

PARENT HANDBOOK

2025 - 2026

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PARENT HANDBOOK

Mission Statement

Our mission is to enrich the lives of individuals with ASD or related disorders, and their families, through evidence-based, and compassionate practice; by supporting them in attaining the greatest level of independence and quality of life and encouraging each individual's uniqueness. We strive to empower families to be an integral part of the success of their child and resolve to reimagine the path to an inclusive community, by educating the community to recognise and embrace neurodiversity.

Vision Statement

Empowering our students to achieve their full potential by building on their unique abilities.



Welcome to Small Steps!

Since opening our doors in September 2016, Small Steps has remained committed to empowering students with autism and related challenges within GEMS Education schools. Our dedicated team of educators, therapists, ABA practitioners, and administrators work together to maximise each student's learning potential in a welcoming, transparent, and professional environment.

As part of the GEMS community, our students are well-positioned for meaningful inclusion in classroom activities, school outings, and events. Our program is built on data-driven decision-making, tailored Individual Education Plans (IEPs), and a commitment to the highest educational, ethical, and professional standards. Above all, we are deeply devoted to our students and their families.

We continuously refine our practices, update methodologies, and aim to exceed expectations. Each student receives an individualised education and therapy plan, with a strong focus on skill acquisition through Natural Environment Teaching (NET), modified Discrete Trial Training (DTT), small group activities, and inclusion in mainstream classrooms. Support services such as Occupational Therapy and Speech and Language Therapy are provided where needed.

We are pleased you've chosen Small Steps Big Dreams to support your child's journey. Our goal is to help your child reach their full potential through evidence-based, best-practice interventions. Your partnership and commitment to consistent therapy are key to meaningful progress.

Starting therapy or transitioning to a new provider can feel overwhelming. This Parent Handbook is here to guide you, providing essential information about our policies, procedures, and expectations. Please read it carefully, including any attached documents that require your signature. If you have any questions, feel free to reach out to us at info@smallstepsbd.com or +971 55 6106471.

Sincerely,

The Small Steps Big Dreams Team.



OUR VALUES

In our commitment to providing the highest quality intervention and support for your child's developmental and academic journey, our team consistently upholds the following core values:

Quality Focus: At SSBD, we are driven by a commitment to excellence. We hold ourselves to the highest standards of professional evaluation, continuous improvement, and innovation.

Integrity: We adhere to the professional and ethical compliance code for behaviour analysts. Our work is guided by honesty, transparency, and a steadfast commitment to the best interests of the families we serve.

Social Impact: We believe in the inherent worth and dignity of every individual. At SSBD, we aim to apply the science of behaviour analysis to produce socially meaningful, positive outcomes for our students.

Collaboration: We foster a culture of teamwork and mutual support. Our strength as a community lies in our ability to work together, support one another's growth, and align individual goals within a shared vision.

Family-Centred Approach: We design programs that not only support our students' development but also enhance the quality of life for their entire family.



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1. Our Approach to Intervention at SSBD

At SSBD, we view every child as a unique and autonomous individual with the right to self-determination. Our goal is not to shape students to appear or behave like their peers, but rather to equip them with meaningful, functional skills that support their development in the most natural and least-restrictive environments.

We prioritise autonomy, communication, and trust over mere compliance with instructions or the pursuit of "typical" behaviour. Our interventions focus on promoting independence, reducing challenging behaviours through proactive and respectful strategies, and fostering self-regulation and confidence.

Physical intervention strategies are avoided unless a serious safeguarding concern arises. Instead, we emphasize collaboration, choice, empowerment, and relationship-building at the core of all our work, while ensuring the dignity, care, and safeguarding of every student.

Our team is committed to using only evidence-based, best-practice interventions and actively integrates emerging research to ensure our methods remain current and effective. Research-based Applied Behavior Analysis (ABA) can significantly support student inclusion in mainstream education by providing individualized interventions that promote essential skills such as communication, social interaction, and academic performance. By identifying how the environment affects behavior and teaching new, functional skills, ABA helps students with Autism Spectrum Disorder (ASD) and developmental challenges to better navigate classroom routines, engage with peers, and participate in academic activities. This approach not only addresses behaviors that may hinder progress but also fosters a more inclusive and supportive educational environment, allowing students to thrive both socially and academically

We also recognise that a child's development does not occur in isolation. Reaching one's full potential requires the support of both family and community. That's why our comprehensive programs go beyond behaviour and skill-building to include:

- Social relationship development
- School inclusion and adapted academics
- Play and exploration
- Collaborative family and community involvement

By combining the principles of Applied Behaviour Analysis (ABA) with a holistic, person-centred philosophy, SSBD strives to create truly meaningful and lasting outcomes for each child and family we serve.



2. Understanding ABA: A Guide for Families

Applied Behaviour Analysis (ABA) is a scientific, evidence-based approach that uses principles of learning, motivation, and reinforcement to teach functional skills and reduce behaviours that interfere with learning or daily life.

ABA is widely recognised as an effective intervention for individuals with Autism Spectrum Disorder (ASD), particularly in early intervention and educational settings. However, its principles are also applied across healthcare, business, and community programs.

At SSBD, we use ABA to build individualised programs that support children from FS1 age and beyond, helping them develop essential skills in areas such as communication, social interaction, academics, and self-care. Our approach also addresses behaviours that may hinder progress, always aiming for meaningful, socially significant outcomes.

ABA helps children by:

- Identifying how the environment affects behaviour
- Teaching new skills that promote independence
- Replacing problem behaviours with more functional alternatives
- Using motivation to drive progress

Key Focus Areas of ABA at SSBD

Our ABA-based interventions may target the following skill domains:

- Reduction of Maladaptive Behaviours
- Language and Communication Skills
- Functional Play Skills
- Adaptive and Self-Care Skills
- Social and Community Living Skills
- Attention and Cognitive Skills
- Academic Skills:
 - School Readiness and Mainstream Inclusion
 - Group Learning
 - Individualised and Functional Academics
 - Pre-Vocational Skills



Evidence-Based ABA Strategies

Our therapists use a variety of well-established ABA methods, selected based on each student's unique goals and learning style:

- Positive Reinforcement
- Differential Reinforcement Procedures
- Discrete Trial Teaching (DTT)
- Pivotal Response Training (PRT)
- Verbal Behaviour Strategies
- Natural Environment Teaching (NET)
- Visual Supports and Prompting Techniques

ABA at SSBD is always implemented with compassion, collaboration, and a deep respect for each child's individuality. Our goal is to promote independence, confidence, and meaningful participation at school, home, and in the community.

3. How Intervention Is Structured at SSBD

At SSBD, Applied Behaviour Analysis (ABA) is delivered through a comprehensive, team-based approach that modifies the environment and daily routines to teach meaningful skills and reduce behaviours that interfere with learning and quality of life. Our intervention model is built on four key components working in collaboration:

Certified Behaviour Analysts (BCBA/QBA/QASP-S/IBA)

Our certified Behavior Analysts lead the intervention process. They conduct assessments, design individualised treatment plans, create goal-oriented programming, supervise Behaviour Therapists, train team members, and provide ongoing support to families.

Behaviour Therapists

Therapists implement the treatment plan by teaching new skills through structured techniques. They break tasks down into manageable steps, using reinforcement and prompting strategies to help children progress toward independence.



School Inclusion Team

In collaboration with SEND staff, teachers, and Learning Support Assistants (LSAs), this team ensures that students receive academic accommodations and support through an Individualised Education Plan (IEP). Close coordination between SSBD and the school fosters successful classroom inclusion.

Family Involvement

Families are key partners in the intervention process. They work alongside the BCBA to generalise learned skills at home, reinforce positive behaviours, and create supportive environments that reduce the need for maladaptive responses.

Intervention Planning and Delivery

Each student begins with a skill-based developmental assessment to establish baseline performance and identify priority goals. These assessments, guided by standardized and/or criterion referenced tools and ongoing data collection, form the foundation of a customised treatment plan that evolves with the child's progress.

Our programs are:

- Individualised to suit each child's unique strengths, needs, and learning style
- Flexible and creative, adapting to ensure engagement and effectiveness
- Outcome-driven, with goals focused on communication, social interaction, daily living, play, and academics

Learning Environments and Daily Structure

SSBD provides a range of instructional settings that bridge therapy and mainstream education. These include:

- 1:1 intervention in a small group setting to replicate classroom dynamics
- Support within mainstream lessons through individualised inclusion plans
- Daily activities incorporating:
 - Discrete Trial Teaching (DTT)
 - Natural Environment Teaching (NET)
 - o Pivotal Response Training (PRT)



- o Activities of Daily Living (ADL)
- Group learning and social interaction

This collaborative, child-centred model ensures that intervention is meaningful, practical, and sustainable across school settings.

4. Mainstream Classroom Inclusion at GEMS

At SSBD, inclusion into the mainstream classroom is a collaborative, individualized process led by the Program Director, Case Supervisors, School Inclusion Team, and the GEMS Class Teacher. Together, we determine a child's readiness for inclusion based on clear developmental and behavioural indicators.

Readiness Criteria

A child's inclusion plan is guided by specific milestones across the following key domains:

- Behaviour Regulation
- Communication and Social Engagement
- Listener Responding Skills
- Group Learning Skills

We always consider the child's ability to tolerate noise, navigate classroom routines, manage behavioural challenges, and show interest in academic lessons.

Inclusion Process

Once a child is deemed ready:

- An individualised inclusion schedule is created in partnership with the GEMS Inclusion Team.
- A Behaviour Therapist supports the child within the classroom to provide prompting, reinforcement, and motivation.
- A gradual fade-out plan is implemented to build the child's independence while reducing reliance on direct support.

When not in the mainstream class, the child receives focused ABA instruction within the SSBD setting. These sessions align with their academic and developmental goals and serve to prepare them for full participation in future classroom activities.

Ongoing Collaboration with GEMS



Our partnership with the GEMS Founders School Inclusion Team ensures each child receives high-quality, inclusive education. Regular coordination helps balance time between SSBD and mainstream classrooms. All placement and planning decisions are guided by:

- Developmental and behavioural assessments
- Sensory processing profiles
- Individualised academic goals

This approach ensures children can thrive both socially and academically, while building the skills and confidence to succeed in a mainstream environment.

5. Meet the SSBD Team: Roles and Responsibilities

At Small Steps Big Dreams (SSBD), our multidisciplinary team is dedicated to helping children reach their full potential through a blend of evidence-based practices, clinical expertise, and family-centered care. Our staff bring academic and professional backgrounds in Psychology, Education, Special Education, and Behaviour Analysis, working together to deliver personalised support to every child.

Program Director: Ms. Veronica Lucy Micalizio

Ms. Veronica Lucy Micalizio is a CDA Licensed Psychologist, Board Certified Behaviour Analyst (BCBA), and International Behaviour Analyst (IBA) with over 15 years of experience in Applied Behavior Analysis (ABA), early childhood development, and psychological assessment. Having lived in the UAE for 12 years, she has extensive experience working with culturally diverse populations, which has enriched her understanding and approach to individualized care.

As the Clinical Director at Small Steps Big Dreams (SSBD), Veronica oversees all aspects of clinical service delivery, ensuring the highest standards of quality assurance. She leads a dedicated team of certified behavior analysts, guiding them in the development and implementation of evidence-based interventions. Her role involves overseeing assessment protocols and monitoring student progress through data reviews and classroom observations.

In addition to her clinical responsibilities, Veronica serves as the Designated Safeguarding Lead (DSL) for the center, ensuring the safety and well-being of all students. In this role, Veronica is responsible for upholding and implementing policies and procedures related to the safeguarding of students. She works closely with the safeguarding leadership team of the school to ensure that all safeguarding measures are effectively enforced and that any concerns are promptly addressed. Her commitment to maintaining a safe and supportive environment is paramount, and she collaborates with staff, students, and families to promote a culture of vigilance and care.



Key responsibilities include:

- Ensuring clinical quality and ethical practice across all programs
- Designing and approving assessment protocols and clinical procedures
- Overseeing curriculum development, program fidelity, and outcome tracking
- Leading the supervision and development of Case Supervisors and Therapists
- Monitoring progress and outcomes through data reviews and classroom observation
- Conducting regular multidisciplinary team reviews and parent meetings
- Guiding inclusion decisions and liaising with school stakeholders
- Managing critical incident response, risk assessments, and safeguarding concerns
- Leading professional development initiatives and staff training.

Case Supervisors

Case Supervisors at SSBD are experienced professionals in the field of ABA, holding or pursuing BCBA or IBA credentials. They play a central role in clinical case management and act as the Deputy Designated Safeguarding Leads (DDSLs) within the centre.

Key responsibilities include:

- Developing and updating individualized ABA programs and skill acquisition plans
- Conducting curriculum-based and functional assessments
- Training and supervising Behaviour Therapists, ensuring treatment integrity
- Monitoring student progress and adjusting interventions based on data
- Collaborating with families, school teams, and inclusion coordinators
- Creating and managing inclusion schedules and transition plans
- Providing parent and caregiver training, including behavior support strategies
- Coordinating student transitions between SSBD and mainstream classrooms
- Supporting safeguarding procedures and promoting child welfare within the center

Behaviour Therapists

Our Behaviour Therapists hold at least a Bachelor's degree in Psychology, Special Education, or a related field. Many are certified or working toward certification as Registered Behaviour Technicians (RBTs), International Behavior Therapist (IBT), and/or Applied Behavior Analysis Therapist (ABAT).

Key responsibilities include:



- Implementing ABA programs under the supervision of Case Supervisors
- Delivering 1:1 instruction and group learning support
- Collecting daily data and maintaining student progress notes
- Supporting students during activities of daily living (ADLs), group time, and play
- Assisting students during mainstream class inclusion and school activities
- Maintaining daily communication with families through the Parent Communication Book
- Providing consistency and care during arrival, transitions, and dismissal

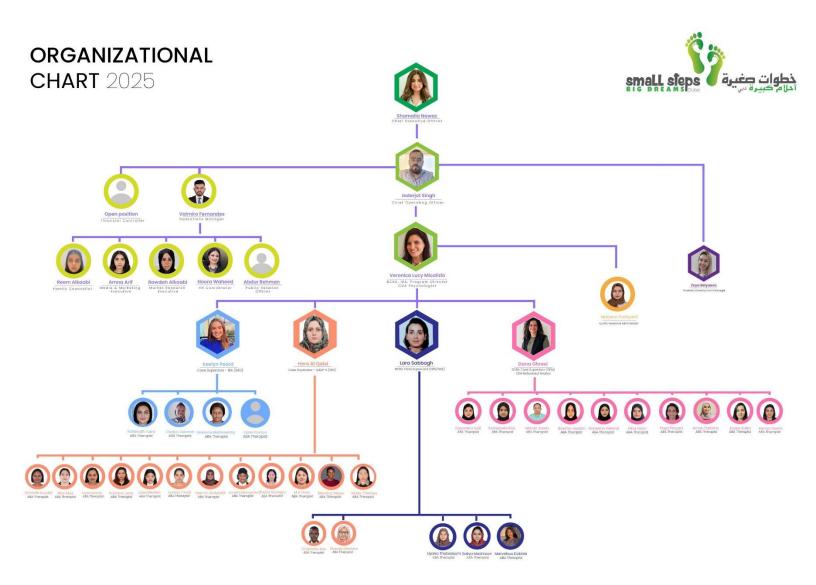
Safer Recruitment Practices

SSBD is committed to safeguarding and promoting the welfare of children. Our Human Resources Department follows rigorous safer recruitment procedures to ensure that only qualified and suitable individuals work at the centre.

Key practices include:

- Mandatory Dubai Police Clearance for all staff
- Reference checks with specific focus on child protection and past conduct
- Screening for prior disciplinary actions or safeguarding concerns
- Adherence to SSBD's child protection and safeguarding policies during onboarding





6. Getting Started at SSBD: What to Expect



We understand that embarking on a new journey can raise many questions. To help you navigate the initial stages of your child's time with Small Steps Big Dreams (SSBD), we've prepared a step-by-step overview of what to expect during the first stages of your child's time with us.

Initial Intake

During this meeting, parents will receive detailed information about:

- The SSBD program and approach
- Enrollment procedures and required documentation
- Tuition structure and policies

Parent Ouestionnaire

Parents complete a brief questionnaire about their child's:

- Strengths, needs, and interests
- Developmental and intervention history
- Communication and behaviour patterns

This helps our Clinical Team prepare for the **Initial Student Observation**.

Initial Student Observation

Parents and their child are invited to SSBD for a 30 to 45 minute play-based observation with a clinician. This allows us to:

- Understand the child's current developmental level
- Assess readiness for classroom-based ABA support
- Observe early learning, play, and social engagement

A written Observation Feedback Report will be provided following the session.

Enrolment Contract

If parents choose to proceed, they will sign an SSBD Services Contract outlining:

- The scope of services offered
- Attendance expectations
- Terms and conditions of enrollment



School Registration Approval

The child's Observation Report and other relevant details will be shared with the School Inclusion Team, who provides final approval for school registration.

School Enrollment and Fees

Parents are responsible for ensuring all required documents and school-related fees are submitted to the school administration to complete enrollment.

Start Date and Transition Plan

Once enrollment is confirmed, the SSBD Clinical Team will:

- Assign a start date
- Provide you with Consent Forms to ensure parent consent is given for physical contact, toileting care, and media sharing with parents
- Develop a Soft Start transition plan tailored to your child's needs to ensure a smooth and supportive beginning.
- Communicate individualized drop-off and pick-up times
- A welcome pack with daily logistics and expectations
- A profile of your child's primary therapist
- Key contact information

Your Child's First Small Step

On the first day, your child will be welcomed at the school's main reception by the Behaviour Therapist and Case Supervisor.

For your child's first day of school, it's helpful to pack a few essentials to keep them comfortable and prepared. A sturdy backpack with a lunchbox and snack box, a water bottle, and healthy snacks like fruit or crackers will go a long way in keeping their energy up throughout the day. Multiple changes of clothes, particularly for students who require toilet training, diapers, wipes, and a smock or oversized t-shirt for crafts. A hat is required for outdoor play times. A small comfort item

like a family photo or a small toy might be a supportive transition item. Shoes must be closed-toe and suitable for outdoor play.



The following documents will be prepared within the first days of enrollment and will require parent signature:

- Intimate Care Plan (ICP): The Intimate Care Plan (ICP) is a document designed to ensure that students receive appropriate and respectful personal care while at the ABA center. It outlines the specific care procedures required for each student, including toileting, diapering, and other personal hygiene needs. The plan is developed in collaboration with the student's family and the clinical team to ensure consistency and comfort for the student. It includes details such as the type of care needed, the frequency of care, and any special instructions or preferences.
- Personalized Emergency Evacuation Plan (PEEP): The Personalized Emergency Evacuation Plan (PEEP) is a tailored plan designed to ensure the safe evacuation of students with specific needs during an emergency. Each PEEP is customized to address the individual requirements of the student, considering their physical, cognitive, and emotional abilities. The plan includes detailed instructions on how to assist the student, the roles of staff members, and the use of any necessary equipment. PEEPs are shared with the School Clinic and Operations Team to ensure everyone involved is aware of the procedures and can act swiftly and effectively in an emergency
- Risk Assessment: A Risk Assessment for a student is a thorough evaluation process aimed at identifying potential hazards and determining the necessary measures to ensure the student's safety and well-being. This assessment considers the student's unique needs, abilities, and any specific risks they may face in various environments, such as the classroom, playground, or during school activities, field trips, and bus rides. A bus risk assessment is conducted to evaluate the safety and suitability of the student riding the school bus. This assessment involves collaboration between the student's Supervisor, SSBD's Clinical Team, and the School Operations Team. It considers factors such as the student's ability to ride safely, any special accommodation needed, and the overall safety of the transportation process. Based on the assessment, appropriate measures are implemented to ensure the students' safe travel to and from school. The goal is to create a safe and supportive environment that minimizes risks and promotes the student's independence and participation.

What Happens Next: The First Few Weeks

6a. Initial Assessment and Goal Setting



Over the first 2–4 weeks, your child's Supervisor will complete a formal initial assessment using standardized tools selected based on the student's profile and needs, including but not limited to VB-MAPP, ABLLS-R, Vineland II, PEAK assessments. Based on this, a comprehensive report is created, outlining:

- Your child's developmental strengths and challenges
- Behavioural barriers
- Proposed ABA therapy goals and objectives
- Recommended support strategies

Goals and Objectives are selected based on your child's interests, needs, and functional relevance, and guide intervention planning for the term. A Certified Behaviour Analyst will create specific teaching programs, which are implemented daily by the therapist.

6b. Positive Behaviour Support Plans (PBSPs)

If needed, a PBSP (or Behaviour Intervention Plan) will be developed to address specific behavioural challenges. These plans:

- Are based on observation and data
- Use evidence-based strategies to teach new, appropriate behaviours
- Focus on prevention, skill-building, and reducing reinforcement of problem behaviours

6c. Therapy Team and Skill Generalization

Therapists are assigned based on clinical considerations to support learning across various people, settings, and activities. Students are paired with multiple therapists throughout the year to promote generalization of skills.

Therapists receive continuous training in:

- ABA principles and data collection
- Discrete Trial Teaching (DTT), Natural Environment Teaching (NET)
- Reinforcement and prompting strategies
- Social development and behaviour support interventions

Therapists support students in mainstream classrooms, inclusion activities, and school events to help bridge learning between therapy and real-world settings.



6d. Data Collection

Data is collected daily using ABA software that tracks:

- Skill acquisition
- Behavioural goals
 Each student has a secure profile. Supervisors and BCBAs regularly analyze this data to update and enhance programming.

6e. Progress Reports

At the end of each term, parents receive a detailed Progress Report, which includes:

- Updates on the child's progress toward each goal
- Recommendations for upcoming goals for the next Term
- Re-assessment schedules (typically once per year or as clinically needed) utilizing standardized assessments.

6f. Individualised Education Plan (IEP)

The IEP is created collaboratively by:

- The student's mainstream Teacher
- The School Inclusion Team
- SSBD's Clinical Team

Parents are invited to attend IEP meetings throughout the year. The IEP outlines academic goals, classroom supports, and participation strategies.

6g. Parent Collaboration and Coaching

Parental involvement is key to a child's success. The BCBA assigned to your child will:

- Collaborate with you to generalize skills at home
- Provide helpful resources, tools, and strategy reviews
- Offer support with home-based challenges when needed (e.g., routines, reinforcement strategies)

While the BCBA can provide reasonable support and strategies to target home challenges, the



student's intervention program is focused on school-based intervention and functioning; home visits/sessions are not included, and the BCBA cannot take responsibility for home-based intervention plans.

7. Policies

7a. Communication and Contact

At SSBD, we value consistent and clear communication between home and school. The following channels are in place to keep families informed and engaged:

- Communication Book: The therapist will provide a written summary of the day's activities, 1:1 session, targets, and special events. Please note that detailed clinical notes or data on specific interventions and targets will not be included and questions about these areas should be directed to the Supervisor.
- **Body Map Form**: Completed each morning by the therapist to document and report any visible marks, bruises, or injuries on the child when they arrive at school. This form will be submitted to the parent for signature. The student will be brought to the school Clinic for evaluation.
- **Photo Sharing Application:** A secure app used for weekly sharing of videos and pictures. Therapists are advised to share no more than five photos or videos daily. Recording should never interfere with the session or the student's engagement.
- **Email Communication**: Parents should email their child's Supervisor for queries related to therapy goals, progress, or support needs. Whatsapp (or similar) communication should be avoided.
- Clinic Meetings: Scheduled twice per Term, these meetings provide an opportunity to review your child's assessments, progress, and any updates to the intervention plan. It's a must for Parents to attend these meetings.
- Social Media Consent: Parents may choose to grant or withhold consent for the use of their child's images on SSBD's social media or marketing materials. A consent form is provided at enrollment and consent can be withdrawn at any time.



- **Support Staff**: Valmiro Fernandes is the Head of Operations, oversees the daily operations, strategic planning, and organizational development to ensure high-quality service delivery.
- Contact Information:
 - o Veronica Micalizio, Program Director: <u>veronica@smallstepsbd.com</u>
 - o Valmiro Fernandes, Head of Operations: <u>valmiro@smallstepsbd.com</u>

7b. School Schedule and Drop-Off/Pick-Up Procedures

Program Hours:

- School gates open: 7:00 AM
- SSBD program:
 - o Monday−Thursday: 7:45 AM − 3:00 PM
 - o Friday: 7:45 AM − 12:00 PM
- **Mainstream classes**: Students attending mainstream classes must be in their class by 7:40 AM.
- **Bus users**: Follow the STS (School Transport Services) schedule provided.

Drop-Off and Pick-Up Procedures

GEMS schools have strict safety protocols for arrival and dismissal:

- Parent Lanyards: Only parents or guardians with a valid GEMS Parent Lanyard may enter school grounds unaccompanied. Lanyards are issued after completing the GEMS Parent Portal and uploading required identification. Up to three individuals may be designated as authorized "Safe Persons."
- Required Documents for Registration:
 - o Emirates ID and passport photos of both parents
 - o Emirates ID and passport photo of any designated "Safe Person"

Morning Drop-Off:

- The assigned therapist will meet your child at reception from 7:45 AM.
- Students must arrive at school latest by 8:00 AM.



- Therapists are not available to discuss programming or intervention during drop-off. Please direct any questions via email to the Supervisor.
- If you are running late, please inform the Supervisor before 7:45 AM.

Afternoon Pick-Up:

- Parents must collect their child from the designated gate and reception area by 3:00pm.
- Therapists will personally hand the student over to the parent or authorized guardian within the school premises. Students cannot walk outside or cross the street without the parent/guardian. Therapists cannot exit the building with the student.
- A 5-minute catch-up time is allowed for a brief conversation about the child's day, before the therapist returns to other clinical and admin duties.

Late Pick-Up Policy:

To ensure a smooth end to the day:

- Please arrive at least 5 minutes before the scheduled dismissal time.
- If an unavoidable delay occurs, contact the Operations Coordinator or Supervisor immediately.
- Staff are not available to supervise students after school hours. <u>After School Care will be charged if pick up is delayed for more than 10 minutes twice in a month, at 30 minute increments, at the cost of 199 AED + VAT per lateness.</u>
- ATTENDANCE_POLICY: Ministry guidelines state that a child's school place can be withdrawn following 20 consecutive or 25 non-consecutive days of unauthorised absence. The target attendance is 100% with the minimum expectation of 96%. If a student is marked as absent without reason in the school register, parents will be contacted by the school. Where a child has five consecutive days of unexplained absence, this will be logged on School safeguarding records and a referral will be made to the School safeguarding team for investigation. Absences must be communicated by 8:00 AM to the Supervisor. Please refer to the School Policies, available on the individual school website for more detailed information.

7c. School Transportation

GEMS partners with **School Transport Services (STS)** for student transportation. Bus access is contingent on location and a student's ability to ride safely. The decision is made collaboratively by:

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- The student's Supervisor
- SSBD's Clinical Team
- The School Operations Team
 Following a Risk Assessment, parents may arrange and pay STS directly if approved.

Bus Routine:

- Morning: Therapist meets the student upon school bus arrival.
- Afternoon: Therapist escorts the student to the designated bus area. SSBD staff do not ride
 the bus.

Safety Tip: Clearly label your child's school bag with name, emergency contact number, and bus ID tag.

7d. Field Trips

SSBD organizes educational field trips throughout the year to support community integration, social interaction, and new learning experiences.

- Parents must sign a Consent Form prior to each trip.
- In-school therapy will not always be available for students who do not attend field trips.
- Some trips may require a parental contribution to cover costs. These will be detailed in advance.
- SSBD may request specific snacks, supplies, or personal transport for some trips.
- Medication: SSBD staff are not authorized to administer medication; medical needs will be assessed on a case-by-case basis.
- For School field trips (mainstream class), the Supervisor will assess each student's readiness to participate in the trip. Payment for the trip is made separately via the school

parent portal. Transportation for the field trips is provided by the school. Additionally, an SSBD therapist will accompany the student on the trip to provide support and ensure their well-being throughout the experience.



7e. Snacks and Lunches

- Please send healthy, balanced snacks in clearly labeled containers.
- Poor nutrition can impact attention, focus, and engagement during sessions.
- SSBD maintains strict food allergy protocols: provide a comprehensive allergy list upon enrollment. Foods containing nuts are not allowed as per the School regulations.
- Students are always supervised during meals and snack times.

7f. Celebrations and Birthdays

We love celebrating special occasions in meaningful, safe ways.

- Notify your child's Supervisor at least one week in advance.
- For health and safety reasons, food items may not be shared with classmates (e.g., cakes, cupcakes, donuts).
- You may send:
 - o A "pretend" cake or centerpiece
 - o Wrapped party favors (e.g., stationery, stickers, small toys)
 - Individually packed gift bags with labeled candy (optional), which will be sent home in the student's backpack.

7g. Uniform Guidelines

- Uniforms must be worn daily and are available for purchase through Threads <u>Threads ME</u>
 Store | Home Page New
- Students must be in full, tidy, and clean, uniform when arriving at and leaving school, and during field trips. Students must wear the sports uniform during P.E., in line with the class schedule.
- Additional uniform and dress code details are available in the School Policies.

7h. Home Sessions

Home sessions are not currently provided by SSBD and will not be offered as a means to make up for missed sessions or school days.



7i. Absences and Make-up Sessions

Make-up sessions are not available for student absences. This includes sessions missed due to school holidays, natural disasters, or other unforeseen circumstances.

7j. Materials and Other Items

Parents are responsible for purchasing academic materials such as books, notebooks, and stationery for their child's use in lessons and activities. SSBD will provide materials required for daily sessions. Parents must also supply personal items such as chewable items, sensory stimulation or avoidance tools, and personal care supplies as needed. All items sent to school must be clearly labelled with the child's full name.

7k. Gifts Policy

At SSBD, we deeply appreciate the kind gestures of our parents. To maintain professional boundaries and avoid conflicts of interest, we kindly ask that gifts do not exceed a value of 50 AED. Small, infrequent, and non-monetary expressions of appreciation are always welcome, as long as they do not lead to ongoing benefit or expectation. Gifts in the form of cash, cheques, transfers, gift cards, or similar are strictly prohibited. The best way to show your appreciation is through a personal card, which we cherish and value greatly.

71. Reinforcers

To help keep students motivated throughout the day, parents are encouraged to provide their child's preferred reinforcers, such as snacks or toys. While every effort will be made to safeguard these items, SSBD cannot guarantee they will not be lost or damaged. Parents should avoid sending items of sentimental value or that cannot be easily replaced. All reinforcers must be labelled with the child's full name, and parents should provide a list of the child's most effective motivators. Use of tablets as reinforcers will be evaluated on a case-by-case basis;

parents are responsible for ensuring that electronic devices are sent to school with parental controls enabled, charged, and in a protective case.

7m. Therapist Absence

If a child's assigned therapist is absent, a substitute therapist will be appointed to ensure



continuity of care. Selection is based on:

- a. Student needs
- b. Clinical judgment
- c. Therapist-student familiarity
- d. Scheduling considerations, such as mainstream attendance, Flourish lessons, SLT/OT sessions, or pick-up/drop-off times

If a dedicated 1:1 therapist cannot be assigned to a student for the full day, a modified support plan will be implemented to ensure continuity of care and learning:

- A 2:1 student-to-therapist ratio may be used during certain parts of the day. In these
 instances, the student will receive 1:1 sessions on a scheduled rotation throughout the day
 to support their individual therapy goals.
- The student will still receive targeted 1:1 session time with an assigned therapist, either in individual sessions or as part of small group instruction.
- During group activities or lessons, therapists will rotate between students to maintain support, ensuring each child receives appropriate guidance and attention.
- In some cases, full participation in mainstream inclusion lessons may not be possible. In these instances, the schedule will be adjusted based on the student's therapy needs.

Every effort will be made to maintain the highest standard of support while remaining flexible to the logistical needs of the school and therapy teams.

7n. Concerns and Complaints

We highly value parent feedback and are committed to addressing any concerns or complaints you may have. Your input is essential in helping us improve our services and ensure the best

possible experience for your child. For more information on how to provide feedback or raise concerns, please visit the Small Steps website.

8. Safeguarding: Health And Safety Procedures

The safety and well-being of our students are our top priorities. We adhere to the GEMS Education Safeguarding and Emergency Protocols to ensure a secure and supportive environment for all



children. Our safeguarding policies and procedures are designed to protect students from harm, abuse, and exploitation, and are regularly updated to comply with the latest legislation and best practices. For detailed information on our safeguarding and health and safety procedures, please refer to the Small Steps website and GEMS Education website.

The Program Director serves as the Designated Safeguarding Lead (DSL) for SSBD, responsible for upholding and implementing safeguarding policies and procedures to ensure the safety and well-being of all students. The DSL works closely with the safeguarding leadership team of the school to enforce safeguarding measures and address any concerns promptly. Additionally, all Supervisors at SSBD are trained as Deputy Designated Safeguarding Leads (DDSLs). They assist the DSL in maintaining a secure environment by monitoring safeguarding practices, supporting staff training, and ensuring compliance with safeguarding protocols.

8a. Injuries and Emergencies

As part of a school-based program, SSBD operates in accordance with GEMS Education's emergency protocols. We are prepared to manage various situations including minor injuries, natural disasters, fire emergencies, and potential security threats. Staff receive training in emergency preparedness and first aid and are supported by the school's medical team.

Minor injuries sustained during the day are handled either by the School Clinic. When the Clinic is involved, parents are contacted promptly with details and next steps. Students are checked daily for visible injuries such as bruises, scratches, or other marks. Any noted injuries are documented using the Body Map Form. Fresh or serious injuries are immediately reported to the School Clinic.

All injuries that occur during school hours will be:

- Documented by the Therapist using the Body Map Form and the Incident Report Form.
- Communicated to the DDSL and DSL.
- Monitored by the School Clinic.
- Communicated to the parent/guardian.

Fire drills are held once per term to ensure that students are familiar with evacuation protocols. Each student also has a Personal Emergency Evacuation Plan (PEEP) tailored to their individual needs. These plans are shared with the School Clinic and Operations Team.

During emergencies, staff assigned to students with physical disabilities or high-risk behaviors are prioritized. The designated lead staff member is responsible for taking the attendance sheet and emergency contact list to confirm the safety of all students and ensure timely communication with families. Any medications required during emergencies are kept accessible and travel with



the student. In the event of a school closure due to emergency, all parents will be notified immediately.

8b. Safeguarding and Reporting Child Abuse

GEMS Education's Safeguarding Commitment is rooted in the belief that student well-being is foundational to their success. We are committed to ensuring that every student is safe, feels safe, and is protected from harm, abuse, or exploitation. GEMS takes its responsibility seriously and has implemented a comprehensive.

Safeguarding Children Policy Framework, applicable across all schools in the UAE. SSBD staff adhere strictly to the GEMS Safeguarding Policy. All staff must obtain a Dubai Police Good Conduct Certificate upon hiring and are required to complete safeguarding and first-aid training. Staff also undergo specific training in Wadeema's Law to understand reporting obligations. Any suspicion or evidence of abuse or neglect must be immediately reported to the designated SSBD Safeguarding Lead and to the School.

The Safeguarding Policy is reviewed annually to ensure its effectiveness and relevance and is available on the Small Steps website and GEMS Schools websites.

8c. Positive Handling

Positive handling in a school setting refers to the use of proactive and supportive strategies to manage challenging behaviors and ensure the safety of all students. This approach emphasizes deescalation techniques, positive reinforcement, and the creation of a safe and supportive environment. Physical restraint is only used as a last resort to prevent immediate harm when no safer option is available. The goal is to maintain the dignity and well-being of the student while addressing any behavioral concerns in a respectful and effective manner.

Physical restraint is defined as any action that limits a child's physical movement, such as being carried or moved. This does not include minimal supportive physical contact for calming, guiding, assisting with medical devices, or preventing self-injury when part of an approved treatment plan. Seclusion is defined as the confinement of a student alone in a room or area from which they are physically prevented from leaving. This practice is used only as a last resort to prevent immediate harm to the student or others when no safer option is available. Seclusion is never used for disciplinary purposes or convenience.



SSBD therapists are trained to prevent crises and avoid the use of restraint wherever possible. They use positive reinforcement, de-escalation strategies, and safety-focused interventions. Physical restraint is only used as a last resort to prevent immediate harm when no safer option is available. If this is necessary, the parent or guardian will receive a detailed incident report.

Key principles regarding physical restraint and seclusion include:

- Life-threatening restraint is strictly prohibited, including chest compression or prone (face-down) holds.
- Restraint or seclusion must never be used for discipline, convenience, or as a substitute for less restrictive methods.
- Restraint may be used solely as a last-resort emergency measure to prevent immediate or imminent injury and must be continuously monitored by trained personnel. The incident must be documented in the child's records.
- A student in seclusion must be continuously observed by trained staff, and with regular checks for distress.
- Restraint or seclusion must not exceed 15 minutes without specific approval from trained staff, such as administrators, school health professionals, or a certified Behavior Analyst.
 Reviews are required every 15 minutes.
- Only individuals trained in positive handling, restraint, crisis prevention, de-escalation, and safety procedures may carry out restraints or seclusions.
- Reasonable physical force may be used to protect others, prevent property damage, or
 ensure safe movement of students in an emergency, and must be documented
 immediately after the incident.

8d. Illness Policy

To protect students and staff, it is essential that sick children remain at home. Parents must notify the Case Supervisor of any illness or need for late arrival or cancellation. Students should only return to school once they have been symptom-free for at least 24 hours without medication.

Each day, students undergo a health check upon arrival. If symptoms of illness are present, they will be referred to the School Clinic. If the Clinic determines that a student is unwell, the parent will be contacted to collect the child. The School policy for illness is available on the School website.

Symptoms that require immediate pick-up include:

- Fever above 37.5°C
- Diarrhea or vomiting
- Persistent cough, sore throat, or breathing difficulties
- Skin rash
- Symptoms linked with Pink Eye, Hand-Foot-Mouth Disease, Mumps, Measles, etc.
- Head lice or frequent scratching
- Lethargy that interferes with participation
- Other contagious illnesses as advised by the Clinic

8e. Medications and Non-Medicinal Products

SSBD staff do not administer medications of any kind. If your child requires medication during school hours, parents must coordinate with the School Clinic and provide the appropriate documentation and prescription.

For non-medicinal products such as sunscreen, diaper cream, or insect repellent, written parental authorization is required. Parents must supply the labeled products with the child's full name. These consents are to be submitted with enrollment documents.

8f. Personal Care and Toileting

Parents are responsible for providing all necessary personal care supplies, including diapers, pullups, wipes, sanitary products, and at least two changes of clothing per day. Only disposable items are accepted. If supplies are not provided, SSBD reserves the right to charge families for the use



of program-provided items. Care procedures must be coordinated with the clinical team, and toileting support requires a signed Intimate Care Plan (ICP) and Toileting Consent Form.

Toilet training is a crucial developmental milestone that requires a collaborative effort between the ABA center and the family to ensure consistency and success. At SSBD, we believe that a shared responsibility in toilet training helps create an easier transition for the child between home and school environments. Families play a vital role in initiating and maintaining toilet training efforts at home, while the ABA center provides support and reinforcement during school hours. Certain steps of toileting, such as frequent bathroom visits, extended time for toileting routines, and diaper-free days, cannot always be maintained in a school environment due to logistical constraints and the need to balance the needs of all students. Additionally, the school setting may not always allow for the same level of privacy and comfort that a child experiences at home. Therefore, it is essential for families to initiate and continue practicing and reinforcing toileting skills at home to ensure the child's progress and success in becoming independent in this area.

8g. Electronic Devices and Online Safety

For educational use, parents must provide an electronic device, charger, and protective case, which will travel between home and school each day. Devices must have the latest software updates and parental controls enabled to block unsafe content.

Parents are responsible for ensuring online safety features are active and appropriate. SSBD Therapists check each device's search history daily and report concerns to the Case Supervisor.

Devices will never be accessible to students unsupervised and may also be used as reinforcers in accordance with the student's program and family agreement.

9. Data Collection and Data Protection

Small Steps is committed to protecting the privacy and security of the personal data of our students, staff, and parents. The Data Protection policy outlines the procedures and measures in place to ensure that all data is handled responsibly and in compliance with relevant data protection laws.



Our approach to data protection is guided by the principles of confidentiality, integrity, and availability of information. We adhere to strict guidelines for the collection of personal data, ensuring it is done only for specified, explicit, and legitimate purposes. The types of personal data we may collect include: Contact details (name, address, phone number, email); Medical and health information; Educational records; Behavioural assessments; Program Specific Goals and Objectives; Daily target performance, and daily behavior episodes; Emergency contact information.

Our policy ensures that data collection is conducted for specified, explicit, and legitimate purposes, using the following applications and tools:

- Hirasmus: Utilized for program data collection. All data entered into Hirasmus must be
 accurate and relevant. To protect privacy, avoid using full names where possible and use
 initials or unique identifiers instead.
- Slack: Employed for internal communication. Personal information should only be shared in private channels or direct messages on Slack, avoiding public channels.
- MS Co-pilot and MS OneDrive: Used for secure file storage and management to safeguard personal data.
- Redrock Training: Utilized for internal staff training and Continuing Education Units (CEUs), ensuring staff competence and compliance with data protection protocols.
- CURA: Employed as safeguarding software to uphold the safety and well-being of our students, integrating data protection measures.
- Photo Circle: Employed for sharing videos and photos within our internal network and with
 parents. It is crucial to ensure that images and videos do not include students without
 explicit consent, students who have not consented to media sharing are cut, blurred out, or
 covered to protect their privacy.
- Valmiro Fernandes is the Data Protection Officer and can be contacted for further information about this policy.

10. Parent Commitment

We expect our parents to make the following commitments to SSBD:

1. I will ensure my child comes to school on time, well-rested, and prepared for school.



- 2. I commit to picking up my child on time and to immediately informing the Case Supervisor of any emergency situations which may prevent me from being on time for Pick-up.
- 3. I will keep my child at home in the event of signs of illness for a 24-hour period.
- 4. I will attend parent meetings with the SSBD Team, and to ensure all new skills and strategies to reduce challenging behaviour continue at home.
- 5. I will communicate directly with the Case Supervisor regarding questions or concerns about my child's program.
- 6. I will send items to school as agreed with the Case Supervisor.
- 7. I will inform the Supervisor of any outside services I want to provide for my child, including new medications, interventions, and treatments.

ACKNOWLEDGEMENT

Acknowledgement of Receipt and Understanding of Parent Handbook.

I have received, reviewed, and understood the policies outlined in the SSBD Parent Handbook. I have contacted the SSBD team for any questions and needed clarifications and fully understand the contents of the Parent Handbook.

Parent Signature:	 	
Date//		
Printed Name:		



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