

PANDEMIC POLICY

Policy Reviewed - March 2025
Date of Next Review- March 2026

Introduction

While it is difficult to predict when (or even if) COVID-19 will rise to the level of a pandemic, there are various actions schools can take to be ready for such events.

Schools need to work collaboratively with their local and state health departments, and be attentive to guidance offered by the DHA, to determine how to ensure safe learning environments. For detailed guidance on how to develop emergency operations plans capable of addressing pandemic illnesses refer to “Preparing for a Pandemic Illness: Guidelines for

School Administrators and Crisis Teams.” This document provides suggestions for the immediate school response to the threat presented by COVID-19.

Schools have a well-developed emergency operations plan (EOP, also often referred to as crisis response plan) to help them respond to multiple emergencies.

Process Overview In 2013 the U.S. Department of Education developed a guide to support schools in developing an EOP (Guide for Developing High Quality School Emergency Operations Plans). The EOP provides information that can support pandemic illness planning. Regardless of the status of your EOP, there are a number of specific actions that school crisis response teams can take right now in response to COVID-19. These include actions taken by what are often referred to as the Communication and Warning Annex; Public Health, Medical, and Mental Health Annex; Continuity of Operations (COOP) Annex; and Recovery Annex.

COMMUNICATION AND WARNING ACTIONS The timely distribution of crisis facts is among the most important things a school can do when responding to a threatening situation. Thus, the following suggestions are offered:

- In consultation with school and community health officials, and consistent with guidance offered by the DHA, draft communication messages for school community members that provide updated information about COVID19 and how to remain healthy. All of these communications should include current information about actions schools are taking to help ensure safety and provide guidance that empowers caregivers to help students cope with this health crisis.
- Schools should draft several communications and social media posts for (a) when the illness is confirmed in the community, (b) when a significant number of students are found ill, and (c) when schools need to close due to the illness.

- Identify multiple communication outlets (e.g., television, social media, email, letters home, voicemail) through which these messages might be shared.
- Share information for parents on how to talk to support their children regarding COVID-19 (Talking to Children About COVID-19 (coronavirus): A Parent Resource)

PUBLIC HEALTH ACTIONS Promote daily preventive actions for all staff, students, and families. For example, schools should encourage students.

- Wash hands multiple times a day for at least 20 seconds.
- Do not share food or drinks.
- Give elbow bumps instead of handshakes.
- Encourage students and school staff members to eat a balanced diet, get enough sleep, and exercise regularly to help them develop strong immune systems capable of fighting illness.

Public health actions also include activities that help reduce the spread of infectious diseases.

- Know the symptoms of COVID-19 and ensure that information is made available to the school community in developmentally appropriate ways.
- Provide training about flu transmission and control measures. Train students to cover their mouths with a tissue when they sneeze or cough and throw out the tissue immediately, or to sneeze or cough into the bends of their elbows.
- Educate employees, visitors, and primary caregivers not to come to the school if they have flu symptoms. Reinforce for families to keep sick children home.
- Establish or reinforce procedures for how families let the school know if their child is sick. These procedures should include letting the school know why the student has been kept home so as to be able to track symptoms. If children are diagnosed with COVID-19, parents must let the school know so they can communicate with, and get guidance from, local health authorities.
- School health professionals might consider interviewing flu-like illness cases for pandemic risk factors and following DHA guidelines for health professionals regarding next steps. Begin to conduct active surveillance to identify influenza cases (e.g., review temperature logs; triage “sick” calls, hospitalizations, staff absences, unexplained deaths). Also, attend to the school building itself.

Steps to Implement:

- Consider changing the air conditioning system filters; during the day, where possible, increase ventilation.
- Following each school day, the school should be thoroughly ventilated and cleaned. This can be done by opening all doors and windows or turning the air conditioning or heating systems up.

- Ensure that school administrators can control access to the buildings. Each school should have a plan to close certain entrances and exits, and to monitor others. To prepare for disease outbreaks, identify a main entrance and an indoor area where students and staff can be screened prior to moving to classrooms or other areas of the school. MEDICAL ACTIONS If they have not already done so, school health professionals should.
- Assess adequacy of infection-control supplies and review distribution plan.
- Identified areas within the school facility that can be used for isolation and quarantine.
- Developed plans for stockpiling and distributing infection-control supplies.
- Screening for flu-like illnesses at the front desk and nurses' offices.
- Isolate and send home staff or students with flu-like symptoms, utilizing supervised isolation areas in the school—access to this room should be strictly limited and monitored (i.e., parents picking up their ill children should be escorted to and from the isolation area), and a carefully monitored student checkout system should be activated.

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Measures:

Criteria for low-risk individuals eligible to be in the school/workplace. Those that can effectively carry out their jobs remotely to continue working from home.

- Eligible: Aged 18-55, live alone or with low-risk individuals, not affected by chronic diseases
- Ineligible: Aged 55+, Pregnant women, living with anyone with chronic diseases or who is 60+ years old.

Additional Measures

- Thermal cameras and/or Infrared Thermometers and/or Sanitization Standard Booth (s) to be installed at entrances.
- Face masks and gloves to be worn by staff at all times.
- Signage to help maintain 2m distancing.
- No physical contact between individuals.
- Separate entry and exit points to ensure unidirectional flow.
- Vehicle parking's are limited to 50% capacity.
- Contactless payments.
- Wherever possible staff separated from students and parents by a plastic shield.
- Fevers or noticeable symptoms to be immediately reported to DHA.
- Face masks and gloves for outsiders to be encouraged when inside the campus.
- All social areas to be closed.
- Hand sanitizing and washing at entry points.
- Staff tested and cleared before returning to work.
- Leaving the site during breaks is forbidden.
- Staggering breaks, arrival and departure times.

- Daily disinfections carried out on high touch surfaces. Performing a thorough cleaning and disinfection process after working hours and after each use.
- Extra loose equipment's from training floors to be removed to minimize cleaning surfaces that includes (mats, foam rollers, yoga blocks, etc. from gym floor)
- Bathing areas, changing room, sauna, steam and swimming pools to be closed until further notice from regulatory authorities.
- Outdoor training area should be cleaned and sanitized that includes fields, pitches, tracks, courts, etc. before and after training.
- Medical waste containers to be provided for disposal of used masks and gloves.
- Newspapers, magazines and water dispensers to be removed or disinfected daily.
- Encourage teaching staff and students to staff at home when they feel sick.

Tools to Use

Incident reporting form

Communication

Emails and records of the Complaint Form

Metrics and Process Verification

A. [Measurements](#)

Resolution given to parents in a timely and effect manner.

B. [Reporting](#)

Any delay/irregularity must be escalated to the Line Manager/Heads of Section.

Process Change Control

This process will be reviewed from time to time. Updates to this process will be at a minimum reviewed and approved by the Principal

Regards,

Principal