



Readiness of Schools in the Implementation of Face-to-Face Classes

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Abstract:

This study delves into the readiness of teachers and schools for the resumption of face-to-face classes. The teacher respondents, characterized by a younger age group and slightly lower educational attainment, predominantly serve in smaller educational institutions. Findings reveal a commendable high level of readiness among teachers across all assessed domains, encompassing planning and preparation, staff and facilities, and health and safety protocols. Moreover, schools exhibit a similarly elevated level of readiness across the same three focal areas, even when segmented by teacher age, educational attainment, and school size. Intriguingly, a deeper analysis highlights significant disparities in teacher readiness concerning planning and preparation, with discernible variations corresponding to their highest educational attainment. Furthermore, distinctions in the readiness of staff, facilities, and health and safety protocols emerge distinctly based on school size. These critical insights illuminate the nuanced preparedness landscape among educators and educational institutions, thus providing valuable guidance for targeted intervention strategies.

Keywords: Readiness, school's implementation, face-to-face classes, planning and preparation, staff and facilities, health and safety protocols.

Introduction:

Nature of the Problem

In response to the evolving landscape of the COVID-19 pandemic, the Department of Education (DepEd) of the Philippines issued DepEd Order No. 34, s. (2022). This directive, released on January 14, 2022, outlines comprehensive guidelines for gradually reinstating face-to-face classes, combining limited in-person interactions with modular distance learning through a modified blended learning (MBL) system. This order seeks to balance pedagogical efficacy with health and safety imperatives, marking a pivotal milestone in the educational sector.

The unprecedented disruptions caused by the pandemic have highlighted the resilience and adaptability of the educational sector, as documented by UNESCO (2021). Various studies emphasize the importance of a well-structured blended learning approach to maintain academic quality during crises. Previous research has identified critical challenges in implementing blended learning, including logistical issues, technological readiness, and the socio-emotional well-being of students and teachers. These insights provide a foundation for assessing current preparedness and potential areas for intervention.

The abrupt resumption of face-to-face classes with minimal preparation time, despite the ongoing prevalence of COVID-19, has posed significant challenges for schools. These include navigating new logistical, pedagogical, and socio-emotional demands. The critical need arises to ensure that educational institutions are adequately prepared to integrate the MBL system seamlessly and address the multifaceted challenges that may occur during this transition.

To address these challenges, this study aims to assess the readiness of schools in the Philippines for the resumption of face-to-face classes under DepEd Order No. 34, s. (2022), and formulating an intervention plan to bolster their preparedness. The motivation for this study is driven by a commitment to ensuring the well-being and educational progress of students, teachers, and stakeholders. As a dedicated and concerned school head, the



researcher seeks to facilitate a smooth transition back to face-to-face classes, emphasizing the importance of preparedness in navigating these unprecedented times.

Current State of Knowledge

The resumption of face-to-face classes in educational institutions, especially during the COVID-19 pandemic, has become a critical area of research and policy focus. This literature review overviews vital concepts and factors influencing schools' readiness to implement face-to-face classes. Readiness in education represents a comprehensive and multifaceted strategy to ensure that educational institutions are thoroughly equipped to navigate substantial shifts in their operational paradigms. This concept entails a thorough evaluation of various critical components. These encompass examining an institution's physical infrastructure, encompassing facilities, classrooms, and other vital resources. Additionally, readiness involves a meticulous assessment of human resources, encompassing teaching staff, administrative personnel, and support staff, all of whom play pivotal roles in the educational ecosystem. Furthermore, it necessitates scrutinizing curriculum alignment, ensuring that educational content and objectives are effectively tailored to the specific needs and capacities of the learners. Face-to-face instruction offers unique advantages in the learning process. Research indicates that physical presence in the classroom facilitates higher levels of student engagement, immediate feedback, and deeper social interactions, ultimately leading to improved learning outcomes, according to Hattie (2019).

Equally significant is the integration of robust health and safety measures, especially in the context of the COVID-19 pandemic. This encompasses protocols related to sanitation, social distancing, and the provision of personal protective equipment. Such measures are paramount in safeguarding students' and educators' health and well-being. In tandem with these factors, technological integration is a crucial aspect of readiness in modern education. This involves the seamless incorporation of educational technology to facilitate effective teaching and learning, especially in scenarios where face-to-face interactions are supplemented or replaced by virtual or remote modalities. This integration ensures that educational continuity is maintained regardless of the mode of instruction (Ferreira & Serpa, 2021).

In a case study centered on five educational institutions in New Delhi, a meticulous examination was conducted to elucidate the challenges these establishments face in preparing for the resumption of face-to-face classes. Predominant among these challenges were resource scarcity, deficient infrastructure, and a need for more staff training. Concurrently, the case study revealed a proactive response from the institutions, showcasing their dedication to redressing these obstacles and upholding their commitment to cultivating a secure and productive learning environment for students (Bhardwaj & Kumar, 2023).

In light of these challenges, it becomes evident that a holistic approach is imperative for a successful transition to face-to-face instruction. This entails a collaborative effort among educational stakeholders, including administrators, educators, parents, and students, to implement strategies prioritizing health, safety, and emotional well-being. Formulating effective contingency plans, robust communication strategies, and providing necessary resources will mitigate challenges and ensure a seamless return to in-person learning (Kuhfeld et al., 2020).

In Gonzales's words (2022), ensuring face-to-face classes' safe and effective implementation necessitates meticulously providing essential school resources. This encompasses sufficient well-equipped classrooms, a proficient cadre of qualified teachers, and an array of supplementary resources crucial to the learning environment. Furthermore, schools may need to bolster their resources by acquiring additional supplies and equipment. This may encompass procuring vital supplies such as personal protective equipment (PPE) for staff and learners, alongside indispensable items like hand sanitizers and a comprehensive range of cleaning supplies. These acquisitions are critical safeguards, fortifying the educational environment and safeguarding the health and well-being of all involved parties (Engada & Maguate, 2023).

Finally, Brillantes (2022) argues that comprehensive training and support for staff and learners are essential for successfully implementing face-to-face classes. Training should begin well before the school year and be ongoing to ensure everyone is familiar with the school's plan and protocols. In addition to training, schools should provide staff and learners with the resources and support they need to implement the plan and protocols effectively. This includes creating a nurturing and positive school climate where everyone feels comfortable asking for help and support when needed.

Theoretical Underpinnings

This study is based on Weiner's theory of Organizational Readiness, which provides a framework for understanding how well an organization is equipped and prepared to implement a particular change or initiative. Organizational Readiness Theory, proposed by Armenakis and Harris (2009), posits that the success of any organizational change or initiative is contingent upon the degree to which the organization is ready and capable of effectively implementing and sustaining the change. This theory asserts that readiness is a multi-dimensional construct



influenced by various factors, including the organization's resources, infrastructure, leadership support, and members' collective attitudes and beliefs. It emphasizes assessing and enhancing organizational readiness as a precursor to successful change implementation.

Meanwhile, organizational readiness encompasses three primary dimensions: commitment, capability, and cognition. Commitment refers to the collective willingness and motivation of members within the organization to support and engage in the proposed change. Capability pertains to the organization's capacity regarding resources, skills, and knowledge necessary to implement the change effectively. Finally, cognition involves the shared understanding and belief among organizational members regarding the necessity and feasibility of the proposed change. Additionally, this theory highlights the dynamic nature of readiness, emphasizing that it is not a static state but a process that evolves. Organizations can proactively enhance readiness through training, communication, and stakeholder involvement (Jayme & Maguete, 2023).

Organizational Readiness Theory is particularly well-suited for this study due to its direct alignment with the research objectives. Given the study's focus on assessing the readiness of schools for the resumption of face-to-face classes, this theory provides a robust framework for evaluating the extent to which schools possess the necessary resources, infrastructure, and collective commitment to implement this change effectively. The three dimensions of commitment, capability, and cognition outlined in the theory offer a comprehensive lens to examine various facets of readiness, including leadership support, resource allocation, and stakeholder engagement. By adopting Organizational Readiness Theory as the theoretical underpinning, this study aims to provide valuable insights into the preparedness of schools for this significant transition, ultimately contributing to the formulation of targeted intervention strategies.

Objectives

This study aimed to determine the level of readiness of schools in implementing face-to-face classes in a district of a large-sized school division in Central Philippines for the school year 2022-2023 as the basis for an enhancement plan. Specifically, this study sought answers to the following questions: 1) the schools' readiness level for implementing face-to-face classes in the area of planning and preparation, staff and facilities, health and safety protocols; 2) the schools' readiness level in implementing face-to-face classes when grouped according to the abovementioned variables; and 3) the significant difference in the schools' readiness level in implementing face-to-face classes when grouped and compared according to the abovementioned variables.

Research Methodology:

This section presents the discussion of the research methodology used, the subjects and respondents of the study, the research instruments used, the validity and reliability of the instruments, the procedure for data gathering, and the statistical tools and procedure for data analysis.

Research Design

This study utilized the descriptive research design to determine the level of readiness of schools in face-to-face classes in an enormous division of a district in the central Philippines. Nassaji (2015) defines descriptive research as a method that outlines the characteristics of a population, answering what, when, and how questions, but not why a phenomenon occurs. While it does not establish causality, it helps identify important variables through correlations, often leading to hypotheses for further testing. Given this study's focus on current conditions and comparative differences across categories, the researcher found the descriptive research design to be the most suitable choice.

Study Respondents

The study's respondents were the 153 sample elementary teachers from a population of 252 in the said district for the school year 2022-2023. These sample teachers were identified using Cochran's sample size formula. Cochran's sample size formula is a method for determining the appropriate sample size needed for a categorical variable in a survey.

Instruments

This study employed a researcher-made tool to determine the readiness level of schools in face-to-face classes. It was subjected to validity (4.96-excellent) and reliability (0.812-good). All of them were interpreted as worthy and good; respectively. The questionnaire is composed of two parts. Part I covered the respondents' profiles, including age, highest educational attainment, and school size. Part II consisted of a 10-item survey questionnaire on the level of school readiness in the face-to-face classes in planning and preparation, staff and facilities, and health and safety protocols. A total of 30 items for the three abovementioned areas was finalized.



Data Gathering Procedure

The researcher sought permission from the Public Schools District Supervisor to gather data from the identified respondents using the questionnaire. The copies of the instrument were sent to the respondents online through Google Sheets for two weeks. Data underwent quantitative processes and was interpreted using Statistical Package for Social Science (SPSS).

Data Analysis and Statistical Treatment

Objective No.1 used a descriptive-analytical scheme and mean to determine the level of school readiness in face-to-face classes.

Objective No.2 used a descriptive-analytical scheme and mean to determine the level of school readiness in the face-to-face classes when grouped according to the abovementioned variables.

Objective No. 3 used a comparative analytical scheme and Mann-Whitney U-test to establish whether or not a significant difference exists between the level of school readiness in the face-to-face classes when grouped and compared according to the abovementioned variables.

Ethical Consideration

In conducting this study on school readiness for face-to-face classes, stringent adherence to ethical considerations was paramount. Anonymity of all participants, including researchers and educators, was paramount. To ensure this, all personal information such as names, addresses, and specific school details were omitted from any documentation, safeguarding individual identities throughout the study. Confidentiality was another critical ethical principle that was strictly observed. Before participating in the study, all educators and stakeholders received comprehensive information regarding the research objectives, procedures, and potential implications. They were explicitly informed that their participation was entirely voluntary and that they retained the right to withdraw at any point without facing any consequences. All participants obtained written consent, ensuring that their involvement was informed and voluntary. In addition, any publications or reports stemming from this study would strictly adhere to the abovementioned ethical considerations.

Results and Discussion:

This section deals with the presentation, analysis and interpretation of data gathered to carry out the objectives of this study. All these were made possible by following certain appropriate procedures so as to give the exact data and solution to each specific problem.

Table 1
Readiness of Schools in the Implementation of Face-to-Face Classes in Planning and Preparation

Item	Mean	Interpretation
1. adjusted the sip (spell out) to align with the demands of reopening the face-to-face.	2.90	Moderate Level
2. submitted supplementary budget realignment to be able to allocate funds for the opening of classes.	4.65	Very High Level
3. met with crucial school focal persons to thoroughly analyze the school's needs vis-à-vis the financial resources available.	4.92	Very High Level
4. oriented teachers and school personnel on the standard operating procedure upon resumption of face-to-face classes.	4.49	High Level
5. presented the school's needs and available resources to parents and LGU during the SOSA.	4.76	Very High Level
6. joined during the barangay LGU session to present the detailed school plan for opening face-to-face classes.	4.54	Very High Level
7. presented the SIP and school operating budget to gain support in addressing school needs	4.75	Very High Level
8. sent a courtesy letter to the municipal Igu expressing the need to reopen face-to-face classes and the school's insufficient budget to ensure safety during resumption.	4.84	Very High Level
9. organized parents to help in school preparation.	4.83	Very High Level
10. tapped local industries and external stakeholders to maximize the acquisition of budgets needed for the resumption of face-to-face classes.	3.41	Moderate Level
Overall Mean	4.41	High Level



Table 1 presents schools' readiness for implementing face-to-face classes on planning and preparation. The overall mean score is 4.41, indicating a high readiness level. The item with the highest mean score is item 3, which is about meeting crucial school focal persons to analyze the school thoroughly needs vis-à-vis the financial resources available. This item has a mean score of 4.92, indicating a very high level of readiness. This suggests that schools are actively engaging key personnel in discussions to understand and address the school's needs about the available financial resources. On the other hand, the item with the lowest mean score is item 1, which is about adjusting the School Improvement Plan (SIP) to align with the demands of reopening face-to-face classes. This item has a mean score of 2.90, indicating a moderate level of readiness. This suggests there may be challenges or areas for improvement regarding aligning the SIP with the requirements of reopening face-to-face classes.

A related study by Orbeta and Paqueo (2022) found that adequate planning and preparation, including adjusting the SIP and budget realignment, are critical factors in successfully implementing face-to-face classes. They added that schools face significant financial challenges in reopening face-to-face classes. The study found that the average cost of reopening a school is PHP 1.2 million, and schools struggle to raise this amount. Another finding is that schools rely on various sources to fund their reopening preparations, including government funding, parent contributions, and donations from the private sector. However, the study found that these sources are insufficient to meet schools' needs. This supports the findings of this study and underscores the importance of these areas in ensuring the readiness of schools for the resumption of face-to-face classes.

Table 2
Readiness of Schools in the Implementation of Face-to-Face Classes on Staff and Facilities

Item	Mean	Interpretation
1. established contact tracing procedures for all who enter the school premises.	3.17	Moderate Level
2. mobilized the school covid-19 DRRM team to ensure effective implementation of the school's health and safety protocols that are in place and are observed during the preparation and progressive e:	4.17	High Level
3. designated a safety officer who serves as the focal person for the health and safety protocols of the school	4.79	Very High Level
4. school health personnel or a designated school clinic teacher to provide essential health services and facilitate referral in coordination with the school health personnel at SDO in the absence of school-based health personnel	4.10	High Level
5. ensured regular sanitation and disinfection of school facilities, furniture, and equipment.	4.70	Very High Level
6. ensured a proper disposal system of infectious wastes in non-contact receptacles, such as used tissues and masks.	4.13	High Level
7. separate leak-proof trash bag/container with a cover adequately labeled as "used PPE" for disposal of all used PPE. In case of unavailability of a yellow trash bag/container, a separate bag/container marked for infectious medical waste identifiable by the waste collector (i.e., yellow ribbon, yellow colored tag) should be available for disposal of all used PPE.	2.39	Low Level
8. required medical-grade face mask for school personnel when collecting/handling the leak-proof trash bag/container	2.30	Low Level
9. disinfected or sprayed collected wastes with a chlorine solution (1: 10) under DOH department memorandum no. 2020-0157.	3.26	Moderate Level
10. displayed visual signages on proper handwashing in handwashing areas	4.73	Very High Level
Overall Mean	3.77	High Level

Table 2 shows schools' readiness for face-to-face classes regarding staff and facilities, with an overall mean score of 3.77, indicating high readiness. The highest score, 4.79, is for item 3, which involves appointing a safety officer responsible for health and safety protocols. This reflects schools' strong emphasis on having a designated safety officer. On the other hand, the item with the lowest mean score is item 8, which requires a medical-grade face mask for school personnel when collecting/handling the leak-proof trash bag or container. This item has a mean score of 2.30, indicating a low level of readiness. This suggests that there may be challenges or areas for improvement regarding ensuring the safety of school personnel handling potentially infectious waste. A study by the World Health Organization (2020) found that effective management of health protocols, proper use of protective equipment, and waste disposal are essential to successfully implementing face-to-face classes. This research similarly emphasized the importance of proactive engagement with stakeholders and the community to secure adequate resources to implement face-to-face classes successfully. This highlights the significance of collaborative efforts in ensuring the readiness of schools for this transition. This supports the findings of this study and underscores the importance of these areas in ensuring the readiness of schools for the resumption of face-to-face classes.



Table 3

Readiness of Schools in the Implementation of Face-to-Face Classes on Health and Safety Protocols

Item	Mean	Interpretation
1. school-goers are subjected to hand hygiene	4.75	Very High Level
2. temperature checks using a thermal scanner, whenever applicable	4.87	Very High Level
3. daily rapid health checks in the classroom?	3.45	Moderate Level
4. mechanism to disinfect leas of the school frequented by personnel or learners who test positive for COVID-19	3.37	Moderate Level
5. private screening area at the entrance where school-goers who show symptoms upon initial screening can be further examined or referred	4.59	Very High Level
6. separate space where sick school-goers who have been managed in the clinic can temporarily stay, awaiting referral to the appropriate health facility, without creating a stigma	1.58	Low Level
7. ensured the availability of proper sanitation and hygiene facilities that followed the essential requirements and standards under DO 10 s. 2016 Policy and Guidelines for the Comprehensive Water, Sanitation and Hygiene In Schools (WINS) program	4.72	Very High Level
8. for schools without a school health personnel, orientation to the clinic teacher by the school health personnel at the SDO for proper guidance on how to effectively run the school clinic	4.75	Very High Level
9. record of students' health status and development, including immunization checks to prevent outbreak-prone vaccine-preventable diseases, e.g., measles	4.63	Very High Level
10. establishment, setting up, or refurbishment of a school clinic to provide essential health services to all school-goers.	4.61	Very High Level
Overall Mean	4.13	High Level

Table 3 presents schools' readiness to implement face-to-face classes on health and safety protocols. The overall mean score is 4.13, indicating a high readiness level. The item with the highest mean score is item 2, which is about conducting temperature checks using a thermal scanner whenever applicable. This item has a mean score of 4.87, indicating a very high level of readiness. This suggests that schools prioritize using thermal scanners to monitor the health of individuals entering the premises. The lowest mean score is for item 6, which involves providing a separate space for sick students to stay temporarily in the clinic before being referred to a health facility, without causing stigma. This item has a mean score of 1.58, indicating a low level of readiness. This suggests that there may be challenges or areas for improvement regarding providing a safe and stigma-free space for sick individuals. This supports the findings of this study and underscores the importance of these areas in ensuring schools' readiness for the resumption of face-to-face classes.

Table 4

Readiness of Schools in the Implementation of Face-to-Face Classes on Planning and Preparation when grouped by Age

Categories	Younger Mean	Interpretation	Older Mean	Interpretation
1. adjusted the sip (spell out) to align with the demands of reopening the face-to-face.	2.90	Moderate Level	2.90	Moderate Level
2. submitted supplementary budget realignment to be able to allocate funds for the opening of classes.	4.65	Very High Level	4.64	Very High Level
3. I met with key school focal persons to thoroughly analyze the school's needs vis-à-vis the financial resources available.	4.91	Very High Level	4.93	Very High Level
4. oriented teachers and school personnel on the standard operating procedure upon resumption of face-to-face classes.	4.50	Very High Level	4.48	High Level
5. presented the school's needs and available resources to parents and LGU during the SOSA.	4.76	Very High Level	4.75	Very High Level
6. joined during the barangay LGU session to present the detailed school plan for opening face-to-face classes.	4.54	Very High Level	4.55	Very High Level
7. presented the SIP and school operating budget to gain support in addressing school needs	4.76	Very High Level	4.74	Very High Level
8. sent a courtesy letter to the municipal LGU	4.85	Very High Level	4.84	Very High Level



expressing the need to reopen face-to-face classes and the school's insufficient budget to ensure safety during resumption.				
9. organized parents to help in school preparation.	4.85	Very High Level	4.81	Very High Level
10. tapped local industries and external stakeholders to maximize the acquisition of budgets needed for the resumption of face-to-face classes.	3.45	Moderate Level	3.37	Moderate Level
Overall Mean	4.42	High Level	4.40	High Level

Table 4 presents schools' readiness to implement face-to-face classes in planning and preparation, grouped by age categories: younger and older. The overall mean score for the younger category is 4.42, indicating a high level of readiness, while for the older category, the overall mean score is 4.40, also indicating a high level of readiness. Despite the slight difference in the overall mean scores, both categories have the same verbal description of high level, implying that both younger and older age groups are similarly prepared for implementing face-to-face classes. Moreover, the high readiness levels for both younger and older schools are encouraging, as this suggests that schools of all ages are prepared for the reopening of face-to-face classes. However, it is essential to note some differences in readiness levels between younger and older schools. For example, younger schools have a higher mean score for the item "tapped local industries and external stakeholders to maximize acquisition of budgets needed for face-to-face classes resumption." This suggests that younger schools may be more proactive in seeking financial support from the community.

On the other hand, older schools have a higher mean score for the item "oriented teachers and school personnel on the standard operating procedure upon resumption of face-to-face classes." This suggests that older schools may be more experienced in implementing new policies and procedures. Overall, the findings in Table 6 indicate that both younger and older schools are well-prepared for reopening face-to-face classes. However, it is essential for schools to be aware of their strengths and weaknesses and to work together to ensure that all students have a safe and triumphant return to school.

Looking at the sub-means, it could be seen that for both age categories, item 3 (conducting meetings on key school focal persons to make a thorough analysis of the school needs vis-à-vis financial resources available) has one of the highest mean scores, indicating a very high level of readiness. This suggests that younger and older age groups actively engage key personnel in discussions to understand and address the school's needs concerning the available financial resources. On the other hand, item 1 (adjusting the School Improvement Plan (SIP) to align with the demands of the reopening of face-to-face classes) has one of the lowest mean scores in both categories, indicating a moderate level of readiness. This suggests there may be challenges or areas for improvement regarding aligning the SIP with the requirements of reopening face-to-face classes, regardless of the age group.

A related study found that age did not significantly impact the preparedness of educators for the transition to face-to-face classes. This aligns with the observed similarity in readiness levels between the younger and older age groups in the current study. Effective planning and preparation, including adjusting the SIP and budget realignment, are critical factors in successfully implementing face-to-face classes (Capinding, 2023).

Table 5
Readiness of Schools in the Implementation of Face-to-Face Classes on Staff and Facilities when grouped by Age

Categories	Younger Mean	Interpretation	Older Mean	Interpretation
1. established contact tracing procedures for all who enter the school premises.	3.19	Moderate Level	3.15	Moderate Level
2. mobilized the school covid-19 DRRM team to ensure effective implementation of the school's health and safety protocols that are in place and are observed during the preparation and progressive e:	4.11	High Level	4.23	High Level
3. designated a safety officer who serves as the focal person for the health and safety protocols of the school	4.81	Very High Level	4.77	Very High Level
4. school health personnel or a designated school clinic teacher to provide essential health services and facilitate referral in coordination with the school health personnel at SDO in the absence of school-based health personnel	4.09	High Level	4.12	High Level



5. ensured regular sanitation and disinfection of school facilities, furniture, and equipment.	4.70	Very High Level	4.70	Very High Level
6. ensured a proper disposal system of infectious wastes in non-contact receptacles, such as used tissues and masks.	4.10	High Level	4.16	High Level
7. separate leak-proof trash bag/container with a cover adequately labeled as "used PPE" for disposal of all used PPE. In case of unavailability of a yellow trash bag/container, a separate bag/container marked for infectious medical waste identifiable by the waste collector (i.e., yellow ribbon, yellow colored tag) should be available for disposal of all used PPE.	2.31	Low Level	2.47	Low Level
8. medical-grade face mask is required for school personnel when collecting/handling the leak-proof trash bag/container	2.21	Low Level	2.40	Low Level
9. disinfected or sprayed collected wastes with a chlorine solution (1: 10) under DOH department memorandum no. 2020-0157.	3.41	Moderate Level	3.10	Moderate Level
10. displayed visual signages on proper handwashing in handwashing areas	4.75	Very High Level	4.71	Very High Level
Overall Mean	3.77	High Level	3.78	High Level

Table 5 presents the readiness of schools for implementing face-to-face classes on staff and facilities when grouped by age. It compares the readiness of schools in two age categories, younger and older, across ten criteria related to the implementation of face-to-face classes during the COVID-19 pandemic.

The overall mean for the younger category is 3.77, interpreted as a high level of readiness. Similarly, the overall mean for the older category is 3.78, also interpreted as a high level of readiness. Despite the slight difference in numerical values, both categories share the same verbal description of readiness, indicating that both age groups are comparably prepared for implementing face-to-face classes. The high readiness levels for both younger and older schools are encouraging, as this suggests that schools of all ages are prepared for the reopening of face-to-face classes.

Looking at the sub-means, we can see that both age groups show a very high level of readiness in designating a safety officer who serves as the focal person for the health and safety protocols of the school, ensuring regular sanitation and disinfection of school facilities, furniture, and equipment, and displaying visual signage's on proper handwashing in handwashing areas. However, both groups show low readiness for having a separate leak-proof trash bag or container for disposal of all used PPE and require a medical-grade face mask for school personnel when collecting/handling the leak-proof trash bag/container. These findings suggest that while some areas of readiness are well-addressed, others need significant improvement.

A related study by the United Nations Educational, Scientific and Cultural Organization UNESCO (2022) supports these findings by indicating that age did not significantly impact the preparedness of educators for the transition to face-to-face classes regarding Staff and Facilities. Moreover, they found that schools' readiness for face-to-face classes during the pandemic varied significantly across different areas, with high readiness in sanitation and safety officer designation but low readiness in waste disposal procedures[i]. This underscores the importance of a comprehensive approach to pandemic readiness in schools.

Table 6

Readiness of Schools in the Implementation of Face-to-Face Classes on Health and Safety Protocols when grouped by Age

Categories	Younger Mean	Interpretation	Older Mean	Interpretation
1. school-goers are subjected to hand hygiene	4.78	Very High Level	4.73	Very High Level
2. temperature checks using a thermal scanner, whenever applicable	4.85	Very High Level	4.89	Very High Level
3. daily rapid health checks in the classroom?	3.45	Moderate Level	3.45	Moderate Level
4. mechanism to disinfect leas of the school frequented by personnel or learners who test positive for COVID-19	3.41	Moderate Level	3.33	Moderate Level
5. private screening area at the entrance where school-goers who show symptoms upon initial screening can be further examined or referred	4.65	Very High Level	4.53	Very High Level



6. separate space where sick school-goers who have been managed in the clinic can temporarily stay, awaiting referral to the appropriate health facility, without creating a stigma	1.64	Low Level	1.51	Low Level
7. ensured the availability of proper sanitation and hygiene facilities that followed the essential requirements and standards under DO 10 s. 2016 Policy and Guidelines for the Comprehensive Water, Sanitation and Hygiene In Schools (WINS) program	4.78	Very High Level	4.66	Very High Level
8. for schools without a school health personnel, orientation to the clinic teacher by the school health personnel at the SDO for proper guidance on how to effectively run the school clinic	4.70	Very High Level	4.79	Very High Level
9. record of students' health status and development, including immunization checks to prevent outbreak-prone vaccine-preventable diseases, e. ., measles	4.66	Very High Level	4.60	Very High Level
10. establishment/setting-up/refurbishment of a school clinic to provide essential health services to all school-goers.	4.65	Very High Level	4.56	Very High Level
Overall Mean	4.16	High Level	4.11	High Level

Table 6 presents the readiness of schools for implementing face-to-face classes on health and safety protocols when grouped by age. It compares the readiness of schools in two age categories, "younger" and "older," across ten different criteria related to health and safety protocols during the COVID-19 pandemic. The overall mean for the "younger" category is 4.16, interpreted as a high level of readiness. Similarly, the overall mean for the "older" category is 4.11, also interpreted as a high level of readiness. Despite the slight difference in numerical values, both categories share the same verbal description of readiness, indicating that both age groups are comparably prepared for implementing health and safety protocols. The sub-means showed that both age groups show a very high level of readiness in most areas, such as subjecting school-goers to hand hygiene, temperature checks using a thermal scanner, and ensuring the availability of proper sanitation and hygiene facilities. However, both groups show a Low Level of readiness in providing a separate space where sick school-goers can temporarily stay, awaiting referral to the appropriate health facility, without creating stigma. These findings suggest that while some areas of readiness are well-addressed, others need significant improvement.

A related study by Johnson et al. (2022) supports these findings. They found that schools' readiness for face-to-face classes during the pandemic varied significantly across different areas, with high readiness for hand hygiene and temperature checks but low readiness for providing separate spaces for sick students. This underscores the importance of a comprehensive approach to pandemic readiness in schools. A study by the Centers for Disease Control and Prevention (CDC) (2022) found that teachers, despite their demographic profiles, indicated the same levels of readiness in the resumption of face-to-face after the lockdowns; schools can reduce the risk of COVID-19 transmission by implementing a layered approach to prevention. This approach includes multiple strategies, such as hand hygiene, temperature checks, masking, and social distancing.

Table 7
Readiness of Schools in the Implementation of Face-to-Face Classes on Planning and Preparation when grouped by Highest Educational Attainment

Categories	Lower Mean	Interpretation	Higher Mean	Interpretation
1. adjusted the sip (spell out) to align with the demands of reopening the face-to-face.	2.91	Moderate Level	2.88	Moderate Level
2. submitted supplementary budget realignment to be able to allocate funds for the opening of classes.	4.63	Very High Level	4.70	Very High Level
3. met with key school focal persons to thoroughly analyze the school's needs vis-à-vis the financial resources available.	4.93	Very High Level	4.91	Very High Level
4. oriented teachers and school personnel on the standard operating procedure upon resumption of face-to-face classes.	4.45	High Level	4.60	Very High Level
5. presented the school's needs and available resources to parents and LGU during the SOSA.	4.78	Very High Level	4.70	Very High Level
6. joined during the barangay LGU session to present the detailed school plan for opening face-to-face	4.49	High Level	4.67	Very High Level



classes.				
7. presented the SIP and school operating budget to gain support in addressing school needs	4.78	Very High Level	4.67	Very High Level
8. sent a courtesy letter to the municipal LGU expressing the need to reopen face-to-face classes and the school's insufficient budget to ensure safety during resumption.	4.82	Very High Level	4.91	Very High Level
9. organized parents to help in school preparation.	4.85	Very High Level	4.77	Very High Level
10. tapped local industries and external stakeholders to maximize the acquisition of budgets needed for the resumption of face-to-face classes.	3.33	Moderate Level	3.63	Moderate Level
Overall Mean	4.40	High Level	4.44	High Level

Table 7 presents the readiness of schools for implementing face-to-face classes on planning and preparation, grouped by highest educational attainment. The table is divided into two categories: lower and higher educational attainment. The overall mean for the lower educational attainment category is 4.40, interpreted as a high level of readiness. Similarly, the overall mean for the higher educational attainment category is 4.44, also interpreted as a high level of readiness. Despite the slight difference in numerical value, both means have the same verbal description, indicating that both groups have a high level of readiness for the implementation of face-to-face classes. The high readiness levels for lower and higher schools are encouraging, as this suggests that schools of all types are prepared for the reopening of face-to-face classes. However, it is essential to note some differences in readiness levels between items in Table 7.

Diokno (2022) supports these findings, indicating that the highest educational attainment did not significantly impact the preparedness of educators for the transition to face-to-face classes concerning planning and preparation. This aligns with the observed similarity in readiness levels between educators with lower and higher educational qualifications in the current study.

Table 8
Readiness of Schools in the Implementation of Face-to-Face Classes on Staff and Facilities when grouped by Highest Educational Attainment

Categories	Lower Mean	Interpretation	Higher Mean	Interpretation
1. established contact tracing procedures for all who enter the school premises.	3.15	Moderate Level	3.21	Moderate Level
2. mobilized the school covid-19 DRRM team to ensure effective implementation of the school's health and safety protocols that are in place and are observed during the preparation and progressive e:	4.18	High Level	4.14	High Level
3. designated a safety officer who serves as the focal person for the health and safety protocols of the school	4.76	Very High Level	4.86	Very High Level
4. school health personnel or a designated school clinic teacher to provide essential health services and facilitate referral in coordination with the school health personnel at SDO in the absence of school-based health personnel	4.10	High Level	4.12	High Level
5. ensured regular sanitation and disinfection of school facilities, furniture, and equipment.	4.68	Very High Level	4.74	Very High Level
6. ensured a proper disposal system of infectious wastes in non-contact receptacles, such as used tissues and masks.	4.09	High Level	4.23	High Level
7. separate leak-proof trash bag/container with a cover adequately labeled as "used PPE" for disposal of all used PPE. In case of unavailability of a yellow trash bag/container, a separate bag/container marked for infectious medical waste identifiable by the waste collector (i.e., yellow ribbon, yellow colored tag) should be available for disposal of all used PPE.	2.40	Low Level	2.35	Low Level
8. medical-grade face mask is required for school personnel when collecting/handling the leak-proof trash bag/container	2.33	Low Level	2.23	Low Level
9. disinfected or sprayed collected wastes with a	3.32	Moderate Level	3.12	Moderate Level



chlorine solution (1:10) under DOH department memorandum no. 2020-0157.				
10. displayed visual signages on proper handwashing in handwashing areas	4.71	Very High Level	4.79	Very High Level
Overall Mean	3.77	High Level	3.78	High Level

Table 8 presents schools' readiness to implement face-to-face classes on staff and facilities, grouped by highest educational attainment. The table is divided into two categories: lower and higher educational attainment. The overall mean for the lower educational attainment category is 3.77, interpreted as a high level of readiness. Similarly, the overall mean for the higher educational attainment category is 3.78, also interpreted as a high level of readiness. Despite the slight difference in numerical value, both means have the same verbal description, indicating that both groups have a high level of readiness for the implementation of face-to-face classes. The high readiness levels for lower and higher schools are encouraging, as this suggests that schools of all types are prepared for the reopening of face-to-face classes. However, it is essential to note some readiness level differences between items in Table 8. For example, both lower and higher schools have low mean scores for the items "separate leak-proof trash bag or container with a cover properly labeled as 'used PPE' for disposal of all used PPE" and "medical-grade face mask required for school personnel when collecting or handling the leak-proof trash bag or container." This suggests that schools of all types may need to improve their procedures for disposing of used PPE. Schools can improve their procedures for disposing of used PPE by developing clear and comprehensive policies and training staff on how to implement these policies.

Regarding sub-means, most items for both categories are rated very high or high, indicating strong readiness in these areas. However, items 1 and 9 for both categories and 7 and 8 for both are rated as moderate and low, respectively, suggesting that these areas may need further attention and improvement. A study by the Philippine Institute for Development Studies (PIDS) (2022) found that schools in the Philippines are generally well-prepared for reopening face-to-face classes despite the teacher's professional and personal attributes. The study also found that schools are most prepared regarding staff and facilities and least prepared regarding budget resources and infrastructure.

Table 9
Readiness of Schools in the Implementation of Face-to-Face Classes on Health and Safety Protocols when grouped by Highest Educational Attainment

Categories	Lower Mean	Interpretation	Higher Mean	Interpretation
1. school-goers are subjected to hand hygiene	4.75	Very High Level	4.74	Very High Level
2. temperature checks using a thermal scanner, whenever applicable	4.84	Very High Level	4.95	Very High Level
3. daily rapid health checks in the classroom?	3.42	Moderate Level	3.53	High Level
4. mechanism to disinfect leas of the school frequented by personnel or learners who test positive for COVID-19	3.29	Moderate Level	3.58	High Level
5. private screening area at the entrance where school-goers who show symptoms upon initial screening can be further examined or referred	4.66	Very High Level	4.42	High Level
6. separate space where sick school-goers who have been managed in the clinic can temporarily stay, awaiting referral to the appropriate health facility, without creating a stigma	1.57	Low Lovel	1.58	Low Lovel
7. ensured the availability of proper sanitation and hygiene facilities that followed the essential requirements and standards under DO 10 s. 2016 Policy and Guidelines for the Comprehensive Water, Sanitation and Hygiene In Schools (WINS) program	4.70	Very High Level	4.77	Very High Level
8. for schools without a school health personnel, orientation to the clinic teacher by the school health personnel at the SDO for proper guidance on how to effectively run the school clinic	4.75	Very High Level	4.72	Very High Level
9. record of students' health status and development, including immunization checks to prevent outbreak-prone vaccine-preventable diseases, e.g., measles	4.72	Very High Level	4.42	High Level
10. establishment/setting-up/refurbishment of a school clinic to provide essential health services to all	4.68	Very High Level	4.42	High Level



school-goers.				
Overall Mean	4.14	High Level	4.11	High Level

Table 9 presents a detailed analysis of schools' readiness for implementing face-to-face classes, focusing on the critical aspect of health and safety protocols. The data is stratified based on respondents' highest educational attainment, distinguishing between those with lower qualifications (bachelor's degree) and higher qualifications (with units in MAED and above).

For those with lower educational attainment, the overall mean readiness score is 4.14, signifying a high level of preparedness. Conversely, respondents with higher educational attainment demonstrate a slightly lower overall mean of 4.11, indicating a high level of preparedness. These scores suggest that regardless of their highest educational attainment, educators exhibit similar readiness levels regarding health and safety protocols.

Both groups share the same verbal readiness description, categorized as "high level." This implies that educators with varying educational backgrounds are equally well-prepared regarding health and safety protocols for resuming face-to-face classes. Results indicate that the highest educational attainment may not significantly influence readiness levels. Both groups of educators have demonstrated comparable levels of preparedness in health and safety protocols, suggesting that other factors may play a more substantial role in influencing readiness levels in this specific aspect. Examining the sub-means for each specific item, it is evident that both groups consistently demonstrate high readiness levels across most aspects. This uniformity further supports the notion that the highest educational attainment is not a

A related study by Lee (2022) did not corroborate these findings. They found that schools with higher educational attainment tend to have higher readiness levels for implementing face-to-face classes, particularly in health and safety protocols. This suggests that educational attainment can significantly affect a school's readiness for face-to-face classes. Moreover, the study found that 90% of respondents believe their schools are ready to reopen face-to-face classes. The study also found that schools are most prepared regarding health and safety protocols, staffing, and curriculum. However, schools could improve their readiness in budget resources and infrastructure. Overall, the study by Dr. Lee suggests that schools in the Philippines are generally well-prepared for reopening face-to-face classes. However, schools could improve their readiness in certain areas, such as budget resources and infrastructure.

Table 10
Readiness of Schools in the Implementation of Face-to-Face Classes on Planning and Preparation when grouped by School Size

Categories	Smaller Mean	Interpretation	Larger Mean	Interpretation
1. adjusted the sip (spell out) to align with the demands of reopening the face-to-face.	2.82	Moderate Level	3.00	Moderate Level
2. submitted supplementary budget realignment to be able to allocate funds for the opening of classes.	4.71	Very High Level	4.58	Very High Level
3. conducted meetings with key school focal persons to thoroughly analyze the school's needs vis-à-vis the financial resources available.	4.89	Very High Level	4.96	Very High Level
4. oriented teachers and school personnel on the standard operating procedure upon resumption of face-to-face classes.	4.59	Very High Level	4.38	High Level
5. presented the school's needs and available resources to parents and LGU during the SOSA.	4.74	Very High Level	4.77	Very High Level
6. joined during the barangay LGU session to present the detailed school plan for opening face-to-face classes.	4.63	Very High Level	4.44	High Level
7. presented the SIP and school operating budget to gain support in addressing school needs	4.74	Very High Level	4.76	Very High Level
8. sent a courtesy letter to the municipal LGU expressing the need to reopen face-to-face classes and the school's insufficient budget to ensure safety during resumption.	4.88	Very High Level	4.80	Very High Level
9. organized parents to help in school preparation.	4.85	Very High Level	4.80	Very High Level
10. tapped local industries and external stakeholders to maximize the acquisition of budgets needed for the resumption of face-to-face classes.	3.44	Moderate Level	3.38	Moderate Level
Overall Mean	4.43	High Level	4.39	High Level



Table 10 provides a detailed assessment of schools' readiness for resuming face-to-face classes, focusing on planning and preparation. The data is categorized based on the school size, distinguishing between smaller and larger institutions. For smaller schools, the overall mean readiness score is 4.43, indicating a high level of preparedness in planning and preparation. Conversely, larger schools exhibit a slightly lower overall mean of 4.39, signifying a high preparedness level. These scores suggest that schools of varying sizes demonstrate comparable readiness levels in the planning and preparation. Both groups share the same verbal readiness description, categorized as "high level." This implies that schools, regardless of their size, exhibit similar levels of preparedness in planning and preparation for the resumption of face-to-face classes.

In terms of implications, this indicates that the school size may not significantly influence the readiness levels. Smaller and larger schools have demonstrated comparable levels of preparedness in planning and preparation, suggesting that other factors may substantially influence readiness levels in this specific aspect. Analyzing the sub-means for each specific item, it is evident that there is a consistent demonstration of high readiness levels across most aspects for both groups. This uniformity further supports the notion that the size of the school is not a predominant factor influencing the readiness levels in planning and preparation.

Diokno (2022) supports these findings as she found that the size of the school only significantly affects the level of readiness for the implementation of face-to-face classes, particularly in planning and preparation. This suggests that the size of the school may be a minor factor in a school's readiness for face-to-face classes.

Table 11
Readiness of Schools in the Implementation of Face-to-Face Classes on Staff and Facilities when grouped by School Size

Categories	Smaller Mean	Interpretation	Larger Mean	Interpretation
1. established contact tracing procedures for all who enter the school premises.	3.23	Moderate Level	3.10	Moderate Level
2. mobilized the school covid-19 DRRM team to ensure effective implementation of the school's health and safety protocols that are in place and are observed during the preparation and progressive e:	4.16	High Level	4.18	High Level
3. designated a safety officer who serves as the focal person for the health and safety protocols of the school	4.76	Very High Level	4.83	Very High Level
4. school health personnel or a designated school clinic teacher to provide essential health services and facilitate referral in coordination with the school health personnel at SDO in the absence of school-based health personnel	4.10	High Level	4.11	High Level
5. ensured regular sanitation and disinfection of school facilities, furniture, and equipment.	4.68	Very High Level	4.72	Very High Level
6. ensured a proper disposal system of infectious wastes in non-contact receptacles, such as used tissues and masks.	4.11	High Level	4.15	High Level
7. separate leak-proof trash bag/container with a cover adequately labeled as "used PPE" for disposal of all used PPE. In case of unavailability of a yellow trash bag/container, a separate bag/container marked for infectious medical waste identifiable by the waste collector (i.e., yellow ribbon, yellow colored tag) should be available for disposal of all used PPE.	2.17	Low Lovel	2.63	Moderate Level
8. medical-grade face mask is required for school personnel when collecting/handling the leak-proof trash bag/container	2.15	Low Lovel	2.48	Low Lovel
9. disinfected or sprayed collected wastes with a chlorine solution (1:10) under DOH department memorandum no. 2020-0157.	3.13	Moderate Level	3.41	Moderate Level
10. displayed visual signages on proper handwashing in handwashing areas	4.73	Very High Level	4.73	Very High Level
Overall Mean	3.72	High Level	3.84	High Level



Table 11 presents an assessment of schools' readiness for the resumption of face-to-face classes, focusing on staff and facilities. The data is categorized based on the school size, distinguishing between smaller and larger institutions. For smaller schools, the overall mean readiness score is 3.72, indicating a high level of preparedness in staff and facilities. On the other hand, larger schools exhibit a slightly higher overall mean of 3.84, signifying a high readiness level. While larger schools have a marginally higher overall mean, both groups share the same verbal description of readiness, categorized as "high level." This suggests that schools, regardless of their size, demonstrate similar levels of preparedness in the Staff and Facilities aspect. Implications drawn from this data indicate that the readiness levels in staff and facilities are relatively consistent between smaller and larger schools. The slight difference in overall mean scores may not be significant, implying that the size of the school may not be a dominant factor influencing the readiness levels in this specific aspect.

Analyzing the sub-means for each specific item, it is evident that smaller and larger schools consistently exhibit high levels of preparedness across most aspects. This uniformity further supports the notion that school size is not a primary factor influencing readiness levels in staff and facilities. Lopez (2021) supports these findings as she found that the size of the school does not significantly affect the level of readiness for the implementation of face-to-face classes, particularly in staff and facilities. This suggests that the size of the school may be a minor factor in a school's readiness for face-to-face classes.

Conclusions:

The findings indicate that the schools themselves exhibited a high level of readiness in implementing face-to-face classes across the board, encompassing planning and preparation, staff and facilities, and health and safety protocols. This trend was consistent when schools were grouped based on the age of teachers, their highest educational attainment, and the size of the schools. This uniform high level of readiness implies a robust overall preparedness of schools, irrespective of these demographic factors. The statistical analysis revealed noteworthy insights. Specifically, there was a significant difference in teachers' readiness concerning planning and preparation when grouped by their highest educational attainment. Additionally, there was a notable discrepancy in readiness when schools were classified based on their size in staff and facilities and health and safety protocols. These findings underscore the importance of considering these factors when tailoring interventions or support for educators and schools to ensure effective face-to-face class implementation. Overall, the study indicates a positive and high level of readiness among both teachers and schools for the resumption of face-to-face classes. It emphasizes the need for tailored approaches to address specific areas of readiness, particularly in planning and preparation for teachers, staff, and facilities, as well as health and safety protocols for schools, considering factors like educational attainment and school size. To enhance preparedness in adjusting the SIP to align with the demands of reopening face-to-face classes, this study calls to initiate a thorough review of the SIP requirements. This should involve a diverse team comprising educators, administrators, and support staff to identify areas necessitating modification in light of the reopening. Prioritizing safety measures within the revised SIP is imperative, allocating adequate resources is essential for successful implementation, engaging stakeholders, including parents, local government units (LGUs), and community members, establish mechanisms for monitoring the actual implementation of the adjusted SIP, and finally, enhance the SIP's overall adaptability to unforeseen events.

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