



November 20, 2018

DIVISION MEMORANDUM
NO. 679, s. 2018

2018 SCHOOL HEALTH CONGRESS

TO: All School Health Personnel
All Others Concerned

1. For information and guidance of all concerned, attached is a Regional Memorandum No. 0880, s. 2018 dated November 19, 2018 entitled : 2018 School Health Congress.
2. The Bureau of Learner Support Services Division, School Health Division will hold the 2018 School Health Congress on December 4-7, 2018 with the theme “ Empowering Schools through the Convergence of Health & Nutrition Programs” to be held at Fontana, C.M. Recto Hi-way, Clark Freeport Zone, Pampanga.
3. The identified three health personnel are the following :

Dr. Vida N. Romero
Mr. Nicasio Degamo
Mrs. Rowena Pizarra
4. Kindly refer to the attached communication for complete details.
5. Immediate dissemination of this Memorandum is desired.


VIRGINIA C. ZAPANTA, Ed. D., CESO V
Schools Division Superintendent 



REPUBLIKA NG PILIPINAS
 REPUBLIC OF THE PHILIPPINES
KAGAWARAN NG EDUKASYON
 DEPARTMENT OF EDUCATION
REHIYON VII, GITNANG VISAYAS
 REGION VII, CENTRAL VISAYAS
 Sudlon, Lahug, Cebu City



REGIONAL MEMORANDUM NO. 0880

NOV 19 2018

TO : ALL SCHOOLS DIVISION SUPERINTENDENTS

FROM : JULIET A. JERUTA, CESO IV, Director IV
 SALUSTIANO T. JIMENEZ, CESO VI, OIC-ASSISTANT REGIONAL DIRECTOR
 Office of the Regional Director

SUBJECT : 2018 SCHOOL HEALTH CONGRESS

DATE : November 19, 2018

- The Bureau of Learner Support Services Division, School Health Division (BLSS-SHD) will hold the 2018 School Health Congress on December 4-7, 2018 with the theme "Empowering Schools through the Convergence of Health & Nutrition Programs" to be held at Fontana Hotel, C.M. Recto Hi-way, Clark Freeport Zone, Pampanga.

The Congress aims to :

- 1.1 present the overall direction of school health & nutrition in the context of the overall education agenda;
- 1.2 showcase best practices in school-based convergence of health & nutrition programs;
- 1.3 enhance the capacity of school health & nutrition personnel through relevant updates and information in the fields of medicine, dentistry, nursing and nutrition that are valuable in advancing DepEd's flagship programs; and
- 1.4 foster the spirit of camaraderie among school health and nutrition personnel.

- In this regard, this office through the Educational Support Services Division (ESSD) request for the attendance of your identified three health personnel per division. Registration will start on Dec. 4, 2018 from 8:00 am to 7:00 pm. Hotel check-in will start at 2:00 pm and the first meal to be served is PM snacks; check-out is on Dec. 7, 2018 after breakfast. The participants are encouraged to arrive on December 4, 2018 from 8:00 am to 7:00 pm while registration process is still open for that day;
- The opening program will be on December 5, 2018 at 8:30 am where each region are required to attend on regional attire. Region 7, will wear Kimona attire for female and Camiso Chino with dark blue panuelo for the male. For the Socials and Awards Night, service awardees who will be 30 years as of Dec. 31, 2018 and those who will be retiring on Dec. 2018 will wear formal attire while others may also be in their formal attire or at least business casual attire.

Office of the Director (ORDir), Tel. Nos.: (032) 231-1433; 231-1309; 414-7399; 414-7325; Office of the Assistant Director, Tel. No.: (032) 255-4542
 Field Technical Assistance Division (FTAD), Tel. Nos.: (032) 414-7324 Curriculum Learning Management Division (CLMD), Tel. Nos.: (032) 414-7323
 Quality Assurance Division (QAD), Tel. Nos.: (032) 231-1071 Human Resource Development Division (HRDD), Tel. No.: (032) 255-5239
 Education Support Services Division (ESSD), Tel. No.: (032) 254-7062 Planning, Policy and Research Division (PPRD), Tel. No.: (032) 233-0010

DEPED REGIONAL OFFICE DIVISION
 DIVISION OFFICE
 DIVISION OFFICE
 BY: [Signature]



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Certificates of Appreciation will be given coursed through the representative of the Regional Office to the activity and the awardees are not expected to attend the activity unless they are one of the official participants to the Congress. Each division are humbly requested to bring one unbreakable item for the door prize.

4. 2018 OK sa Deped photo contest will also highlight the event. Each region are encouraged to participate. Herewith are the mechanics of the contest and Entry Form for those interested division to participate showcasing their best;
5. Letter of Acceptance is respectfully requested for the downloading of funds duly signed by Schools Division Superintendents. Due to time constraints, it is respectfully requested to treat this with utmost importance and send thru fax # (02) 632-9935 or email to blss.shd@deped.gov.ph Board and lodging of the participants shall be charged against School Health Division Funds (BLSS-SHD) while travelling and other incidental expenses are charged to the downloaded funds from the central office (BLSS-SHD) directly to your division. For further details please contact DR. MELISSA M. PARADELA, Regional Supervising Dentist at the following numbers 2547062 – ESSD office, 09199694226/09770511926 or email to the following:
melissa.paradela@deped.gov.ph/paradelamelissa@gmail.com
6. Herewith are the list of three identified participants to said activity and the list of service awardees (30 years up) and those retiring by December 2018.
7. For information and compliance.

JL/ST/hrs

2018 OK sa DepEd Photo Contest

MECHANICS¹

Eligibility

1. The Contest is exclusively open to all DepEd school health personnel. All entries shall be original photographs taken by the school health personnel.

Specifications of Entries

2. Entries should be action photos featuring the flagship programs under the *Oplan Kahusugan sa Department of Education*, namely: (1) School-Based Feeding Program; (2) National Drug Education Program; (2) WASH in Schools; (4) Adolescent Reproductive Health; (5) Medical, Dental, and Nursing Services; and (6) School Mental Health. Also encouraged to be submitted are photos featuring the support programs such as Gulayan sa Paaralan Program, Nutrition Support, and Comprehensive Tobacco Control.
3. Following are the image requirements:
 - a. All photos must be original. School health personnel who took/ will take the photos shall individually accomplish and submit the Entry Form (Annex A), containing a declaration that they are the ones who took the photos.
 - b. The digital copy should have a minimum resolution of 300 dpi and minimum size of 2400 x 3000 pixels.
 - c. Photos should not be digitally enhanced or altered (manipulated or applied with special effects using photo-editing software).
4. Photos shall have been taken from the July 13 to November 30, 2018 by the school health personnel themselves.
5. Photos must not include the personnel's names or the names of the Schools Division or the Region they are from.
6. Photos must not feature brand names or identifiable logos and trademarks of commercial products or services.
7. Entries should have not been submitted to or won in any other contests outside DepEd.
8. Entries should not contain obscene, offensive, or inappropriate content.

¹ Some of these mechanics and some of the contents of the Entry Form have been based on the guidelines prepared by Philippine National Volunteer Service Coordinating Agency for the agency's Volunteerism Photo Contest 2018.

9. Prior to the submission and exhibition of their entries, the school health personnel who took/ will take the photos shall be responsible for securing permission from the persons, especially minors, who appear in the photo, using the attached Consent, Waiver, Indemnity and Release Form of the Department of Education (Annex B). Scanned copies of the accomplished forms shall also be saved in the DVD to be submitted.

Submission and Presentation of Entries

10. BLSS-SHD will not accept individual submissions directly from the school health personnel. Each Regional Office shall consolidate the submissions of their respective school health personnel, and screen and select the official entries of their region for submission to BLSS-SHD and for exhibit during the School Health Congress.
11. Every Regional Office shall submit and exhibit at least 10 but not more than 30 photos.
12. Digital copies of all official regional entries (in .JPG, .jpeg, or .png format) shall be saved in a DVD and submitted to the Congress Secretariat on December 4, 2018. The same photos shall be displayed in an exhibit that the Regional Office will set up during the 2018 School Health Congress in spaces that will be provided by the Congress Steering Committee.
13. All photos shall be properly captioned, both in the exhibit and in the DVD to be submitted. The Regions are given the freedom to creatively present the captions in the exhibit. For the DVD submission, captions shall be included in the Entry Form (Annex A).

Judging and Selection of Winners

14. The photos will be judged during the 2018 School Health Congress, using the following criteria:

Relevance to <i>OK sa DepEd</i> The photograph best represents the program and depicts the message that it is <i>OK sa DepEd</i> .	30%
Aesthetics The photograph is visually pleasing.	30%
Originality The subject and the message are presented in an ingenious way.	20%
Overall Impact The photograph has a strong emotional appeal and recall.	20%

15. One best photo shall be selected for each school health program. The school health personnel who took/ will take the winning photo per flagship program shall receive a Certificate of Recognition and a cash prize of PhP

5,000.00. However, participating school health personnel can win only once.

16. The regional exhibits will be judged, using the following criteria:

Relevance to <i>OK sa DepEd</i> The exhibit best showcases the goals and objectives of <i>OK sa DepEd</i> .	30%
Aesthetics The exhibit's design is coherent and visually pleasing.	30%
Originality The exhibit stands out and uniquely offers the respective region's interpretation of <i>OK sa DepEd</i> .	20%
Overall Impact The exhibit is enticing and inviting to passersby.	20%

17. The Regional Offices with the best exhibits shall also be awarded with Certificates of Recognition and the following cash prizes:

Best Exhibit	PhP 50, 000.00
Second Best Exhibit	PhP 30, 000.00
Third Best Exhibit	PhP 10, 000.00

Annex A. Entry Form

Region : _____

Entry No.	<small>x of xx</small>	File name	<small>As saved on the DVD</small>
< Paste photo here >			
Title of the photo			
School health program			
Photo taken by	<small>Surname, first name, middle initial</small>		
Position/ designation	<small>Also indicate office of assignment</small>		
Agreement/ Authorization			
<p>1. I agree to abide by the mechanics of the 2018 OK sa DepEd Photo Contest.</p> <p>2. I declare that the photo above was taken on ___/___/___ (date/month/year).</p> <p>3. I declare that I have secured permission from the concerned people included in my photograph, per the attached Consent, Waiver, Indemnity and Release Form.</p> <p>4. I declare that the entry I submitted is original. I agree that cases of fraud, deception or plagiarism shall be ground for disqualification in all current and future contests, forfeiture of prize won, and appropriate administrative sanctions, where applicable.</p> <p>5. I give permission to DepEd, especially the Office of the Undersecretary for Administrative Affairs, and the Bureau of Learner Support Services- School Health Division to use my entry, in whole or in part, for its advocacy, promotion, and related activities.</p> <p>6. DepEd shall be exempt from any liability in the circumstances that the entry submitted is found to infringe on the intellectual property rights of any copyright owner.</p>			
SIGNATURE OVER PRINTED NAME		DATE	
Caption			
Caption written by	<small>Surname, first name, middle initial</small>		
Position/ designation	<small>Also indicate office of assignment</small>		
Agreement/ Authorization			
<p>1. I agree to abide by the mechanics of the 2018 OK sa DepEd Photo Contest.</p> <p>2. I declare that the all information presented in the caption is true and correct to the best of my knowledge and any misrepresentation of facts, by omission or addition, shall be ground for disqualification in this contest.</p> <p>3. I declare that the caption I wrote is original. I agree that cases of fraud, deception or plagiarism shall be ground for disqualification in all current and future contests, forfeiture of prize won, and appropriate administrative sanctions, where applicable.</p> <p>4. I give permission to DepEd, especially the Office of the Undersecretary for Administrative Affairs, and the Bureau of Learner Support Services- School Health Division to use this caption, in whole or in part, for its advocacy, promotion, and related activities.</p> <p>6. DepEd shall be exempt from any liability in the circumstances that the entry submitted is found to infringe on the intellectual property rights of any copyright owner.</p>			
SIGNATURE OVER PRINTED NAME		DATE	



Department of Education Republic of the Philippines

In line with the mission of the Department of Education (DepEd) to provide quality, equitable, culture-based, and complete basic education where:

- Students learn in a child-friendly, gender-sensitive, safe, and motivating environment;
- Teachers facilitate learning and constantly nurture every learner;
- Administrators and staff, as stewards of the institution, ensure an enabling and supportive environment for effective learning to happen;
- Family, community, and other stakeholders are actively engaged and share responsibility for developing life-long learners;

And in accordance with the DepEd's thrust to continuously improve itself to better serve its stakeholders, an effective communications strategy paves the way to a more efficient public policy formulation and implementation.

The Department of Education and its representatives are therefore seeking your permission to take and make use of voice recordings and/ or audiovisual images of you/ your children/ your students for the purposes stated above.

Please furnish us with your full name and signature on the next page should you confirm your consent to the proposed use of your/ your children/ your students' photographs and video/voice recordings in our communications and publicity materials.

Thank you very much.

Department of Education

Republic of the Philippines

CONSENT, WAIVER, INDEMNITY and RELEASE

I, _____, M/ F, _____ years of age, hereby grant permission to the Department of Education (DepEd) and its representatives to make recordings of my voice and to take photographs and /or videos in which I appear in, to be used for the communications and various public campaigns of the Agency be it in print, broadcast, and/or electronic media, at the event and location stated below:

Production name/ Project title: _____

Location: _____

I acknowledge that the DepEd owns all rights to these images and recordings. I further grant the DepEd and its representatives the right to use, display, exhibit, reproduce, distribute, and create derivative works of these images and recordings in any media now known or later developed.

I hereby waive any right to inspect or approve the use of the images or recordings or of any written derivatives. I further waive all moral rights. I also waive any right to royalties or other compensation arising from or related to the use of the materials.

I hereby release, defend, indemnify, and hold harmless the DepEd and its representatives from and against any claims, damages, or liability arising from or related to the use of the images, recordings, or materials, including but not limited to claims of defamation, invasion of privacy, or rights of publicity or copyright infringement, or any misuse, distortion, blurring, alteration, optical illusion or use in composite form that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

I am 18 years of age or older/ I am accompanied by my legal guardian, and I am competent to enter into this contract/ NAME OF GUARDIAN: _____ has legal authority to enter into this contract. I have read this document before signing below, and I fully understand the contents, meaning and impact of this consent, waiver, indemnity and release.

This consent, waiver, indemnity and release is binding on me, my heirs, executors, administrators and assigns.

Signature mm / dd / yyyy

Signature over printed name of Parent /Guardian/ Teacher mm / dd / yyyy

Address: _____

Home phone: _____ Mobile phone: _____

DepEd Complex, Marikina Avenue, Pasig City, Philippines 1600
Tel: (632) 633-7208 / 633-7228 / 632-1361 • Fax: (632) 735-6167
www.deped.gov.ph

A. REGION VII. PARTICIPANTS FOR SCHOOL HEALTH AND NUTRITION CONGRESS

REGION VII

NO.	1. BOGO CITY	NO.	11. TAGBILARAN CITY
	NAME	31	ROMERO, MAXVIDA
1	HEREDIA, NEIL	32	DEGAMO, NICASIO
2	FERNANDEZ, SARAH	33	PIZARRAS, ROWENA
3	MACASIL, XYZELE LOVE		12. TALISAY CITY
		34	NGUHO, MAGNOLIA
	2. BOHOL	35	DAAN, BYRCELES
4	HALASAN, SATURNINA	36	BORNEL, ANTHONY
5	GEMENTIZA, CORA		13. TOLEDO CITY
6	DUAVIS, MARILOU	37	UY, MELANY CRISTY
	3. CARCAR CITY	38	PATEÑO, BLESSY
7	ENRIQUEZ, YVETTE	39	HOYOHOY, SHONNA
8	LOQUIAS, ALMA		14. BAIS CITY
9	AGNES, WAMILYN	40	GALERA, DARWIN
	4. CEBU CITY	41	PINERO, PEARL DEONETH
10	CABAÑES, CANDELARIA	42	FLOREN, MYRA JOY
11	CUIZON, MARCIANA		15. BAYAWAN CITY
12	SON, BERNARDO	43	FABORES, EMMY LANE
	5. CEBU PROVINCE	44	CADIZ, HERLANY
13	BERNALES, ASTERTERIE	45	VALLE, GERAH MEA
14	PAYOT, REYNALDO		16. DUMAGUETE CITY
15	GUINOCOR, GLYNNIS	46	BALODO, AUDREY
	6. DANA O CITY	47	DEMEGILLO, CLARISSA V.
16	ALOTA, MONALINDA	48	PARTOSA, CAROLYN
17	DEJORAS, MARIA GAILLE		17. GUIHULNGAN CITY
18	CATUBIG, JESVIE MAE	49	CAÑEDA, AURIEEN
	7. LAPULAPU CITY	50	BULIBULI, GRAZELLE ANN
19	ABING, JOSEPH	51	ABSIN, QUENNIE
20	UY, ROMULO		18. NEGROS ORIENTAL
21	ABEJAR, ALMA	52	CONSING, JEAZON MARK
	8. MANDAUE CITY	53	ASDILLO, MELCHORA
22	ABELIDA, LUCILA	54	SIBUL, JULIE
23	YUAMADOR, GINA		19. TANJAY CITY
24	URBIZTONDO, MA. LIZA	55	TABASA, ISABEL
	9. NAGA CITY	56	TABALOC, MARIA XYZA ISABEL
25	TOMIMBANG, JANICE	57	ZERNA, EVELYN
26	GARRIDO, JAMES LEE		
27	RAVANES, LOTIS		REGIONAL OFFICE
	10. SIKUJIOR	58	REGIONAL DIRECTOR
28	FUDOLIG, JANE EYRIE	59	ASST. REGIONAL DIRECTOR

B. NATIONAL SERVICE AWARDEES FOR REGION 7

NAME (Last, First, MI)	PLANTILLA POSITION	DIVISION OFFICE	NUMBER OF YEARS IN DEPED	WILL RETIRE BY DECEMBER 2018
Grace B. Espos	ND II	Region 7	30	
Saturnina G. Halasan	Dentist II	Bohol	31	
Susan S. Calupisan	Dentist II	Bohol	31	
Ma. Cecilia D. Fuentenegro	Dentist II	Bohol	34	
Ofelia R. Bulante	Nurse II	Bohol	31	
Judith G. Tunacao	Nurse II	Bohol	30	
Edgar Sarigumba	Dental Aide	Bohol	30	Yes (Nov. 2018)
Ramon D. Solis	Dental Aide	Bohol	32	
Teodoro C. Cucharo	Dental Aide	Bohol	31	
Arquelao P. Montuya	Dental Aide	Bohol	37	
Candelaria E. Cabanes	Dentist II	Cebu City	32	
Jocelyn P. Lataza	Nurse II	Cebu City	33	
Elna N. Sinajon	Nurse II	Cebu City	31	
Ma. Glenna Cabrera	Nurse II	Cebu City	33	
Bernardo P. Son	Nurse II	Cebu City	30	
Juditho S. Barretto	Dental Aide	Cebu City	34	
Alan C. Leonar	Dental Aide	Cebu City	33	
Josefina Minerva M. Perales	Nurse II	Cebu Province	30	
Reynaldo Payot	Nurse II	Cebu Province	35	
Carolyn P. Partosa	Nurse II	Dumaguete City	40	
Romulo C. Uy	Dentist II	Lapulapu City	32	
Camilo S. Baring	Dental Aide	Mandaue City	33	
Carmelita R. Aballe	Dentist II	Negros Oriental	33	
Marilyn Alcala	Dentist II	Negros Oriental	33	
Myrna Roy Bajar	Nurse II	Negros Oriental	31	
Elizabeth S. Quirit	Nurse II	Negros Oriental	34	
Evelyn A. Tamparã	Nurse II	Negros Oriental	39	
Florevil Sheba D. Salimbagat	Nurse II	Negros Oriental	30	
Ramon C. Batiancila, Jr.	Dental Aide	Negros Oriental	32	
Eric Exequil Calumpang	Dental Aide	Negros Oriental	30	
Antonio Madia	Dental Aide	Negros Oriental	36	
Renario Pontinela	Dental Aide	Negros Oriental	38	
Deodato Torres	Dental Aide	Negros Oriental	33	
El P. Malolot	Dental Aide	Siquijor	34	