

Republic of the Philippines Department of Health OFFICE OF THE SECRETARY

March 25, 2020

DEPARTMENT MEMORANDUM No. 2020 - 050

TO: ALL DEPARTMENT UNDERSECRETARIES AND ASSISTANT SECRETARIES; CENTERS FOR HEALTH DEVELOPMENT AND BUREAU DIRECTORS; SPECIAL & SPECIALTY HOSPITAL DIRECTORS; CHIEFS OF MEDICAL CENTERS, HOSPITALS AND SANITARIA; AND OTHERS CONCERNED

SUBJECT: Interim Guidelines for Immunization Services in the Context of COVID 19 Outbreak

Coronavirus disease (COVID-19) is an infectious disease caused by the newly discovered coronavirus (SAR-CoV-2). On 30 January, 2020, the Department of Health (DOH) confirms first imported COVID 19 case in the country and assured public of intensified containment measures. On 7 March, 2020, DOH announced local transmission of COVID 19 following the confirmation of two (2) COVID 19 cases after verification with the Bureau of Immigration showed that the patients had no recent travel history. Following the confirmation of local transmission partial lockdown in the National Capital Region was implemented. As more confirmed COVID 19 cases are reported, enhanced community quarantine in the entire island of Luzon was enforced on 16 March, 2020.

In the enforcement of enhanced community quarantine, a strict home quarantine is observed in all households, movement is limited to one member per household for accessing basic necessities and provision of essential health services is regulated.

However, it is important that while health service delivery is focused towards COVID 19 support, continued immunization services, which is an essential health service, should be made available to avoid vaccine preventable diseases (VPD) outbreaks with loss of lives and further overwhelm the healthcare system. As resources are moved to COVID 19 response, concerns about leaving individuals inadequately protected against VPDs need to be addressed.

To mitigate the COVID 19 outbreak impact on immunization service and minimize the risk of SARS CoV2 transmission during vaccination sessions, the following guideline for immunization during COVID 19 outbreak is hereby provided:

1. Routine immunization of newborns and infants up to 12 months and selective catch up vaccinations of defaulters under five (5) years old shall be maintained as long as COVID-19 response measures allow. Wherever feasible and where the benefit-risk assessment is positive, routine immunization services shall continue and shall be integrated with other essential health services, uninterrupted. All possible efforts shall be made to maintain high population immunity against vaccine preventable diseases.

- 2. Provision of routine and catch up vaccinations shall be aligned with the national guidelines on infection prevention and control. The necessary supplies for infection prevention and control shall be in place as part of the immunization sessions.
- 3. Performance of hand hygiene in between clients using soap and water shall be strictly followed. If soap and water is not available, alcohol-based preparation can be used.
- 4. In healthcare facilities where immunization services are maintained, vaccination shall be performed in areas that are disinfected, well ventilated and allow vaccinees to maintain physical distance of at least one (1) meter from other clients.
- 5. Immunization services shall be separated from curative services where acutely ill individuals are more likely to be present.
- 6. Where routine immunization is not feasible or where the benefit-risk assessment is negative, routine immunization may be temporarily suspended.
- In instances where routine immunization is temporarily suspended, healthcare workers shall maintain list of children who have missed their vaccinations and active catch-up immunization activities shall be implemented as quickly as possible, once the COVID -19 situation permits.
- 8. Private clinics are encouraged to continue to provide immunization services with strict adherence to infection prevention and control. Overcrowding in clinics shall be avoided. Physical distancing shall be enforced.
- 9. In order to assist with rapid detection of new COVID-19 cases, vaccines and their caregivers shall be screened using the WHO standard case definition of COVID-19 surveillance.

Dissemination of the above information is requested.

FRANCISCO T. DEQUE III, MD, MSc Secretary of Health

Annex 1: Decision Making Algorithm:

Consideration of immunization options during COVID 19 outbreak shall be guided by a detailed risk assessment of VPDs, epidemiological situation of COVID-19, and immunization service delivery capacity.

| Scenario 1 | | Continue routine |
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| LGU has no known case of COVID-19 (Alert level Blue) Scenario 2 LGU has no known case of COVID-19 (Alert level Blue) | Low risk of VPDs and unlikely potential for large outbreaks Adequate immunization staff Adequate vaccines High risk of VPDs potentially leading to outbreaks and cause mortality Adequate immunization staff Adequate vaccines | Continue fourne immunization services with emphasis on primary series vaccination for ≤12 months old and defaulters Continue VPD surveillance including AFP surveillance |
| Scenario 3 LGU has confirmed case of COVID-19 (Alert level Red sub-level 1) Containment and Community Mitigation | Low risk of VPDs and unlikely potential for large outbreaks Immunization staff are engaged in COVID-19 response Adequate vaccines | • Suspend routine immunization activities until situation stabilized and becomes Alert level Blue |
| Scenario 4 LGU has confirmed case of COVID-19 (Alert level Red sub-level 1) Containment and Community Mitigation | High risk of VPDs potentially leading to outbreaks and cause mortality Immunization staff are engaged in COVID-19 response Adequate vaccines | Option 1: Continue routine immunization services with emphasis on primary series vaccination for ≤12 months old at the health center on a biweekly basis Option 2: Outreach immunization services with emphasis on primary series vaccination for ≤12 months and defaulters on a biweekly basis |
| Scenario 5 LGU has documented community transmission (Alert level Red sub-level 2) Containment and Enhanced Community Quarantine | Whether low or high risk for VPDs Immunization staff are engaged in COVID-19 response | • Suspend routine immunization activities until situation stabilized and becomes Alert level Blue |

Note: The impact and appropriateness of the chosen options shall be monitored and reassessed weekly as the COVID-19 situation evolves.