



Republic of the Philippines
Department of Education
Region VI-Western Visayas
SCHOOLS DIVISION OF KABANKALAN CITY

**Office of the Schools Division
Superintendent**

DIVISION MEMORANDUM

NO. 109, s. 2022

MAR 23 2022

**IMPLEMENTATION OF SCHOOL-BASED FEEDING PROGRAM (SBFP)
FOR SY 2021 -VITAMIN SUPPLEMENTATION FOR THE SBFP BENEFICIARIES**

To: OIC-Asst. Schools Division Superintendent
CID & SGOD Chiefs
Public Schools District Supervisors
All Elementary School Heads
All School-Based Feeding Program Coordinators
All Others Concerned

1. The Department of Education (DepEd), through the Bureau of Learner Support Services – School Health Division (BLSS-SHD), maintains its commitment to provide good nutrition to learners amidst the COVID-19 pandemic. As such, it shall continue the implementation of School-based Feeding Program (SBFP) to address hunger and encourage learners to enroll, contribute to the improvement of their nutritional status, provide nourishment for their growth and development, and enhance and improve their health and nutrition values.
2. DepEd Order (DO) No. 31, s. 2021 titled Operational Guidelines on the Implementation of School-Based Feeding Program for SY 2021-2022 shall be used as reference in the implementation of the program.
3. In this connection, this Office shall implement the School-Based Feeding Program in compliance with DO 031, s. 2021 titled Operational Guidelines on the Implementation of School Based Feeding Program *and Schools* based on the DOH Administrative Order No. 2020-0015 or the *Guidelines on the Risk-Based Public Health Standards for COVID-19 Mitigation*.



Address: Tayum Street, Barangay 8, Kabankalan City, Negros Occidental
Telephone Number: 471-2004 | 471-2003
E-mail: kabankalan.city001@deped.gov.ph



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4. The vitamin supplementation will cover all SBFP SY 2021-2022 beneficiaries. The schedule of delivery for the following Drop- Off Locations will be as follows:

| DISTRICT | SCHOOL | DATE |
|----------|---|------------------------------|
| K-1 | DIVISION OFFICE | March 24, 2022, 8:00-11:00AM |
| K-2 | TAMPALON ES | March 23, 2022, 8:00-11:00AM |
| K-3 | TAPI ES | March 23, 2022, 8:00-11:00AM |
| K-4 | TABUGON ES | March 23, 2022, 8:00-11:00AM |
| K-5 | FLORENTINO GALANG SR. NHS- MAIN CAMPUS | March 23, 2022, 1:00-3:00PM |

5. Faculty member or authorized school representative assigned to pick up supplies are requested to be at the Drop-Off Location at the designated time. An authorization letter is needed if the person is not the SBFP Component Coordinator. Drop Off locations shall not be held liable for any loss of the unclaimed supplies.

6. Each beneficiary will receive ONE (1) bottle of 120mL of Ascorbic Acid with Zinc Syrup. Dosage and administration will be as follows:

| Age | Dosage |
|----------------|------------------------|
| 9-13 years old | 5-10mL (1-2 teaspoons) |
| 4-8 years old: | 5mL (1 teaspoon) |

7. Schools shall ensure proper storage of vitamin products following the requirements: clean and dry place, avoid direct sunlight, avoid the products being wet, follow the First Expiry, First Out (FEFO) and stacked at maximum of 5 boxes high and preferably not touching the floor.

8. Any adverse reaction or untoward incident regarding this vitamin supplementation must be properly documented and reported to the schools division office, through the Health and Nutrition Unit.

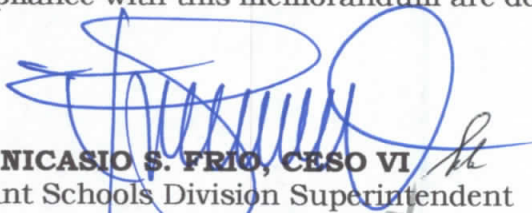
9. School-based feeding Coordinators are requested to check the Official SBFP Page daily for updates and announcement. Implementers are to secure consent and waiver form (Enclosure No. 1) using the form provided prior to the supplementation. Distribution list (Enclosure No. 2) must be accomplished during the distribution to beneficiaries. Inspection and Acceptance Report (Enclosure No. 3) must also be filled out correctly during the delivery.





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10. The transportation expenses to cover travel, hauling and other school expenses relative to the implementation of the program shall be chargeable against school MOOE.
11. School Heads are enjoined to extend full administrative support. Likewise, CID and SGOD personnel shall monitor the implementation of the School-based Feeding Program.
12. Products given are NOT MEANT TO BE RESOLD or distributed to other beneficiaries or organizations.
13. All other provisions in the existing guidelines on the implementation of the School-Based Feeding Program as stated in No. 31, s. 2021 shall remain in force, unless sooner repealed, amended, or rescinded.
14. Strict compliance to health and safety protocol during the activity will be observed.
15. For more information, contact Mary Jane H. Butanas, RN at 09998234227 and Alma Vannessa G. Tanwani, RN at 09125915008 from the Health and Nutrition Unit.
16. Immediate dissemination of and compliance with this Memorandum are desired.


NICASIO S. FRIO, CESO VI
Assistant Schools Division Superintendent
Officer-in-Charge
Office of the Schools Division Superintendent

Enclosures:
As stated

References:

DO 031, S. 2021 - OPERATIONAL GUIDELINES ON THE IMPLEMENTATION OF THE SCHOOL-BASED FEEDING PROGRAM FOR SCHOOL YEAR 2021-2022

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

Health Education
Learners
Policy Programs
Schools



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REGION VI-WESTERN VISAYAS
Schools Division Office of Kabankalan City



PAHANUGOT

Ako nagapasugot nga tagaan/patumaron ang akon bata nga si _____

sang suplemento nga bitamina (**ASCORBIC ACID + ZINC**) para sa iya ikaayong lawas.

Nakahangop ako nga makabulig ini para mangin mapagsik kag malayo sa sakit ang akon anak.

Ngalan kag Pirma / Petsa _____

*Ini nga bitamina para sa mga benepisyaryo sang Deped School-based Feeding Program SY 2021-2022

INSTRUKSYON SA PAGPATUMAR SANG BITAMINA

-Kada benepisyaryo magabaton sang isa ka botelya (120mL) nga bitamina

Dosage and Mode of Administration:

Kung imo bata naga edad sang:

9-13 years old:
5-10mL (1-2 ka kutsarita)

4-8 years old:
5mL (1 ka kutsarita)

- Ipa inom isa ka beses sa isa ka adlaw.
- Mas maayo kung ihatag ang bitamina pagkatapos pamahaw ukon panyaga
- Indi pag painitan ang botelya sang bitamina
- Ibutang ang bitamina sa lugar na indi malab-ot sang mga kabataan
- Kung may reaksyon pareho sang pagsuka, paglupot ukon allergy, i-untat ang paghatag sang bitamina
- Maga-tawag sa numero 09125915008 kung may palamangkutanon.



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SCHOOL-BASED FEEDING PROGRAM 2021
VITAMIN SUPPLEMENTATION FOR THE BENEFICIARIES
DISTRIBUTION RECORD

Name of School: _____

Date: _____

Each beneficiary will receive ONE (1) – 120mL bottle of Ascorbic Acid with Zinc Syrup

| | Name of Beneficiaries | Name of Parent / Guardian | Signature | No of Bottle |
|----|-----------------------|---------------------------|-----------|--------------|
| 1 | | | | 1 |
| 2 | | | | 1 |
| 3 | | | | 1 |
| 4 | | | | 1 |
| 5 | | | | 1 |
| 6 | | | | 1 |
| 7 | | | | 1 |
| 8 | | | | 1 |
| 9 | | | | 1 |
| 10 | | | | 1 |
| 11 | | | | 1 |
| 12 | | | | 1 |
| 13 | | | | 1 |
| 14 | | | | 1 |
| 15 | | | | 1 |
| 16 | | | | 1 |
| 17 | | | | 1 |
| 18 | | | | 1 |
| 19 | | | | 1 |
| 20 | | | | 1 |
| 21 | | | | 1 |
| 22 | | | | 1 |
| 23 | | | | 1 |
| 24 | | | | 1 |
| 25 | | | | 1 |

SBFP Coordinator:

Noted by School Head:

Date:

Printed Name and Signature

Printed Name and Signature



INSPECTION AND ACCEPTANCE REPORT

Entity Name : DepEd Kabankalan

Fund Cluster : _____

Supplier : **RAMELEX PHARMA**

IAR No. : _____

PO No./Date : _____

Date : _____

Requisitioning Office/Dept. : _____

Invoice No. : _____

Responsibility Center Code : _____

Date : _____

| <i>Stock/ Property No.</i> | <i>Description</i> | <i>Unit</i> | <i>Quantity</i> |
|--------------------------------|------------------------------------|-------------|-----------------|
| | Ascorbic Acid + Zinc Syrup (120mL) | bottle | |
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| <i>INSPECTION</i> | <i>ACCEPTANCE</i> |
|---|---|
| <p>Date Inspected : _____</p> <p><input type="checkbox"/> Inspected, verified and found in order as to quantity and specifications</p> <p>_____ Inspection Officer/Inspection Committee</p> <p>_____ Inspection Officer/Inspection Committee</p> | <p>Date Received : _____</p> <p><input type="checkbox"/> Complete</p> <p><input type="checkbox"/> Partial (pls. specify quantity)</p> <p style="text-align: center;"><u>ALFREDO N. NOMBRE, JR.</u> AO IV / Supply Officer</p> |