

Republic of the Philippines **Department of Education** REGION IV-A CALABARZON CITY SCHOOLS DIVISION OF THE CITY OF TAYABAS

14 OCT 2021

DIVISION MEMORANDUM No. 484 s. 2021

CONDUCT OF MONITORING AND PROVISION OF TECHNICAL ASSISTANCE ON SPECIFIC MEASURES FOR COVID 19 PREVENTION AND MITIGATION IN SCHOOLS

- To: OIC-Assistant Schools Division Superintendent Chief Education Supervisors Heads, Public Elementary and Secondary Schools Heads, Unit/Section All Others Concerned
- 1. The DepEd Tayabas City under the School Governance and Operation Division (SGOD) will conduct monitoring and technical assistance on Specific Measures for Covid19 Prevention and Mitigation in Schools on Oct 18,19,21,22,25,26,28, 2021.
- 2. The following are the important areas to be covered in the monitoring and technical assistance to ensure safe educational continuity amidst the challenges of Covid19:
 - · Health Standards and Safety Protocols in Schools
 - Specific Measures for Covid19Prevention and Mitigation
 - Health Supplies, WASH Facilities and Room Ventilation

3. Attached are Enclosure1 - Schedule of Monitoring and monitoring officials and Enclosure 2 – Monitoring Tool.

4. Related activities may continue to be scheduled and implemented even after the National Mental Health Week to sustain the mental health promotion initiatives launched week.

5. Immediate and widest dissemination of this memorandum is desired.

GERLIEW. ILAGAN, CESO VI Assistant Schools Division Superintender Officer -in-Charge Office of the Schools Division Superintendent



Brgy. Potol, Tayabas City (042) 710-0329 or (042) 785-9615



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| TO | SCHEDULE OF MONITORIN | MONITORING OFFICIALS |
|-----|--|---|
| HU | OLS OLUSTER 1 (OCT) | The second se |
| 1 | CLUSTER 1 (OCTO | |
| | Domoit Elementary School | Dr. Connie S. Sia |
| 2. | Froilan E. Lopez Elementary School | Dr. Jayne Paula Talavera Lailani T. Omlas |
| 2 | | |
| | Kalumpang Elementary School | Alelie A. Padillo |
| | Gibanga Elementary School Potol Elementary School | |
| 5. | CLUSTER 2 (OCT | OPER 10 2021) |
| 1 | Buenaventura Alandy National | Dr. Connie S. Sia |
| 1. | High School | Dr. Jayne Paula Talavera |
| 2 | Eugenio Francia Elementary | Mariles Ferro |
| 2. | School | Alelie A. Padillo |
| 3 | Malaoa Calantas Elementary | Mene A. Tauno |
| 0. | School | |
| 4 | Ipilan Alitao Elementary School | |
| | Luis Palad Integrated High | |
| 0. | School | |
| | CLUSTER 3 (OCT | OBER 21 2021) |
| 1 | Dapdap Integrated School | Dr. Jayne Paula Talavera |
| | Lalo Elementary School | Dr. Connie S. Sia |
| | Tayabas West Elementary | Lailani T. Omlas |
| 0. | School III | Mariles F. Contreras |
| 4 | Tayabas West Elementary | Mariles F. Conderas |
| | School IV | |
| 5 | Tayabas West Elementary | |
| 0. | School I | |
| | CLUSTER 4 (OCT | TOBER 22,2021) |
| 1. | Tayabas West Elementary II | Alelie A. Padillo |
| | Tayabas East Elementary School | Lailani T. Omlas |
| | Wakas Elementary School | Dra Jayne Paula Talavera |
| | RQMNHS | |
| | Lacawan Elementary School | |
| | CLUSTER 5 (OCT | TOBER 25,2021) |
| 1. | Pandakake Elementary School | Dr. Connie S. Sia |
| | Mate Elementary School | Dr.Jayne Paula Talavera |
| | Lawigue Elementary School | Lailani T. Omlas |
| | Alsam Elementary School | Alelie A. Padillo |
| | West Palale Elementary School | |
| | CLUSTER 6 (OCT | TOBER 26,2021) |
| 1. | Katigan Elementary School | Dr. Connie S. Sia |
| | Ilasan Elementary School | Dr. Jayne Paula Talavera |
| | Masin Elementary School | Mariles Ferro |
| | Valencia Elementary School | Alelie A. Padillo |
| 100 | CLUSTER 7 (OC | TOBER 28,2021) |
| 1. | West Palale National High School | Dr. Jayne Paula Talavera |
| | North Palale Elementary School | Dr. Connie S. Sia |
| 2. | | |
| | East Palale Elementary School | Lailani T. Omlas |





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Enclosure 2

Monitoring Tool SPECIFIC MEASURES FOR COVID-19 PREVENTION AND MITIGATION IN SCHOOLS

Name of School: _____ Name of School Head:

| INDICATORS | OBSERVED | NOT OBSERVED | REMARKS |
|---|----------|-----------------|---------|
| MANAGING OPEARA | TIONS | | |
| SCHOOL TRAFFIC MANAGEMENT | | | |
| The school has set-up clear and easy-to- understand signages, preferably in local languages and Braille, and mechanisms to strengthen observance of health protocols and protectivemeasures. Display of school map at the entrance point indicating the location of the classrooms Designation of separate entrance and exit points in the school Designation of separate entrance and exit points in high traffic areas (unidirectional markers, installation of signages for cueing and unidirectional movement, sectioning, and queueing) Designated entrance and exit points in the classrooms Hallway ground markings for walking direction guide Designation of areas for queue (e.g., restroom, library, | | | |
| principal's office, etc.) | | | |
| PROTECTIVE MEASURES, HYGIENE PRACTICES, AND SAFETY | | | |
| PROCEDURES | | | |
| The school has established safe entrance and exit procedures for teachers, students, non-teaching personnel, and school visitors. Availability of temperature thermal scanner or thermal gun in entrance and/or exit gates Availability of hand sanitizer or alcohol dispenser in school gates Availability of surgical masks at school entrance reserved for symptomatic individuals | | | |
| 2. The school has established a contact tracing procedures/tools for school-goers. a. Health declaration sheet for school personnel b. Health declaration sheet for students/ parents | | | |







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| C | Contact tracing tool for school-goers | |
|-------|--|---|
| | | |
| 3. Th | e school has set up a proper sanitation and | |
| h | ygiene facility for school-goers. | |
| a. A | Availability of handwashing station with clean | |
| | and safe water supply | 1 |
| b. A | Availability of clean and safe toilet facilities | |
| | Schedule of supervised handwashing and | |
| | oothbrushing activities | |
| | Placement of handwashing facilities in a | |
| | trategic location (e.g., school entrance) | 1 |
| | Placement of trash bins in strategiclocations | |
| | /isuals signages on proper waste | |
| n | nanagement practices near trash bins | |
| 4. T | he school has ensured regular sanitation and | |
| | lisinfection of school facilities, furniture, and | |
| | equipment. | |
| | Schedule of sanitation of frequently | |
| | ouched surfaces (e.g., table, | |
| | loorknobs, light switches, etc.) every | |
| | fter end of a school shift | 1 |
| b. S | schedule of disinfection of school facilities (e.g., | |
| | hairs, desk, blackboard, toilet facilities) | |
| A | Availability of sanitation and disinfecting | |
| m | naterials | |
| 5. T | he school has ensured a proper disposal | |
| | ystem of infectious wastes, such as used | |
| | issues and masks, in non-contactreceptacles. | |
| | Disposal of all used PPEs in a | |
| | eparate leak-proof yellow trash | |
| | bag/container with a cover properly | |
| | abeled as "USED PPE" | |
| | Collection of the leak-proof yellow trash | |
| | bag/container regularly or twice a day | |
| | after end of class and after working | |
| | lay) from designated/specific area to the | |
| | general collection area for treatment and | |
| | lisposal | |
| | Availability of medical-grade face mask | |
| r | required for school personnel when | |
| с | collecting/handling the leak-proof yellow | |
| | rash bag/container | |
| | Freatment through disinfection or spraying of | |
| | he collected wastes with a chlorine solution | - |
| | 1:10) in accordance with DOH Department | |
| N | Memorandum No. 2020-0157 "Guidelines on | |
| C | Cleaning and Disinfection in Various Settings as | |
| | an Infection Prevention and Control Measure | |



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| - | | · · · · · · · · · · · · · · · · · · · |
|--------|---|---------------------------------------|
| | Against COVID-19" | |
| e. | Disposal of the disinfected PPE with general waste to the final disposal | |
| | facility | |
| | WELL BEING AND PRO | TECTION |
| PERSO | NAL PROTECTION EQUIPMENT | |
| 1. | The school has secured sufficient supply of | |
| | personal protective equipment (PPEs) for | |
| | learners and school personnel. | |
| a. | 1:1 Face mask to Person (daily)ratio | |
| b. | 1:1 Face shield to Person ratio | |
| c. | 1:1 Toothbrush and Toothpaste to Learner ratio (K-6 learners) | |
| d. | 1:1 Bar of soap to Learner ratio enough for | |
| | 5x of handwashing per day (K-6 learners) | |
| e. | Availability of emergency health kits | |
| | that include PPEs and other needed | |
| | supplies and materials in the school | |
| | clinic | |
| | Availability of PPEs for COVID-19 team members, | |
| health | personnel, and maintenance, and security guards | |
| 3. | The school has ensured that the available sanitation and disinfection materials are approved by the Philippine Food and Drug Administration (FDA) such as: | |
| a. | | |
| b. | Ethanol in all surfaces at a recommended ratio of 70-90%, or | |
| c. | | |
| 4. | The school has secured sufficient supply of sanitation and disinfection materials for strategic school locations. | |
| COVID- | 19 CASE MANAGEMENT | |
| 1. | The school has developed strategies to prevent | |
| CC | OVID-19. | |
| a. | Conduct of hand hygiene and | |
| | temperature checks using a thermal | |
| | scanner prior to entering the school | |
| b. | Conduct of daily rapid health checks | |





| | 3 |
|---|---|
| c. Conduct of necessary disinfection activities | |
| especially in the areas of the school frequented | |
| by personnel | |
| | |
| d. Establishment/setting-up/refurbishment of | |
| a school clinic to provide basic health | |
| services to all school-goers, such as: | |
| Health assessment and physical | |
| examination, as needed | |
| Appropriate intervention, first aid, or | |
| treatment | |
| Proper management of symptoms, | |
| including rest at home | |
| Referral and follow-up of learners, | |
| teachers, and personnel to | |
| appropriate facilities | |
| 2. The school has identified strategies to detect COVID- | |
| 19. | |
| a. Cooperation with the local health authorities | |
| in the tracing and quarantine of close contacts | |
| of confirmed cases of COVID-19 consistent | |
| with DOH guidelines | |
| b. Development of a reporting system | |
| requiring parents to report to the school if | |
| their children are experiencing flu-like | |
| system, recommendation of testing to be | |
| done immediately with support and | |
| guidance from the LGUs | |
| 3. Report of the close follow-up of the | |
| attending/assigned school health personnel | |
| or designated clinic teacher with the | |
| condition of the identified learner/personnel | |
| to the SDO School health and Nutrition | |
| | |
| Unit/Section, as required by existing reporting | |
| mechanisms | |
| a. Strict compliance of learners and personnel | |
| who have tested positive for COVID-19 to | |
| not return to school without clearance from | |
| medical authorities | |
| b. Monitoring and provision of necessary | |
| support of the School Head (SH) to all | |
| cases (close contacts, suspect, probable, | |
| confirmed) | |
| c. Coordination of SH to all cases with | |
| DepEd school health personnel and local | |
| health authorities | |
| d. Coordination of SH with the SDO in | |
| ensuring continuity of teaching and | |
| learning in line with the school's | |







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| e. | |
|---|--|
| 4. The school has established a clear procedure of referral system for COVID-19 confirmed and suspected personnel and learners. | |
| a. Communication plan which includes coordination system with LGU for school personnel and learners who show flu- like symptoms | |
| b. Communication plan which includes a referral system for COVID-19 confirmed and suspected personnel and learners Flow chart of the referral system | |
| 5. The school has established a clear contact tracing and quarantine system for close contacts of COVID-19 confirmed positive cases. | |

Comments/Remarks _____

Name and Signature Monitoring Official

Name and Signature School Head

Date:

Date:







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