



MAR 04 2010

DepEd MEMORANDUM  
No. **93**, s. 2010

ANTI-MEASLES CAMPAIGN IN SCHOOLS

To: Undersecretaries  
Assistant Secretaries  
Bureau Directors  
Regional Directors  
Schools Division/City Superintendents  
Heads, Public and Private Elementary and Secondary Schools  
Vocational School Superintendents/Administrators

1. In response to the alarming increase of individuals/children sick of measles, this Department, in close coordination with the Department of Health (DOH), shall implement an Anti-Measles Campaign in all schools nationwide.
2. The regional directors are hereby instructed to execute immediately the provisions of Executive Order No. 663 entitled **Implementing the National Commitment for “Bakuna ang Una sa Sanggol at Ina”, Attaining World Health Organization’s Goals to Eliminate Measles and Neonatal Tetanus, Eradicate Polio, Control Hepatitis B and Other Vaccine-Preventable Diseases** (Enclosure No. 1) particularly the responsibilities of the Department of Education as follows:
  - a. Ensure the complete vaccination status of all children entering primary school;
  - b. Ensure that mothers of all children with incomplete immunization shall be informed of the immunization program being provided by the government;
  - c. Coordinate with the local government health units for the complete vaccination of children;
  - d. Identify and report any case definitions, to the concerned local health units; and
  - e. Monitor the school entry lists to ensure compliance by all schools and submit reports of schools’ compliance to the Department of Health (DOH).

3. An initial activity will be to look at the Individual Health Records to facilitate the identification of pupils without or with incomplete immunization.



4. The schools division/city superintendents shall mobilize all health and nutrition personnel to undertake the various activities as stated in the E.O. The **Preventive Alert System for Schools (PASS)** (Enclosure No. 2) shall be utilized to identify pupils/students who manifest signs and symptoms of measles.

5. Reports on compliance with the Executive Order shall be submitted to the Office of the Secretary (Attn.: Health and Nutrition Center) by the end of March 2010 and every three months thereafter for SY 2010-2011.

6. Immediate dissemination of this Memorandum is desired.

  
**VILMA L. LABRADOR**  
Undersecretary

Encls.:

As stated

Reference:

N o n e

Allotment: 1—(D.O. 50-97)

To be indicated in the Perpetual Index  
under the following subjects:

CAMPAIGN  
HEALTH EDUCATION  
OFFICIALS

R-Julie/DM-Anti-Measles  
03-01-10/computer use: alma

MALACAÑANG  
Manila

BY THE PRESIDENT OF THE PHILIPPINES

EXECUTIVE ORDER NO. 663

**IMPLEMENTING THE NATIONAL COMMITMENT FOR "*BAKUNA ANG UNA SA SANGGOL AT INA*", ATTAINING WORLD HEALTH ORGANIZATION'S GOALS TO ELIMINATE MEASLES AND NEONATAL TETANUS, ERADICATE POLIO, CONTROL HEPATITIS B AND OTHER VACCINE-PREVENTABLE DISEASES**

**WHEREAS**, the Philippines has set as one of its goals in the Millenium Development Goals (MDGs) reduction of child mortality by two-thirds (2/3) by year 2015;

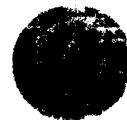
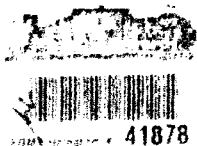
**WHEREAS**, the government already ratified the Conventions on the Rights of the Child (CRC) for children to attain the highest possible attainable level of health, survival and protection; and supported the World Health Assembly resolutions for improving child health and survival;

**WHEREAS**, the government has committed to the World Health Organization Regional Committee for the Western Pacific resolutions to eliminate/eradicate measles, neonatal tetanus, polio, and control diphtheria, hepatitis B, pertussis, and childhood tuberculosis by year 2008;

**WHEREAS**, since the year 2000, the country has already eradicated polio nationwide and has been sustaining its polio-free status;

**WHEREAS**, the mass measles vaccination campaign in 2004, otherwise known as the "Ligtas Tigdas 2004", demonstrated a 96% unprecedented decline of measles cases and deaths and also led to institutionalization of safe injection practices, through the use of the auto-disabled needles and syringes in immunizations, and established an appropriate immunization waste disposal in support of the "Philippine Clean Air Act 1999" and "Solid Waste Management Act 2003";

**WHEREAS**, elimination, eradication, control of the childhood vaccine-preventable diseases requires that at least 95% of our child population be fully immunized annually; that 80% of our pregnant mothers be vaccinated with tetanus toxoid to protect the newborn from neonatal tetanus and that all vaccine-preventable disease cases be detected, investigated and reported on a timely basis;



**WHEREAS**, low and unequally distributed routine immunization coverage in the country causes about 500,000 infants/children annually to remain unprotected, thus, rendering them susceptible to vaccine-preventable diseases and thereby threatens the country to outbreaks/epidemics despite of the national purchases of a free, potent, and high-quality vaccines for all infants/children and mothers;

**WHEREAS**, another mass measles vaccination campaign will reduce the number of children at risk of getting measles infections;

**WHEREAS**, achieving 95% fully immunized children and mothers will require unified commitments of the national government, local chief executives, health workers, communities and all sectors of society;

**NOW, THEREFORE, I, GLORIA MACAPAGAL-ARROYO**, President of the Republic of the Philippines, by virtue of the powers vested in me by law, do hereby order:

**SECTION 1. Declaration of Objectives.** - This Executive Order shall have the following objectives:

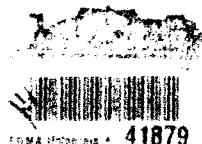
- a) Implement the national commitment for "*Bakuna ang Una sa Sanggol at Ina*", Attaining World Health Organization's Goals to Eliminate Measles and Neonatal Tetanus, Eradicate Polio, Control Hepatitis B and other Vaccine-preventable Diseases;
- b) Mobilize the national government, its agencies, instrumentalities, local government units, and other sectors of society in support of this national commitment.

**SECTION 2. Implementing Agencies.** -

**A. Lead Agency: Department of Health (DOH)**

The DOH, as lead agency, shall implement the "*Bakuna ang Una sa Sanggol at Ina*" to strengthen the routine reaching of all mothers and infants with safe and effective vaccines; and to identify, investigate and report vaccine-preventable disease cases.

It shall embark on a mass measles vaccination campaign for all children ages 9 months to 48 months old nationwide.



The DOH shall formulate, disseminate guidelines and procedures on implementing the "*Bakuna ang Una sa Sanggol at Ina*", including the introduction of new vaccines based on analysis conducted by a technical working group; provide technical assistance to Local Government Units (LGUs); conduct national/regional advocacy and social mobilization activities; provide, allocate and distribute in a timely manner all the necessary vaccines; and monitor submission of required reports of all LGU health system activities.

Jointly with Council for the Welfare of Children (CWC), it shall compile, disseminate and publish semi-annual reports of progress and performance on this immunization program.

#### **B. Department of the Interior and Local Government (DILG)**

The DILG shall advocate to all LGUs to achieve and maintain minimum standards of staffing, financial support, supplies and communication/advocacy to community representatives to achieve this goal. It shall submit quarterly reports of LGUs' compliance to DOH.

#### **C. Department of Education (DepEd)**

The DepEd shall ensure the complete vaccination status of all children entering primary school. It shall further ensure that mothers of all children with incomplete immunization shall be informed of the immunization program being provided by the government. It shall coordinate with the local government health units for the complete vaccination of these children. It shall identify and report any case of suspected vaccine-preventable disease, which has met the standard case definitions, to the concerned local health units. It shall annually monitor the school entry lists to ensure compliance by all schools and submit annual reports of schools' compliance to DOH.

#### **D. Department of Social Welfare and Development (DSWD)**

The DSWD shall ensure the complete vaccination status of all children in day care centers and pre-schools during the first week of school. It shall further ensure that mothers of all children with incomplete immunization shall be informed of the immunization program being provided by government. It shall coordinate with the local government health units for complete vaccination of these children. It shall identify and report any case of suspected vaccine-preventable disease, which has met the standard case definitions to the concerned local health units. It shall annually monitor daycare centers/pre-schools entry lists to ensure compliance of these schools and submit annual reports of schools' compliance to DOH.



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**E. Council for the Welfare for Children (CWC)**

The CWC shall coordinate with DepEd, DSWD, DILG and LGUs, to ensure that all incompletely vaccinated children in schools, day-care centers, pre-schools, and other places, to be fully vaccinated and correspondingly reported to DOH. It shall coordinate reporting of suspect vaccine-preventable disease cases among DOH, LGUs, DepEd and DSWD.

Jointly with DOH, it shall compile, disseminate and publish semi-annual reports of progress and performance on this immunization program.

**F. Local Government Units (LGUs)**

The LGUs shall ensure that every pregnant mother and infant are given complete immunization FREE OF CHARGE. Aside from the weekly health center-based vaccination sessions, it shall provide systematic outreach services to ensure full immunization of infants/children/mothers and other intervention that can save children's/mothers' lives. They shall organize regular immunization outreach services and other essential maternal and child health package of services. They shall maintain the standards set by DOH for staffing, provide adequate needles and syringes; finance traveling expenses of BHWs to carry out the follow-up on the immunization services. They shall conduct vigorous social mobilization activities.

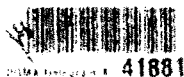
All health workers, including doctors, nurses and midwives, shall fully participate in providing free immunization, regardless of route – intramuscular, oral, subcutaneous, intradermal. All LGUs shall submit accomplishment reports of the immunization coverage and activities as follows: provinces and chartered cities to report quarterly vaccine coverage to regions; municipalities and component cities to report monthly vaccine coverage to provinces.

The LGUs shall identify and report all suspected vaccine-preventable disease cases that meet the standard case definitions to the next higher level epidemiologic surveillance unit. They shall still submit weekly "zero reporting" even if there were no identified vaccine-preventable disease cases.

The LGUs shall conduct regular Supplemental Immunization Activities (SIAs) and/or "Child Health Days", as determined by, and according to the guidelines of DOH.

**G. Civil Society**

All members of the civil society, non-government organizations, professional organizations, and other concerned groups, are encouraged to



support this national commitment for "Bakuna ang Una sa Sanggol at Ina", through issuances of resolutions, letters, and other mechanisms of information dissemination and social mobilization, to all members of their organizations.

Any children vaccinated outside the public health system should be reported to the local government unit. They shall identify and report any suspected vaccine-preventable disease cases meeting the standard case definitions to local government health units.

**SECTION 3. Funding.** - The Department of Health (DOH) shall provide funds for the procurement of quality vaccines for all eligible population. The Local Government Units (LGUs) shall provide funds for the procurement and disposal of auto-disabled needles and syringes for immunizations; traveling expenses for the mobilization of health staffs to reach and immunize all the infants/children and mothers and for other related activities.

**SECTION 4. Repealing Clause.** - All other rules, regulations and issuances or parts thereof which are inconsistent with this Executive Order are hereby repealed or modified accordingly.

**SECTION 5. Effectivity.** - This Executive Order shall take effect immediately.

**DONE** in the City of Manila, this 21st day of September in the year of Our Lord, Two Thousand and Seven.

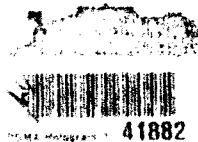
*Gloria M. Arroyo*



By the President:

*Eduardo R. Ermita*

**EDUARDO R. ERMITA**  
Executive Secretary



**CERTIFIED COPY.**  
*[Signature]*  
**MARIANITO M. DIMAANDA**  
DIRECTOR III  
MALACANANG RECORDS OFFICE

## **OPERATIONALIZING THE PREVENTIVE ALERT SYSTEM IN SCHOOLS (PASS)**

1. The Preventive Alert System in Schools (PASS) is a systematic relay of information on a child's or teacher's state of health to appropriate personnel and/or agencies in the locality.
2. All school heads shall operationalize the PASS in their respective schools.
3. Teachers-in-charge shall explain in class how the PASS works:
  - Pupils/students will observe the well-being of their own classmates and if someone among them is not feeling well or has colds/cough and feverish, the sick pupil/student will be reported to the teacher for validation.
  - The early morning health inspection shall be conducted routinely by the teacher to detect the presence of fever and other signs and symptoms of infection. The teacher shall keenly observe the health status of each pupil in the classroom. If he/she finds out that a child is sick, this case shall be reported immediately to the principal.
  - The principal shall notify the family/guardian of the sick child. The feverish person shall be immediately referred to the school physician for evaluation. If the school does not have a physician, the nearest health center physician/municipal health officer or rural health midwife shall be consulted.
  - Depending on assessment, the student, teacher or another employee who has fever regardless of cause will be requested to stay at home for a number of days as determined by the school medical officer/municipal health officer/nurse.
  - The illness of the student, teacher or another school employee should be closely followed up by the health personnel.
4. School heads shall conduct daily monitoring of health status of school children and personnel and maintain record on health status. Lessons/materials for home study may be provided to the child.
5. School principals are expected to take the lead in operationalizing the PASS and to relay relevant information to the Schools Division Superintendent and such information be likewise relayed to the Office of the Secretary, Attention: Health and Nutrition Center.