PSE

EDUCATIONAL SAFETY PROTOCOL



Security plan

Waldorf Cordoba International School

Waldorf Education Center Córdoba

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I. SECURITY OPERATION

It is a technical and tactical resource to evacuate an educational site, in case of any event of natural causes or other in the best conditions of safety, quickly and avoiding overcrowding and accidents in moving from one sector to another safer.

II. GENERAL PURPOSE

Practically meet the various difficulties of school infrastructure for evacuation in case of natural catastrophic events or otherwise.

III. GENERAL INSTRUCTIONS

These general instructions are for you to be respected by all staff of the establishment, from teachers, students to the board of directors, including accompanying or others who are at school when a dangerous situation or it produces a natural event.

1. GENERAL INFORMATION

IN THE CLASSROOM

- All students must be separated from windows and glass in general occupying the security zone in the room
- * The first student / a must open the room door.
- All students must, in case of earthquake protect his head and body, if possible, beside or under the table.
- Professor / a should remain calm and to remember that all students / as under their responsibility.
- * The teacher must maintain order and wait indications for eviction of the room and proceed in order and quiet along its course.
- Before leaving make sure that no student / ay is not left out with your book classes.
- Students and teachers must not take any material or other personal thing and go out and take their comfort zone.

TOWARDS SAFETY ZONES

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- Security zones in our school are clearly assigned and are in school playgrounds avoiding areas under the covered patio.
- Each teacher / a should lead to its course over there, in full working order. Without running, calmly, walking quickly, without pushing without chacotear with their peers.
- × Teachers are responsible for keeping silent and orderly to all alumni / ae of course, that he is working at the time of the eviction of the rooms.
- Courses located on the second floor, must fall in order scales allocated for this purpose, avoiding running and / or pushing peers in order to avoid accidents
- Teachers / as not in classroom should assist those who are in difficulty or required to take on other responsibilities.

2. OPERATIVE SAFETY SCHOOL

IN CASE OF EARTHQUAKE

A. FIRST ALERT

one short ring, or a touch of alarm no more than ten seconds and repeatedly be played. When it sounds this alarm, proceed as instructed to act in the classroom. Alumni / ae stop working, and the room door opens to an orderly exit.

B. second alarm

* It will sound after one minute of the first alarm and a touch or a touch ring long and constant bell indicating the evacuation of classrooms. It proceeds as indicated for this purpose. In complete order and without running. Students / as with their teachers come to the security zone.

IN CASE OF FIRE

* a bell or a touch long and steady bell indicating the evacuation of classrooms will sound. It proceeds as indicated for this purpose (earthquake). In complete order and without running. Students / as with their teachers / os flock to the safety zone paying attention to the instructions of the security group the establishment in case of having to make an external evacuation.

3. SAFFTY ZONES

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ZONE A

* It corresponds to the entrance hall to school in this area should evacuate the hall access to school. In addition to all parents or others who are in school at the time of evacuation. Also come from this sector all students who are in that area (between front door of the establishment and entrance hall).

ZONE B

* It corresponds to the forecourt to school in this area should evacuate all persons in that time.

AREA C

x It is up to every classroom in the school.

4. THE OPERATIONAL SAFETY SCHOOL IS FOR ALL PERSONS IN SCHOOL

OF LIABILITY

They are determined for the proper development of school safety operating the following responsibilities to the staff of our school to be met fully by the great importance of such actions:

Open entrance gate and gateway:

Open door Parking:

Cut off the supply of light and enable system:

Touching alarms ringing:

Gateway to School:

primary teacher maternal teacher maternal teacher maternal teacher maternal teacher

COLLABORATION

They are asked all teachers of our educational establishment greater collaboration and accountability.

For the good development of our operating for the safety and welfare of our students and our own, against a natural catastrophic event or other cause.

In addition, they are asked teachers to make known all the difficulties and inconveniences present during the operation to correct errors or solve inherent problems, in order to better conduct future evictions or we are in real emergencies.

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IV. SCHOOL SAFETY PLAN EVACUATION INSTRUCTIONS

5. IDENTIFICATION OF THE ALARM

- ➤ Touch ring or short repetitive bell (First alarm) only if earthquake
- Touch ring or long and constant bell (Second alarm) after simulated earthquake and output buffer zones; and exit in case of fire.

6. IN THE CLASSROOM

- ➤ The first student / to open the door.
- * Alumni / ae are located next to the exit door.
- **×** Glasses are protected.
- × Alumni / ae cover their heads and body.
- **x** They prepare to vacate the room.

7. DURING LUNCH AND RECREATION

- Students / s teachers occupy security zones nearest trying to go to areas designated course.
- **x** Everyone should be aware of the indications managers about where to go.
- * This route should be done quickly, without running, avoiding falls, pushing, hitting or other accidents.

8. DURING EARTHQUAKE AND / OR FIRE

- **x** Keep calm and remember instructions to proceed.
- Not panic or alarm peers / as, our building is earthquake proof.
- Seek protection, especially head and body. Watch for signs to follow.

9. PEOPLE RESPONSIBLE

Persons responsible for providing instructions before, during and after the operating or in the event of a real emergency are:

- × Teachers / os: Pilar Ruiz, Marina Garcia
- **x** Teachers in general.



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10. UNSAFE ACTIONS DURING THE OPERATING

IN THE CLASSROOM

- **x** Running inside the room.
- × Stand on chairs and tables.
- **x** Exit through the windows.
- × Tinker or push their peers.
- × To scream and / or mourn unnecessarily.
- **✗** Move chairs and tables for no reason. **✗**
- Failure to obey the instructions of the teacher.



EVICTION DURING THE ROOM

- × Run school yards.
- * Make disorder and shouting during the march.
- × Tinker or push their peers.
- Meeting with objects in general.
- Directed toward the bathrooms or other place not indicated
- × Stay in the room or under a risk zone
- Failure to obey the instructions of their teachers.
- × Not stay calm and move to different places.

AFTER OPERATIVE (OR) (OR) (OR)

- Failure to follow instructions given by the teachers and school security officers.
- × Running back to their rooms.



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ANNEX I. ACCIDENTS PROTOCOL

- 1. BASIC recommendations to any accident
- 2. URGENT RELOCATION PLAN FOR STUDENT MEDICAL CENTER
- 3. MEDICINE KIT
- 4. MANAGEMENT OF THE MAIN CAUSES ACCIDENT
 - × Drops and dings
 - **×** WOUNDS
 - **×** BURNS
 - × BLEEDING
 - Bites and Stings
 - ✗ CHOKING BY FOREIGN BODY: CHOKING
 - **≭** FEVER

5. FIRST AID TEACHER TRAINING PLAN

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- 1. BASIC recommendations to any accident
- × Keep calm.
- * Ask for help. Faced with a serious situation call 112 (or 061 for medical emergencies).
- × Notify the parents or guardians as soon as possible.
- **x** Keep casualty, whenever possible, in a quiet and safe place.
- Follow basic hygiene (hand washing, wearing gloves).
- * Avoid making any procedure if you are not sure.

2. URGENT RELOCATION PLAN FOR STUDENT MEDICAL CENTER

In non-urgent cases will wait for the arrival of parents or guardians for any transfer student.

In urgent cases, where it can not delay the transfer until the arrival of the parents or guardians will be a teacher who accompanies the student to the hospital.

3. MEDICINE KIT

The kit should be in a cool, dry place, out of reach of students and a place easily accessible for adults. It should not be locked. You have to watch expiration dates of products.

Must contain at least:

- × Iodine or iodinated not antiseptic.
- Sticking plaster.
- **x** sterile gauze.
- Plasters or plasters.
- × You bandages.
- **x** Tweezers and scissors.
- **x** saline.
- **x** Thermometer.



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4. MANAGEMENT OF THE MAIN CAUSES ACCIDENT

Drops and dings

Falls are the leading cause of accidents. The performance will depend on the affected area:

- * <u>Head injuries</u>If the blow has been of some importance or if the injured person faints, vomits, says or does strange things, bleeding from the nose or ear or has the slightest doubt about their status, call 112. If, however, just a bump appears, put ice or cold compresses, but watch for a while the student. In any case, you must notify parents what happened.
- Blows to the extremities: If there is deformity, inability to move or severe pain the student should be treated in a hospital. Keep the assets until they reach the same Member.
- Blows to the abdomen: If severe should be evaluated in a health center.
- Blows to the chest of there is difficulty breathing emergency phone call.
- Blows to the mouth gently wipe the mouth with a soaked in water or saline gauze. If you have broken a tooth, keep the piece.
- * <u>Back Blows</u>If the stroke is mild monitor if there is pain. If the blow is of some importance to assess mobility asking him to move his feet, and the sensitivity of the lower limbs. Any doubt not move the injured person and call the emergency number.

Wounds

Washing the wound with soap and water or saline to drag dirt. In a sterile gauze put an iodine or chlorhexidine disinfectant and apply it on the wound from the inside out. If the wound has been deep or bleeding a lot, or if it was caused by a sharp material it should be valued at a health center.

NOT TO DO:

- **×** Use cotton or alcohol.
- × Apply powders, ointments, salves or remedies.
- Extracting a large object stuck in the wound, as it can be doing plug and prevent blood.

Burns

Immediately wash the burned with running cold water for 5 minutes, and gently dry with sterile gauze without rubbing surface. Protect the burn with gauze soaked in saline to prevent infection. If the burn is extensive it must be valued at a health center.

NOT TO DO:

- Adhering clothes off.
- Apply ointments, salves, powders, creams or home remedies (toothpaste, potatoes, onions, ...).
- **×** Break blisters.

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Use cotton or tape.

In case of heat stroke (heatstroke) applying cold compresses on the head and give drink (not cold) water. Severe cases should be assessed in the hospital.

If electrocution immediately notify 112. The passage of electrical current through the body, and produce a burn of varying severity, can cause heart rhythm disturbances and even cardiac arrest. In the meantime:

- **x** Disconnect the network immediately.
- * If it is not possible to disconnect the network, the injured person away from the source of electricity using an insulating object such as a stick, a dry towel, etc.
- ✗ If not breathing or has no pulse, begin CPR basic maneuvers.

Bleeding

Ensure that the injured person will not make any sudden movements that aggravate the bleeding. Knock him and reassure him. Cover the wound with gauze or clean cloth and packed tightly with your hand. If the wound is on a limb simultaneously raise it above the heart.

- nosebleeds: Compress nose manually 5 to 10 minutes, bowing his head slightly forward to avoid swallowing blood students. If bleeding continues, introducing a saline-soaked gauze into the pit bleeding, making sure that the gauze is easy to pull out and look good. If nevertheless still bleeding should urgently go to the hospital.
- * Bleeding from the ear: Plug the ear with a sterile gauze or a clean cloth and always go to an emergency
- other bleeding: Gastrointestinal bleeding (vomiting blood, bleeding from the anus), urological (blood in urine) or respiratory (cough bleeding) should be considered an emergency, so you should contact immediately with 112.

Bites and Stings

Pitting apply ice cold water (always wrapped in gauze, not directly on the skin) or ammonia. Never squeeze, scratching or rubbing the sting to leave the sting.

You should consider a medical consultation when there is:

- widespread reddening of the skin.
- × Tightness in the throat or difficulty breathing.
- × History of allergic reactions to insect stings.
- multiple bites.

In case of bites by domestic or wild animal, wash the wound with soap and water and apply disinfectant. Let the air and go to an emergency room.

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Choking by foreign body

When a respiratory airway obstruction by a foreign body occurs but the person can cough, speak or breathe, the most important action to take is to encourage him to cough and thus achieve expel the foreign body. should not give back blows or attempt to remove the object with your hands.

If this does not work or there difficulty breathing, signs of cyanosis (blue lips), or unconsciousness, proceed as follows:

- × Immediately notify 112.
- **×** Start maneuvers to expel the foreign body:
 - ⇒ <u>If it is a small child</u>: Put it on your forearm with his head bowed down, and giving 5 blows with the heel of the hand in the middle of the back. Then turn around and hit another 5 times in the middle of the sternum.
 - ⇒ If you are an adult or older child and conscious, you have to stand behind him, surround him with his arms, put his fist above the navel and the other hand on top, and perform several quick and vigorous pressures upward and inward. If unconscious maneuvers must be started basic CPR.

Fever

It will inform parents of the situation to come to pick up the child. While expected arrival must be removed warm clothes, and if the fever is greater than 39 °C can be applied cold compresses on forehead and wrists. If fever appear with red spots on the skin or stiff neck should be notified by telephone emergency services.

5. FIRST AID TEACHER TRAINING PLAN

The center will offer teachers a training course in first aid (basic CPR and attention to the most frequent causes of accidents in schools), at least every two years.

The course will be conducted voluntarily by teachers

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ANNEX II. DISEASES PROTOCOL

Acute Disease

When the student suffers from any infectious or contagious disease (gastroenteritis, head lice, conjunctivitis, chicken pox, etc.) should refrain from attending school.

In case of fever during school hours to parents, who must come to the center as soon as possible to collect the student / a will be notified.

Chronic Disease

Should the student / to suffer from a chronic disease (diabetes, asthma, allergies, etc.) it is essential that parents inform the center about the disease your child / a and the attention they may require.

In case it is essential to the administration of any drug during school hours collaboration of teachers prior permission of parents or guardians of the student / a will be requested, according to the form shown below. The medication must be labeled with the student's name / ay delivered to the school staff, you will never be left inside the backpack student.



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INFORMATION AND AUTHORIZATION FORM

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