



# School Clinic Regulation Ministry of Health

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## **1- General Consideration**

1.1 The regulation governs the basic requirements for all school health clinic facilities operating in the Northern Emirates.

1.2 The regulation will be applied to all health facilities; existing, in renovation, and in construction. They are also applied when a new facility, service or procedure is to be introduced.

1.3 Regulation, standards and requirements of the other concerned Federal and Local Authorities of the UAE should be strictly followed in conjunction with present MOH regulations.

1.4 Establishing a new facility, renovating of existing one or adding a new program or procedure requires the submission of an application to the Regulation, Licenses and Advertisements Department. The application procedure is described on the MOH website. [www.moh.gov.ae](http://www.moh.gov.ae).

1.5 Security and safety of patients, visitors and staff should be insured at all time and stages according to the existent rules and regulations of the concerned Federal and Local Authorities in conjunction with present MOH regulations.

1.6 The facility need to maintain adequate lighting and utilities, including temperature controls, water taps, sinks, drains and sufficient number of toilets. The facility should insure secured electrical outlets and communication system. The facility should be clean and properly maintained and have adequate lighting and ventilation. Slip -resistant flooring products shall be considered for flooring surfaces whenever required for safety consideration. The space allocated for a particular function or service should be adequate for the activities performed.

1.7 In compliance with the federal law number 29 for 2006 regarding Special Needs Rights, each healthcare facility shall be made accessible to accommodate individuals with special needs.

1.8 The school should have appropriate fire-fighting equipment, signage, emergency power capabilities, lighting and an evacuation plan.

1.9 Hazards that might lead to slipping, falling, electrical shock, burns, poisoning, or other trauma should be eliminated.

1.10 Privacy and confidentiality of patients, visitors and staff should be respected and granted according to the UAE cultural requirements.

1.11 It is the responsibility of the healthcare facility to insure their compliance with all documents submitted to and approved by the Ministry Of Health.

1.12 Although this document was compiled according to the latest international regulations, completeness and accuracy cannot be guaranteed. Upgraded version of this document will be introduced as needed and could be found on the MOH website [www.moh.gov.ae](http://www.moh.gov.ae)

## **2- The Facility**

School clinic is a health care facility within school intended to provide basic health care for students and /or refer them to the specialist/primary health center if required.

### **2.1 General Design**

School clinic shall comprise at least of the following:

2.1.1 Doctor room/clinic should be of adequate size (at least 14 square meters) to accommodate standard furniture, fixtures, medical equipment and supplies with sufficient ventilation and lighting.

Washbasin and taps water should be available in the clinic.

2.1.2 Treatment area shall not be less than 6 square meters, depending on school population and number of students.

2.1.3 An additional area for sick student's observation should be made available.

2.1.4 Separate designated waiting area to accommodate at least five students.

2.1.5 Corridors and doors shall be wide and permits wheelchair and trolleys (at least 110 cm for doors and 150 cm for corridors width)

2.1.6 Walls shall be painted with easily washable paints with no sharp edges.

2.1.7 Clinic floors shall be made of easily washable material e.g. ceramic tiles or special medical floors.

2.1.8 Designated secure files area for maintaining students records.

## **2.2 The Furniture**

Furniture required in school clinic should include:

2.2.1 Doctor desk and two chairs for patient and attendant.

2.2.2 Computer with internet facility.

2.2.3 Telephone with external facilities (outside line).

2.2.4 Examinations/medical couch (height adjustable).

2.2.5 Examination Lamp (mobile).

2.2.6 Portable screen or curtains.

2.2.7 Stainless steel dressing trolley.

2.2.8 Lockable medication cabinet.

2.2.9 Special containers for Medical waste.

2.2.10 Medical grade weighing scale with height measurement.

2.2.11 X-ray viewer box.

2.2.12 Lockable Refrigerator to keep vaccinations and drugs.

2.2.13 Wheeled chair.

2.2.14 Foldable Stretcher.

2.2.15 Cabinet for Patients Medical Records.

- 2.2.16 Dispenser for hand disinfectant solutions.
- 2.2.17 Foot operated covered waste disposable bin.
- 2.2.18 Sharp Safe box.
- 2.2.19 Disposable paper hand towel or electric hand dryer.
- 2.2.20 Observation bed (height adjustable).

### **2.3 Medical instruments and equipment**

Medical and instruments in school clinic should include:

- 2.3.1 Stethoscope.
- 2.3.2 Sphygmomanometers (with pediatric and adult cuffs).
- 2.3.3 Thermometers.
- 2.3.4 Disposable thermometer sleeves/covers.
- 2.3.5 Torch.
- 2.3.6 Disposable tongue Depressors.
- 2.3.7 Tourniquet.
- 2.3.8 Percussion Hammer and Tuning fork.
- 2.3.9 Diagnostic set for ENT & Eye.
- 2.3.10 ECG Machine.
- 2.3.11 Disposable sterile Syringes and Needles.
- 2.3.12 Disposable Gloves.
- 2.3.13 Kidney shape bowl.
- 2.3.14 Glucometer (Prick method).
- 2.3.15 Nebulizer Machine.
- 2.3.16 Basic resuscitation instruments.
- 2.3.17 Oxygen cylinder with regulator and flow meter.
- 2.3.18 Disposable oxygen facial masks.
- 2.3.19 I.V Infusion set.
- 2.3.20 I.V cannulas /butterflies.
- 2.3.21 IV stand.
- 2.3.22 Splints of different sizes.
- 2.3.23 (20) Foot Snellen Vision chart.
- 2.3.24 Vaccine carrier/ box.

2.3.25 Autoclave Machine.

2.3.26 The facility must insure that all clinical and medical equipment are installed and operated according to the manufacturer specifications. The facility must maintain effective Preventive Maintenance as recommended by the manufacturers.

2.3.27 A safety log book in Arabic & English languages should be annexed.

2.3.28 The school clinic should have the necessary personnel, equipment, and Procedures to handle medical and other emergencies that may arise in connection with services provided.

2.3.29 Appropriate emergency equipment and supplies should be readily accessible to all areas.

### **3- Administration of School Clinic**

3.1 School clinic should be administered in a manner to ensure high-quality health services while recognizing basic patient rights.

3.2 Usually School clinic are solo practice clinic with one nurse, if more than one physician is there, the facility should have policies describing organizational structure, including lines of authority, responsibilities, accountability and supervision of personnel.

3.3 All such practices should have a Medical Director that establishes policies and is responsible for the activities of the facility and its staff. He/she shall assure that all procedures are carried out by or under the direction of qualified, skilled and experienced licensed professionals.

3.4 Administrative policies should be implemented so as to provide quality healthcare in a safe environment and ensure that the facility and personnel are adequate and appropriate for the type of procedures performed.

3.5 Policies and procedures governing the orderly conduct of the facility should be in writing and should be reviewed annually. All applicable regulations must be

observed.

3.6 Please refer to the MOH guidelines for details on roles and responsibilities of school health care providers.

## **4- Qualified Personnel**

4.1 All healthcare professionals should have appropriate licensure by Ministry of Health and the necessary training and skills to deliver the services provided by the facility.

4.2 The minimum requirements for healthcare professionals in any school depend on school population and number of students (Student – Healthcare Professional Ratio).

4.3 At least one professional with training in advanced resuscitative techniques, e.g. Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support Course (PALS) should be immediately available until all school student leave the school.

4.4 There should be a program of on-going in-service training to all professionals providing healthcare services. Such training may provide within the school or may be obtained through participation in continuing education courses offered outside the facility.

4.5 School doctors need 30 CME hours annually to renew their license.

4.6 School nurses need 15 CME hours annually to renew their license.

Number of students	Number of nurses	Number of Doctors
Less than 1000	One full time Nurse	At least one part time doctor
1,000 to 2,000 students	Two full time Nurses	One full time doctor
More than 2,000 students	One full time nurse for every 1,000 Students	Two full time doctors

4.7 Part time doctor should be available in the school clinic at least twice per week for at least two hours in each visit.



4.8 School doctor can be one of the following:

- Specialist Pediatrician
- Specialist Family Physicians
- Specialist Community Medicine
- General Practitioner

4.9 The school nurse can be either licensed as Community Nurse or Registered Nurse (RN) with experience in school health programs.

4.10 Malpractice insurance for all licensed healthcare professionals according to article 25 and 26 of the UAE Federal Law number 10/2008 concerning Medical Liability should be maintained.

## **5- Medication policy and Procedure**

5.1 Only minimum amount of medicines to be stored if school has a part time doctor.

5.2 If school has a full time doctor, medication policy should be developed under his/her responsibility.

5.3 School doctor's instructions should be followed on the storage and delivery procedures of medications regarding expire date, temperature control and other pharmaceutical issues.

5.4 Maintaining cold chain and handling vaccines in School Setting. Refer to MOH guidelines.

## **6- Infection Control**

6.1 Special attention should be given to implement a comprehensive and up to date infection control standards.

6.2 Procedures should be implemented to minimize the sources and transmission of infections and maintain a sanitary environment.

6.3 A system should be in place to identify, manage, handle, transport, treat, and dispose of hazardous materials and wastes whether solid, liquid, or gas.

6.4 There must be an active program for the prevention, control, and investigation of infections and communicable diseases. The infection control program may include, but is not limited to:

6.4.1 A system for identifying, reporting, investigating, and controlling infections and communicable diseases of patients and staff

6.4.2 Implementation of corrective action plans

6.4.3 Mechanism for evaluation of the program

6.5 Schools are required to report of communicable diseases and the number of individuals affected. (UAE Medical Liability Law 10/2008).

6.6 Vaccine-preventable diseases should be reported immediately and appropriate action taken to ensure the protection of other children and adults in the school.

## **7- Student Medical Records**

7.1 The facility must maintain health records and reports in a manner to ensure accuracy and easy retrieval. Data collection should be structured in a manner to consistently encourage a free flow of information.

7.2 Health records shall be maintained in the custody of the health facility and shall be available to a patient or his/her designated representative through the attending healthcare professional at reasonable times and upon reasonable notice.

7.3 The facility shall ensure that each student is allocated a specific unique identifier, and where multiple records for the same student exist they are cross-referenced.

7.4 A record should include a recent history, physical examination, any pertinent

progress notes, laboratory reports, imaging reports as well as communication with other student/patient personnel.

7.5 Records should highlight allergies and untoward drug reactions.

7.6 Records should be organized in a consistent manner that facilitates continuity of care.

7.7 Reporting requirements should be consistent with relevant patient confidentiality regulations implemented by MOH

7.8 Discussions with student/patients concerning the necessity, appropriateness of treatment, as well as discussion of treatment alternatives, should be incorporated into a patient's medical record as well as documentation of executed informed consent.

7.9 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.

7.10 Only health practitioners in the school clinic directly involved in a student's care must have access to that student's health records and related information.

## **8- Emergency & Transfer Protocols**

8.1 The School clinic should be equipped with the appropriate medical equipment, supplies, and pharmacological agents which are required in order to provide cardiopulmonary resuscitation, and other emergency services.

8.2 There should be a written policies that ensure the availability of necessary personnel, equipment, and procedures to handle medical and other emergencies that may arise in connection with services provided.

8.3 There should be written protocols for handling emergency situations, including medical emergencies and internal disasters.

8.4 There should be written protocols in place for the timely and safe transfer of patients to a pre-specified alternate care facility within a reasonable proximity

when extended or emergency services are needed. Protocols must include a written transfer agreement with a reasonably convenient hospital(s).

8.5 School serving less privileged children should have specially trained staff and special equipment accordingly.

## **9- Student Privacy and Rights**

9.1 Student should be treated with respect, consideration, and dignity.

9.2 The student has the right to privacy and confidentiality.

9.3 Student or his/her guardian should be given the opportunity to participate in decisions involving the healthcare provided when such participation is not contraindicated.

9.4 Student or his/her guardian has the right to refuse any diagnostic procedure or treatment and be advised of the medical consequences of that refusal.

## **10- Clinical Laboratory Services**

Every entity that tests or examines specimens for the diagnosis, prevention or treatment of any disease or impairment, or for the assessment of the health of a human being is considered a clinical laboratory.

Clinical laboratory testing not permitted as part of the School clinic service. Laboratory testing if required may be provided as off-site by contract, or by referral.

## **11- Radio-diagnostic Imaging Services**

Radio-diagnostic procedures are not permitted as part of the school clinic services.

## **12- Facilities & Equipment**

### 12.1 Facility Physical Environment

The facility should be clean and properly maintained and have adequate lighting and ventilation. The space allocated for a particular function or service should be adequate for the activities performed. The Health Facility Guidelines: Planning, Design Construction and Commissioning, which is available in MOH website [www.moh.gov.ae](http://www.moh.gov.ae) , is adopted by the MOH for evaluating design submissions for new and renovated healthcare facilities including School clinics. For general specification of the school clinic see appendix 1

### 12.2 Handicapped Accessibility

In compliance with the federal law number 29 for 2006 regarding Special Needs Rights, each healthcare facility shall be made accessible to accommodate disabled individuals. The following handicapped requirements are mandatory:

- Handicapped parking within or near the school premises
- Wheelchair ramps within the school building
- Accessible physical examination room
- Handicapped-accessible rest room within the school building

Special arrangements shall be made to see patients if the facility cannot be made handicapped-accessible.

### 12.3 Equipment and Safety

List of medical instruments and equipment required in school clinics available in appendix 2

All equipment used in patient care, testing, or emergency situations should be inspected, maintained, and tested on a regular basis and according to manufacturers' specifications. The facility should have appropriate fire-fighting equipment, signage, emergency power capabilities, lighting, and an evacuation plan. The facility should have the necessary personnel, equipment, and procedures to handle medical and other emergencies that may arise in connection with services provided. Appropriate emergency equipment and supplies should be readily accessible to all patient service areas.

Hazards that might lead to slipping, falling, electrical shock, burns, poisoning, or other trauma should be eliminated. The facility must comply with the Dubai Municipality (DM) regulations regarding protection of the health and safety of employees.

### **13- Smoking Policy**

Smoking inside the school clinic is strictly prohibited for all professionals, visitors, and patients. The clinic management is responsible to implement this policy. Signboards should be fixed in the main entrance, patient, and visitors waiting area and other areas of the facility alerting individuals regarding this policy.

## Appendix 1: General Specification

No	General Specification
1	School clinic can be established in school.
2	<b>Proper day lighting and ventilation</b> within the clinic premises is obligatory, windows which can be opened shall be fitted with a net.
3	Walls shall be painted with <b>easily washable paints</b> (light colors is preferred), with no sharp edges in wall and Clinic floors shall be made of easily washable material e.g. ceramic tiles or special medical floors.
4	<b>Clear colors contrast</b> between doors, wall color and non medical furniture is recommended
5	<b>Corridors and Doors</b> shall be wide and permits wheelchair and trolleys (at least 90 cm for doors and 120 cm for corridors width)*
6	School clinic shall comprise at least of the following: 1- <b>Doctor room (consultation room)</b> with space area not be less than 12 square meters with washbasin and taps water 2- <b>Treatment Room</b> shall not be less than 6 square meters 3- Reception area 4- <b>waiting area</b> 5- Toilet (Minimum of one) 6- Medical records / files area
7	General safety requirement (e.g. Fire extinguisher, emergency exits) is mandatory requirements in the building.

## Appendix 2: Medical instruments and equipment

No	Item
1	Stethoscope.
2	Sphygmomanometers.
3	Weighing Scale with Height measurement
4	Thermometers
5	Percussion Hammer and Tuning fork.
6	Diagnostic set for ENT & Eye Exam.
7	Disposable tongue Depressors.
8	Syringes and Needles (Sterile, disposable).
9	Torch
10	X-ray viewer box
11	Dressing trolley with cotton, gauze and isposable examination Gloves
12	Kidney shape bowl.
13	Disinfectant solution (e.g. Betadine, Alcohol 70%, H2O2, etc), medical soap or hand disinfectant solutions
14	Blood glucose instrument (Prick method)
15	Tourniquet
16	Nebulizer Machine
17	Autoclave Machine.
18	Examination Lamp (mobile).
19	Resuscitation Drugs for shock (Cortisone, Adrenaline, Anti-Histamine injections).
20	Basic resuscitation instruments (e.g. Oxygen cylinder, face mask, laryngoscope, etc)
21	ECG Machine (optional)



## Furniture

No	Required Furniture
1	Doctor desk with two chairs for patient and attendant.
2	Examinations couch.
3	Partition
4	Sufficient amount of linen or disposable medical towel paper.
5	Refrigerator to keep vaccinations and drugs.
6	Wheeled chair (optional)
7	Medical waste agreements and containers
8	Prescription book and Medical Records for patients