



Republic of the Philippines
Office of the President
COMMISSION ON HIGHER EDUCATION
REGIONAL OFFICE XI
Loyola St., Obrero, Davao City



Tel. Nos.: +63 (82) 295-3418 • 295-7696 • 282-4448 • 321-7418 Email: chedro11@ched.gov.ph

MEMORANDUM FROM THE REGIONAL DIRECTOR
No. 093, Series of 2022

To : **PRESIDENTS/HEADS OF PUBLIC AND PRIVATE HIGHER EDUCATION INSTITUTIONS IN REGION XI**

Subject : **PARTICIPATION IN THE ORIENTATION OF THE DAVAO CITY HEALTH OFFICE SCHOOL SAFETY ASSESSMENT TOOL FOR COVID-19 AND MEETING WITH HIGHER EDUCATION INSTITUTIONS ON LIMITED FACE-TO-FACE (LFTF) CLASSES IMPLEMENTATION VIA HYBRID PLATFORM**

Date : **July 4, 2022**

In accordance with the pertinent provision of Republic Act 7722, otherwise known as "Higher Education Act of 1994", in compliance with CHED- DOH Joint Memorandum Circular 2021-004 otherwise known as "*Guidelines on the Implementation of Limited-Face-to-Face Classes for all Programs of Higher Education Institutions (HEIs) in Areas under Alert Level System*" and CHED Memorandum No. 4, S. 2022 otherwise known as "*Guidelines on the Safety Seal Certification Program for Higher Education Institutions (HEIs)*", this Office will conduct the above undertaking on **July 8, 2022 at 1:00 PM** via Hybrid Platform to discuss the Safety Assessment Tool of the City of Davao, City Health Office and Updates on the Implementation of Limited Face-to-Face and CHED Safety Seal.

Participants are LFTF Focal Persons of HEIs in Davao Region.

For HEIs in Davao City that are already conducting LFTF Classes please attend at CHED XI Office, Function Hall, Third Floor, Loyola St., Bo. Obrero, Davao City.

For HEIs in other provinces, please attend via Zoom Conferencing. To receive the Zoom credentials through email, kindly register at <https://bit.ly/DCHOSSAT-LF2F-REGISTRATION>.

For information and guidance.

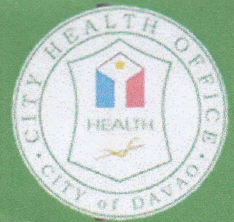

MARICAR R. CASQUEJO, PhD, CESO III
Director IV

Control #: 2022-06-30-002220
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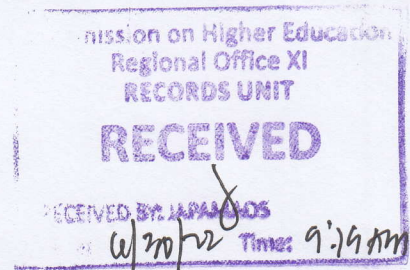


Republic of the Philippines
CITY GOVERNMENT OF DAVAO
CITY HEALTH OFFICE



June 28, 2022

DR. MARICAR R. CASQUEJO, CESO III
Regional Director
Commission on Higher Education XI
University of Southeastern Philippines Compound
Loyola St., Bo. Obrero
Davao City



Dear Dr. Casquejo:

This has reference to our meeting and agreements between our offices today regarding the Limited Face-to-Face Classes for the Higher Educational Institutions.

As agreed with your office, we look forward to meeting representatives from the higher educational institutions (HEIs) in the City to be apprised on this new assessment tool developed by this Office for the implementation of face-to-face classes.

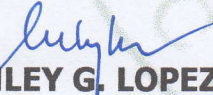
The representatives of this Office are open to meet with your representatives as well as from the HEIs virtually on July 8, 2022 in the afternoon.

Attached herewith is the Davao City Health Office School Safety Assessment Tool for COVID-19.

We look forward for your positive regard and response to this matter.

Thank you.

Respectfully yours,


ASHLEY G. LOPEZ, MD
City Health Officer



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**DAVAO CITY HEALTH OFFICE SCHOOL SAFETY ASSESSMENT
 TOOL FOR COVID-19**

NAME OF SCHOOL:	BARANGAY:
COMPLETE SCHOOL ADDRESS:	HEALTH DISTRICT:
CONTACT PERSON:	CONTACT NUMBER:

GENERAL INDICATORS		YES	NO
I. COVID-19 STATUS			
1.	For the past 10 days _____, has the barangay, where your school is located, included in the high-risk areas for COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>
II. VACCINATION STATUS			
1.	Is all teaching, non-teaching personnel and students fully vaccinated?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Is all teaching, non-teaching personnel and students boosted? Not more than 4 months from the primary vaccine (for the 1 st booster) and from the primary booster vaccine (for second booster).	<input type="checkbox"/>	<input type="checkbox"/>
SPECIFIC INDICATORS		YES	NO
I. SCHOOL TRAFFIC			
1.	Entry and exit of students and staff	<input type="checkbox"/>	<input type="checkbox"/>
a.	With designated entrance?	<input type="checkbox"/>	<input type="checkbox"/>
b.	With designated exit?	<input type="checkbox"/>	<input type="checkbox"/>
c.	With proper IEC materials appropriate foot traffic signages in all areas including offices, classrooms, etc. (unidirectional movement, sectioning and queueing)?	<input type="checkbox"/>	<input type="checkbox"/>
II. PROTECTIVE MEASURES			
1.	With designated hand washing area (entrance and exit, other areas)?	<input type="checkbox"/>	<input type="checkbox"/>
2.	With appropriate health declaration section upon entry?	<input type="checkbox"/>	<input type="checkbox"/>
a.	Temperature checking, etc.	<input type="checkbox"/>	<input type="checkbox"/>
b.	Availability of hand sanitizer, or alcohol dispenser	<input type="checkbox"/>	<input type="checkbox"/>
3.	Has established contact tracing team/tools	<input type="checkbox"/>	<input type="checkbox"/>
III. HYGIENE PRACTICES			
1.	Proper sanitation and hygiene facilities	<input type="checkbox"/>	<input type="checkbox"/>
2.	Availability of clean and safe toilet facilities	<input type="checkbox"/>	<input type="checkbox"/>
3.	Accessible trash bins (for infectious wastes, and other wastes) with proper labels	<input type="checkbox"/>	<input type="checkbox"/>
4.	Has the school ensured regular sanitation and disinfection of school facilities, furniture, and equipment?	<input type="checkbox"/>	<input type="checkbox"/>
a.	Schedule of sanitation of frequently touched surfaces (tables, doorknobs, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
b.	Availability of sanitation and disinfecting materials	<input type="checkbox"/>	<input type="checkbox"/>
5.	Has the school ensured a proper disposal system of infectious wastes, such as used tissues and masks, in non-contact receptacles?	<input type="checkbox"/>	<input type="checkbox"/>
a.	Proper labels of infectious waste bins	<input type="checkbox"/>	<input type="checkbox"/>
b.	Schedule of collection of infectious wastes from each classroom and offices?	<input type="checkbox"/>	<input type="checkbox"/>
c.	Proper treatment disinfection of collected infectious wastes?	<input type="checkbox"/>	<input type="checkbox"/>
6.	Has the school disposal of the disinfected PPE with general waste to the final disposal facility?	<input type="checkbox"/>	<input type="checkbox"/>
IV. SAFETY PROCEDURES			
1.	Does the school have clinic for COVID-19 and non-COVID-19 cases with sufficient supply of PPEs for learners and staff?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does the school have available emergency health kits that include PPEs and other needed supplies and materials in the school clinic (available for COVID-19 team)	<input type="checkbox"/>	<input type="checkbox"/>



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members, health personnel, and maintenance, and security guards)?		
3. Does the school have Quick Response Team (QRT) for COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>
a. Has the school developed strategies for COVID-19 case management?	<input type="checkbox"/>	<input type="checkbox"/>
b. Has the school available access to Davao City COVID-19 Operation Center?	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the school established coordination with BHERTS?	<input type="checkbox"/>	<input type="checkbox"/>

V. CLASSROOMS AND OFFICES		
1. Has the school identified the maximum number of students per class?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the school alternative setting for learning (gymnasium/school grounds)?	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the school availability of all heating, ventilation and air conditioning (HVAC) systems?	<input type="checkbox"/>	<input type="checkbox"/>
a. Indoor: maximize natural airflow	<input type="checkbox"/>	<input type="checkbox"/>
b. Outdoor: installed ventilation equipment	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the school secured sufficient supply of sanitation and disinfection materials for strategic school locations?	<input type="checkbox"/>	<input type="checkbox"/>

Recommendations:

Assessed by:

(Printed name and signature)

Date Assessed: _____