the response; school leadership performs this role if the Clinic team is unavailable.

The Clinic and inclusion team coordinate individual healthcare and access arrangements where needed. Activity owners adapt assessments, supervision and evacuation support to individual needs. Information is shared only with those who need it to provide safe care. Participation is supported through reasonable adjustments. Any proposed restriction requires a documented assessment, consideration of alternatives and review by the Head Master in consultation with the pupil's family and relevant professionals.

HR and line managers address workload, stress, bullying and other wellbeing concerns through consultation, support and confidential referral. Provide appropriate support after serious emergencies. The Clinic coordinates screening, immunisation and relevant health surveillance in accordance with applicable requirements. Guidance on school bag weights and the monitoring of those weights follow the current ADEK limits and take account of individual needs. Smoking, including the use of e-cigarettes and vaping devices, is prohibited on campus and within the regulated perimeter.

9. Pupils, transport, activities and shared use

- Teaching and specialist activities: teachers use approved assessments, effective supervision and age-appropriate safety instruction. Heads of Department ensure suitable equipment, competence and controls for laboratories, art, design technology and other specialist work.
- Sport and swimming: the sports lead oversees equipment and supervision arrangements and ensures that pre-use checks and periodic inspections by competent persons are completed. Sports apparatus is inspected at least annually or more frequently where required. Pool use follows the Pool Operations Safety Policy, including requirements for competent teaching, lifeguard and rescue cover, water checks, access control and emergency arrangements. Defective equipment is removed from use and unsafe activities are suspended.
- Trips and visits: the trip leader prepares the risk assessment and staffing, consent, medical, transport, communication and emergency arrangements in accordance with the Educational Visits and Trips Policy. Obtain the required school and authority approvals before departure. Brief pupils on behaviour, hazards, contact details, boundaries and procedures if they become separated from the group. Residential visits or remote supervision require specific approval and an age-appropriate plan supported by a risk assessment. Any changes to the arrangements must be reassessed.

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- Transport and traffic: the transport lead, Security and the HSE Officer assess bus services, pedestrian routes, vehicle movements, crossings, arrival and collection arrangements. They verify provider, vehicle, driver and supervisor approvals and inspection records, and define arrangements for safe supervision, authorised handover and emergencies. They also review congestion, incidents and changes in pupils' needs.
- Events, lettings and shared use: the organiser submits a risk assessment and agrees the capacity, safeguarding, access, first-aid, fire and emergency arrangements, supervision, equipment and responsibilities with the school before use. The MSO coordinates operational checks and approval under the lettings procedure. School oversight remains in place when a third party delivers the activity.

10. Emergencies, fire safety and security

The Head Master ensures that the school has current emergency plans. The MSO coordinates operational preparedness, and the HSE Officer monitors implementation. Plans cover evacuation, lockdown and security incidents, medical emergencies and other credible risks. Detailed responses are set out in the approved BCAD Fire Safety Management Policy, Lockdown Policy and emergency plans.

Plans identify response leads, their deputies, communication channels, assistance for people with additional needs, access for emergency services, parent notification and recovery arrangements. All staff receive emergency and fire awareness training at induction and annually. Designated responders receive additional training for their roles. BCAD conducts fire drills at least once each term and tests other scenarios through the approved risk-based programme. Record observations and corrective actions, and comply with any additional Civil Defence requirements.

The Facilities Team arranges for competent persons to maintain and test alarms, detection and suppression systems, emergency lighting and firefighting equipment. It also keeps exits and signage clear. Control hot work through permits and supervision. Maintain the certificates and system connections required by the authorities, including HASSANTUK where directed. Where liquefied petroleum gas (LPG) is present, comply with ADEK and Civil Defence restrictions and approved system arrangements. Unauthorised cylinders or burners are prohibited.

Security, under the MSO's oversight, manages visitor and contractor signing-in and signing-out procedures, identification, authorised access and routine perimeter checks. The designated access-control administrator maintains approved access rights and promptly disables lost passes. Staff report visitors without identification, or anyone behaving suspiciously, to Security and follow the approved safeguarding or lockdown procedure when needed. They must not confront an aggressive person or place themselves at risk. Arrange support for meetings where threatening behaviour is anticipated and report threats immediately.

11. Training, communication and access to the policy

The HSE Officer and HR maintain a training matrix covering induction, emergency awareness, job-specific competence, refresher training and expiry dates. Managers identify training needs before assigning work and release staff to attend required training. Contractors receive site-specific and task-specific induction. Training is delivered in an accessible form that participants can understand. Records show attendance and, where relevant, checks of competence. Pupils receive age-appropriate instruction on safety, road use, emergencies and personal responsibility.

The MSO ensures that the approved policy is published on the school website in Arabic and English and is available through the controlled staff document system and prominent notices. Relevant instructions are communicated to pupils, parents, contractors and visitors. A designated reviewer checks translations against the approved English version. Changes are communicated and acknowledgements are recorded where required. Confidential operational or personal records are not published.

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12. Monitoring, corrective actions and management review

The following table sets out BCAD's management arrangements. The HSE Officer maintains a calendar of additional statutory inspections, submissions and authority-directed assessments appropriate to the school's officially notified risk classification.

Activity	Minimum school arrangements and evidence
Local and equipment checks	Area owners carry out checks before use or on each relevant working day and record significant defects and any required specialist checks.
Premises and PPM review	The Facilities Team completes scheduled tasks and conducts a documented monthly review of premises and overdue maintenance with the HSE Officer.
Health and Safety Committee and performance	The committee meets at least once each term. The MSO submits a performance report to the Head Master at least quarterly, covering risk controls, incidents, training, maintenance, findings and overdue actions.
Internal assurance	Conduct an annual internal review and audit programme with competent reviewers and appropriate independence. Track any required external audits and authority assessments separately.
External audits and submissions	The HSE Officer schedules the audits, reports and action plans required by ADEK, ADPHC and the school's risk classification. Where an approved full OSHMS applies, arrange the required annual third-party compliance audit and associated submissions.
Management and policy review	The Head Master leads a documented review of the complete safety management system at least annually, and the Governing Body receives the outcomes. Review this policy annually and sooner where needed.

Every finding is entered in the corrective action register with a risk priority, interim controls, a responsible person, a due date, supporting evidence and a named person responsible for verifying closure. The HSE Officer checks effectiveness. The responsible manager resolves overdue work or escalates it to the MSO or Head Master. Significant unresolved risks are reported to the Governing Body. Photographs provide supporting evidence where useful but do not replace testing or verification by competent persons.

The management review considers objectives, audit and inspection results, incidents and their causes, outstanding actions, legal changes, resources, consultation, training and changes to activities or premises. Record decisions, responsible persons and timescales. Measurable annual objectives cover the completion of critical servicing, training coverage and the timely completion and verification of corrective actions. Review reporting trends without discouraging reports of hazards or near misses.

13. Controlled documents, records and retention

The MSO is the policy owner, and the HSE Officer maintains the master document register and the records register. Documents identify an owner, version, approval, effective date and review date. Revisions are approved before issue, current copies are available at the point of use, and superseded versions are archived to prevent accidental use. Review documents following relevant changes and by their scheduled review dates.

Keep central safety records in the approved controlled electronic repository. IT manages access permissions, backups and recovery checks. Record owners verify that records remain readable and retrievable. Clinical records are held in the authorised clinical system with restricted access. Confidential paper records are secured, and sensitive information is shared only where there is a legitimate need.

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The table below sets out BCAD's baseline retention periods. The HSE Officer, HR and the Clinic verify any longer or specific legal requirements in the retention register. Retain records subject to an investigation, complaint, claim, audit or legal hold until their release is authorised. Retention starts at the point specified below. Records still in active use must not be destroyed solely because five years have passed.

Record group	Baseline retention period and trigger
Risk assessments and registers, procedures, emergency plans, committee minutes, assessments and action plans	Retain while in active use and for at least 5 years after supersession or closure, as applicable.
Hazard, incident, near-miss and investigation records; permits, inspections, calibration and maintenance reports	At least 5 years after completion or closure; keep unresolved cases open. Retain equipment inspection and maintenance records for the equipment's lifetime and for at least 5 years after disposal.
Training, competence and role-allocation records	Duration of employment plus 5 years. Contractor induction and competence records: at least 5 years after the engagement ends.
PPE and hazardous-substance registers	Retain while in active use and for at least 5 years after supersession. Exposure-related records follow the applicable occupational health requirements.
Employee medical and occupational health records	Retain throughout employment and for at least 30 years after employment ends, subject to any longer applicable requirements. HR and the Clinic control access and authorised disposal.
Pupil medical records, medication and consent records, first-aid treatment, screening and clinical records	Apply the current DoH and ADEK School Records requirements and the documented Clinic retention schedule. Do not apply a blanket 5-year rule to first-aid records or assume that the employee 30-year rule applies to pupils.
Other personal, safeguarding, digital and pupil records	Follow the relevant ADEK, other authority and specialist policy retention schedules. Link safety records where needed while maintaining access controls for sensitive information.

The retention register identifies the legal basis, custodian, location, access controls, retention trigger, retention period and disposal method for each record category. This includes pupil clinical records, for which the applicable schedule must be confirmed before any disposal is authorised. The record owner and authorised approver confirm that the retention period has expired and that no holds apply. Shred confidential paper and securely delete electronic copies in accordance with IT procedures, including the managed expiry of backup copies. Maintain a destruction log. Recycle non-confidential material only after disposal has been authorised.

14. Supporting procedures and references

The controlled document register identifies the current versions, owners and locations of the procedures and registers listed below. The HSE Officer checks that referenced documents exist, are approved and use consistent roles and reporting routes. Any missing arrangements are recorded as actions with interim controls. Implementation must be supported by evidence.

Controlled document group	Accountable lead
Risk Management Policy; risk register; change assessment and approval records	HSE Officer and department or activity owners

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Controlled document group	Accountable lead
Incident reporting and investigation; external reporting calendar; corrective action and occupational injury registers	HSE Officer / MSO
Contractor control, permits to work, safe working procedures, PPM and asset registers	Facilities Team / MSO / Procurement
Fire Safety Management Policy; Lockdown Policy and drill plan; emergency plans; individual evacuation arrangements	Head Master / MSO / HSE Officer
First Aid; Medication Administration; pupil self-administration; healthcare plans; first-aid locations; clinical records schedule	Clinic
Educational Visits and Trips; Trip Leaders' Handbook; Co-curricular Activities; Pool Operations Safety; transport and traffic; lettings	Relevant activity lead / Head of School / MSO
Safeguarding; Inclusion; security and access; training and induction; staff wellbeing; legal, document and records registers	Relevant policy owner with HSE coordination

The external references were checked on 6 October 2026. Subsequent amendments and applicable authority circulars are recorded in the legal register. An older acronym in an external document's title does not change the ADOSH-SF terminology used in this policy.

- ADPHC: ADOSH-SF Manual and Management System Elements, Version 4.0, 15 July 2024, particularly Elements 1–9.

[ADPHC: Manual](#)

[ADPHC: Elements](#)

- ADPHC: applicable Mechanisms, including 5.0 (medium-risk entities), 6.0 (performance reporting), 7.0 and associated practitioner-registration criteria (listing updated 7 April 2026), and 11.0 (incident reporting).

[ADPHC: Mechanisms](#)

- ADEK School Health and Safety Policy, Version 1.1, September 2024; stated compliance date 1 February 2026.

[ADEK School Health and Safety Policy \(official PDF\)](#)

- Current applicable ADEK policies, ADOSH-SF Codes of Practice, DoH standards and Civil Defence and other authority requirements, as identified in the legal register.

[ADEK school health, safety and wellbeing policies](#)

[ADPHC: Legislation](#)

15. Approval and revision record

This revised draft takes effect following formal approval. The Head Master and Governing Body authorise its issue through the signatures below or a referenced, controlled electronic approval. The HSE Officer records the effective date and next review date in the master register once approval is complete.

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Approval role	Name	Signature	Date
Prepared by: MSO	Anas Al Mulla		6 th Oct 2026
Reviewed by: Head Master	Barnaby Durrant		6 th Oct 2026
Approved by:	Craig Lamshed		6 th Oct 2026

Version	Date	Change
11.0	27 October 2025	Annual review, as recorded in the previous policy.
12.0	14 September 2026	Annual review, as recorded in the previous policy.
13.0	6 October 2026	Major Update Alignment with ADOSH-SF Version 4.0

The full earlier change history is retained in the archived version 12.0. Current appointments are recorded in the appointment register.