

#### Republic of the Philippines

### Department of Education

Region VII – CENTRAL VISAYAS SCHOOLS DIVISION OF BOHOL

#### Office of the Schools Division Superintendent

June 10, 2020

DIVISION MEMORANDUM No.215, s. 2020

### DEPED REGION 7 NEW NORMAL HEALTH GUIDELINES UPON RETURNING TO WORK/SCHOOL

TO: Assistant Schools Division Superintendents

Chiefs- CID & SGOD

Public Schools District Supervisors/Acting PSDSs

School Heads/Principals of Public Elementary and Secondary Schools

All Others Concerned

- Attached please find is Regional Memorandum No. 0287, s. 2020 entitled "DepEd Region 7 New Normal Health Guidelines Upon Returning to Work/School" which are self-explanatory.
- 2. This Office hereby reiterates strict compliance of the specific guidelines mentioned in this Memorandum aimed to prevent, control and diminish infection in the offices/schools for the health and safety of both learners and DepEd personnel alike.
- Immediate dissemination and compliance of this Memorandum is hereby advised.

BIANITO A. DAGATAN, Ed.D., CESO V

Schools Division Superintendent (

SGOD/dvd







#### Republic of the Philippines

## Department of Education REGION VII - CENTRAL VISAYAS

Office of the Regional Director

REGIONAL MEMORANDUM No. 0287 s. 2020 Dr. Salamana
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Mr. Allican

Mr. Albertia

- for dissemination

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compliance

JUN 08 2020

#### DEPED REGION 7 NEW NORMAL HEALTH GUIDELINES UPON RETURNING TO WORK/SCHOOL

To: Assistant Regional Director
Regional Office Employees
Schools Division Superintendents
Assistant Schools Division Superintendents
All Others Concerned

- 1. On January 30, 2020, WHO declared the COVID-19 outbreak as a Public Health Emergency of International concern. On March 11, 2020, WHO declared it to be a Global Pandemic. On March 16, 2020, the Philippines declared a State of Public Health Emergency. On March 17, 2020, the entire Luzon was place under Enhanced Community Quarantine and the rest of the provinces including areas in Central Visayas followed suit.
- 2. Amidst the COVID-19, delivery of education must continue. According to CSC-DOH-DOLE Joint Memorandum Circular No. 1, s. 2020 and DTI & DOLE Interim Guidelines on Workplace Prevention and Control of COVID-19, the following guidelines are therefore recommended institutionalizing occupational safety and health (OSH) aimed to prevent, control and diminish infection in the offices/schools for the health and safety of both learners and DepEd personnel alike:

#### General Guidelines:

A. Regional Office, Schools Division Offices, Schools, and Community Learning Centers shall adopt the learning and public service continuity plans to fulfill its mandate while preventing the spread of COVID-19. Alternative Work Arrangements (AWA) as prescribed under (CSC) Memorandum Circular No. 7 "Guidelines on Alternative Work Arrangements for Government Workers" and as stated in DO 43, s. 2020, shall be developed to reduce the number of people in the offices or schools. This may include work from home arrangements, four-day or compressed workweek, and staggered working hours. Tasks can be done at home among teachers and staff at high risks such as those who are above 60 years of age, or of any age but with co-morbidities, or pre-existing illness such as diabetes,



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cancer, high-risk pregnancy or immunocompromised health status. Reduction in the class size shall also be implemented so that physical distancing is possible.

- B. DepEd offices and schools shall screen returning faculty, staff, and learners for symptoms. Temperature checks (thermal gun/scanner) and proper disinfection (alcohol sprays and hypochlorite foot bath followed by a dry rug to prevent accidents) of inbound and outbound persons shall be strictly implemented. A health screening tool or health symptoms questionnaire shall be provided for proper documentation (see Annex 1). If the temperature is >37.5°C, re-evaluation is needed after 5 minutes and will not be allowed entry if persistently elevated. Likewise, persons with active respiratory symptoms will be denied admission. If there is a long queue in the entrances of the school, roving officers should instill physical distancing of one meter. Likewise, equipment or vehicles entering the office/school premises must undergo disinfection.
- C. Non-pharmacologic interventions should be implemented for infection prevention and control measures such as hygiene promotion (regular handwashing through Wash in School (WinS) Program, environmental cleaning, disinfection, physical distancing, health education, wearing of PPE/face mask AT ALL TIMES, and other public health and safety measures as recommended by WHO or DOH. If cloth face masks are used, the washable type should be worn but an additional filter material may be added for better protection.
- D. Existing policies on sick leave and medical assistance coverage and relevant issuances about the COVID-19 situation shall be observed.

#### Specific Guidelines:

# A. Engineering Control Measures

- a. Offices, schools, and classrooms must be properly disinfected, ventilated, and maintained.
- i. Regular disinfection (preferably daily) of school buildings, classrooms, water/sanitation facilities particularly "high-touch" surfaces (preferably every 2 hours) such as railings, lunch tables, sports equipment, door/window handles, toys, teaching/learning aids should be practiced.
- ii. Circulation of outdoor air must be increased as much as possible by opening windows, doors, using fans, and other methods.
  - iii. Continuous water supply must be established and be made available to promote regular handwashing through the WinS Oplan Kalusugan sa DepEd (OKD) flagship program.

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b. Offices or schools shall designate an isolation area. This isolation area or room must be well ventilated, preferably with its comfort room and in a separate building/structure.

c. Daily removal and disposal of trash should likewise be observed. No-touch

trash bins with disposable liners are highly encouraged.

d. Offices through the Health Personnel or Clinic Teachers shall provide proper visual reminders for safety policies in conspicuous places of the office or school to enhance awareness.

### B. Control Measures and Recommendations for Administrators, Faculty & Staff

a. School policies, advocacies, and programs for the prevention and control of COVID-19 shall be crafted in consultation with the school community, consistent with the IATF health protocols and DOH protection protocols, local quarantine rules, and all other relevant protocols outlined in DepEd and DepEd Task Force COVID-19 issuances.

b. Daily temperature and symptom monitoring and recording of all personnel

and learners who report for work/school shall be conducted.

c. A Referral network for those who will develop symptoms shall be established. It may include those who need counseling/psychological first aid or presenting with mental health conditions.

d. Offices and schools shall enforce infection control procedures such as physical distancing (1-meter radius space, front-side-back), wearing of a mask (no mask, no entry policy), proper hand hygiene and cough etiquette. Appropriate PPE shall be worn based on the nature of the work for example face shield and mask will be worn by frontliners (e.g. school health section personnel, security officers, records section receiving personnel) especially those who render service via face-to-face settings (see Annex 2).

e. Activities to promote physical and mental resilience among personnel and learners shall be implemented. These shall include eating nutritious and well-cooked food, drinking lots of fluids, and avoiding alcoholic beverages, increasing body resistance by having adequate rest, and at least 8 hours of

sleep and exercising regularly.

### C. Control Measures and Recommendations for Learners

a. Basic and age-appropriate information about COVID-19 shall be provided to learners. They shall also be encouraged to ask questions and get information from peers, teachers, other school personnel, and other sources like WHO and DOH. Learners shall practice proper hygiene by washing their hands, not touching their faces, and not sharing cups, utensils, food, or drinks with others.

b. They shall be involved in advocacy programs and in keeping themselves, their schools, families, and communities healthy. c. They shall be sensitive to those who are sick and shall not stigmatize their peers or anyone about being sick.

# D. Control Measures and Recommendations for Parents/Caregivers and Community Members

- a. Parents, guardians, or caregivers should be advised that whenever their learners feel sick they should just stay at home and not go to school for the welfare of others.
- b. They should teach their children and be models in good hygiene practices.
- c. They should encourage their children to ask questions and express their feelings with them and/or to their teachers. A child may have different reactions to stress so be very patient and understanding to them.
- **d.** They should use facts and remind their learners to be considerate of one another to prevent stigma.
- e. Parents/caregivers should coordinate with the school to receive updated information through parent-teacher associations, etc.

### E. Control Measures and Recommendations for the School Community

**a.** All washrooms and toilets shall have sufficient clean water and soap.

**b.** Sanitizers shall be made available in corridors, conference areas, elevators, stairways, and other areas commonly passed by learners, teachers, and staff.

c. Eating in communal areas like canteen, cafeteria lounge is discouraged. It is best to eat in an individual area like a student's desk/chair or teacher's table. All wastes shall be disposed properly and "clean as you go" (Claygo) must be encouraged.

d. Prolonged face-to-face interaction among learners, teachers, staff, and clients should be avoided. Masks shall be worn at all times. Meetings shall be done online or through videoconferencing. If a face-to-face meeting is really necessary, the same shall be kept to a minimum number of participants depending on the room size and must be for a short duration only.

e. The number of people inside an enclosed space such as a classroom, office, or elevator or shall be limited. Floor physical distancing tapes or markers shall be placed.

Maiting area/office/classroom tables and chairs should be made available to maintain proper physical distancing. Physical distancing tapes or markers may be used as visual reminders. Barriers may be provided between tables but should be disinfected regularly. Reading materials or other communal objects should be removed or disinfected regularly.

Workstation layout should be designed to allow for unidirectional movement in aisles, corridors, or walkways. Separate points of entry/exit should be designated if feasible and should be labeled appropriately.

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h. The number of people inside an enclosed space such as a classroom, office, or elevator or shall be limited. Floor physical distancing tapes or markers shall be placed.

i. Use of stairs shall be encouraged subject to social distancing requirements, following the walk zone "always keep right" policy. If more than 2 stairways are accessible, one stairway may be used exclusively for going up and the

other for going down.

j. Discourage physical office visits and whenever feasible, online transactions and processing of requests shall be observed. Clients shall be advised to schedule an appointment with the concerned office for transactions needing physical presence but physical distancing will still be strictly followed.

k. Contact sports or other similar activities wherein physical distancing is not

feasible is not allowed.

1. Safety officers or roving security officers shall always ensure physical distancing and observance of minimum health protocols.

m. Shuttle service and/or decent accommodation areas on near-site locations may be provided to lessen travel and people's movement.

n. Wearing of non-essential accessories like pieces of jewelry that may hamper

proper hand hygiene is discouraged.

o. IDs, ID slings, name tags, and other work/school-related paraphernalia should not be brought home if feasible. Otherwise, regular disinfection must be done.

### A

### F. Control Measures and Recommendations for Medical Officers and School Health Section Personnel

a. All clients shall be triaged appropriately upon entering the clinic.

b. If a learner, teacher, or staff is suspected as having COVID-19, the patient shall immediately proceed to the designated isolation area and never remove the mask. The school health section personnel or their equivalent attending to the patient should wear appropriate PPEs and if needed should facilitate in the transport of the affected individual to the nearest hospital with proper endorsement. School protocol for transport for suspected COVID-19 cases should be in place including provision for emergency transportation or ambulance. Case reporting shall be done by the hospital. Strict confidentiality shall be observed by everyone concerned.

c. The affected school areas shall be cordoned off and will be decontaminated with an appropriate disinfectant (1:10 hypochlorite/chlorine bleaching

solution). These areas may only be made accessible 24 hours after.

d. Close contacts present in the school area with the suspect case shall go on a 14-days home quarantine with proper health appraisal given on what to do if symptoms or fever occur. If the suspect COVID-19 individual has a negative result, quarantined persons may be allowed to report back to school. If the suspect case is positive, the patient must adhere to the necessary interventions/treatment and can only return to work or school after obtaining medical clearance from DOH or other step-down care facilities.

- e. If a student, teacher or staff is sick or has a fever but is not suspected to have COVID-19 (e.g. UTI, wound infection or any disease not related to the respiratory tract) the following steps shall be taken:
  - i. Provide medical care, health teaching, and/or refer accordingly.
  - ii. Advise the patient to stay at home away from school or crowds.
  - iii. Promote the practice of personal hygiene to prevent the spread of disease.
  - iv. Remind the patient to seek appropriate medical care if there is persistent fever, when the difficulty of breathing has initiated or when the concerned individual becomes weak or there is worsening of symptoms.
- f. The medical officers and school health section personnel should always be guided by the latest COVID-19 Interim Guidelines released by the Department of Health or the Unified COVID-19 Algorithms by the Philippine Society for Microbiology and Infectious Diseases (see Annex 3).
- g. The SDOs shall establish a COVID-19 Hotline for the school community to report symptomatic learners or school personnel and to monitor suspect/probable COVID-19 cases (see **Annex 4**).
- h. Telemedicine may be done for non-urgent or minor medical cases. The clinic should be informed ahead of time (scheduled appointments) for consultations needing physical presence.
- i. Medical devices such as BP cuffs, stethoscopes, etc. should be disinfected after each patient.
- j. Medicines, PPEs, and disinfectants should be restocked regularly.

# G. Screening of Returning DepEd Personnel (see Annex 5)

- a. COVID-19 Testing will NOT be mandatory but voluntary as a management prerogative. However, all returning to work personnel must adhere to these screening guidelines.
- b. All returning DepEd personnel physically reporting to their place of work shall be screened for symptoms of COVID-19, including fever, cough, colds and other respiratory symptoms, and/or relevant history of travel or exposure within the last 14 days. The following exposures should have happened two (2) days before or within 14 days from onset of symptoms of a confirmed or probable case:
- i. Face-to-face contact with a confirmed case within 1 meter and for more than 15 minutes;
  - ii. Direct physical contact with a confirmed case;
  - **iii.** Direct care for a patient with probable or confirmed COVID-19 disease without using proper PPE.

- **c.** Returning personnel who are asymptomatic with relevant history of travel/exposure on the date of work resumption shall NOT be allowed to physically return to work and must consult their primary care provider. The use of telemedicine is encouraged for proper care and coordination.
- **d.** Returning personnel who were symptomatic with relevant history of travel/exposure within the last fourteen (14) days before the date of work resumption shall present the Certificate of Quarantine Completion duly issued by the step-down care facility or local health office, whichever is applicable based on the latest DOH guidelines on the reintegration of suspect, probable and confirmed COVID-19 cases.
- **e.** If asymptomatic within the last fourteen (14) days before the date of work resumption, the DepEd personnel can be cleared to physically return to work.

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- 3. Please see enclosed Annexes 1, 2, 3, 4, and 5.
- For inquiries or clarifications, you may contact Dr. Rogelio John Villamor Jr., Medical Officer of RO7 ESSD at numbers (032)-254-7062 or 0915-8904005.
- 5. Immediate dissemination of this memorandum is hereby advised.

SALUSTIANO T. JIMENEZ, JD EdD, CESO V
Director III

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### Republic of the Philippines

# Department of Education REGION VII - CENTRAL VISAYAS

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		Headache		
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of effecting contro	l of the COVID-19 infec	tion, to collect and process the data indicated tion. I understand that my personal informat I am required by RA 11469, Bayanihan to Heal	ion is pro	tected by