



# المدرسة الهندية النموذجية الجديدة NEW INDIAN MODEL SCHOOL

رقم التصريح التعليمي ٢٠١٨٦، هيئة المعرفة والتنمية البشرية، دبي، ا.ع.م.  
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Affiliation Nos. CBSE: 6630009, Kerala Board: 43092 (Grade 8 to 10 ): 15004 (Grade 11 & 12 )



# HEALTH AND SAFETY POLICY 2023 - 24



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## HEALTH AND SAFETY POLICY

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Approved By	Principal
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Related Policies	

**Principal: Ms. Karen Robinson**



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- Risk assessment procedures
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  - Roles of concerned Parties in handling communicable disease in school
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- 12- School Transport Safety
- 13- Lab Safety:
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<b>Title of the Policy</b>	<b>HEALTH AND SAFETY POLICY</b>
<b>Statement of Intent:</b>	<p>It is a prime concern of New Indian Model School to take all possible measure to ensure the Health, Safety and Welfare of all students, staff and stakeholders whilst on school premises and whilst engaged in school activities off site. <u>We are committed to achieving legal compliance and the effective implementation of the school's Health and Safety policy by following PDCA management cycle.</u></p> <p><b>Plan</b> – What we want to do? <b>Do</b> – Implement our plan. <b>Check</b> – To see if the plan works. <b>Act</b> – To modify our actions accordingly.</p> <p>All Academic and administrative staff of NIMS at all levels within the school have a part to play in implementing policy, and it is therefore made very clearly that every person must comply with the policy and that serious breaches of policy may be treated as disciplinary offences.</p>
<b>Introduction:</b>	<p>Ensuring student safety has been part of the ethical framework for which all the members of the staff and students follow basic health and safety rules whilst engaged in school activity on or off the premises.</p> <p>The school is adapting to a period of considerable changes as well as continuing to meet existing challenges. Our approach is that we should endeavor to make, school as safe as s necessary, not as safe as possible. It also suggests a whole school approach, ensuring that facilities and activities are suitably safe – preparing children for adult life by teaching them to understand and manage risk.</p> <p>In addition to implementing general school guidelines,</p>



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	<p>Specific Health and Safety rules apply to individual departments. It is the responsibility of Heads of Department/Coordinators to ensure that these rules are shared with all relevant staff and students.</p> <p>Copies of Health and Safety rules specific to individual department are attached as appendices to this policy.</p>
<b>SMART Objectives:</b>	<p>For Health and Safety, NIMS has set the <b>SMART</b> objectives for meeting mainly the legal obligations, provision of a safe campus.</p> <ul style="list-style-type: none"><li>• <b>S.M.A.R.T.</b><ul style="list-style-type: none"><li>- <b>Specific</b> - a clear defined, precise objective.</li><li>- <b>Measurable</b> - it is possible to measure achievement towards the target; usually by quantifying the objective.</li><li>- <b>Achievable</b> - it can be done.</li><li>- <b>Reasonable</b> - within the timescale set and with the resources allocated.</li><li>- <b>Time-bound</b> - a deadline or timescale is set for completion of the objective.</li></ul></li><li>• To provide and maintain a safe and healthy environment throughout the school.</li><li>• To encourage Health, Safety and Security awareness among staff, students, parents and visitors to the school.</li><li>• To be proactive in taking measures to prevent unhealthy or unsafe practices.</li><li>• To ensure the provision of sufficient information, instruction and supervision to enable all students and employees to avoid hazards and contribute positively to their own health and safety.</li><li>• To ensure that all have access to health and safety training.</li><li>• To take necessary remedial measures in order to improve Health and Safety provision at the earliest opportunity.</li><li>• To formulate fire safety evacuation plan, conduct fire drills on regular basis, and lay down procedures to be followed in case of emergency and disasters.</li><li>• To ensure that Health &amp; Safety is regularly reviewed and</li></ul>



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<b>Operational Definitions:</b>	discussed. <ul style="list-style-type: none"><li>• <b>Attitude:</b> A person's point of view or way of looking at something; how they think and feel about it.</li><li>• <b>Control Measures:</b> Method or physical measures used to reduce or control risks arising from identified hazards.</li><li>• <b>Ergonomics:</b> The study of the relationship between the person, the job that they are doing, and the environment in which they are doing it.</li><li>• <b>Health:</b> A state of welling. [The absence of disease or ill health]</li><li>• <b>Hazard:</b> Something with the potential to cause harm.</li><li>• <b>Hazardous Outcome:</b> A description of how someone could be hurt or damage could occur as a result of interacting with the hazard.</li><li>• <b>Near Miss:</b> An event that result in no apparent loss.</li><li>• <b>Risk:</b> An evaluation of the likelihood of the hazard causing harm.</li><li>• <b>Risk Rating:</b> Assessment of the severity of the outcome of an event.</li><li>• <b>Risk Assessment:</b> A formalized process of identifying hazards, assessing the risk that they generate and then either eliminating or controlling the risk.</li><li>• <b>Residual Risk:</b> The level of risk remaining once control measures have been applied to reduce risks so far as is reasonably practicable.</li><li>• <b>Safety:</b> Absence of danger of physical harm.</li><li>• <b>Welfare:</b> Facilities for workplace comforts [Access to basic facilities]</li></ul>
<b>Useful Abbreviation:</b>	<ul style="list-style-type: none"><li>• <b>H &amp; S :</b> Health and Safety</li><li>• <b>D.S.L:</b> Designated Safeguarding Lead</li><li>• <b>M.S.D.S:</b> Material Safety Data Sheet</li></ul>



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	<ul style="list-style-type: none"><li>• <b>D.M:</b> Dubai Municipality</li><li>• <b>P.P.E:</b> Personal Protective Equipment</li></ul>
<b>Key elements of H&amp;S Management System in NIMS:</b>	<ul style="list-style-type: none"><li>• <b>Policy:</b> A clear statement is made to establish Health and Safety as a prime commitment of management at all levels of the school.</li><li>• <b>Organizing:</b> A framework of roles and responsibilities for Health and Safety has been created within the school from senior management down to the front line operational staff.</li><li>• <b>Planning and implementing:</b> Detailed arrangement is made available for the management of Health and Safety. Central to this idea is, the concept of risk assessment and the identification and implementation of safe systems of work and protective measures.</li><li>• <b>Evaluation:</b> Methods are devised to monitor and review the effectiveness of the arrangements put into place. This might be done reactively, e.g. by reviewing incident and ill-health statistics, or actively, e.g. by reviewing internal risk assessment or inspection report.</li><li>• <b>Action for improvement:</b> Any shortcomings identified by the review process is to be corrected as soon as possible by making whatever adjustments are necessary to the policy, organizing and arrangements for implementation.</li><li>• <b>Inspection [Audit]:</b> Arrangement is be made for the independent, systematic and critical examination of the safety management system by D.S.L. and other school leaders to ensure that all areas are working acceptably well.</li><li>• <b>Continual improvement:</b> Then intention is that the safety management system will not remain static but will develop over time to become increasingly appropriate and useful to the school that it exists to</li></ul>





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	serve.
<b><u>Organization Section:</u></b> <b><u>[Roles &amp; Responsibilities]</u></b>	<ul style="list-style-type: none"><li>❖ <b><u>Principal: [D.S.L.]</u></b><ul style="list-style-type: none"><li>• Ensures that there is an effective and enforceable policy for the provision of Health and Safety throughout the school, and that it is implemented.</li><li>• Oversees the annual policy review.</li><li>• Arranges for inspection, maintenance, and improvements necessary to sustain a safe and healthy environment for staff, students and visitors.</li><li>• Communicates Health and Safety issues to parents.</li><li>• Oversees appropriate Health and Safety training for staff.</li></ul></li><li>❖ <b><u>Administration Manager:</u></b><p>The School Administration Manager has overall responsibility for Health and Safety matters across the school. He is supported for the same by members of the Health and Safety Committee, who take responsibility of the same in specific departments of the school and overall campus in collective way.</p></li><li>❖ <b><u>Transport Manager:</u></b><p>Solely responsible for Fleet Management, day to day transport activities, complying RTA guidelines and other concerned ministry including Health and Safety in Transport section. [Refer to School Transport Policy]</p></li><li>❖ <b><u>Facility supervisor:</u></b><p>Fully responsible for Facility Management, general maintenance, building renovation, Waste Management, Crisis Management, Event, Security, Catering etc. according to school various policies,</p></li></ul>



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Government guidelines including Health and Safety in school campus.

## ❖ **Healthcare facility Officers [Doctors & Nurses]:**

Solely responsible for providing First Aid, vaccination, Health Guidance, Health Education, spreading awareness on Health, Hygiene, Happiness and wellbeing, complying DHA Guideline and other concerned ministries including Health and Safety in their area.

## ❖ **Head of PE department:**

Responsible for safety of all students participating for sports indoor and outdoor physical activities. They must provide sufficient training and guidance to students prior to begin the activity and ensure provisions for safety at playground.

## ❖ **Head of Science department:**

Responsible for lab safety for all day to day experiments and activities as mentioned ahead. Incharge person is responsible to follow checklist and provide PPE before each experiment.

## ❖ **Child Protection Officers:**

[Refer to Child Protection and Safeguarding Policy]

## ❖ **Head of Computer Department:**

Responsible for safety in Computer labs. Lab teachers must take of the safe use of equipment and electronic devices. Students must be protected from fire, bullying, incident or any hazard by Lab Teachers and they should be provided information of Ergonomics for using computers.

## ❖ **Schools extracurricular activities' coordinators:**

Responsible for safety of the students, involved in extracurricular and after school activities including field trips. They may seek support of the concerned member of the Health and Safety Committee.

## ❖ **NIMS Staff:**



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- Supervision of students in premises is executed by-
  - D.S.L. Team
  - DEIW Team
  - Head of Section - KG
  - Supervisor and Coordinators – KG Section
  - Head of Section – Primary
  - Supervisors and coordinators – Primary Section
  - Head of Section - Boys
  - Supervisors - Boys section
  - Head of Section - Girls
  - Supervisors -Girls section
- All members are expected to familiarize themselves with the Health and Safety procedures and preventive measures to avoid risk and hazard at workplace.
- Everyone has to follow the Health and Safety policy and should have knowledge of risk assessment and safety requirements.
- Ensure that Health and Safety regulations, rules, routines and procedures are applied effectively, including evacuation procedures, first aid etc.
- Ensure that students are effectively supervised.
- Ensure that machinery and equipment in their department are safe for the students.
- Ensure that no Electric room, Pump room and store room doors where tools, equipment and cleaning materials are kept, are kept under lock and key.
- Ensure that no access is provided for students towards the backside of school premises.
- Machinery are in working order and adequately guarded, and improper use of such tools and equipment are not allowed by the staff.
- Use the correct equipment and tools for the job and use any protective equipment or safety devices that may be supplied.



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	<ul style="list-style-type: none"><li>• Ensure that toxic, hazardous and highly flammable substances are correctly used, stored and labeled.</li><li>• Report any defects or shortcomings in the premises, classroom, equipment and facilities to the facility supervisor.</li><li>• Be proactive in taking steps to prevent unhealthy or unsafe practices, including ensuring that students are aware of relevant health safety considerations.</li><li>• Lost and found student's belonging, school asset, tools and equipment must be reported to facility supervisor.</li><li>• Create awareness among students and staff of Ergonomics.</li><li>• Use of alcohol or any other materials banned from the Government is also prohibited in school campus. In no circumstance, it is allow to consume or use for anything.</li></ul> <p>❖ <b><u>NIMS students:</u></b></p> <p>In accordance with their age and aptitude, students are expected to...</p> <ul style="list-style-type: none"><li>• Exercise personal responsibility for the health and safety of themselves and others.</li><li>• Follow the dress code consistent with safety and hygiene.</li><li>• Follow all the health and safety rules of the school and in particular the instruction to staff given in an emergency.</li><li>• Use properly, and not willfully misuse, neglect, or interfere with facilities or equipment's provided for their health and safety.</li></ul>
<p><b><u>Arrangement Section:</u></b></p> <p><b><u>[How to deal with Health and</u></b></p>	<p>❖ <b>REPORTING ACCIDENTS:</b></p> <p>All accidents to staff, students or visitors must be reported, in writing, using the incident reporting form. The completed form must be filled up by the reporting staff member and a copy should be given</p>



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## Safety Issues?]

to the Health and Safety convener.

### ❖ INTERNAL RISK ASSESSMENT:

Risk assessment is a careful examination of what could cause harm to people so that decision can be made about what is reasonably practicable to reduce or prevent harm. Risk assessment should be carried out for any planned activity not covered by existing procedures. In addition risk assessment is an ongoing process in specific areas of the school.

### ❖ RISK ASSESSMENT PROCEDURE:

To access risk specific steps should be followed.

- Identify possible hazards. A hazard is anything that has the potential to cause harm.
- Decide who might be harmed and how they might be harmed.
- Specify the existing control measures we have in place.
- Evaluate the risk level based on the currently existing controls. The risk level is evaluated using the risk matrix to identify whether the current control measures are suitable and sufficient in reducing the risk to the lowest possible level. It is necessary to determine how likely it is that the harm will occur with the existing control in place and what the likely severity will be.
- Assess the existing controls based on the calculated risk level. The existing controls are not adequate if, a HIGH risk level has been rated or may not be adequate if a medium risk level has been rated.
- Plan action to be taken to reduce the risk.
- Implement additional control measures where possible and practical.
- Review and update the risk assessment.

### ❖ INTERNAL RISK ASSESSMENT FORM:



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[Refer <b>NIMS Risk Assessment Policy</b> ]	
<b>What measures are in place to control Health and Safety risks?</b>	<ul style="list-style-type: none"><li>❖ <b><u>SAFETY WHEN ARRIVING AT AND LEAVING SCHOOL:</u></b><ul style="list-style-type: none"><li>• Students arriving at and leaving from the front of school are supervised by members of staff in addition to the security team, who help to regulate the flow of traffic.</li><li>• Gates and doors at the back of the school are closed to prevent students and parents walking in the way of buses leaving the school at 1.20pm.</li><li>• The gates and doors are not reopened until the last bus has left the school.</li><li>• Staff are on duty at both gates to ensure the safety of students and parents when arriving and leaving the school.</li></ul></li><li>❖ <b><u>SCHOOL TRANSPORT SAFETY:</u></b><ul style="list-style-type: none"><li>• Students are assigned to specific buses for travel to and from school.</li><li>• Register of each bus, including details for parents are held by the conductor and supervisors.</li><li>• Students from KG and Montessori are accompanied to the buses by teachers and conductors.</li><li>• Staff are on duty to supervise students boarding of buses.</li><li>• Students' attendance on school transport is recorded on an appropriate registers by supervising staff conductors and passed to supervisors.</li><li>• In case of school visits, students are assigned to specific busses, and a register for each bus is held by the supervising staff member.</li><li>• Copies of register are retained at school.</li><li>• In the case of visit all students will be collected from school and returned to school, except were parents are given written notification of other</li></ul></li></ul>



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arrangements as part of the organization of trip.

- Students will not be allowed to leave the school unsupervised, or to return home by any other means other than school transport unless parents have requested this in writing in advance of the trip.
- All students are required to wear seat belts whilst on school transport.

[Refer to **School Transport Policy**]

## ❖ **SAFETY DURING ENRICHMENT ACTIVITIES AND FIELD TRIPS:**

- The activities coordinator is responsible for ensuring that arrangements for extracurricular activities and field trips according to the KHDA regulations.
- The activity coordinator is responsible for ensuring that proposed venues and activities are safe, facilities are adequate and appropriate for the students.
- It is advisable to send school clinic's nurse along with the portable first aid kits along with the students for any field trips.
- A register is held by the supervising member of staff for all participating students in off-site activities.
- When using the school transportation specific bus is assigned to each student along with their emergency contact no.
- For any filed trip, all students will be collected from school and dropped back to school only, except written notification obtained in prior from the concerned parents.
- Students will not be allowed to leave the field trip in between unless parents receive child personally



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for any personal issue with written request.

## ❖ **FIRE SAFETY:**

- In the event of a fire or other emergency, the fire alarm will sound which is under observation with 24X7, Dubai Civil Defense. In charge staff should instruct students to stop the activity and safely rush to the designated assemble point by using the nearest exit #.
- Class Teacher or concerned staff must leave last after ensuring that no student left behind but must not delay evacuation.
- Student not in class should immediately leave via the nearest fire exit and then join their class row at the assembly point.
- Class teachers should take out the register if they have it in their possession and call the register ensuring that each pupil answers his / her name individually.
- Anyone can call for emergency services in order to obtain quick service but must coordinate with Facilities Manager subsequently for further legal formalities.
- The School Evacuation Team is responsible for conducting a staff register.

[Refer to **Fire Safety Policy** and **Campus Evacuation Policy**]

## ❖ **SCHOOL SECURITY:**

- Security at the visitors entrance, should maintain the visitors record properly.
- Security should not allow any student to go outside the school campus without the approval slip, duly signed by the Supervisor or HOS during the school hours.
- He should help the own transport students





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(walkers) to cross the road through the zebra cross during the dispersal.

- Security should control the traffic nearby the gate and use signal baton.
- Security should help the own transport students in proper and safe way while they are going out.
- Security should have proper uniform provided by the school and must wear phosphoric [green] jacket as per the ministry guidelines.
- Security must report the bullying or abuse case if observed to the Facility Supervisor or Manager.
- Security must abstain from talking to the stakeholders in order to avoid distraction from the duty.

## ❖ **SCHOOL CANTEEN:**

- The Admin manager is responsible for overseeing the food safety and hygiene of the canteen as per DM guidelines.
- Canteen staff undergo training and follow strict rules in terms of cleanliness and hygiene.
- Canteen staff must wear hair covers and protective gloves when dealing with food products.
- Canteen staff must record the temperature of each food packet and maintain temperature chart for all refrigerators.
- Any remaining perishable food is discarded at the end of the day.
- All food product that need refrigeration are kept in appropriate temperature [must not exceed 5 cl].
- Must declare the ingredients of the food and rate each product.
- Must obtain allergy policy provided by the concerned supplier.

## ❖ **PLAYGROUND SAFETY:**



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- To ensure that there is no sharp edged object at play area and all sports equipment are well maintained.
- The technician and physical education teacher checks playing equipment and products regularly.
- A suitable environment is provided to avoid inconveniency for the students and staff.
- When new equipment is purchased, it is the responsibility of the department to ensure that it meets with educational standards. Instillation of such equipment is made as per user's manual provided by the company and complying H&S standards.
- To ensure that the play area and walking area is monitored with CCTV camera.

## ❖ **WATER SAFETY:**

- All building area, water dispensers are available to provide drinking water for students.
- Filters are replaced on regular basis and all coolers deeply cleaned every month.
- Water tank cleaning should be on contract base duly authorized by DM and every six monthly all water tanks should be disinfected as per the norms.
- Quarterly, samples of drinking water from all tanks to be sent for microbiological Lab tests; mainly Legionella and TBC and ensure it is pure to drink.
- All necessary records are kept with the Administration Manager.

## ❖ **EMERGENCY PROCEDURES AND DISASTER MANAGEMENT PLAN:**

- The Principal [D.S.L.] is responsible for declaring



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an emergency and leading the emergency operation and informing to the parents. He must ensure good communications and the activation of the disaster recovery plan.

- An emergency is defined as an incident, which causes or threatens death, injury or serious disruption to the normal working of the school and may require the assistance of outside agencies to ensure that the organization returns to normal. Emergency situations might include:
  - Adverse media publicity;
  - Outbreak of food poisoning/communicable disease;
  - A pupil goes missing;
  - Murder of a student or staff, serious road traffic accident,
  - Suicide of student or staff
  - Serious injuries /death on school trips
  - Terrorist or criminal activity, major arson attacks
  - Fire, flood, burglary, crime etc.

## ❖ **ASSEMBLY OF STUDENTS INSIDE THE BUILDING:**

- The incident or emergency may be outside of the building e.g. poisonous gas cloud. A group text is sent if the emergency requires student and staff to be secure inside.

## ❖ **MANAGING AN EMERGENCY AND ACTIVATING THE DIASTER RECOVERY PLAN :**

- The designated persons responsible for co-ordinating an emergency is the Principal. [D.S.L.]
- The D.S.L. is responsible for directing the



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	<p>situation.</p> <ul style="list-style-type: none"><li>• The Administration Manager is responsible for bringing the disaster recovery plan/resources to the designated person. A designated person must open a log of events/actions detailing what happens and where, date and times of action and by whom which includes the following as appropriate.</li><li>• Emergency evacuation or assembly inside the building including disabled persons on school premises</li><li>• 999 call to the emergency services and any other authorities involved in the incident: call out of relevant specialist personnel (internal and/or external) to provide assistance</li><li>• Inform NIMS Head Office of the emergency.</li><li>• Organize treatment of casualties.</li><li>• Direction of emergency services to relevant areas/individuals.</li><li>• Information to all staff on site and off site referring to the Emergency tree and staff signing in and out register.</li><li>• Commissioning an investigation / enquiry.</li><li>• Inform to concern ministry for legal compliance.</li></ul> <p>[Refer to <b>Campus Evacuation Policy</b> as well]</p>
<p><b><u>Healthcare Facility:</u></b></p>	<ul style="list-style-type: none"><li>• The clinic of the school plays an important part in ensuring the overall Health and Safety of staff, students and visitors at school. The school license is re- validated each year as per the DHA guidelines.</li><li>• <u>Refer Policies by DHA:</u><ul style="list-style-type: none"><li>- Immunization Policy</li><li>- Expiration date of open containers</li><li>- Infectious Disease Outbreak Policy at Private</li></ul></li></ul>



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## Schools of Dubai

- Circular Immunization
- Medication in Private Schools of Dubai.
- Referral from Private Schools in Dubai for medical causes.
- Safe handling and disposal of sharps
- Refer Polices by School Clinics:
  - Allergy Policy
  - Diabetic Care Management and Glucagon Administration Policy
  - Head Lice Policy
  - Immunization Policy
  - Health Examination and Screening Policy
  - Health Record Maintenance Policy
  - Infection Control Policy
  - Lost and Found Item Policy
  - Medical Hazard Waste Management Policy
  - Medication Policy
  - Minor Injuries First Aid and Emergency Policy
  - Notification of Parents Policy
  - Referral and Transfer Policy
  - Students Health Education and Awareness Policy



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	<b>❖ SCHOOL MEDICAL OFFICERS RESPONSIBILITIES:</b>
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Table 2: School Medical Officer Duties / Responsibilities/ Activities	
Duties / Responsibilities	Activities
Maintenance of Health school Environment	In coordination with the Licensed school Health Nurse, regularly checks the school's environment to ensure of its cleanliness and safety in line with the Dubai Municipality Local Order No. 76 of 1992. Implementing all school health protocols and guidelines
Physical/Medical examination of students	Plans and conducts comprehensive medical examination on students as per school Health Record at school entry, grade5, grade9, and school leaving.
	Screening the student for all body system.
	Records all finding in the school Health Record, specifying any defect or abnormality.
First Aid Care/ Emergency Care	Refers and follows up students with abnormal finding to the Health Center/Clinics of DHA or to their family physicians for further investigation and health care. Informs parent on "Parents Notification form".
	Attends promptly to students with injuries or other conditions requiring immediate attention.
Prevention and Control of Communicable Diseases	Writes standing order of drugs/treatments, which can be administered to the student by the licensed school Health Nurse in the absence of the Medical Officer.
	Share in planning, assessing and attending immunization session, which will be conducted in the school to be available for any untoward reaction including anaphylaxis due to immunization. School doctor has to contact epidemiology section of PHC to get necessary information and access to e-notification system of DHA (website) and to inform SHS in charge also
Health Education	Advises the parents to keep the student at home during the communicable period of that particular disease Maintain effective relationship with parents, families and local community.
	Participates in planning and conducting health education activities in the school Acts as a counselor in guiding the school administrators, teachers and parents to discuss any health problem of a student, whenever needed.
Maintenance of Records and Reports	Filling, maintaining and sending records and reports as prescribed in the guideline.
ICD Coding	Affixes ICD codes where required according to ICD booklet provided by DHA.
Professional update	To Updates knowledge, skills and practice related to school Health requirements

❖ **SCHOOL NURSE DUTIES:**



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<b>Table : 2</b>		<b>School Registered Nurse : Responsibilities / Functions / Activities</b>
<b>RESPONSIBILITIES FUNCTIONS</b>		<b>ACTIVITIES</b>
In the absence of the School Medical Officer, provides first aid / emergency care to sick or injured students.		Ensures that all medical supplies and equipment needed for first aid and emergency care are available and in working condition in the school clinic (as listed in the standard requirement).
		Assesses needs of students (examines / observes / measures vital signs) who require first aid care.
		Administers the first aid care appropriate to his/her condition or needs.
		Refers to the School Medical Officer for advice when needed.
		Informs parent, through the school authorities, about the student's condition.
Aims and Objectives		Transfers the student to the Accident / Emergency of the nearest hospital as per the standard procedure.
Assists School Medical Officer in conducting medical examination to the students.		Ensure and prepares all the needed supplies / equipment for the medical examination of the students.
		Provides privacy to the student during medical examination.
		Checks that all findings and recommendations are recorded in the student's School Health Record.
Assesses		Monitors student who are frequently absent from school due to health related problems.





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	student, to detect early signs and symptoms of health problems	Coordinates with classroom teachers to: <ul style="list-style-type: none"><li>Observe and report student with unhealthy practices.</li><li>Refer promptly student who are showing signs of visual, hearing and learning difficulties.</li><li>Refer student with fever, rashes or unusual behavior.</li><li>Report presence of potential hazards in the classroom.</li><li>Motivate student to enhance healthy practices.</li><li>Maintain hygienic and safe environment in the classroom.</li></ul>															
	Monitors and maintains growth and development of students.	Calculates BMI at the start of academic year. For those students with deviations from normal measurements, notifies the parents through the school doctors.															
<p>❖ <b>IMMUNIZATION:</b></p> <p>Immunization is a proven tool for controlling and eliminating life-threatening infectious diseases and is one of the most cost-effective health investments.</p> <p><b>Standard Immunization Schedule</b></p> <table border="1"><caption>Table : 3</caption><thead><tr><th>Vaccines</th><th>Age</th><th>Interval</th><th>Dose</th><th>Remarks</th></tr></thead><tbody><tr><td>Dtap/O PV 2nd booster</td><td>6-7</td><td>2 ½ years interval from the first booster</td><td>0.5 ML</td><td>Only for children not vaccinated in child health Services.</td></tr><tr><td>MMR 2nd dose</td><td>5-18</td><td>4 Years</td><td>Single</td><td>If 2nd MMR was not given along with 2nd booster keep 5 years Intervals.</td></tr></tbody></table>			Vaccines	Age	Interval	Dose	Remarks	Dtap/O PV 2nd booster	6-7	2 ½ years interval from the first booster	0.5 ML	Only for children not vaccinated in child health Services.	MMR 2nd dose	5-18	4 Years	Single	If 2nd MMR was not given along with 2nd booster keep 5 years Intervals.
Vaccines	Age	Interval	Dose	Remarks													
Dtap/O PV 2nd booster	6-7	2 ½ years interval from the first booster	0.5 ML	Only for children not vaccinated in child health Services.													
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OPV 3rd booster	1 0	5 Years from 2nd booster	0.5 ML	OPV
Tdap 3rd booster	15- 18	10 Years interval from 2 <sup>nd</sup> Booster	0.5 ML	Tdap, if not given at 15 years it can be given up to 18 years. No OP should be given after 15 years.

- The school clinic is a vaccine qualified clinic (VQC)
- Parents and students are informed about vaccination regularly through consent forms and the school provides immunization to all students according to DHA norms.

[Refer to **Appendix- 1 to 5** for School Exclusion Table by DHA]

## ❖ **COMMUNICABLE DISEASE AND INFECTION CONTROL:**

Certain communicable diseases are designated as "notify able" so that public health measures can be taken to prevent large outbreaks among children and others.

Because of the danger to student and employee health, school management is required by law to safeguard the health of any student or employee who has contracted or been exposed to a communicable disease.

[Refer to **Appendix-6 & 7** for School Exclusion Table by DHA]

## ❖ **ROLES OF CONCERNED PARTIES IN HANDLING COMMUNICABLE DISEASE IN SCHOOL:**



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## • **School Clinic's Responsibilities:**

The school has policies/procedures for

- Providing orientation, In-service education and resource materials for school personnel regarding management of communicable diseases
- Education of parents to keep children home when there are signs of disease and to secure appropriate treatment.
- Record-keeping and retrieval procedures regarding non-immunized children.
- Exclusion and follow-up of children who are not immunized against vaccine preventable diseases or who have contracted a communicable disease or infestation.
- Designating the school nurse (or other school official) for the reporting of "notify able" communicable diseases.
- The School Clinic has a Certified Infection Control Officer who undergoes training annually from a designated training center in Dubai who will be in charge of taking care and training the other clinic staff regarding infection control procedures.
- School nurses can aid parents by referring them to public health nurses if there is need.

## • **Parents' Responsibilities:**

- Remain home when ill.
- Report to the teacher when they feel sick at school;
- Avoid close contact with other children who have respiratory or communicable diseases;
- Practice good habits of cleanliness
- Dress appropriately for the weather.



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## **School Transport Safety:**

In order to advance school transport service to excellent standards in the emirate of Dubai, the following responsibilities shall be assumed by school Transport Section:

- Allocate seats to students at the beginning of the academic year in co-operation with the school bus attendant and driver, and ensure that each student has designated seat for the entire year.
- Designate the front seats for boys and back seats for girls. Mixed random seating is forbidden.
- To appoint a lady conductor for each bus, with exception of male students" only buses, from class 6 up to the secondary level and to oblige the lady conductor to attend the prescribed training courses at the Agency in order to obtain ID card.
- Carry out regular bus maintenance per each 10,000 km maximum and maintain records.
- Suppliers / contractors who come into the premises for loading / unloading any materials should park the vehicle outside of the specified entrance. They can only gain access by contacting security guard to open the gate for them.
- If the vehicle is present during school hours, it is supervised by security guard / transport supervisor by confirming that there is no student in the specified area.

Must keep complete details of transporting pupils and staff along with their emergency contact nos. and update it regularly.

[Refer **School Transport Policy**]

## **Lab Safety:**

### ❖ **Lab Teacher's Responsibilities:**

- Teachers follow and enforce safety rules, procedures and demonstrate safety behavior and



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promote a culture of safety.

- Have an understanding of all the potential hazards of the materials, the process and the equipment involved in every laboratory activity.
- Inspect all equipment / apparatus in the laboratory before use
- Complete inventories are held by the respective head of departments
- Before entering the laboratory, instruct students on all laboratory procedures that will be conducted.
- It is Lab Teacher's duty to ensure that no student is entering into store room where chemicals are stored in safety cabinets which is strictly banned for students.
- In no circumstance, students were left unattended or alone in any Lab.
- To ensure that CCTV surveillance is active.

## ❖ **Lab Assistant's Responsibilities:**

- Perform regular inventory inspections of chemicals.
- Update the chemical inventory at least annually, or as requested by the administration.
- Do not store food and drink with any chemicals.
- Make sure all chemicals and reagents are labeled.
- Do not store chemicals on the lab bench or floor.
- Ensure chemicals not in use are stored in a locked facility with limited access.
- Know the storage handling and disposable requirements for each chemical used.
- Make sure chemicals are disposed properly as per the appropriate chemical disposal regulations.
- **PERSONAL PROTECTIVE EQUIPMENT (PPE)**
  - Protective clothing, gloves, masks, are provided and used by the staff and students.



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	<ul style="list-style-type: none"><li>▪ <b>EYE PROTECTION</b><ul style="list-style-type: none"><li>- Students and staff are provided with and use protective eye glasses/shields in all workshops and laboratories.</li></ul></li></ul>
<b>Computer Lab Safety:</b>	<p>The teaching staff should ensure that internet connection will be provided to the students for the learning purpose under the proper supervision.</p> <ul style="list-style-type: none"><li>▪ The teaching staff should not allow any student to check the power supply for the computer or to do any repairing work in the system.</li></ul> <p>The teaching staff should ensure that the students are away from the power socket.</p>
<b>Cleanliness and Hygiene:</b>	<p>The maintenance manager is responsible for overseeing arrangements for sustaining cleanliness and hygiene across the school premises Odor dispensers and foam soaps are installed in all washrooms</p> <p>A member of staff is assigned for each washroom in the school to maintain its cleanliness and to ensure adequate supplies of soap, paper towels and toilet tissues Teachers ensure that their classroom are clean. Classroom bins are emptied at regular intervals during the school day</p> <p>Supervisors are responsible for monitoring the cleanliness and tidiness of classrooms and for putting measures in place where necessary to ensure that the students keep their room clean and tide.</p>
<b>Policy on No-Smoking Zone:</b>	<p>Smoking is strictly prohibited in all enclosed and substantially in the campus of NIMS Dubai. This includes company vehicles, all employees, consultants, contractors, customers and visitors.</p>



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	<p>All staff is obliged to adhere to, and support the implementation of the policy. Any concerns employees may have regarding smoking at work should be reported immediately to the Principal so that corrective action can be taken if necessary.</p> <p>Appropriate 'No-Smoking' signs must be clearly displayed at the entrances to each school. Local disciplinary procedures will be followed if a member of staff does not comply with this policy and, in the case of repeated offences, may be dismissed from the organization's employ.</p>
<b>Building Maintenance &amp; Inspection:</b>	<p>The maintenance supervisor inspects everywhere as part of his daily routine. Urgent and important matters are referred to the Admin Manager immediately.</p> <p>All the teaching staff and supervising staff should send the filled maintenance complaint form to the Admin Manager regarding any maintenance issue when they come to know.</p> <p>The maintenance supervisor should rectify the maintenance requirement by the supporting and technical staff team and they should get the acknowledgment from the teaching staff who lodged the complaint to get the confirmation.</p> <p>Pest Control service must take place in the school as per the norms of the Dubai Municipality.</p>



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## Health and Safety Team Members:

Forenoon Session	Email ID	Contact #
Mr. FahimEjaz - Convener (Administration Manager)	fahimejaz@nimsdxb. com	055- 7862869
Dr.Sofia Khan (Clinic)	<a href="mailto:sofiakhan@nimsdxb.com">sofiakhan@nimsdxb. com</a>	055- 5543375
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<b>Reference :</b>	ILO-OHS 2001 Safety and Health Management System DHA guidelines DM guidelines
<b>Appendix</b>	1. School immunization Consent Form 2. Pre-Vaccination Checklist 3. Incident Record 4. Referral Form 5. Disciplinary Referral Form 6. School Exclusion Table 7. Assessment of the Student
<b>Date:</b>	<b>1<sup>st</sup> Sept., 2023</b>  <b>Signatures of Administration Manager &amp; Medical Director</b>

# Appendix : 1



## School Immunization Consent Form



## نموذج الموافقة على إعطاء اللقاحات المدرسية

Student's Full Name: -----  
 School: ----- Grade: -----  
 DOB: ----- Sex:  Male  Female  
 Nationality: -----

الاسم (الكامل) للطالب/ الطالبة: -----  
 المدرسة: ----- الصف: -----  
 تاريخ الميلاد: ----- الجنس:  ذكر  أنثى  
 الجنسية: -----

The School Nurse/ Doctor or School Health Section team, DHA will provide the student with the following Vaccines at schools as booster doses for the pre-school vaccination national program as recommended by DHA

سوف يقوم ممرض/ دكتور المدرسة أو فريق قسم الصحة المدرسية من هيئة الصحة دبي بإعطاء اللقاحات التالية في المدرسة وفقاً للجدول التالي. وتعدّ هذه اللقاحات جرعات منشطة مكملة للبرنامج الوطني للتحصين حسب التوصيات المعمول بها من قبل هيئة الصحة في دبي.

الصف Grade	طريقة إعطاء اللقاح Administration route	اللقاح Vaccine	مستحق Due	متأخر Overdue
الصف الأول Grade 1	حقنة تحت الجلد Subcutaneous injection	الحصبة، الحصبة الألمانية، النكاف Measles, Mumps, Rubella (MMR)	<input type="checkbox"/>	<input type="checkbox"/>
	حقنة بالعضل Intramuscular Injection	الرباعي (الدفتيريا والكزاز والسعال الديكي والشلل الأطفال العضلي) Dtap-IPV Vaccine: ( Diphtheria, Tetanus, acellular pertussis and injectable polio) OR الثلاثي (الكزاز والدفتيريا والسعال الديكي اللاخلوي) Tdap vaccine: (Tetanus, diphtheria, acellular pertussis)	<input type="checkbox"/>	<input type="checkbox"/>
	نقطتين بالفم Two Oral Drops	شلل الأطفال الفموي OPV Vaccine (Oral Polio Vaccine)	<input type="checkbox"/>	<input type="checkbox"/>
	حقنة تحت الجلد Subcutaneous injection	الجديري المائي Varicella vaccine	<input type="checkbox"/>	<input type="checkbox"/>
الصف الثامن Grade 8	حقنة بالعضل Intramuscular Injection	التيتانوس والدفتيريا والسعال الديكي اللاخلوي Tdap vaccine : (Tetanus, Diphtheria, acellular Pertussis )	<input type="checkbox"/>	<input type="checkbox"/>
الصف الثامن (إناث) Grade 8 (Female)	حقنة بالعضل Intramuscular Injection	لقاح الوقاية من سرطان عنق الرحم جرعة 1 HPV Vaccine 1 <sup>st</sup> dose	<input type="checkbox"/>	<input type="checkbox"/>
	حقنة بالعضل Intramuscular Injection	لقاح الوقاية من سرطان عنق الرحم جرعة 2 HPV Vaccine 2 <sup>nd</sup> dose	<input type="checkbox"/>	<input type="checkbox"/>
	حقنة بالعضل Intramuscular Injection	* لقاح الوقاية من سرطان عنق الرحم جرعة 3 * HPV Vaccine 3 <sup>rd</sup> dose	<input type="checkbox"/>	<input type="checkbox"/>
* إذا كان عمر الطالبة أقل من 15 عاماً ستحتاج لجرعتين من لقاح الوقاية من سرطان عنق الرحم، أما إذا كانت الطالبة 15 عاماً وما فوق ستحتاج لثلاثة جرعات من اللقاح * If student is below 15 years old, two doses of HPV Vaccine is required, but if student is 15 years old and more three doses of HPV vaccine will be required				

<input type="checkbox"/> I agree to give my son/ daughter vaccines which are mentioned above	<input type="checkbox"/> أوافق على إعطاء ابني / ابنتي اللقاحات المشار إليها أعلاه
<input type="checkbox"/> I disagree with my child being vaccinated because:	<input type="checkbox"/> لا أوافق على إعطاء ابني/ ابنتي هذه اللقاحات:
<input type="checkbox"/> My child has been vaccinated before with the above marked booster dose; (please send a document proving that). <input type="checkbox"/> My child has a medical condition which prevents him/ her from being vaccinated now (please send a letter written by you or doctor explaining the medical condition to the school nurse) <input type="checkbox"/> Others (Specify).....	<input type="checkbox"/> كون ابني/ ابنتي قد تم تلقيحه/ تلقيحها سابقاً بالجرعة المنشطة المشار إليها أعلاه (يرجى إرسال ما يثبت ذلك إلى عيادة المدرسة) <input type="checkbox"/> لوجود موانع طبية للتلقيح حالياً (يرجى إرسال إقرار من قبلكم أو من قبل الطبيب المعالج إلى ممرض/ ممرضة الصحة المدرسية) <input type="checkbox"/> أخرى (اذكر).....
Parent's / Guardian's Name :	اسم ولي الأمر/ الوصي الشرعي:
Relation :	صلة القرابة:
Signature Parent's / Guardian's:	توقيع ولي الأمر/ الوصي الشرعي:
Date :	التاريخ:
Tel :	رقم الهاتف :

ملاحظة: يعبأ هذا النموذج من قبل ولي الأمر أو الوصي الشرعي حصراً، ولا يسمح للطالب بتعبئته أو التوقيع عليه، في حال وجود استفسار الرجاء الاتصال بممرض أو طبيبة المدرسة.

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## Appendix : 2



### Pre Vaccination Checklist

Student's Full Name: \_\_\_\_\_  
 School: \_\_\_\_\_ Grade: \_\_\_\_\_  
 DOB: \_\_\_\_\_ Sex:  Male  Female  
 Nationality: \_\_\_\_\_

- To ensure safe vaccination, the school health team requires information about your son/daughter's health status. Prior to vaccinating your child. Please review and complete the following checklist and return to the school nurse (Please answer all the questions).
- Please inform the school health team of any change in the student's health status during the academic year, as it might affect giving your child the vaccine dose.



### استبيان ما قبل التلقيح

الاسم (الكامل) للطالب/الطالبة: \_\_\_\_\_  
 المدرسة: \_\_\_\_\_  
 الصف: \_\_\_\_\_  
 تاريخ الميلاد: \_\_\_\_\_ الجنس:  ذكر  أنثى  
 الجنسية: \_\_\_\_\_

- للتأكد من إعطاء اللقاح بصورة آمنة، يقوم الفريق الصحي في المدرسة بطلب معلومات عن حالة ابنكم/ابنتكم الصحية، لذا يرجى تعبئة هذا النموذج وإعادته للمدرسة قبل إعطاء اللقاح. (الرجاء الإجابة عن جميع الأسئلة).
- يرجى إبلاغ الفريق الصحي في المدرسة عن أي تغيير في صحة الطالب/الطالبة خلال العام الدراسي الحالي مما قد يؤثر على إعطاء اللقاح.

الرقم	البيان	نعم YES	لا NO	البيان	الرقم
1	Does the student have any allergies to medication, food (E.g: Eggs), allergic reaction against yeast or vaccines? Others? If yes, specify-----			هل لدى الطالب/الطالبة حساسية من الأدوية أو الطعام (مثل: البيض) أو حساسية من الخميرة، أو اللقاحات أو أي شيء آخر غيرها؟ إذا كانت الإجابة نعم، حدد-----	1
2	Has the student had a serious reaction to a vaccine in the past? If yes, specify-----			هل تعرض الطالب/الطالبة سابقاً لأي مضاعفات بعد التلقيح؟ إذا كانت الإجابة نعم حدد المضاعفات-----	2
3	Has the student had a seizure or brain (neurological) problem?			هل تعرض الطالب/الطالبة لنوبة تشنج أو مشكلة في الدماغ (الجهاز العصبي)؟	3
4	Does the student suffer from any Health conditions that depress the immunity like cancer, leukemia, lymphoma, organ transplant, etc.? If yes, specify-----			هل يعاني الطالب/الطالبة من أية حالة قد تضعف الجهاز المناعي مثل السرطان (سرطان الدم، سرطان الغدد الليمفاوية) أو زراعة الأعضاء، إلخ؟ إذا كانت الإجابة نعم حدد-----	4
5	Do any household member /relative living in the house have cancer, leukemia, organ transplant or any other immune system problem?			هل يعاني أحد من الأفراد أو الأقارب المقيمين مع الطالب/الطالبة في المنزل من الأمراض أو الحالات التي تتراقق مع نقص في المناعة مثل سرطان الدم، سرطان الغدد الليمفاوية، زراعة الأعضاء، إلخ؟	5
6	Has the student taken cortisone, prednisone, other steroids, or anticancer drugs such as chemotherapy or radiotherapy in the past 3 months? If yes, add the date-----			هل تناول الطالب/الطالبة أي دواء يحتوي على الكورتيزون أو أدوية السرطان أو العلاج الكيميائي أو الإشعاعي خلال الثلاث شهور السابقة؟ إذا كانت الإجابة نعم حدد التاريخ-----	6
7	Did the student receive any blood transfusion, antibodies, or Plasma within the past year? If yes specify the date-----			هل تعرض الطالب/الطالبة لنقل دم أو أجسام مضادة أو بلازما خلال العام السابق؟ إذا كانت الإجابة نعم حدد التاريخ-----	7
8	Does the student suffer from any disease or receive any medications that affect blood coagulation? If yes, specify-----			هل يعاني الطالب/الطالبة من أي أمراض أو يتناول أي أدوية لمنع تجلط الدم؟ إذا كانت الإجابة نعم، حدد-----	8
9	Has the student received any vaccine in the last month? If yes, specify name of the vaccine taken :- And date of administration:-----			هل تم إعطاء الطالب/الطالبة أي لقاحات خلال الشهر السابق؟ إذا كانت الإجابة نعم حدد اسم اللقاح:----- وتاريخ إعطاء اللقاح-----	9

Parent's / Guardian's Name		اسم ولي الأمر/ الوصي الشرعي
Relation		صلة القرابة
Signature Parent's / Guardian's		توقيع ولي الأمر/ الوصي الشرعي
Date:	Tel:	رقم الهاتف:

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### Pre Vaccination Checklist



### استبيان ما قبل التلقيح

ملاحظة: يعبأ هذا النموذج من قبل ولي الأمر أو الوصي الشرعي حصراً، ولا يسمح للطلاب بتعبئته أو التوقيع عليه، وفي حال وجود استفسار الرجاء الاتصال بممرض أو طبيب المدرسة.  
**Please note:** Only Parent or Guardian fills this form. The student is not allowed to fill it this form or sign it. If there is any further queries, please contact the School Nurse or Doctor.

Important Notes:	ملاحظات هامة:
<ul style="list-style-type: none"><li>Please send original vaccine card to the school nurse</li><li>Please send a copy of any medical report related to the student's health, which might affect giving your child the vaccine dose.</li><li>Please inform the school nurse about any changes in the student's health before and after vaccination.</li><li>Please inform the school nurse if the student receive any vaccinate outside the school( during the academic year )</li></ul>	<ul style="list-style-type: none"><li>يرجى إرسال بطاقة التلقيح الأصلية</li><li>يرجى إرسال صورة عن أي تقارير طبية تتعلق بالطالب / الطالبة وتتعارض مع التلقيح المقرر إعطاؤه.</li><li>يرجى إبلاغ ممرض/ممرضة المدرسة بأي تغييرات على ما ذكر أعلاه قد تطرأ على صحة ابنكم / ابنتكم بين جرعات اللقاح.</li><li>يرجى إبلاغ ممرضة المدرسة في حال إعطاء الطالب أي لقاح خارج المدرسة (أثناء السنة الدراسية)</li><li>إن الأهل مسؤولون عن إبلاغ ممرض/ممرضة المدرسة عند حصول أي تغيير في الحالة الصحية للطالب وإعطاء التقارير اللازمة.</li></ul>

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## Appendix : 3

	<b>NEW INDIAN MODEL SCHOOL, DUBAI</b>	
<b>INCIDENT RECORD</b>		

For Action

For Information

Date: \_\_\_\_\_

Student's Name:	Grade:
Accident Reported by:	Accident Date:
On Examination:	
1. General Condition	2. Local examination
Action Taken:	
Parents called (specify what was said)	
Follow - up (if required):	
HOS/Supervisor sign:	
Attending Medical staff sign:	

## Appendix : 4



**المدرسة الهندية النموذجية الجديدة**  
**NEW INDIAN MODEL SCHOOL, DUBAI**  
 Dubai-U.A.E., P.O. Box: 3100, Tel.: 04-2824250, 2824313, Fax: 04-2825454



GOVERNMENT OF DUBAI

No.: 0100



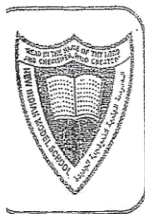
هيئة الصحة بدبي  
 DUBAI HEALTH AUTHORITY

Referral form				
Referred by:	Name:	Position:		
School Name and Address:			Date of referral:	
Telephone arrangements made:	YES	NO	Facility Tel No.	Fax No.
<b>Referred to facility</b> Name and Address:				
Student Name				
Identity Number	Age	Sex	M	F
Student Address				
Clinical History				
Findings				
Treatment Given				
Reason for Referral				
Documents accompanying referral				
Print Name Sign & Date	Name:	Signature:	Date:	
Note to receiving facility: On completion of student management please fill in and detach the referral back slip below and send with patient or send by fax or mail.				

.....<..... Receiving facility – tear off when making back referral .....>.....

<b>Back Referral from Facility Name</b>	Tel No.	Fax No.	
Reply from	Name:	Date	
(Person completing form)	Position	Specialty:	
<b>To Initiating Facility:</b> (enter name and address)			
Student Name:			
Identity Number	Age	Sex	M   F
Student Address			
This student was seen by: (Give name and specialty)			on date
Patient History			
Special investigation and findings			
Diagnosis			
Treatment / Operation			
Medication prescribed			
Please continue with : (meds, Rx, follow-up, care)			
Refer back to:	on date		

## Appendix : 5



**NEW INDIAN MODEL SCHOOL-DUBAI**  
**Department of Children with Special Educational Needs & Disabilities**  
 Contact Details: 00971-4 2824313; Extension No.'s: 28; 38; 49; 53; 56 & 68  
 E-mail Id: [sendsurveys@nimsdxb.com](mailto:sendsurveys@nimsdxb.com); [showkatahmad@nimsdxb.com](mailto:showkatahmad@nimsdxb.com)

### Disciplinary Referral Form for Phase-2

**Student's Information**

Students' Name	Grade and Division	Date	Period/time
Rferred by	Class teacher's name	FN/AN	Concerned Supervisor
Previous History of the child's behavior Please write down any of the behaviors listed in the adjacent table		Present complaint (tick)	
		Problem behaviors:	
		<ol style="list-style-type: none"> <li>1. Abusive language: swearing or using inappropriate words</li> <li>2. Bullying/harassment: Threatening, mocking, teasing, intimidating, gesturing, verbal attacks</li> <li>3. Disrespect/defiance: refusal to follow instructions and/or socially rude interactions</li> <li>4. Disruption/disturbing the class: yelling, noise with materials or horseplay</li> <li>5. Fighting-resulting in injury: hitting, punching, kicking, scratching</li> <li>6. Theft: taking away things without permission or notice</li> <li>7. Weapons : blades, knives, any shrapnel object causing bodily harm</li> <li>8. Tardy: Coming late to the school</li> <li>9. Others: _____</li> </ol>	
Previous history of interventions (tick any one)			
<ol style="list-style-type: none"> <li>1. Student warning</li> <li>2. Loss of privilege</li> <li>3. Parent note to teacher</li> <li>4. Parent contact by teacher (telephonic)</li> <li>5. Parent-teacher meeting (in person)</li> <li>6. Previous referral to Supervisor's office or HoS office</li> </ol>			
When was the last time the child was warned?		What was the action taken by the parent?	
<ol style="list-style-type: none"> <li>1. One week back</li> <li>2. 15 days back</li> <li>3. One month ago</li> <li>4.                   </li> </ol>			

(Courtesy: NIMS Dubai)

Signature of Teacher  
Name:

Signature of Class teacher

Signature of Supervisor

**Appendix : 6**

<b>Table 4a</b>		<b>SCHOOL EXCLUSION TABLE</b>	
<b>Disease Or Condition</b>	<b>Incubation Period</b>	<b>Exclusion of Cases</b>	<b>Exclusion of Contacts</b>
Chicken pox	From two to three weeks; usually 13-17 days	Exclude from school until vesicles become dry, or 10 days from appearance of rash.	Not excluded
Conjunctivitis		Until discharge from eyes has ceased	Not excluded
Diphtheria	Usually two to five days	Until cultures are negative, until receipt of a medical certificate of recovery from infection.	Domiciliary contacts excluded until investigated by medical officer and shown to be clear of infection.
Giardiasis (diarrhea)	Usually one to three weeks or longer; or average seven to ten days	Until diarrhea ceases	Not excluded
Hepatitis A	Usually fifteen to fifty days; the average twenty eight to thirty days	Exclude from school or work for one week after the onset of illness or jaundice. Until receipt of a medical certificate of Recovery from infection or on subsidence of symptoms.	Not excluded
Hepatitis B	Usually sixty to ninety days; the range is forty five to one hundred eighty days	Until recovered from acute attack	Not excluded



Impetigo (School sores)		Until sores have fully healed. The child may be allowed to return earlier provided that appropriate treatment has commenced, and that sores on exposed surfaces (such as scalp, face, hands or legs) are properly covered with occlusive dressings.	Not excluded
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<b>Table 4b</b>		<b>SCHOOL EXCLUSION TABLE</b>	
<b>Disease or Condition</b>	<b>Incubation Period</b>	<b>Exclusion of Cases</b>	<b>Exclusion of Contacts</b>
Measles (Rubeolla)	Approximately ten days, but varies from seven to ten days and may be as long as fourteen days until the rash appears	Until at least five days from the appearance of rash, or until receipt of medical certificate of recovery from infection.	Non-immunized contacts must be excluded for thirteen days from the first day of appearance of rash in the last case unless immunized within 72 hours of Contact.
Meningococcal Infection	Commonly three to four days, but can vary from two to ten days	Until receipt of a medical certificate of recovery from infection.	Household contacts must be excluded from school or child care until they have received appropriate hemotherapy for at Least 48 hours.

Meningitis (Viral, Aseptic)	Varies with specific agent		
Mumps	Usually twelve to twenty five days; commonly eighteen days	Exclusion from school, child care or workplace until nine days after the onset of Swelling. Until fully recovered.	Not excluded
Pediculosis (Head lice)		Until appropriate treatment has commenced.	Not excluded
Pertussis (Whooping cough)	It is commonly seven to ten days; rarely more than fourteen days.	Until two weeks after the onset of illness and until receipt of a medical certificate of recovery from infection	Household contacts must be excluded from attending a children's services center for twenty one days after last exposure to infection if the contacts have not previously had whooping cough or immunization against Whooping cough.
Poliomyelitis / Acute Flaccid Paralysis (AFP)	Usually seven to fourteen days; the range is three to thirty five days for paralytic cases	Exclude from schools and children's settings until at least fourteen days after onset of illness and until receipt of a medical certificate of recovery from infection.	Not excluded

<b>Table 4c</b>		<b>SCHOOL EXCLUSION TABLE</b>	
<b>Disease Or Condition</b>	<b>Incubation Period</b>	<b>Exclusion of Cases</b>	<b>Exclusion of Contacts</b>
Rubella (German Measles)	Usually sixteen to eighteen days	Exclude from school for at least five days after onset of the rash	Not excluded
Scabies	Usually two to six weeks before itching occurs in a person not previously infected If a person is re-exposed it is one to four days.	Until appropriate treatment has commenced.	Not excluded
Shigellosis (Diarrhea)	From twelve hours to four days (usually one to three days); up to one week Shigella dysenteriae	Until diarrhea ceases	Not excluded
Streptococcal infection including Scarlet Fever	Usually one to three days	Exclude from schools and children's settings until a medical certificate of recovery from infection has been obtained.	Not excluded
Trachoma		Until appropriate treatment has commenced.	Not excluded
Tuberculosis	From infection to the primary lesion or significant tuberculin	Until receipt of a medical certificate from a health officer of the Department	Not excluded

	reaction; about four to twelve weeks.	that child is not considered to be Infectious.	
Typhoid Fevers	Usually one to three weeks (depending on the infective dose from three days to three months)	Until receipt of a medical certificate of recovery from infection.	Not excluded unless the medical officer of a health of the Department considers exclusion to be necessary.

Appendix : 7

