

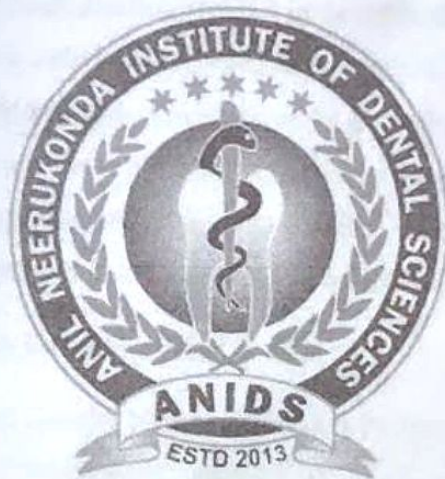
MEMORANDUM OF UNDERSTANDING

Between

SAI RAVINDRA SCHOOL

Tagarapuvalsa, Bheemunipatnam Mandal

And



Sangivalasa, Visakhapatnam

Memorandum of Understanding

Between

Sai Ravindra school and Department of Public Health Dentistry, ANIDS

Purpose: Department of Public Health Dentistry, ANIDS and Sai Ravindra are entering into this Memorandum of Understanding (MOU) for the provision of Oral health care services to the children from 20-12-2020.

Responsibilities of the Parties:

The Parties (Parties) understand that each should be able to fulfil its responsibilities under this Memorandum of Understanding (MOU) in accordance with the provisions of law and regulation that govern their individual activities. Nothing in this MOU is intended to negate or otherwise render ineffective any such provisions or the operating procedures of either Party. If at any time either Party is unable to perform its functions under this MOU consistent with such Party's statutory and regulatory mandates, the affected Party shall immediately provide written notice to the other seeking a mutually agreed upon resolution.

Department of Public Health Dentistry, ANIDS will:

1. In collaboration with School District Name, establish a Policy and Procedure Manual that operationalizes the responsibilities outlined in this MOU.
2. Obtain consent and enrolment information from parents or legal guardians through Class Teacher
3. Establish and maintain dental records for students who receive services.
4. Provide and oversee dental (oral health) services in a timely manner including screenings and referrals.
5. Provide dental staff to deliver services during hours when school is in session. Department of Public Health Dentistry, ANIDS will inform School in writing of scheduled dates when staff will not be available. Department of Public Health Dentistry, ANIDS will try to schedule these dates on teacher work day or school holidays.

6. Provide access to dental services to serve the needs of School children. This will include: dental personnel from Monday – Saturday, except for holidays. Department of Public Health Dentistry, ANIDS will work with School to ensure all children requiring immediate access to medical or dental care during the school day are triaged and provided the care needed.

7. Coordinate transportation services.

8. Protect the privacy and confidentiality of patient health information.

Sai Ravindra school will:

1. Provide appropriate referrals and facilitate appointment logistics of students to the Department of Public Health Dentistry, ANIDS

2. Provide in-kind staff support to the Department of Public Health Dentistry, ANIDS.

3. Provide the facilities, utilities and equipment needed for the doctors' team.

4. Share school personnel information with Department of Public Health Dentistry, ANIDS as necessary for the provision of services.

Professional Liability

The Parties shall each be responsible for their respective acts or omissions in the performance of dental services under this MOU and neither party shall incur any liability for the performance of the other party

Termination

Either Party may terminate this MOU by giving written notice of termination to the other Party at least 60 days prior to the intended date of termination.

Extension

Sai Ravindra School and Department of Public Health Dentistry, ANIDS agree to review this MOU annually, at least 60 days prior to its expiration date. Extension of this MOU for a specified period of time must be by mutual agreement of School and Department of Public Health Dentistry, ANIDS and must be put in writing. Suggestions for recommended changes, clarifications, deletions or additions will be discussed at the monthly, if needed. Mutually agreed upon extensions of this MOU for a specified period of time and changes to the MOU must be incorporated into an addendum which must be signed by the authorized representatives of School and Department of Public Health Dentistry, ANIDS.

Amendment

This MOU shall not be altered, changed or amended except by instrument in writing executed by the Parties hereto.

Notice of Failure to Perform

If either of the Parties to this MOU is dissatisfied with the performance by the other Party of any obligations imposed under the terms of this MOU, the dissatisfied Party shall request in writing that its grievance(s) be placed in meeting for discussion, action and resolution.

Scope of Agreement

This MOU incorporates all the agreements, covenants and understandings between the Parties hereto concerning the subject matter hereof, and all such covenants, agreements and understandings have been merged into this MOU.

Duration of MOU

This MOU shall be in force from Date 20-12-2020.

Signatures

IN WITNESS WHEREOF, the duly authorized representatives of the Parties have executed this MOU effective as of the date first above written.

Dated: 20-12-2020

BY: _____

[Signature]
Head of the Department,

Public Health Dentistry, ANIDS

Professor & Head
Dept. of Public Health Dentistry
ANIDS, Sangivalasa
Visakhapatnam-531 162

Dated: 20-12- 2020

BY: _____

[Signature]
Sai Ravindra school

Principal
SAI RAVINDRA SCHOOL
Thagarapuvalasa
VISAKHAPATNAM (Dist.)

[Signature]
Principal
Anil Neerukonda Institute
Dental Sciences
Sangivalasa-531 162
Visakhapatnam Dist.

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