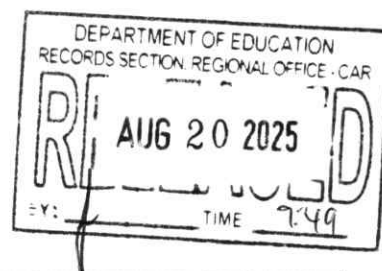




Republic of the Philippines
Department of Education
CORDILLERA ADMINISTRATIVE REGION



August 19, 2025

REGIONAL MEMORANDUM

No. 612-2025

**DOWNLOADING OF PROGRAM SUPPORT FUNDS (PSF) FOR THE
IMPLEMENTATION OF ADOLESCENT REPRODUCTIVE
HEALTH PROGRAM**

To: Assistant Regional Director
Schools Division Superintendents
School Health Personnel
All Others Concerned

1. The Regional Office through the Education Support Services Division will be downloading a total amount of **Five Hundred Thousand Pesos Php 500,0000.00** to Schools Division Offices under the Program Support Funds to cover expenses in the implementation of Adolescent Reproductive Health Program.
2. All Schools Division Offices are required to submit signed Work Financial Plan on or before September 19, 2025 and Accomplishment Report one week after the activity, through email car.essd@deped.gov.ph. The allotment for each Schools Division Offices are as follows:

SDO	REFERRAL MECHANISM
Abra	62,500.00
Apayao	62,500.00
Baguio	62,500.00
Benguet	62,500.00
Ifugao	62,500.00
Kalinga	62,500.00
Mt. Province	62,500.00
Tabuk	62,500.00
TOTAL	500,000.00

3. Attached is Annex A "Guidelines on the Implementation of School Health Programs" of the OM-OUOPS-2025-07-02351.
4. For concerns and clarifications, please contact Georgina C. Ducayso, ESSD Chief Education Supervisor at cellphone number 0928-781-6074 or Raymond S. Damoslog, Medical Officer IV through email raymond.damoslog@deped.gov.ph.
5. Immediate dissemination of and compliance with this Memorandum is desired.


ESTELA P. LEON-CARIÑO EdD, CESO III
Director IV/ Regional Director

ANNEX A

Guidelines on the Implementation of School Health Programs

These guidelines shall apply to the funds provided to field offices for the conduct of activities related to the implementation of SMHP, ARH Program, NDEP, and the MDNS. Following are the **allowable/prescribed activities**:

1. Implementing the School Health Programs shall cover activities for both **Health Service Delivery Management** and **Health Education and Promotion**.

- a. **Health Service Delivery Management** shall include the following:

Health Screening and Assessment	• Vision screening for kindergarten learners • Psychosocial screening and assessment (i.e., Rapid HEEADSSS¹⁵, Comprehensive HEEADSSS Interview) and mental health screening (e.g., Children and Adolescent Risk Screening [CARS]) as key components of the ARH Program and of the SMHP, respectively¹⁶ • Health appraisal and health examination (medical/dental)
Basic Treatment/Interventions	• Psychological first aid and other mental health and psychosocial support (MHPSS) • Medical, dental, and nursing services • Brief Tobacco Intervention (BTI)
Establishment of Functional Referral System	• Development of school health referral plans • Linking of schools to municipality-/city-/province-wide health systems

ROs shall ensure the allocation of PSF for the **Establishment of Functional Referral Mechanisms for Health and Wellness of Learners**, prioritizing the SDOs that do not currently have an established or functional referral system.

Efforts for this shall specifically include, but not limited to, training on foundational courses (e.g., ADEPT, AJA), mapping of service providers, consultations/meetings with service providers and stakeholders concerned, orientation of parents and learners, psychosocial screening and assessment, provision of basic MHPSS, and actual referral.

- b. **Health Education and Promotion** shall include organizing and/or participating in the following:
 - i. Co- and extra-curricular activities on health, aimed at increasing learners' health literacy, enhancing their health-related skills, and encouraging healthy behaviors;
 - ii. Ensuring health-supportive physical and social school environments (e.g., displaying posters related to health and well-being, having

¹⁵ HEEADSSS (Home, Education, Eating, Activities, Drugs, Sexuality, Suicide/Depression, and Safety)

¹⁶ Specific guidelines on the administration of HEEADSSS for SY 2025-2026, including digital copies for printing/reproduction, will be separately provided by the CO, through BLSS-SHD.

designated walls or corners for health and well-being, providing access to designated health spaces, designating spaces that promote healthy social interactions or personal space, providing access to health resources and supportive adults);

iii. Implementation of activities led by the Learner Rights and Protection Office (LRPO) that support the SMHP:

(1) Training on the Use of the Teaching Module on the Safe School Program, to be hosted by the Davao Region¹⁷;

(2) Bullying Prevention Caravan for Reinforcing Kindness and Empathy,

(a) As a special initiative for FY 2025 to support the SMHP, the BLSS-SHD is allocating a portion of the LSP Funds¹⁸, particularly for the implementation of the Bullying Prevention Caravan for Reinforcing Kindness and Empathy within the first two months of SY 2025-2026;¹⁹

(b) The Caravan, which is a partnership between BLSS-SHD and the Learner Rights and Protection Office (LRPO), aims to strengthen DepEd's zero-tolerance policy against acts of abuse, exploitation, violence, discrimination, bullying, and other forms of abuse committed against our learners,²⁰ and to reinforce kindness, empathy, and building of help-seeking behaviors among our learners; and

(c) The Caravan shall be led by the LRPO and its regional/SDO counterparts, in coordination with the BLSS-SHD and the regional/division SMHP Coordinators;²¹

The LRPO shall issue further guidelines on the program design of the training and of the Caravan;

iv. Activities for health-related observances (e.g., School Health Month, One Health Week per DO 28, s. 2018) and/or enjoining learners' participation health-related observances;

v. Social Behavioral Change (SBC) activities and resources (e.g. I Choose #MalayaAkongMaging, Lusog-Isip Kabataan Education, Oky Philippines menstrual tracker app);

¹⁷ The implementation of the Bullying Prevention Caravan for Reinforcing Kindness and Empathy shall be funded through the PSF charged to the LSP FY 2024 Continuing Funds (*Enclosure 2*).

¹⁸ The implementation of the Bullying Prevention Caravan for Reinforcing Kindness and Empathy shall be funded through the PSF charged to the LSP FY 2024 Continuing Funds (*Enclosure 2*).

¹⁹ In particular, each Regional Office (RO) is allocated P250,000.00 for activities related to the Caravan, and may further download to the Schools Division Offices (SDOs), when deemed cost-effective or as may be necessary. Any balances from funds downloaded to the ROs/SDOs for learner rights and protection related activities/projects, may be used to augment the costs needed for the Caravan, subject to the existing guidelines.

²⁰ DepEd Order No. 40, s. 2012

²¹ Reports on the conduct of the Caravan and related activities shall be integrated in the quarterly accomplishment and budget utilization reports for the PSF.

- vi. Activities that promote the health and wellbeing of learners and advocate behavior change in relation to various aspects of learners' health (e.g., workshops, seminars, awareness campaigns, fora, media events); and
 - vii. Promoting health services in schools for learners.
- c. All efforts related to health service delivery management and health education and promotion shall be geared towards helping schools reach the standards set under the six pillars of OKD-HLI.
2. **Enabling Mechanisms.** Field offices shall utilize the PSF for the effective implementation or conduct of the abovementioned activities and the delivery of the abovementioned services, and their continuous improvement. The PSF may be used to fund necessary planning, coordination, and monitoring activities, as well as mechanisms that will enable the achievement of program outcomes. These include the following:
- a. **Support to the operations** (including basic maintenance and minor repairs) **of school clinics** including those that have not been covered under the School Dental Health Care Program (SDHCP)²² **and purchase of medical and dental supplies;**
 - b. Reactivation and/or refurbishment of existing Teen Centers, Teen Health Kiosks, TeenDigs, KADA centers, and similar spaces and establishing them as "Learner Support Centers (LSCs)"; the LSC shall
 - i. aim to: (1) provide a safe, supportive, accessible, and confidential environment for learners; (2) provide the supplies and equipment essential for the operations of the school-based LSC for the SDOs' identified schools; and (3) provide orientation, training, technical assistance, and other activities related to the ARH and other *OK sa DepEd* programs;
 - ii. serve as the center for information, providing a supportive, accessible, and confidential environment, and guidance on positive sexual behaviors; and
 - iii. serve as a hub for learners with health, psychosocial, and RPRH concerns and other learner support services and an avenue for referral mechanisms to the community adolescent-friendly facility;

Further guidelines shall be issued on the operational details of the LSCs;

- c. Organizing orientation and capacity-building activities for teaching and non-teaching personnel and other relevant stakeholders, as may be allowed legally, geared towards strengthening overall health promotion and basic health service delivery in schools for learners;

²² DepEd Order No. 41, s. 2020 titled, *Guidelines on the Implementation of the School Dental Health Care Program, Including Medical and Nursing Services for School Year 2020-2021*; DepEd Order 62, s. 2021 titled, *Supplemental Guidelines to DepEd Order No. 041, s. 2020*

- i. Specific to the **Capacitation of Health Personnel Related to the Implementation of ARH**, ROs shall ensure that school health personnel concerned undergo regional trainings on any or all of the following:
 - (1) Foundational Course on Adolescent Health;
 - (2) Adolescent Job Aid (AJA) or AJA 2.0 Skills Enhancement Training (ASET); and
 - (3) Adolescent Health Education and Practical Training (ADEPT);
- ii. Specific to NDEP for FY 2025, all regions are required to roll-out at least one course from the Universal Prevention Curriculum (UPC) on Substance Use as part of continued efforts in cascading the UPC in DepEd;
- iii. Selected regions will be requested to co-host the following School Health activities:
 - (1) Training of Facilitators on Community-Based Mental Health Program to capacitate their SDOs and other nearby regions in providing psychoeducational interventions;
 - (2) School Health Convergence with the participation of school health personnel nationwide²³

Details of these activities shall be coordinated by the BLSS-SHD with the Region concerned through separate correspondences and issuances. Attached as **Enclosure 3** is the list of major learner support activities and the target ROs to co-host the said activities.
- iv. Following are some other trainings that may be considered by the field to utilize the PSF, depending on their assessment of the capacity building needs of the personnel involved in implementing health programs:
 - (1) Training on Peer Health Navigation;
 - (2) Training on HIV 101;
 - (3) Training on sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC);
 - (4) Psychological First Aid (PFA) and Mental Health and Psychosocial Support Services (MHPSS);
 - (5) Re-echo of orientation on the SMHP and other health programs and newly issued policies;
 - (6) Regional/Division BTI Training;
 - (7) WHO MPOWER Training²⁴;
 - (8) Training on First Aid and Basic Life Support; and
 - (9) Training on School Clinic Management.
- d. Establishing partnerships and communication lines with local professional associations and health service providers, as available and practicable, for

²³ The conduct of the School Health Convergence shall be funded through the PSF charged to the LSP FY 2024 Continuing Funds (**Enclosure 2**).

²⁴ Training based on the policy package of the World Health Organization (WHO) that builds on the measures of the WHO Framework Convention on Tobacco Control (WHO FCTC) that have been proven to reduce smoking prevalence; MPOWER stands for: (1) Monitoring tobacco use and prevention policies; (2) Protecting people from tobacco smoke; (3) Offering help to quit tobacco use; (4) Warning about the dangers of tobacco; (5) Enforcing bans on tobacco advertising, promotion and sponsorship; and (6) Raising taxes on tobacco.

the provision of basic medical, dental, nursing, nutrition, and psychosocial services to learners, and with other partners for the conduct of health education and promotion activities;

- e. Activities related to the implementation and monitoring of school health programs and other related projects and initiatives at the regional or SDO level including but not limited to: workshops related to program reviews, development of tools or checklists, and monitoring of school activities; and
 - f. Participation in activities organized by DepEd and other partners, especially the DOH, that are related to and/or supportive of School Health Programs and OKD-HLI.
3. **Human Resources.** The RO, through the ESSD, and the SDO, through the SGOD, shall ensure that necessary **human resource support** for the smooth coordination of the abovementioned school health program activities is obtained. Efforts shall include:
- a. reconvening the *OK sa DepEd* Technical Working Group (TWG), created by DO 28, s. 2018, to oversee the coordination of the activities prescribed in these guidelines; and
 - b. renewal/hiring of technical assistants (TAs) under Contract of Service (CoS) to be assigned in the School Health and Nutrition (SHN) Sections of all RO-ESSDs and selected SDO-SGODs (very large SDOs), to perform tasks related to coordinating/implementing the programs.²⁵

In line with the efforts to streamline the implementation of school health programs, renewed and newly hired TAs for school health programs for FY 2025 shall be expected to provide technical support not only for the SMHP, but also other school health programs funded under LSP Funds, namely, NDEP, ARH Program, MDNS, and related initiatives for the OKD-HLI. Their Terms of Reference (ToR) (**Enclosure 5**) have been expanded accordingly. For regions and SDOs that have already hired or renewed their TAs prior to the issuance of these guidelines, their TORs shall be amended to reflect this expansion of roles. Accordingly, this issuance reiterates that hiring and renewal of CoS shall be subject to submission of corresponding requirements as indicated in Annex C. Amended TORs and subsequent submission of aforementioned requirements shall be implemented upon end of existing contracts and shall be adopted for all contracts to be executed for both newly-hired and renewed TAs moving forward.

²⁵ In line with the efforts to streamline the implementation of school health programs, renewed and newly hired TAs for school health programs for FY 2025 shall be expected to provide technical support not only for the SMHP, but also other school health programs funded under LSP Funds, namely, NDEP, ARH Program, MDNS, and related initiatives for the OKD-HLI. Their Terms of Reference (ToR) (**Enclosure 5**) have been expanded accordingly. For regions and SDOs that have already hired or renewed their TAs prior to the issuance of this guidelines, their TORs shall be amended to reflect this expansion of roles. Amended TORs shall be implemented upon end of existing contracts and shall be adopted for all contracts to be executed for both newly-hired and renewed TAs moving forward.