



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

September 12, 2022

DEPARTMENT CIRCULAR

No. 2022- 0470

TO: ALL UNDERSECRETARIES AND ASSISTANT SECRETARIES; DIRECTORS OF BUREAUS, SERVICES AND CENTERS FOR HEALTH DEVELOPMENT; MINISTER OF HEALTH - BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO; EXECUTIVE DIRECTORS OF SPECIALTY HOSPITALS AND NATIONAL NUTRITION COUNCIL; CHIEFS OF MEDICAL CENTERS, HOSPITALS, SANITARIA AND INSTITUTES; PRIVATE SECTOR PARTNERS; AND OTHERS CONCERNED

SUBJECT: Interim Operational Guidelines on the Implementation of Vaccination Activities during the BAKUNAHANG BAYAN: PINASLAKAS Special COVID-19 Vaccination Days (SVD) on September 26 - 30, 2022

I. RATIONALE

The Department of Health (DOH) launched the **PINASLAKAS campaign** last July 26, 2022 following the directives of the President to vaccinate 90% of Priority Group A2 population with the primary series and 50% of the eligible population to receive their first booster dose. In order to ramp up vaccination roll-out, the Department, with full support from the National Government and the Local Government Units (LGU), is adopting the settings-based approach in the COVID-19 vaccination implementation making the COVID-19 vaccines more accessible to the people.

Seven weeks after the First 100 Days commenced and the launch of the PinasLakas campaign, only a total of 25,143 (2.34%) Priority Group A2 have been inoculated while among the eligible population for first booster only 2,143,508 (9.0%) of the targets have been vaccinated. The weekly target jabs among the Priority Group A2 and the eligible population for

booster have not been met since the start of the campaign resulting in a higher weekly target for the remaining weeks of the First 100 Days.

In order to ensure that the targets for the First 100 Days are achieved, a weeklong vaccination drive “**Bakunahang Bayan: PINASLAKAS: Special COVID-19 Vaccination Days**” shall be simultaneously conducted nationwide from **September 26 to 30, 2022**.

In view of the foregoing, the Department provides the interim operational guidelines on the implementation of vaccination activities during the special COVID-19 Vaccination Days.

II. GENERAL GUIDELINES

Bakunahang Bayan for COVID-19 vaccine shall be conducted in the country to increase the wall of immunity against the COVID-19 virus in communities.

Table 1. Bakunahang Bayan Special Vaccination Days Target

Priority Age Group	COVID-19 doses to be administered	Target Number of Individuals
A2 Senior Citizen	2nd dose of primary series	95,148
12 years old and above	1st booster dose	1,952,093

The municipal and city target for the weeklong Bakunahang Bayan can be accessed through this link https://bit.ly/Mun_CityTargets. Note that the (-) negative values in the link provided refer to areas who have achieved more than 90% coverage for A2 population with the last dose of primary series, and 50% coverage for 1st booster dose.

III. IMPLEMENTING GUIDELINES

A. Preparatory Activities

1. Planning and Coordination

- a. Regional Level: Centers for Health Development and DOH BARMM shall present to the Regional Vaccination Operations Center the rationale for the implementation of Bakunahang Bayan: PINASLAKAS: Special COVID-19 Vaccination Days together with the governors of provinces and Local Chief Executives of cities and municipalities. Assist and provide technical support to implementing units in preparation for the bakunahang bayan.

b. All concerned implementing units are instructed to do:

- i. Granular analysis of data and vaccination coverages per catchment area or barangay. Regional/Local Vaccine Operation Centers (RVOC/LVOC) are directed to closely monitor the current vaccine and ancillaries inventory, number of allocated and near-expiry COVID-19 vaccines of at least 21 days. Strategic planning shall be done to ensure that these vaccines are utilized before expiry dates;
- ii. Mapping of areas with low vaccination coverages, focusing on LGUs with high density population for high yield accomplishment of coverage;
- iii. Microplanning of activities related to SVD strategies;
 - Utilization of various vaccination strategies, to include deployment of more mobile vaccination teams in the identified priority high yield areas and establishment of more temporary posts;
 - Integrating COVID-19 vaccination in other public health services and programs provided in the community ;
 - Conduct of intensive social mobilization and community engagement activities;
 - Coordination activities with DILG and Local Chief Executives (LCEs) to mobilize Barangay LGU non-HCWs to identify unvaccinated populations (barangay-level targets based on NVOC Advisory No. 2);
 - Engagement with private sectors throughout the Bakunahang Bayan and Pinaslakas Campaign;
 - Cooperation and involvement with all National Government Agencies (NGAs);
 - Develop a contingency plan (e.g insufficient vaccinators and social mobilizers) as necessary.

B. Vaccination Rollout

1. The vaccination process including registration, screening, administration, reporting, AEFI monitoring and referral shall follow the provisions outlined in the **DOH Administrative Order no. 2022 - 0005**, otherwise known as, *Omnibus Guidelines on the Implementation of the National Deployment and Vaccination*

Plan (NDVP) for COVID-19 Vaccines, and other relevant COVID-19 vaccination issuances (<https://bit.ly/PHC19VaccinationIssuances>) ;

2. Vaccination of Priority Group A2: Senior Citizens

- a. Priority shall be given to the unvaccinated Senior Citizens or those with zero (0) dose.
- b. Ensure the completion of the primary vaccination series of the partially vaccinated individuals.
- c. Coordinate with the Office for the Senior Citizens' Affairs (OSCA) to facilitate the vaccination of remaining unvaccinated or partially vaccinated Senior Citizens in their respective jurisdictions.

3. First Booster Administration Among the General Population

- a. Individuals 12 years old and above are eligible for the administration of booster/additional doses provided that the recommended intervals between the completion of primary dose series and the booster/additional doses are complied in accordance with existing COVID-19 vaccination policies and issuances.
- b. Prioritize administration of COVID-19 vaccines to individuals with due second (2nd) doses and missed doses;
- c. Provide due booster doses, especially for those in the health and economic sectors;

4. Vaccination of other Eligible Population

- a. All individuals five (5) years old and above are eligible for the administration of primary dose series during the campaign; to include identification and vaccination of individuals for completion of the primary dose series or with missed doses;
- b. Second booster doses may be given to the most at risk population which includes medical frontliners, immunocompromised individuals, individuals 50 years old and above, and adults 18 to 49 years of age with comorbidities as provided for in existing COVID-19 vaccination policies and issuances.

- c. Implement the campaign with operational efficiency ensuring that all eligible and willing individuals shall be inoculated with COVID-19 vaccines;

C. Implementation Strategies

1. Setting-based Approach

The vaccination rollout shall focus on service delivery closer to homes, communities and workplaces. All LGUs and concerned agencies are therefore directed to adopt the settings-based approach in the formulation of vaccination strategies.

2. Forging Collaboration

Pursuant to the directives outlined in Department of Interior and Local Government (DILG) Memorandum dated 18 August 2022 titled, "*Support to Presidential Directive on COVID-19 Vaccination for the First 100 Days*", Local Chief Executives (LCEs) shall be enjoined to mobilize all necessary resources and conduct a rejuvenated COVID-19 for the first 100 days.

To further amplify efforts and coverage in each setting, government agencies, civil society organizations and other private organizations shall be engaged.

3. Grants and Incentive Mechanisms

Provision of grants and incentives to further motivate eligible population as well as vaccination teams toward achieving the targets are also encouraged. The LCEs with the assistance of private partners are encouraged to provide cash incentives to vaccination teams based on the number of target individuals inoculated, while vaccinees may be provided with cash or in-kind incentives for allowing themselves to be vaccinated. Another form of incentive that may be explored is the provision of discounts among those with the first booster.

4. Awards and Recognition

Rewards and Recognition shall be implemented to acknowledge the support and active participation of local stakeholders (other local agencies, private sector, CSOs etc.) during the vaccination drive and the PinasLakas campaign. The proposed criteria to assess performance of partners and LGUs can be seen in *Annex A*.

5. Other Service Delivery Strategies

The following best practices documented by CHDs and LGUs may also be considered in the conduct of vaccination activities:

- a. Dovetailing COVID-19 vaccination activities in local health caravans and celebrations, outreach activities, town hall meetings, assemblies, and other local activities and/or events to facilitate streamlining of the COVID-19 vaccination.
- b. Presence of vaccine ambassadors in vaccination sites to advocate COVID-19 vaccination and promote vaccination activities. (*See Annex B*)
- c. Enforcing Local vaccination requirements in support of the COVID-19 vaccination campaign such as completion of first booster dose to enter and transact within local government offices, and in entering private establishments.
- d. Providing grants for local establishments that will require COVID-19 first booster vaccination among their employees and among their clients.

D. Demand Generation and Communications

Communications Handle

1. As a show of the unified commitment of all government agencies and local implementing units in this effort, all activities during the Special Vaccination Days shall be branded under the PINASLAKAS campaign banner, along with its key messages and visuals.
2. All implementing units are enjoined to use all relevant communication platforms which include, but are not limited to, traditional broadcast and mass media (television, radio, print), digital and emerging media (social media), and other local channels. Resources for adoption and reproduction are linked below:
 - a. PINASLAKAS Brand Guide - bit.ly/PinasLakasBrandGuide
 - b. PINASLAKAS Assets - bit.ly/PinasLakasAssets
 - c. PINASLAKAS Communication Packages - bit.ly/PinasLakasCommPacks
3. Further guidance on the implementation of the PINASLAKAS campaign is outlined in **Department Memorandum No. 2022-0352** or “*Guidelines on the Implementation of the ‘Sa Boosters: PINASLAKAS’ Social and Behavior Change Communication Campaign*”, for strict compliance.

Community Engagement and Social Mobilization

1. All concerned units must systematically implement community engagement and social mobilization activities to ensure increased uptake. These activities include, but are not limited to, advocacy meetings with local officials and stakeholders, town halls, local events and celebrations, and house-to-house visits.
2. Appropriate microplanning must be conducted in preparation for community engagement activities. The microplan template is accessible at bit.ly/DemGenMicroplan.
3. Community listening must be conducted to identify sources of vaccine hesitancy and complacency at a granular level. A guiding tool for community hesitancy monitoring is accessible at bit.ly/HesitancyMonitoringTool. Social mobilizers and local communicators must use these insights to inform corrective communication interventions that are tailor fit for the community issues identified.
4. Hesitancy can also be monitored by promoting the DOH KIRA Chatbot (m.me/OfficialDOHgov), which serves as an accessible online tool for identifying common questions and concerns that people have relating to the vaccines. Promotional materials to encourage utilization of KIRA chatbot are available here (bit.ly/KIRAPromos).

E. Adverse Events Following Immunization (AEFI) Monitoring

- i. Check the contents of the AEFI Kit. Ensure completeness of the kit.
- ii. Observe the vaccine recipient for any Adverse Event Following Immunization (AEFI).
- iii. Give the following information to the vaccine recipient:
 1. Referral hospital/facility and contact details
 2. Signs and symptoms to watch for
 3. Instructions and steps on how to seek clinical care and report AEFI events
- iv. Ensure that the vaccine recipient is essentially well before leaving the vaccination site
- v. Provide appropriate intervention to manage AEFI.
- vi. Encode all information of the vaccine recipients (by the encoder) based on the data requirements.

F. Data Reporting

1. On the submission of vaccination accomplishment (“Quick Count”), the LGU shall submit the end-of-day report before 5AM the following day. The NVOC and RVOCs shall monitor the accomplishment of each LGU on a daily basis. Likewise, the DILG shall monitor the performance of the LGUs and compliance

of the LGUs on a daily basis. The submission shall be through the Vaccine Operations Reporting System (VORS).

2. On Line List submission, the LGUs are reminded to submit the line list 24 hours after the vaccination activity.
3. The LGUs can use line list encoding tools for faster and accurate recording of the vaccination events, e.g. DVAS-M (NVOC Advisory No. 116, Use of DICT Mobile Vaccination Administration System).

For dissemination and strict compliance.

By Authority of the Secretary of Health:



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Undersecretary Secretary of Health
Field Implementation and Coordination Team - Public
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Annex A. Criteria for Awards and Recognition

The following criteria shall be used to determine the top performing Local Government Units and National Government Agencies during the *PINASLAKAS* Campaign.

Agency/Office	Criteria	Grading System	Description
Government Agencies	Vaccination Accomplishment	50%	Total coverage of vaccinated and boosted employees is to be considered.
	Timeliness of Submission	20%	Date of submission based on the timeliness indicated in the NVOC Advisory No. 1 is to be considered.
	Completion of Data	15%	Completeness of the sent data based on the format given by the NVOC Advisory No. 1 and submission of complete data with the attached agency and regional counterparts are to be considered.
	Accuracy of Data	15%	Total number of employees vaccinated/boostered vs. the coverage/percentage computed is to be considered.
Local Government Units	Increase of accomplishment from the LGU baseline target.	60%	Percentage point increase from the baseline accomplishment of A2 2nd dose of primary series and 50% coverage for 1st booster dose.
	Timely and daily reporting of accomplishment through the Vaccine Administration System Linelist (VAS LL).	20%	Encoding and reporting of daily vaccination in the system.
	Established all the proposed settings-based vaccination sites.	10%	Settings-based vaccination sites are established with vaccination teams.
	Established partnership with medical experts, other local government agencies/units, etc.	10%	Partners, medical experts, private sector, and/ or other local government agencies/units, etc. are engaged in the implementation of the F100 days.

Special Awards:

- **Most Improved NGA** - To consider the agency with the most improved COVID-19 vaccination accomplishment in contrast to the submitted baseline data.
- **Most Consistent NGA** - To consider the agency with consistently high COVID-19 vaccination accomplishment all throughout the given timeline of reporting.
- **Most Resourceful NGA** - To consider the agency with certain limitations on their resources and/or workforce but still came out with a high COVID-19 vaccination accomplishment rate.

Annex B. Areas for Field Visits

The following high yield areas based on the remaining unvaccinated Priority Group A2 and eligible population for booster doses shall be visited by select DOH Executive Committee and Management Members during the Bakunahang Bayan: Special Vaccination Days.

The presence of high level officials from other GAs and prominent members from other partners such as medical societies, professional organizations and civil society in the vaccination sites aim to draw support and further advocate the vaccination activities in the identified high yield areas.

Date	Time	Activities	Responsible Person /Unit
Day 1: September 26, 2022	8am-5pm	Opening Ceremony for the conduct of PinaLakas Special Vaccination Days (SVD) Caravan	CALABARZON CHD and Central Office HPB
Day 2: September 27, 2022	8am-5pm	PinasLakas SVD Caravan in Bulacan and Nueva Ecija	CHD III
Day 3: September 28, 2022	8am-5pm	PinasLakas SVD Caravan in Camarines Sur	CHD V
Day 4: September 29, 2022	8am-5pm	PinasLakas SVD Caravan in Negros Occidental	CHD VI
Day 5: September 30, 2022	8am-5pm	PinasLakas SVD Caravan in Cebu and Davao	CHD VII and XI