

# AL SHAMS CENTRE PARENTS' HANDBOOK



Learn, Do, Achieve

## **Al Shams Centre**

P.O. BOX 2710

Al Riqqa Street, Villa 29, Al Jazzat, Sharjah, UAE

Tel: 06 5667339

[info.alshamscentre@gmail.com](mailto:info.alshamscentre@gmail.com) [www.alshamscentre.com](http://www.alshamscentre.com)

# Parents' Handbook

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## 2 WELCOME

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Dear Students and Parents,

Welcome to Al Shams Centre (ASC). We are pleased that you have selected ASC as your school and placed your trust in us to provide your child with education and therapeutic support in all areas of his or her development.

This handbook is designed to tell you more about our Centre and how it operates, along with our key policies. Please take the time to read through the handbook and if you have questions or concerns please contact me for clarification. I hope you find the information useful.

At our Centre we strive to create a stimulating environment where all students feel safe and secure, where their self-esteem is nurtured and each child can unfold his or her personality, learn and master challenges. We build on each student's strengths and devise the Individual Educational or Treatment Plans so that each student can develop his individuality and talents to achieve his or her full potential. Our caring and highly qualified professional staff recognize that it is essential to lay the foundation for happiness, success and the highest level of independence by providing a programme that is balanced between academic and functional learning experiences.

We at Al Shams Centre believe that the parents play a vital role in the learning process of their children and in the school community. We value collaboration between the staff, parents and the wider community. Please become a part of our community and play an active role in this partnership by getting involved in the activities of the Centre and the learning process.

Most important, we want your child to enjoy his or her learning experience at our Centre.

I look forward to welcome all students and parents this year.

Ursula Rohrer  
Clinical Director

### 3 MISSION

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Our mission is to provide educational opportunities and supportive services for students with disabilities in a secure and nurturing environment in which each students can achieve his or her full potential and become self-sufficient in the school and a productive member of the community.

### 4 VISION

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The Centre strives to become a leading special educational, vocational and therapeutic provider throughout the UAE.

### 5 AIMS

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To fulfil our mission and serve students with disabilities we:

- Provide quality programming
- Provide specialized services aimed at assessing and treating mental disabilities, autism and multiple disabilities
- Focus on the individual child in his learning environment
- Partner with families
- Develop initiatives and workshops for continuing education and community support
- Hire qualified professionals

### 6 PHILOSOPHY

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We at Al Shams Centre believe that all students can reach their academic, behavioural and social potential by providing education and therapeutic support based on principles of recent research on learning. These principles include that:

- ❖ the learning environment encourage the student to become an active learner,
- ❖ to build on the student's natural desire to explore,
- ❖ understand and master new things,
- ❖ by internalizing new meaningful knowledge that can be transferred to situations outside the school,
- ❖ by providing opportunity to practice and problem-solve,
- ❖ by collaborating socially and
- ❖ by assuming responsibility for one's learning.

Our belief is that every student can thrive in an environment in which the following Stages of Learning can be accomplished.



## 7 SCHOOL CALENDAR

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The school opening time is from 8am – 1 pm. Students can be dropped off at 7:30am and will be supervised by the teacher's assistant. The students should be picked up at 1pm by their parents.

The following school attendance and holidays are determined by the Ministry of Social Affairs and they are as outlined below. The Religious holidays will be confirmed as they are announced.

1-18: Summer programme

21 Teacher in-service  
28 Term 1 starts

AUGUST 2016						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

10 Arafat (Haj) Day  
11 Eid-al-Adha (Feast of Sacrifice)  
12 Eid-al-Adha Holiday 1  
13 Eid-al-Adha Holiday 2

SEPTEMBER 2016						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

2 Al-Hijra (Islamic New Year)

OCTOBER 2016						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

30 Martyrs' Day

NOVEMBER 2016						
S	M	T	W	Th	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

2 National Day  
3 National Day Holiday  
11 Mouloud (The Prophet's Birthday)  
15 Term 1 ends  
25 Christmas  
31 New Year's Eve  
School holiday

DECEMBER 2016						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

School holiday

8 Term 2 starts

JANUARY 2017						
S	M	T	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

FEBRUARY 2017						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

MARCH 2017						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

23 Term 2 ends  
School holiday

APRIL 2017						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

School holiday

9 Term 3 starts

MAY 2017						
S	M	T	W	Th	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

JUNE 2017						
S	M	T	W	Th	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

22 Term 3 ends  
School holiday

JULY 2017						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

## 7.1 ABSENT STUDENTS

Please inform the school on the day (email or call reception) if your child is absent. A Medical Certificate 'safe to attend class' should be submitted to the school medical team in the case of any serious infectious disease.

## 7.2 SPECIAL EVENTS

Our aim is to develop students holistically. Our programme includes different events and activities to enhance the students' learning experience. Some of these activities are listed below and we will keep you informed of changes or additional events.

Month	Event	Parent Engagement
August, 29	Parent Evening	Informative event and meet the teachers
October, 25-27	IEP Meetings	Dates will be provided individually
November, 2-12th	Book fair	Visit the book fair Donate books
November, 29	National Day Celebration	Visit the school bring friends and family
December, 15	Christmas Celebration, last day of term 1	
January, 29-31st	Progress Report Meetings Open Day of class/school activities	Discuss with the teacher and therapists your child's progress
February, 6	International Day Celebration every child dresses up in his/her national dress	Bring family friends along to participate, parents provide national dishes for celebration
March, 21 March, 23: Term ends	Mother's Day Celebration	Celebrate with your child
April: Autism Awareness Month	Autism Walk: 22.04 Reading Festival: 19-29.04 Tree Planting Event: 28.04	Parents will be informed regarding timings and venues
May, 25 Ramadan starts	School photographer	
June, 18 Father's Day 22 Term 3 End	End of Year reports Graduation Party	We celebrate together your child's achievements of the year.
Throughout the Year	Second Thursday of each Month: Parent Group Class/Therapy attendance: by appointment	

## 8 EDUCATIONAL PROGRAMME

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### 1. School Admission Screening Assessment:

A student can be enrolled in the school after the **school admission screening assessment**, consisting of Speech-Language Therapy, Occupational Therapy, Psychology and Educational Assessments are completed and enrollment is indicated. Each discipline conducts an assessment, according to the age of the student and writes an Initial Assessment Report, indicating the need and frequency of therapy. The assessment results are then presented to the parents in a feedback session and the programme placement can be discussed to determine the best possible way of supporting the student's development.

The cost of the school admission screening assessment will be considered a part of the school fees after the student is registered and enrolled in the Educational Programme.

## **2. The Individualized Educational Plans:**

The Centre recognizes that each student is an individual with specific needs and should be provided with the opportunity for learning and development to reach their potential in their cognitive, physical, emotional, personal and social development. Each student's educational programme and learning expectations, including the supporting services, will be developed and described in his or her Individual Educational Plan (IEP). The IEP also helps teachers monitor the student's progress and provides a framework for communicating information about the student's progress to parents and to the student. The IEP is updated periodically to record any changes in the student's special education programme and services that are found to be necessary as a result of continuous assessment and evaluation of the student's achievement of annual goals and learning expectations.

## **3. The Early Intervention Programme:**

The programme is designed for children from the ages 0-4 and 4-5 years with developmental delays, cerebral palsy, mental disabilities and autism. The goal of early intervention is to prevent or minimize the physical, cognitive, emotional, and resource limitations of young children disadvantaged by biological or environmental risk factors. Each child will be assessed on admission and the Individualized Educational Plan (IEP) or Individual Treatment Plan (ITP) will be developed according to the needs of the child by the parents, teacher, therapists and administrators. The plan lists the goals and the objectives and focuses on all areas of development and the skills the child will need to succeed in the school programme.

## **4. The Junior Educational Programme:**

This programme offers an individualized educational programme to students aged 6-14 years with mental disabilities, autism and multiple disabilities.

Each student's goals are outlined in his/her IEP and the educational programme will cover all key and functional areas to develop the student's basic skills. These areas may include physical skills, self-help skills, sensory and motor skills, receptive and expressive language skills.

The students are placed according to their ages and level of functioning into classes which consist of 7 to 10 students.

Evidence-based instructional practices are implemented in an intensive, highly supportive environment that maintains a low student/teacher ratio which addresses the unique, educational and therapeutic needs of each child. The primary language of instruction is English with Arabic as the secondary instructional language, and instruction will be provided according to the student's level of understanding. Classroom teachers and related service providers work together in a highly coordinated fashion to maximize the educational benefits for students. *Structured Teaching* of the TEACCH approach is incorporated in the method of teaching. TEACCH was specifically developed to support students with autism in learning but it benefits most students. A behaviour modification programme will be integrated in the teaching approach to manage especially students with attention and behavioural problems.

Physical education is provided to promote physical fitness and include swimming, sports and gym classes.



The students can participate in educational field trips which will facilitate their community participation as well as provide the students with additional experiences and knowledge regarding subjects and topics taught in the classroom.

### **5. Pre-vocational and Vocational Training for Students with Disabilities**

The transition from adolescence to adulthood is difficult for all children, especially for children with disabilities. Al Shams Centre offers a pre- and vocational training programme for students from 14 to 21 years aimed at developing life skills so that the students can be integrated in the community through employment and become productive members of the community.

At first the student will be assessed to determine his/her eligibility for the programme, as well as to establish the baseline to develop an Individual Transition Plan (ITP) and the group placement. The students will be instructed in groups of 8-10 by a special education teacher and teacher's assistant. The students will receive Occupational Therapy, Speech Therapy and Behaviour Modification according to their needs and to ensure that the goals of the ITP can be achieved. Classroom and therapy staff use well-established strategies, such as community-based instruction, behaviour modification plans, task analysis and incidental learning, in addition to individual and small-group direct instruction.

The programme includes five broad areas:

- ❖ job readiness skills,
- ❖ arts and crafts,
- ❖ clerical work,
- ❖ retail
- ❖ food service
- ❖ grocery and
- ❖ daily living skills.

### **6. Related Services: Speech Therapy, Occupational Therapy and Behavioural Modification Programme:**

A full range of related services are also provided in order to implement the Individual Education Plans (IEPs) in the least restrictive environment. Related services are delivered in pull out, embedded and consultative formats. Related services are interwoven with the instructional programme and delivered within the classroom setting whenever possible. An interdisciplinary team approach ensures regular and cohesive communication and co-planning amongst teachers and therapeutic staff. These services include, but are not limited to, the following: Speech and Language Therapy, Occupational Therapy, Behavioural Modification Programme.

### **7. Wide Range of Standardized Assessments**

Assessments and tests are used to determine a variety of abilities. The psychologist may use tests to determine academic achievement, ability and intelligence to determine the presence of a developmental delay, disability or giftedness, which can be used to decide on school placement, vocational ability or to track a child's development. Speech-Language and Occupational Therapists assess specific skills or milestones in relation to children of the same age. Determining strengths and weaknesses aid the teachers and therapists to set specific goals for each student, by utilizing each students' strengths to encourage improvement of the weaker areas.

Standardized assessments allows us to establish the students' performance in comparison to his age-related peer group. The following is a selection of the available assessments:

1. Wechsler Individual Achievement Test, Second Edition (WIAT-II)
2. Wechsler Intelligence Scale for Children, Fourth Edition (WISC V)
3. Vineland Adaptive Behavior Scales, Second Edition
4. Test of Auditory Processing Skills, Third Edition (TAPS-3)
5. Clinical Evaluation of Language Fundamentals (CELF -5)
6. Developmental Test of Visual Perception (DTVP-3)
7. Pediatric Evaluation of Disability Inventory (PEDI)
8. Peabody Developmental Motor Scales, Second Edition
9. Beery VMI, 6th Edition

Although standardized tests are of great value, they are only one element of a comprehensive assessment. They will never be used as the sole basis for a diagnosis or to determine a student's functional level. A detailed clinical and personal history of the student and a review of psychological, medical, educational, or other relevant records or questionnaires are required to lay the groundwork for interpreting the results of any standardized measurement.

Cultural and language differences of the students will be taken in consideration as well as motivation and previous experience to a test situation, which may affect the test results. Our aim is to use the most appropriate tools to establish your child's abilities in order to create the best educational and treatment plan for your child.

#### **8. Parent support group:**

Good support is essential to the families of children with developmental difficulties and disabilities. While friends and family may provide much-needed encouragement in many areas, perhaps no one can offer emotional understanding, information and advice as well as people who are in the same situation. We will provide regular opportunities where parents can meet to discuss specific difficulties, disabilities, experiences or express emotions in dealing with the demands of their situation.

The goals of the support group are to:

- Support the families in their engagement with their children at home, school and in the context of coming to the centre
- Create parental support networks.
- Support relationships within the family and to expand social opportunities for the children.
- Provide education to the families regarding the difficulties and disability of their child and to offer counselling and support when needed.
- Promote disability awareness and collaborating with other partners in the field of disability awareness and promotion.

#### **9. In-house workshops and training for parents and staff**

The primary objective of continuous in-house training is to promote high professional standards and the continuing competence of all our staff. We aim at being a motivated, effective team who are informed regarding new treatment and teaching methods that will assure high quality and relevance.

Parents form a vital part of the team in participating in the educational and home environment. The parents are working collaboratively with the teaching and therapeutic staff in setting the goals for their children as well as implementing methods in the home environment. In-house workshops will be presented to parents according to their needs and interests. We strive to offer information and experiences that will empower parents and staff to work towards the goal of supporting the development of each student to achieve his or her highest potential.

## 9 LEARNING APPROACHES

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We recognise that all our pupils are individuals with very specific learning needs. To this end we incorporate a range of different learning approaches to help meet their needs both at an individual level and within a group setting.

We believe some pupils have their needs better met in specific classes that are needs led. We have ASD specific classes and PMLD classes that are broadly chronological, but may have pupils with a 2 to 4 year age span difference within each class. Some of these classes will follow an amended curriculum for those that are profoundly developmentally young. The remainder of classes within school caters for pupils with SLD and Complex Needs (severe learning disability). These classes are grouped in key stage and year groups as in a mainstream school. These classes follow the DASH-3, Carolina Curriculum for Student with special needs or the CAPS (SA) that is highly differentiated to meet their needs and make subjects truly relevant.

The following learning approaches are used within the school: Structured teaching via the TEACCH method was developed by Professor Eric Schopler and many of his colleagues at the University of North Carolina at Chapel Hill. The TEACCH method is not considered an actual therapy but rather a therapeutic tool to help autistic individuals understand their surroundings. The TEACCH method is primarily used to assist the autistic individual in better understanding his/her environment. The techniques described are not faded out over time; but rather, they are to be consistently used across a variety of environments.

Autistic individuals often have difficulty with receptive and expressive language, sequential memory, and handling changes in their environment. The TEACCH method provides the individual with structure and organization. This method relies on five basic principles; a brief description of each is provided below.

### **TEACCH:**

Stands for 'Treatment and Education of Autistic and Communication handicapped CHildren'. It is a system that originated in the US that is now used in many settings that cater for pupils with autism.

It advocates:

- i) a high degree structure and routine throughout the day,
- ii) clear use of visual systems to support pupils learning e.g. photos, symbols and clear use of colour etc and
- iii), clearly defined areas within class for individual work, group work, snacks and play. This approach is used in different degrees within each of the specific ASD classes

### **Visual systems:**

Many of our pupils are visual learners, this means that their strongest learning style is through things that they see in preference to listening or auditory learning. To this end we endeavour to use a wide range of visual materials and methods including symbols, photographs, in future, extensive use of IT and the white board, signing, gesture, use of colour to highlight notices and labels and various types of visual schedules to show timetables. Visual structure refers to visually-based cues regarding organization, clarification, and instructions to assist the person in understanding what is expected of him/her. For example, a visual structure may involve using coloured containers to assist the person in sorting coloured materials into various groups or displaying an example of a stamped envelope when the person is asked to place stamps on envelopes.

### **Role play:**

Much learning is situational and contextual and comes alive for our pupils when acted out and practiced before the real event e.g. using money in a class shop, learning to put on different

clothes depending on the weather, and learning to deal with adults we don't know. Acting out or role playing a situation can then be videoed and give pupils a chance to see themselves and doubly learn from the experience.

### **Physical structure**

Physical structure refers to the actual layout or surroundings of a person's environment, such as a classroom, home, or group home. The physical boundaries are clearly defined and usually include activities like: work, play, snack, music, and transitioning.

### **Scheduling**

A schedule or planner is set up which indicates what the person is supposed to do and when it is supposed to happen. The person's entire day, week, and possibly month, are clearly shown to the person through words, photographs, drawings, or whatever medium is easiest for the person to comprehend.

### **Work system**

The work system tells the person what is expected of him/her during an activity, how much is supposed to be accomplished, and what happens after the activity is completed. The goal is to teach the person to work independently. The work system is also organized in such a way that the person has little or no difficulty figuring out what to do. For example, the activity or task should be performed from top to bottom and from left to right.

### **Routine**

According to the TEACCH method, the most functional skill for autistic individuals is a routine which involves checking one's schedule and following the established work system. This routine can then be used throughout the person's lifetime and in multiple situations.

### **Kinaesthetic and practical learning:**

Many of our pupils, as in a mainstream setting, learn through movement and physically doing as a preferred way of learning. For example, when counting pupils may build a brick tower or jump a certain number of times. Kinaesthetics or movement based learning makes many concepts more real for our pupils but also has the added benefit in developing their motor control.

### **Sensory based work:**

For those pupils who are more profoundly developmentally young (PMLD and some ASD pupils), there is a need to work at a sensory level. This means that all seven senses need to be developed and used as the primary vehicle for learning. The seven senses that are specifically acknowledged within our amended curriculum are: visual, auditory (hearing), taste, smell, touch, vestibular (balance) and proprioception (stimulus received through our muscles and joints largely through movement).

### **Community based learning:**

As role play is practice for a real situation so community based learning is an opportunity to use skills in a real context e.g. buying items in a shop, going on a bus or train, or using the swimming pool etc. Equally the community provides a social context for learning which will become even more important as pupils get older. Preparing our children for the wider world, in different degrees, is a key skill and ultimately will make a big difference to their quality of life.

### **Total communication:**

Within school we practice the ideal of total communication whereby signing, speech and symbols (*sign, say & symbol*), are used to enhance pupils understanding and learning. Whenever

possible we would always promote speech but we also know that all pupils benefit from us using other visual cues, whether it be signing, gesture or symbols to confirm meaning and enhance their understanding. We do not expect that all pupils use all of the above; rather we would encourage any attempts at communication at whatever level.

## 10 THERAPY PROGRAMME

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The therapy programme is designed to provide individual and small group therapy for children, aged 0-18, in the community who are in need of these services. Speech and Language therapy, Occupational Therapy and Behaviour Modification will be provided to ensure that the children receive the service they require.

The **THERAPY SERVICES** include:

- a) Assessment and treatment procedures
- b) Standardized Assessments and Screenings
- c) Therapies provided:
  - i. Psychology:
    - Behavioural modification programmes
    - Learning techniques to improve academic skills
  - ii. Speech and Language Therapy:
    - Auditory Verbal Therapy
    - Phonological Therapy
    - Fluency and Voice Therapy
    - Language intervention activities
    - Articulation therapy
    - Oral-motor/feeding and swallowing therapy
  - iii. Occupational Therapy:
    - Sensory Integration
    - Neurodevelopmental Therapy
    - Motor Learning
    - Therapeutic Listening Programme
    - Handwriting and learning training
    - Life skill training

### 1. ASSESSMENT and TREATMENT PROCEDURES:

**Initial Consultation:** Prior to the consultation the parent will be provided with a Child Development Questionnaire which will supply the therapist with comprehensive information regarding the child's medical and developmental history. During the Initial Consultation the parents are provided with the opportunity to discuss their child's needs and areas of concern as well as provide the therapist with any additional relevant information. This enables the therapist to verify possible contributing aspects for the child's difficulties and explore the available options, in collaboration with the parents, to determine which assessments and procedures are necessary.

**Assessment(s):** Once the case history has been reviewed, standardized assessments will be conducted along with observations and possible checklist(s) related to the area being assessed. The assessments are conducted in one or two sessions of one hour each, according to the child's needs and areas of concern. Should additional testing be indicated, it will be discussed with the parents. The purpose for conducting standardized

assessments is to establish the child's performance in relation to his age-related peer group, establish whether and to which extent a disorder or delay is present, to establish the strengths of the child as well as to establish a baseline performance level to measure and monitor progress. Once the assessment is completed, the therapist interprets and records the findings in a comprehensive written report, including specific recommendations, further referrals and whether therapy is indicated. The report is presented and the findings and recommendations are discussed with the parents during the feedback meeting.

**Therapy commences:** The therapist develops an Individual Treatment Plan (ITP) within 30 days stating the goals, objectives and procedures, based on the assessment results. Recommendations for the home environment will be included in the Individual Treatment Plan. The therapy will be provided in individual or small group settings, depending on the child's needs and goals. The child's progress will be monitored constantly and documented in a progress report after three or six months. The progress of the child is reviewed with the parents and further recommendations will be implemented.

**Transition and Discharge planning:** Once the child has achieved the treatment goals, as determined through appropriate assessments, or the family moves to another program or chooses to discontinue services the therapist prepares the discharge plan in partnership with the caregivers of the child. The plan should specify whether ongoing monitoring, support in the community or a referral to other services are indicated as well as how it will be implemented. The plan is developed to assist the child to ensure maintenance and/or continuous improvement to enable the child to become as independent as possible. Families are provided with relevant, accurate information to support their and promote their child's growth, development, and functioning.

## 11 PARENTS AND COMMUNICATION

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You, the Parent are a vital part of the Al Shams Centre team. No one knows your child as well as you do and we hope to do so soon. We believe that respect and communication are key to an effective, productive partnership. We have an 'open door' policy, which means that if we are free, we will see you without an appointment. However, we recommend that you call the receptionist to make an appointment to meet us to confirm that we are available.

We therefore want to communicate in different ways:

- a) Parents are very welcome to come into school. Please always report to Reception so that we can assist you. If you wish to speak to the teacher or therapist, you are welcome to do so between 7:30 and 8am, or request an appointment should the matter require more time.
- b) You are welcome to observe therapy sessions, via CCTV or a direct session – please confirm the appointment with the respective therapist. Please observe the timings as we take care not to infringe on another student's therapy time.
- c) Staff emails will be set up shortly, so you can email a concern or comment, or
- d) Use the Communication Diary to comment or request information. It is now mandatory to sign that you have read an entry. It indicates to the teacher or therapist that you are informed regarding your child's activities and progress, as well as on upcoming events.
- e) Any other written communication, e.g. Newsletters, Students Account statements will be sent with your child. Please be sure to check your child's bag regularly or instruct other caregivers (nannies and maids) to check daily.
- f) **Confidentiality:** the staff of Al Shams Centre are not allowed to discuss school issues, colleagues or other students/parents with anyone else. They are only able to discuss your

own child with you. They are not allowed to give out other parents' or staff contact numbers.

- g) Parent-Teacher Meetings: we have scheduled meetings in October and January to discuss your child's IEP and Progress Report as well as at the end of the school year.
- h) The Parent WhatsApp Group is designed to inform parents as well as for parents to request and support each other. It should be used with discretion and parents can be added or leave at their own wish.

## 12 TRANSPORT: SCHOOL BUS

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Wadi Swat Transportation Company buses are available, where feasible, to pick and drop students to/from their homes as arranged. For trips, sports activities the Transportation Company charges the school for the use of buses, so charges must be collected from the parents for trips as appropriate. Parents are requested to apply for transport at the same time as admission into school, to ensure that transport requirements can be met (not all locations are available). A school teacher's assistant is the bus assistant and any absences or changes must be communicated to her; she informs parents about changes in the schedule.

Pick-up time; students must be at their pick-up point on time as the drivers will wait for only one minute; we aim to be fair to all students and parents, so being on time avoids difficulty for the subsequent families.

Drop off time; parents/approved guardians must meet their child at the drop-off point on time. Drivers will wait only one to two minutes and the child will be returned to school for you to pick up.

All parents should sign a consent form, stating names and contact details of guardians or drivers as we will not allow any other person to receive or pick up your child.

## 13 COLLECTING YOUR CHILD FROM SCHOOL

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At 1pm your child will be taken from his/her classroom by their teacher to the waiting/reception area for collection by the designated adult. **Please collect your child on time as the teachers are not available for duty after the buses leave.**

It is of utmost importance to us that the students attend regularly so that they do not miss learning time, so we encourage you, the parent from taking the children out of school early or bringing them late. However, if you have some emergency or medical appointment and need to take your child to, please report to reception at least one hour before you come to pick up your child. The receptionist, Ms. Zainab, will send to class for your child. Please do not go directly to class to take your child.

We request that all visitors (including parents) report to reception after 8am and not go directly to class, as this disrupts teaching and learning, and raises safety and security concerns.

Please note the following: Please complete the form indicating other guardians or drivers that will be appointed by you to pick up your child.

## 14 BREAK-TIME: SNACKS

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The students have two scheduled breaks; at 10am and at 12am. We request that parents provide their child with healthy snacks or the foods according to your child's diet. We take all sensory difficulties and preferences into account and support the development of healthy eating habits so that the child is able to have a balanced diet. The Psychologist, Occupational

and Speech Therapist collaborate to develop an eating management plan in agreement with the parents, but understand that we do not force children to eat. Please limit chocolate, chips, cakes and sweets to a minimum.

Water is available all day, but all students need to bring a water bottle.

Suggestions for healthy snacks:

- ❖ Fresh fruits and vegetables in bite size pieces
- ❖ Cooked foods: rice with meat/chicken, soups (can be reheated in the microwave)
- ❖ Sandwiches, wraps, bread rolls
- ❖ Dried & fresh fruit
- ❖ Yogurt, milk and fruit juice
- ❖ Fruit & oat bars

## 15 SCHOOL UNIFORM

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Our school uniform consists of black pants, skirts or skorts, maroon shirts (polo or cotton shirt) with black shoes. Each students receives 2 badges which you can attach to the left breast/chest pocket or area, should there be no pocket. For some students who have difficulty opening and closing tight buttons, it would be advisable to wear pants with an elastic waistband, as we do encourage independent use of the bathroom and this would enable your child to manage his clothing with as little support as possible. Information regarding the uniform shops can be obtained from reception.

We also request that you send a spare set of clothes as well as additional diapers.



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**Wishing everyone a successful, joyful year of learning, experiencing belonging, accomplishment and pride!**

