

REPUBLIKA NG PILIPINAS

REPUBLIC OF THE PHILIPPINES

KAGAWARAN NG EDUKASYON

DEPARTMENT OF EDUCATION

DepEd Complex, Meralco Avenue, Pasig City, Philippines

Tanggapan ng Kalihim Office of the Secretary Direct Line: 687-2922 / 687-4177 E-Mail: osec@deped.gov.ph. Website: http://www.deped.gov.ph

MAY 0 9 2003

No. 34, s. 2003

ANTI-SARS CAMPAIGN IN SCHOOLS

To:

Bureau Directors

Regional Directors

Directors of Services, Centers and Heads of Units

Schools Division/City Superintendents

Heads, Public and Private Elementary and Secondary Schools

Vocational School Superintendents/Administrators

- 1. In response to the national threat brought about by the effect of Severe Acute Respiratory Syndrome (SARS) to the populace, this Department shall vigorously implement an Anti-SARS Campaign in all schools nationwide.
- 2. Regional directors are hereby instructed to execute immediately the following:

A. Mobilization for Anti-SARS Campaign

- Create Anti-SARS Task Forces at the regional, division and district levels to oversee all school anti-SARS activities and take the lead in coordinating with the DOH/DILG Task Forces at their respective levels relative to the implementation of the National Anti-SARS Action Plan, including the mapping out of contingency plans, in case a probable or suspect case of SARS is identified in the area;
- Mobilize all school health and nutrition personnel to disseminate information on SARS to the pupils/students, teachers and nonteaching personnel;
- Mobilize all student government organizations, scouts and youth leaders to create awareness on SARS and assist in the monitoring of SARS related activities;
- Implement the Preventive Alert System in all schools (See Enclosure A);
- Establish DepEd Anti-SARS Hotlines in all regional and division offices (see Enclosure B)

B. Health Information Dissemination and Educa on

- Orient all school heads on the DepEd Anti-SARS Campaign in schools;
- Hold meetings with the Parent-Teacher-Community Associations (PTCA) giving emphasis on proper nutrition and personal hygiene of their children and the importance of environmental sanitation;
- Publish updates on SARS prevention in all school papers/ organs/newsletters;
- Intensify health education in the classroom giving emphasis on personal hygiene, eating of balance diets and environmental sanitation;

- Collaboration with other stakeholders
 - Establish close collaboration with Parent-Teacher-Community Associations, Local Government Units, Municipal Health Offices on:
 - identification of residents in the community who have come home from any SARS - affected country/area;
 - referral of pupils/students/teachers with fever or who suffer from respiratory infection;
 - delineation of responsibilities between and among the agencies;
 - maintenance of environmental sanitation in the schools and communities;
 - monitoring and assessment of the implementation of the local Anti-SARS Action Plan; and
 - information and educational campaign against SARS.
- 4. All school heads and health personnel are likewise instructed to conduct during the National School Maintenance Week (Brigadh Eskwela) on May 19 23, 2003, an intensive information campaign among parents and teachers on the prevention of SARS, and to take the lead in the clein-up drive to prevent diseases.
- 5. All Regional Health and Nutrition Unit Staff and division schools medical officers shall be trained as trainors on the various aspects of the Anti-SARS campaign, more particularly on the strategies to prevent SARS and what to do in case a SARS suspect is identified in the community. The Regional/Division Anti-SARS Action Plans shall be formulated during the training, and the trained staff shall immediately operationalize such plans in their area; of responsibility.
- 6. Regional Directors shall prepare and submit a mentally report to the Office of the Secretary, through the Health and Nutrition Center, using the DepEd Anti-SARS e-mail addresses and hotlines, on the accomplishments and actions taken in compliance with this Department Order.
- 7. Enclosed for ready reference are the relevant Information on SARS (Enclosure C) for use in informing our stakeholders on the nature, transmission, signs and symptoms, prevention and control of SARS, Guidelines on the Operationalization of the Preventive Alert System (Enclosure A) and the DepEd Anti-SARS Hotlines (Enclosure B).
- 8. Immediate dissemination of and compliance wifl this Order is directed.

EDIL ERTO C. DE JESUS Secretary

Encls.:

As stated

Reference:

None

Allotment: 1-(D.O. 50-97)

To be indicated in the <u>Perpetual Index</u> under the following subjects:

BUREAUS & OFFICES CAMPAIGN EMPLOYEES HEALTH EDUCATION OFFICIALS

OPERATIONALIZING THE PREVENTIVE ALERT SYSTEM IN SCHOOLS (PASS)

- 1. The Preventive Alert System 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 Preventive Alert System in their respective schools.
- 3. Teachers in-charge shall explain in class how PASS works:
 - Pupils/students will observe the well-being of their own classmates and if someone amongst 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 will be reported immediately to the principal.
 - The principal shall notify the family/guardian member of the sick child. A face mask should be worn by the feverish person and immediately referred to the school physician for evaluation using the SARS screening for persons with fever or history of fever. 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 other employee who has fever regardless of cause will be requested for home quarantine for 14 days.
 - The illness of the student, teacher or another school employee should be closely followed up by the health personnel.
 - School children on home quarantine shall be given provided lessons/materials for home study.
- 4. The Procedures for Outpatient Screening for SARS and the School SARS SOP shall be used by all health personnel in the detection of cases.
- 5. The school principals shall closely coordinate with the barangay health workers and with the municipal health officers/Anti-SARS Task Force relative to any resident in the community who has traveled to and returned from a SARS-affected country/area.
- 6. School heads shall conduct daily monitoring of health status of children and personnel, and maintain a record on health status.
- 7. School principals are expected to take the lead in operationalizing the PASS and to relay relevant/urgent information to the Schools Division Superintendent/Anti-SARS Task Force and such information be likewise relayed to the Office of the Secretary, Attention: Health and Nutrition Center utilizing the DepEd Hotlines and E-Mail addresses (Enclosure B)

DepEd Hotlines and E-Mail Addresses

DepEd Central Office Anti-SARS Hotlines DepEd Anti-SARS Text Messaging Type Name _ School _ / Town _ Message		: (02) 633-72-45 / (02) 687-2520 : 0919 – 4560027	
I	(072) 888 – 6237	ΙΧ	(062) 991 – 1906
II	(078) 844 – 1862	Х	(08822) 722 - 652 / (08822) 722 - 651
III	(045) 860 - 5214	XI	(082) 221 – 1210
IV A & B	(02) 633 – 0206	XII	(064) 421 – 2691
V	(052) 820 – 8417	ARMM	(064) 421 – 5320
VI	(033) 335 – 0207	CARAGA	(085) 225 – 5578
VII	(032) 255 – 0091	NCR	(02) 922 – 7323
VIII	(053) 323 – 5248	CAR	(074) 422 - 5153
DenEd Anti-	SARS E-Mail Addresses	· · ·	thd shac@danad gay ah
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			rnavarrez@deped.gov.ph
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STOP SARS ATTACK

What is SARS? What causes it?

SARS is an acronym for "Severe Acute Respiratory Syndrome".

It is severe because it can cause a rapidly progressing pneumonia. About 6% (or 6 in 100), usually the elderly, may die of the infection.

It is acute, meaning it has a sudden onset, affecting previously healthy individuals. "Respiratory" refers to the main part of the body that is affected, the respiratory system or the lungs. The term "syndrome" stands for the group of signs and symptoms of SARS.

SARS is caused by a new virus that belongs to the Coronavirus family, the same family to which the common cold also belongs.

What are the signs and symptoms of SARS?

SARS starts as a sudden onset of fever, often high grade (>38°C), and body weakness, muscle aches and chills, similar to any viral infection like influenza. About three days after, the patient with SARS will develop signs of pneumonia such as cough and difficulty of breathing.

How is SARS transmitted? How can we avoid getting SARS?

A person can get SARS from another person with SARS through close person-to-person contact. The most common route of transmission is through droplet spread, that is, when the unaffected person inhales or comes in contact with droplets of mucous that comes out of the affected person when he/she coughs or sneezes. Scientists are still studying the possible spread of the virus through feces and urine because the viruses are detected in these.

Persons can avoid getting SARS if all SARS patients are identified immediately before they become infectious to others.

If all SARS patients are immediately isolated in the hospital until they recover and are no longer infectious, SARS will not spread in the community.

From now on, everybody with fever and signs of infection should not go to school or to work and should avoid being near other people, even their own family, until they are sure they do not have SARS.

If people ignore the fever and spread the SARS virus around, it will be very hard to stop the spread of the virus.

Source: Department of Health

Health Advisory on SARS for Schools, Colleges and Universities

It is those who get sick who should think of the prevention of the infection to others around him/her. Those who are not sick can try to avoid getting in close contact with someone who has SARS.

How can we differentiate SARS from other diseases or infections that also cause fever?

The doctors are using 3 criteria as a first net to catch those who may have SARS (suspect SARS):

- 1. travel or residence in a SARS affected country the previous 14 days before the onset of the illness, or
- 2. having taken cared of, lived with or come in contact with bodily secretions of another person with SARS, and
- 3. fever or history of fever within 14 days of travel or close contact with a person with SARS.

Those with either 1 or 2 and 3 are suspected to have SARS. They will have to be closely observed in isolation from the others until the person develops other signs that are more definitely SARS, such as difficulty of breathing as a sign of pneumonia or chest x-ray showing pneumonia.

The other infections also start the same way as SARS, but will also reveal themselves when the sick person develops hemorrhage as in dengue hemorrhagic fever or the typical rashes of measles. There are other bacteria and viruses that can also cause pneumonia, and differentiating SARS from these will involve much hospital laboratory testing and clinical observation of the patient.

For the ordinary person, it is indeed very difficult to tell the difference between SARS and the other infections, and by that time you can tell the difference, SARS would have infected others already. Therefore, any fever should be regarded with caution.

Home rest and home isolation until the real disease reveals itself will help a lot in preventing SARS from spreading.

How can we prevent SARS in the school and surrounding community?

The school should prepare itself to detect and isolate students who may come down with SARS. A School SARS Prevention and Control Standard Operating Procedure (SOP) should be developed and widely disseminated. This SOP should include all the school activities to inform parents and students about SARS and how to avoid it, and the procedures to follow when a student, a teacher or other school employees develop a fever. The most important procedure is to ensure that all students, teachers and other school employees stay home at the first sign of fever. Attached, Annex 1, is a list of the most important items that should be included in the school SARS SOP.

The school should be aggressive in its information drive to inform parents of the importance of cooperation with the SOP. Children should also cooperate fully so that they come forward when they feel febrile or weak. However, care must be taken to avoid malingering.

An important component of SARS prevention is keeping the school premises and contact surfaces clean and dis-infected. Daily dis-infection with the standard bleaching agents will prevent the virus from growing in the toilets and other wet areas. Mopping and drying after dis-infection will also prevent viral growth.

The school health staff should also learn to identify SARS suspect using the DOH triage screening for patients with fever or history of fever, Annex 2. A place should be provided to separate the febrile patient from others who may be suffering from non-febrile illness. Basic supplies, such as N95 face masks, soap and water for handwashing, should also be provided.

The community around the school, including the vendors, school bus drivers and other people who come in contact with the students and school employees should also be provided with adequate awareness on SARS and their cooperation should be sought.

What are the other roles of the school in terms of prevention and control of SARS?

The school should also be the source of timely and accurate information about SARS. The Department of Health will issue health advisories time and again. The schools should receive the official announcements and disseminate these. Unconfirmed rumors should not be disseminated; instead, these should be verified through the official channels of the Department of Education.

Much can be done by the schools and colleges through consistent messages and appeal for public cooperation, especially for immediate detection of suspect SARS and quarantine, a difficult but necessary sacrifice for the other members of the community. Good personal hygiene can be instilled if these are started among the very young children. These practices should include covering the mouth and nose when coughing, frequent handwashing especially after coming from the toilet, and no spitting anywhere.

What should be done if a student gets SARS? If a teacher, administrator or school employee gets SARS?

If a student, teacher or employee was detected to have SARS, the school should assist the health authorities and local barangay leaders in identifying the persons who got into close contact with the SARS patient. They should help convince these contacts to go into quarantine and/or treatment. When the patient recovers from SARS, he or she should be assisted in integrating back into the school and community. While the scientists are still studying the matter for SARS, other viral infections usually confer immunity so that a person who has recovered from SARS is not longer infectious.

What should the school physician/nurse or administrator report to the DOH? To DepEd? When and how?

Aside from the cases of suspected SARS and their contacts, the DOH does not require any other information from the schools. School physicians, though, might want to monitor the cases of fever in their school to detect any rise, but this should be done not only for SARS but for other illnesses like dengue and measles as well. Appropriate prevention and control measures can be done when outbreaks in the school are detected early enough.

How should the school physician or nurse quickly evaluate whether a student with fever has SARS or not with the least risk of getting infected?

Annex 2 is a guide for outpatient screening of persons with fever or history of fever. School physicians and nurses can use this to guide their detection and referral actions.

What should the school administrators do if the school does not have a school physician or nurse?

Schools with no school physicians or nurses can make arrangements with the local municipal health officer or rural health midwife for screening of patients with fever or history of fever.

What should the school teach the students about SARS?

All students and employees of the school should know what SARS is, what causes it, how it is transmitted and avoided so that they will not be scared of it or panic about it. Cooperation will prevent the spread of SARS. This has already been done in countries like Vietnam. We can also do the same thing in the Philippines.

What should the school tell the parents about SARS?

Parents will be afraid that their children might get SARS in the school. Re-assure the parents by explaining what SARS is, how this is avoided and what the school is doing to protect the children and the school and community. Motivate them to re-assure their children yet demand their commitment to take their children's temperature daily and to cooperate with all the standard procedures developed by the school.

What are the DOH STOP SARS ATTACK Hotlines?

The national DOH STOP SARS ATTACK hotlines are: 741-7048, 743-8301 loc 1901 and 0916-466-5823. The hotlines of the Bureau of Quarantine are: (632) 527 - 5552, (632) 527 - 4654 up to 55 and Fax: (632) 527 - 4678. There is also a DOH website: http://www.doh.gov.ph

Essential Contents of the School SARS SOP

Routine daily temperature taking before going to school. (Temperature may or may not be taken again before the students enter the school premises or before mingling with the other students)

Routine washing of hands with soap before class, in between subjects, and after going to the toilet.

Home stay (with avoidance of contact with family members who are well) for students, teachers and other employees who come down with fever, until 2 days after the fever subsides.

What to do when a student, teacher or other school employee is detected to have fever while in school

(Usually, this should include putting a face mask on the feverish person and taking him to the school physician for evaluation using the SARS screening for persons with fever or history of fever; if the school does not have a physician, the nearest health center physician or rural health midwife can be consulted).

Depending on assessment, the student, teacher or other employee will be sent home immediately (conduct home if possible, still wearing facial mask) or referred to a SARS referral hospital for further assessment or confinement. The illness of the students, teachers or other school employees who are sent home should be followed up. As soon as signs of pneumonia are detected, the patient should be confined in a SARS referral hospital.

The SOP should also include the persons who will be responsible for teaching parents, students and others about SARS, and the other school activities on SARS prevention and control.

Annex 2

Procedure for Outpatient Screening for SARS

Note: In all these steps, the triage personnel should wear a face mask and laboratory gown.

- 1. As soon as a patient arrives, ask if his/her complaint is fever or history of fever.
- Provide a new or newly cleaned face mask each to all patients with fever, ask them to wash their hands with soap and water, and then usher them to the SARS holding area.
- 3. Fill up the SARS screening form for each patient.
- 4. Depending on the assessment, refer the patient to the nearest SARS referral hospital (for suspect SARS) following pre-arranged procedure with referral hospital; or provide specific treatment and send home immediately for rest and home confinement. Advice how to avoid infecting other household members.
- 5. For Suspect case of SARS, the health staff should now wear an eye protection device and, keeping a distance of more that 3 feet from the patients, give additional health education and instructions on SARS while awaiting transportation to go to the SARS referral hospital: especially about what SARS is, what is going to happen in the hospital, and the need for immediate quarantine from his/her family, among others. Appropriate precautions should be followed during transport.
- 6. If the patient is to be sent home, the face mask may or may not be sent home with the patient.
- 7. If the patient needs more active monitoring, inform Barangay Chairperson and Barangay Health Worker of patients for active surveillance at home.

Flow Chart for Triage at Health Center/ Barangay Health Station For Patients with Fever or History of Fever

