



Republic of the Philippines
Department of Education
REGION X
DIVISION OF CAGAYAN DE ORO CITY

Office of the Schools Division Superintendent

309

July 06, 2020



The School Principal
Private Elementary, Secondary and Senior High Schools
Division of Cagayan de Oro City

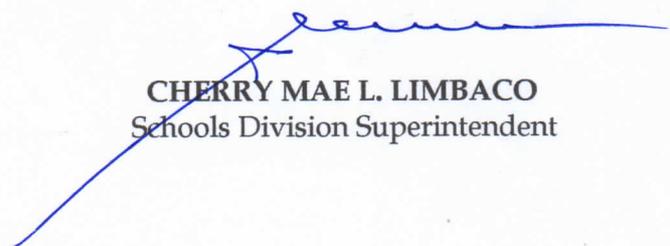
Sir/Ma'am:

Greetings of hope amidst the pandemic.

Please see attached DepEd Order No. 14 s.2020 entitled **Guidelines on the Required Health Standards in Basic Education Offices and Schools and the Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines with amendments as of July 02, 2020** for your information and guidance.

Thank you.

Very truly yours,


CHERRY MAE L. LIMBACO
Schools Division Superintendent



Address: Fr. William F. Masterson Ave., Upper Balulang, Cagayan de Oro City
Telephone: (08822)-8550048



Republic of the Philippines
Department of Education

25 JUN 2020

DepEd O R D E R
No. **014** s. 2020

**GUIDELINES ON THE REQUIRED HEALTH STANDARDS
IN BASIC EDUCATION OFFICES AND SCHOOLS**

To: Undersecretaries
Assistant Secretaries
Minister, Basic, Higher and Technical Education, BARMM
Bureau and Service Directors
Regional Directors
Schools Division Superintendents
Public and Private Elementary and Secondary School Heads
All Others Concerned

1. The Department of Education (DepEd) is committed to ensure safe educational continuity amidst the challenges of COVID-19. Learning opportunities must be provided to give hope and stability, contribute to the normalization of activities in the country, and facilitate development of our learners and bring normalcy to their lives.

2. In the provision of learning opportunities, the health and safety of our learners and teaching and non-teaching personnel are of utmost importance and must be protected at all times.

3. To ensure the safe return to schools and DepEd offices when allowed by the Department of Health (DOH), the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF), or the Office of the President, DepEd issues the enclosed **Guidelines on the Required Health Standards in Basic Education Offices and Schools** (Enclosure No. 1) for the guidance of all learners, teachers, and nonteaching personnel nationwide. The specific **measures for COVID-19 mitigation in schools and offices** are detailed in Enclosure No. 2 and Enclosure No. 3, respectively.

4. The guidelines and the specific interventions are primarily based on the DOH Administrative Order No. 2020-0015 or the *Guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation*, cited by the IATF to aid all sectors in all settings to implement non-pharmaceutical interventions.

5. The DepEd Central Office (CO), Regional Offices (ROs), Schools Division Offices (SDOs) and all public and private elementary and secondary schools/community learning centers (CLCs) are mandated to adopt the guidelines on the required health standards and implement the specific interventions for COVID-19 mitigation. Other measures may be instituted, guided by the following principles laid out in the DOH Administrative Order No. 2020-0015:

a. Shared accountability

- i. All efforts shall espouse the government's strategic directions of national government-enabled, local government-led, and people-centered response to the COVID-19 health event

- b. Evidence-based decision making
 - i. All policies and decisions shall be guided by evidence
 - ii. All actors shall periodically assess and recalibrate policies, plans, programs, and guidelines
 - c. Socio-economic equity and rights-based approach
 - i. Vulnerable groups should be identified and provided additional social safety net protections;
 - ii. Policy design shall always choose the least restrictive alternative that achieves its goals; and
 - iii. In the event of any conflict of rules or guidelines, the interpretation shall ensure the protection of human rights. As such, the safety, needs, and well-being of the individual shall prevail.
6. All concerned are directed to:
- a. Cooperate with DepEd in carrying out the provisions set forth in these standards;
 - b. Report any COVID-19 related concerns to the DepEd Task Force COVID-19 for Central Office concerns, or to their respective COVID-19 DRRM Teams for Regional, Division, or school-level concerns;
 - c. Comply with the standards on health and work safety issued by the Department, and participate in related programs, initiatives, and activities;
 - d. Responsibly use and manage all safety, hygiene, and sanitary resources provided by the agency;
 - e. Contextualize and adapt implementation processes and procedures according to the socio-cultural realities and contexts of learners and their communities; and
 - f. Support government initiatives for responding to the COVID-19 pandemic.
7. For more information, contact **DepEd Task Force COVID-19** through the Bureau of Learner Support Services-School Health Division (BLSS-SHD), 3rd Floor, Mabini Building, Department of Education Central Office, DepEd Complex, Meralco Avenue, Pasig City at telephone no. (02) 8-632-9935 or email at medical.nursing@deped.gov.ph.
8. Immediate dissemination of and strict compliance with this Order are directed.


LEONOR MAGTOLIS BRIONES
 Secretary

Encl/s: As stated
 Reference: None
 To be indicated in the Perpetual Index
 under the following subjects:

BUREAUS AND SERVICES	POLICY
EMPLOYEES	RULES AND REGULATIONS
HEALTH EDUCATION	SCHOOLS
LEARNERS	TEACHERS



GUIDELINES ON THE REQUIRED HEALTH STANDARDS IN BASIC EDUCATION OFFICES AND SCHOOLS

I. RATIONALE

1. The united efforts of the country against COVID-19 have been instrumental in slowing the spread of the virus and the disease. However, its full containment has not yet been attained. In this time of threat, challenges, and uncertainties brought about by the pandemic, the Department of Education (DepEd) is committed to find ways for learning opportunities to be provided, while ensuring the health, safety and welfare of all learners, teachers, and personnel.
2. As stipulated in Resolution No. 29 of the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF), dated April 27, 2020, all decisions to impose, lift, or extend community quarantine rests with the IATF, although local authorities may impose enhanced community quarantine upon the concurrence of their respective regional inter-agency task groups. The decision to impose, lift, or extend community quarantine should be based on the parameters identified in IATF Resolution No. 19, which include:
 - a. Trends in the COVID-19 epidemiological curve, which include, among others, the doubling time, acceleration, or deceleration of new cases;
 - b. Capacity of the health care system, which includes, among others, the number and availability of quarantine, isolation, and treatment facilities, the capability to mount contact tracing, availability of Personal Protective Equipment (PPEs) to frontliners, and the testing capacity of the country;
 - c. Social factors;
 - d. Economic factors; and
 - e. Security factors.
3. Guided by its *Basic Education Learning Continuity Plan (BE-LCP)*, the Department of Health (DOH) *Guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation* (DOH Administrative Order No. 2020-0015), other applicable guidelines by the DOH and the IATF, and policy directives by the President, DepEd adopts the **Required Health Standards** to be followed in all basic education schools and community learning centers (CLCs), and DepEd offices, when and to the extent that personnel, teachers, non-teaching personnel, and learners will already be allowed to physically return to DepEd schools and/or offices.

II. SCOPE AND COVERAGE

4. The **DepEd Required Health Standards** for COVID-19 mitigation shall be applicable to the DepEd Central Office (CO), Regional Offices (ROs), Schools



Division Offices (SDOs), and all public and private elementary and secondary schools/CLCs nationwide, consistent with applicable guidelines from the DOH and the IATF, the policy directives of the President, and taking into consideration the socio-cultural context of their respective localities. The specific measures for COVID-19 mitigation in schools/CLCs and offices are detailed further in Enclosure No. 2 and Enclosure No. 3, respectively.

III. DEFINITION OF TERMS

5. For the purpose of this Policy, the operational definition of the following terms are as follows:
 - a. *Isolation* - the separation of ill or infected persons from others to prevent the spread of infection or contamination
 - b. *Mental Health and Psychosocial Support (MHPSS)* - used to describe a range of activities that aims to protect/promote psychosocial well-being of individuals and communities in their affected environment and/or prevent or treat mental disorder
 - c. *Most-at-risk Population (MARP)* - population groups who have a higher risk of developing severe COVID-19 infection, such as individuals who are aged 60 and above, pregnant, or have underlying conditions or comorbidity at risk of COVID-19 exacerbation
 - d. *Protective Personal Equipment (PPE)* - protective garments or equipment worn by individuals to increase personal safety from infectious agents
 - e. *Quarantine* - the restriction of movement, or separation from the rest of the population, of healthy persons who may have been exposed to the virus, with the objective of monitoring their symptoms and ensuring early detection of case. This covers self-quarantine or community quarantine in this policy.
 - f. *Vulnerable Groups* - socially disadvantaged groups that are most susceptible to suffer directly from disasters and health events, including senior citizens, immunocompromised individuals, women, children, persons deprived of liberty (PDL), persons with disabilities (PDL), members of indigenous peoples (IPs), internally displaced persons (IDPs), and indigenous cultural communities (ICCs), among others.

IV. POLICY STATEMENT

6. In accordance with the principles guiding the BE-LCP, the Department establishes the **DepEd Required Health Standards** to ensure the protection of the health, safety and well-being of learners, teachers and personnel, and prevent the further transmission of COVID-19.
7. This Policy facilitates the safe return of learners, teachers and personnel to schools/CLCs and offices, at the time and to the extent as will be allowed by the DOH, the IATF, or the President.



8. The policy is informed by relevant official guidelines, complemented by other credible sources, and balanced by DepEd's own risk assessments.

V. DEPED REQUIRED HEALTH STANDARDS FRAMEWORK

9. The IATF released its *Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines*, outlining the rules and guidelines for all forms of community quarantine that may be applied in the context of the COVID-19 pandemic. According to these guidelines, all forms of community quarantine aimed at preventing further transmission of COVID-19 require adherence to minimum public health standards.
10. In accordance with the DOH *Guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation* (DOH AO No. 2020-0015) and consistent with the *Basic Education Learning Continuity Plan (BE-LCP)*, the **DepEd Required Health Standards** framework is mainly composed of four COVID-19 Mitigation Objectives:
 - a. Increase Physical and Mental Resilience
 - b. Reduce Transmission
 - c. Reduce Contact
 - d. Reduce Duration of Infection
11. Additional references consulted in the development of this framework include the recommendations of the Center for Disease Control and Prevention¹ for a holistic approach to minimum health standards for adoption by schools; the United Nations Educational, Cultural and Scientific Organization–International Institute for Educational Planning (UNESCO-IIEP) *Plan for School Reopening*² for key factors in guaranteeing the well-being of learners, teachers, and staff in schools; the Johns Hopkins *Public Health Principles for a Phased Reopening During COVID-19: Guidance for Governors*³ breakdown of risks involved in mass gathering, including sports activities and other events; and UNESCO's⁴ framework for reopening schools.
12. The specific measures for the standards are enumerated in Enclosure No. 2 and Enclosure No. 3.

A. Increase Physical and Mental Resilience

13. Guided by the strategies identified in the DOH *Guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation*, key interventions in the

¹ Center for Disease Control and Prevention Interim Guidance for Administrators of US K-12 Schools and Child Care Programs to Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19) (2020)

² International Institute for Educational Planning (IIEP) UNESCO: Plan for School Reopening (2020)

³ John Hopkins: Public Health Principles for a Phased Reopening During COVID-19: Guidance for Governors (2020)

⁴ UNESCO/UNICEF/World Bank/World Food Programme: Framework for Reopening Schools (2020)



DepEd Required Health Standards aim to increase the physical resilience of learners. Standards include the re-establishment of regular and safe delivery of essential school-based services, adapted school-based feeding, continuous promotion of “school-life balance”, and learners’ engagement in daily physical activities provided physical distancing is observed. Similarly, personnel in DepEd offices shall be encouraged to engage in at least 30 minutes of daily physical activities subject to the strict observance of physical distancing, and to observe proper hygiene, safety, and other precautionary measures. Smoking and drinking of alcoholic beverages shall be discouraged, and related bans strictly implemented.

14. The Department likewise places priority on the protection and promotion of the mental health and general welfare of all learners and personnel. Interventions to increase mental resilience include discussion/facilitation of modules related to mental health within the first week of return to school, operationalization of a guidance office in every school to provide basic mental health services to learners and personnel, and the establishment of counseling services through a hotline/platform in SDOs. Likewise, a hotline/platform for counseling services shall be established at the CO for its personnel in the CO and ROs. Moreover, interventions for DepEd offices include provision of Mental Health and Psychosocial Support (MHPSS) and debriefing sessions to personnel, and the promotion of “work-life balance” through proper scheduling of activities and rotation of workforce.
15. Appropriate support for the essential workforce, vulnerable groups, and most-at-risk population (MARP) learners and personnel shall be ensured by this Policy.

B. Reduce Transmission

16. In accordance with DOH AO No. 2020-0015, strategies to reduce transmission in schools/CLCs and DepEd offices include sustaining appropriate information and education campaigns on proper handwashing and respiratory etiquette, ensuring that symptomatic individuals be required to stay at home and seek medical consultation, institutionalizing routine cleaning and disinfecting of workstations and touch areas such as toilets, door knobs, switches at least once every day for workstations, ensuring access to basic hygiene facilities, and the rational use of personal protective equipment (PPEs) such as masks.
17. In addition to the standards set in DepEd Order (DO) No. 10, s. 2016, titled *Policy and Guidelines for the Comprehensive Water, Sanitation, and Hygiene in Schools (WINS) Program*, schools/CLCs that will be allowed to deliver face-to-face learning will be required to conduct orientation on proper respiratory etiquette for learners, teachers, and personnel.

C. Reduce contact

18. To reduce contact in all schools/CLCs and offices, the **DepEd Required Health Standards** directs the implementation of strict physical distancing of at least 1 meter apart in all common areas.
19. Travel and activities of learners and personnel shall be limited to those most essential. The conduct of large physical gatherings and other activities where



physical distancing may not be possible will be restricted. Online platforms for meetings, training, and conferences shall be utilized instead.

20. In compliance with the IATF *Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines* and the *Revised Interim Guidelines for Alternative Work Arrangements and Support Mechanisms for Workers in the Government During the Period of State of National Emergency Due to COVID-19 Pandemic* (CSC Memorandum Circular No. 10, s. 2020), DepEd has issued its revised policy on alternative work arrangements to minimize contact in schools/CLCs and offices, through DO No. 011, s. 2020.

D. Reduce duration of infection

21. In order to reduce the duration of infection of COVID-19, early detection and isolation of symptomatic individuals must be ensured in all schools/CLCs and offices.
22. Pursuant to DepEd Memorandum (DM) No. 15, s. 2020 (*First Set of Policy Directives of the DepEd Task Force nCoV*), the Preventive Alert System in Schools (PASS) shall continue its operation to be able to identify possible cases. Part of the procedure is the daily health inspection to detect symptoms of infection.
23. Schools/CLCs and DepEd offices shall ensure the establishment/setting-up/refurbishment of their own clinics for health assessment, provision of appropriate interventions such as first aid or treatment, and proper management of symptoms of learners, teachers, personnel, and when applicable, of visitors. Clinics shall ensure the provision of referral services and follow up of status of learners, teachers, and personnel in appropriate health facilities.

VI. DEPED TESTING PROTOCOL

A. Framework

24. Testing is indispensable in a comprehensive set of **Required Health Standards** in our schools/CLCs and offices, covering the DepEd family of learners, teachers, and nonteaching personnel.
25. The DepEd Testing Protocol is defined in terms of who will be tested, and how testing will proceed. This testing protocol shall not be called “mass testing” because such term, without being attached to a defined coverage, is prone to conflicting interpretation by the public and even among those who advocate it.
26. In the context of DepEd, testing *all* is not affordable and not feasible relative to the country’s testing capacity. Instead, the testing protocol of DepEd shall be risk-based, guided by issuances of the DOH and advisories issued by the World Health Organization (WHO).
27. The DepEd Testing Protocol adheres to the following principles:



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- a. Testing is an integral part of inter-related health standards and measures to ensure the health and safety of the learners, teachers and personnel. Thus, testing shall be combined with:
- Physical distancing at school, workplace, and during travel;
 - Alternative work arrangements;
 - Suspension of face-to-face classes as needed, cancellation of activities involving congregation of learners and teachers, and use of blended learning and distance learning modalities;
 - Mental health interventions; and
 - Detection and isolation whether at home, in a DepEd facility, or in a health facility through referral.
- b. Testing in the Department shall be employed as a diagnostic tool by qualified medical personnel for medical management, and as part of detection and contact-tracing efforts to suppress spread within the DepEd family and immediate community, and where feasible and available, for clearance of a suspected individual to return to work or school.
- c. It is emphasized that COVID-19 testing of returning personnel and learners shall not be a condition to their return to offices and schools/CLCs.
- d. The DepEd Testing Protocol will take into account considerations such as availability of resources, the COVID-19 situation in a particular locality, and overall public health impact. Thus, prioritization for testing is inevitable, and will be aligned with existing DOH Guidelines.
- e. DepEd will ensure strong coordination with the health sector and local government units.

B. Basis

28. Presently, the applicable DOH testing guidelines are Department Memorandum No. 2020-0180, dated April 16, 2020 (*Revised Interim Guidelines on Expanded Testing*) and Department Memorandum No. 2020-0220, dated May 11, 2020 (*Interim Guidelines on the Return-to-Work*).
29. The DOH defines “expanded testing” as testing of all individuals who are at risk of contracting COVID-19 infection, specifically: (1) suspect cases; (2) individuals with relevant history of travel and exposure (or contact) whether symptomatic or asymptomatic; and (3) health care workers with possible exposure, whether symptomatic or asymptomatic.
30. The DOH does not recommend indiscriminate testing beyond close contacts of a confirmed COVID-19 case. Under DOH Department Memorandum No. 2020-0180, the following subgroups of at-risk individuals are arranged from greatest to lowest need for testing:



- a. Subgroup A: Patients or healthcare workers with severe/critical symptoms, with relevant history of either travel or contact
 - b. Subgroup B: Patients or healthcare workers with mild symptoms, with either relevant history of travel/contact, and considered vulnerable
 - c. Subgroup C: Patients or healthcare workers with mild symptoms, with either relevant history of travel or contact
 - d. Subgroup D: Patients or healthcare workers with no symptoms but with either relevant history of travel or contact
31. Subgroups A and B are prioritized for testing. Subgroup C shall also be tested, with healthcare workers prioritized.
32. Based on current available evidence, real-time polymerase chain reaction (RT-PCR) testing is the confirmatory test. However, Rapid antibody-based test kits approved by the FDA may also be used under conditions indicated in the *Revised Interim Guidelines on Expanded Testing*.

C. Components

Early detection in schools and offices

33. To reduce the duration of infection, early detection and isolation of possible infected individuals is essential. All learners, teachers, personnel, and other visitors shall be subjected to temperature checks using a thermal scanner prior to entering schools/CLCs or offices.
34. Those who will have a temperature reading of 37.5° Celsius and above or show symptoms of COVID-19 shall be provided with a surgical face mask and brought to a clinic for proper evaluation and management.

Referral Process

35. To assist in early detection and eventual referral of possible COVID-19 cases, all school heads shall ensure the continued operationalization of the Preventive Alert System in Schools (PASS) for COVID-19 per DM No. 15, s. 2020. The PASS involves a systematic reporting of one's state of health to the appropriate personnel and/or agencies in the locality.
36. Symptomatic learners, teachers, and personnel shall be evaluated by the school/office health personnel or referred to the nearest barangay/municipal/city health center for evaluation or referral to a hospital if needed.
37. The school/office, through its clinic, shall ensure the provision of referral services and follow up of learners, teachers, and personnel to the appropriate health facilities.



Testing and Quarantine

38. Applying DOH Department Memorandum No. 2020-0180, other relevant DOH guidelines, and relevant WHO guidance to the context of the DepEd family, the Department shall assist in facilitating the testing of the following:
- a. learners, teachers and personnel who develop symptoms during the period when face-to-face classes is already being held, or when teachers and personnel are already reporting physically in school or workplace, and: (1) who have history of travel to a place (local or foreign) assessed as having community transmission of COVID-19 in the last 14 days prior to onset of symptoms; or (2) have history of contact with a confirmed or probable COVID-19 case in the last 14 days prior to onset of symptoms.
 - b. symptomatic assigned healthcare workers and first responders in DepEd with exposure to (a).
39. Learners, teachers and personnel covered by paragraph 38, while no face-to-face classes are being held, or while on pure work from home arrangement, shall be referred to a health facility for evaluation and medical intervention, including testing. Similarly, learners, teachers, and personnel with Influenza Like Illness (ILI) or Severe Acute Respiratory Illness (SARI) as defined by DOH shall be referred to a health facility for evaluation and medical intervention, including testing.
40. Upon detection, and prior to testing or referral to a facility, identified learners, teachers and personnel who fall under the above categories shall be isolated at home or in a DepEd facility. If no referral happens, the patients should still remain in isolation for 14 days or until asymptomatic, whichever is longer.
41. Asymptomatic learners and personnel with relevant history of travel and close exposure or contact with individuals known to be COVID-19 positive shall complete 14 days of quarantine from the date of last contact with the confirmed case, either at home, in a DepEd facility, or in a referral facility.
42. Testing beyond those indicated above, whether using RT-PCR or rapid antibody-based test kits approved by the FDA shall be on case-by-case basis, such as when there is an LGU initiative, or resources are made available by partners, provided: that this shall be done in consultation with a DOH or local government officer, or upon determination of a properly trained DepEd physician following appropriate administrative supervision of relevant DepEd officials. For tests using RT-PCR, results shall be reported to DOH in accordance with DOH AO No. 2020-0013 and DOH AO No. 2020-0014. For tests using rapid antibody tests, the results shall be submitted to hrtucovid19results@gmail.com using the format available on <https://bit.ly/RDTReportingForm>.

Contact Tracing

43. Pursuant to DOH *Updated Guidelines on Contact Tracing of Close Contacts of Confirmed Coronavirus Disease (COVID-19) Cases* (DOH Department Memorandum No. 2020-0189), contact tracing shall serve as one of the main



public health interventions for COVID-19 response aimed at interrupting ongoing transmission and reducing the spread of infection.

44. DepEd shall cooperate with the relevant local health authorities, local government units, or applicable inter-agency groups in the conduct of contact tracing. The process for contact tracing shall include the following actions:
- a. Identify settings where the contacts have visited or social interactions where the contacts have been exposed;
 - b. Identify all social, familial, work, and health care worker contacts who have had contact with a confirmed case from 2 days before symptom onset of the case (use date of sample collection for asymptomatic cases as basis) until the time that the said case tests negative on laboratory confirmation;
 - c. Create a line list, including demographic information and geographic information at barangay and sitio levels, date of first and last exposure or date of contact with the confirmed or probable case, and, for symptomatic close contacts, date of onset of fever, respiratory symptoms, or other significant signs and symptoms; and
 - d. Thoroughly document the common exposures and type of contact with the confirmed or probable case for any contact who become infected with COVID-19.
45. The Department shall conduct its supplemental contact tracing within the DepEd family to ensure timely interventions as required.

Support Protocols

46. DepEd shall coordinate with PhilHealth on the coverage of applicable package/s to learners, teachers and personnel, and work out a possible institutional arrangement with the agency.
47. DepEd shall set aside an amount to subsidize indicated testing for learners, teachers and personnel, subject to availability of funds and applicable budget and accounting regulations.
48. The health status of learners, teachers and personnel who tested positive for COVID-19, and those currently in isolation/quarantine, shall be regularly monitored by the school/office health personnel, in close coordination with the SDO/RO/CO health personnel. Learners, teachers, and personnel who tested positive or are under isolation/quarantine shall secure medical clearance/certificate from their attending physician before they may return to school or office.
49. Learners, teachers, and personnel who are confirmed to be COVID-19 positive, under isolation/quarantine, or categorized as suspect and probable cases shall be provided with Mental Health and Psychosocial Support (MHPSS) facilitated by the school's guidance office and/or personnel trained on MHPSS.



50. DepEd shall arrange with the learners and parents/guardians, teachers, and personnel, the necessary permissions for health-related use and processing of personal information, consistent with the Data Privacy Act.

VII. SUPPORT MECHANISMS FOR THE DEPED REQUIRED HEALTH STANDARDS

51. To support the implementation of the identified strategies under each COVID-19 mitigation objective, the **DepEd Required Health Standards** shall also be supported by the following mechanisms:

A. Continuation of DepEd Task Force COVID-19

52. The DepEd Task Force COVID-19, created through DM No. 11, s. 2020, shall continue to lead the overall efforts of the Department in addressing the challenges of COVID-19 through policy recommendations and strategy development, monitoring of compliance by all schools/CLCs and DepEd offices to the **DepEd Required Health Standards**, DOH guidelines, and other relevant policy directives in relation to COVID-19, and performance of other functions and activities as may be necessary to carry out their mandate, or as the Secretary may direct.

53. The DepEd Task Force COVID-19 may be contacted through the **Bureau of Learner Support Services-School Health Division (BLSS-SHD)**, 3rd Floor, Mabini Building, Department of Education Central Office, DepEd Complex, Meralco Avenue, Pasig City at telephone no. (02) 8632-9935 or email at medical.nursing@deped.gov.ph.

B. Internal Situation Reports

54. The DepEd Task Force COVID-19 prepares regular internal situation reports containing updated statistics of infected persons nationally and within the Department, the latest action/s taken by DepEd in support of COVID-19 mitigation, and latest relevant issuance/s to keep the concerned DepEd officers adequately informed during the pandemic.

C. Communications Plan

55. The Department places great emphasis on the importance of maintaining clear communications, consultation, and coordination with learners, teachers, personnel, parents, and other education stakeholders in this time of uncertainty.
56. As such, close coordination with national government media channels such as the Presidential Communications Operations Office (PCOO), DOH, and IATF will be done to ensure the dissemination of truthful and accurate information to all stakeholders.
57. New media channels across various online platforms, such as social media and streaming services, shall be strengthened for quick and wide dissemination of policies and announcements. Environment scanning for the collection of inputs from stakeholders will also be conducted to help in informing policy decisions.



58. The Public Affairs Service (PAS) will work closely with the DepEd Task Force COVID-19, Disaster Risk Reduction and Management Service (DRRMS), Quick Response and Recovery Team (QRRT), Bureau of Learner Support Services-School Health Division (BLSS-SHD), and other DepEd units in the dissemination of relevant preventive and safety information, support, and response in the midst of the COVID-19 pandemic.

VIII. BUDGET AND FINANCE

59. Funding requirements to implement the provisions set forth in this policy guidelines shall be charged to available funds in the CO, ROs, SDOs, and schools/CLCs under the General Appropriations Act (GAA) and/or other sources of funds as a result of partnerships with the LGUs, the private sector, and other non-government organizations. All cost implications should be ranked according to the priority needs of the offices and schools. Utilization of funds for this purpose shall be subject to applicable procurement, accounting, and auditing rules and regulations.

IX. EFFECTIVITY/TRANSITORY PROVISIONS

60. This Policy shall take effect immediately upon publication in the DepEd website.

X. REFERENCES

Civil Service Commission (CSC) Memorandum Circular No. 10, s. 2020 "Revised Interim Guidelines for Alternative Work Arrangements"

Department of Education (DepEd) Basic Education Learning Continuity Plan (BE-LCP) "LEARNING OPPORTUNITIES SHALL BE AVAILABLE: The Basic Education Learning Continuity Plan in the Time of COVID-19"

DepEd Memorandum No. 11, s. 2020 "Creation of a Task Force for the Management of the Department of Education Response to Novel Coronavirus Acute Respiratory Disease"

DepEd Memorandum No. 15, s. 2020 "First Set of Policy Directives of the DepEd Task Force on NCOV"

DepEd Memorandum No. 111, s. 2019 "Prohibiting the Use of E-Cigarettes and other Electronic Nicotine and Non-Nicotine Delivery System and Reiterating the Absolute Tobacco Smoking Ban in Schools and DepEd Offices"

DepEd Order No. 011, s. 2020 "Revised Guidelines on Alternative Work Arrangements in the Department of Education during the Period of State of National Emergency due to COVID-19 Pandemic"

DepEd Order No. 10, s. 2016 "Policy and Guidelines for the Comprehensive Water, Sanitation, and Hygiene in Schools (WINS) Program"



DepEd Order No. 13, s. 2017 “Policy and Guidelines on Healthy Food and Beverage Choices in Schools and in DepEd Offices”

DepEd Order No. 48, s. 2016 “Policy and Guidelines on Comprehensive Tobacco Control”

DepEd Task Force COVID-19 Memorandum No. 25, s. 2020 “Minimum Standards on Social Distancing/Baseline Protocols to be Observed in the Workplace, Travel and Home and Private Space and Time of Deployed Personnel during the Enhanced Community Quarantine”

DepEd Task Force COVID-19 Memorandum No. 39 “Strict Enforcement of Tobacco Control Policies, Including Smoke-Free and Vape-Free Policies, During the Enhanced and General Community Quarantine”

Department of Health (DOH) Administrative Order No. 2020-0015 "Guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation"

DOH Department Memorandum No. 2020-0176 “ Interim Guidelines on the Rational Use of Personal Protective Equipment for Coronavirus Disease 2019”

DOH Department Memorandum No. 2020-0180 “Revised Interim Guidelines on Expanded Testing”

DOH Department Memorandum No. 2020-0189 “Updated Guidelines on Contact Tracing of Close Contacts of Confirmed Coronavirus Disease (COVID-19) Cases”

DOH Department Memorandum No. 2020-0220 “Interim Guidelines on the Return-to-Work”

Inter-Agency Task Force on Emerging Infectious Diseases “Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines “

Inter-Agency Task Force on Emerging Infectious Diseases Resolution No. 19

Inter-Agency Task Force on Emerging Infectious Diseases Resolution No. 29

Republic Act (RA) No. 10173 “Data Privacy Act of 2012”

Republic Act (RA) No. 11223 “Universal Health Care Act”

PhilHealth Circular No. 2020-0009 “Benefit packages for the inpatient care of probable and confirmed COVID-19 developing severe illness/outcomes”



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SPECIFIC MEASURES FOR COVID-19 PREVENTION AND MITIGATION IN SCHOOLS

I. Routines and Protocols for Health and Safety

A. General Health and Safety Protocols

1. Practice respiratory etiquette and other protective measures.
 - a. Practice physical distancing (at least 1 meter apart) at all times.
 - b. Frequently clean hands by using alcohol-based hand rub/disinfectants or by proper handwashing with soap and water. Teachers shall allot a specific period among learners for regular and thorough handwashing with soap and water, subject to the strict observance of physical distancing.
 - c. When sneezing/coughing, use tissue or inner portion of elbow to cover nose and mouth, and be sure that proper distance is maintained. Do not cover the mouth with the hand.
 - d. Observe proper use of face masks at all times. Both nose and mouth must be covered.
 - i. Those with no symptoms may use cloth/washable face masks, earloop masks, indigenous, reusable, do-it-yourself masks, or face shields, handkerchiefs, or such other protective equipment or any combination thereof, which can effectively lessen the transmission of COVID-19.
 - ii. Surgical masks—to be stored in the school clinic and available at the school entrances, shall be reserved for symptomatic individuals and health care providers. Individuals who will manifest symptoms shall immediately be provided with a surgical mask and brought to the school clinic for checking/monitoring/advice; e.g., send home, refer to a hospital/appropriate health authority, etc.
 - e. Practice proper disposal of tissue and masks after use.
2. All learners, teachers and personnel, on the first day of their reporting to school, shall be provided with an initial orientation on the respiratory etiquette and other protective measures. It shall be reiterated that the same measures are expected to be



practiced in other public places, including when they travel to and from the school, and even at home should risk factors exist.

3. The school shall ensure that each learner, teacher, and personnel has access to the following upon return to school:
 - a. Cloth/washable face masks, earloop masks, indigenous, reusable, do-it-yourself masks, or face shields, handkerchiefs, or such other protective equipment or any combination thereof, which can effectively lessen the transmission of COVID-19
 - b. 1 toothbrush and 1 toothpaste (K-6 learners)
 - c. 1 bar of soap (K-6 learners)
4. The school shall ensure availability of hand soaps/hand-sanitizers/alcohol-based solutions/other disinfectants in restrooms, classrooms, entrances, etc. by doing routine monitoring and replacement/replenishment if needed.
5. The school shall ensure routine cleaning/disinfection of frequently touched surfaces and objects (tables, doorknobs, desks, and school items) using bleach solution at least twice a day, preferably before the start of scheduled physical classes (e.g., once in the morning, once in the afternoon), as well as the routine cleaning and the replacement of disinfectant solutions in foot baths. More intensive cleaning and disinfection shall be done on weekends.

B. Detection and Referral

1. All learners, teachers, personnel, and when applicable, visitors, shall be subjected to temperature checks using a thermal scanner prior to entering the school. Those who will have a reading of 37.5° Celsius or above shall be provided with a surgical face mask and brought to a private screening area that shall be set up near the entrance of the school where the concerned teacher, personnel, learner, or visitor can be further examined, for appropriate management, intervention, or referral.
2. Entrance to the school of visitors and other external stakeholders shall be discouraged. Non-face-to-face communications and coordination through available platforms (e.g., telephone, cellular network, the internet) shall be prioritized.
3. Teachers shall conduct daily rapid health check in the classroom. Those who will show symptoms of COVID-19 shall be given a surgical face mask and further assessed in the school clinic.



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C. School Activities and Events

1. The school shall implement adjustments of schedule of classes and activities to allow for physical distancing in the classroom.
2. The school shall restrict conduct of physical or face-to-face large gatherings and activities that will require close contact or where physical distancing may not be possible (e.g., school activities, field trips, sports festivals, and flag ceremony, etc.)
3. The school shall provide and maximize the use of online platforms which do not require physical interactions or congregations for the performance of tasks, including learning delivery, training, and conferences.
4. Travel of learners, teachers and personnel shall be limited only to the most critical or essential as determined by the Secretary or her designated officers.
5. Teachers shall devise and implement alternative means of recording and monitoring attendance.

D. School Clinic and Health Services

1. The school, with the support of concerned DepEd offices, shall ensure the establishment/setting-up/refurbishment of a school clinic to provide basic health services to learners, teachers and personnel, and when applicable, for visitors, such as:
 - a. Health assessment and physical examination, as needed,
 - b. Appropriate intervention, first aid, or treatment,
 - c. Proper management of symptoms, including rest at home
 - d. Referral and follow-up of learners, teachers and personnel to appropriate health facilities
2. Aside from the school clinic, the school shall also designate:
 - a. a private screening area near the entrance of the school where teachers, personnel, learners, and visitors who show symptoms upon screening at the entrance can be further examined, for appropriate management, intervention, or referral, and
 - b. a separate space where sick learners, teachers and personnel who have been managed in the clinic can temporarily stay, awaiting referral to the appropriate health facility, without creating stigma.
3. In the absence of school health personnel, the school shall designate (a) clinic teacher(s) who shall manage the clinic every school day, to provide basic health services and facilitate referral as needed, in close coordination with the school health personnel at the SDO. Clinic teachers shall be provided prior



orientation by the school health personnel at the SDO for proper guidance on how to effectively run the school clinic.

4. The school shall ensure that learners, teachers, and personnel who manifest COVID-19 symptoms shall not physically report to school and shall seek medical advice—virtual, if possible—as needed.
5. The school shall cooperate with the local health authorities in the tracing and quarantine of close contacts of confirmed cases of COVID-19, consistent with DOH guidelines.
6. The school shall ensure that learners and personnel who have tested positive for COVID-19 shall not return to school, even if they are already asymptomatic, unless cleared by medical authorities.
7. The school clinic shall ensure the availability of Emergency Health Kits that include PPEs and other needed supplies and materials. The PPEs should be available for COVID-19 DRRM team members, health personnel, maintenance, and security guards. The use of PPEs should be guided by the DOH Interim Guidelines on the Rational Use of Personal Protective Equipment for COVID-19-04-02 as summarized in the tables below:

- a. PPE requirement depending on the nature of the activity:

Activity	Required PPE
Triage and screening of individuals in points of entry (for personnel in school entrances)	Medical mask
Caring for a suspected case of COVID-19 with no aerosol-generating procedure (for personnel in school clinics)	Medical mask, goggles or face shield, gloves, gown
Caring for suspected/confirmed cases of COVID-19 with aerosol-generating procedure (for personnel in school clinics)	Goggles or face shield, respirator (N95 or FFP2), gloves, gown
Assisting in transporting passengers to a healthcare facility	Full PPE

- b. Technical specifications of PPE

Item	Technical Specifications
Medical mask	Medical or surgical mask, disposable, earloop, 3-ply, conforms to EN 14683 rating type standards or equivalent
Goggles	Goggles or laboratory safety goggles, polycarbonate lens, soft, flexible, adjustable head strap, anti-fog, conforms to EN 166 standard or equivalent



Face shield	Full face shield, anti-fog, latex-free, one-size fits all, soft head foam, comfort stretch band, disposable, conforms to EN 166 standard or equivalent
Gown	Examination gown, disposable, non-sterile, SMS/PE coated polyethylene material, fluid-resistant, solid-front and rear opening, long sleeved with elastic cuffs, conforms to ASTM F1671 standards or equivalent

E. DepEd Health and Safety Policies

1. The school shall ensure the operationalization of the Preventive Alert System in Schools (PASS) for COVID-19 per DepEd Memorandum No. 15, s. 2020.
2. The school shall strengthen the implementation of DepEd Task Force COVID-19 Memorandum No. 25, s. 2020, or the Minimum Standards on Social Distancing.
3. The school shall develop its School Contingency and Response Plan for COVID-19.
4. To ensure the effective adoption of the proper hand and respiratory hygiene and other safety precautions, the school shall strengthen the implementation of DepEd Order No. 10, s. 2016, or the Policy and Guidelines for the Comprehensive Water, Sanitation and Hygiene (WASH) in Schools (WinS) Program.
5. To ensure the availability of nutritious foods in schools and support the promotion of ensuring a strong immune system among learners and personnel to fight COVID-19, the school shall strictly enforce DepEd Order No. 13, s. 2017 or Policy and Guidelines on Healthy Food and Beverage Choices in Schools and in DepEd Offices, as well as provide nutrition education and post nutrition education and information materials; e.g., *Pinggang Pinoy*, Food Pyramid and Cycle Menu.
6. In line with studies that link COVID-19 and smoking, the school shall strictly enforce the ban on smoking/vaping per DepEd Order No. 48, s. 2016, or the Policy and Guidelines on Comprehensive Tobacco Control and DepEd Memorandum No. 111, s. 2019 entitled Prohibiting the Use of E-Cigarettes and other Electronic Nicotine and Non-Nicotine Delivery System and Reiterating the Absolute Tobacco Smoking Ban in Schools and DepEd Offices. Brief Tobacco Intervention Providers at the SDO may be tapped to help learners and personnel who smoke to quit. The DOH Quitline can also be reached through <https://www.facebook.com/DOHQuitlineofficial/>. The schools are enjoined to communicate with local government units (LGUs) to pass an ordinance/implement the existing law that prohibits the sale of tobacco products to minors or within 100 meters from



any point of the perimeter of the school, or implement stricter measures, if possible, as reiterated in DepEd Task Force COVID-19 Memorandum No. 39, entitled Strict Enforcement of Tobacco Control Policies, Including Smoke-Free and Vape-Free Policies, During the Enhanced and General Community Quarantine. Schools are also warned against partnerships with tobacco companies and NGOs and foundations funded by tobacco companies.

II. Physical Arrangement in Schools

- A. All classrooms must meet the following standards:
1. Proper ventilation (open windows are preferred over air-conditioning systems)
 2. Adherence to the attached classroom layout (Enclosure No. 4), specifying the physical designs of chairs and classroom arrangements that ensure proper physical distancing
- B. The school shall establish and maintain proper sanitation and hygiene facilities:
1. Foot baths in all entrances
 2. Toilets (with adequate water and soap)
 3. Handwashing stations
- C. The school shall create and operate a common area where physical distancing and appropriate prevention measures can be strictly enforced for accommodating visitors and/or clients.
- D. The school shall ensure that the following are sufficiently provided in its premises:
1. Tissue paper/towel
 2. Designated trash bins for tissue disposal
 3. Adequate water and soap for handwashing (especially for all toilet facilities)
 4. Hand-sanitizers/alcohol-based solutions/other disinfectants in all rooms, entrances, corridors, communal areas, and other amenities especially eating areas
- E. Information, education, and communication (IEC) materials containing the key messages on health and safety shall be displayed in key strategic areas of the school, such as the school entrances, corridors, toilets, and other communal areas, or if practicable, distributed to the learners or personnel for their ready reference. The same IEC materials



shall be shown or provided to visitors who need to enter the school premises.

- F. The school shall ensure that a Materials Recovery Facilities (MRF) is set up for proper waste segregation.

III. Support Mechanisms

A. Physical and Mental Resilience

1. The first five school days that the learners are physically present in school shall be devoted to discussion/facilitation of modules related to mental health, facilitated by their respective classroom advisers or designated teachers. Before the opening of the school year, classroom advisers or designated teachers are expected to take the training on how to facilitate the modules, which cover the following mental health topics, in addition to modules on the nature of COVID-19 and preventive measures (WASH, physical distancing, etc.):
 - a. Validating and Normalizing Feelings
 - b. Calming Down and Controlling One's Emotions
 - c. Identifying and Addressing Needs
 - d. Sources of Strength
 - e. Other relevant topics as needed
2. The school shall maintain/set-up a guidance office that will remain operational for the entire school year.
 - a. The school shall ensure that the guidance office is staffed by a registered guidance counselor (RGC) or a designated guidance associate (not an RGC but is trained on MHPSS and is capable of effective referral) every school day, to provide basic mental health services to learners, teachers and personnel who may need such services.
 - b. The Schools Division Office (SDO) shall set up a hotline/online platform to provide counseling services to learners, teachers and personnel who require counseling services. In the absence of an RGC, learners, teachers and school-based personnel shall be referred to this platform for counseling services.
3. The school, through its guidance office, shall ensure the provision of specialized psychosocial support to learners, teachers and personnel who are confirmed to be positive, under isolation/quarantine, and categorized as suspect and probable. The most appropriate method, which duly considers the safety



of the MHPSS provider, shall be employed (e.g. provision through the internet or hotlines).

4. The school shall engage parents, guardians, or any care providers of learners on taking care of mental health and creating a positive environment.
5. The school shall ensure strict adherence to Republic Act No. 10173 or the Data Privacy Act of 2012 in the provision of mental health services and referral.
6. The school shall promote “school-life balance” through proper scheduling of schoolwork that will allow learners to enjoy quality time at home.
7. The DepEd Task Force COVID-19, in collaboration with the Bureau of Human Resource and Organizational Development (BHROD), the Bureau of Curriculum Development (BCD), the Bureau of Learning Delivery (BLD), National Educators' Academy of the Philippines (NEAP), and Youth Formation Division (YFD), shall issue guidelines on the mental health program and psychological support system for learners and personnel across all governance levels in DepEd.
8. The school shall continue to engage learners in at least 60 minutes of daily physical activities consisting of any one or a combination of activities based on the 2010 Physical Activity Prescription, Philippine National Guidelines in Physical Activity—namely, (a) active daily tasks; (b) exercise, dance, and sports; (c) high impact play (unstructured spontaneous play); and (d) muscle strengthening and flexibility activities—subject to the strict observance of physical distancing, proper hygiene and safety, and other precautionary measures.

B. Administrative Support

1. The school, with the support of concerned DepEd offices, shall ensure that teaching and non-teaching personnel undergo annual physical examination, in accordance with the provisions of RA 11223 or the Universal Health Care Act and its Implementing Rules and Regulations. The conduct of the physical examination shall be in accordance with precautionary and protective measures in light of the COVID-19 health emergency.
2. The school, with the support of concerned DepEd offices, shall re-establish the regular and safe delivery of essential services, including, but not limited to:
 - a. protection referrals
 - b. specialized services for children with disabilities



- c. school health and nutrition services such as medical and dental services, school feeding, immunization program, counseling, and brief tobacco interventions
3. Guidelines for the delivery of such services shall be issued by the Bureau of Learner Support Services – School Health Division (BLSS-SHD).
4. The school shall prioritize to provide alternative arrangements to learners, teachers and personnel who are elderly, who have underlying health conditions, or who are pregnant in the duration of the COVID-19 event. If alternative arrangements are not possible, designated areas must be available to high-risk groups.
5. The school shall explore partnerships to assist learners, teachers and personnel especially those belonging in vulnerable groups through initiatives including but not limited to transportation, provision of PPEs and social amelioration. The school shall reiterate policies that will help reduce expenses of families (e.g., non-mandatory use of school uniforms; no collection policy).
6. The school shall ensure that personnel on work from home arrangement are provided with logistical support, and that reasonable expenses incurred are covered in accordance with CSC Memorandum Circular 10, s. 2020 and with the DepEd revised guidelines on implementing alternative work arrangements to minimize contact in offices and schools.
7. The school, with the support of concerned DepEd offices, shall ensure the provision of the following:
 - a. Temporary accommodations to learners, teachers and personnel, if necessary (e.g., for personnel requiring daily/long travel/commute; visiting health personnel who will need to provide services for an entire week, etc.)
 - b. Financial, transportation, internet/communication allowance, food, and other commodities (e.g. medical and dental supplies and supplements) for essential workforce, if necessary and practicable, may be considered as allowable expenses. The provision of transportation shall be subject to standards of physical distancing, disinfection, and observance of other health protocols measures.
 - c. Assistance to learners, teachers and personnel who contract the virus in coordination with PhilHealth to avail of the case-based payment of the benefits of patient with probable or confirmed COVID-19 under the PhilHealth Circular No. 2020-0009 and other relevant government health institutions.



IV. Screening of Returning Personnel and Learners and Testing Protocol

A. Screening of Returning Personnel and Learners

1. All returning personnel and learners physically reporting to the school shall be screened for symptoms of COVID-19, including fever, cough, colds, and other respiratory symptoms, and/or relevant history of travel or exposure within the last 14 days. The following should have happened two (2) days before or within 14 days from onset of symptoms of a confirmed or probable case:
 - a. Face-to-face contact with a confirmed or probable case within 1 meter and for more than 15 minutes
 - b. Direct physical contact with a confirmed case
 - c. Direct care for a patient with a probable or confirmed COVID-19 disease without using proper personal protective equipment
2. Returning personnel and learners who **are symptomatic with relevant history of travel/exposure on the date of reporting to the school** shall not be allowed to physically report to the school and must consult with their primary care provider. The use of telemedicine is encouraged for proper care and coordination.
3. Returning personnel and learners who **were symptomatic with relevant history of travel/exposure within the last fourteen (14) days prior to the date of reporting to the school** shall present the Certificate of Quarantine Completion duly issued by the step-down care facility or local health office, whichever is applicable based on the latest DOH guidelines.
4. If **asymptomatic** within the last fourteen (14) days prior to the date of physically reporting to school, personnel and learners **without relevant history of travel or exposure** can be **allowed** to physically return to the school.
5. If **asymptomatic** within the last fourteen (14) days prior to the date of physically reporting to school, personnel and learners **with relevant history of travel or exposure** can be **cleared to physically return to the school only upon presentation of a medical certificate** issued by local health authorities such as DepEd school health personnel or the provincial, city, or municipal health office.
6. If **symptomatic** within the last fourteen (14) days prior to the physically reporting to school, personnel and learners **without relevant history of travel or exposure** shall **seek medical advice** for proper treatment/intervention and the issuance of the necessary **medical certificate** prior to reporting back to the school.

- B. The testing protocol shall be as provided in Enclosure No. 1.



SPECIFIC MEASURES FOR COVID-19 PREVENTION AND MITIGATION IN OFFICES

I. Routines and Protocols for Health and Safety

A. General Health and Safety Protocols

1. Practice respiratory etiquette and other protective measures.
 - a. Practice physical distancing (at least 1 meter apart) at all times.
 - b. Frequently clean hands by using alcohol-based hand rub/disinfectants or by proper handwashing with soap and water.
 - c. When sneezing/coughing, use tissue or inner portion of elbow to cover nose and mouth, and be sure that proper distance is maintained. Do not cover the mouth with the hand.
 - d. Observe proper use of face masks at all times. Both nose and mouth must be covered.
 - i. Those with no symptoms may use cloth/washable face masks, earloop masks, indigenous, reusable, do-it-yourself masks, or face shields, handkerchiefs, or such other protective equipment or any combination thereof, which can effectively lessen the transmission of COVID-19.
 - ii. Surgical masks—to be stored in the office clinic and available at the office entrances, shall be reserved for symptomatic individuals and health care providers. Individuals who will manifest symptoms shall immediately be provided with a surgical mask and brought to the clinic for checking/monitoring/advice; e.g., send home, refer to a hospital/appropriate health authority, etc.
 - e. Practice proper disposal of tissue and masks after use.
2. Prior to returning to work, all personnel shall be provided, through available platforms (e.g., e-mail, text messaging, teleconferencing platform), relevant and adequate information on respiratory etiquette and other protective measures that shall be observed in the workplace. It shall be reiterated that the same measures are expected to be practiced in other public places, including when they travel to and from work, and if applicable, even at home.



3. The office shall ensure that all personnel have access to cloth/washable face masks, earloop masks, indigenous, reusable, do-it-yourself masks, or face shields, handkerchiefs, or such other protective equipment or any combination thereof, which can effectively lessen the transmission of COVID-19.
4. The office shall ensure availability of hand soaps/hand-sanitizers/alcohol-based solutions/other disinfectants in restrooms, entrances, etc. by doing routine monitoring and replacement/replenishment if needed.
5. The office shall ensure routine cleaning/disinfection of frequently touched surfaces and objects (tables, doorknobs, desks, workstations) using bleach solution at least twice a day, as well as the routine cleaning and the replacement of disinfectant solutions in foot baths. More intensive cleaning and disinfection shall be done on weekends.

C. Detection and Referral

1. All personnel and, when applicable, visitors shall be subjected to temperature checks using a thermal scanner prior to entering the office. Those who will have a reading of 37.5° Celsius or above shall be provided with a surgical face mask and brought to a private screening area that shall be set up near the entrance of the office where the concerned personnel or visitor can be further examined, for appropriate management, intervention, or referral.
2. The office, through its clinic, shall:
 - a. Monitor all personnel for possible manifestation of COVID-19-symptoms. Those who will show symptoms of COVID-19 shall be given a surgical mask and assessed and managed in the clinic.
 - b. Ensure the provision of referral services to appropriate health facilities and monitoring of referred personnel
 - c. Ensure that personnel who manifest COVID-19 symptoms shall not physically report to work and shall seek medical advice—virtual, if possible—as needed.
 - d. Facilitate/cooperate in the tracing and quarantine of close contacts of confirmed cases of COVID-19 consistent with DOH guidelines.
 - e. Ensure that personnel who have tested positive for COVID-19 shall not return to work, even if they are already asymptomatic, unless cleared by medical authorities.
3. All personnel shall report to their immediate supervisors if they are experiencing flu-like symptoms.



D. Office Activities and Events

1. The office shall ensure that the scheduling of office-based work of personnel and their assignment to their respective workstations shall allow for physical distancing in the office premises.
2. The office shall limit face-to-face meetings and restrict conduct of physical or face-to-face large gatherings and activities that will require close contact or where physical distancing may not be possible.
3. The office shall provide and maximize the use of online platforms which do not require physical interaction or congregations for the performance of tasks and conduct of meetings, trainings, and conferences.
4. Travel of personnel shall be limited only to necessary and critical situations or essential official functions determined by the Secretary or her designated officers.
5. The office shall devise and implement alternative means of recording and monitoring attendance.
6. The office shall set a flexible dining policy in the workspace/cubicle during lunch breaks, to include limiting the number of individuals who eat in the pantry at a given time.

E. DepEd Health and Safety Policies

1. The office shall strengthen the implementation of DepEd Task Force COVID-19 Memorandum No. 25, s. 2020, or the Minimum Standards on Social Distancing.
2. The office shall develop its Contingency and Response Plan for COVID-19.
3. To ensure the availability of nutritious foods in the office and support the promotion of ensuring a strong immune system among personnel to fight COVID-19, the office shall strictly enforce DepEd Order No. 13, s. 2017 or Policy and Guidelines on Healthy Food and Beverage Choices in Schools and in DepEd Offices, as well as provide nutrition education and post nutrition education and information materials; e.g., *Pinggang Pinoy*, Food Pyramid and Cycle Menu.
4. In line with studies that link COVID-19 and smoking, the office shall strictly enforce the ban on smoking/vaping per DepEd Order No. 48, s. 2016, or the Policy and Guidelines on Comprehensive Tobacco Control and DepEd Memorandum No. 111, s. 2019 entitled Prohibiting the Use of E-Cigarettes and other Electronic Nicotine and Non-Nicotine Delivery System and Reiterating the Absolute Tobacco Smoking Ban in Schools and DepEd Offices. Brief Tobacco Intervention Providers at the SDO may be tapped to help personnel who smoke to quit. The DOH Quitline can also be reached through



<https://www.facebook.com/DOHQuitlineofficial/>. Offices are also enjoined to communicate with local government units (LGUs) to pass an ordinance/implement the existing law that prohibits the sale of tobacco products to minors or within 100 meters from any point of the perimeter of schools, or implement stricter measures, if possible, as reiterated in DepEd Task Force COVID-19 Memorandum No. 39, entitled Strict Enforcement of Tobacco Control Policies, Including Smoke-Free and Vape-Free Policies, During the Enhanced and General Community Quarantine. Offices are also warned against partnerships with tobacco companies and NGOs and foundations funded by tobacco companies.

II. Physical Arrangement in Offices

- A. The office shall ensure proper ventilation and install temporary barriers between cubicles/tables for proper physical distancing.
- B. The office shall establish and maintain proper sanitation and hygiene facilities:
 - 1. Foot baths in all entrances
 - 2. Toilets (with adequate water and soap)
 - 3. Handwashing stations
- C. The office shall create and operate a common area where physical distancing and appropriate prevention measures can be strictly enforced for accommodating visitors and/or clients.
- D. The office shall ensure that the following are sufficiently provided, monitored, and replenished when needed:
 - 1. Tissue paper/towel
 - 2. Designated trash bins for tissue disposal
 - 3. Adequate water and soap for handwashing (especially for all toilet facilities)
 - 4. Hand-sanitizers/alcohol-based solutions/other disinfectants in all rooms, entrances, corridors, communal areas, and other amenities especially eating areas
- E. The office shall ensure the establishment/setting-up/refurbishment of its own clinic for the health assessment and physical examination, as needed, and the provision of appropriate intervention, first aid, or treatment, or the proper management of symptoms, including the necessary rest at home, for personnel, and when applicable, for visitors. In certain days when an office may not have a reporting health personnel (such as the case of Regional Offices that have a limited number of health personnel), the office shall ensure that it has access to existing telemedicine platforms or local emergency hotlines.



- F. Aside from the clinic, the office shall also designate:
- a. a private screening area near the entrance of the office where personnel and visitors who show symptoms upon screening at the entrance can be further examined, for appropriate management, intervention, or referral, and
 - b. a separate space where sick personnel who have been managed in the clinic can temporarily stay, awaiting referral to the appropriate health facility, without creating stigma.
- G. Information, education, and communication (IEC) materials containing key messages on health and safety shall be displayed in key strategic areas of the office, such as the entrances, corridors, toilets, and other communal areas, or if practicable, distributed to the personnel for their ready reference. The same IEC materials shall be shown or provided to visitors who need to enter the office premises.
- H. The office shall ensure that a Materials Recovery Facilities (MRF) is set up for proper waste segregation.
- I. The office shall ensure the availability of ICT infrastructure and facilities to support online learning, conferences, and meetings.

III. Support Mechanisms

A. Physical and Mental Resilience

1. Offices shall ensure the provision of mental health and psychosocial support (MHPSS) to all personnel, which includes the following:
 - a. Validating and Normalizing Feelings
 - b. Calming Down and Controlling One's Emotions
 - c. Linking: Identifying and Addressing Needs and Sources of Strength
 - d. Managing Physical Reactions, Thoughts, and Emotions
 - e. Seeking Solutions and Social Support
 - f. Focusing on Positive Activities
 - g. Other relevant topics as needed
2. Practical tips based on the listed MHPSS topics shall be communicated through available platforms (e.g., phone call, text messaging, email, orientation via online conferencing platform, etc.) to personnel who have worked from home or stayed on quarantine prior to their return to work to help them transition effectively to physically reporting in the office.



3. Psychological first aid to all personnel shall be provided to gauge their readiness to fulfill their work and provide support needed to ease their transition.
4. The Regional Office (RO) shall set up a hotline/online platform for COVID-19 related inquiries (e.g. basic information on COVID-19, details on DepEd response, grievance of personnel or learners, and other information that shall help DepEd learners and personnel cope with the pandemic) from RO personnel. The hotline/online platform shall be manned by a pool of trained PFA-providers under the supervision of the Regional DRRM Coordinator.
5. The RO shall provide technical assistance to their respective School Division Offices (SDOs), who shall in turn set-up similar hotlines/online platforms. These shall be manned by a pool of trained PFA-providers under the supervision of the Division DRRM Coordinator, and shall cater to SDO and school personnel.
6. A similar hotline shall be set up at the Central Office (CO) for CO personnel, and shall be manned by PFA-trained personnel supervised by the Disaster Risk Reduction and Management Service (DRRMS).
7. A referral system established by the concerned office (i.e. CO for CO personnel; RO for RO personnel; and SDO for SDO and school personnel) shall be followed in referring personnel needing specialized psychosocial support.
8. The office shall ensure the provision of specialized psychosocial support to personnel who are confirmed to be positive, under isolation/quarantine, and categorized as suspect and probable. The most appropriate method, which duly considers the safety of the MHPSS provider, shall be employed (e.g. provision through the internet or hotlines).
9. The office shall ensure strict adherence to Republic Act No. 10173 or the Data Privacy Act of 2012 in the provision of mental health services and referral.
10. The office shall promote “work-life balance” through proper scheduling of activities and rotation of workforce.
11. The DepEd Task Force COVID-19, in collaboration with the Bureau of Human Resource and Organizational Development (BHROD), the Bureau of Curriculum Development (BCD), the Bureau of Learning Delivery (BLD), National Educators' Academy of the Philippines (NEAP), and Youth Formation Division (YFD), shall issue guidelines on the mental health program and psychological support system for learners and personnel across all governance levels in DepEd.
12. The office shall encourage adults to engage in at least 30 minutes of daily physical activities consisting of any one or a combination of activities based on the 2010 Physical Activity Prescription, Philippine National Guidelines in Physical Activity—namely, (a)



activities for daily living; (b) exercise, dance, and recreational activities; (c) muscle strengthening and flexibility activities; (d) activities in the workplace such as, but not limited to walking, stair climbing, arranging office furniture—subject to the strict observance of physical distancing, proper hygiene and safety, and other precautionary measures.

13. The following are the strategies for the implementation of daily physical activities:
 - a. Provision of opportunities for physical activities (e.g., zumba, fitness workout, exercise, yoga, dance, etc.)
 - b. Provision of basic sports supplies and equipment for fitness activities such as medicine ball, free weights, balls, hoops, etc.
 - c. Encourage 2-minute physical activities for every two-hour sitting periods

B. Administrative Support

1. The office shall ensure that all personnel undergo an annual physical examination, in accordance with the provisions of RA 11223 or the Universal Health Care Act and its Implementing Rules and Regulations. The conduct of the physical examination shall be in accordance with precautionary and protective measures in light of the COVID-19 health emergency.
2. The office, especially if in a locality under a community quarantine, shall ensure the provision of necessary assistance to personnel required to physically report to work or staff performing critical/essential official functions (e.g., COVID-19 DRRM Team members, engineers conducting regular monitoring and validation activities, etc.), such as travel passes for use in checkpoints and access to hotlines for inquiries, among others.
3. The office shall ensure the provision of financial, transportation, internet/communication allowance, food, and other commodities (e.g. medical and dental supplies and supplements) for essential workforce, if necessary and practicable, subject to usual accounting and auditing rules. In the provision of transportation, the office shall ensure compliance to standards of physical distancing, disinfection, and observance of other health protocols measures.
4. For offices in localities that are under a community quarantine, the set limited working hours shall be properly observed (e.g., not beyond 4pm) as part of community quarantine, except for those involved in COVID-19 monitoring and emergency/quick response that may require 24/7 duty.
5. The office shall prioritize to provide alternative arrangements to personnel who are elderly, who have underlying health conditions, or who are pregnant in the duration of the COVID-19 event. If alternative arrangements are not possible, designated areas must be available to high-risk groups.



6. The office shall explore partnerships to assist personnel especially those belonging in vulnerable groups through initiatives including but not limited to transportation, provision of PPEs and social amelioration.
7. The office shall ensure that personnel on work from home arrangement are provided with logistical support, and that reasonable expenses incurred are covered in accordance with CSC Memorandum Circular 10, s. 2020 and the DepEd revised guidelines on alternative work arrangements.
8. The office shall ensure that personnel involved in COVID-19 monitoring and response, if any, are provided with appropriate compensation and benefits (e.g. hazard pay, overtime pay, if applicable).
9. The office shall ensure the following:
 - a. Provision of temporary accommodations to personnel, if necessary (e.g., for personnel requiring daily/long travel/commute).
 - b. Assistance in the provision temporary shelter for probable, suspected, and confirmed cases among personnel, as practicable.
 - c. Availability of Emergency Health Kits that include PPEs and other needed supplies and materials. The PPEs should be available for COVID-19 DRRM team members, health personnel, maintenance, and security guards during emergency. The use of PPEs should be guided by the DOH Interim Guidelines on the Rational Use of Personal Protective Equipment for COVID-19 as summarized in the tables below:
 - i. PPE requirement depending on the nature of the activity:

Activity	Required PPE
Triage and screening of individuals in points of entry (for personnel in school entrances)	Medical mask
Caring for a suspected case of COVID-19 with no aerosol-generating procedure (for personnel in school clinics)	Medical mask, goggles or face shield, gloves, gown
Caring for suspected/confirmed cases of COVID-19 with aerosol-generating procedure (for personnel in school clinics)	Goggles or face shield, respirator (N95 or FFP2), gloves, gown
Assisting in transporting passenger to a healthcare facility	Full PPE



ii. Technical specifications of PPE

Item	Technical Specifications
Medical mask	Medical or surgical mask, disposable, earloop, 3-ply, conforms to EN 14683 rating type standards or equivalent
Goggles	Goggles or laboratory safety goggles, polycarbonate lens, soft, flexible, adjustable head strap, anti-fog, conforms to EN 166 standard or equivalent
Face shield	Full face shield, anti-fog, latex-free, one-size fits all, soft head foam, comfort stretch band, disposable, conforms to EN 166 standard or equivalent
Gown	Examination gown, disposable, non-sterile, SMS/PE coated polyethylene material, fluid-resistant, solid-front and rear opening, long sleeved with elastic cuffs, conforms to ASTM F1671 standards or equivalent

- d. Provision of assistance to personnel who contract the virus in coordination with PhilHealth to avail of the case-based payment of the benefits of patients with probable or confirmed COVID-19 under the PhilHealth Circular No. 2020-0009 and other relevant government health institutions.

IV. Screening of Returning Personnel and Testing Protocol

A. Screening of Returning Personnel

1. All returning personnel physically reporting to work shall be screened for symptoms of COVID-19, including fever, cough, colds, and other respiratory symptoms, and/or relevant history of travel or exposure within the last 14 days. The following should have happened two (2) days before or within 14 days from onset of symptoms of a confirmed or probable case:
 - a. Face-to-face contact with a confirmed or probable case within 1 meter and for more than 15 minutes
 - b. Direct physical contact with a confirmed case
 - c. Direct care for a patient with a probable or confirmed COVID-19 disease without using proper personal protective equipment
2. Returning personnel who **are symptomatic with relevant history of travel/exposure on the date of work resumption** shall not be



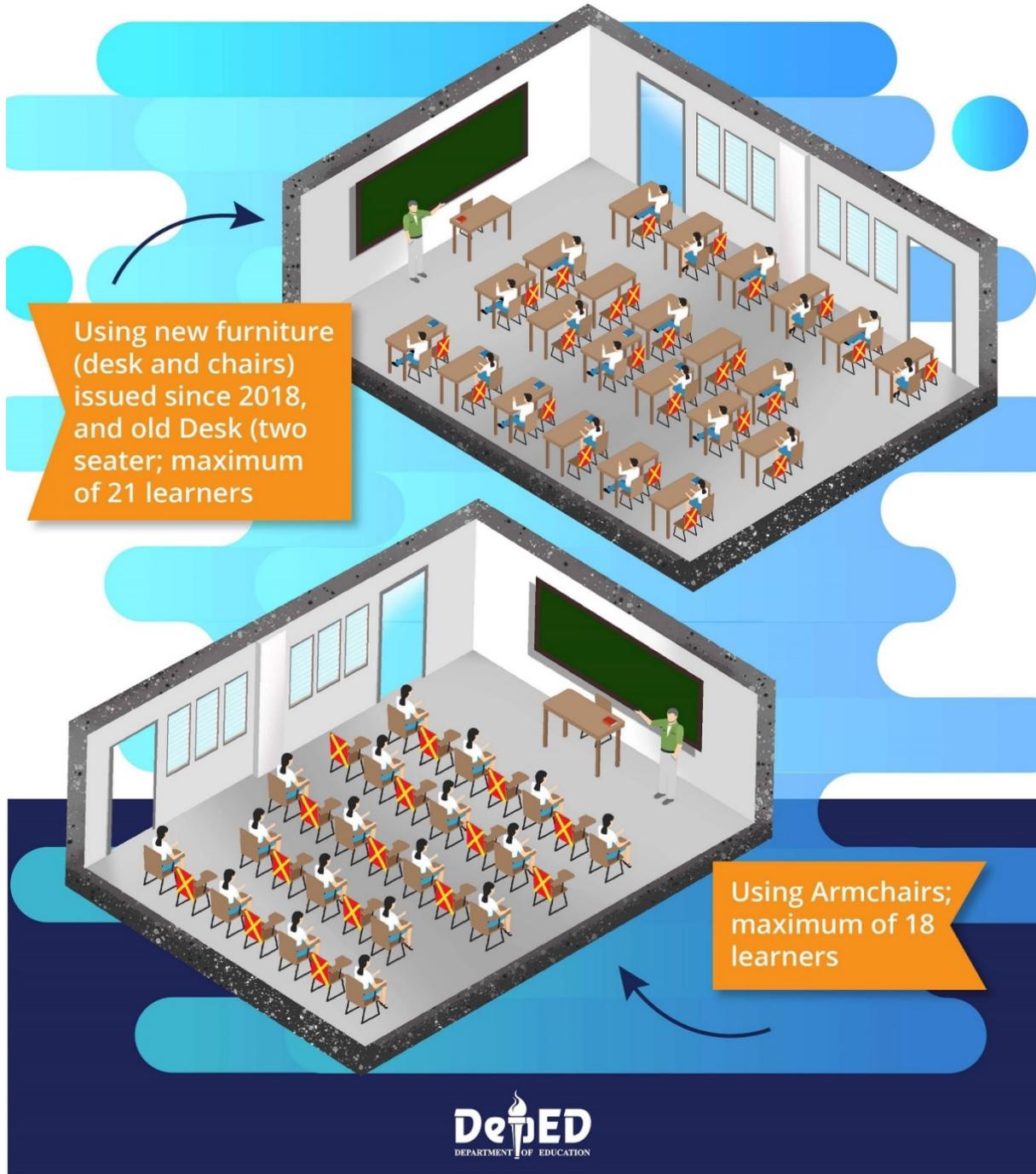
allowed to physically report to work and must consult with their primary care provider. The use of telemedicine is encouraged for proper care and coordination.

3. Returning personnel who **were symptomatic with relevant history of travel/exposure within the last fourteen (14) days prior to the date work resumption** shall present the Certificate of Quarantine Completion duly issued by the step-down care facility or local health office, whichever is applicable based on the latest DOH guidelines.
4. If **asymptomatic** within the last fourteen (14) days prior to the date of work resumption, personnel **without relevant history of travel or exposure** can be **allowed** to physically return to work.
5. If **asymptomatic** within the last fourteen (14) days prior to the date of work resumption, personnel **with relevant history of travel or exposure** can be **cleared to physically return to work only upon presentation of a medical certificate** issued by local health authorities such as DepEd school health personnel or the provincial, city, or municipal health office.
6. If **symptomatic** within the last fourteen (14) days prior to the date of work resumption, personnel **without relevant history of travel or exposure** shall **seek medical advice** for proper treatment/intervention and the issuance of the necessary **medical certificate** prior to reporting back to work.

B. The testing protocol shall be as provided in Enclosure No. 1.



PROPOSED CLASSROOM SEAT ARRANGEMENT with Social Distancing



This new arrangement uses existing school furniture as physical barriers between learners to better implement social distancing measures, and does not require moving the furniture.



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REPUBLIC OF THE PHILIPPINES
INTER-AGENCY TASK FORCE
FOR THE MANAGEMENT OF EMERGING INFECTIOUS DISEASES

**OMNIBUS GUIDELINES ON THE IMPLEMENTATION OF
COMMUNITY QUARANTINE IN THE PHILIPPINES**
with Amendments as of July 02, 2020

WHEREAS, Article II, Section 15 of the 1987 Constitution provides that the State shall protect and promote the right to health of the people and instill health consciousness among them;

WHEREAS, Executive Order No. (E.O.) 168, s. 2014 created the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF) to facilitate inter-sectoral collaboration to establish preparedness and ensure efficient government response to assess, monitor, contain, control, and prevent the spread of any potential epidemic in the Philippines;

WHEREAS, Section 2(c) of E.O. 168 mandates the IATF to prevent and/or minimize the local spread of emerging infectious diseases in the country through the establishment or reinforcement of a system in screening possible patients infected with emerging infectious diseases, contact tracing, identification of the mode of exposure to the virus, and implementation of effective quarantine and proper isolation procedures;

WHEREAS, on 28 January 2020, the IATF convened, and thereafter issued regular recommendations for the management of the 2019 Novel CoronaVirus Acute Respiratory Disease, which is now known as CoronaVirus Disease 2019 (COVID-19);

WHEREAS, the 18 March 2020 Memorandum from the Office of the Executive Secretary directed all heads of departments, agencies, and instrumentalities of government, including the Philippine National Police (PNP), Armed Force of the Philippines (AFP), and the Philippine Coast Guard (PCG), government-owned and controlled corporations (GOCCs), Government Financial Institutions (GFIs), State Universities and Colleges (SUCs), and Local Government Units (LGUs) to adopt, coordinate, and implement guidelines which the IATF may issue on the COVID-19 situation, consistent with the respective agency mandates and relevant laws, rules, and regulations;

WHEREAS, on 30 April 2020, Executive Order (E.O.) No. 112, s. 2020 was issued imposing an Enhanced Community Quarantine (ECQ) in high-risk geographic areas of the Philippines and a General Community Quarantine (GCQ) in the rest of the country from 01 to 15 May 2020, adopting the Omnibus Guidelines on the Implementation thereof, and for other purposes;



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WHEREAS, the IATF approved the Guidelines on the Implementation of the Modified Enhanced Community Quarantine (MECQ) including the zoning concept, corresponding qualification, and its phased response or intervention.

WHEREAS, there is a need to revise existing guidelines on community quarantine to streamline rules which will be applicable to transitional community quarantine classifications;

WHEREAS, Section 3 of E.O. 112 authorizes the IATF to amend or modify the Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines.

NOW, THEREFORE, in consideration of the premises set forth herein, the IATF issues these amended Omnibus Guidelines to harmonize and codify existing guidelines of the IATF and member-agencies pertaining to community quarantine, which shall be applied to all regions, provinces, cities, municipalities and barangays placed under community quarantine.

SECTION [1] DEFINITION OF TERMS. For purposes of these Guidelines, the following shall be defined as follows:

1. **Accommodation Establishments** - refers to an establishment operating primarily for accommodation purposes including, but not limited to, hotels, resorts, apartment hotels, tourist inns, motels, pension houses, private homes used for homestay, ecolodges, serviced apartments, condotels, and bed and breakfast facilities. *(As amended by Paragraph A(1) of IATF Resolution No. 43, June 03, 2020)*
2. **Comorbidity** - refers to the presence of a pre-existing chronic disease condition.
3. **Community Quarantine** - refers to the restriction of movement within, into, or out of the area of quarantine of individuals, large groups of people, or communities, designed to reduce the likelihood of transmission of an infectious disease among persons in and to persons outside the affected area.
4. **COVID-19** - refers to the Coronavirus Disease 2019 which is caused by the virus known as the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).
5. **Enhanced Community Quarantine** - refers to the implementation of temporary measures imposing stringent limitations on movement and transportation of people, strict regulation of operating industries, provision of food and essential services, and heightened presence of uniformed personnel to enforce community quarantine protocols.



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6. **Essential goods and services** - covers health and social services to secure the safety and well-being of persons, such as but not limited to, food, water, medicine, medical devices, public utilities, energy, and others as may be determined by the IATF.
7. **General Community Quarantine** - refers to the implementation of temporary measures limiting movement and transportation, regulation of operating industries, and presence of uniformed personnel to enforce community quarantine protocols.
8. **Health and emergency frontline services** - refers to services provided by public health workers [all employees of the Department of Health (DOH), DOH Hospitals, Hospitals of LGUs, and Provincial, City, and Rural Health Units, and Drug Abuse Treatment and Rehabilitation Centers including those managed by other government agencies (*e.g.* police and military hospitals/clinics, university medical facilities), uniformed medical personnel], private health workers, such as but not limited to medical professionals, hospital and health facility administrative and maintenance staff, and aides from private health facilities, as well as their service providers, health workers and volunteers of the Philippine Red Cross and the World Health Organization, and employees of Health Maintenance Organizations (HMOs), the Philippine Health Insurance Corporation (PHIC), health insurance providers, disaster risk reduction management officers, and public safety officers.
9. **Interzonal movement** - the movement of people, goods and services across areas under different community quarantine classifications.
10. **Intrazonal movement** - the movement of people, goods and services between localities under the same community quarantine classification, without transiting through an area placed under a different classification.
11. **Minimum public health standards** - refers to guidelines set by the DOH under Administrative Order No. 2020-0015, as well as sector-relevant guidelines issued by national government agencies as authorized by the IATF, to aid all sectors in all settings to implement non-pharmaceutical interventions (NPI), which refer to public health measures that do not involve vaccines, medications or other pharmaceutical interventions, which individuals and communities can carry out in order to reduce transmission rates, contact rates, and the duration of infectiousness of individuals in the population to mitigate COVID-19. For this purpose, the Department of Tourism and Department of Public Works and Highways are recognized as the sector-relevant agencies with respect to tourism and construction, respectively.
12. **Modified Enhanced Community Quarantine** - refers to the transition phase between ECQ and GCQ, when the following temporary measures are relaxed and become less



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necessary: stringent limits on movement and transportation of people, strict regulation of operating industries, provision of food and essential services, and heightened presence of uniformed personnel to enforce community quarantine protocols.

13. **Modified General Community Quarantine** - refers to the transition phase between GCQ and the New Normal, when the following temporary measures are relaxed and become less necessary: limiting movement and transportation, the regulation of operating industries, and the presence of uniformed personnel to enforce community quarantine protocols .
14. **New Normal** - refers to the emerging behaviors, situations, and minimum public health standards that will be institutionalized in common or routine practices and remain even after the pandemic while the disease is not totally eradicated through means such as widespread immunization. These include actions that will become second nature to the general public as well as policies such as bans on large gatherings that will continue to remain in force.
15. **Operational capacity** - refers to such a number of employees or workers who can be permitted or required to physically report to work on-site in a particular office or establishment.
16. **Skeleton workforce** - refers to the operational capacity which utilizes the smallest number of people needed for a business or organization to maintain its basic functions.

SECTION [2] GUIDELINES FOR AREAS PLACED UNDER ENHANCED COMMUNITY QUARANTINE. Areas placed under ECQ shall observe the following protocols:

1. Minimum public health standards shall be complied with at all times for the duration of the ECQ.
2. Strict home quarantine shall be observed in all households, and the movement of all residents shall be limited to accessing essential goods and services, and for work in permitted offices or establishments as well as activities listed hereunder.
3. Any person below twenty-one (21) years old, those who are sixty (60) years old and above, those with immunodeficiency, comorbidity, or other health risks, and pregnant women, including any person who resides with the aforementioned, shall be required to remain in their residences at all times, except when indispensable under the



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circumstances for obtaining essential goods and services, or for work in industries and offices or such other activities permitted in this Section.

4. The following establishments, persons, or activities are allowed to operate, work, or be undertaken for the duration of the ECQ:
 - a. With full operational capacity:
 - i. Public and private hospitals;
 - ii. Health, emergency and frontline services, including those provided by dialysis centers, chemotherapy centers, and the like;
 - iii. Manufacturers of medicines, medical supplies, devices and equipment, including suppliers of input, packaging, and distribution;
 - iv. Industries involved in agriculture, forestry, and fishery and their workers, including farmers, Agrarian Reform Beneficiaries (ARBs), fisherfolk, and agri-fishery stores, and such other components of the food value chain; and
 - v. Delivery and courier services, whether in-house or outsourced, transporting food, medicine, or other essential goods, including clothing, accessories, hardware, housewares, school and office supplies, as well as pet food and other veterinary products.
 - b. At a maximum of fifty percent (50%) operational capacity, without prejudice to the adoption of work-from-home or other alternative work arrangements and without diminution of existing operational capacity previously allowed, if any:
 - i. Private establishments and their employees involved in the provision of essential goods and services, and activities in the value chain related to food, medicine and vitamins production, medical supplies, devices and equipment, and other essential products such as but not limited to soap and detergents, diapers, feminine hygiene products, toilet paper and wet wipes, and disinfectants. Such establishments shall include, but shall not be limited to, public markets, supermarkets, grocery stores, convenience stores, laundry shops, food preparation establishments insofar as take-out and delivery services, and water-refilling stations, unless a higher operational capacity is authorized by the Department of Trade and Industry (DTI);
 - ii. Media establishments and their total permanent staff complement, inclusive of reporters and other field employees, as registered with the Department of Labor and Employment (DOLE) and accredited by the Presidential Communications Operations Office (PCOO); and



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- iii. Workers accredited by the Department of Transportation (DOTr) to work on utility relocation works, and specified limited works across thirteen (13) railway projects, including replacement works for the Manila Metro Rail Transit System Line 3. *Provided that* where applicable, on-site or near-site accommodations and/or point-to-point shuttle services should be arranged.
- c. With a skeleton workforce:
- i. Other medical, dental, rehabilitation, and optometry clinics, pharmacies or drug stores: *Provided that* there is strict observance of infection prevention and control protocols. *Provided, further,* that dental procedures shall be limited to emergency cases only and that the wearing of full Personal Protective Equipment (PPEs) by dentists and attendants shall be mandatory. *Provided finally* that home service therapy for Persons With Disabilities (PWDs) shall be allowed;
 - ii. Veterinary clinics;
 - iii. Banks, money transfer services, including pawnshops only insofar as performing money transfer functions, microfinance institutions, and credit cooperatives, including their armored vehicle services, if any;
 - iv. Capital markets, including but not limited to the Bangko Sentral ng Pilipinas, Securities and Exchange Commission, Philippine Stock Exchange, Philippine Dealing and Exchange Corporation, Philippine Securities Settlement Corporation, and Philippine Depository and Trust Corporation;
 - v. Water supply and sanitation services and facilities, including waste disposal services, as well as property management and building utility services;
 - vi. Energy and power companies, their third-party contractors and service providers, including employees involved in electric transmission and distribution, electric power plant and line maintenance, electricity market and retail suppliers, as well as those involved in the exploration, operations, trading and delivery of coal, oil, crude or petroleum and by-products (gasoline, diesel, liquefied petroleum gas, jet oil, kerosene, lubricants), including gasoline stations, refineries and depots or any kind of fuel used to produce electricity;
 - vii. Telecommunications companies, internet service providers, cable television providers, including those who perform indirect services such as the technical, sales, and other support personnel, as well as the employees of their third-party contractors doing sales, installation, maintenance and repair works;



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- viii. Airline and aircraft maintenance, pilots and crew, and employees of aviation schools for purposes of the pilot's recurrent training for flight proficiency and type rating using simulator facilities; and ship captains and crew, including shipyard operations and repair;
- ix. Manufacturing companies and suppliers of equipment or products necessary to perform construction works, such as cement and steel;
- x. The Philippine Postal Corporation, at an operational capacity necessary to maintain the prompt delivery of services to its clients;
- xi. The Philippine Statistics Authority, at an operational capacity necessary to conduct data gathering and survey activities related to COVID-19 and the registration and implementation of the national identification (ID) system;
- xii. Business process outsourcing establishments (BPOs) and export-oriented businesses, including mining and quarrying, with work-from-home, on-site or near site accommodation, or point-to-point shuttling arrangements. For this purpose, BPOs and export-oriented businesses, and their service providers, shall be allowed to install, transport and maintain the necessary on-site and work-from-home equipment, deploy their workers under on-site or near-site accommodation arrangements, or provide point-to-point shuttle services from their near-site accommodations to their offices;
- xiii. Essential projects, whether public or private, such as but not limited to quarantine and isolation facilities for Persons under Monitoring (PUMs), and suspect and confirmed COVID-19 patients, facilities for the health sector including those dealing with PUMs, and suspect and confirmed COVID-19 patients, facilities for construction personnel who perform emergency works, flood control, and other disaster risk reduction and rehabilitation works, sewerage projects, water service facilities projects, and digital works. Priority public and private construction projects, defined as those that refer to food production, agriculture, fishery, fish port development, energy, housing, communication, water utilities, manufacturing, and Business Process Outsourcing (BPOs), shall likewise be allowed to operate in accordance with guidelines issued by the DPWH;
- xiv. Funeral and embalming services. *Provided*, that there is shuttle service and/or housing accommodation for their personnel and staff;
- xv. Humanitarian assistance personnel from civil society organizations (CSOs), non-government organizations (NGOs), and United Nations-Humanitarian Country Teams, as well as individuals performing relief operations to augment the government's response against COVID-19 and other disasters or calamities that may occur. *Provided* that they are authorized by the appropriate government agency or LGU;



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- xvi. Pastors, priests, rabbis, imams or such other religious ministers whose movement shall be related to the conduct of necrological or funeral rites. Corollarily, immediate family members of the deceased who died of causes other than COVID-19 shall be allowed to move from their residences to attend the wake or interment of the deceased upon satisfactory proof of their relationship with the latter, fully complying with social distancing measures for the duration of the activity;
- xvii. Security personnel;
- xviii. Printing presses authorized by the Bureau of Internal Revenue or other appropriate agencies to print official receipts and other accountable forms;
- xix. Establishments engaged in repair and maintenance of machinery and equipment, including those engaged in the repair of computers and household fixtures and equipment; and
- xx. Real estate activities limited to leasing only;

For purposes of the foregoing, transit by permitted persons to and from the above establishments anywhere within the area covered by ECQ shall be allowed.

5. Agencies and instrumentalities of the government, including GOCCs, as well as LGUs, may operate with a skeleton workforce in combination with other alternative work arrangements as approved by the head of agency unless a different operational capacity is required in agencies providing health and emergency frontline services, border control, or other critical services.
6. Agencies and their regional offices in the executive branch shall issue accreditation, office or travel orders, to identify their respective skeleton workforces for critical services operating for the duration of the ECQ. *Bona fide* IDs issued by the respective agencies shall be sufficient for movement within the contained areas. Skeleton workforces may use official agency vehicles.
7. The co-equal or independent authority of the legislature (Senate and the House of Representatives), the judiciary (the Supreme Court, Court of Appeals, Court of Tax Appeals, Sandiganbayan, and the lower courts), the Office of the Ombudsman, and the Constitutional Commissions to operate and accredit their skeleton workforce, or implement any other alternative work arrangements, is recognized.
8. Officials and employees of foreign diplomatic missions and international organizations accredited by the Department of Foreign Affairs (DFA), whenever performing diplomatic functions and subject to the guidelines issued by the DFA, may operate with a skeleton workforce.



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9. No hotels or accommodation establishments shall be allowed to operate, except those accommodating the following:
- For guests who have existing booking accommodations for foreigners as of 17 March 2020 for Luzon and 01 May 2020 for other areas;
 - Guests who have existing long-term bookings;
 - Distressed Overseas Filipino Workers (OFWs) and stranded Filipinos or foreign nationals;
 - Repatriated OFWs in compliance with approved quarantine protocols;
 - Non-OFWs who may be required to undergo mandatory facility-based quarantine; and
 - Health care workers and other employees from exempted establishments under these Omnibus Guidelines and applicable Memoranda from the Executive Secretary.

Provided that accommodation establishments may operate only upon the issuance of a Certificate of Authority to operate by the DOT; *Provided further*, that in all of the foregoing, hotel operations shall be limited to the provision of basic accommodation services to guests through an in-house skeleton workforce. Ancillary establishments within the premises, such as restaurants, cafés, bars, gyms, spas, and the like, shall not be allowed to operate or to provide room service; *Provided finally*, that accommodation establishments may prepare: (a) packed meals for distribution to guests who opt for the same; and (b) food orders for take-out and delivery only. *(As amended by Paragraph A(2) IATF Resolution No. 43, June 03, 2020)*

10. Mass gatherings such as but not limited to, movie screenings, concerts, sporting events, and other entertainment activities, community assemblies, religious gatherings, and non-essential work gatherings shall be prohibited. However, gatherings that are essential for the provision of government services or authorized humanitarian activities shall be allowed.
11. Face-to-face or in-person classes at all levels shall be suspended.
12. Public transportation shall be suspended. This notwithstanding, commissioned shuttle services for employees of permitted offices or establishments, as well as point-to-point transport services provided by the government shall be allowed to operate, giving priority to healthcare workers.
13. Law enforcement agencies shall recognize any of the following IDs: (i) IATF IDs issued by the regulatory agencies with jurisdiction over permitted establishments or persons, (ii) *bona fide* IDs issued by establishments exempted from the strict home quarantine



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requirement, or (iii) RapidPass IDs. No other IDs or passes specifically exempting persons from community quarantine shall be required of workers of permitted establishments and/or offices without prejudice to requiring the presentation of other documents establishing the nature of their work, and (iv) Integrated Bar of the Philippines ID for lawyers who will provide legal representation necessary to protect rights of persons under custodial investigation, to bail, and to counsel during inquest proceedings. *(As amended by Paragraph B IATF Resolution No. 46, June 15, 2020)*

14. The movement of cargo vehicles shall be unhampered. Cargo vehicles as well as vehicles used by public utility companies, BPOs, and export-oriented establishments shall not be subject to an ID system.
15. Government offices and private corporations are encouraged to process payrolls online. Payroll managers, and such other employees shall be allowed to travel to process and print payrolls during ECQ.
16. Other exemptions from the home quarantine requirement through previous IATF resolutions or issuances by the Office of the President shall be honored.

SECTION [3] GUIDELINES FOR AREAS PLACED UNDER MODIFIED ENHANCED COMMUNITY QUARANTINE. Areas placed under MECQ shall observe the following protocols:

1. Minimum public health standards shall be complied with at all times for the duration of the MECQ.
2. Strict home quarantine shall be observed in all households, and the movement of all residents shall still be limited to accessing essential goods and services, and for work in permitted offices or establishments or such other activities listed hereunder.
3. Any person below twenty-one (21) years old, those who are sixty (60) years old and above, those with immunodeficiency, comorbidity, or other health risks, and pregnant women, including any person who resides with the aforementioned, shall be required to remain in their residences at all times, except when indispensable under the circumstances for obtaining essential goods and services, for work in industries and offices or such other activities permitted in this Section.
4. The following shall be allowed to operate at full operational capacity:



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- a. All establishments, persons, or activities permitted to operate, work, or be undertaken under Section 2(4) of these Guidelines;
 - b. Media establishments, without need of PCOO accreditation;
 - c. BPOs and export-oriented establishments, without need to set up onsite or near-site accommodation arrangements;
 - d. E-commerce companies;
 - e. Other postal and courier services, as well as delivery services for articles or products not mentioned under Section 2 of these Omnibus Guidelines;
 - f. Rental and leasing, other than real estate, such as vehicles and equipment for permitted sectors;
 - g. Employment activities that involve the recruitment and placement for permitted sectors; and
 - h. Housing services activities, such as but not limited to plumbing, roofing, and electrical works.
5. The following offices, establishments or individuals conducting or providing the following activities or services are allowed to operate at fifty percent (50%) operational capacity, while encouraging work-from-home and other flexible work arrangements, where applicable:
- a. Other manufacturing industries classified as beverages, including alcoholic drinks; electrical machinery; wood products and furniture; non-metallic products; textiles and clothing/wearing apparels; tobacco products; paper and paper products; rubber and plastic products; coke and refined petroleum products; other non-metallic mineral products; computers, electronic and optical products; electrical equipment; machinery and equipment; motor vehicles, trailers and semi-trailers; other transport equipment; and others;
 - b. Other real estate activities;
 - c. Administrative and office support such as, but not limited to, providing photocopying and billing services;
 - d. Other financial services not mentioned in Section 2 of these Omnibus Guidelines, such as, money exchange, insurance, reinsurance and non-compulsory pension funding;
 - e. Legal and accounting services;
 - f. Management consultancy services or activities;
 - g. Architectural and engineering activities, including technical testing and analysis;
 - h. Science and technology, and research and development;
 - i. Recruitment and placement agencies for overseas employment.
 - j. Advertising and market research;
 - k. Computer programming and information management services;
 - l. Publishing and printing services;



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- m. Film, music and television production;
 - n. Photography, fashion, and industrial, graphic and interior design;
 - o. Wholesale and retail trade of vehicles and their parts and components;
 - p. Repair and maintenance of vehicles as well as its parts or components, including car wash services;
 - q. Malls and commercial centers, subject to the guidelines issued by the DTI;
 - r. Dining establishments and restaurants, but for delivery and take-out only;
 - s. Hardware stores;
 - t. Clothing and accessories;
 - u. Bookstore and school and office supplies;
 - v. Baby or infant care supplies;
 - w. Pet food and pet care supplies;
 - x. Information technology, communications and electronic equipment;
 - y. Flower, jewelry, novelty, antique and perfume shops; and
 - z. Toy stores, *Provided*, that their playgrounds and amusement areas, if any, shall remain closed;
 - aa. Firearms and ammunition trading establishments, subject to strict regulation of the PNP-Firearms and Explosives Office; and
 - bb. Pastors, priests, rabbi, imams, and other religious ministers insofar as providing home religious services to households, *Provided* that proper protocols shall be observed, such as social distancing, wearing of face masks and the like.
6. Agencies and instrumentalities of the government, including GOCCs, as well as LGUs may operate with a skeleton workforce in combination with other alternative work arrangements as approved by the head of agency unless a different operational capacity is required in agencies providing health and emergency frontline services, border control, and other critical services.
7. Accredited diplomatic missions and international organizations shall be advised to operate under a skeleton workforce, without prejudice to alternative work arrangements as the said missions or organizations may deem proper.
8. Hotels or accommodation establishments shall not be allowed to operate, except those accommodating the following:
- a. For guests who have existing booking accommodations for foreigners as of 17 March 2020 for Luzon and 01 May 2020 for other areas;
 - b. Guests who have existing long-term bookings;
 - c. Distressed OFWs and stranded Filipinos or foreign nationals;
 - d. Repatriated OFWs in compliance with approved quarantine protocols;



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- e. Non-OFWs who may be required to undergo mandatory facility-based quarantine; and
- f. Health care workers and other employees, whether private or public, from exempted establishments under these Omnibus Guidelines and applicable Memoranda from the Executive Secretary.

Provided that accommodation establishments may operate only upon the issuance of a Certificate of Authority to operate by the DOT; *Provided further*, that in all of the foregoing, hotel operations shall be limited to the provision of basic accommodation services to guests through an in-house skeleton workforce. Ancillary establishments within the premises, such as restaurants, cafés, bars, gyms, spas, and the like, shall not be allowed to operate or to provide room service; *Provided finally*, that accommodation establishments may prepare: (a) packed meals for distribution to guests who opt for the same; and (b) food orders for take-out and delivery only. *(As amended by Paragraph A(2) of IATF Resolution No. 43, June 03, 2020)*

- 9. Mass gatherings such as but not limited to, movie screenings, concerts, sporting events, and other entertainment activities, community assemblies, and non-essential work gatherings shall be prohibited. Gatherings that are for the provision of critical government services and authorized humanitarian activities while adhering to the prescribed minimum health standards shall be allowed. Religious gatherings shall be limited to not more than five (5) persons until otherwise modified through subsequent issuances of the IATF.
- 10. Face-to-face or in-person classes at all levels shall be suspended.
- 11. Public transportation shall be suspended. This notwithstanding, commissioned shuttle services for employees of permitted offices or establishments, as well as point-to-point transport services provided by the government shall be allowed to operate, giving priority to healthcare workers.
- 12. Private transportation such as company shuttles and personal vehicles utilized by persons authorized outside their residences are allowed subject to the guidelines provided by DOTr. The use of bikes and other non-motorized transportation is strongly encouraged.
- 13. Limited operations in malls and shopping centers shall be allowed, except for leisure establishments and services which shall continue to be closed. *Provided*, that establishments and services allowed to operate in malls and shopping centers may only operate at a capacity consistent with items (4) and (5) of this Section. *Provided, further*, those below twenty-one (21) years old, and those sixty (60) years old and above and those with immunodeficiency, comorbidity, or other health risks, and pregnant women,



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including any person who resides with the aforementioned, may not enter malls and shopping centers except when indispensable under the circumstances for obtaining essential goods and services or for work in establishments located therein. *Provided, finally,* that such operations must comply with the guidelines of the DTI until otherwise modified through subsequent issuances of the IATF.

14. In addition to those allowed and enumerated construction projects under Section 2 of these Guidelines, other essential and priority public and private construction projects shall be allowed, subject to compliance with the DPWH construction safety guidelines: *Provided,* however, that small scale-projects as defined by the DPWH shall not be allowed.
15. The following shall not be allowed to operate within an area under MECQ:
 - a. Tourist destinations such as water parks, reservation service and related services;
 - b. Entertainment industries such as cinemas, theaters, and karaoke bars;
 - c. Kid amusement industries such as playroom and kiddy rides;
 - d. Libraries, archives, museums and cultural centers;
 - e. Gyms, fitness studios and sports facilities; and
 - f. Personal care services such as massage parlors, sauna, facial care and waxing.
16. The provisions relative to processing of payrolls, the RapidPass system, use of government owned or hired vehicles and identification cards for humanitarian assistance actors and public and private employees in areas under ECQ shall likewise apply in areas under MECQ.
17. Individual outdoor exercise such as outdoor walks, jogging, running or biking are allowed within MECQ areas. *Provided,* that the minimum health standards and precautions such as the wearing of masks and the maintenance of social distancing protocols are observed.
18. Other exemptions from the ECQ through previous IATF resolutions or issuances by the Office of the President shall also be applied in MECQ.

SECTION [4] GUIDELINES FOR AREAS UNDER GENERAL COMMUNITY QUARANTINE. Areas placed under GCQ shall observe the following protocols:

1. Minimum public health standards shall be complied with at all times for the duration of the GCQ.



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2. The movement of all persons in areas placed under GCQ shall be limited to accessing essential goods and services, and for work in the offices or industries permitted to operate hereunder. *Provided*, that movement for leisure purposes shall not be allowed.
3. Any person below twenty-one (21) years old, those who are sixty (60) years old and above, those with immunodeficiency, comorbidity, or other health risks, and pregnant women, including any person who resides with the aforementioned, shall be required to remain in their residences at all times, except when indispensable under the circumstances for obtaining essential goods and services or for work in permitted industries and offices.
4. Work in all government offices may be at full operational capacity or under such alternative work arrangements as agencies may deem proper in accordance with the relevant rules and regulations issued by the Civil Service Commission (CSC). *Provided that* for offices requiring employees to report physically, commissioned shuttle services as well as point-to-point transport services may be provided.
5. Accredited diplomatic missions and international organizations may operate at fifty percent (50%) capacity. Alternative work arrangements such as flexible work arrangements, compressed work week, telework, and telecommuting is strongly encouraged.
6. All permitted establishments and activities under Section 2(4) shall be allowed to operate or be undertaken at full operational capacity. In addition, the following sectors or industries shall be allowed to operate at an operational capacity provided herein:
 - a. **Category I Industries** - Power, energy, water, and other utilities, agriculture, fishery, and forestry industries, food manufacturing and food supply chain businesses, including food retail establishments such as supermarkets, grocery stores, and food preparation establishments insofar as take-out and delivery services, food delivery services, health-related establishments, the logistics sector, information technology and telecommunication companies, the media, at full operational capacity;
 - b. **Category II Industries** - Mining and other manufacturing, and electronic commerce companies, as well as other delivery, repair and maintenance, and housing and office services, at anywhere between fifty percent (50%) up to full operational capacity, and without prejudice to work-from-home and other alternative work arrangements; and
 - c. **Category III Industries** - Financial services, legal and accounting, and auditing services, professional, scientific, technical, and other non-leisure services, barbershops and salons and other non-leisure wholesale and retail establishments,



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from skeleton workforce to fifty percent (50%) operational capacity, and without prejudice to work-from-home and other alternative work arrangements.

The foregoing lists of sectors and industries per category are illustrative. Specific industries under each category are reflected in a separate document issued by the DTI which shall contain the updated guidelines to implement gradual increase of operational and venue capacity including operating hours, without diminution of the current capacities and hours previously allowed. (As amended by Paragraph B(2)(c) of IATF Resolution No. 41, May 29, 2020, Paragraph B(1) of IATF Resolution No. 49, June 25, 2020, and Paragraph E of IATF Resolution No. 51, July 02, 2020)

7. Limited operations in malls and shopping centers shall be allowed, except for leisure establishments and services which shall continue to be closed. *Provided*, that establishments and services allowed to operate in malls and shopping centers may only operate at a capacity consistent with Section 2(4) of these Omnibus Guidelines. *Provided, further*, those below twenty-one (21) years old, and those sixty (60) years old and above and those with immunodeficiency, comorbidity, or other health risks, and pregnant women, including any person who resides with the aforementioned, may not enter malls and shopping centers except when indispensable under the circumstances for obtaining essential goods and services or for work in establishments located therein until otherwise modified through subsequent issuances of the IATF. *Provided, finally*, that operations of malls and shopping centers are subject to the guidelines of the DTI.
8. All public and private construction projects shall be allowed, but with strict compliance to the construction safety guidelines issued by the DPWII for the implementation of infrastructure projects during the COVID-19 pandemic.
9. Amusement, gaming, and fitness establishments, as well as those in the kids and the tourism industries, and all **Category IV** industries may not operate. Industries in **Category IV** are reflected in the DTI issuance mentioned above.
10. No hotels or accommodation establishments shall be allowed to operate, except those accommodating the following:
 - a. For guests who have existing booking accommodations for foreigners as of 17 March 2020 for Luzon and 01 May 2020 for other areas;
 - b. Guests who have existing long-term bookings;
 - c. Distressed OFWs and stranded Filipinos or foreign nationals;
 - d. Repatriated OFWs in compliance with approved quarantine protocols;



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- e. Non-OFWs who may be required to undergo mandatory facility-based quarantine; and
- f. Healthcare workers and other employees from exempted establishments under these Omnibus Guidelines and applicable Memoranda from the Executive Secretary.

Provided that accommodation establishments may operate only upon the issuance of a Certificate of Authority to operate by the DOT; Provided further, that in all of the foregoing, hotel operations shall be limited to the provision of basic accommodation services to guests through an in-house skeleton workforce. Ancillary establishments within the premises, such as bars, gyms, spas, and the like, shall not be allowed to operate or to provide room service. Restaurants and cafés therein are hereby allowed to operate at thirty percent (30%) venue capacity provided that it allows for social distancing protocols and that such establishments are compliant with the protocols prescribed by DOT, or by joint guidelines issued by the DTI, DOLE, and DOH, as appropriate. In this regard, the operation of these dine-in establishments is hereby allowed up to 9:00 PM. Provided finally, that accommodation establishments may prepare: (a) packed meals for distribution to guests who opt for the same; and (b) food orders for take-out and delivery only. (As amended by Paragraph A(2) of IATF Resolution No. 43, June 03, 2020 and further amended by Paragraph D of IATF Resolution No. 48, June 22, 2020 and Paragraph B(2) of IATF Resolution No. 49, June 25, 2020)

- 11. Face-to-face or in-person classes shall be suspended. For Academic Year 2020-2021, the following shall be observed for the conduct of classes:
 - a. For basic education, the Basic Education Learning Continuity Plan of the Department of Education (DepEd) shall be adopted, as follows:
 - i. Opening of classes for the basic education shall be on 24 August 2020 and shall end on 30 April 2021;
 - ii. Opening of private schools will be allowed within the period provided by law. *Provided*, that school learning continuity plan shall be submitted; no face-to-face classes will be allowed earlier than 24 August 2020; and, from 24 August, face-to-face learning shall only be allowed when the local risk severity grading permits, and subject to compliance with minimum public health standards;
 - iii. Adoption of various learning delivery options such as but not limited to face-to-face, blended learnings, distance learnings, and homeschooling and other modes of delivery shall be implemented depending on the local COVID Risk Severity Classification and compliance with minimum public health standards; and



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- iv. Conduct of curricular and co-curricular activities involving gatherings such as science fairs, showcase of portfolios, trade fairs, school sports, campus journalism, festival of talents, job fairs, and other similar activities is cancelled, except those conducted online.
- b. For higher education, the recommendations of the Commission on Higher Education (CHED) for higher education institutions (HEIs) shall be adopted, as follows:
 - i. The rolling opening of classes will be based on education delivery mode, compliance with minimum health standards and the situation on the ground:
 1. HEIs using full online education can open anytime;
 2. HEIs using flexible learning can open anytime in August 2020;
 3. HEIs using significant face-to-face or in-person mode can open not earlier than 01 September 2020;
 4. No face-to-face or in-person classes until 31 August 2020.
 - ii. Private HEIs are encouraged to change their academic calendar and open in August 2020.
- c. For technical vocational education and training (TVET) of the Technical Educational and Skills Development Authority (TESDA), the following trainings and assessments may be conducted or provided by Technical Vocational Institutions (TVIs) and TESDA Technology Institutions (TTIs) subject to compliance with TESDA Guidelines and minimum public health standards.
 - i. Full online/E-learning trainings;
 - ii. All training programs related to agriculture/fishery qualifications for food production and processing;
 - iii. Distance Learning for TVET programs;
 - iv. E-learning component of Blended Learning for TVET programs
 - v. Dual Training System, Enterprise-Based Training, and In-Plant Training in establishments allowed to operate under GCQ, and
 - vi. Virtual Assessment and Portfolio Assessment through electronic means for certain TVET qualifications. *(As amended by Paragraph C of IATF Resolution No. 47, June 19, 2020)*



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12. Mass gatherings such as but not limited to, movie screenings, concerts, sporting events, and other entertainment activities, community assemblies, and non-essential work gatherings shall be prohibited. Gatherings that are for the provision of critical government services and authorized humanitarian activities while adhering to the prescribed minimum health standards shall be allowed. Religious gatherings shall be limited to not more than ten (10) persons, until otherwise modified through subsequent issuances of the IATF.
13. Outdoor non-contact sports and other forms of exercise such as but not limited to walking, jogging, running, biking, golf, swimming, tennis, badminton, equestrian, range shooting, and skateboarding are allowed. Provided, that the minimum public health standards such as the wearing of masks and the maintenance of social distancing protocols, and no sharing of equipment where applicable, are observed. Provided, further, that operations of the relevant clubhouses or similar establishments, if any, shall be limited to basic operations and restaurants and cafés therein are hereby allowed to operate at thirty percent (30%) venue capacity provided that it allows for social distancing protocols and that such establishments are compliant with the proper protocols prescribed by the DTI. In this regard, the operation of these dine-in establishments is hereby allowed up to 9:00 PM. For this purpose, the prohibition in Section 4(3) does not apply. (As amended by Paragraph A(3)(a) of IATF Resolution No. 43, June 03, 2020 and further amended by Paragraph D of IATF Resolution No. 48, June 22, 2020 and Paragraph B(3) of IATF Resolution No. 49, 2020)
14. The road, rail, maritime, and aviation sectors of public transportation shall operate at a reduced operational and vehicle capacity in accordance with guidelines issued by the DOTr. *Provided*, that in all public transports, a strict one (1) meter distance between passengers shall be observed and appropriate engineering controls shall be in place.
15. Visits to open-air memorial parks and cemeteries shall be limited to not more than ten (10) persons per group. The number of groups allowed at any given time shall be left to the discretion of the management of such memorial parks and cemeteries taking into consideration minimum public health standards and social distancing. (IATF Resolution No. 49, June 25, 2020)

SECTION [5] GUIDELINES FOR AREAS PLACED UNDER MODIFIED GENERAL COMMUNITY QUARANTINE. Areas placed under MGCQ shall observe the following protocols:



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1. Minimum public health standards shall be complied with at all times for the duration of the MGCQ.
2. The movement of all persons in areas placed under MGCQ shall be limited to accessing essential goods and services, for work in the offices or industries permitted to operate hereunder, and for other activities permitted under this Section. *(As amended by Paragraph A(4)(a) of IATF Resolution No. 43, June 03, 2020)*
3. Any person below twenty-one (21) years old, those who are sixty (60) years old and above, those with immunodeficiency, comorbidity, or other health risks, and pregnant women shall be required to remain in their residences at all times; Provided that all activities and movements allowed under other Sections of these Guidelines for the foregoing persons shall continue to be permitted under MGCQ. *(As amended by Paragraph A(4)(b) of IATF Resolution No. 43, June 03, 2020)*
4. Indoor and outdoor non-contact sports and other forms of exercise such as but not limited to walking, jogging, running, biking, golf, swimming, tennis, badminton, equestrian, range shooting, and skateboarding are allowed. *Provided*, that the minimum public health standards such as the wearing of masks and the maintenance of social distancing protocols, and no sharing of equipment where applicable, are observed. For this purpose, the prohibition in Section 5(3) does not apply. *(As amended by Paragraph A(4)(c) of IATF Resolution No. 43, June 03, 2020)*
5. Mass gatherings such as but not limited to, movie screenings, concerts, sporting events, and other entertainment activities, religious services, and work conferences shall be allowed provided that participants shall be limited to fifty percent (50%) of the seating or venue capacity. *(As amended by Paragraph A(4)(d) of IATF Resolution No. 43, June 03, 2020)*
6. Limited face-to-face or in-person classes may be conducted in HEIs provided there is strict compliance with minimum public health standards, consultation with local government units, and compliance with guidelines set by CHED.

Face-to-face TVET training and competency assessment may be conducted at up to 50% training and assessment site capacity, provided there is strict compliance with minimum public health standards, TESDA Guidelines and consultation with local government units.

For K-12 Basic Education, the Basic Education Learning Continuity Plan of the DepEd shall be adopted.



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For this purpose, the prohibition in Section 5(3) does not apply. *(As amended by Paragraph A(4)(e) of IATF Resolution No. 43, June 03, 2020 and amended by Paragraph C of IATF Resolution No. 47, June 19, 2020)*

7. Work in all public and private offices may be allowed to resume physical reporting to work at full operating capacity, with alternative work arrangements for persons who are sixty (60) years old and above, those with immunodeficiency, comorbidity, or other health risks, and pregnant women.
8. The road, rail, maritime, and aviation sectors of public transportation shall be allowed to operate at the capacity in accordance with guidelines issued by the DOTr. *Provided, that in all public transports, a strict one (1) meter distance between passengers shall be observed and appropriate engineering controls shall be in place.*
9. Private transportation shall be allowed subject to the guidelines provided by DOTr.
10. All public and private construction projects shall be allowed subject to strict compliance with the construction safety guidelines issued by the DPWH for the implementation of infrastructure projects during the COVID-19 pandemic.
11. Except as otherwise provided below, all permitted establishments and activities under Categories I, II and III of Section 4(6) and those in previous Sections of these Omnibus Guidelines shall be allowed to operate or be undertaken at full operational capacity:
 - a. Barber shops, salons, and other personal care service establishments, at a maximum of fifty percent (50%) of venue capacity;
 - b. Dine-in restaurants, fast food and food retail establishments, including those in supermarkets, grocery stores, and food preparation establishments, at a maximum of fifty percent (50%) of seating capacity
 - c. Category IV and all other establishments not permitted to operate under previous Sections of these Guidelines, at a maximum of fifty percent (50%) operational capacity. However, for hotels and other accommodation establishments, only those accredited as provided by law and relevant DOT and DILG issuances may operate, and only upon issuance of a Certificate of Authority to operate by the DOT. For this purpose, DOT and DILG shall work with LGUs to ensure compliance of accommodation establishments. *(As amended by Paragraph A(4)(f) of IATF Resolution No. 43, June 03, 2020)*
12. Work in government offices may be at full operational capacity, or under such alternative work arrangements as agencies may deem appropriate in accordance with the relevant rules and regulations issued by the CSC.



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13. Accredited diplomatic missions and international organizations may resume full operations.

SECTION [6] POST-COMMUNITY QUARANTINE SCENARIO. Areas where no community quarantine is in place can be considered as being under the New Normal.

SECTION [7] GUIDELINES FOR INTERZONAL AND INTRAZONAL MOVEMENT.

1. The movement of all types of cargoes by land, air, or sea within and across areas placed under any form of community quarantine shall be unhampered. Workers in the logistics sector, such as cargo, trucking, courier delivery and port operations shall likewise be allowed to transit across areas placed under any form of community quarantine. All LGUs are directed to strictly abide by this national policy. *Provided*, that only a maximum of five (5) personnel may operate cargo and delivery vehicles by land, with or without load.

LGUs and local health units (LHUs) are hereby enjoined not to issue orders contrary to or inconsistent with said directive, such as, but not limited to, requiring asymptomatic drivers and crew of cargo or service delivery vehicles to undergo mandatory fourteen (14)-day home quarantine. *Provided, further*, that strict social distancing measures must be observed, which may include, if necessary, the putting up of additional safe and humane seats or space in the vehicles. *Provided, finally*, that the PNP retains its authority to conduct inspection procedures in checkpoints for the purpose of ensuring that protocols on strict home quarantine are observed.

2. The movement as such of the following persons within and across areas placed under any form of community quarantine shall be permitted: (1) health and emergency frontline services personnel, (2) government officials and government frontline personnel, (3) duly-authorized humanitarian assistance actors (HAAs), (4) persons traveling for medical or humanitarian reasons, (5) persons going to the airport for travel abroad, (6) returning or repatriated OFWs and other Overseas Filipinos (OFs) returning to their places of residence, (7) other persons transported through the efforts of the national government upon observance of the necessary quarantine protocols and with the concurrence of the receiving LGUs, and (8) anyone crossing zones for work permitted in the zone of destination, and going back home. Authorized shuttle services shall be allowed to travel within and across areas placed under any form of community quarantine, with priority given to persons rendering health and emergency frontline services.



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Land, air or sea travel by uniformed personnel, government officials and employees for official business with the corresponding travel authority, and authorized HAAs, especially those transporting medical supplies and laboratory specimens related to COVID-19, and other relief and humanitarian assistance, shall be allowed.

OFWs, students enrolled abroad and participants accepted in exchange visitor programs, permanent residents of foreign jurisdictions, and stranded foreign nationals, or those leaving for medical and other humanitarian reasons may leave for abroad through any of the airports or seaports in the country. *Provided* that this provision shall not be interpreted to allow outbound travel by Filipinos to countries where travel restrictions are in place. *Provided, further*, that departing passengers may be accompanied by not more than one (1) person when traveling to any international port, who shall be allowed to return to his/her point of origin.

OFWs whether land-based or sea-based shall be allowed to be deployed abroad upon the execution of a *Declaration* signifying their knowledge and understanding of the risks involved as advised by the Philippine Government. For this purpose, recruitment and placement agencies shall likewise be allowed to operate in areas under MECQ, GCQ or MGCQ, subject to the observance of minimum health standards. *Further*, government offices and agencies involved in the processing of their deployment are hereby directed to establish "Green Lanes" to enable their prompt processing and deployment. *Further still*, to facilitate the ease of deployment, the OFWs and employees of these recruitment and placement agencies shall be allowed unhampered transit to and from appropriate government offices during MECQ, GCQ or MGCQ for the processing of their requirements and facilities such as airports, ferries, bus terminals, etc., notwithstanding any Local Government Unit pronouncement to the contrary. The said free access shall extend to the vehicles carrying the aforementioned individuals in order for them to reach their final destination. No fee or any other requirement shall be imposed by LGUs in this regard.

Repatriated OFWs or returning non-OFWs who have been issued a DOH or LGU certificate of completion of fourteen (14)-day facility-based quarantine, those who may be required to undergo a mandatory fourteen (14)-day home quarantine, or those who are issued with travel authority upon testing negative for COVID-19 whichever is earlier, shall be granted unhampered transit across zones *en route* to their final destination in the Philippines. For this purpose, LGUs are enjoined to allow maritime vessels or aircraft transporting the aforementioned OFWs and non-OFWs to dock or land at their ports of destination. No other requirement shall be imposed by LGUs in this regard.

3. The interzonal movement of persons between areas placed under GCQ and MGCQ for any purpose other than leisure shall be permitted.



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4. Movement to and from an area placed under GCQ to an area where no community quarantine is in place shall be permitted, except for the sole purpose of leisure. *(As amended by Paragraph A(5) of IATF Resolution No. 43, June 03, 2020)*
5. The movement of persons for any purpose across areas placed under MGCQ and areas where no community quarantine is in place shall be permitted, but insofar as tourism travel is concerned, the same may still be subject to regulations of the LGU concerned or in the case of Boracay Island, the Boracay Inter-Agency Task Force (BIATF). *(As amended by Paragraph A(5) of IATF Resolution No. 43, June 03, 2020)*

SECTION [8] GENERAL PROVISIONS

1. LGUs are enjoined to enact the necessary ordinances to enforce curfew only for non-workers in jurisdictions placed under MECQ, GCQ and MGCQ to penalize, in a fair and humane manner, violations of the restrictions on the movement of people as provided under these Omnibus Guidelines. Law enforcement agencies, in implementing and enforcing said curfew ordinances, are likewise strongly enjoined to observe fair and humane treatment of curfew violators. Public transportation, however, shall not be restricted by such curfew ordinances. *(As amended by Paragraph C of IATF Resolution No. 47, June 19, 2020)*
2. As a matter of declared national policy and pursuant to paragraphs (aa) and (bb), Section 4 of the Republic Act No. 11469, all banks, quasi-banks, financing companies, lending companies, and other financial institutions, public and private, including the Government Service Insurance System, Social Security System and Pag-ibig Fund, are directed to implement a minimum of a thirty (30)-day grace period from due date or until such time that the ECQ or MECQ is lifted, whichever is later, for the payment of all loans, including but not limited to salary, personal, housing, and motor vehicle loans, as well as credit card payments, falling due within the period of ECQ and MECQ, and without incurring interests, penalties, fees, or other charges. Persons with multiple loans shall likewise be given a minimum thirty (30)-day grace period from due date or until such time that the ECQ or MECQ is lifted, whichever is later, for every loan.

For residential and commercial rents falling due within the duration of the ECQ, MECQ, and GCQ, on residential lessees and micro-, small, and medium enterprises (MSMEs) and sectors not permitted to operate during said period, a grace period of thirty (30) days from the last due date or until such time that the community quarantine is lifted, shall be observed, whichever is longer, without incurring interests, penalties, fees, or other charges.



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The foregoing rules on grace periods shall have retroactive effect starting 17 March 2020 in areas where the applicable community quarantine had been declared.

3. The operation of industries and establishments identified in preceding sections are subject to the visitorial and enforcement powers of the Department of Labor and Employment, Department of Trade and Industry, and other appropriate agencies to ensure compliance with these Omnibus Guidelines, especially the compliance with the provisions on maximum allowable operational capacity in establishments, as well as minimum public health standards and protocols.
4. National government agencies and instrumentalities including GOCCs and LGUs shall adopt measures lawful and necessary to implement and enforce the minimum public health standards as defined herein. Such measures shall be in accordance with the minimum health standards set by DOH and other relevant national agencies, and shall not be unreasonable or unduly burdensome. However, the private sector is encouraged to adopt stricter health standards concerning their own operations. Compliance of private sector establishments with the Joint DTI-DOLE Return-to-Work Guidelines, DOH Return-to-Work Guidelines, and guidelines issued by the aforementioned appropriate sector-relevant national government agency, including their future amendments, shall be considered sufficient compliance with minimum public health standards. In accordance with DOH Department Memorandum No. 2020-0220, the testing of all returning employees of a private sector entity shall not be required as a condition precedent for their operation. In no case shall the testing of all returning workers be construed as a condition precedent for his/her return.
5. All persons are mandated to wear face masks, ear loop masks, indigenous, reusable, do-it-yourself masks, or face shields, handkerchiefs, or such other protective equipment or any combination thereof, which can effectively lessen the transmission of COVID-19, whenever they go out of their residences, pursuant to existing guidelines issued by the national government subject to fair and humane penalties or punishments that may be imposed by LGUs or implemented by law enforcement agencies, respectively. LGUs are hereby enjoined to use IATF-endorsed contact tracing and contact monitoring applications (StaySafe.ph and TanodCOVID) where they are available, or use community-based contact tracing and contact monitoring. Concerned LGUs are hereby enjoined to issue the necessary executive order or ordinance to this effect.
6. Supermarkets, public and private wet markets, grocery stores, agri-fishery supply stores, veterinary supply stores, pharmacies, drug stores, and other retail establishments engaged in the business of selling essential goods are strongly encouraged to extend their store operations to a maximum of twelve (12) hours. LGUs are directed to allow such establishments to operate pursuant to the foregoing. *Provided* that in the operation of wet



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markets, LGUs are encouraged to adopt reasonable schemes to ensure compliance with strict social distancing measures, such as, but not limited to, providing for specific daily schedules per sector, barangay, or purok, as the case may be. In no case shall such schemes involve narrowing the hours of operation of the foregoing establishments.

7. Acts of discrimination inflicted upon healthcare workers, repatriated OFWs and non-OFWs, COVID-19 cases, whether confirmed, recovered or undergoing treatment, as well as suspect and probable cases, and Persons under Monitoring are denounced in the strongest of terms. Acts in furtherance of discrimination, such as, but not limited to, coercion, libel, slander, physical injuries and the dishonor of contractual obligations such as contracts of lease or employment, shall be dealt with criminally, civilly, and/or administratively. LGUs are enjoined to issue the necessary executive orders and/or enact ordinances prohibiting and penalizing these discriminatory acts.

SECTION [9] SEPARABILITY CLAUSE. If any part, section, or provision of these Guidelines is held invalid or unconstitutional, other provisions not affected thereby shall remain in full force and effect.

SECTION [10] REPEALING CAUSE. All IATF Resolutions or previous guidelines on the implementation of community quarantine in the Philippines or parts thereof inconsistent with the provisions of these Guidelines are hereby repealed or modified accordingly.

SECTION [11] EFFECTIVITY. These Guidelines shall take effect immediately upon publication in the Official Gazette or any newspaper of general circulation.

Note: Last signed Omnibus Guidelines published on 22 May 2020. Subsequent amendatory IATF Resolutions were published individually.

Prepared for general reference purpose by:

The IATF Secretariat