


REPTON SCHOOL | ABU DHABI



مدرسة ريبتون | ابو ظبي

REPORTING OF COMMUNICABLE DISEASES

RAD/SC/P0024/13

REPTON SCHOOL ABU DHABI		مدرسة ريبتون ابو ظبي
Division/Department: RAD		Reference Number: RAD/SC/P0024/13
Section: School Clinic		Issue Date: 1 November 2016
Subject: Reporting of Communicable Diseases		Revision Date: 4 September 2018
Section: Management		Version: I

1. PURPOSE


This Standard mandates the requirement to report to HAAD all Public Health Data defined in this Standard and the means by which to submit the reports to HAAD. It aims to ensure the following:

- 1.1. All the necessary Public Health data are captured to assess the health of the Abu Dhabi population;
- 1.2. Support Public Health analysis of current and future health challenges and their impact
- 1.3. Enable prioritizing and establishing appropriate preventative and treatment interventions.


2. POLICY STATEMENT

2.1. Healthcare Providers must:

- 2.1.1. Have policies and procedures in place to provide quality Public Health data that are reported by appropriately qualified and trained members of staff. Staff must be assigned clearly defined responsibilities in accordance with the HAAD Provider Policy Manual, Chapter V, General Duties, Governance and Change of Control.
- 2.1.2. Report Public Health data, via the HAAD electronic notification system using the data fields and following the instructions detailed in the notification user manual via:
<http://www.haad.ae/haad/tabid/871/Default.aspx> ;
- 2.1.3. Assure the quality of reported data, including, where necessary reviewing the medical records and case history relevant to the notifiable public health data including that the reported data are accurate, complete and reported to HAAD within the time frames specified in this Standard;

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- 2.1.4. Seek access to the electronic notification system granted by HAAD upon registration in the e-services reporting system, (Electronic reporting is accessible via e-services on the HAAD website at <http://www.haad.ae>);
- 2.1.5. Submit e-Claims data in accordance with the Data Management Policy, Chapter VI, Healthcare Regulator Policy Manual Version 1.0 and as set out in the HAAD Data Standards (found online at www.haad.ae/datadictionary). Reporting of e-claims data is independent of the reporting of public health statistics;
- 2.1.6. Provide any additional data requested by HAAD personnel with regards to the submitted notification(s);
- 2.1.7. Comply with HAAD policies and standards on managing patient medical records, including developing effective recording systems, maintaining patient records, maintaining confidentiality, adverse event management and reporting, privacy and security of patient information and fulfilling the requirements of patient consent and patients' rights and responsibilities charter;
- 2.1.8. Ensure that necessary, appropriate and timely treatment and management is provided to all cases requiring clinical care in accordance with international evidence based best practices, HAAD Policies and Standards and federal and emirate laws;
- 2.1.9. Where a hard copy of reportable public health data is provided for the legal guardian or retained in the patient records, providers must ensure that this is signed and stamped by an authorised employee (for death events, this must be by the attending physician);
- 2.1.10.

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2.1.11. Where a death event is caused by a communicable disease, health care providers must submit communicable disease and death notification via the relevant notification systems; and

2.1.12. Comply with HAAD requests to inspect and audit records and cooperate with HAAD authorised auditors, as required for inspections and audits by HAAD.

2.2. Enforcement and Sanctions

2.2.1. Healthcare providers must comply with the requirements of this Standard, the HAAD Standard Provider Contract and the HAAD Data Standards and Procedures. HAAD may impose sanctions in relation to any breach of requirements under this standard in accordance with Chapter IX, HAAD Policy on Complaints, Investigations, Regulatory Action and Sanctions, The Healthcare Regulator Policy Manual Version 1.0.

2.3. Reporting Requirements

2.3.1. Reporting of Public Health Data must be in accordance with the requirements of the following tables:

3. SCOPE


This standard applies to all Repton School Abu Dhabi and School Nurse licensed by HAAD.

4. TARGET AUDIENCE

All staff working at RAD.


5. RESPONSIBILITY

The school nurse must disseminate information regarding procedures of reporting any identified communicable diseases.

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6. PROCEDURE

- 6.1. School Clinic Nurse logs in to HAAD notifications using provided link.
- 6.2. Nurse navigates to School Health Notification form
- 6.3. Nurse creates student demographic record.
- 6.4. Repton School Abu Dhabi Clinic and healthcare professionals must:
 - 6.4.1. Report all suspected and/or confirmed cases of, and deaths caused by a notifiable communicable disease; where available, notification of a Communicable disease must be reported by the infection control coordinator at the reporting healthcare facility;
 - 6.4.2. Complete all mandated data fields as per the specifications of the Communicable Diseases electronic notification system;
 - 6.4.3. Submit to HAAD accurate Communicable Diseases data for each communicable disease group provided at Appendix 1, within the following timeframes:
 - 6.4.3.1. Group A: communicable diseases that require notification to HAAD within less than 2 hours of initial diagnosis (suspected or confirmed). Table 1, red, Appendix 1.
 - 6.4.3.2. Group B: communicable diseases that require notification to HAAD one calendar day from initial diagnosis (suspected or confirmed). Table 2, blue, Appendix 1.
 - 6.4.3.3. Group C: communicable diseases that require notification to HAAD within seven calendar days from initial diagnosis (suspected or confirmed). Table 3, green, Appendix 1.
 - 6.4.4. Ensure that all sampling and laboratory testing for communicable diseases complies with the requirements of the HAAD Clinical

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Laboratory Standards available from the HAAD website at: www.haad.ae;

- 6.4.5. Should comply with the requirements of the Communicable diseases case definitions as defined in this standard and detailed at Appendix 2.

7. DEFINITIONS AND ABBREVIATIONS

- 7.1. Public Health Data – comprise of a set of demographic and health information data pertaining to matters of public health including mortality and morbidity that are recorded for all birth and death events. They comprise of information and screening activities collected throughout the life cycle of individuals and communities including, but not limited to, antenatal and preconception, new born babies and preschool age children, school age students, injury and poisoning and notifiable communicable diseases.
- 7.2. Public Health Data Reporting -Data for each of the defined variables on mortality and morbidity recorded against mandated data fields specified by HAAD in the HAAD electronic notification system at <http://www.haad.ae/haad/tabid/871/Default.aspx>.
- 7.3. School Health Screening – is a defined screening schedule for school students, Grades 1 – 12, as established by the HAAD Standard for School Health Screening.
- 7.4. Notifiable Communicable Diseases - refers to a list of infectious diseases as defined by Federal Law No. (27) Of 1981 Concerning Protection from Communicable Diseases, and Cabinet Decision No. (33) Of 2009 promulgating the bylaw of the medical liability Law no. 10, 2008; and as determined and revised by HAAD. The federal law and HAAD mandate the reporting of

suspected and confirmed infectious diseases by physicians, nurses, infection control practitioners, laboratorians, health care facility administrators, and other

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health care professionals in accordance with specifications detailed in appendix 1 and appendix 2.

7.5.3.15 Case definitions - infectious diseases case definitions for reporting purposes are available on the HAAD website at:

<http://www.haad.ae/HAAD/LinkClick.aspx?fileticket=AarUP99oAhc%3d&tabid=819>

7.6. Communicable Diseases Case Definitions, treatment and management guidelines for certain communicable diseases that may be defined, published and updated by HAAD from time to time.

8. CROSS REFERENCES

HAAD Policies and Circulars

AHS/SEHA

9. APPENDICES

Appendix 1 - All notifications (suspected and confirmed) must be reported via:

<https://bpmweb.haad.ae>

Appendix 2 - - HAAD Communicable diseases Case Definitions

<http://www.haad.ae/HAAD/LinkClick.aspx?fileticket=AarUP99oAhc%3d&tabid=819>

Table 1. Timeframes for additional reporting requirements

Public Health Data	Timeframe for reporting	Additional reporting requirements
Birth	48 hours	None
Death	72 hours	None
Non-Fatal injury and poisoning	7 days	None
Communicable Diseases Appendix 1 – Group A Table 1	Immediate	<ol style="list-style-type: none"> 1. In accordance with HAAD case definitions for infectious diseases (Appendix 2) 2. Suspected and confirmed cases must be reported
Communicable Diseases Appendix 1 – Group B Table 2	One calendar day	<ol style="list-style-type: none"> 1. In accordance with HAAD case definitions for infectious diseases (Appendix 2) 2. Suspected and confirmed cases must be reported
Communicable Diseases Appendix 1 – Group C Table 3	Seven calendar days	<ol style="list-style-type: none"> 1. In accordance with HAAD case definitions for infectious diseases (Appendix 2) 2. Suspected and confirmed cases must be reported

Table 2. List of notifiable communicable diseases

<input type="checkbox"/> AFP/ Poliomyelitis <input type="checkbox"/> 1	<input type="checkbox"/> Leprosy (Hansen Disease) <input type="checkbox"/> 1
<input type="checkbox"/> Amebiasis <input type="checkbox"/> 7	<input type="checkbox"/> Listeriosis <input type="checkbox"/> 7
<input type="checkbox"/> Anthrax <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Malaria <input type="checkbox"/> 1
<input type="checkbox"/> Botulism <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Measles (Rubeola) <input type="checkbox"/> 1
<input type="checkbox"/> Brucellosis <input type="checkbox"/> 1	<input type="checkbox"/> Meningitis Specify Etiology: <input type="checkbox"/> 1
<input type="checkbox"/> Chickenpox <input type="checkbox"/> 7	<input type="checkbox"/> Viral
<input type="checkbox"/> Cholera <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Bacterial
<input type="checkbox"/> Coronavirus (Novel) <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Mumps <input type="checkbox"/> 7
<input type="checkbox"/> Dengue Fever <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Pertussis (Whooping Cough) <input type="checkbox"/> 1
<input type="checkbox"/> Diphtheria <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Plague <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Encephalitis, Specify Etiology: <input type="checkbox"/> 1	<input type="checkbox"/> Rabies <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Viral	<input type="checkbox"/> Relapsing Fever <input type="checkbox"/> 1
<input type="checkbox"/> Bacterial	<input type="checkbox"/> Rubella (German Measles) <input type="checkbox"/> 1
<input type="checkbox"/> Escherichia coli (Enterohemorrhagic): <input type="checkbox"/> 1	<input type="checkbox"/> Rubella Syndrome, Congenital <input type="checkbox"/> 1
<input type="checkbox"/> Food borne Illness <input type="checkbox"/> <input type="checkbox"/> Specify:	<input type="checkbox"/> Scabies <input type="checkbox"/> 7
<input type="checkbox"/> Giardiasis <input type="checkbox"/> 7	<input type="checkbox"/> Scarlet Fever <input type="checkbox"/> 7
<input type="checkbox"/> Haemophilus influenzae invasive disease <input type="checkbox"/> 1	<input type="checkbox"/> Severe Acute Respiratory Syndrome (SARS) <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Hepatitis A <input type="checkbox"/> 1	<input type="checkbox"/> Sexually Transmitted Infection (STIs) <input type="checkbox"/>
	<input type="checkbox"/> Chlamydia <input type="checkbox"/> Chancroid <input type="checkbox"/> Gonorrhea
	<input type="checkbox"/> Genital Warts <input type="checkbox"/> Herpes Simplex <input type="checkbox"/> Syphilis <input type="checkbox"/>
	<input type="checkbox"/> Trichomoniasis
	<input type="checkbox"/> Other, <input type="checkbox"/> 7 specify.....
<input type="checkbox"/> Hepatitis B (specify acute case or chronic) <input type="checkbox"/> 7	<input type="checkbox"/> Shigellosis <input type="checkbox"/> 1
<input type="checkbox"/> Hepatitis C (specify acute case or chronic) <input type="checkbox"/> 7	<input type="checkbox"/> Smallpox (Variola) <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Hepatitis D (Delta) <input type="checkbox"/> 7	<input type="checkbox"/> Tetanus <input type="checkbox"/> 7
<input type="checkbox"/> Hepatitis E <input type="checkbox"/> 1	<input type="checkbox"/> Tuberculosis (Pulmonary) <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Human Immunodeficiency Virus (HIV)/AIDS <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Tuberculosis (Extra-Pulmonary) <input type="checkbox"/> 7
<input type="checkbox"/> Influenza <input type="checkbox"/> 7	<input type="checkbox"/> Typhoid /Paratyphoid Fever <input type="checkbox"/> 1
<input type="checkbox"/> Influenza - Avian (human) <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Typhus Fever <input type="checkbox"/> 1
<input type="checkbox"/> Influenza -H1N1 <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Viral Hemorrhagic Fever <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Invasive Pneumococcal Disease (IPD) <input type="checkbox"/> 7	<input type="checkbox"/> Yellow Fever <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Legionellosis <input type="checkbox"/> 1	<input type="checkbox"/> Occurrence of any unusual diseases <input type="checkbox"/> <input type="checkbox"/> specify

Group A = Report immediately by telephone & electronic notification

Group B 1 = Report by Electronic notification within one calendar day of identification

Group C 7 = Report by electronic notification within seven calendar days of identification

NB: All notifications (suspected and confirmed) must be reported via:

<https://bpmweb.haad.ae>

