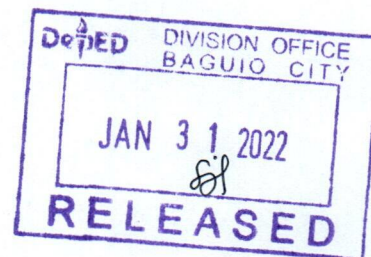




Republic of the Philippines  
Department of Education  
Cordillera Administrative Region  
**SCHOOLS DIVISION OF BAGUIO CITY**



Division Memorandum

No. 034, S. 2022

**Procedural Measures During COVID-19 Surge**

To: To All Concerned

**I. Policy Statement**

With the increasing number of COVID-19 cases in our locality and the threat of the new Omicron Variant, the teaching and non-teaching employees are at risk of being exposed to the disease as they perform the tasks and frontline functions in the line of duty.

The Division shall devise procedural measures that aim to prevent or mitigate the spread of the virus in the workplace either in offices or schools.

**II. Scope**

All officials and employees, directly hired contractual workers, and outsourced personnel who will be exposed to a confirmed COVID-19 case in the workplace shall be covered by this policy.

**III. Procedural Guidelines**

A. Triage

A.1. Triage for External Clients coming from high risk areas outside Baguio shall proceed to the PFVR:

1. Clients coming from high risk areas outside Baguio who need to transact requiring physical presence at the Division Office shall honestly fill up the health declaration form or the iGuard digital logbook application.
2. Data required in the health declaration form includes the client's name, address, contact number, place/office to visit, sex, vital signs (temperature), history of exposure to COVID-19 case, symptoms (sore throat, cough & colds, headache or body pains, fever, shortness of breath), history of travel, and vaccination status.
3. Clients shall be allowed to enter at the receiving area where the assistance booth/help desk shall page the person involved for the transaction.
4. Symptomatic clients shall not be entertained.
5. In case symptoms develop while ongoing the transaction, the client will be placed at the isolation area where teleconsultation will be held by the Medical Officer. The medical officer shall properly assess, manage and dispose of the sick client.

A.2. Triage for DepEd Personnel

1. DepEd Personnel for physical reporting at the Division Office shall honestly fill up the health declaration form or the iGuard digital logbook application.
2. Data required in the health declaration form includes the personnel's name, address, contact number, place/office/station, sex, vital signs (temperature), history of exposure to COVID-19 case, symptoms (sore throat, cough & colds, headache or body pains, fever, shortness of breath), history of travel, and vaccination status.
3. Personnel manifesting no symptoms shall be allowed to enter the workplace where he/she shall strictly observe.
4. Symptomatic personnel shall go for teleconsultation from the Medical Officer. The medical officer shall properly assess, manage and dispose of the sick personnel.



5. In case the personnel develops symptoms while on duty, he/she shall proceed to the isolation unit and shall be managed accordingly through teleconsultation.

#### A.3 Isolation Area

1. The isolation area shall be provided with beds, chairs and must have a dedicated restroom and wash area. It shall be disinfected once every two (2) hours and/or immediately after any sick, infected or confirmed COVID-19 employee leaves the area.
2. In case an isolation area is unavailable, arrangements may be made with a temporary treatment and monitoring facility nearby or with the Barangay Local Government Unit, for immediate referral of personnel who fulfill the criteria for isolation.
3. All individuals shall keep their face masks and face shields during isolation at all times.
4. Isolation area personnel shall always wear the recommended Personal Protective Equipments (PPEs) prior to attending to the symptomatic employee, as prescribed in the DOH Department Memorandum No. 2020-0197, including:
  - a. Disposable gown
  - b. Face shield
  - c. Medical grade mask
  - d. Gloves
5. All used PPEs shall be properly disposed of after every use.
6. Protocols for transporting the symptomatic personnel/s to the nearest health facility, such as ambulance conduction and if necessary, for RT-PCR testing shall be put in place.

#### A.3 Transportation

1. Patients for transport shall be coordinated with the Local Government Unit Emergency Medical Services for ambulance conduction to the nearest health facility/hospital.
2. A referral letter shall be given to the receiving facility.

#### B. Confirmed COVID-19 Case

- Actions to be done when there is a Confirmed Positive Case of COVID-19 in the workplace:
  1. Activation of the COVID-19 Disinfection Team to initiate immediate disinfection of the workplace.
  2. Immediate contact tracing and identification of close contacts and general contact shall be initiated after every reported case. Coordination with linkages if needed.
  3. RT- PCR Swab Test remains to be the gold standard for diagnostic testing for COVID 19.
  4. The identified case must truthfully disclose any needed data to make tracing or identification swiftly.
  5. The confirmed case shall undergo teleconsultation by the Team in order to treat his/her mild symptoms if there are any. Coordination with linkages if necessary.
  6. Facility-based quarantine and isolation shall be the first option.
    - a. General term: Temporary Treatment and Monitoring Facilities (DOH DM 2020-0123)
    - b. Home-based quarantine and isolation can be done if with capacity for own room, own toilet and no most-at-risk population (MARF) at home.

#### C. Close Contact

1. A close contact is one who had at least two of the following criteria:
  - a. an interaction with a confirmed positive patient for more than 15



- b. if during the said interaction the face mask and the face shield has not been properly worn
  - c. the 2 meter physical distancing was not observed;
  - d. if the interaction is within a confined area with poor ventilation.
2. An identified close contact should voluntarily undergo a 7 to 21 day quarantine. A fully vaccinated, asymptomatic close contact will undergo a 7 day quarantine. A fully vaccinated, symptomatic close contact will undergo 10 to 21 days depending on the evaluation of his/her attending physician.
  3. Those close contacts who are not vaccinated, symptomatic or asymptomatic should undergo 14 to 21 days of quarantine depending upon the recommendation of his/her attending physician.
  4. Once identified as a close contact, the immediate supervisor should be informed including any of the division medical officers, the barangay health emergency response team (BHERT) where he/she belongs to.

#### D. General Contact

1. These general contacts are individuals who did not fit the definition of a close contact but may have been exposed while in attendance to the same venue or setting as a confirmed case.
2. All General Contacts provided they are asymptomatic shall stay only to his/her work space and minimize interaction with other individuals, which includes no eating with others.

#### E. Teleconsultation

1. Symptomatic individuals shall seek consultation with the Medical Officer through a virtual platform to ensure safety and cater to health needs.
2. Teleconsultation is defined as synchronous or asynchronous consultation, it is the delivery of real-time healthcare services via digital communication technologies remotely and this includes the process of consulting a patient, giving e- prescription, all done digitally.
3. The use of telemedicine as a modality to deliver healthcare services remotely has been of significant use in ensuring timely and equitable services to all with safe communication between patients and Medical Officers during pandemic.
4. Teleconsultation shall include close contacts and general contacts of the confirmed case.
5. Medical Officers messenger accounts will be open during regular working hours (8 am to 5pm) to cater to medical needs of patients. For emergency cases, clients are advised to go immediately to the nearest Emergency Room for proper evaluation and intervention.
6. Medical Officers can be reached via messenger accounts:
  - a. Anna Melissa Repalda, MD (FB messenger: Anna Melissa Repalda)
  - b. Frances Claire Celino-Ortiz, MD (FB messenger: Frances Claire Ortiz Celino)
  - c. Mary Libeney Sito, MD (FB messenger: Nay Elcare Koh)
  - d. Roger Sinot, Jr., MD (FB messenger: Roger Junior Dao-as Sinot)
8. Confidentiality and privacy of electronic medical records (EMRs) shall be ensured and made sure it is compliant with Data Privacy Act of 2012.

#### F. Disinfection

1. It is essential that every personnel should disinfect his/her work area at least every 2 hours.
2. It is recommended that frequent hand washing or alcohol rub be performed after every client.
3. Deep disinfection of the Division Office is scheduled shall be conducted at an appropriate time.
4. If one confirmed case of COVID-19 is detected in the workplace, the facility shall be disinfected with an appropriate disinfectant solution (0.5% bleach solution). The conduct of a comprehensive disinfection by specialists is



5. The building must be locked down for 24 hours upon approval of authorized officials prior to disinfection to lessen transmission to sanitation personnel. During the disinfection process, all doors and windows should be opened to maximize ventilation. The building may only be opened 24 hours after the disinfection process.
6. UVC lamps may be used for terminal cleaning of the workplace. Due care must be exercised to prevent direct exposure to skin and eyes of the operator. The time of exposure must be in accordance with the direction instructions of the manufacturer's user manual. (E.g. 15 minutes for 10 square foot room area)

#### F.1. WASTE DISPOSAL

- a. Proper waste disposal shall comply with the DOH Health Care Waste Management Manual and DM 2020-0170.
- b. Waste management and disposal staff should wear proper PPE.
- c. All common areas and offices should use covered, hands-free, and foot operated garbage bins using the appropriate color coded system for waste segregation.
- d. Management and final disposal of waste shall be the responsibility of trained personnel, in coordination with the DENR and the LGU.
- e. Infectious wastes such as worn masks and used tissue papers shall be disposed of in a separate yellow plastic bag while others in regular black plastic disposal bags.

#### G. Lockdowns

1. A lockdown is a security measure taken during an emergency to prevent people from entering a building.
2. A granular lockdown is a microlevel lockdown eg. temporary closure of a certain office.
3. A lockdown is observed whenever a deep disinfection is necessary or a weekly disinfection is done. A granular lockdown is observed when a personnel from a specific unit is reported to be positive for COVID 19 infection.
4. There should be a 7-day lock down period duly approved by authorized officials for clustering of cases in the workplace. Clustering is considered when there is an unusual aggregation, real or perceived, of health events that are grouped together as to time and space and that is reported to a public health department. For the purposes of this document, it is further defined as two or more confirmed cases from the same area/office over a period of 14 days. Immediate deep disinfection of the workplace, including granular lockdown of the affected area. Suspension of all face to face activities.

#### H. Workforce

Workforce shall depend on the Alert Level issued by the government.

1. Alert Level 1: All offices are allowed to operate at full capacity provided it is consistent with minimum public health standards; face to face classes for basic education shall be subject to approval of the Office of the President.
2. Alert Level 2: Fully operational and shall adhere to at least 50% on-site capacity while applying work from home and other flexible work arrangements.
3. Alert Level 3: Activities shall allow a maximum of 30% indoor venue capacity for fully vaccinated individuals and only 50% outdoor venue capacity.
4. Alert Level 4: Maintain fully operational and adhere to at least 20% on site capacity while applying work from home and other flexible work arrangements
5. Alert Level 5: Observe guidelines applicable to Enhances Community Quarantine (ECQ) as provided for under the IATF Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines, as amended.



## I. Re-integration

For COVID-19 Recovered cases:

1. Present Medical Certificate/BHERT Certification that the prescribed isolation period has been completed.
2. Present RT-PCR test result.
3. Fit to work certification from the Medical Officer.
4. All documents are attachments for the quarantine leave form.

For Asymptomatic close contacts:

1. Present BHERT certification and medical certificate issued by their respective health center that they have completed home quarantine.
2. May work from home, self-monitor for appearance of symptoms and present MOVs.

For Asymptomatic general contacts:

1. May work from home, self-monitor for appearance of symptoms and present MOVs.
2. No BHERT certification/Medical certificate is needed to be presented prior to resuming physical reporting.

## J. Testing for COVID-19 Status

1. Mass Testing is not recommended for the general population but is advised to prioritize the vulnerable members of the population such as pregnant women, those who are immunocompromised, and the frontline health workers who have the highest exposure to the virus.
2. There is no place for complacency even though one tests negative, or as health protocols are relaxed.
3. For unvaccinated personnel who are to report physically, they are to present a negative RT PCR test every 2 weeks, in accordance with City's Executive Order No. 159-2021 issued by Mayor Benjamin Magalong on November 29, 2021 and Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF-EID), through Resolution No. 148-B, that directs all establishments and employees in the public and private sectors to require on-site employees to be vaccinated against COVID-19 and those employees who, despite eligibility for vaccination, remain unvaccinated, shall undergo reverse transcriptase-polymerase chain reaction (RT-PCR) tests regularly at their own expense for purposes of on-site work, provided, that antigen tests may be resorted to when RT-PCR capacity is insufficient or not immediately available .

## K. Non-compliance

1. Non-compliance to the aforementioned procedural measures shall submit an explanation letter which includes the reason for non-compliance and undergo thorough consultation if the reason is valid or not.
  - a. Once the explanation has undergone investigation and validated, no sanctions will be given
  - b. Once the explanation has undergone investigation and found to have no valid reason, they must comply with the above procedural measures.
  - c. If a person who is a COVID-19 confirmed and was not compliant to above procedural measures he shall be liable to any legal actions against him.
  - d. If a person who is a close contact and was not compliant to above mentioned measures shall make an explanation letter for non compliance and shall undergo consultation to the grievance committee for proper action.

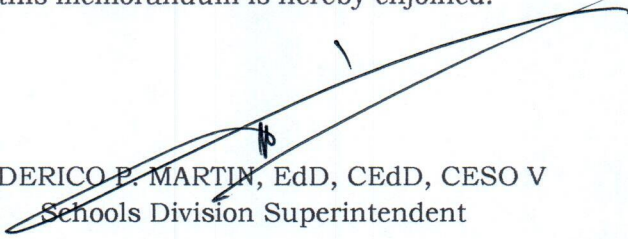
## L. General Preventive Measures

1. Relative to DepEd Memo No. 043,s 2020 on Stringent Social Distancing Measures and Further Management of COVID 19 cases, this office reiterates the observance of physical distancing (2 meter distance) and modified work spaces in offices and schools.
2. Eating in groups shall not be allowed in offices. It is highly recommended to eat at their own work space to lessen contamination.



3. Meetings shall be done via videoconferencing to minimize face-to face interaction unless otherwise specified or as approved by the office.
4. Adequate ventilation is the process of supplying or removing air in an enclosed space to maintain good indoor air quality with the following basic components:
  - a. Supply fresh air to meet the respiratory needs of the occupants;
  - b. Control of indoor temperature and humidity; and
  - c. Removal of any airborne contaminants such as carbon dioxide, dust, toxic gases and pathogenic microorganisms.
5. Proper wearing of masks should be observed at all times. Make sure the mask fits to cover your nose, mouth and chin forming a tight seal. If you adjust the mask to cover those areas, wash your hands before and after.
  - a. Wash your hands before and after touching the mask.
  - b. Wash reusable cloth masks after each use. If the mask is disposable, discard it when visibly soiled or damaged
  - c. Never take off mask when talking.

Immediate dissemination of this memorandum is hereby enjoined.

  
FEDERICO P. MARTIN, EdD, CEEd, CESO V  
Schools Division Superintendent

REFERENCES:

IATF-EID Resolution No. 148-B

Baguio City Executive Order No. 159-2021

DOH, DOLE, DTI, HPAAC, PCOM. (2020, September 30). Workplace Handbook on COVID-19 Management and Prevention Version 1., Manila, Philippines.

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DOH Memorandum No. 2022 - 0013: Updated Guidelines on Quarantine, Isolation, and Testing for COVID-19 Response and Case Management for the Omicron Variant

UP, PSMID. (2022, January 10). The Philippine COVID-19 Living Recommendations Clinical Practice Guidelines