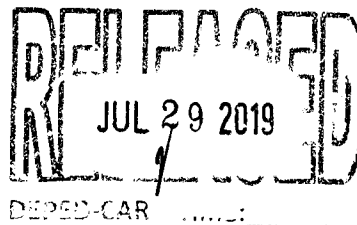




July 26, 2019

REGIONAL MEMORANDUM

No. 227.2019




DEPED-CAR _____

SCHOOL BASED IMMUNIZATION PROGRAM (SBIP) AND MEASLES OUTBREAK VACCINATION FOR SCHOOL YEAR 2019-2020

TO: Schools Division Superintendents
Heads, All Public and Private Schools
School Health and Nutrition Personnel
All Others Concerned

1. In line with the efforts to eliminate the threat of a continuing measles outbreak in the country, the Department of Health (DOH) and Department of Education (DepEd) released the Joint Memorandum Circular (JMC) No. 1, s. 2019 and DepEd Memorandum No. 47, s. 2019 with the subject: ***Measles Outbreak Response and Prevention of Transmission in Schools***. This was followed by DepEd OUA Memorandum 08-0519-0181 with the subject: Advisory on the ***Continuation of Measles Outbreak Vaccination and Implementation of the SBIP***.
2. For School Year 2019-2020, the regular SBIP and the Measles Outbreak Vaccination will be implemented. These immunization activities shall cover Kindergarten to Grade 7 learners of public elementary and secondary schools.
3. A consolidated accomplishment report shall be submitted by email to the DepEd Regional Office – Education Support Services Division at essd.depedcar@gmail.com on or before October 21, 2019. The SBIP Report forms will be downloaded to the SDOs.
4. Private schools are enjoined to access these services through your respective local government unit – city/municipal health services offices.
5. Attached are the following documents for your perusal:
 - a. DOH-CHD CAR Report on Measles Cases as of June 1, 2019
 - b. DOH and DepEd Joint Memorandum Circular (JMC) No. 1, s. 2019
 - c. DepEd Memorandum No. 47, s. 2019
 - d. DepEd OUA Memorandum 08-0519-0181
6. Immediate dissemination and compliance to this Memorandum is desired.


MAY B. ECLAR, Ph.D., CESO V
Regional Director

ESSD/ABG/afc

CONTACT NUMBERS (Area Code: 074)			
Office of the Regional Director	422-1318	Administrative Division	422-1804
	422-4074	Cash Section	423-2215
Fax	422-9590	Payroll Section	424-3993
Office of ARD	422-1318	Records Section	423-2213
ICT Unit	422-1318	Supply Section	422-2198
Public Affairs Unit	423-2214	General Services Unit	422-1804
Legal Unit			
		CLMD	422-7096
		LRMDS	422-0615
		ESSD	423-2218
		Finance Division	422-5155
		FTAD	424-5187
		HRDD	422-9590
		NEAR-R	422-5500
		PPRD	422-9590
		QuAD	422-5187
		COA	422-7434

Measles Cases

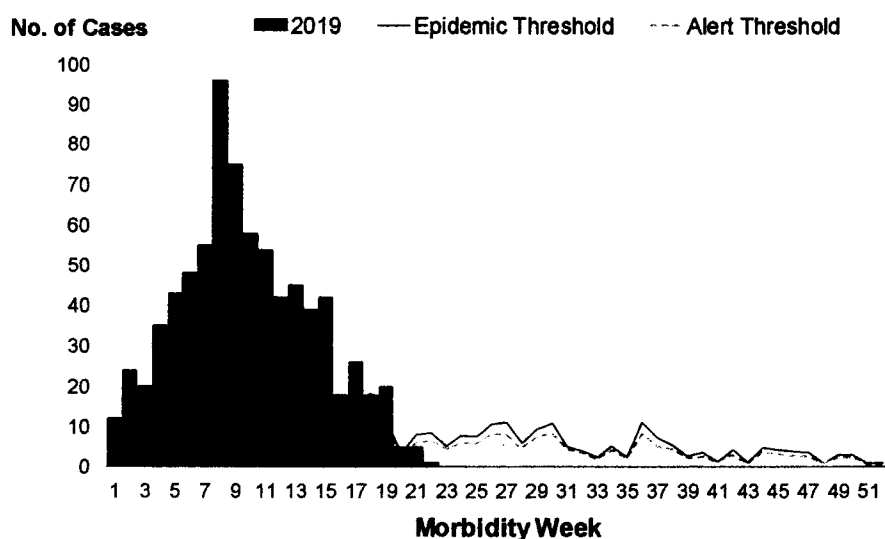
Cordillera Administrative Region
As of June 1, 2019

Data Source: PIDSR Database, DOH-CHD-Regional Epidemiology and Surveillance Unit



Department of Health - Center for Health Development - CAR

**Figure 2. Measles Suspect Cases by Morbidity Week
Cordillera Administrative Region, Morbidity Week 1-22 (5 Year Data)
(January 1 to June 1, 2019)**



**Table 1. Measles Suspect Cases by Province
Cordillera Administrative Region, January 1 to June 1, 2019**

Province/ City	2019		2018		Percent change
	Cases	Death	Cases	Death	
Abra	48	0	4	0	1100% ↑
Apayao	74	0	25	0	196% ↑
Baguio City	290	0	8	0	3525% ↑
Benguet	300	3	7	0	4185% ↑
Ifugao	29	0	6	0	383% ↑
Kalinga	19	0	1	0	1800% ↑
Mountain Province	21	0	4	0	425% ↑
Total	781	3	55	0	1320% ↑

Table 2. Measles Suspect Cases, Death and Laboratory Confirmed, per Province in CAR, January 1 to June 1, 2019

Province/ City	2019			
	Suspect	Death	Laboratory Confirmed	
			Alive	Death
Abra	48	0	11	0
Apayao	74	0	9	0
Baguio City	290	0	105	0
Benguet	300	3	65	2
Ifugao	29	0	4	0
Kalinga	19	0	3	0
Mountain Province	21	0	3	0
Total	781	3	200	2

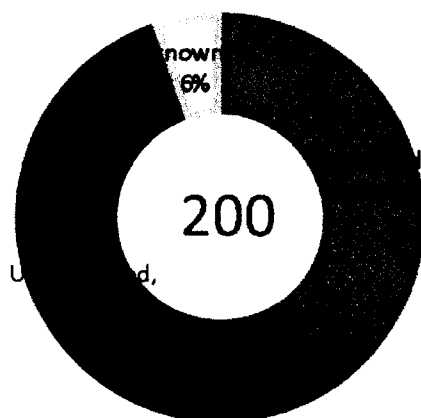
**Table 5. Confirmed Measles Cases by Province
Cordillera Administrative Region, January 1 to June 1, 2019**

Province/ City	2019	2018	Percent change
	No. of Laboratory Confirmed Cases	No. of Laboratory Confirmed Cases	
Abra	11	0	Increase
Apayao	9	3	200% Increase
Baguio City	105	0	Increase
Benguet	65	2	3,150% Increase
Ifugao	4	1	300% Increase
Kalinga	3	0	Increase
Mountain Province	3	0	Increase
Total	200	6	3,233% Increase

**Table 6. Confirmed Measles Cases by Sex and Age Group
Cordillera Administrative Region, January 1 to June 1, 2019**

< 9 mos.	13	22	35	18%
9 mos. to < 1 y/o	6	7	13	7%
1 to 4 y/o	16	17	33	17%
5 to 9 y/o	3	4	7	4%
10 to 14 y/o	5	1	6	3%
15 to 19 y/o	10	17	27	14%
20 to 24 y/o	14	18	32	16%
≥ 25 y/o	22	25	47	24%

**Figure 4. Confirmed Measles Cases by Vaccination Status
Cordillera Administrative Region, January 1 to June 1, 2019**



WAYS FORWARD

- 1.) DOH CHD CAR to issue an Advisory to the Province/ City Level regarding the mop-up activity to achieve the following targets:
 - **95% coverage for 6-59 months old unvaccinated by end of June 2019**
 - **95% coverage for school-age unvaccinated by end of September 2019**
 - **95% coverage for above 12 years old unvaccinated by end of September 2019**



Joint Memorandum Circular (JMC) No. 1, s. 2019

Date: March 22, 2019

FOR: All Department of Health Centers for Health Development Directors, Medical Center Chiefs and Chiefs of Hospitals, Department of Education Regional Directors, Schools Division Superintendent, and Health and Nutrition Officers and Personnel, and All Concerned Agencies and Institutions

SUBJECT: MEASLES OUTBREAK RESPONSE AND PREVENTION OF TRANSMISSION IN SCHOOLS

I. RATIONALE

Measles is an acute viral respiratory illness. It is a highly contagious disease and can be transferred from person to person by coughing, sneezing and direct contact with infectious droplets. On February 7, 2019 the Department of Health (DOH) declared measles outbreak in the National Capital Region, Regions III, IVA, VI, and X. As of 17 February, 2019, there were 9,267 reported measles cases with 202 deaths. As part of the outbreak response, the DOH, in partnership with the Department of Education (DepEd), shall take appropriate measures to protect school-age children and prevent measles transmission in schools and during large-scale school events.

II. OBJECTIVES

1. Prevent transmission of measles and other infectious diseases in schools.
2. Provide guidelines on screening of students participating in school events.
3. Provide guidelines on triaging and referral of measles cases in school events.

III. SCOPE AND LIMITATIONS

This policy shall cover school age children (Kindergarten to Grade 6) enrolled in public schools nationwide and those athletes that will participate in the Palarong Pambansa 2019.

IV. DEFINITION OF TERMS

1. Eligible learners – learners enrolled in kindergarten to grade 6 who, after screening for immunizations status, have no or incomplete measles vaccination.
2. Incomplete measles vaccination –Status of having received only 1 dose of measles containing vaccine (MCV)
3. Measles Containing Vaccine (MCV) – A vaccine containing live, attenuated measles virus either as monovalent vaccine or combination with one or more of rubella, mumps, and varicella vaccines (e.g. measles only, MMR, MR)
4. Recent exposure to measles – refers to the situation wherein an individual was in close contact with a confirmed or suspected measles case four (4) days before to four (4) days after the appearance of rashes and symptoms in the index case.

5. Triaging – the process of determining the proper intervention for confirmed and suspected measles as well as exposure to such cases, based on the existing protocol and guidelines.

V. SPECIFIC GUIDELINES

1. Prevention of Further Transmission of Measles in Schools

Measles is characterized by fever and malaise (body pain), cough, coryza (runny nose), and conjunctivitis (red eyes) followed by a maculopapular rash. Patients are considered to be contagious from four (4) days before to four (4) days after the rash appears. School teachers need to be alert in identifying possible measles cases to implement critical measures to stop the measles transmission.

- a. School officials should advise parents/guardians whose children manifest flu-like symptoms (fever and body malaise, cough, colds, conjunctivitis) to keep them at home and seek immediate medical attention.
- b. Learners should not attend schools while sick to avoid further transmission and to allow for further recovery. Patients with measles should remain isolated until four (4) days after the appearance of rashes.
- c. School officials shall promptly isolate and refer the student with symptoms to the nearest facility/health center.
- d. Standard precautions such as hand hygiene and respiratory hygiene/cough etiquette should be observed at all times.
- e. Immediately report the suspected measles case to the health center or rural health unit for proper case investigation.
- f. Principal shall declare suspension of classes for four (4) days in a particular **classroom** with a suspected measles case and with an established clustering of cases in the community.
- g. Principal shall declare **school-wide** suspension for four (4) days when $\geq 20\%$ of the classrooms among Kindergarten to Grade 6 have suspected measles cases.
- h. Upon resumption of classes, students who remain symptomatic shall be advised not to report to school, and the teacher should be vigilant in monitoring the health condition of their learners. Sick learners must be sent home.

2. Prevention of Transmission of Diseases in Individual or Groups in School-Related Events/Activities

Crowding can facilitate transmission of diseases. To prevent further transmission of diseases in school-related events, the delegates / attendees are encouraged to follow these protocols:

- a. Prevention
 - i. In areas with ongoing measles transmission, the delegates / attendees are enjoined to limit mobility of playing venues and billeting quarters as much as possible;
 - ii. Discourage those who are sick and those with recent exposure to measles from attending school-related events/activities;
 - iii. Enforce proper personal hygiene in all areas of the school events:
 - a. Proper hand washing or use of hand disinfectant is a must
 - b. Covering of nose when coughing or sneezing using the sleeves of your shirt
 - c. Proper disposal of used tissues with respiratory secretions
 - d. No spitting

e. No borrowing of personal effects

iv. Intensify campaign for proper health, nutrition and healthy lifestyle

b. Screening and Immunization:

- i. All Kinder to Grade 6 (K to 6) learners and athletes participating in 2019 Palarong Pambansa shall be screened for previous measles history and measles vaccination history (i.e. vaccination card, school health records, and parents' recall) in their respective schools.
- ii. All Kinder to Grade 6 (K to 6) learners and athletes participating in 2019 Palarong Pambansa shall undergo screening or assessment on their medical history to determine whether the student is fit to undergo the vaccination process.
- iii. All K to 6 learners and athletes participating in 2019 Palarong Pambansa with zero, or only one dose of MCV, or unknown history of measles vaccination shall be entered in the master list for vaccination. The procedures in this and the two immediately preceding paragraphs are to be implemented by the DOH, with the assistance of DepEd Public Health Workers who shall be under the authority and responsibility of DOH.
- iv. Vaccination Informed Consent Forms shall be distributed among parents/guardians of K to 6 learners and athletes participating in 2019 Palarong Pambansa included in the master list (see Annex 1: Measles Immunization History and Parent's Consent Form). Information regarding the vaccination history of the student or pupil shall be provided by the parents, guardians or other authorized persons in a document to be signed by them for confirmation.
- v. Only those with signed Vaccination Informed Consent Forms shall be vaccinated
- vi. K to 6 learners and athletes participating in the 2019 Palarong Pambansa whose parents refused to give consent for vaccination will be referred to their respective Local Government Units for appropriate action to convince the parents to allow their children to be vaccinated.
- vii. School officials shall coordinate with the LGUs hosting special events (e.g. Athletic meets, Festivals, Concerts) to ensure high vaccination coverage among vulnerable age group in their respective areas.

c. Interventions and triaging of suspect measles cases during the 2019 Palarong Pambansa:

- i. The medical team shall monitor the health condition of the delegation.
- ii. Dedicate an isolation room for suspect measles cases. Those who are exposed will be under close watch preferably in separate room isolated from others.
- iii. Coordinate with the local health units of the host LGU for the proper referral and management of cases.

VI. ROLES AND RESPONSIBILITIES

1. Department of Health: The National DOH, Centers for Health Development (CHD), Provincial DOH Offices, and the collaborating Bureaus and Units shall be responsible for the following:

The DOH shall provide the necessary vaccines and other immunization logistics following the routine system of distribution of the immunization logistics.

- a. Disease Prevention and Control Bureau (DPCB), in collaboration with DepEd, shall develop guidelines on measles vaccination in school during measles outbreak.
- b. Epidemiology Bureau including Regional Epidemiology Surveillance Units, shall collect all reports on adverse event following immunization (AEFIs), conduct case investigation and submit reports to CHD Directors and DPCB and to the Secretary of Health, as needed.

DOH shall ensure that all its units are ready to provide support needed for implementation of the JMC.

2. Department of Education: The DepEd shall be responsible for the following:

The DepEd, in collaboration with DOH, shall develop guidelines on measles vaccination in school during measles outbreak and ensure that all its units follow the guidelines for prevention of transmission of measles in schools, and in individual/school-related events/activities.

The DepEd shall assist and facilitate the implementation of immunization in school, issue memoranda about the said activity, inform learners, parents, teachers, and school clinic staff on measles outbreak vaccination in school, distribute and retrieve informed consent forms for measles vaccination, screen learners on the status of measles vaccination, accomplish the master list of eligible learners for vaccination, and assist vaccinators during immunization schedules. The assistance and facilitation required from DepEd to implement the implementation of immunization in schools will be up to the extent of providing public health workers who will help in conducting the actual process of vaccination in schools but these DepEd public health workers shall be under the authority and supervision of DOH.

VII. DATA PRIVACY

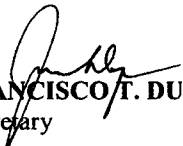
Any necessary personal and sensitive information shall be gathered with the consent of the data subject, declared, specified and used for legitimate purposes in relation to the Project and appropriately protected in consonance with Republic Act 10173 or the Data Privacy Act. Only authorized personnel of the Parties shall have access to any personal and sensitive data/information gathered. All personal and sensitive data/information shall be stored, processed and disposed of in accordance with applicable laws.

VIII. EFFECTIVITY

This Joint Memorandum Circular shall take effect immediately.

DEPARTMENT OF HEALTH

DEPARTMENT OF EDUCATION


FRANCISCO T. DUQUE III, MD, MSc
Secretary


LEONOR MAGTOLIS BRIONES
Secretary



Republic of the Philippines
Department of Education

DepEd MEMORANDUM
No. **047**, s. 2019

22 APR 2019

**MEASLES OUTBREAK RESPONSE AND PREVENTION
OF TRANSMISSION IN SCHOOLS**

To: Bureau and Service Directors
Regional Directors
Schools Division Superintendents
Public and Private Elementary and Secondary School Heads
All Others Concerned

1. The declaration of measles outbreak of the Department of Health (DOH) calls for emergency response from all government agencies, including the Department of Education (DepEd) to address the health issue.
2. Measles is an acute viral respiratory illness. It is a highly contagious disease and can be transferred from one person to person by coughing, sneezing, and direct contact with infectious droplets. The DOH, in partnership with DepEd, shall take appropriate measures to protect school-age children and prevent measles transmission in schools and during large scale school events.
3. In line with this, a Joint Memorandum Circular (JMC) between DepEd and DOH (copy enclosed) has been crafted to prevent transmission of measles to learners. The policy shall cover schoolchildren from Kindergarten to Grade 6 enrolled in public schools nationwide and those athletes who will participate in the *Palarong Pambansa* 2019.
4. Regional directors, schools division superintendents, and other school officials are enjoined to provide full support in the implementation of the JMC. Health personnel are expected to coordinate with DOH regional and provincial health offices for this concern. This activity shall be monitored by the DOH and by the DepEd central office, regional, and schools division offices.
5. Parental consent must be secured prior to the conduct of the vaccination.
6. Immediate dissemination of this Memorandum is desired.


LEONOR MAGTOLIS BRIONES
Secretary

Encl.: As stated
Reference: N o n e
To be indicated in the Perpetual Index
under the following subjects:

HEALTH EDUCATION
SCHOOLS
LEARNERS



Joint Memorandum Circular (JMC) No. 1, s. 2019

Date: March 22, 2019

FOR: All Department of Health Centers for Health Development Directors, Medical Center Chiefs and Chiefs of Hospitals, Department of Education Regional Directors, Schools Division Superintendent, and Health and Nutrition Officers and Personnel, and All Concerned Agencies and Institutions

SUBJECT: MEASLES OUTBREAK RESPONSE AND PREVENTION OF TRANSMISSION IN SCHOOLS

I. RATIONALE

Measles is an acute viral respiratory illness. It is a highly contagious disease and can be transferred from person to person by coughing, sneezing and direct contact with infectious droplets. On February 7, 2019 the Department of Health (DOH) declared measles outbreak in the National Capital Region, Regions III, IVA, VI, and X. As of 17 February, 2019, there were 9,267 reported measles cases with 202 deaths. As part of the outbreak response, the DOH, in partnership with the Department of Education (DepEd), shall take appropriate measures to protect school-age children and prevent measles transmission in schools and during large-scale school events.

II. OBJECTIVES

1. Prevent transmission of measles and other infectious diseases in schools.
2. Provide guidelines on screening of students participating in school events.
3. Provide guidelines on triaging and referral of measles cases in school events.

III. SCOPE AND LIMITATIONS

This policy shall cover school age children (Kindergarten to Grade 6) enrolled in public schools nationwide and those athletes that will participate in the Palarong Pambansa 2019.

IV. DEFINITION OF TERMS

1. Eligible learners – learners enrolled in kindergarten to grade 6 who, after screening for immunizations status, have no or incomplete measles vaccination.
2. Incomplete measles vaccination –Status of having received only 1 dose of measles containing vaccine (MCV)
3. Measles Containing Vaccine (MCV) – A vaccine containing live, attenuated measles virus either as monovalent vaccine or combination with one or more of rubella, mumps, and varicella vaccines (e.g. measles only, MMR, MR)
4. Recent exposure to measles – refers to the situation wherein an individual was in close contact with a confirmed or suspected measles case four (4) days before to four (4) days after the appearance of rashes and symptoms in the index case.

5. Triaging – the process of determining the proper intervention for confirmed and suspected measles as well as exposure to such cases, based on the existing protocol and guidelines.

V. SPECIFIC GUIDELINES

1. Prevention of Further Transmission of Measles in Schools

Measles is characterized by fever and malaise (body pain), cough, coryza (runny nose), and conjunctivitis (red eyes) followed by a maculopapular rash. Patients are considered to be contagious from four (4) days before to four (4) days after the rash appears. School teachers need to be alert in identifying possible measles cases to implement critical measures to stop the measles transmission.

- a. School officials should advise parents/guardians whose children manifest flu-like symptoms (fever and body malaise, cough, colds, conjunctivitis) to keep them at home and seek immediate medical attention.
- b. Learners should not attend schools while sick to avoid further transmission and to allow for further recovery. Patients with measles should remain isolated until four (4) days after the appearance of rashes.
- c. School officials shall promptly isolate and refer the student with symptoms to the nearest facility/health center.
- d. Standard precautions such as hand hygiene and respiratory hygiene/cough etiquette should be observed at all times.
- e. Immediately report the suspected measles case to the health center or rural health unit for proper case investigation.
- f. Principal shall declare suspension of classes for four (4) days in a particular **classroom** with a suspected measles case and with an established clustering of cases in the community.
- g. Principal shall declare **school-wide** suspension for four (4) days when $\geq 20\%$ of the classrooms among Kindergarten to Grade 6 have suspected measles cases.
- h. Upon resumption of classes, students who remain symptomatic shall be advised not to report to school, and the teacher should be vigilant in monitoring the health condition of their learners. Sick learners must be sent home.

2. Prevention of Transmission of Diseases in Individual or Groups in School-Related Events/Activities

Crowding can facilitate transmission of diseases. To prevent further transmission of diseases in school-related events, the delegates / attendees are encouraged to follow these protocols:

- a. Prevention
 - i. In areas with ongoing measles transmission, the delegates / attendees are enjoined to limit mobility of playing venues and billeting quarters as much as possible;
 - ii. Discourage those who are sick and those with recent exposure to measles from attending school-related events/activities;
 - iii. Enforce proper personal hygiene in all areas of the school events:
 - a. Proper hand washing or use of hand disinfectant is a must
 - b. Covering of nose when coughing or sneezing using the sleeves of your shirt
 - c. Proper disposal of used tissues with respiratory secretions
 - d. No spitting

- e. No borrowing of personal effects
- iv. Intensify campaign for proper health, nutrition and healthy lifestyle
- b. Screening and Immunization:
 - i. All Kinder to Grade 6 (K to 6) learners and athletes participating in 2019 Palarong Pambansa shall be screened for previous measles history and measles vaccination history (i.e. vaccination card, school health records, and parents' recall) in their respective schools.
 - ii. All Kinder to Grade 6 (K to 6) learners and athletes participating in 2019 Palarong Pambansa shall undergo screening or assessment on their medical history to determine whether the student is fit to undergo the vaccination process.
 - iii. All K to 6 learners and athletes participating in 2019 Palarong Pambansa with zero, or only one dose of MCV, or unknown history of measles vaccination shall be entered in the master list for vaccination. The procedures in this and the two immediately preceding paragraphs are to be implemented by the DOH, with the assistance of DepEd Public Health Workers who shall be under the authority and responsibility of DOH.
 - iv. Vaccination Informed Consent Forms shall be distributed among parents/guardians of K to 6 learners and athletes participating in 2019 Palarong Pambansa included in the master list (see Annex 1: Measles Immunization History and Parent's Consent Form). Information regarding the vaccination history of the student or pupil shall be provided by the parents, guardians or other authorized persons in a document to be signed by them for confirmation.
 - v. Only those with signed Vaccination Informed Consent Forms shall be vaccinated
 - vi. K to 6 learners and athletes participating in the 2019 Palarong Pambansa whose parents refused to give consent for vaccination will be referred to their respective Local Government Units for appropriate action to convince the parents to allow their children to be vaccinated.
 - vii. School officials shall coordinate with the LGUs hosting special events (e.g. Athletic meets, Festivals, Concerts) to ensure high vaccination coverage among vulnerable age group in their respective areas.
- c. Interventions and triaging of suspect measles cases during the 2019 Palarong Pambansa:
 - i. The medical team shall monitor the health condition of the delegation.
 - ii. Dedicate an isolation room for suspect measles cases. Those who are exposed will be under close watch preferably in separate room isolated from others.
 - iii. Coordinate with the local health units of the host LGU for the proper referral and management of cases.

VI. ROLES AND RESPONSIBILITIES

1. Department of Health: The National DOH, Centers for Health Development (CHD), Provincial DOH Offices, and the collaborating Bureaus and Units shall be responsible for the following:

The DOH shall provide the necessary vaccines and other immunization logistics following the routine system of distribution of the immunization logistics.

- a. Disease Prevention and Control Bureau (DPCB), in collaboration with DepEd, shall develop guidelines on measles vaccination in school during measles outbreak.
- b. Epidemiology Bureau including Regional Epidemiology Surveillance Units, shall collect all reports on adverse event following immunization (AEFIs), conduct case investigation and submit reports to CHD Directors and DPCB and to the Secretary of Health, as needed.

DOH shall ensure that all its units are ready to provide support needed for implementation of the JMC.

2. Department of Education: The DepEd shall be responsible for the following:

The DepEd, in collaboration with DOH, shall develop guidelines on measles vaccination in school during measles outbreak and ensure that all its units follow the guidelines for prevention of transmission of measles in schools, and in individual/school-related events/activities.

The DepEd shall assist and facilitate the implementation of immunization in school, issue memoranda about the said activity, inform learners, parents, teachers, and school clinic staff on measles outbreak vaccination in school, distribute and retrieve informed consent forms for measles vaccination, screen learners on the status of measles vaccination, accomplish the master list of eligible learners for vaccination, and assist vaccinators during immunization schedules. The assistance and facilitation required from DepEd to implement the implementation of immunization in schools will be up to the extent of providing public health workers who will help in conducting the actual process of vaccination in schools but these DepEd public health workers shall be under the authority and supervision of DOH.

VII. DATA PRIVACY

Any necessary personal and sensitive information shall be gathered with the consent of the data subject, declared, specified and used for legitimate purposes in relation to the Project and appropriately protected in consonance with Republic Act 10173 or the Data Privacy Act. Only authorized personnel of the Parties shall have access to any personal and sensitive data/information gathered. All personal and sensitive data/information shall be stored, processed and disposed of in accordance with applicable laws.

VIII. EFFECTIVITY

This Joint Memorandum Circular shall take effect immediately.

DEPARTMENT OF HEALTH

DEPARTMENT OF EDUCATION


FRANCISCO T. DUQUE III, MD, MSc
Secretary


LEONGR MAGTOLIS BRIONES
Secretary



RECEIVED
JUN 18 2019
DEPED-CAR

Republika ng Pilipinas
Kagawaran ng Edukasyon
Tanggapan ng Pangalawang Kalihim

RELEASED
JUN 21 2019
DEPED-CAR

OVA MEMO 08-Q519-0181
MEMORANDUM
09 May 2019

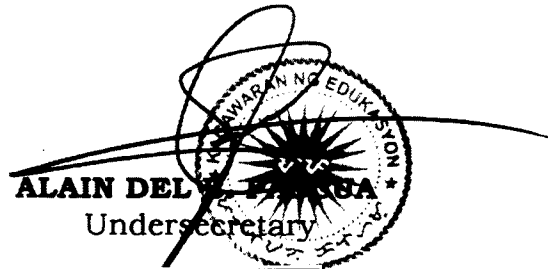
**For: Regional Directors and ARMM Regional Secretary
Schools Division Superintendents
Concerned School Heads**



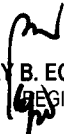
**Subject: ADVISORY ON THE CONTINUATION OF MEASLES
OUTBREAK VACCINATION AND IMPLEMENTATION OF
SCHOOL-BASED IMMUNIZATION PROGRAM (SBIP)**

In line with the Department of Health measles elimination and control measures, second dose of measles containing vaccine will be administered to all learners from kindergarten to Grade 7. Likewise, the regular SBIP will be implemented. For School Year 2019-2020, the continuation of measles outbreak vaccination and the regular SBIP will be conducted in June to September 2019.

In view hereof, it is requested that the attached advisory be immediately disseminated to the field in preparation for the said vaccinations.

For your guidance and compliance.


ALAIN DELA CRUZ
Undersecretary

	Republic of the Philippines DEPARTMENT OF EDUCATION CORDILLERA ADMINISTRATIVE REGION Wangal, La Trinidad, Benguet	
		June 20, 2019
To :	Schools Division Superintendents All Division	
	For information, guidance and appropriate action.	
	 MAY B. ECLAR, Ph.D., CESO V REGIONAL DIRECTOR	

(Administrative Service)

Room 519,

ESSD/jbb

Element, School Health,

5376207



Republika ng Pilipinas
Kagawaran ng Edukasyon
Tanggapan ng Pangalawang Kalihim

QUA MEMO 08-0519-0181
MEMORANDUM
09 May 2019

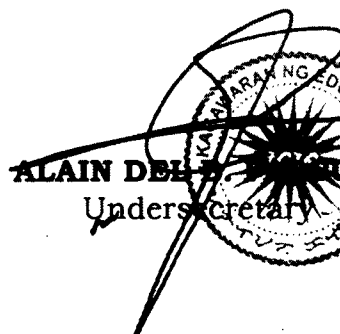
**For: Regional Directors and ARMM Regional Secretary
Schools Division Superintendents
Concerned School Heads**

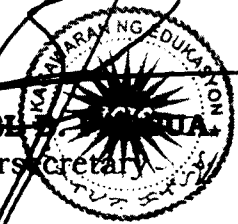
**Subject: ADVISORY ON THE CONTINUATION OF MEASLES
OUTBREAK VACCINATION AND IMPLEMENTATION OF
SCHOOL-BASED IMMUNIZATION PROGRAM (SBIP)**

In line with the Department of Health measles elimination and control measures, second dose of measles containing vaccine will be administered to all learners from kindergarten to Grade 7. Likewise, the regular SBIP will be implemented. For School Year 2019-2020, the continuation of measles outbreak vaccination and the regular SBIP will be conducted in June to September 2019.

In view hereof, it is requested that the attached advisory be immediately disseminated to the field in preparation for the said vaccinations.

For your guidance and compliance.


ALAIN DELA CRUZ
Undersecretary



Office of the Undersecretary for Administration
(Administrative Services, Information and Communications Technology, Disaster Risk Reduction and Management, School Health, Youth Formation, Baguio Teachers' Camp, Education Facilities/ School Buildings)
Department of Education, Central Office, Meralco Avenue, Pasig City
Room 519, Mabini Building; Mobile: +639260320762; Landline: +6326337203, +6326376207
Email: usec.admin@deped.gov.ph; Facebook/Twitter @depedtayog

ADVISORY

1. Target Population

All learners from Kindergarten to Grade 7 for the school year 2019 – 2020 with zero (0) or one (1) dose of measles containing vaccine.

2. Advocacy and distribution and retrieval of informed consent form

Teachers and school clinic staff shall inform learners and parents and on school based immunization in school, distribute and retrieve informed consent forms for measles containing vaccine and tetanus-diphtheria vaccination,

3. Screening of Immunization status

Teachers and school clinic staff shall conduct screening for learners for their immunization status starting in June, 2019. This can be done by checking the Immunization card or the school health record.

4. Masterlisting

Teachers and school clinic staff shall accomplish the master list of eligible learners for vaccination. All learners with zero (0) or one (1) dose of measles containing vaccine will be included in the masterlist of learners to be vaccinated on the scheduled dates of vaccination provided by the City/Rural Health Unit.

5. Implementation

All grade 1 and 7 learners will receive 1 dose of tetanus-diphtheria vaccine regardless of immunization status. All Grade 4 female learners will receive 1 dose of Human papilloma virus vaccine. A separate Marterlist form for Grade 1, 4, and 7 will be provided.

Implementation of SBI 2019 will be in June – September, 2019.

MEMORANDUM OF AGREEMENT

KNOW ALL MEN BY THESE PRESENTS:

This Memorandum of Agreement ("Agreement") is entered into on the _____ in Manila, Philippines, by and between:

FRANCISCO T. DUQUE III, MD, MSc
Secretary, Department of Health

DEPARTMENT OF HEALTH OF THE PHILIPPINES, a national government entity duly organized and existing under the laws of the Republic of the Philippines, with office address at San Lazaro Compound, Rizal Avenue, Sta. Cruz, Manila, Philippines, herein represented by its Secretary, **HONORABLE FRANCISCO T. DUQUE III, MD, MSc**, hereinafter referred to as the "**DOH**";

and

DEPARTMENT OF EDUCATION OF THE PHILIPPINES, a national government entity duly organized and existing under the laws of the Republic of the Philippines, with office address at DepEd Complex, Meralco Avenue, Pasig City, herein represented by its Secretary, **HONORABLE LEONOR MAGTOLIS BRIONES**, hereinafter referred to as "**DepEd**";

In this Agreement, DOH and DepEd are individually referred to as "Party" and collectively as "Parties."

WITNESSETH:

WHEREAS, the State recognizes its mandate to provide equitable and accessible quality healthcare for all Filipinos, which includes healthcare programs such as immunization that help protect adults and children against diseases like measles, mumps, rubella, to name a few;

WHEREAS, from January to December 2018, there were 21,812 reported measles cases with 146 deaths. Out of the total suspected cases, 70% have not been immunized with measles and 29% has unknown vaccination status;

WHEREAS, from January to 17 February, 2019, there were 9,267 reported measles cases with 202 deaths. Out of the total suspected cases, 64% have not been immunized with measles and 16% has unknown vaccination status;

LEONOR MAGTOLIS BRIONES
Secretary, Department of Education

WHEREAS, the DOH declared Measles Outbreak in the National Capital Region, other Regions of Luzon, Central and Eastern Visayas;

WHEREAS, the DOH will conduct measles vaccination from March to April 2019. The targets to be vaccinated with Measles, Mumps, Rubella (MMR) vaccine are all Kinder to grade 6 learners using the school based strategy;

WHEREAS, the DepEd plays a critical role in the screening of learners for vaccination and securing informed parental consent for the successful implementation of Measles vaccination pursuant to the screening procedures set in the Joint Memorandum Circular issued by the DOH and DepEd;

NOW, THEREFORE, in consideration of the foregoing premises, the Parties hereby agree to the following terms and conditions:

ARTICLE I: NATURE AND SCOPE

The Parties hereby agree to cooperate in this undertaking and comply with the terms and conditions set forth in this Agreement and as introduced above.

- 1.1. Being the lead agency in the implementation of measles vaccination and principal health agency in the Philippines, all the vaccinations shall come from the DOH, and accordingly, it shall be primarily responsible for administering the said vaccinations, together with all related activities thereto. Accordingly, DOH holds the DepEd free and harmless from any and all claims, demands, actions, obligations, losses, damages, injuries, liabilities and proceedings whatsoever made against the DepEd by any person by reason of the fault or negligence of the former, its officers, employees, agents and its assigns, including DepEd public health workers who assists in the vaccination activities, and against all costs and expenses incurred with respect to such claims, demands, actions, obligations, losses, damages, injuries, liabilities and proceedings.
- 1.2. DOH as the central organizing entity covenants that it has or will have the full support of all needed entities to meet the logistic, financial, and delivery requirements for its measles vaccination, including the health officials who can provide vaccinations in coordination with volunteers for broad based notification and use of provided facilities where needed.

FRANCISCO T. BUQUIE III, MD, MSC
Secretary, Department of Health

ARTICLE II: ROLES AND RESPONSIBILITIES OF DEPARTMENT OF HEALTH

DOH shall undertake the following responsibilities using their status as a national agency and at its own cost:

- 2.1 DOH shall be the overall lead agency in implementing the measles vaccination including development of guidelines and provision of the vaccines;
- 2.2 DOH shall designate its Assistant Secretary from the Public Health Services Team to be the national focal person and the Chairperson of the Technical Working Group who will oversee the entire program implementation including but not limited to:
 - 2.2.1 Involvement of partner agencies (DepEd) in the planning, coordination, and timely implementation of activities of the program
 - 2.2.2 Coordination with concerned departments within the DOH including its regional offices, cold chain facilities, program coordinators, among others;
 - 2.2.3 Timely distribution of vaccines to DOH regional offices, LGUs
 - 2.2.4 Organize avenues for the conduct of program monitoring and evaluation in coordination with DepEd
- 2.3 DOH shall provide necessary support to ensure participation of concerned DOH departments and personnel in all relevant meetings and activities with regard to the implementation of the immunization program
- 2.4 DOH shall develop communications plan in relation to the immunization activities in close coordination with DepEd, including risk communications
- 2.5 DOH shall oversee the design and implementation of the Adverse Event Following Immunization surveillance
- 2.6 DOH shall prepare and provide national accomplishment reports to DepEd with regard to the implementation of the measles vaccination

LEONOR MAGTONGS BRIONES
Secretary, Department of Education

ARTICLE III: ROLES AND RESPONSIBILITIES OF DEPARTMENT OF EDUCATION

DepEd shall undertake the following responsibilities using their status as a national agency and at its own cost:

FRANCISCO T. DUQUE III, MD, MSc
Secretary, Department of Health

- 3.1. DepEd shall participate in the planning, coordination and provide full support to DOH in the implementation of the measles vaccination in all public schools;
- 3.2. DepEd shall issue a circular addressed to all its concerned departments as well as officials including school principals with regard to the vaccination program;
- 3.3. DepEd shall designate its Undersecretary for Administration as its national focal person who will also be a member of the Technical Working Group that will be formed by the DOH; The Director of the Bureau of Learner Support Services (BLSS) shall be the alternate with technical representation from the BLSS-Schools Health Division.
- 3.4. DepEd shall provide necessary support to ensure participation of concerned DepEd departments and personnel in all relevant meetings and activities with regard to the implementation of the vaccination program
- 3.5. DepEd, through all participating public schools, shall provide DOH the list of eligible students for vaccination based on screening procedure pursuant to the guidelines set in the Joint Memorandum Circular issued by the DOH and DepEd;
- 3.6. DepEd, through all participating public schools, shall ensure that the parents of the eligible students are informed on the disease and immunization activities;
- 3.7. DepEd shall assist in the actual vaccination day by deploying its public health workers to all participating public schools who will guide the vaccinators and eligible students;
- 3.8. DepEd shall provide a way to inform parents through adequate discussion of the informed consent relevant to the vaccination of the children
- 3.9. Coordinate and participate in the feedback, monitoring and evaluation of the Program;

ARTICLE IV: DATA PRIVACY

- 4.1. Any necessary personal and sensitive information shall be gathered with the consent of the data subject, declared, specified and used for legitimate purposes in relation to the Project and appropriately protected in consonance with Republic Act 10173 or the Data Privacy Act. Only authorized personnel of the Parties shall have access to any personal and sensitive data/information gathered. All personal and sensitive data/information shall be stored, processed and disposed of in accordance with applicable laws.

ARTICLE V: MODIFICATION and TERMINATION OF AGREEMENT

- 5.1. This Agreement shall commence upon its signing by the Parties. This Agreement may be amended by the Parties only by mutual written consent signed by all Parties. However, either party may terminate this Agreement without cause, by giving written notice to the other at least thirty (30) days prior to the intended date of termination. This shall be without prejudice to the right of each party to terminate the Agreement in case of violation by the other party of its obligations under this Agreement. The Party effecting such termination shall immediately notify the other Party in writing of the reasons for such termination and may, if desired, provide a ten (10) day period for the other Party to cure its compliance failures.
- 5.2. Any modification of the plan, withdrawal of other implied funds, or misappropriation of funds or materials is cause for immediate termination of this agreement unless the alteration is approved in writing signed by both parties.

LEONOR MAGPOLIS BRIONES
Secretary, Department of Education

ARTICLE VI: NOTICES

6.1 All notices required or permitted under the AGREEMENT will be in writing and will be deemed duly given when delivered by courier, registered mail, or facsimile transmission, to each Party at the address set forth below or at the addresses as the Parties may designate to each other in writing.

Office of the Secretary
Department of Health
San Lazaro Compound
Sta. Cruz, Manila

Office of the Secretary
Department of Education
DepEd Complex
Meralco Avenue, Pasig City

FRANCISCO T. DUQUE III, MD, MSc
Secretary, Department of Health

ARTICLE VII: GENERAL PROVISIONS

- 7.1. The Parties warrant that their authorized representatives executing this Agreement have the legal authority to bind them to all the terms of this Agreement.
- 7.2. The Parties hereby authorize their representatives to sign multiple copies of this Agreement. Each signed identical copy will be deemed an original.
- 7.3. This Agreement shall be binding on the Parties hereto, and their affiliates, assignees, heirs, successors-in-interest, agents, legal representatives, executors or administrators.
- 7.4. If for any reason, any provision of this Agreement is declared to be invalid, the other provisions hereof that are not affected thereby shall continue to be in full force and effect.
- 7.5. DOH recognizes the need for qualified health workers with licenses and certified health status who shall provide the healthcare services and must depend on local government leaders for verification.
- 7.6. This Agreement shall be construed and governed under and in accordance with the laws of Philippine governing law.

LEONOR MAGTOLIS BRIONES
Secretary, Department of Education

IN WITNESS WHEREOF, the Parties hereunder set their hand on the date and place above-mentioned.

DEPARTMENT OF HEALTH

DEPARTMENT OF EDUCATION


FRANCISCO T. DUQUE III, MD, MSc
Secretary


LEONOR MAGTOLIS BRIONES
Secretary

WITNESSES:

ROLANDO ENRIQUE D. DOMINGO
Chief of Staff, Undersecretary
Health Regulation Team
Department of Health

DR. NELIA V. BENITO
Director IV
Bureau of Education Assessment
Department of Education

FRANCISCO T. DUQUE III, MD, MSc
Secretary, Department of Health

ACKNOWLEDGMENT

REPUBLIC OF THE PHILIPPINES)
Manila) S.S.

BEFORE ME, personally appeared the following persons:

Name	Competent Proof of Identity	Date/Place Issued
FRANCISCO T. DUQUE III, MD, MSc Department of Health	PRC ID No. 0055229	13 February 2019, Manila
LEONOR MAGTOLIS BRIONES Department of Education	Passport No. D0001058A	3 September 2016/ DFA Manila

personally known to me to be the same persons who executed the foregoing instrument for and on behalf of the entities represented herein, and they acknowledged to me that the same is their free and voluntary act and deed as well as that of the principals represented herein.

I hereby certify that this document, consisting of five (5) pages including this page on which this acknowledgment is written, has been signed by the Parties and their instrumental witnesses at the foot thereof and on each and every page of this Memorandum of Agreement.

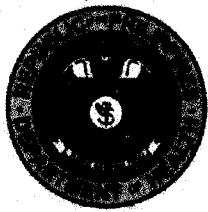
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal this _____ day of _____, 2019 at Manila, Philippines.

LEONOR MAGTOLIS BRIONES
Secretary, Department of Education

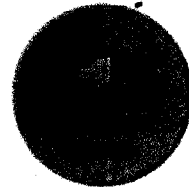
Doc. No. _____;
Page No. _____;
Book No. _____;
Series of 2019.

Notary Public

2019:0624078



Republic of the Philippines
DEPARTMENT OF HEALTH
CENTER FOR HEALTH DEVELOPMENT
Cordillera Administrative Region
Baguio City



BGHMC Compound, Baguio City 2600

Tel/Fax Nos. (074) 442-8097 to 98 TRUNK LINE #: (074) 442-8096, 443-4858, 443-4859, 442-7591 www.caro.doh.gov.ph

RECEIVED
JUN 20 2019

ADVISORY

DEPED-CAR

FOR:

All Local Government Units, Provincial/ City/ Municipal Health Officers, Provincial/City/ Municipal NIP Coordinators, Provincial/ City/ Municipal Epidemiological Surveillance Unit Officers, Provincial/ City/ Municipal Health Education and Promotion Officers, Department of Education Cordillera Administrative Regional Office, Department of Education Schools Division Superintendents, Department of Interior and Local Government Cordillera Administrative Regional Office

Subject:

A JOINT MEMORANDUM ON THE CONTINUATION OF MEASLES OUTBREAK VACCINATION AND IMPLEMENTATION OF SCHOOL-BASED IMMUNIZATION PROGRAM (SBIP)

DATE:

June 17, 2019

In line with the implementation of the Joint Memorandum of The Department of Health and Department of Education on the continuation of measles outbreak vaccination, it is agreed upon that for the School Year 2019-2020, the regular School-Based Immunization Program will be implemented. Furthermore, the second dose of measles-containing vaccine will be administered to learners from Kindergarten to Grade 7 and regular School-Based Immunization Program will be conducted on June to September 2019.

In view hereof, it is requested that this advisory be immediately disseminated in preparation for the said vaccinations. Attached is a copy of the Memorandum (08-0518-0181) and Memorandum of Agreement for your guidance.

AMELITA M. PANGILINAN, MD, MPH, CESO IV
Officer-In-Charge, Director IV

The round metal gong of the Cordillera known locally as "gangsa" is a symbol of the upland people's culture that has been passed on from generations to another.

The profile of a person blowing a "tanggyub" represents a community being called for an important matter or action.

The lines that shape the mountains, the rice terraces, clouds and rivers symbolize the connectivity and flow of human interaction in a geographic area such as the Cordillera.

All the symbols combined represent unity and harmony of its people with culture and environment in beating the odds for self-determination.

