DUBAI
NATIONAL
SCHOOL AL TWAR
مدرسة دبي الوطنية الطوار

School Clinic Policies

Dubai National School Al Twar

P.O. Box 20057

Dubai – U.A.E

Tel : (+971-4)2988555/109

Fax : (+971-4)2988444

E-mail :clinic@dnschools.com

Bullying Prevention Policy

Prepared by: Mr.Ahmed Rawashdeh
Approved by: Mr. Malek Daradkeh

Issue date: September 2025

Anti-Bullying Policy

Guidance for Staff

1. Staff must be aware of the policy on bullying
2. All staff must challenge any bullying behavior and support **zero-tolerance of bullying**
3. Staff must be aware that verbal behavior can be intimidating and is considered a type of bullying
4. All staff must be diligent in reporting incidents
5. When investigating an incident of apparent bullying, staff must be aware that this may not be the underlying cause of this incident.
6. Separately, students must each be given the opportunity to present their version of events.
7. Teachers need to be aware of whether the bullying is by an individual or a group of students
8. A note must be made in the incident log book of any incident observed.
9. Staff must not walk past any incident and leave it unchallenged.
10. Follow agreed procedures for dealing with bullying incidents.

Bullying – Possible signs (for the parents)

Parents and families are often the first to detect that a problem exists. Don't dismiss it. Contact the school immediately if you are worried. Your child may indicate signs or behaviors that he or she is being bullied. If you are concerned and become aware of any of the following, you may wish to contact the school.

Your child may:

1. Be frightened of going to school
2. Be unwilling to go to school
3. Beg you to drive them to school
4. Change their route to school
5. Begin doing poorly in their school work
6. Come home early or regularly with clothes or books destroyed
7. Become stressed, stop eating.
8. Have unexplained bruises, scratches and cuts
9. Have their possessions go 'missing'
10. Continually lose their pocket money
11. Refuse to say what is wrong.

Talk with teachers about bullying:

- Try and stay calm – bear in mind that the teacher may have no idea that your child is being bullied or may have heard conflicting accounts of an incident.
- Be as specific as possible about what your child says has happened – give dates, places and names of the other children involved
- Make a note of what action the school intends to take.
- Ask if there is anything you can do to help your child or the school.

Stay in touch with the school; let them know if things improve or if problems continue.

ANTI – BULLYING CONTRACT

We at Al Dubai National School have a zero-tolerance policy for bullying. We as a school strive to create an environment that is happy and supportive of all our students and staff. In order to have the full commitment of every member of our community for our anti-bullying policy we will ask everyone to sign this contract. This will help to ensure that Dubai National School remains clean of bullying.

Students must be made aware of bullying through **zero-tolerance bullying** campaigns (regular

intervals) and must promise to:

- Support the aims of the school by reporting all incidents of bullying whether directed towards themselves or someone else.

Parents must be made aware of bullying through campaigns, workshops, lectures and must undertake to:

- Support the aims of the school by watching for signs of bullying and communicate these to the school.

Staff must be made aware of bullying through campaigns, workshops, lectures and must undertake to:

- Investigate all reported or observed incidents and report it to the Child Protection coordinator.

Student's Name: ___Student's Signature: _Date:

Parent's Name: ___Parent's Signature: _Date:

Teacher's Name: ___Teacher's signature: ___Date:

GUIDELINES ON DEALING WITH BULLYING

1. DEFINITIONS AND GENERAL COMMENTS

- Bullying is intimidation, whether ***verbal or physical***, which causes physical, mental and/or emotional distress to a victim who is not able to defend himself / herself.

- Bullying exists in all schools to a greater or lesser degree and is one of children's

main concerns.

- Boys are more likely to use physical bullying while girls tend to use verbal bullying. Studies show that most bullies and victims have low self-confidence and self-esteem.

- Bullying is to be taken seriously by the school.

2. PREVENTATIVE MEASURES

The following preventative measures are recommended to:

a) The administration and teachers should emphasize each child's individual value in the eyes of God and the school.

b) The staff should create an atmosphere of concern and trust so that children feel they can share problems and worries with staff.

c) The administration should address the issue early in the school year in an assembly. The following should be included:

- Make it clear that bullying is not acceptable behavior and will not be tolerated in the school.
- Encourage the children to report incidents of bullying as soon as possible after they happen. Emphasize that this is responsible behavior and not "telling tales".
- Teach the children to feel responsible for each other's safety. Help them to grasp the principle that there are no bystanders in bullying.

d) The administration should ensure adequate supervision of the children at all times. If some areas of the school cannot be supervised at all times, spot-checks are helpful.

e) Teachers should discuss bullying in class. : 'Teach children how to react and handle being bullied or witnessing someone being bullied'

f) All staff should be aware of the effects of "teachers-bullying". All students should be treated equally and with respect.

g) No one should humiliate a child by making jokes at his/her expense.

3. SIGNS OF BULLYING

Staff should also watch for signs that a child is being bullied. This includes / these include:

1. Fear of walking to or from school.
2. Deterioration in school work.
3. A child becoming withdrawn or starting to stammer.

4. Unexplained bruises, scratches, cuts, etc.
5. Unexplained loss of possessions or money.
6. Unexplained damage to a child's books or clothes.
7. A child refusing to say what is wrong or giving improbable excuses to explain any of the above

4. DEALING WITH BULLYING INCIDENTS

- In the case of a bullying incident staff is advised to deal with the situation as follows:

- If the bully is caught in the act, remove the victim from the scene as quickly as possible and tell the bully that he/she will be dealt with later. Comfort the victim immediately and reassure him/her that they are safe and the necessary procedures and precautions will be taken to ensure this does not reoccur. Don't be aggressive and don't intervene physically unless absolutely necessary. If a victim "tells" take it seriously and assure him/her that the matter will be dealt with swiftly. Ask for a written report (child's age permitting). ***In both cases the following procedure should be implemented:*** Take the matter to the child protection coordinator who should deal with it as soon as possible.

- Early intervention is important: failure to deal with the bully promotes further aggression.

The parents of both victim and bully should be involved. Invite them to attend any interviews with their child. If this is not possible inform them of all discussion and decisions. The victim and the bully should be interviewed separately and then together. A record of all incidents and subsequent actions taken must be kept.

5. HOW TO DEAL WITH THE BULLY: SUGGESTIONS

1. Help the bully to understand that his/her behavior is not acceptable and will have consequences taken by the school as well as possible natural consequences (He may bully someone who is able to bully him back – How would that make him feel?)
2. Make the bully aware of the distress caused to the victim.
3. Explore reasons for the bullying and ways to help the bully control his/her aggression and deal with feelings.
4. Help to find something he/she can do well which can foster his/her self-esteem. If the problem is deep-seated, outside help from a child psychologist may be required.
5. Punish the bully, record the punishment and show the bully it has been recorded.
    - Punishments should not involve aggression or humiliation. Suggestion: Use action or consequence of his actions rather than 'punishment' as the term punishment can be viewed as a very harsh word? Explain to the bully the action that will be taken due to his unacceptable behavior'. Explain to the bully the consequences of his actions which are strictly prohibited'.

6. The bully should make amends for the distress caused i.e. an apology (public, private or in writing) a gift or special favor to the victim (any such contact should be with the victim's permission, and deemed culturally appropriate).

7. An identified bully should be supervised very closely.

8. If the accusation is made against a staff member, the school must investigate and take immediate actions to ensure the safety of the child as per the school regulations and procedures

6. SUPPORT FOR BULLIES AND VICTIMS

1. It should be made clear to everyone in the school that they have the right to attend school without fear of being bullied which will be highlighted during "children's rights awareness week".

2. There should be frequent open class discussions regarding bullying.

3. Students who take pride in their 'macho' image must be made to confront the reason for their bullying behavior.

4. There should be regular meetings where bullies and victims may meet separately or together to work through their problems with staff (within the circle-time group setting perhaps).

5. Clear and explicit rules and corresponding courses of action must be agreed upon by all staff, students and parent representatives. Teachers are to meet and discuss agreed procedures.

6. Students will be encouraged to write their concerns on paper and hand it in to the class teacher.

7. Students will be made aware that they are able to visit the guidance counselor's office to discuss any fears they may have and that it will remain confidential

8. There should be an assembly on bullying once per term, Constructive supervision – having a chat to students while on duty, etc. can help the victims and the bully.

9. There should be an anti - bullying campaign held during the first term of every school year, where activities should include but are not limited to: Role-playing, and a school pledge to not bully and report any incidents witnessed.

7. HOW TO HELP THE VICTIM: SUGGESTIONS

1. If a child reports an incident, never brush it aside. Take all reports seriously.

2. Help the victim to see that what has happened is not his/her fault and he/she is not to blame. (Victims often feel that they are in some way responsible or that there is something wrong with them).

3. Give the victim closure of knowing the bully is probably sad/angry/has low self-esteem and that is why he/she does this behavior (re-stating that this is an unacceptable way to deal with feelings)

4. Reassure the victim that he/she is safe and the behavior of the bully is not at all acceptable.

5. Comfort the victim by ensuring he/she feels loved and cared for. Constantly remind him/her that he/she is not alone and you are always available for him/her to talk to and confide in.

6. Discuss with the victim how he/she feels and what he/she would like to do regarding this situation before giving your own suggestions (students may not always be ready to face their bully or deal with the situation).

7. Discuss with the victim how he/she should handle this situation and any further incidents that may occur.

BUSINESS CONTINUITY POLICY

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician

Reviewed by : Rabab Ali –Recent school physision

Approved by: Mr.Malek Daradekah- School Principal

Issue date: September 2025

Introduction:

Continuous Process of risk assessment and management with the purpose of ensuring that Dubai National School- al twar, can continue to operate if risks materialize.

Business continuity is not just concerned with disaster recovery, it addresses anything that could impose a denial of service or facility (i.e. affect the continuity of service) , such as staff shortage.

Objectives

- To ensure all services are regularly done and maintained so they may be effective and efficiently implemented during any operational disruption.
- To do appropriate business continuity arrangements to protect the delivery of the clinic's services in Dubai National School to our students and parents.

Plan

- Doing general risk assessment which aims to promote business continuity as needed.

Implementation

- In case of natural disasters that prevent on site services, the students and parents should have access to the services that the clinic can provide at such times through open communication by email or telephone. Everyone should be able to contact at least one person from the medical staff to address any concerns from the parents, students, even the staff.
- In case of health threats, where on site services can be provided may it be in full or limited, the welfare of the staff and all the clients should be ensured.
- A schedule for the medical professionals should be made and implemented accordingly if limited number of staff is only allowed to work.
- In case of absenteeism of any of the medical staff for 1 to 3 days, another staff should be able to accommodate the immediate tasks or services required by the clients immediately.
- In case the nurse or the doctor is on leave for any reason, the HR of the school must hire a temporary replacement for the clinic for a specific number of days or weeks that the medical staff is on leave so that the services from the clinic to its students will be delivered satisfactorily.

✔ The school should communicate to the Health Regulation Section of the Dubai Health Authority this change in the medical staff, and they should also see to it that the clinic has enough number of nurses and doctors according to the facility requirement.

✔ The temporary nurse or doctor should be licensed and provided by another healthcare facility.

Incident Reporting Policy

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician
Reviewed by : Rabab Ali –Recent school physision
Approved by: Mr.Malek Daradekah- School Principal
Issue date: September 2025

Accident and Incidents Reporting

POLICY

Dubai National School is committed in creating a positive difference for each student by providing an engaging, innovative and caring learning environment.

At all times the Dubai National School will adhere to the DHA guidelines.

When an accident / incident occurs the following is to be undertaken by staff on hand :

- First aid action is to be taken as required. Send a reliable student if necessary to the clinic .
- Seek assistance from nearby staff if necessary.
- Any serious accident or incident is to be reported immediately to school clinic and administration.
- All accidents and Incidents are to be reported as soon as possible and required documentation completed.

NOTES

Incidents to staff may also be notifiable under work Safe. All incidents involving staff must be reported to administration.

INCIDENT NOTIFICATION FORM

School Name/Location:	School Number:

BRIEF ACCOUNT OF INJURY

Details of Incident: _____	
Accident Date:	Accident Time:

ACTIVITY (GENERAL & DETAILED)

1. Chemical Use 2. Manual Handling, Lifting 3. Sports/Physical Education (*Athletics, Basketball, Cricket, Football-All Codes, Skating, Baseball, Gymnastics, Ball Games not Specified, Other Sports*)	4. Vehicle Use (Car, Bicycle, Bus, Other) 5. Machinery Use (*Hand tools, Portable Power Tools, Other Machines)* 6. Using Office Equipment 7. Curriculum Area (*Arts Science, Technology studies, PE, Home Economics, Other*)	8. Fighting/Assault 9. Play General 10. Walking 11. Running, Jumping, Skipping 12. Accidental Contact by other Person 13. Other (Specify) _

ACCIDENT DESCRIPTION

1. Slip 2. Trip 3. Fall 4. Overexertion	5. Mental Stress 6. Collision 7. Crushing 8. Hit by Moving Object	9. Other (Specify) _

ACCIDENT SITE

1. Sports Ground/Venue 2. Playground General 3. Playground Equipment 4. Classroom General 5. Chairs	6. Doors/Windows 7. Stairs/Steps 8. Paths/Walkways 9. Office Administration 10. Travel to / from School	11. Camp/Excursions 12. Other (Specify) _

STAFF ON DUTY

Name Number of Staff on Duty:

INJURED PERSON

Type: Student Staff Family Others ID (If Applicable):	Name:	
Grade: Class:	Age:	Gender:
Address:		Telephone:

INITIAL ASSISTANCE BY PERSON

Type: Student Staff Family Others ID (If Applicable):	Name:

SEVERITY OF INJURY

INJURY:	1. First Aid (Returned to Class) 2. First Aid (Sent Home) 3. Doctor or Dental Treatment	4. Hospital (Outpatient) Treatment 5. Hospital (Inpatient) Treatment 6. Fatal

DOCTOR TREATED PATIENT FOR

TREATMENT:	1. Amputation of any part of the body 2. Serious Head Injury 3. Serious Eye Injury 4. Separation of skin from underlying tissue (eg Degloving/Scalping) 5. Electric Shock 6. Spinal Injury	7. The Loss of a bodily function 8. Serious lacerations (serious means “of Grave Aspect” or “Critical”) 9. Injury due to exposure to a substance (eg Gas Inhalation, Acid Exposure) 10. Other (Specify) _

NATURE OF INJURY

NATURE:	1. Fracture 2. Dislocation 3. Strains/Sprains	6. Crushing/Amputations 7. Bruises/Knocks 8. Dental Injuries

	4. Lacerations/Cuts 5. Burns/Scalds	9. Other (Specify) _

LOCATION OF INJURY

LOCATION	1. Head (*Skull, Face, Jaws, Ears*) 2. Eyes 3. Neck 4. Trunk (*Chest, Abdomen, Buttock, pelvis, Spine*)	5. Arm (*Shoulder, Elbow, Forearm, Wrist, Hand, Finger, Thumb*) 6. Leg (*Hip, Thigh, Knee, Ankle, Foot, Toes*) 7. Internal 8. Multiple locations 9. Ear

WITNESS DETAILS (Provide attachment if multiple witnesses)

Name:	Type: Student Staff Family Others ID (If Applicable):
Address:	Telephone:
Witness Statement: _____	

PREVENTIVE ACTION PROPOSED OR TAKEN (For Staff members or Severe Accidents)

1. No Preventative Action Taken/Intended 2. Referred to the School's clinic. 3. Referred to the School's Health and Safety Representative 4. Review of Curriculum 5. Review/Reinforce/Reiterate Procedures 6. Review Systems 7. Review the Environment	8. Review Personal Protective Clothing/Item 9. Review Equipment/Machinery Modifications 10. Review Equipment/Machinery Maintenance 11. Review/Reinforce/Reiterate Student Instructions 12. Review Training Provisions 13. Other (Please first contact the Liability Claims Management Unit - Specify) _ —

OFFICE USE ONLY – ENTRY TO CASES21

Staff Initial:	Principal Initial:

Date____/___/____ Signature of Principal/Head Officer _____

INFECTION CONTROL POLICY

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician
Reviewed by : Rabab Ali –Recent school physision
Approved by: Mr.Malek Daradekah- School Principal
Issue date: September 2025

1. PURPOSE

The Dubai National School Infection Control Policy provides a set of measures to reduce the spread of illness, through cross infection, in the school.

2. POLICY STATEMENT

2.1. This policy covers ways of avoiding infection and communicable diseases, including hand washing, general hygiene and maintaining a clean environment.

2.2. The policy should be followed by all members of Dubai National School staff.

2.3. It is the policy to provide a happy and healthy environment for every child in our care. We take measures to prevent and minimize the spread of infection in our school.

2.4. To help achieve this we work in partnership with parents and carers. In order to protect the health of the children and staff, we will adhere to the following practices in line with current guidelines.

3. SCOPE

To prevent the spread of infections and communicable diseases within Dubai National School.

4. TARGET AUDIENCE

The school nurse, teachers, administration staff, classroom assistants, pupils and parents.

5. RESPONSIBILITY

DNS management ensures implementation of the policy to include students/patients, their family members/guardians; close contacts and visitors comply with the policy and infection control guidelines in the manual.

6. PROCEDURE

6.1. **Hand washing**

It is one of the most important ways of controlling the spread of infection. The recommended method is the use of liquid soap, warm water and paper towels. The use of non-medicated soap, provided in a soap dispenser is encouraged. Harsher soap which contains antiseptic (unless required under specific circumstances) should not be used as this can make hand very dry and potentially chapped, increasing the risk of infection. Hands should always be washed after using the bathroom, before eating or handling food and after handling animals. All cuts and abrasions should be covered with a water proof dressing.

6.2. **Coughing and sneezing**

- easily spreads infection. Children and adults should be encouraged to cover their mouth and nose with a tissue and dispose of the tissue appropriately in a bin.

6.3. **Cleaning of body fluid spillage**

- All spillage of vomit, saliva, nasal and eye discharge, blood and faeces should be cleaned up immediately. Disposable gloves and disposable plastic aprons must be worn. Splillage kit is available in each classroom. When spillage occurs, clean using a product that combines both a detergent and a disinfectant.

-Maintaining a clean environment is essential in good infection control. Adequate waste disposal bins should be provided throughout the school. Regular cleaning of non-contaminated surfaces (e.g. table tops, toilet seats...) should take place with standard cleaning solution.

-General and Medical wastes should be discarded separately. General wastes such as papers, plastics, and other materials not contaminated with chemicals and blood are disposed in designated bin for general wastes.

-Medical wastes such as sharps (needles) cotton with blood, cloth, wound dressings and other materials contaminated with blood and chemicals are disposed separately in a designated Medical Waste container to be collected by the Medical Waste Collection contractor.

SYMPTOM MANAGEMENT

Vomiting and Diarrhea

- In the case of vomiting and diarrhea, the child should not return to school for 24 hours after the last episode of vomiting or diarrhea.

Fever and Other Symptoms

- Children should not attend school if they have a fever, a skin rash, Vomiting, Diarrhea, a heavy nasal discharge, a sore and inflamed throat, a persistent cough that has not been investigated, red watery or painful eyes.

- If a pupil is absent from school due to fever, they must be fever free for 24hours after the last dose of antipyretic (fever reducing medication) has been used.

Wounds

- If a child has an infected or oozing wound, appropriate dressing must be done and covered by a well-sealed dressing.

Head lice

- are a common contagious infestation in children, particularly those of primary school age. However, the presence of a head lice infestation is not a public health threat. The primary responsibility for the detection and the treatment of head lice lies with the parents of the pupil.

- If it is suspected that a child has head lice, they will be sent to the school nurse for examination. In the event that live head louse are found, a letter will be sent to parents advising this. Parents will be asked to take their child from school for appropriate treatment. If only nit's (eggs) are found a letter will be sent home.

- The child can return to school once the treatment has been completed. The child should be seen by a member of the medical team prior to returning to class.

- A notification will be sent out to parents of pupils in the same year group to advise them to be vigilant to the possibility of head lice. This advisory letter will only be sent out once per academic year for each year group. Over use of an alert letter can lead to the
perception that there is a serious 'outbreak' of head lice leading to alarm and unwarranted concern.

- A parent’s information guideline will be made available for parents to explain about head lice. For more information about the procedure, see Head Lice Policy.

Chickenpox

- Children within the school premises suspected to have Chickenpox must be brought to the School Clinic to be examined by the doctor and make necessary recommendations. Children with symptoms should be excluded from school until all lesions have scabbed over (usually about 5 days after rash onset).

- The parents will be phoned and asked to take the child home or as advised by the School Doctor. Head Teacher and Headmaster will be notified. For more details about the procedure.

Mumps

- In the case of mumps (parotitis), for all exposures consider the entire group that could have been exposed. That could be the whole school, whole work setting, etc. It is an opportunity to vaccinate susceptible rather than individual persons. At Dubai National School, all children should have documented evidence of receipt of two doses of MMR vaccine with few students on medical or religious exemptions. Do not forget to consider the staff as well.

- When mumps is suspected, the child should be brought to the school clinic to be assessed by the school nurse and make necessary recommendations. Exclusion of infected students must be observed to control mumps outbreaks. Susceptible students should also be considered to be excluded when there is an outbreak. For more details about the procedure, see Policy for Mumps.

Slapped Cheek Disease or Fifth Disease

- do not usually need any treatment. If you have a headache, fever or aches and pains then painkillers such as paracetamol or ibuprofen will help. There is no vaccine or treatment that prevents this infection. Frequent hand washing reduces the risk of this infection been transmitted to other people.

Conjunctivitis

- can result from many causes. These causes include viruses, bacteria, allergens, contact lens use (especially the extended-wear type), chemicals, fungi, and certain diseases.

- When conjunctivitis or Pink Eye is suspected, Parents should be contacted, informed of symptoms and advised to see the doctor for confirmations of

diagnosis if they haven’t already done so. Young children are not necessarily able to adhere to strict hygiene measures and therefore could spread the infection to other children within the school.

- The child can return to school 24 hours after the infection has cleared up or once they have had 24 hours of treatment for the conjunctivitis from their doctor. For more details about the procedure.

Flu-like Symptoms/suspected COVID 19 :

- Those who get flu-like symptoms at school should go home and stay home until at least 24 hours after they no longer have a fever or signs of a fever without the use of fever-reducing medicine. Those who have emergency warning signs should PCR COVID-19 testing.

- Separate sick students and staff from others in the isolation room until they can be picked up to go home. Infected staff or student will stay at the isolation room (separated area) of the school clinic. DHA Guidelines of suspected COVID -19 case will be follow

Parents will be contacted immediately if a child is found to be a source of infection to other pupils and staff, following assessment by the school medical team. They will be asked to take their child out of school for further assessment.

Managing HASANA System

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician
Reviewed by : Rabab Ali –Recent school physision
Approved by: Mr.Malek Daradekah- School Principal
Issue date: September 2025

Hasana:

As part of the Dubai Health Authority's regulations, Hasana is an integrated electronic public health system for disease surveillance and management. It records also immunization of each individual student in the Emirate of Dubai.

Hasana is replacing a process that currently relies on paperwork for the most part.

Nurses will be able to manage school mass immunization campaigns and perform the required tasks with the support of the app.

DHA implements a unique Public Health Solution for Disease Surveillance Management. This proven solution will integrate all government and private health facilities in Dubai, providing a single immunization record for each client in all health facilities in Dubai including schools of Dubai and a robust system to manage and contain the spread of communicable diseases.

This transformation program called HASANA, which means immunity, is another manifestation of DHA's objective to "provide a smart, accessible, effective and integrated healthcare system, protect public health and improve the quality of life within the Emirate"

HASANA will be used by Physicians, Nurses and Administrative staff and anyone operating in the Public Health landscape in Dubai both in government and Private health sectors. By targeting preventative care and aiming to improve the health status of nationals, residents and visitors HASANA will equip Decision Makers in Dubai with the necessary tools to prevent, detect, and manage the outbreak of communicable diseases in an efficient manner.

HASANA will not only create a unique immunization record for each individual in Dubai, but will also seamlessly integrate government and private health facilities and partners, while enabling all of them to access the same immunization data and ensure complete and high quality care for all.

This integration is a first of a kind in the region, and it will help DHA realize a number of benefits:

- Patient preventative care will be improved through access to unified immunization records at any facility and availability of relevant data such as special considerations, allergies, and risk factors pertinent to immunization.
- At the operational level, critical and scalable events such as school mass immunization campaigns will be supported with the necessary tools to simplify the planning phases and reduce the workload on the healthcare staff and support the management of the events allowing the providers to direct their efforts fully to the patient's care.

Collaboration between private and government health facilities will be seamless thus creating a more robust Public Health Ecosystem in the Emirate of Dubai.

Healthcare professionals and partners will be able to join efforts to minimize the risk of outbreak and disease exposures. For instance, if there is an outbreak of food poisoning, the municipal authorities will be alert to follow the reported cases and DHA will have a prime role and view on the investigation data and outcomes.

DHA has been investing a lot of efforts and resources to enable the smart transformation of healthcare and ensure customer satisfaction and happiness. By focusing on preventative care.

HASANA is looking after every Dubai's wellbeing and shielding from the threat of infectious diseases to achieve a healthier happier Dubai.

Requirements:

1. Registration of each school child in the Hasana System.

2. All Data's from immunization record of each school child, will be enter in the DHA Hasana system.

3. Uploading students' demographic data and their vaccination history.

4. Enter correct and complete data.

5. Maintain the confidentiality and security of information concerning patient privacy in accordance with regulations and laws.

6. Commit not to use any other means to record data in place of the approved "Hasana" system (for example, paper forms or electronic correspondence)

Required data input:

Enter correct and complete data:

1) Full Name

2) Gender

3) DOB

4) Nationality

5) Emirates ID

6) Passport number

7) Mobile number

8) Address

9) Allergies related to vaccines

10) Chronic diseases

11) Contraindication

12) Scanned immunization card and uploaded

11) immunization at school

12) mass immunization event

13) scanned Pre vaccination checklist and uploaded

13) scanned school immunization consent form and uploaded

14) Family History

15) allergic reaction during immunization at school/at home

16) post Vaccine side effects

Health Record Management and Retention Policy

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician

Reviewed by : Rabab Ali –Recent school physision

Approved by: Mr.Malek Daradekah- School Principal

Issue date: September 2025

PURPOSE:

To insure proper management of school health records, readily accessible, properly maintained as required for students care purposes and also to meet legal standards, ensure privacy, optimize the use of space and minimize the cost of record retention.

SCOPE:

This policy applies to Dubai National School-Dubai

Purposes of Maintaining School Health Records:

- To facilitate communication among care providers.
- To provide continuity and evaluation of care.
- For medico-legal purposes.
- For research and education.

Maintenance and Storage of School Health Records:

- Only health practitioners in the school clinic directly involved in a students care to that student's health records and related information.
- Handwritten or hard copy of health records and information must be stored in a locked cabinet or cupboard and in a safe monitor able location and only school health practitioners must have access to these storage facilities.
- Records in the school nurses` office, whether they are paper or electronic need to be secured when not in use.
- Only official School forms. which have been approved for use, will be filed with other school health records.
- Password to computers should not be shared.
- Check and ensure that every student have their duly filled up school health record.
- Document all attendance of the student to the school clinic.
- For those students who do not avail immunization in the school, open their record just the same. Attach the copy of their immunization record in the page provide for , in the school health record.

Errors in Documentation:

- References to school problems (e.g. staffing shortage), should never be included in student record.
- Terms suggestive of an error should not be used (e.g. accidentally, or by mistake), state only the facts of what occurred.
- When an error is made, one single line should be drawn through the error; the word “error” and the nurse’s signature should be written directly above it. The correct entry should follow. Words should never be erased, scratched or whited out.
- When an entry is made in the wrong student’s record, the entry should be marked “mistake in entry” and a line drawn through the mistaken entry as above.
- Late entries should be avoided when necessary, a late entry maybe added. but in the correct date and time sequence. For example, write today’s date and time when entering a note of acre provide yesterday and mark it “late entry”.

Student Health Records:

A legible, complete, comprehensive, and accurate student health record must be maintained for each student. A record should include a recent history, physical examination and any pertinent progress notes... Records should highlight allergies and untoward drug reactions.

Records should be organized in a consistent manner that facilitates continuity of care. Specific policies should be established to address retention of active records, retirement of inactive records, timely entry of data in records, and release of information contained in records.

Fill the first page with the personal data of the student taking into consideration of the following:

- If both parents are employed write both their telephone numbers.
- Under the column “Others” write distinguishing information related to child’s health, e.g. chronic illness, on regular treatment, or with orthopedic aid, like brace/crutches, etc.
- Write the name of the school any time during the students stay in the same school. If the student transfers to another school, then write the name of the school in the next line.

Fill the 2nd page school Medical Examination with the page of the student at the time of examination properly written on the space provided. Ensure that the Medical Offer who conducts the medical examination signed on the form.

Immunization Record:

- Fill up the first with student's name, health card number, and the name of the school.
- Fill up the Second page with the birth date of the student.
- During the planning of Immunization, write in pencil the palnned date of Immunization (date when the vaccine is supposed to be administered) on the column provided for.
- The nurse, who gave the vaccine, erases palnned date which was written in pencil, and stamp the date of vaccination. Also, sign over the date stamp.
- Record only in the Immunization Record (DHA/PHC/SHS-02) or records of vaccines administered outside DHA facility.
- Attach the Immunization Record (DHA/PHC/SHS-02) or records of vaccines administered outside DHA facility.
- Always attach the Immunization Record (DHA/PHC/SHS-02 to the student's School Health Record. If and when the student leaves the school permanently, Immunization Record should be given to parents.

Transferring School Health Record

- When a student is transferred to another school, send the student's school health record tot the school clinic of that school.
- When a student leaves Dubai permanently, hand over the school health record to parents.

RETENTION OF HEALTH RECORD:

- The medical director is the one who is responsible for retention of students health records, data and information.
- Each transferred child health record must be retained up to 5 years.

MEDICATION POLICY

1. PURPOSE

To provide requirements for administration of medications to students whilst attending school or school-related activities, or as an emergency first aid response in accordance with the advice of school physician according to DHA guidelines and regulations.

2. Overview

The administration of medications to students by school nurse is only considered when a school physician has determined that it is necessary or when there is no other alternative in relation to the treatment of a specific health need.

Schools require *medical authorization* to administer any medication to students (including over-the-counter medications such as paracetamol or alternative medicines).

2. POLICY STATEMENT

2.1. Medications should be limited to those required during school hours which are necessary to maintain the student in school and those needed in the case of an emergency.

2.2. A student has the right to refuse medication, and in some instances may do so. In such instances, it is the nurse's responsibility to explain to the student as fully and clearly as possible the importance of taking the medication. If the student continues to refuse to comply, the parent or guardian, student's physician, and administrator must be notified.

2.3. Registered nurses may only administer medication to students enrolled in the school in accordance to school physician order.

2.4 Medication administration principles **:**

- Prior to administration ensure the parent has provided a signed consent for administration medication at school (routine/short-term medication/emergency medication)
- When administering medication, the school nurse must administering medication must apply the principle of The 7 Rights:

i. Right Drug
ii. Right Patient
iii. Right Dose
iv. Right Time
v. Right Route
vi. Right Reason

Immediately after a medication is given, the nurse documents and sent a notification letter to the parents of the following:

- Time administered
- Drug Name
- Rout
- Dosage
- indication
- Signature of the administering nurse

2.5. Administration of **Non-prescription drugs** in accordance to school physician instructions. Please find the attached standing order of medication can be administer to school children.

2.6. Administration of **Prescribed medications**:

a) Only medication prescribed by a DHA Licensed physician may be administered to children at school or school associated settings;

b) Prior to the administration of medication, school nurse or physician school clinic must ensure that parents complete the parental consent form. The parental consent form must be completed whether the child can self-administer the prescribed medication or DHA licensed healthcare professional is required to administer it. Forms must be kept on record and updated according to changed information.

c) Medications must be in the original container and have clear and comprehensive instructions for administration and dosage. School nurses must not accept medication that is provided in a different container or if changes have been made to the prescription instructions by a non-authorized physician.

d) For the safety of children, parents are required to provide the school clinic with a copy of the prescription and the prescribing physicians report.

2.7. Administration of **Emergency Medication** :

Medication that may be administered in an emergency situation is limited to the following:

- Epinephrine for acute allergic reactions (Anaphylactic shock);
- Administration of metered-dose inhalers/Neuoblizer
- Glucagon for hypoglycemia in diabetic students.

a) Individual care plans must be in place for students whose health conditions

may cause them to experience emergencies (e.g. known food or insect anaphylaxis, asthma, diabetes, hemophilia etc.).

b) DHA licensed school nurses or physicians must ensure that parents consent

c) to their child receiving emergency medication, limited to those approved in this standard in an emergency by completing the Parental Consent Form. Signed consent forms for all children must be kept on record, and updated according to current information.

d) Emergency medication must be kept safe, secure but quickly accessible in an emergency.

e) Healthcare professionals administering emergency medications must have the appropriate training to do so, and must ensure that they are permitted to do so under their scope of practice and privileges granted to them by their facility's privileging committee.

Medication storage and access:

1. School Nurses must only store, supervise and administer medications that are registered with the Dubai Health Authority (DHA).
2. All medications must be stored in the designated medication storage area (cupboard in the nurse office or medication fridge).
3. Storage areas must be kept locked at all times. Keys remain the responsibility of the nurse with special access arrangements when she is not available.
4. Emergency medication should be quickly available when needed.
5. Medications must be stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which it was dispensed.
6. Large volumes of medications must not be stored.
7. Check the medicine stock and expiry date.

Access to medication:

1. The medications are only accessible by the nurse/school physician
2. All emergency medications must be readily available for children and should not be locked away but kept in a safe, secure, accessible place.

The school administration and nurse must make special access arrangements for emergency medications

Disposal of Medication and Equipment:

- Ensure safe disposal of sharps in accordance with the Safe Handling and Disposal of Needles and Syringes guideline of Dubai Health Authority.
- Dispose of unused and unclaimed medication by:
    - advising the parent/carer to collect the medication from the school, or
    - advising parents/carers that unclaimed medications will be returned to a pharmacy to be disposed of through the Returning Unwanted Medicines policy.

Return or disposal of Prescribed Medication:

1. Medication should be returned to the student's parents/guardians when:
    1.1 The course of treatment is complete;
    1.2 Medication labels become detached or unreadable;
    1.2 Prescription instructions are changed;
    1.3 The expiry date has been reached;
    1.4 End of school term/year.

2. Returning medications to parents:
    2.1 Send parents a request to come and pick up the medication.
    2.2 Medications returned to parents must be documented on the student medical record, including name of medication and return date.
    2.3 Obtain the signature from parents/guardian receiving the medication as well as the school staff member returning the medication.

3. Disposal of medication:
    3.1 Medications that cannot be returned to parents/ guardian must be disposed by the end of the school year.
    3.2 The following is the procedure for disposal of medication:
        3.2.1 The School Clinic and healthcare professionals employed by it must dispose of medication in accordance with the DHA Policy on Medical Waste Management.

3.2.2 The date the medication is disposed including name of medication should be documented in student medical record.

3.2.3 The signature of the person disposing of the medication and the method of disposal should be documented in student medical record.

Medication Errors :

- If the incorrect dosage of medication or the incorrect medication has been administered to a student:
    - if the student has collapsed or is not breathing, phone 998 immediately (including mobiles), request ambulance services and follow the advice given
    - if there is no immediate adverse reaction, phone POISONS INFORMATION CENTRE on 131 126 and follow the advice given
    - record the incident of incorrect dosage or incorrect medication as a 'Near miss' (if demonstrating no side effects) or 'injury illness' (if demonstrating side effects)
- Notify the principal and the student's parent/carer of all medication errors (e.g. missed dose, dose refusal, incorrect dosage, and incorrect medication).

Response to Side Effects :

- If the student has collapsed or is not breathing after receiving medication, immediately phone 998 and follow the advice given
- If the student presents with side effects (atypical symptoms or behaviors), advise the parent/carer so that they may seek medical advice, notify the principal and record any event related to side effects of medication in student records.
- When medication is stolen or misused, or diverted from the person to whom it was originally prescribed, notify the school medical team, supervisors and administration.

3. SCOPE

This policy applies to Dubai National School - Dubai.

4. TARGET AUDIENCE

Registered School Nurse, Parents and School

Administration.

Notification of Parents Policy

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician

Reviewed by : Rabab Ali –Recent school physision

Approved by: Mr.Malek Daradekah- School Principal

Issue date: September 2025

Purpose:

to set forth standards to follow in the event that parents need to be notified by the school clinic staff.

Policy statement:

To ensure that we have clear and direct communication with the parents for the wellbeing of their child during school hours.

To ensure that parents provide updated information about the health of their

child. To ensure a safe and healthy environment for all students and staff

members.

Target audience:

School clinic staff. Teachers, administrative staff and parents.

Procedures:

All school health records and Electronic health records shall have the name and contact details – mobile phone number of parents/guardians.

The school database also maintains email addresses of all parents/guardians.

Parents may contact the School Clinic:

- In person visit
- Email: clinic@dnschools.com
- Telephone: 04 298 8555

Parents are advised to identify themselves by stating the name and year group of their child.

School Clinic staff may contact the parents/guardian via:

- Telephone
- Email
- School clinic notes
- Letters of notification

School clinic staff shall contact parents/guardians under the following circumstances:

- If the student is sick and the condition renders the child unable to complete the school day or puts other students at risk.
- If the child arrives sick to school, you shall be asked to take your child home.
- If the student is injured or sick, such that he/she needs transfer by ambulance.
- If the child is stable and ambulatory but needs a specialist opinion or radiological or other diagnostic tests and has to be taken to hospital.
- If there has been an incident that involves another student – bullying, playground disagreement, negligence etc.
- If the school health team has concerns about the wellbeing of the child.
- If student health records are incomplete.
- Email notifications shall be sent regarding upcoming health education and vaccinations.

You will be asked to pick up your child who has:

1. Fever – at or over 37.8C
2. Symptoms of COVID 19, or the student identify as close contact.
3. Diarrhea
4. Vomiting
5. Constant pain in the stomach
6. Sore throat with difficulty in swallowing
7. Severe itching or rashes
8. Difficulty breathing, chronic cough, and/or wheezing
9. Any other health condition which makes the students unfit to attend the school.
10. Any contagious conditions like Chicken pox, Scarlet fever, HFMD, Conjunctivitis (Pink eye) and Rashes of unknown origin.

- When a student returns back to school after recovery from a contagious disease, the student should report to the school clinic before going back to the class and should submit a letter from the physician stating that the child is no longer infectious.
- It is advised once contacted to collect your child, please do so immediately within 45 minutes or earlier. The School Clinic will provide immediate necessary First aid treatment and will contact parents if further evaluation and management is needed.
- In the unfortunate event needing an ambulance transfer, parents will be contacted by the clinic staff or administrative staff. Parents shall be provided information of the condition, destination hospital and the contact details of the staff accompanying the student. The staff shall remain with the student till parents/guardian arrive.

Readiness Plan and Emergency Policy

Prepared by: Ahmed Al rawashda– Executive manger

Approved by: Mr.Malek Daradekah- School Principal

Issue date: September 2020

The Dubai National School characterizes critical incidents as: sudden or unexpected events with the potential to cause serious physical harm, emotional trauma and / or stress, often resulting in a significant disruption to the school's operations and activities.

Critical incidents include, but are not limited to, the following:

- Fire / explosion
- Bomb threat
- Violent attack / intrusion
- Serious accident requiring hospitalization
- Unexpected death
- Missing child / abduction
- Widespread illness / outbreak
- Building malfunction / damage
- Extended power outage
- Severe weather

We will make every reasonable effort to prevent such incidents from occurring. In the unfortunate event that a critical incident does occur, the school will respond through the activation of clear, effective and regularly-tested critical incident management structures and procedures so as to:

- Ensure, to the extent possible, the health, safety and wellbeing of all students, staff, parents, visitors and external service providers under our care;
- Minimize any related physical damage to school buildings, facilities, resources and equipment;
- Communicate calmly and effectively with students, parents, relevant emergency service providers, and other key stakeholders during and following incidents, mindful of individuals' needs; and
- Return the school to its normal routines in a timely and organized manner

Lock Down Policy

Dubai National School represented by its Governing Board and School Board is applying a lock down policy to ensure the safety of students and staff are adequately protected when faced with any hazard inside and outside the school as students and staff may be locked within the building for safety purposes.

Lock downs are held twice yearly. Additional lock downs are held, if needed, to guarantee order and control under all school emergencies.

A record of the dates and times of lock downs are maintained in the school office. These drills are held at irregular intervals during the school day.

Advance notice of lock down is given to people in charge of the cafeteria, to all administrative offices in the building, and to the custodian. This advance notice is not given more than one hour before the drill. In the absence of advance notice, it is assumed there is a real emergency.

Lock down procedures are posted prominently in all school areas.

Objectives :

- To ensure a safe and secure environment for our students, Staff and resources.
- To establish protocols and procedures that effectively monitors and manages a potentially dangerous situation.

Implementation:

- The lockdown policy applies when students and Staff need to be locked within buildings for their own safety. This will usually occur if there is a dangerous intruder on school grounds, but may also occur in the event of a hazardous situation such as a chemical spill or fire, which makes it dangerous for students, Staff and visitors to be outside. Copies of this policy will be disseminated via the school and Staff handbooks and via notices in the library, the school website and other appropriate areas around the school.

Authorized persons role:

If recognizing the situation calls for lockdown, the Principal or Authorized Person locks the office (closes the blinds), **sounds a uniquely and instantly recognizable alarm, and rings police as well as the Civil Defense Emergency and alert them as to the nature of the emergency**. The Principal or Authorized Person then assumes a lockdown position themselves in the office, while maintaining phone contact with police. Remaining in contact allows the police to be constantly updated on the situation. When police arrives, they will make contact with the Principal or Authorized Person when the threat has been averted. When this occurs, the “all clear” is to be sounded.

- In the event of a building lockdown, it is mandatory that all students and adults remain in classrooms. Students and adults, who are outside but near buildings, are to move into the closest occupied classroom.

- Staff, who are not teaching at the start of a lockdown, should lock the Staffroom or if in the grounds, go to the nearest classroom. In doing so, Staff should check outside areas for students and direct them to the nearest classroom, and invite in known visitors. Known visitors are recognized by the wearing of a **"Visitors Pass".** If children, a class or an adult is caught outside the classroom when the alarm is sounded, they must immediately get in to the closest room or building before that room is locked down, and join whoever is in that room.
If people are on the oval, they need to approach the nearest building, and get into that room before it is locked down.

- Close the curtains or blinds in the room if they are available. Position students on the floor against the wall adjacent to the door or in the most non-visible positions. This procedure must be tailored for the individual rooms being used.

- Do not allow students to use mobile phones.

- Insist that students and adults remain quiet.

- **No one is to answer the door under any circumstances**.

- Remain in this position until "all clear" is announced.

- After the "all clear" is sounded, the Principal can authorize the contacting of parents, if appropriate.

For parents:

Information about the school's lockdown procedures will be disseminated to all parents via the school's website. On the very rare occasion a lockdown is called, Box Hill High School will endeavour to carry out the policy as set. If lockdown occurs, parents will be notified as soon as it is practical to do so. However, parents are requested not to come to the school, as **students will not be released to parents during lockdown**. Parents are also asked not to call the school, as this may tie up emergency lines that must remain open. Parents should not expect their child to call them nor should they call student mobiles, as the Lock-down situation requires silence in order not to alert an intruder to the presence of students and Staff in classrooms. If your child stay at school was extended beyond the regular time you will receive information about the time and place that you can pick up your child.

Please be assured in the event of a lockdown that the overriding consideration for the school is the **safety and well-being of your child and school personnel**.

Intruder procedures:

- **All visitors to school must first register at the General Office, receive a "Visitors Pass" to be worn and clearly displayed. Any visitors without the school identification are intruders and can be asked to leave the school premises and property immediately or asked why they are coming to school .**

From time to time, Staff may be confronted by an intruder in the school grounds, or may need to confront somebody who does not appear to have any legitimate reason for being on site.

- In such a case, they should use the following procedure:

- **When alerted to the presence of an intruder, take another Staff member with you to help deal with them.**

- **Ask a third Staff member who is not involved to call the Office.**

- Attempt to direct the intruder to the car park. Use casual conversation and/or body language to calmly direct the situation.

- If the intruder refuses to cooperate, do not escalate the situation. Leave and contact the Principal to have the police called.

- If the intruder shows a weapon, assure him/her that it is not necessary for him/her to consider using the weapon. At this point back away slowly and leave the area and as soon as is safe to do so report the situation to the Principal, to have the police called immediately.

Emergency patient transfer and referral policy

Policy in transferring and sending students to home/clinic/hospital during:

- **Non-emergency cases:**

  After assessment by the doctor/nurse, if the student is not fit enough to remain inschool, then:

  - Parents/Guardians will be informed via telephone or e-mail and asked to collect their child from the clinic
  - An e-mail will be sent to the teacher in charged to inform her/his that thestudent will be going home
  - An e-mail will be sent to the reception stating the student name and class aswell as the person who will pick up the student
  - Parent/Guardian who will pick up the student, will sign the Send Home logbookin the clinic and the early departure book in the reception.

- **Accidents/Emergencies (Minor/Major)**

  After assessment by the doctor/nurse, if the injury incurred by the student needsfurther hospital/clinic evaluation and management, then:

  - Parents/Guardians will be contacted by the nurse/doctor immediately and willbe advised to collect student as soon as possible
  - A referral note will be given to the parents/guardians to be presented to theirclinic/hospital of choice
  - E-mail will be sent to the teacher in charge and in the reception to inform themthat the student will be going home
  - Parents/Guardians who will pick up the student will sign the Send Homelogbook in the clinic and early departure book in the reception

  If the parent/guardian will request an ambulance, then the nurse will call 998. Security personnel and the reception will be notified that an ambulancewill be coming to pick a student

- **Life threatening Accidents/Emergencies (Serious)**

  After assessment by the doctor/nurse, then:

  - Nurse will immediately call EMS or 998 and she will give the details regardingthe accident
  - Parents will be immediately notified regarding the details of the injury, thecourse of action taken and the hospital/clinic where the student will be brought

- Parents will be immediately notified regarding the details of the injury, thecourse of action taken and the hospital/clinic where the student will be brought
- Student will be transported immediately to the hospital where the school hasan affiliation
- School nurse or other available school personnel will accompany the student to the hospital and wait for the parents/guardians to arrive
- An incident report will be filed.

SAFE USE OF CHEMICALS USED FOR INFECTION CONTROL POLICY

Regular cleaning and disinfection of schools is an important part of preventing and minimizing the spread of COVID-19 in the school environment.

This policy is designed to manage the cleaning and disinfection Chemicals of school. It should be used in coordination with the school's Health and Safety Policy.

- The school's Cleaning Risk Assessment will be reviewed monthly.
- Appropriate Personal Protective Equipment (e.g. gloves, goggles etc.) provided and worn If instructions on cleaning chemicals recommend that.
- Products must be diluted as directed.
- Cleaning products must not be mixed.
- The school will be cleaned according to the School Cleaning Schedule.
- Cleaners will refer to COSHH (Control of Substances Hazardous to Health) Regulations for further guidance on cleaning chemicals.
- Avoid using products with a strong scent that may trigger asthma and allergy complaints.
- All containers are clearly labeled.

Hygiene Officer:

Key roles and responsibilities:

- Responsible for the day-to-day implementation and management of the Cleaning
- Organizing a scheduled deep clean annually or in accordance with the cleaning schedule.
- Ensure that the products are stored properly in a secured area away from students, with other compatible chemicals.
- Pay close attention to hazard warnings and directions on product labels.
- Reviewing the proper protective equipment needed, such as gloves and goggles, and providing the proper protective equipment to the workers using the cleaning product;
- Ensuring that all containers of cleaning products and chemicals are labeled to identify their contents and hazards.

Storage areas:

- Chemicals stored appropriately and access restricted when in use.
- Cleaning materials, equipment and chemicals will never be left unattended and will be locked away in secure cupboards when not in use.

SAFETY DATA SHEET

Product	Chemical ingredients	Symptoms and health problems that may be caused	First-aid measures	Recommended PPE
Antiseptic Disinfectants	Chloroxylenol Pine oil Isopropyl alcohol Castor oil soap Caustic soda solution	Ingestion Eye contact	If swallowed, wash out mouth and drink plenty of water or milk. If contact is made with eyes, wash thoroughly with cold water. In both cases consult your doctor.	Wear gloves.
Hand Washing Soap	Sodium Lauryl Ether Sulphat. Coco Amido Proply Betain. Cocamide Diethanolamine Aqua	Eye contact	Flush the eye with water	
Hand sanitizers	Garbomer Ethanol Glycerin	Ingestion.	- Put them in the recovery position- if they pass out and vomit, they won't choke - Call an Ambulance	
Lemon disinfectant Floor Cleaner	Isopropyl Alcohol BKC, NP 9	Skin Irritation	flush thoroughly with water	Wear Gloves

Bleach	water, sodium hypochlorite, sodium chloride, sodium carbonate, sodium chlorate, sodium hydroxide	Splash eyes or skin Inhalation	Flood with water for 15 minutes. Remove to fresh air	Wear Gloves

Risk Assessment

Hazard / Risk	**Who might be harmed?**	**How might they be harmed?**	**What are the Normal Control Measures?**	**What, if any, further measures are required?**	**By whom?**		**Completed**
Use of cleaning chemicals / detergents	Cleaning staff Colleagues Students Visitors	-Irritation -harm to eyes -Skin sensitization -Poisoning - Inhalation	• Less hazardous chemicals used wherever possible. • Material Safety Data Sheet for substances obtained from supplier and guidance followed. • Appropriate Personal Protective Equipment (e.g. gloves, goggles etc.) provided and worn where identified in a COSHH assessment. • Chemicals stored appropriately and access restricted when in use. Activities				

		- Ingestion	undertaken outside of school hours where possible. ● All spillages are cleaned immediately. ● All containers are clearly labeled.				

SERVICE DESCRIPTION AND SCOPE OF SERVICES

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician

Approved by: Mr.Malek Daradekah- School Principal

Issue date: September 2025

VISION:

To provide international standard and highest quality of preventive, curative and rehabilitative services for our school pupils and special need children.

OBJECTIVES:

1. To monitor the health status growth and development of every students regularly in order to detect early signs of diseases and health problems that adversely affect the learning process.

   → Conducting comprehensive medical examination plus height and weight charting as per school health record for all students

   → Screening the students for head lice upon request by class teacher or supervisor, sending letters to inform the parents

   → Recording all findings in the school health records, specifying any defect or abnormality.

   → Refers and follow up students with abnormal findings to health center/clinics or to their respective family physician for further investigation and care. Inform the parents on “parents notification form”.

2. To provide first aid or emergency care to school population.

   → To support the aim of providing best quality of services regarding first aid to students with injuries or other condition that requires immediate attention. First Aid is one of the mandatory courses that we must comply to in cooperation with DHA.

   → Applying emergency procedures for injury or illnesses.

   → Identify the cases that require calling for emergency

   → Following the right steps in calling the EMS (Emergency Medical System).

3. To prevent and control communicable diseases in the school. Our aim is to safe guard the health of every students or employee who has contact or been exposed to communicable disease and prevent spreading the disease to other personnel.

   → To identify the communicable diseases. Providing orientation, education and resources materials for school personnel regarding the management of communicable diseases.

   → Educating of parents to keep the children home when there are signs and symptoms of disease to secure appropriate treatment.

   → Immunization campaigns according to DHA guidelines.

   → Keeping record regarding non-immunized children.

   → Notification through DHA website for any modifiable diseases and this is based on the rules and regulations whether immediate notification or flexible.

→ Upon case identification an awareness session has to be delivered to all classmates and some health education materials provided accordingly.

4. To provide and maintain safe and healthy school environment.

   → Insuring that the school should be clean and have adequate lighting and ventilation.

   → Early detection that all the school facilities have adequate space for the activities performed.

   → Early detection for any source of hazard that might lead to slipping and falling. Electric shock, burn, poisoning or other trauma.

   → All equipment used in student care or emergency situation should be inspected, maintained and tested on regular basis.(eg.O2 cylinder, AED)

   → Insuring that the school should have appropriate fire fighting equipment and evacuation plan.

   → Insuring that the school environment should be kept free of insects and rodents.

   → To insure that clinical and non-clinical waste should be collected separately and disposed properly. A yearly contract has been signed with a medical waste company.

   → Cleaners should abide to infection control policies.

5. To plan and implement health education programs that will assist every student to develop healthy lifestyle for the promotion and maintenance of good health.

   → Assessment and identifying the needs of the student what they need to know.

   → Choosing the teaching method which are appropriate (demonstration,discussion,role play)

   → Actively engagement of parents and other care givers in promoting healthy values and support healthy behaviors.

   → Arrange the venue, date and time to conduct the health education session.

6. To provide Basic Eye Screening Services to the students according to DHA guidelines.
7. To develop and promote awareness of the licensed school doctor/nurses of their responsibilities in order to enable them to effectively implement the school health program in the school.

Staff plan, staff management and clinical privilege

Prepared by: Rogaia Abdalla Ahmed – Previous School Physician

Approved by: Mr.Malek Daradekah- School Principal

Purpose:

Appropriate staffing is necessary in order to provide safe care and ensure quality outcomes, and is accomplished through understanding and considering the complexities of the role of the school nurse and school doctor and the care that is provided.

The role of school Physician:

- Not prescribe medication to students for use after school hours.
- Not prescribe Controlled Drugs (CD) and Semi Controlled Drugs (SCD) for students.
- Be responsible to develop Individualized Healthcare plan (IHP)
- Advise parents to keep the student at home during the communicable period of any disease
- Assess, plan and implement Individualized Health Care Plan (IHCP) and Emergency Health Care Plan (EHCP) for children with chronic illnesses and children with of determination, including allergies.
- Maintain effective relationship with parents, families and local community.
- Refer as appropriate, children assessed and found to have psychological or emotional disorders like anorexia, self-harm, addiction, abuse etc.
- Participate in planning and conducting health education activities in the school.
- Act as a counsellor in guiding the school administrators, teachers and parents to discuss any health problem of a student, as required.
- Submit reports to HRS and SHS, PHPD in a timely manner.
- Update knowledge, skills and practice related to school health.
- Draft the School Health Service Plan and review it annually

The role of school Nurse:

- Liaise with and support the school staff in implementing the school health activities.
- Ensure that all medical supplies and equipment needed for first aid and emergency care are available and in working condition.
- Assess needs of students (examine/observe/measure vital signs) who require first aid care and administer appropriate care.
- Refer to the Physician for advice when needed.
- Inform parents, through the school authorities, about the student's condition.
- Transfer the student to the Emergency department of the nearest hospital as per the standard procedure in cases required.
- Provide privacy to the student during medical examination.
- Monitors students who are frequently absent from school due to health related problems.
- Coordinate with classroom teachers to:
- Observe and report student with unhealthy practices.
- Refer promptly student who are showing signs of visual, hearing and learning difficulties.
- Refer student with fever, rashes or unusual behavior.
- Report presence of potential hazards in the classroom.
- Motivate student to enhance healthy practices.
- Report sanitary and safe environment deficits to the school administration.
- Measure height and weight of students and calculate BMI on an annual basis for all students.
- Refer to the school health physician, students whose growth and development measurement show deviations from normal.
- Plan and conduct health education sessions for parents of students with chronic illness to assist them to understand their child's disease and needs.
- Conduct health education sessions to meet the learning needs of students (e.g. topics on: personal hygiene, proper nutrition, accident prevention etc.).
- Plan the vaccination schedule of every student as per DHA Immunization Guidelines and conduct vaccinations under the supervision of the school health physician.
- Update HASANA system as required .
- Update knowledge, skills and practices related to school health requirements

In case the employed RN is on leave:

A Temporary Nurse shall be arranged by the management of the school from an agency approved by HRS, DHA.

STAY AT HOME POLICY

Working from Home Policy

As part of Dubai National School's continued response to the novel coronavirus (COVID-19) pandemic. Our School policy includes the measures and precautions we are actively taking to mitigate the spread of COVID-19. You are kindly requested to follow all these rules diligently to sustain a healthy and safe workplace in the school. It's important that we all respond responsibly and transparently to these health precautions.

Policy elements

We outline the required actions staff should take to protect themselves and their co-workers from a potential COVID-19 infection, without fear of job loss or other consequences.

Sick leave arrangements:

- If you have cold symptoms, such as cough/sneezing/fever, or feel poorly, request sick leave or work from home.
- If you have a positive COVID-19 diagnosis, you can return to the school only after 14 days quarantine, with a negative PCR result.

Work from home request:

- If you are feeling ill, but you are able to work, you can request to work from home.
- If you've been in close contact with someone infected by COVID-19, with high chances of being infected yourself, request work from home.

You can return to the school only after 14 days quarantine, with a negative PCR result.

Work from Home Request Form

Date:			
Name:		**ID #:**	
Position:	**Department**:		
Mobile #:			

Reason of requesting to teach online :
❒ COVID-19 test result is positive ❒ Suspicious in case of being exposed to COVID-19 ❒ Other: ……

Remarks or explanation:

❒ **I agree that I am providing accurate health information**.

Signature:……

Administration use:
❒ Employee performance can be monitored/tracked by during work from home practice. ❒ The request is approved. ❒ The request isn't approved. ……. …… ……... HOD`s Signature Supervisor`s Signature Principal`s signature

Sick Leave Form

Date:			
Name:		**ID #:**	
Position:		**Department**:	
Mobile #:			

Symptoms of COVID-19:	
❒ **Fever > 37.5 °C**	❒ Shortness of breath
❒ **Cough**	❒ General aches, pain

Remarks or explanation:

Have you or someone you have been in close contact tested <u>positive</u> for COVID-19 in the last 14 days?

❒ **Yes** **When and Where?**..... .....

❒ **NO**

Signature:.....

Administration use:

❒ Approved

Substitute teacher:……. Number of periods:……..

Remarks:

……. …… ……..

HOD`s Signature Supervisor`s Signature Principal`s signature

STUDENT EXAMINATION AND SCREENING POLICY

Scope

This policy is applied to Dubai National School-Al twar

Purpose

The purpose of the school screening program is to recognize children who have early signs of health problems. School screening can help spot disease conditions that students may have. Even if they look and feel well early detection makes early treatment and good control of the condition possible. Early treatment prevents the risk of serious health problems.

School screening program our school conducted by the school nurse as well as by school doctor according to Dubai Health Authority Guidelines.

The Dubai Health Authority recommends that the following screening tests are done .

Appendix 1:

Mandatory Screening

All students from Grade 1-12 are required to receive the following screening test s on an annual basis.

This screening is conducted by the School Nurse at the school.

Grade	Screening Tests
1-12	* Medical history including any history of chronic disease . * Height and weight, Body mass index (BMI) .

Comprehensive Screening programme:

(Highly recommended)

In addition our school is highly recommended to provide the comprehensive screening program to the students.

This includes:

Grade	Screening Tests
KG 1	* Hearing screening . *Vision screening. * Medical check up by doctor. * Oral health screening.
Grade 1	* Hearing screening . *Vision screening. * Medical check up by doctor. * Oral health screening
Grade 4	* Hearing screening. *Vision screening. * Medical check up by doctor. * Oral health screening.
Grade 7	* Hearing screening . *Vision screening. * Medical check up by doctor. * Oral health screening.
Grade 10	* Hearing screening . *Vision screening. * Medical check up by doctor. * Oral health screening.

***If a child joins the screening program for the first time, all catch up screening tests should be done**

Appendix 2: Consent:

- Parent consent must be obtained for all screening tests
(BMI, vision and hearing tests: A letter will be sent to parents explaining that those tests will be performed unless the parents refuse through a letter or a phone call to the school.

-Consent for physical examination, and dental screening to be performed on the basis of parents signed consent form.

Data recording and reporting

1.DHA requires all licensed healthcare professionals to submit data on healthcare delivery and health statistics. Reporting of data under this standard must comply with the DHA Reporting of Health Statistics Policy.

2.School Health screening data should be recorded in the student file. The templates included in this standard are advisory in this regard.

Standards

1. All DHA licensed healthcare providers in Dubai are authorized to provide screening for school students provided they meet this Standard
2. The screening tests described in this standard can be performed by a trained DHA licensed school nurse, physician or allied health professional specializing in the screening field.
3. Screening staff (school nurses, physicians and dentists) should refer all students with positive screening results by sending a referral letter to parents and encouraging them to get follow up within a month provided the case is not urgent.

TARGET AUDIENCE

The school nurse/doctor, administrations, supervisors teachers, teaching assistants, pupils and volunteers.

STUDENT CONFIDENTIALITY AND PRIVACY POLICY

Confidentiality Policy and Procedure

Objective: Dubai National School-Al Twar has a strict policy on protecting the privacy of all students, parents, and staff members by following procedures accordingly when supplying any records of the students, parents or staff members at DNS. The objective of this policy is to protect all parties attending the school on a daily basis as well as the staff and the school's reputation.

Policy: We diligently safeguard and maintain confidentiality of all personal records for all students, parents, and staff of Dubai National School.

Procedure:

To uphold the policy we must ensure confidentiality of the following:

- Contact Details and Personal
- Information Medical Information
- Photograph
- y Incident
- Reports
- Security Camera Footage

Student Development and Progress Records

The policy confidentiality applies to the following direct or internal parties:

- Students and their parents and
- family Staff Members
- Services
- providers

Visitors

To uphold the policy we must ensure the following:

General

- All documents such as registration forms, medical records and students' reports must be kept safe for at least 1 year1 at a designated area selected by the management/or online
- All electronic records may be used by administrative staff for administrative tasks on a daily basis for the purpose of fulfilling only their duty as administrative personnel and not for personal use or any other practices outside of the school
- All electronic records must at all times be stored securely, password protected to prevent any criminal activity that may lead to loss or unauthorized access to theschool records
- Records such as contact details, photographs and camera footage or video recordings may be provided to trusted third party service providers to improve the services to the clients of the school by utilizing the software or service provided by the services provider. The service

providers are required to keep the personal information safe and secure. These third parties are only permitted to use the personal information for the purposes as specified by the school

- Records such as contact details may not be shared with other parents without consent of the parent in question
- Personal contact details not to be published on the website or any social media
- The school may only supply personal information and contact details to external parties with prior approval of the party involved or when required by law with direction from the courts or other authorities
- Staff are not allowed to take any documents out of the school premises

Medical records of students attending the school

- Medical information of students or staff to be protected and not shared with other parents or staff that is not directly involved
- Any personnel, including the health care providers, who release confidential health care information from the school health records, shall document each such release in the health records by indicating the following:
  - Date of Release
  - Description of the information released
  - Name(s) of the person(s) to whom the information was released to
  - Reason for the release of information
- Any person suspected of violating the confidentiality will have to follow penalties pertaining to the same as per Decree No 32 of 2012 which can be accessed at www.dha.gov.ae
- Medical records may only be released with prior approval of one of the parents
- Staff are not allowed to take any medical documents out of the school premises. The school doctor is not allowed to take any medical documents out of the school.

Photography:

- All photography taken of the school, personnel, students, visitors, parents or service providers on the school premises or events hosted or planned by the school may only be used by the school for purposes such as marketing, school and informative correspondence with prior consent of the party(s) involved
- Photography taken by a service provider will stay the property of the service provider given that the service provider has been granted permission by management to take photographs at the school or at an event arranged or hosted by the school
- Photographs may be captured at an open event by spectators such as parents or family members and may only be used as memoirs of the event and may not be used to harm or negatively affect the school's reputation
- Staff are not allowed to take any photographic material out of the school

School incidents on the premises:

- Any information of an incident or daily activity on the premises that may harm the reputation of the school, may not be shared to a party outside of the school by any staff member other than the party directly involved in the incident or parent of the student attending the school unless required by law or with direction from the courts or other authorities
- Incident reports must at all times be supplied to a parent to read through and sign before leaving the premises to ensure that they are aware of the incident reported. If in the case of collection by any other person other than the parent, the parent must be informed telephonically and also receive the written report electronically via email
- A school incident reported by a staff member must be reported within 24 hours of the incident to the parent by the supervisory staff member that was present or overseeing the activity at that time
- All medical treatment or medicine administered by the school nurse or supervisory staff member must be reported to the parent at collection and should also be included in the incident report for record keeping purposes
- Staff are not allowed to take any reports out of the school premises

CCTV Camera Footage:

- CCTV Camera footage is only available to managerial staff of the school and may not be accessed by any unauthorized person without the written consent of management or when required by law with direction from the courts or other authorities
- CCTV footage is stored on the school server for a limited period of time. The school may not be held liable for any loss of such records due to negligence or malfunctioning of the security footage. The school will at all times strive to ensure the proper functioning of the security cameras system for record keeping of the daily activity at the school
- The school reserves the right to deny access to this footage at its discretion

Student Development and Progress Records:

- Development and progress records of a student should be seen as confidential and private. Such records including portfolios, reports, and observations are to be kept under lock and key being accessible only to the relevant staff members
- These records may be shared among staff that work directly with the student, to improve the development of student accordingly and to ensure contributed efforts from all care takers in the classroom
- These records may be shared during parent meetings with the parent by the class teacher or supervisory staff member. Records may be shared to raise concerns with regards to the development of the student or for appraisal purposes whilst expressing compassion, care and love for the student. These meetings should be done privately at a set time arranged by the staff member and the parents
- Such records are not be shared with anybody other than the parents of the student

- No feedback (Verbal or written) regarding a student's progress is to be shared with anybody other than the parents. This includes the nannies, grandparents, and other caregivers unless written consent is given by the parents to share such feedback with them

Staff Records:

- Staff files containing personal information such as contact details, employment contract, passport copies etc should be kept under lock and key and accessible only to the authorized staff such as the HR and Management
- Staff information is not to be shared with unauthorized personal without prior consent of the staff
- Staff are not allowed to take any documents out of the school premises.

Student Health Education

Health Education:

is a comprehensive sequential KG/FS1 through Grade 12/ Year 13 instruction that build a foundation of health knowledge, develops the motivation and skills required of students to cope with challenges to health and provides learning opportunities designed to favorably influence health attitudes, practices and behavior that will affect lifestyles, educational performance and achievements and long-range health outcomes.

Procedure:

- To plan and implement health education programs that will assist every student to develop healthy lifestyle for the promotion and maintenance of good health.
- Assessment and identifying the needs of the student what they need to know.
- Choosing the teaching method which are appropriate (demonstration , discussion ,role play)
- Actively engagement of parents and other care givers in promoting healthy values and support healthy behaviors.
- Arrange the venue, date and time to conduct the health education session.

Health Education Program topics include but not limited to :

- Hand Hygiene Demonstration
- girls Breast Cancer Lecture/Sildes
- Healthy Nutrition Lectures/Slides
- Management of Diabetes Lecture/Videos
- Dental Hygiene Demonstration
- Boys Smoking and Drug Abuse Workshop
- Girls Puberty Changes Lecture
- Boys Obesity Demonstration
- Healthy Diet and Nutrition Lecture
- First Aid Demonstration

Immunization Policy

PURPOSE :

Immunization is a proven tool for controlling and eliminating life threatening infectious disease and is one of the most cost-effective health investments.

SCOPE:

This policy is applies to Dubai National School-twar

POLICY STATEMENT:

1. Parents are responsible for the following:

1.1. make sure your child has taken all required vaccines before starting school (childhood vaccination).

1.2. Follow the vaccination requirement based on your child's grade.

1.3. If your child has missed any vaccination before or after reaching school age, make sure to communicate with the school clinic.

1.4. Complete the consent form, sign and return it to the school clinic.

1.5. If you refuse the vaccination, the reasons should be mentioned clearly on the refusal form and medical report or previous immunization record must be provided to assess the vaccination status of your child. Exemptions are subject to approval form from the service provider.

2. School clinic will:

2.1. Conducts a vaccination program for students twice a year in liaison with DHA based on WHO recommendation. Find out the attached immunization schedule.

2.1. Assess the students' vaccination status and make sure it is up-to-date.

2.2. Identify students due for school-age vaccinations.

2.3. Provide parents with a consent form and information about the vaccine.

2.4. Assess the student's health and history of vaccination allergy

2.5. Record vaccination status in vaccination registration book with a track number that written in each students file.

2.6. Immunization notification letter will be sent to the parents following immunization.

2.6. Return the original vaccination card for all students by the end of each year.

2.7. Immunization adverse reaction will be observed and report on adverse reaction following immunization will be send to the DHA.

2.8. If the original vaccination record is declared or lost, school clinic requires a formal signed letter from the parents stating what vaccines have been given to the child and the dates of each vaccine or no objection to give vaccination in the school if the child is due.