



Republic of the Philippines
Department of Education
REGION X – NORTHERN MINDANAO
SCHOOLS DIVISION OF EL SALVADOR CITY

08 Oct 2020

DIVISION MEMORANDUM

No. 236, s. 2020

WORK ARRANGEMENTS EFFECTIVE OCTOBER 12, 2020

To: **Asst. Schools Division Superintendent**
Chief CID, SGOD
PSDS, Education Program Supervisors
All Public Elementary & Secondary School Heads
All Others Concerned
This Division

1. With reference to the agreements made during the meeting with the School Heads conducted last October 6, 2020, the following shall be implemented, effective **October 12, 2020**:

1.1. **Work Arrangement and Working Hours**

- 1.1.1. All school-based personnel shall *report to school for 4 days a week and work from home (WFH) for 1 day, 8 hours each day exclusive of the 1-hour lunch break.* Schools Division Office (SDO) employees shall continue with the work arrangement approved per unit.
- 1.1.2. Flexi-time shall be allowed both to school-based personnel and SDO employees. Provided, however, that the *public is assured of the continuous service* of the agency from 8 a.m. to 5 p.m. even during lunch break. Working hours shall apply from 7 a.m. to 9:30 a.m. and end from 4:00 p.m to 6:30 p.m.
- 1.1.3. *Employees who are classified as vulnerable and fall to any of the exceptions (pregnant, senior citizen, w/ immunodeficiency, transportation restrictions and other analogous cases) shall be under work from home arrangement.* Any employee who falls to any of the exceptions yet wishes to report to his/her station must write a letter/waiver to the school head. The school head shall then reply in written form to the employee and furnish the SDO a copy of the reply and

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Republic of the Philippines

Department of Education

REGION X – NORTHERN MINDANAO

SCHOOLS DIVISION OF EL SALVADOR CITY

letter-waiver of the employee. Templates for letter-waiver and letter-reply shall be provided.

- 1.1.4. WFH arrangement may be allowed during webinars. It shall be subject, however, to the approval by the SDS. Unit/school heads must ensure that the operation of the unit/school is not hampered.

1.2. Documents for Submission

- 1.2.1. *Office/ School/ CLC Workweek Plan*- to be prepared by the Head of Functional Offices or designated staff, to be approved by Head of Office and to be submitted to the Personnel Unit *every Beginning of the Week*
 - 1.2.2. *Individual Daily Log and Accomplishment Report*-submitted by the Individual Staff, submitted to and approved by the to the Head of Office *every end of the week*; Another memorandum shall be issued for this purpose
 - 1.2.3. *Pass Slip*- form to be used when an employee leaves the station to attend personal transactions; Copy of the Pass Slips in a week shall be submitted to the Personnel Unit *every end of the week*.
2. All are reminded to make themselves available during working hours and to perform tasks to the full extent possible. Further, as government employees, all are expected to observe honesty, integrity, and professionalism in the conduct of their duties such that government time, money and resources are employed and used efficiently, honestly and economically, to avoid wastage of public funds.
 3. Attached are some documents to serve as reference.
 4. For information, guidance and strict compliance.

OLGA C. ALONSABE

Asst. Schools Division Superintendent

Officer-In-Charge

Office of the Schools Division Superintendent

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

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FREQUENTLY ASKED QUESTIONS (FAQs)

No.	Question	Answer	Reference
1	What will be my work arrangement effective October 12, 2020?	A. All School-Based Personnel: 4 days on-site and 1-day WFH B. SDO employees: as is C. Employees who meet any of the criteria in item 16.a.iv of DepEd Order 11, s. 2020 shall be under WFH arrangement	Division Memo <u>236</u> , s. 2020
2	If I log in at 8:35 a.m. may I log out by 5:35 p.m.?	Yes. The employee may log out from work if he/she has already fulfilled his/her 8 hours for the day, exclusive of the 1-hr lunch break.	Section 5, Rule XVII, Omnibus Rules Implementing Book V of Executive Order No. 292
3	If I log in at 6:30 a.m., may I log-out from work at 3:30 p.m.?	Flexible working hours start from 7:00 a.m. to 9:30 a.m. until 4:00 p.m. to 6:30 p.m. If an employee logs in by 6:30 a.m., the earliest time he/she may log-out from work in the afternoon is at 4:00 p.m. Hence, the answer is NO. If the employee logs out by 3:30 p.m., he/she will be considered to have incurred undertime.	Item 16.a.iii of DepEd Order 11, s. 2020
4	If I log in at 9:35 a.m. and log out by 6:35 p.m., will the corresponding deduction on my vacation leave credits/salary still be made due to tardiness?	Yes. Since latest log-in allowed is 9:30 a.m., any log-in made beyond 9:30 a.m. shall be considered as late, counted as tardiness and shall be deducted to the vacation leave credits or salary (if no available vacation leave credits) Off-setting of tardiness or absence by working the equivalent number of minutes or hours by which	CSC Resolution No. 000970

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		an officer or employee has been tardy or absent, beyond the regular or approved working hours of the employees concerned, <i>shall not be allowed.</i>	
5	May I take my lunch break on 11:00 a.m. to 12:00 n.n. or 1:00 p.m. to 2:00 p.m.?	One condition of flexitime is that the public is assured of the continuous services of the agency from 8 a.m. to 5 p.m. Hence, the answer would depend on the internal arrangements made among members in each unit/school to ensure non-disruption of operations	CSC MC 25, s. 2019
6	May I work from home for the whole week?	An employee shall be under WFH arrangement if he/she meets either of the following criteria: <ol style="list-style-type: none">1) Personnel who are 21 years old and below2) Personnel who are 60 years old and above3) Personnel who are at high risk of infection, including but not limited to pregnant women, those with immunodeficiency, comorbidities, or other health risks, illnesses and/or pre-existing medical conditions as enumerated in Item 4.b.ii of DM No. 043, s. 2020; COVID-19 Suspect Case and COVID-10 Probable Case, including those who reside with the Suspect or Probable Case; and4) Personnel who encounter difficulty reporting to office or school/CLC due	Item 16.a.iv of DepEd Order 11, s. 2020

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REGION X – NORTHERN MINDANAO
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		to the imposition of strict home and/or local community quarantine, curfew, limited or no access to any available modes of transportation options, and/or other regulatory limitations on intermunicipality/ city travel	
7	I meet one of the criteria who shall be under WFH arrangement, may I opt to report to work on-site?	An employee who meets any of the criteria in item 16.a.iv of DO 11, s. 2020 is <i>strongly discouraged</i> to report on-site. They may be allowed only in cases when the services rendered physically in the office/school are indispensable or when office work is already permitted for all. This should be properly documented with a letter-waiver by the employee and letter-reply by the School Head, both documents to be submitted/ copy furnished to SDO c/o Personnel Unit	Item 16.a.iv of DepEd Order 11, s. 2020
8	The internet connection at our school is poor, may I work from home during webinars?	This may be allowed, provided, that Unit/school heads must ensure that the operation of the unit/school is not hampered.	Division Memo <u>230</u> , s. 2020
9	Do I need to submit my Individual Daily Log & Accomplishments even if I'm physically reporting at my station?	Yes, if you observed the alternative work arrangement (AWA) such as WFH, Physically Reporting for 4 days and 1-day WFH or any other allowed AWA. Only those who are not under AWA are exempted from submission.	Item 21 of DO 11, s. 2020
10	What shall be the agreed mode for the submission of Individual Daily Log and Accomplishments?	Another memorandum relative to this shall be issued for details/ instructions	Item 28 of DO 11, s. 2020

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Enclosure to Division Memorandum No. 234, s. 2020

OFFICE/SCHOOL/CLC WORKWEEK PLAN

To the Personnel Unit:

In compliance with the DepEd Order No. 11, s. 2020, the (indicate name of School/ Division/ Office) _____ is hereby submitting the workweek plan for the period: _____ (indicate period, Start date to end date of the week)

Name of Personnel & Position <small>*List employees alphabetically by First Name Format: First Name Last Name</small>	Pre-existing Health Condition and/or disease	Alternative Work Arrangement Time and Period					Target Deliverables for the Week <small>*each employee must have a corresponding list of target deliverables per week</small>	Signature of employee
		Mon	Tue	Wed	Thu	Fri		
Juan del Mundo Teacher I	None	On-Site 8AM-5PM	WFH 8AM-5PM	On-Site 8AM-5PM	On-Site 8AM-5PM	On-Site 8AM-5PM	1. Prepare weekly HLP 2. Prepare LAS 3. Facilitate distribution and retrieval of modules identified struggling learners 5. Conduct consultation/ check-in w/	

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	Pregnant	WFH		WFH		WFH		parents and learners
		7AM-4PM	7AM-4PM	7AM-4PM	7AM-4PM	7AM-4PM	7AM-4PM	
Maria Juana dela Cruz Teacher II	Pregnant							1. xxxxx 2. xxxxx 3. xxxxx 4. xxxxx 5. xxxxx
Lusviminda Reyes Teacher I	None	On-Site 9AM-6PM	On-Site 9AM-6PM	On-Site 9AM-6PM	On-Site 9AM-6PM	On-Site 9AM-6PM	WFH 9AM-6PM	1. xxxxx 2. xxxxx 3. xxxxx 4. xxxxx 5. xxxxx

***Target deliverables enumerated are mere samples only. An employee may be assigned more or less than 5 target deliverables per week. Things to be considered in assigning target deliverable/s for the week: 1) Is it aligned with the priorities/ target deliverables of the office/school?, 2) Are the tasks assigned aligned with the employee's Key Result Area (KRA)? and 3) Are the target deliverables doable/ attainable within the period given/ time allotted?**

Submitted by: _____

Approved by: _____

Name & Signature of Head of Functional Office _____

Name & Signature of Head of Office _____

Date: _____

Date: _____

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In consideration of the situation of the following personnel who will not be able to perform and submit their Individual Workweek Accomplishment Report for reasons as stated, the undersigned request the payment of their salaries and benefits for the period of (Month-Date, 2020).

Name of Personnel	Position	Pre-existing Health Condition and/or disease (if applicable)	Authorized Official or Personnel to serve as Skeleton Workforce	Justifiable Reason/s Not to be Able to Perform Tasks at Home	Signature
Ex. Jose Reyes	Utility Worker	None	No	Assigned to tasks that are dependent only on the office equipment and materials available in the office premises but do not belong to the identified essential or critical services.	
Ex. Julian Santos	Admin Aide	None	No	Assigned to tasks that are dependent only on the normal condition in the office such as receiving and releasing of (hard copies) documents but do not belong to the identified essential or critical services.	

Submitted by: _____

Approved by: _____

Name & Signature of Head of Functional Office _____

Name & Signature of Head of Office _____

Date: _____

Date: _____

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TEMPLATE - LETTER REQUEST FOR WFH ARRANGEMENT

_____ Date

NAME OF SCHOOL HEAD
 School Head
NAME OF SCHOOL
 Address of School

Dear **Mr/Ms Last Name of School Head:**

The undersigned would like to apply for a Work From Home (WFH) Arrangement effective *(indicate start date to end date)* _____, for the following reason/s:

(Please check the appropriate box for reason and corresponding document attached)

Reason	Supporting Document Attached
Personnel who are 60 years old and above	
Personnel who are at high risk of infection, including but not limited to pregnant women, those with immunodeficiency, comorbidities, or other health risks, illnesses and/or pre-existing medical conditions as enumerated in Item 4.b.ii of DM No. 043, s. 2020; COVID-19 Suspect Case and COVID-10 Probable Case, including those who reside with the Suspect or Probable Case; <i>Please specify:</i>	
Personnel who encounter difficulty reporting to office or school/CLC due to the imposition of strict home and/or local community quarantine, curfew, limited or no access to any available modes of transportation options, and/or other regulatory limitations on intermunicipal/ city travel	
Other analogous case, <i>please specify:</i>	

I hope for your favorable action on this request.

Sincerely,

SIGNATURE OVER PRINTED NAME OF EMPLOYEE
 Position/Designation

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Department of Education
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SCHOOLS DIVISION OF EL SALVADOR CITY

TEMPLATE – REPLY FOR LETTER REQUEST FOR WFH ARRANGEMENT

Date

NAME OF EMPLOYEE

Position/Designation of Employee

NAME OF SCHOOL

Address of School

Dear **Mr/Ms Last Name of Employee:**

This is in response to your letter request dated _____ (*indicate date of letter*). This is to inform you that upon review of your request and attached document/s and with reference to DepEd Order 11, s. 2020, the following action is made by this Office.

Check (✓) whichever is applicable	Action Taken	Comments/Remarks
	Approved	<i>*Indicate effective date/period for WFH Arrangement here</i>
	Disapproved	<i>*Indicate reason for disapproval</i>
	Forwarded to SDO for further review	

Sincerely,

SIGNATURE OVER PRINTED NAME OF SCHOOL HEAD

School Head

Copy furnished:
OSDS-Personnel Unit

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TEMPLATE - LETTER REQUEST TO REPORT ON-SITE (applicable for those who must be under WFH arrangement but wishes to report to his/her station)

_____ Date

NAME OF OFFICE/SCHOOL HEAD

Position/Designation

NAME OF OFFICE/SCHOOL

Address of Office/School

Dear **Mr/Ms Last Name of Office/School Head:**

The undersigned would like to request that I may be allowed to physically report at my station, details to wit:

Name:	
Position/Designation:	
Pre-existing health condition and/or disease:	
Effective Date/Period to physically report on-site:	
Task/s and or services which need to be rendered physically in the office/school:	1. 2. 3. 4. 5.

I am fully aware of the risks upon physically reporting to work and I will not hold it against the Agency if I have been infected with COVID-19 during my travel to and from my station.

I hope for your favorable action on this request.

Sincerely,

SIGNATURE OVER PRINTED NAME OF EMPLOYEE

Position/Designation

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TEMPLATE – REPLY FOR LETTER REQUEST TO REPORT ON-SITE

_____ Date

NAME OF EMPLOYEE

Position/Designation of Employee

NAME OF SCHOOL

Address of School

Dear **Mr/Ms Last Name of Employee:**

This is in response to your letter request dated _____ (*indicate date of letter*). This is to inform you that upon review of your request and attached document/s and with reference to DepEd Order 11, s. 2020, the following action is made by this Office.

Check (✓) whichever is applicable	Action Taken	Comments/Remarks
	Approved	<i>*Indicate effective date/period when the employee would report on-site</i>
	Disapproved	<i>*Indicate reason for disapproval</i>
	Forwarded to SDO for further review	

Sincerely,

SIGNATURE OVER PRINTED NAME OF SCHOOL HEAD

School Head

Copy furnished:
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