TRAINING REPORT

CAPACITY BUILDING OF VIGILANCE COMMITTEES

TRAINING OF TRAINERS ON SAFE SCHOOL REOPENING IN LIGHT OF COVID-19

Prepared by: Abida Umar
Social Development Expert
Safe School Reopening Pilot
Idara-e-Taleem-o-Agahi
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Training of School Vigilance Committees on Prevention against COVID-19

Safe School Reopening Pilot - SRP Project
December 2020- March 2021, Islamabad, Pakistan

The best way to prevent and slow down transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads. We are raising the awareness and providing support to schools, teachers, children and community in maintaining safe school operations.

Background
Safe School Reopening Pilot is being implemented by Idara-e-Taleem-o-Aagahi, for making schools a safer place for learning. The proposed activities of SRP are interlinked, to achieve project objectives. Setting in with “Safe School Campaigns” that helped in introducing the project with the school administration, teaching & non-teaching staff, students returning to school, and the parents. This paved the way to formation of Vigilance Committees, that included:

1- Student Vigilance Committee (SVC-1) (Comprising of Students & Teachers
2- School Vigilance Committee (SVC-2) (Comprising of Teaching & Non-Teaching Staff)
3- Parent Vigilance Committee (PVC) (Comprising of Parents from community, including ones whose children study in Respective School)

The school principals were accessed, they were explained regarding the role & responsibilities of the vigilance committees (Annexed) and were asked for nominations of a focal person and proposed Vigilance Committee members.

Vigilance Committees
The three levels/types of vigilance committees (School Vigilance Committee; Student Vigilance Committee; and Parent Vigilance Committee) were formulated in all 20 target schools and 37 trainings were organised to capacitate 559 members (217 females and 342 males) of these committees to practice, promote and monitor the COVID-19 prevention measures in schools and catchment areas to schools. (Annex-1a)

Students Vigilance Committee: the committee comprised of two active, willing young representatives from each grade. A total of 256(B: 94, G: 162) members of these committees were trained on Prevention against COVID-19.

School Vigilance Committee: Teachers and non-teaching staff lead by principal.
They were mainly nominated by school administrations as Focal Points for COVID 19 to whom school and community will inform/ report COVID-19 symptoms and potential exposures. They perceived their current role as being strategic for the implementation and compliance of SOPs in their institutions and therefore saw the training as crucial. A total of 175(M: 71, F: 104) members participated in these trainings.

**Parents Vigilance Committee:** A total of 128 Parents (Males: 56, Females: 72) of students and community volunteers took part in these trainings.

**Capacity Building of Vigilance Committees:**

**Facilitators / Trainers:**
The Community Mobilization Officers coordinated with the respective schools and on basis of their time allocation, trainings were organized and were led by the Public Health Expert; Social Development Expert; Community Mobilization Expert & the mobilization team also facilitated the trainings. (Annex-1b)

**Training Proceedings:**
The training was led in participatory manner. And participants were encouraged to ask questions and discuss any ambiguities.

The training comprised of three major sessions, each one-hour session consisted of a background talk covering a specific topic, brainstorming, followed by practical exercises and group works based on instructions.

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<tr>
<th>TIME</th>
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<tbody>
<tr>
<td>09:30 am</td>
<td>Welcome remarks &amp; Introduction of Participants</td>
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<tr>
<td>09:40 am</td>
<td>Introduction to SRP &amp; ITA</td>
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<td>09:50-10:15</td>
<td>Vigilance Committee, its role and expectations</td>
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<tr>
<td>10:15-10:45</td>
<td>Understanding COVID-19 (Symptoms, Prevention, What to do?)</td>
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<tr>
<td>10:45-11:15</td>
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<td>11:15-11:45</td>
<td>Risk Assessment &amp; Mitigation Plan – Role of School Vigilance Committees</td>
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The medium of expression was English and Urdu for convenience of understanding for the participants. PowerPoint presentations, flipcharts, videos and print copies of handouts were utilized.

The trainings commenced with the sharing of School report Cards, the data was explained to the participants and based on that, the purpose of the training was shared with the participants. The master trainers (Annex-1c-- Trainers trained at
NIH) of the respective schools were also involved during the sessions for their practice foreseeing the sustainability. The trainings were also visited by the respective AEOs.

**Training Objectives:**

The training sought to enable participants

- To enable the participants to have a clear basic information about corona virus disease and personal protective measures against COVID-19 in line with the SOPs
- To enable the participants to proper handwashing and other protective practices to prevent the disease / pandemic
- To build the capacity of Vigilance committees to identify school specific risks and develop workable school risk mitigation actions plans

**Training Content**

Following core concepts were covered in the training (Annex-2: Capacity Building & VCs Presentations)

- **Understanding COVID-19 and knowing the latest** basic information about coronavirus disease (COVID-19), including its symptoms, complications, how it is transmitted and how to prevent transmission. Stay informed about COVID-19 through reputable sources such as UNICEF and WHO and national health ministry advisories. Be aware of fake information/myths that may circulate by word-of-mouth or online.

- **Understanding and Practicing SOPs**
  - Appropriate method of mask wearing, handwashing, respiratory etiquettes (dos and don’ts) and use of PPE.
  - Awareness on responding to a suspected/ positive case.
  - Integrate disease prevention in daily activities and lessons

- **Vigilance Committee, its role and expectations**
  - Understanding the role of members of each vigilance committee, how are they expected to do and what they need to understand about COVID-19.
  - Role of committees in giving correct information and ensuring safe behaviors to maintain safe school operations
  - Spread and encourage safe practices to make homes and community safe/ what to communicate (key messages) and how to communicate

- **Risk Assessment & Mitigation Plan- Map the Gap**
  - Capacitate participants to assess hazards, and implement mitigation strategies to reduce the spread of Coronavirus Disease (COVID-19) in schools in order to

  protect students, teachers, staff and the broader community and maintain safe school operations.
Following key elements were covered in this session on School specific Risk Assessment and Mitigation & Action Planning for COVID-19

- Identification of risks and hazards within the school premises in reference to pandemic
- Assessing the capacity within the school to deal with the risks and hazard
- Identification of measures and practices to prevent or reduce the effects of hazard, risk and vulnerabilities.

Session Proceedings:

1. **Review of Agenda:** Organization of the training and a detailed overview of the training agenda was shared in this session.

2. **Opening Ceremonies:** The welcoming and opening remarks by lead trainers and round of introductions of the participants, Trainer and the SRP team was conducted. Safe School Reopening Pilot was introduced to the participants along with the introduction of Idara e Taleem o Aagahi and the donor agency JICA.

3. **Knowledge Assessment and Participants expectation:** The knowledge of participant regarding the Pandemic Corona Virus and the SOPs was assessed in participatory manner. Participants were encouraged to brainstorm on Covid-19 symptoms and precautionary measures. This assessment gave a quick overview of the knowledge and experience levels of participants and helped the trainers to re-confirm the training content. The participants were encouraged to ask about their expectations from the training.

4. **Understanding COVID-19 and knowing the latest:** The participants were explained about basic information about coronavirus disease (COVID-19), including its symptoms, complications, how it is transmitted and how to prevent transmission.

**Practicing Prevention:**
Practical sessions under the training were centered on;
- Mask Wearing Practices and Respiratory Etiquettes
- Hand sanitizer use
- Seven steps of hand washing
- Use of face Shield for teachers
- Appropriate use of PPE

**Vigilance Committee, its role and expectations**
Vigilance Committees role and responsibilities were explained to the participants. The participants had a good sense of, the definition and possible role of vigilance committees that was assessed during participatory discussions their queries around the VCs were clarified to their satisfaction. The participants were encouraged to clarify any ambiguities in reference to the training contents and their role as School Vigilance Committee members.
Risk Assessment & Mitigation Plan: (Annex-3: SMAP)

The participants were oriented to Risk assessment and were divided into two groups to come up with the possible risks within their schools and the possible measures that can be adopted to mitigate the identified risks. The trainer and the facilitator mentored them through the activity. The group work was followed by the respective group presentation.

The trainer explained the Mitigation Action Planning and identification of risk and its mitigation. This was followed by the Q/A session.

During group works participants identified the potential risks regarding COVID-19 spread and basic safety/ mitigation measures which can be divided into two broader phases mentioned as below

Risks Identification

Non-structural risks (awareness, knowledge and skills on prevention against COVID-19)/ related to administrative controls

- The students and teachers don’t wear masks properly (covering nose & mouth)
- Poor respiratory hygiene practices, students cough and sneeze in open air and don’t cover mouth and nose
- Adequate reinforcement material is lacking
- Objects Sharing practices students – teacher (notebooks for checking),
  - students – student (pencils, books, eatables)
  - Teachers – teachers (board markers, registers etc)
  - Communal use of biometric system, toilets, water utensils- drinking glass and coolers etc.
- Improper timings and intervals of disinfection of surfaces in school in general
- Poor handwashing behaviour at critical times
- Lack of awareness to handle a student/ teacher, if displays symptom during school timing or identifies as positive case
- Lack of awareness among parents to send their child with appropriate personal safety equipment like masks and hand sanitizer and inform school officials if their child gets sick/ shows symptoms
- Mental and physical stress due to prolonged SOP practices as new normal and challenging environment faced by students and teachers & non-teaching staff
- Passive role of committees in safe reopening / School safety in public health perspective
Structural risks (related to availability, access and use of facilities)/ related to engineering controls

- Lack of personal protective equipment for designated staff who oversee on-campus isolation room
- Lack of social distancing during entry, exit, breaks and in the toilets during school day.
- Packed classrooms to the capacity
- Insufficient supply of disinfectant/cleaning material
- Lacking handwashing facility
- Unhygienic and inadequate toilets/ non-functional toilets
- Unavailability of proper designated place to isolate a person with symptom
- Inadequate safe drinking water supply for drinking purposes
- Unavailability of soaps/ consistent supply of soaps on stations for all the children.

Mitigation Actions

Administrative controls

- Awareness and training on proper use, removal and disposal of masks (surgical and cloth) and respiratory hygiene (coughing and sneezing)
- Capacity building of staff through trainings /trainings on SOPs for the prevention of COVID-19 within school and beyond
- IEC material in easy-to-understand language to recall and remind the desired actions
- Zero tolerance approach to ensure implementation of SOPs
- Plan Available for increased routine disinfection of surfaces including doorknobs, Switches, tables, chairs, desks, Computers etc.
- Demonstrate handwashing steps and awareness on critical timings and make hand hygiene obligatory upon entry and exit of the school
- Conduct awareness sessions with teachers and students on stress relieving exercises
- Orientation of Vigilance Committees on their responsibilities and hold regular meetings. (Physical / virtual) for timely execution of developed SMAP, review progress, obstacles, experiences and share learnings with each other.
**Engineering controls**

- Modifying classroom areas, turning desks to face in the same direction rather than facing each other or School will have staggered time for different classes for arrivals, departure and for breaks.
- Physical guides and nudges on hallways and stairways, such as tape on floors and signs on walls to promote social distancing
- Provision of equipment / training on how to make our own protecting materials
- Availability of hand sanitzers for each class and training of VCs on making of hand sanitizers, by partner organization-ITA
- Ensure availability of adequate cleaning and disinfection material (Soaps, sanitizer, dustbins)
- Dedicated place to isolate a person with symptoms/ suspected case or Physical barriers, such as plastic or glass partitions, may be installed in existing rooms
- Ensure availability of filtered water by providing water treatment system/ water filters

✓ **Question Answer Session:**
Participants were encouraged to clarify any ambiguities regarding disease and precautions and prevention. The participants during trainings asked the following questions:

- They were concerned about the second wave & variant of CORONA and discussed regarding the preventions
- For how much time the masks can be used
- Are cloth masks good or surgical masks
- How can the young age children at home can be prevented from disease, if mother has COVID
- What diet can be taken for maintaining or enhancing the immunity
- How can we protect the children from gathering outside the school for buying eatables / junk food from the hawkers outside the school?
- What can parents do who make the children sit in van exceeding the capacity.
- How the distance can be maintained at the time when school goes off.

And other questions, all the queries were clarified at length to the satisfaction of participants, who appreciated the knowledge gained and committed for continuing the practice of following the SOPs.

**Reflections & Wrap-up**

- Debriefing session at the end of each training session to recall key learning points and key takeaways
- Individual training evaluation form were filled by participants
- All participants were awarded with certificates of participation
- The trainings concluded with vote of thanks
Participant’s Reflections:
Participants were encouraged to complete a brief evaluation questionnaire. It was an opportunity for participants to comment on the content and conduct of the training. Their feedback is basically divided into two areas;

1. Specific to aspects of training design and delivery, and
2. On the value of the training over all

Analysis of these evaluations showed that they were very satisfied with the general outcomes of the training. They agreed that the objectives of the training and their expectations were largely met. They were happy the way the training was organized and run. They also felt their level of contribution largely contributed to the success of the training.

Evaluation Comments

✓ Training was highly appreciated by the participants
✓ The training was very comprehensive and based on practical demonstration.
✓ Every part of the training was interesting, but the most interesting was the training about how to handle infants even when one is isolated due to COVID-19.
✓ Detailed analysis of the pandemic and the mitigation plans were delivered impressively.
✓ Practical demonstration on procedure of masks wear and remove a mask was too helpful.
✓ Hand washing demo was excellent.
✓ Length of training was sufficient and clear.

The reference document on “SOPs on Reopening of Education Institutions by Ministry of National Health Services, Regulation & Coordination” was given to the Principal and participants at the end of each training, to facilitate the approach effectively in their schools. (Annex.4)

Challenges / Lessons Learnt

Prior to the trainings, respective AEOs were informed of the dates and training timings and were invited to visit the trainings. Some of the trainings were witnessed and observed by the AEOs. They appreciated and endorsed the trainings and the information being provided to the participants. This contributed in smooth conduction of trainings.

- The administration of all the schools and colleges were polite and cooperative.
- Foremost Challenge was to access the target group during the second wave of CORONA and school closures.
- Shorter school timings were challenge for both the SRP staff and the School Staff & students
- Access to parents and inviting them for participation in training was quite challenging
Training of Trainers on Safe School reopening in Light of COVID-19

Background:
Meeting the objectives of safe school reopening pilot to have a sustainable program for ensuring the safety of schools while they reopen in pandemics, one strategy was adopted to train at least two teachers/admin staff as master trainers on Safe practices considering Pandemic. ITA collaborated with National Institute of Health who developed a manual in light of guidelines from Ministry of health, World Health Organization and other agencies and trained the school staff on these guidelines.

Formal approval and permission was taken from FDE who shared the nominations from 20 schools who were trained at NIH on Safe school reopening in light of COVID-19, on February 10, 2021. (Annex-1c)

Facilitators:
The training was conducted by:
Dr. Mohammad Amjad Khan- NIH
Dr. Sara Savul – NIH
Dr. Mumtaz – NIH

Training Objectives:
• To develop a resource pool of Trainers on safety measures from COVID, in schools
• To ensure the availability for local human resources at the target schools

Proceedings:
The training was conducted by COPS (Centre for Occupation and Patient Safety), at National Institute of Health Islamabad. The training commenced with recitation of Holy
Quran. Followed by welcome address and round of introductions of participants. An introduction to SRP/ITA was presented by Ms. Abida. The participants were from 20 intervention schools, from NIH and from SRP/ITA.

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<th>TRAINING METHODS</th>
<th>FACILITATOR</th>
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<td>10:00-10:05</td>
<td>Recitation from the Holy Quran</td>
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<td>10:05-10:30</td>
<td>Welcome and orientation</td>
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<td>10:30-11:15</td>
<td>COVID-19 updates, symptoms, modes of</td>
<td>Interactive PREZI and discussion</td>
<td>Dr. Muhammad Amjad Khan</td>
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<td>transmission and case management</td>
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<td>11:15-12:15</td>
<td>Guidelines and practical measures for</td>
<td>Interactive power point and</td>
<td>Dr. Saba Savul</td>
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<td></td>
<td>reopening of schools</td>
<td>discussion</td>
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<td>12:15-12:30</td>
<td>Tea Break</td>
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<td>12:30-12:50</td>
<td>Correct usage of Masks</td>
<td>Interactive power point</td>
<td>Dr. Mumtaz Ali Khan</td>
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<td>presentation and Practical demonstration</td>
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<td>12:50-13:20</td>
<td>Hand hygiene</td>
<td>Interactive power point</td>
<td>Dr. Saba Savul</td>
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<td>presentation and Practical demonstration</td>
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<td>13:20-14:00</td>
<td>Closing Remarks and certificate distribution</td>
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The Technical session was led by Dr. Mohammad Amjad Khan who gave orientation to the COVID-19 updates, symptoms, modes of transmission and case management through presentation and in a participatory manner. Dr. Saba Savul explained Guidelines and practical measures for reopening of schools. Participants were explained regarding quality of masks, how to assess which mask is better and why. Correct use of masks and hand hygiene was explained and demonstrated.

**Participant Queries and remarks:**
The participants clarified their concerns regarding reinfection cases.

- Measures to be adopted if a student with symptoms appears for exams.
- They shared the challenge to arrange for the preventive material within schools with limited or no resources.
- If one member gets infected and eventually all the members in a house get infected, then what precautions will be adopted.
- They asked about how the immunity can be boosted, through sleep, diet & exercise. They were informed that all the three components are essential for the immunity and safety.
• How can we ensure the safety of the child when the student is at school for six hours and for rest of 18 hrs. he / she is exposed to different kind of environment? They were guided regarding the precautions that are essential in-side the schools.
• How to manage a situation when parents send their child to school for giving paper and that child has fever, they were clarified on that.
• Life span of virus. The virus would remain on the surface for minimum of at least 3-4 hrs. every (possible) thing should be washed and then consumed.

The training ended with a vote of thanks & closing remarks by Dr. Munazza. Gratitude was paid to FDE, MoFE&PT, NIH and JICA for facilitating the training to happen. The participants were appraised for their efforts and the expectations as a master trainer.

Participants’ Feedback:
The participants appreciated the information received during the training. They pledged that in spite of the limited available resources they will make possible effort to keep their institutions and their students safe from pandemic.
ANNEXURES
Annex-1b:
Vigilance Committees

Structure of Vigilance Committees

Terms of Reference Vigilance Committees:

Student Vigilance Committee (SVC1)
(one in every school/college; where enrolment is more than 500 then two SVC-1 will be formed)

Total Members = 5 to 7 (Head Teacher/teacher (Lead), and Student Leaders)

- To be led by Head Teacher/Acting head teacher.
- Overall responsible for coordination, communication and collaboration with School Vigilance Committee (SVC2)
- Participate in awareness raising and training activities and ensure compliance with COVID-19 SOPs
- Support SVC-2 in implementation of S-MAP
• Promote awareness and empower their peers to practice prevention against infection spread by incorporating new behavioural norms like wearing mask and social distancing.
• Promote peer learning & support mechanism for high risk and vulnerable students
• Demonstrate preventive measures within the class as per agreed schedule
• Keep daily record of activities and observations on the prescribed template & submit to Head of Committees.
• Contribute in school vigilance committee meetings.

School Vigilance Committee (SVC2) (one in every school)

Total Members = 5 to 11

• To be led by Principal.
• Committee will be responsible to organize student vigilance committee.
• Committee will responsible for coordination, communication and Collaboration with parents and parent vigilance committee for preventive measures against Covid-19 and S-MAP implementation.
• Committee will ensure the implementation of SOPs in school.
• Will Identify trainers from student vigilance committees and utilize their capacity to deliver training to other students and their parents.
• Committee will maintain the record of all activities.

Parent Vigilance Committee (PVC) (one in every school)

Total Members = 5 to 13

• To be led jointly by the Community mobilization Expert and a Parent.
• It will coordinate, Cooperate, communicate and collaborate with School and Student Vigilance Committees in project activities.
• It will participate in trainings and promote community awareness and will motivate them to protect & prevent infection spread by incorporating new behavioural norms and social distancing practices in their daily lives at homes and workplaces.
• Provide support to other trainers in implementation of their trainings.
• It will keep records of activities and observations on the prescribed template & submit to M&E Officer, Project Manager & evidence research specialist accordingly.
• Contribute in School-Student committee meetings.
ANNEX-4

Objective

The current COVID-19 pandemic is unprecedented, and demands innovative measures to contain its spread and promote safety. Educational institutes all across Pakistan need to update COVID-19 preparedness, response and control plans for resuming normal or phased activities to reduce transmission amongst students and staff, and sustain a healthy environment.

This document is intended to provide mitigation strategies to minimize spread of Covid-19, as well as suggest counter measures if new cases are discovered at the facility. All educational institutes are advised to create contingency plans covering a comprehensive list of eventualities based on these health guidelines. Periodic review of the implementation of the health SOPs should be carried out by local authorities and school administration.

Introduction

SARS-CoV-2 is a virus that can causes a range of illnesses including respiratory and gastrointestinal infections. Respiratory diseases can range from the common cold to more severe ones. The outbreak of coronavirus initiated as pneumonia of unknown cause in December 2019 in Wuhan, China, which has been now spreading rapidly out of Wuhan to other countries. On January 30, 2020, the World Health Organization (WHO) declared COVID-19 outbreak as the sixth public health emergency of international concern (PHEIC), and on March 11, 2020, the WHO announced COVID-19 as pandemic. According to WHO, as of 9th February 2021, 107,007,730 cases of the novel coronavirus have been recorded out of which 2,336,337 have resulted in deaths.

COVID-19 is thought to be expanding in Pakistan as well. The first case of COVID-19 was reported from Karachi on February 26th 2020. Successively, the virus has spread into various regions nationwide. As of 9th February 2021, the total number of confirmed cases in Pakistan is 556,519 according to the statistics provided by the Ministry of National Health Services, Regulation and Coordination. Of these, more than 12,066 cases have resulted in deaths and a further 1,797 cases in critical care.

Recently, a new strain of the Corona virus has been discovered in the UK which is believed to be much more infectious than its earlier variants. Pakistan, on 29th of December 2020, has also reported its first confirmed cases of a new coronavirus strain. News of the coronavirus variant emerging in Pakistan is concerning because it, according to a study by the Centre for Mathematical Modeling of Infectious Diseases at the London School of Hygiene and Tropical Medicine in the UK, is on average 56 per cent more contagious than the original version, is spreading fast and is likely to increase hospitalizations and deaths.
COVID-19 has led to an unprecedented infectious disease risk for the entire world. The duration of this pandemic remains unclear, and the situation continues to evolve. As the virus continues to evolve rapidly, it is causing educational institutes to evaluate and plan for numerous ‘what if’ scenarios. The risk of subsequent waves of infection remains until we achieve sufficient herd immunity through vaccination or actual infection and recovery. Clinical trials and vaccine development efforts have borne fruit but are in early stages. Hence our only tools are prevention through non-pharmacologic interventions, sound public health practices, and supportive therapy. Therefore, the campus must be prepared on multiple fronts. The administration and leadership of the institute should conduct risk assessments, implement infection prevention and control measures and develop partnerships with local public health and health care organizations.

These guidelines are based on information about COVID-19 that is known today. They are purposely broad for universal use and written with the understanding that not all schools and colleges will have the resources to implement everything written in this document. Institutions should view these guidelines and evaluate the feasibility of these recommendations in the light of their own campus environment, community resources, public health capacity, demographics, internal resources, and risk tolerance.

Multi-layered Approach to Prevent Introduction & Spread of SARS-CoV-2 in Schools

Community

Early detection and isolation of cases; contact tracing and quarantine

Swift public health response to halt spread: Cluster investigation and local public health measures

Physical distancing, hand-washing and wearing of masks

Safe public transportation, protection of vulnerable groups and other measures as appropriate

School & classrooms

Personal Controls- Individuals’ behaviors to protect themselves and those around them

Engineering Controls -Processes and policies that keep people safe

Administrative Controls -Physical structures put in place to distance people from hazards
Individuals at high risk

Identification of students and teachers at high-risk of severe illness e.g. those individuals who are older than 60 years and those with pre-existing medical conditions such as asthma, diabetes, heart disease or conditions affecting their immune system

Development for appropriate strategies to keep these individuals safe

Designated COVID-19 Point of Contact

Designate a staff person to be responsible for responding to COVID-19 concerns

All school staff and families should know about this focal person and how to contact them

The designated focal person must ensure adherence to social distancing, infection prevention measures, triggering mechanisms in case of any positive case(s) or suspected case(s) in school.

**Figure 1. COVID-19 Mitigation Strategies**

Communication with parents, students, teachers & staff

Collaboration between school and community is vital
Ensure frequent communication to reassure parents, students and teachers

Post signs in visible locations that promote everyday protective measures

Address rumors, misleading information and stigma

Inform parents about the measures the school is putting in place and ask for cooperation of parents to report any cases of COVID-19 in the household

If someone in the household is suspected of having COVID-19, all members of household should stay home and school should be informed

Case Investigation & Contact Tracing
Notify health officials, staff and families immediately, maintaining confidentiality

Work with local health officials to assess spread in school

Ensure close contacts are notified and advised to stay home for 14 days

School areas used by the ill person(s) should be cleaned and disinfected If a student or staff tests positive for COVID-19:

Notify health officials, staff and families immediately

Consider closure of groups, classrooms or schools

Infected person may return to school after meeting criteria for ending home isolation
Figure 2. School Symptom Screening Flowchart

School-level Measures

Personal Controls

Physical distancing
Maintain at least a 1-meter distance for both students and staff inside and outside classrooms

Hand Hygiene
Hand hygiene is one the most effective measures to prevent the spread of COVID-19

Frequent hand hygiene (HH) should be performed by students and staff i.e. hand washing with soap and water, and hand rubbing with alcohol based hand rub (ABHR) containing at least 70 percent alcohol

Hand hygiene should be performed by students and staff upon entry and exit from school; after breaks; after blowing their nose, sneezing, or coughing and before and after eating

Hand washing should be performed when hands are visibly soiled and after using toilet.

Hand washing should take about 40–60 seconds and hand rubbing should be done for 20–30 seconds

Face Masks
All students and staff should wear a medical or surgical face mask

Mask should be three layered including a water-resistant outer layer, a middle melt-blown layer, and water-absorbent inner layer

Perform hand hygiene before putting mask on, before and after it is taken off, and after touching it at any time

Mask should cover the nose, mouth and chin.

Dispose of mask properly in a trash bin after use

Cough Etiquette
All students and staff should observe cough etiquette
When coughing or sneezing head should be turned away from others

Cover nose and mouth with a tissue and discard tissue immediately into the waste bin

Cough/sneeze into your sleeve if no tissue is available

Perform hand hygiene afterwards

Staying Home
Stay home when sick, or after close contact with someone who is suffering from COVID-19

Environmental Cleaning
Intensify cleaning and disinfection by cleaning staff

Frequently touched surfaces e.g. railings, desks, tables, toilet surfaces, teaching aids, door and window handles, should be cleaned and disinfected at least twice a day and more frequently when possible

Use a 0.1% solution made from bleach and water (using non-turbid water source) for disinfection. To mix, use the percentage found on the bleach bottle (for example, 5%) and follow these instructions:

\[\text{[% chlorine in liquid bleach} \div \% \text{ chlorine desired}] - 1 = \text{Total parts of water for each part bleach}\]

Cleaning and Disinfection Procedure
Put on personal protective equipment (PPE) i.e. rubber gloves, thick aprons, and closed shoes
Mix 0.1% bleach solution in well-ventilated area.

Clean with detergent or soap and water to remove organic matter

Apply the 0.1% solution to the surface with a cloth and allow for a contact time of at least 1 minute. After 1 minute has passed, rinse residue with clean water (this will also protect the surface or item from damage)

Remove personal protective equipment and wash hands immediately.

Administrative and Engineering Controls

Restrictive measures
Restrict mixing between groups/classes of students

Avoid sharing books, supplies, games, or other learning aides; if sharing is necessary due to limited supply, clean and disinfect between different students

Restrict extra-curricular activities, field trips, inter-group events and meetings

Restrict entry of caregivers, non-essential visitors, and volunteers.

Mark a “do not cross” point by the entrance and exit beyond which caregivers cannot cross during drop-off and pick-up using paint, chalk or tape
Encourage caregivers to wear face coverings during drop-off and pick-up.

Encourage caregivers not to exit cars/motorbikes/bicycles when dropping off/picking up children

Assign staff to monitor physical distancing during school arrival and departure and among students during breaks

Modify classroom layouts
Space seating/desks at least 1 meters apart

Face all desks/tables in the same direction

Physical Barriers and Guides
Provide physical distancing guides, such as tape, paint, or chalk on floors or sidewalks and signs on walls, to ensure that staff and children remain at least 1 meters apart

Physical barriers, such as plastic or glass partitions, may be installed in areas where it is difficult for individuals to maintain physical distancing (e.g. reception desks)

Limit crowding
Establish one-way circulation in hallways, classrooms, and school facilities.

Close communal spaces, such as indoor cafeterias and playgrounds

Educate students and staff to not gather/socialize when coming to/leaving school and during class breaks

Modify school schedules. Options include:
Staggering arrival/dismissal times and class breaks

Expanding timetable: schedule some students to attend classes in the morning, some in afternoon, and others in evening

Expanding school week: schedule some students to attend classes on certain days (e.g. Monday, Wednesday, Friday) and others to attend classes on remaining days (e.g. Tuesday, Thursday, Saturday)

Consider Cohorting: Keep students and teachers in small groups that do not mix, also referred to as bubble, capsule or circle

Consider open-air classes where feasible and if weather allows

Do not hold assemblies

Consider increasing the number of teachers to allow for fewer students per classroom

Libraries can be reopened with limited opening hours using extra precautions

Computer rooms can be reopened with a specified time table and social distancing protocols in place

For laboratories, adjust schedule for different classes/sections/grades or add additional shifts to adhere to safety protocols

Ventilation
Increase circulation of outdoor air within buildings by opening windows and doors.

If heating, ventilation and air conditioning (HVAC) systems are used, they should be regularly inspected, maintained and cleaned. Consider running the HVAC system at maximum outside airflow for 2 hours before and after times when the building is occupied, in accordance with the manufacturer’s recommendations.

School Transport Vehicle/Bus

Clean and disinfect school buses before each shift, focusing on frequently touched surfaces.

Seat only one student per row or in every other seat if there are no rows.

Keep windows open.

Bus driver and passengers should wear masks.

Infection Prevention and Control measures

Make hand hygiene obligatory upon entry and exit of the school.

Mandate all staff and students to wear a face mask while on school grounds.

Post signs with visual cues encouraging hand hygiene, use of masks and cough etiquette.

Ensure access to HH facilities by placing hand hygiene stations (hand washing stations or alcohol-based hand rub dispensers) at entrances, exits, within classrooms and within 5 meters of toilets.

Work and Sick policies.
Develop policies for students and staff to stay home if they have tested positive for or are showing symptoms of COVID-19, are caring for a sick family member, or have come in close contact with someone who is sick.

Develop flexible attendance and sick leave policies to encourage students and staff to stay home when sick, or after close contact with someone who is sick.

Ensure staff will not lose wages while isolating or in quarantine.

Consider daily symptom screening upon entry for staff and students – do not allow anyone with a fever above 100.4 °F (38 °C) or with signs of illness to enter

Environmental Cleaning
Cleaning staff should clean and disinfect frequently touched surfaces at least twice a day, or more frequently if possible. If schools use an expanded timetable (e.g. one group of students attends in the morning and another in afternoon) cleaning and disinfection must occur between each session.

Provide cleaning staff with cleaning supplies (soap/detergent, bleach, buckets) and PPE specific for the disinfectant to wear when mixing, cleaning, and disinfecting (for example, rubber gloves, thick aprons, and closed shoes).

Provide cleaning staff with information about when and how to clean and disinfect and how to safely prepare disinfectant solutions

Use of disinfection gates/tunnels is not recommended under any circumstance due to harmful effects on human health

Health Education
Educate everyone in the school about prevention of COVID-19, including appropriate and frequent hand hygiene, respiratory etiquette, use of mask symptoms of COVID-19 and what to do when if one feels sick.
Adequate Supplies
Support healthy hygiene behaviors by providing adequate supplies including soap, hand sanitizer with at least 70 percent alcohol content, paper towels, tissues, disinfectant wipes, face masks, cleaning supplies and no-touch/foot-pedal trash cans.

Food and Water
Encourage staff and students to bring their own water to minimize use and touching of water taps/ fountains. Perform sanitization of taps regularly

Encourage children to bring their own meals

School Canteens should be preferably closed but in case they are opened proper SOPs should be followed

Use of disposable food service items (e.g., utensils, dishes) may be considered. If disposable items are not feasible, ensure that all non-disposable food service items are handled with gloves and washed with dish washing soap and hot water. Individuals should wash their hands after removing their gloves or after directly handling used food service items.

Waste disposal
Waste bins with cover lid (preferably foot pedal operated) should be provided in every class for proper disposal of the used masks, tissues and other disposable material that comes in direct contact with the students and staff.

School should have arrangement for the proper disposal of the waste that is collected from the classroom bins on a daily basis, while regular disinfection of the waste bins should be done regularly.
Psycho-social support

Teachers and parents should encourage students to take breaks from watching, reading, or listening to news stories about COVID-19, including social media if they are feeling overwhelmed or distressed and emphasize eating healthy, exercising, getting sleep, and finding time to relax

Teachers should encourage students to talk with people they trust about their concerns and how they are feeling.

Checklist for required actions for schools (Adapted from WHO)

Following is a checklist to support schools re-opening and preparation for COVID-19 resurgences or similar public health crises 2020.

<table>
<thead>
<tr>
<th>TASK</th>
<th>REMARKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nominate a focal person/team to assess the feasibility of implementing protective</td>
<td></td>
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<tr>
<td>Assess school premises for the capacity to maintain a distance of at least 1 meter:</td>
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<tr>
<td>Outside classrooms</td>
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<tr>
<td>Assess availability and appropriateness of existing hand washing facilities/stations</td>
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<tr>
<td>Assess the needs of students with health conditions and special needs</td>
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<tr>
<td>Develop options to prevent mixing of students from different age groups and classes by</td>
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</tr>
<tr>
<td>limiting the number of students and staff in contact with each other. Options include:</td>
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<tr>
<td>Expanding timetables</td>
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<tr>
<td>Review feasibility of implementing physical distancing in and outside classrooms and identify areas where the measures cannot be implemented (e.g. in certain classrooms and conditions).</td>
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</tr>
<tr>
<td>Promote adherence to hand hygiene by identifying points at which hand hygiene equipment can be installed at school and classroom entrances, on all floors, and in toilet and canteen facilities, and creating schedules for frequent hand washing.</td>
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</tr>
<tr>
<td>Instruct students and teachers on proper hand washing techniques and the importance of maintaining hygiene.</td>
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</tr>
<tr>
<td>Establish and maintain a clean and hygienic environment in all school and classroom facilities and create schedules for frequent cleaning and disinfecting.</td>
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</tr>
<tr>
<td><strong>Activity</strong></td>
<td><strong>Description</strong></td>
</tr>
<tr>
<td>--------------</td>
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</tr>
<tr>
<td>Promote the wearing of masks among students, teachers and school staff especially</td>
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<tr>
<td>Educate students and school staff on the proper use of masks and the disposal of masks</td>
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<tr>
<td>Ensure adequate ventilation using natural ventilation in classrooms, and other rooms</td>
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<tr>
<td>Disseminate communication materials such as notes, posters and flyers on protective</td>
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<tr>
<td>Instruct maintenance staff to reorganize the school layout including classrooms to enable physical distancing and hygiene measures including cleaning and disinfecting</td>
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</tr>
<tr>
<td>Ensure adequate and sufficient supplies of soap, hand sanitizer, masks and cleaning</td>
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<tr>
<td>Teachers to conduct regular health education sessions to promote healthy and protective</td>
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<tr>
<td>School administration to engage with students, parents and staff to ensure acceptance of the school’s protective measures, including when dropping off and picking up</td>
<td></td>
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<tr>
<td>Raise awareness among staff and students of the importance of self-reporting any</td>
<td></td>
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<tr>
<td>Enforce policy of “staying at home if unwell” for students, teachers and school staff with</td>
<td></td>
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<tr>
<td>Focal point to disseminate information on hygiene and cleaning protocols to school staff</td>
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<tr>
<td>School administration to re-assess and plan for additional staff required to implement adapted teaching methods (e.g. smaller groups, shifts) and enhanced</td>
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<tr>
<td>School administration to inform and update students, staff and parents about current</td>
<td></td>
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<tr>
<td><em>Focal point to conduct daily checks to ensure compliance with measures</em></td>
<td></td>
</tr>
</tbody>
</table>
Checklist for parents (Adapted from CDC)

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>REMARKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check your child each morning for signs of illness. If your child has a</td>
<td></td>
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<tr>
<td>temperature of 100.4</td>
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<tr>
<td>Make sure your child does not have a sore throat or other signs of illness, like</td>
<td></td>
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<tr>
<td>a cough,</td>
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<tr>
<td>If your child has had close contact to a COVID-19 case, they should not go to school</td>
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<tr>
<td>Identify your school focal point to contact if your child gets sick.</td>
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<tr>
<td>Be familiar with local COVID-19 testing sites in the event you or your child develops</td>
<td></td>
</tr>
<tr>
<td>Make sure your child is up-to-date with all recommended vaccines.</td>
<td></td>
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<tr>
<td>Review and practice proper hand hygiene at home, especially before and after eating, sneezing, coughing, and adjusting a mask. Make hand washing fun and explain why it is important.</td>
<td></td>
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<tr>
<td>Develop daily routines before and after school—for example, things to pack for school in the morning (like hand sanitizer and an additional mask) and things to do when arriving at school</td>
<td></td>
</tr>
<tr>
<td>Talk to your child about precautions to take at school. Children should be advised to:</td>
<td></td>
</tr>
<tr>
<td>Wash and sanitize their hands often.</td>
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</tr>
<tr>
<td>Keep physical distance from other students.</td>
<td></td>
</tr>
<tr>
<td>Wear a mask.</td>
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</tr>
<tr>
<td>Make sure your information is current at school, including emergency contacts and individuals authorized to pick up your child (ren) from school. If that list includes anyone who is at increased risk for severe illness from COVID-19, consider alternative arrangements.</td>
<td></td>
</tr>
</tbody>
</table>
Be familiar with your school’s plan for how they will communicate with families when a
| Plan for possible school closures or periods of quarantine. Consider the feasibility of teleworking, taking leave from work, or identifying someone who can supervise your child within the school, if needed. |
| If your child rides a bus, plan for your child to wear a mask on the bus and talk to your child about why. |
| Ask how your school plans to help ensure that students are following practices to reduce the spread of the virus. |
| Have multiple masks to have back-ups ready. Choose masks that fit snugly but comfortably against the side of the face. |
| Completely cover the nose and mouth. |
| Practice with your child putting on and taking off masks. |
| Explain the importance of wearing a mask and how appropriately worn masks reduce the spread of the virus. |
| If you have a young child, help build their comfort wearing a mask and become comfortable seeing others in masks. |
| Praise your child for wearing a mask correctly. |
| Show images of other children wearing masks. |
| Consider providing your child with a container (e.g., labeled paper bag) to bring to school. |
| Talk with your child about how school will look different (e.g., desks far apart from each other, no shared toys). |
| Talk with your child about how school is going and about interactions with classmates and teachers. Find out how your child is feeling and communicate that what |
References

Ministry of National Health Services, Regulations & Coordination, Health Guidelines for Education Institutions Reopening during COVID 19 Pandemic, 20 September 2020


Centre for Disease Control & Prevention. Guidance and tools to help school administrators, December 9th 2020.
How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

Duration of the entire procedure: 40-60 seconds

0. Wet hands with water;

1. Apply enough soap to cover all hand surfaces;

2. Rub hands palm to palm;

3. Right palm over left dorsum with interlaced fingers and vice versa;

4. Palm to palm with fingers interlaced;

5. Backs of fingers to opposing palms with fingers interlocked;

6. Rotational rubbing of left thumb clasped in right palm and vice versa;

7. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

8. Rinse hands with water;

9. Dry hands thoroughly with a single-use towel;

10. Use towel to turn off faucet;

11. Your hands are now safe.
How to Handrub?

**RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED**

**Duration of the entire procedure: 20-30 seconds**

1a. Apply a palmful of the product in a cupped hand, covering all surfaces;

1b. Rub hands palm to palm;

2. Rub hands palm to palm;

3. Right palm over left dorsum with interlaced fingers and vice versa;

4. Palm to palm with fingers interlaced;

5. Backs of fingers to opposing palms with fingers interlocked;

6. Rotational rubbing of left thumb clasped in right palm and vice versa;

7. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

8. Once dry, your hands are safe.
Annexure C

HOW TO DILUTE AND USE BLEACH

WEAR PERSONAL PROTECTIVE EQUIPMENT
When preparing and using diluted bleach
- goggles OR face shield
- long sleeve shirt & covered legs
- gloves
- apron
- closed shoes

PREPARE 0.5% BLEACH SOLUTION
For blood/bodily fluid spills disinfection
1 part 5% bleach + 9 parts water = 0.5% bleach

PREPARE 0.1% BLEACH SOLUTION
A more diluted bleach solution is suitable for disinfecting other surfaces
1 part 0.5% bleach + 4 parts water = 0.1% bleach

DO NOT store diluted bleach in direct sunlight.
Prepare solution in a well-ventilated area.
Prepare new daily bleach solution in a container that is clean and dry (e.g. a bucket).
Label bucket with concentration, date and time when it was made. Cover with a lid.

DO NOT use mixed solutions for more than 24 hours. They are no longer effective.
Clean surfaces first with detergent and water before disinfecting with bleach solution.
DO NOT spray detergent or diluted bleach directly onto surface, apply with a cloth or paper towel to protect the use.
HOW TO WEAR A MEDICAL MASK SAFELY

**Do’s**

- Wash your hands before touching the mask
- Inspect the mask for tears or holes
- Find the top side, where the metal piece or stiff edge is
- Ensure the colored-side faces outwards
- Place the metal piece or stiff edge over your nose
- Cover your mouth, nose, and chin
- Adjust the mask to your face without leaving gaps on the sides
- Avoid touching the mask
- Remove the mask from behind the ears or head
- Keep the mask away from yourself and from surfaces while removing it
- Discard the mask immediately after use, preferably into a closed bin
- Wash your hands after discarding the mask

**Don’ts**

- Do not use a ripped or damp mask
- Do not wear the mask only over mouth or nose
- Do not wear a loose mask
- Do not touch the front of the mask
- Do not remove the mask to talk to someone or do other things that would require touching the mask
- Do not leave your used mask within the reach of others
- Do not re-use the mask

Remember that masks alone cannot protect you from COVID-19. Stay at least 1 meter away from others and wash your hands frequently and thoroughly, even while wearing a mask.
Cover Your Cough

Stop the spread of germs that make you and others sick!

- Cough or sneeze into your sleeve, not your hands
- Cover your mouth and nose with a tissue
- Put your used tissue in the waste basket

Clean your hands after coughing or sneezing

- Wash your hands with plain water and soap
- Clean with waterless hand cleaner

Cover Your Cough
Issued by: Infection Prevention and Control
Approved by: Pandemic (H1N1) 2009 Steering Committee
Annex-1: Vigilance Committee Training Schedule

<table>
<thead>
<tr>
<th>SN</th>
<th>School Name</th>
<th>Date</th>
<th>School Vigilance Committees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>IMSG-Seevra</td>
<td>December 24, 2020</td>
<td>1-SVC-Teachers and Non-Teachers Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMSG-Seevra</td>
<td>February 17, 2021</td>
<td>2-SVC-Students Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMSG-Seevra</td>
<td>February 17, 2021</td>
<td>3-SVC-Parents  Vigilance Committee</td>
</tr>
<tr>
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<td>IMSG-Kurri</td>
<td>December 31, 2020</td>
<td>1-SVC-Teachers and Non-Teachers Vigilance Committee</td>
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<tr>
<td></td>
<td>IMSG-Kurri</td>
<td>February 17, 2021</td>
<td>2-SVC-Students Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMSG-Kurri</td>
<td>February 17, 2021</td>
<td>3-SVC-Parents  Vigilance Committee</td>
</tr>
<tr>
<td>3</td>
<td>IMSG-G-6/2</td>
<td>February 02, 2021</td>
<td>1-SVC-Teachers and Non-Teachers Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMSG-G-6/2</td>
<td>February 23, 2021</td>
<td>2-SVC-Students Vigilance Committee</td>
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<tr>
<td></td>
<td>IMSG-G-6/2</td>
<td>February 23, 2021</td>
<td>3-SVC-Parents  Vigilance Committee</td>
</tr>
<tr>
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<td>IMSB-Hardogher</td>
<td>February 02, 2021</td>
<td>1-SVC-Teachers and Non-Teachers Vigilance Committee</td>
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<tr>
<td></td>
<td>IMSB-Hardogher</td>
<td>February 22, 2021</td>
<td>2-SVC-Students Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMSB-Hardogher</td>
<td>February 22, 2021</td>
<td>3-SVC-Parents  Vigilance Committee</td>
</tr>
<tr>
<td>5</td>
<td>IMPCC H-8/4</td>
<td>February 04, 2021</td>
<td>1-SVC-Teachers and Non-Teachers Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMPCC H-8/4</td>
<td>February 04, 2021</td>
<td>2-SVC-Students Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMPCC H-8/4</td>
<td>March 12, 2021</td>
<td>3-SVC-Parents  Vigilance Committee</td>
</tr>
<tr>
<td>6</td>
<td>IMSB I-8/4</td>
<td>March 10 2021</td>
<td>2-SVC-Students Vigilance Committee</td>
</tr>
<tr>
<td></td>
<td>IMSB I-8/4</td>
<td>March 10 2021</td>
<td>3-SVC-Parents  Vigilance Committee</td>
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<tr>
<td></td>
<td>IMSB I-8/4</td>
<td>February 1, 2021</td>
<td>1-SVC-Teachers and Non-Teachers Vigilance Committee</td>
</tr>
<tr>
<td>7</td>
<td>IMSB-Sohan</td>
<td>February 15, 2021</td>
<td>1-SVC-Teachers and Non-Teachers Vigilance Committee</td>
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<tr>
<td></td>
<td>IMSB-Sohan</td>
<td>February 15, 2021</td>
<td>2-SVC-Students Vigilance Committee</td>
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Annex-5: Pictures