



Republic of the Philippines
Department of Education

NATIONAL CAPITAL REGION
SCHOOLS DIVISION OFFICE OF MUNTINLUPA CITY

524667

Office of the Schools Division
Superintendent

OCT 11 2023

MEMORANDUM

**SUBMISSION OF OPLAN KALUSUGAN SA DEPARTMENT OF EDUCATION
(OK SA DEPED) ACCOMPLISHMENT REPORT**

To: OIC-Assistant Schools Division Superintendent/
Chief Education Supervisor, School Governance and Operations Division
Chief Education Supervisor, Curriculum Implementation Division
Public Elementary and Secondary School Heads/OICs
Administrative Officer V
All Others Concerned

1. Pursuant to DepEd Order No. 28 s. 2018 or the Policy and Guidelines on the Oplan Kalusugan sa Department of Education (OK sa DepEd), the Department of Education, through the Bureau of Learner Support Services- School Health Division (BLSS- SHD), aims to promote and provide learners and DepEd personnel with a sustainable holistic school health and nutrition program towards a healthier behaviour and better learning outcome.
2. Relative to this, all schools are enjoined to submit their OK sa DepEd Accomplishment Form B of August for December, 2023 activities on or before **January 12, 2024** and Accomplishment Form B for January to June, 2024 activities on or before **June 28, 2024** to the School Health and Nutrition Section of the School Governance and Operations Division, attention to Dr. Maricel R. Subida, OK sa DepEd Focal Person.
3. Attached is the sample format of the said forms for your reference.
4. Immediate and wide dissemination of this Memorandum is desired.


EVANGELINE P. LADINES CESOSA V
Schools Division Superintendent

Encl.: As stated
References: As stated
To be indicated in the Perpetual Index
Under the following subjects:

HEALTH EDUCATION

PROGRAMS

CAMPAIGN

MRS / OPLAN KALUSUGAN SA DEPARTMENT OF EDUCATION (OK SA DEPED) ACCOMPLISHMENT FORM
338 / October 6, 2023

UN-2023-338



Student Center for Life Skills Bldg., Centennial Ave, Brgy. Tunasan, Muntinlupa City
8805-9935, 8805-9940
sdo.muntinlupa@gmail.com
deped-muntinlupa.com

OCT 11 2023

4425

10/10/11

OPLAN KALUSUGAN SA DEPED
ACCOMPLISHMENT REPORT
(To be accomplished by the School Head)

DIVISION:	REGION:
SCHOOL:	SCHOOL ID:
SCHOOL ADDRESS:	
(Please check appropriate box) Level: ☐ Elementary ☐ Junior High School ☐ Senior High School Type of School: ☐ Central School ☐ Non-Central School (complete) ☐ Multigrade ☐ Primary School / Incomplete ☐ Integrated School	
SCHOOL HEAD:	CONTACT NUMBER:

A. COVERAGE								
Grade Level	Number of Pupils				Number of School Personnel			
	Enrolment	Actual Examined	With findings	Given interventions	Enrolment	Actual Examined	With findings	Given interventions
TOTAL:								

B. ACCOMPLISHMENTS

Use School Health Division Form 2 as basis for accomplishing this table.

1. Common Signs and Symptoms (as reported by Nurses) –

2. Common Diseases (as diagnosed by Medical Doctors) –

3. Common Dental Problems (as diagnosed by Dentists) –

4. Nutritional Status

Body Mass Index-for-Age/ Weight-for-Age	Number of Learners	Height-for-Age	Number of Learners
Severely Wasted/ Severely Underweight		Severely Stunted	
Wasted/ Underweight		Stunted	
Normal		Normal	
Overweight		Tall	
Obese			
TOTAL:			

C. SUMMARY OF VOLUNTEER SERVICES

Use OK sa DepEd Form C as basis for accomplishing this table.

Name of Organization/ Affiliation/ Institution	Number of Volunteers													No. of Learners and School Personnel		Estimated Value of Interventions Given	Other Services Rendered (if any)
														Examined	Given Intervention		
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total				

D. DONATIONS / RESOURCES GENERATED (Add additional sheets, if needed.)

Type of Donations	Quantity	Estimated Cost	Donor

E. SIGNIFICANT EVENTS OF SBFP, NDEP, ARH, WINS, AND OTHER HEALTH AND NUTRITION PROGRAMS / EXPERIENCES / GOOD PRACTICES

(Use separate sheets, if needed)

What happened?	Who were involved?	When?	Outcome: What is/are its important contribution to the Ok sa DepEd Program of the school?

F. LESSONS LEARNED
G. SUGGESTIONS TO STRENGTHEN OK sa DepEd Program (include support needed from Central, Region, and Division Office that can increase the impact of OK sa DepEd Program in your school.)

H. PROPOSED PLAN OF ACTION FOR NEXT OK sa DepEd health services

I. PHOTOS (before, during and after)

Prepared by:

Date:

Name and Designation

Submit completed form to the SDO by 1st week of March.