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Republic of the Philippines
Province of Leyte



SANGGUNIANG PANLALAWIGAN

EXCERPT FROM THE MINUTES OF THE 57TH REGULAR SESSION HELD BY THE SANGGUNIANG PANLALAWIGAN OF LEYTE, AT THE SESSION HALL, LEGISLATIVE BUILDING, PROVINCIAL CAPITOL GROUNDS, TACLOBAN CITY, LEYTE ON 18 SEPTEMBER 2020.

PHYSICALLY PRESENT:

- | | |
|-----------------------------------|------------------------------------|
| 1. Atty. Carlo P. Loreto | Vice Governor/Presiding Officer |
| 2. Hon. Ranulfo S. Abellanosa | 1st District Board Member |
| 3. Hon. Gina E. Merilo | 1st District Board Member |
| 4. Hon. Raissa J. Villasin | 2nd District Board Member |
| 5. Atty. Florante A. Cayunda, Jr. | 5th District Board Member |
| 6. Hon. Emmanuel L. Gacis | 5th District Board Member |
| 7. Hon. Nolie C. Caña | Provl. Liga ng mga Brgy. President |
| 8. Hon. Chiqui Ruth C. Uy | PCL Federation President |

VIRTUALLY PRESENT:

- | | |
|--------------------------------------|--------------------------------|
| 1. Hon. Trinidad G. Apostol | 2ND District Board Member |
| 2: Atty. Anna Victoria Veloso-Tuazon | 3rd District Board Member |
| 3. Hon. Ma. Corazon E. Remandaban | 3rd District Board Member |
| 4. Hon. Ma. Carmen Jean Torres-Rama | 4th District Board Member |
| 5. Hon. Mesias P. Arevalo | 4th District Board Member |
| 6. Hon. Jo Vanille Chua-Merilo | Provl. SK Federation President |

ABSENT:

N O N E

RESOLUTION NO. 2020-664

A RESOLUTION APPROVING ON THIRD AND FINAL READING, PROVINCIAL ORDINANCE NO. 2020-15, ENTITLED: "AN ORDINANCE MANDATING OBSERVANCE OF THE REVISED COVID-19 INTEGRATED LEYTE PROTECTION HEALTH PROTOCOLS, AS UPDATED AND APPROVED BY THE SANGGUNIANG PANLALAWIGAN, AND PROVIDING FOR A FIXED MANDATORY CRITERIA FOR RELEASING COVID-19 POSITIVE PATIENTS FROM ISOLATION IN THE PROVINCE OF LEYTE, AND FOR OTHER PURPOSES".

WHEREAS, on 08 May 2020 the Sangguniang Panlalawigan passed Resolution No. 2020-390, adopting the General COVID-19 Health Monitoring Protocol for Leyte;

WHEREAS, the General COVID-19 Health Monitoring Protocol for Leyte outlines the Responsibilities of the Municipalities in Monitoring and Reporting the Status of Symptomatic Persons in their barangays and the Testing Protocols Using Rapid Test and RT-PCR Test Kits;

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CERTIFIED TRUE COPY
DATE FEB 10 2022
MA. VICTORIA T. RAMOS
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SP-LEYTE

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WHEREAS, the General COVID-19 Health Monitoring Protocol for Leyte has been adopted and approved by the League of Municipalities of the Philippines (LMP) Leyte Chapter;

WHEREAS, pursuant to Article II, Section 15 of the 1987 Philippine Constitution, it is a declared policy of the Provincial Government of Leyte to protect and promote the right to health of the Leyteños;

WHEREAS, Section 16 of Republic Act 7160 otherwise known as the Local Government Code of 1991, mandates the Provincial Government of Leyte and its Component Local Government Units to promote health and safety, maintain peace and order, and preserve the comfort and convenience of Leyteños;

WHEREAS, it is the primordial concern of the Provincial Government of Leyte that necessitates the application of essential provisions under R.A. 11332, which include Mandatory reporting, intensified government Response and measures, and enforced quarantine and isolation, Disease control prevention measures, and the imposition of penalties for prohibited acts, on the premise that a Public Health Emergency is an occurrence of an imminent threat of an illness or health condition, which could pose the high probability of a large number of deaths and widespread exposure to infectious agents;

WHEREAS, the World Health Organization (WHO) in its Scientific Brief dated June 17, 2020 stated that it has received feedback that applying the initial recommendation of two negative RT-PCR tests at least 24 hours apart, in light of limited laboratory supplies, equipment, and personnel in areas with intense transmission, has been extremely difficult, especially outside hospital settings.

WHEREAS, the same Scientific Brief dated June 17, 2020 also provides that although the risk of transmission after symptom resolution is likely to be minimal based on what is currently known, it cannot be completely ruled out. That is why the World Health Organization recommended that countries can still choose to continue using a laboratory testing algorithm as part of the release criteria in (a subset of) infected individuals if their risk assessment gives reason to do so.

WHEREAS, there is a need to set mandatory criteria for releasing confirmed COVID-19 positive patients from isolation.

NOW THEREFORE, on motion of Honorable Raissa J. Villasin, and duly seconded by Honorable Chiqui Ruth C. Uy, Honorable Ranulfo S. Abellanosa, and Honorable Trinidad G. Apostol, be it

RESOLVED to enact, as it is hereby **ENACTED** on third and final reading, the following:

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ORDINANCE NO. 2020-15
Series of 2020

AUTHORS : ATTY. CARLO P. LORETO
ATTY. FLORANTE A. CAYUNDA, JR.
HON. MA. CORAZON E. REMANDABAN
HON. RAISSA J. VILLASIN
HON. EMMANUEL L. GACIS
HON. MARIA CARMEN JEAN TORRES-RAMA
HON. MESIAS P. AREVALO
ATTY. ANNA VICTORIA M. VELOSO-TUAZON
HON. RANULFO S. ABELLANOSA
HON. TRINIDAD G. APOSTOL
HON. CHIQUI RUTH C. UY

AN ORDINANCE MANDATING OBSERVANCE OF THE REVISED COVID-19 INTEGRATED LEYTE PROTECTION HEALTH PROTOCOLS, AS UPDATED AND APPROVED BY THE SANGGUNIANG PANLALAWIGAN, AND PROVIDING FOR A FIXED MANDATORY CRITERIA FOR RELEASING COVID-19 POSITIVE PATIENTS FROM ISOLATION IN THE PROVINCE OF LEYTE, AND FOR OTHER PURPOSES

Be it ordained by the Sangguniang Panlalawigan of Leyte, that:

ARTICLE I

TITLE, POLICY AND PRINCIPLES AND DEFINITION OF TERMS

Section 1. Title. This ordinance shall be known as the “**Uniform COVID-19 Integrated Leyte Protection Health Protocols or ILP Health Protocols Ordinance**”.

Section 2. Policies. Pursuant to Article II, Section 15 of the 1987 Philippine Constitution and Section 16 of Republic Act 7160 otherwise known as the Local Government Code of 1991, the Provincial Government of Leyte, shall:

- 2.a.** Protect and promote the right to health of the Leyteños;
- 2.b.** Promote health and safety, maintain peace and order, and preserve the comfort and convenience of Leyteños.

Section 3. Definition of Terms.

3.a. Asymptomatic Patient refers to a person who tested as positively infected with the COVID-19 virus (a confirmed COVID-19 positive patient) but showing none of the following symptoms:

- 1. Fever (at least 38°C and above)
- 2. Dry Cough
- 3. Sore Throat
- 4. Muscle Pain
- 5. Difficulty in breathing
- 6. Diarrhea
- 7. No Sense of smell/taste

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3.b. Isolation, for purposes of this Ordinance, refers to the physical separation of confirmed COVID-19 positive patients from people who are healthy, and the restriction of the movement of such patients to stop the spread of COVID-19.

3.c. Quarantine, for purposes of this Ordinance, refers to the physical separation and restriction of movement of persons who were exposed to COVID - 19, to see if they become sick with COVID-19 and may therefore become infectious. Quarantine of exposed persons is a public health strategy medically proven to be very effective in protecting the public from disease. Quarantine, as a public health strategy to contain the spread of COVID-19, shall apply to all individuals who are required to observe the mandated Quarantine period on account of (1) arrival in the territorial jurisdiction of Leyte, or (2) exposure to COVID-19, in accordance with the provisions of this Ordinance. The rules governing Quarantine set forth in this Ordinance shall be without prejudice to the application of existing rules governing restrictions in movement of Authorized Persons Outside Residence (APOR).

3.d. Symptomatic Patient refers to a person who tested as positively infected with the COVID-19 virus (a confirmed COVID-19 positive patient) and showing any or all of the following symptoms:

1. Fever (at least 38°C and above)
2. Dry Cough
3. Sore Throat
4. Muscle Pain
5. Difficulty in breathing
6. Diarrhea
7. No Sense of smell/taste

3.e. Cross Border shall refer to individuals who reside or work in a barangay outside the jurisdiction of the Municipality or City that they live or work in, as contemplated in Section 4(e) and Section 4 (g) below.

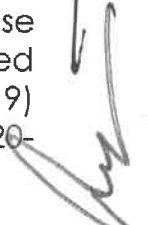
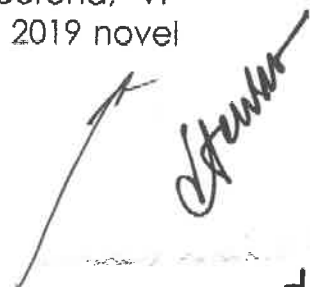
3.f. The Leyte COVID-19 Resource Persons are the resource persons referred to in Section 5(h), including those identified under Section 9 (c) of this Ordinance as resource persons to consult for the continued monitoring, crafting, and proposal of guidelines for the implementation and any necessary modifications for the Province's General COVID-19 Health Monitoring Protocol.

3.g. RT - PCR shall refer to the real time Reverse Transcription - Polymerase Chain Reaction test recommended by the World Health Organization and used as confirmatory test for the diagnosis of Coronavirus disease 2019 (COVID-19) infection, as described in Department of Health Administrative Order No. 2020-0014 and Department of Health Memorandum No. 2020-0258.

3.h. COVID - 19 shall refer to the disease caused by a new strain of coronavirus, and commonly abbreviated as follows: 'CO' stands for corona, 'VI' for virus, and 'D' for disease. Formerly, this disease was referred to as 2019 novel coronavirus' or '2019-nCoV.

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3.i. Quarantine Center shall refer to areas and structures established by or for the account of a component Municipality or City within the jurisdiction of the Province of Leyte, for Quarantine purposes. It shall include (1) Barangay Quarantine Centers, and (2) LGU or local Interagency Task Force (IATF) - accredited privately-owned or run Quarantine centers/facilities located within the territorial jurisdiction of said component City or Municipality.

3.j. Isolation Facility shall refer to areas and structures established by or for the account of a component Municipality or City within the jurisdiction of the Province of Leyte, for Isolation purposes. It shall include (1) Barangay Isolation Centers, and (2) LGU or local Inter-Agency Task Force (IATF) - accredited privately-owned or run Isolation centers/facilities located within the territorial jurisdiction of said component City or Municipality.

ARTICLE II

INTEGRATED LEYTE PROTOCOLS

Section 4. Barangay Health Monitoring System

4.a. The Municipal or City Health Officer (M/CHO) shall regularly update the Barangay Health Monitoring Report on the status of the symptomatic persons in each barangay of their respective municipality or city.

4.b. BHERTs (Barangay Health Emergency Response Teams) shall ask all residents of the barangay to fill-up and submit the Barangay Registration Form-A (crafted at the instance of the LMP for the Integrated Leyte Protection (ILP) Health Protocols) stating the health census of each household.

All registration forms shall be collected and encoded into a database or spreadsheet to be maintained and regularly updated by the Municipal or City Health Officer (M/CHO). The M/CHO shall print out this report on a per barangay basis to give the BHERTs an informed barangay health situation.

4.c. The BHERTs shall strictly monitor all individuals in the barangay who have any symptoms or any changes in an individual's health condition in the barangay. The BHERTs shall accomplish Barangay Health Monitoring Form (crafted at the instance of the LMP for the ILP Health Protocols) to record changes on an individual's health condition and progress.

4.d. The Municipal or City Health Officer shall submit to the Provincial Health Officer the Weekly Barangay Health Monitoring Report, every Monday of the week. All actions and decisions made by the Municipality or City shall be reflected in their updated weekly reports.

4.e. The BHERTs shall also ask all individuals who reside in their barangay but who are working outside of the jurisdiction of the Municipality or City to fill out a Form-C Category C-1 Cross-Border Residents Working Outside of Municipality or City (crafted at the instance of the LMP for the ILP Health Protocols). These workers shall be referred to as **Cross-Borders**.

The BHERTs shall monitor any changes in the health condition of their Cross-Border residents.

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4.f. The BHERTs shall submit all forms to the M/CHO and these shall be keyed by the MHO into the DATABASE-C crafted at the instance of the LMP for the ILP Health Protocols. The Form-C shall be used as an initial registration form. Each time there is an update in the work environment of the cross-border, the same Form-C shall be used by the BHERTs.

4.g. The term Cross-Borders shall also refer to individuals who work in the Municipality or City but reside outside of the same Municipality or City. In this case, the Business Permits and Licensing Office (BPLO) shall spearhead the compilation of the list of all declared employees of the establishment who work in but are not residents of said Municipality or City. All employers and establishments are to accomplish Form-D, Category C-2 Persons Registration Form (crafted at the instance of the LMP for the ILP Health Protocols) as a one-time registration.

4.h. The BPLO shall submit accomplished Form-Ds to the M/CHO and these shall be keyed into a DATABASE-D. If there are any changes on the status of employment, the state of health within the company affecting certain employees, or if there are changes in the health environment in the locality where the employee resides, the same form shall be submitted by the establishment/employer to the BPLO.

4.i. To preempt infection, the BHERTs shall take extra effort and care in monitoring the health condition of residents working in health care facilities. Hence, a one-time registration shall be conducted for all workers working in health care facilities within or beyond the boundaries of the Municipality or City. These residents shall be asked to accomplish Form-E Health Care Worker/Front Liners Weekly Health Declaration (crafted at the instance of the LMP for the ILP Health Protocols).

4.j. Any update in the health of the concerned individual working in a health care facility or any notable changes in the condition of the working environment of the individual shall be reported by the BHERTs using Form-F Inventory of Health Care Workers (crafted at the instance of the LMP for the ILP Health Protocols).

Section 5. RT - PCR Testing Protocol

5.a. The following are considered the seven (7) signs & symptoms of a Symptomatic COVID-19 Infected Patient:

1. Fever (at least 38°C and above)
2. Dry Cough
3. Sore Throat
4. Muscle Pain
5. Difficulty in breathing
6. Diarrhea
7. No Sense of smell/taste

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**Protocol Applicable to Testing Conducted Pursuant to Agreed Leyte COVID—19
Testing Protocol**

5.b. Non-Baseline case is defined to be as follows:

- patient with any symptoms which are not common in the **baseline health data** of the barangay where the patient resides.
- symptomatic patient who had recent travel outside of the barangay and had lived outside of the barangay for at least 7 days.
- currently symptomatic patient who had no recent travel but with household member with recent travel and had lived outside of the barangay for the last 7 days.

5.c. If a person has any of the two of the first three signs and symptoms referred to in Section 5.a., namely: fever, dry cough, sore throat, and whose illness is **non-Baseline** (as described in Section 5.b), the person is a candidate for testing.

5.d. If a person falls under the description in Section 5.b and has further symptoms of any one of the COVID-19 symptoms from 4 to 7 (described in Section 5.a.), the person is a candidate for testing but in addition, the person will be referred to a COVID-19 Hospital.

5.e. If a person had a recent direct contact with a CONFIRMED COVID – 19 positive patient, the person is considered a candidate for testing.

5.f. The Mayor, in consultation with his City or Municipal Epidemiology Surveillance Unit (C/MESU) may decide that a patient is a candidate for testing. The decision may stem from a recently concluded contact tracing or any other reason the Mayor may find relevant to warrant testing.

5.g. The Barangay Health Worker or BHERT shall coordinate with the City/Municipal Health Officer (C/MHO) and shall recommend to the Mayor for the immediate COVID-19 testing for qualified candidates as described in Sections 5.c, 5.d, and 5.e.

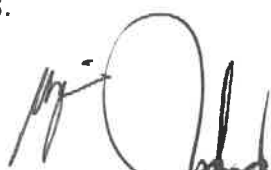
5.h. The C/MHO and/or the Mayor will coordinate with any of the **Leyte COVID-19 resource persons** to confirm the request for swabbing. The coordination is simply to ensure that protocols are being followed and the patients are qualified for swabbing. The coordination can be done via phone call and should not last more than 1 hr.

5.i. The Mayor will then give the order to conduct swab test. The Mayor may also opt to subject the patient to further observation instead of ordering the test based on the discussion with the Leyte COVID-19 resource person. The Mayor will then accomplish a request form to be given to any DOH accredited Virology Laboratory or Testing Center together with the samples. An image of the accomplished form will be sent to the Leyte COVID-19 resource person.

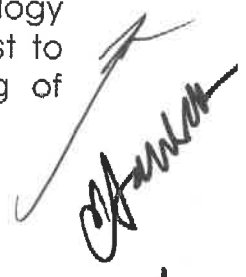
5.j. The resource person will then inform the DOH accredited Virology Laboratory or Testing (COVID-19 Testing Laboratory) regarding the test to be conducted for proper and timely scheduling of the processing of samples.

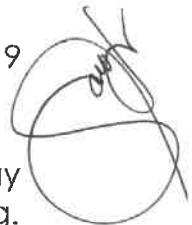
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Protocol for Testing Conducted Through Accredited DOH Facilities

5.k. The Mayor may also opt to have the RT - PCR done thru other accredited DOH facilities such as the EVRMC testing center in Tacloban or the Vicente Sotto Medical Center in Cebu City. In this case, the Mayor shall coordinate and seek approval from the Provincial Health Office (PHO) and/or DOH prior to swabbing to ensure that PHO and DOH testing protocol are observed.

General Quarantine and Isolation Protocol To Comply With After Taking Covid-19 Test

5.l. Upon testing using RT-PCR and while waiting for the results, the person is now classified as Probable and shall observe Quarantine in the City/Municipal Quarantine Facility, in the Barangay Quarantine Facility, in the workplace Quarantine Facility, or in their homes (pursuant to Section 11.k.), as the case may be.

5.m. If a person tests positive:

5.m.1. Contact tracing for all suspected contacts or family interactions is to be done immediately.

5.m.2. All persons that had direct contact with the patient will be deemed candidate for testing.

5.m.3. Contacts who test positive shall cooperate with authorities to ensure observance of the procedures referred to in Sections 5.f. to 5.o.

5.m.4. The person who tested positive will be transferred to the City/Municipal Isolation Center. The LGU maintaining said Isolation Center shall provide food and medical care to their patients, subject to the availability of funds. The LGU may enter into public-private partnerships to comply with their food supply and medical care obligations for COVID-19 positive patients housed in said Isolation Center.

5.m.5. While in Isolation, if the confirmed COVID -19 Positive Patient manifests severe symptom(s), the patient will be referred to a COVID - 19 Hospital.

5.m.6. The patient has to complete 14 days of Isolation before any further RT- PCR test is performed.

5.m.7. If the patient tests positive on the RT - PCR test conducted on the 14th day of Isolation, the person will remain in the Isolation area and shall be RT- PCR tested every 7 days until the test yields a negative result.

5.m.8. The patient shall be discharged after his/her RT - PCR test conducted yields a negative result.

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5.n. If a person tests negative under the RT-PCR test and the person is asymptomatic, then the person will be discharged without prejudice to said person's completion of the 14 day Quarantine in accordance with Section 11.g, unless applicable Quarantine rules provide otherwise. If the person tests negative under the RT-PCR test and has symptoms, the person will undergo a 7- day home Quarantine, after which, another RT - PCR test will be conducted, and the protocols outlined in Section 5.i. and Section 5.m. to Section 5.m.8 will be followed.

5.o. The Mayor and/or the MHO shall report all findings to the PHO and DOH.

Section 6. Swabbing Personnel

6.a. Every LGU and every hospital of the Provincial Government shall nominate at least two (2) trained Swabbing Personnel assigned to and working for the City/Municipal Epidemiology Surveillance Unit (C/MESU).

The Trained Swabbing Personnel should:

6.a.1. Be trained by an authorized and experienced health worker certified by any accredited virology laboratory center;

6.a.2. Complete the training and certification shall include proper handling and transporting of swab samples as well as proper use of PPEs (personal protection equipment); and

6.a.3. Have the certificate of completion of training and that he/she is a qualified swabber. The swabbing Trainer may also opt not to issue the certificate if he/she sees the trainee to be unqualified.

Protocol Applicable to Swab Training as a Precursor For Testing Conducted Pursuant to Agreed Leyte COVID-19 Testing Protocol

6.b. Actual training for those nominated as Swabbing Personnel will be conducted by an authorized and experienced health worker certified and nominated by the DOH accredited Virology Laboratory or Testing Center (the Trainer).

6.c. The training or certification issued by DOH accredited Virology Laboratory or Testing Center shall include proper handling and transporting of swab samples as well as proper use of PPEs (personal protection equipment).

6.d. The swabbing Trainer will issue a certificate of completion of training for qualified candidates. The swabbing Trainer may also opt not to issue the certificate if he/she sees the trainee to be unqualified.

Protocol Applicable to Swabbing and Testing Conducted Pursuant to Agreed Leyte COVID-19 Testing Protocol

6.e. Only certified swabbers will be allowed to extract samples from the patient.

6.f. If the Municipality or City has no Swabbing Personnel and a patient is to be tested, the Mayor of the Municipality or City shall make an arrangement or coordinate with other municipalities or hospitals who have Certified Swabbing Personnel.



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6.g. The concerned City or Municipality shall facilitate for the proper and immediate transport of the samples to the testing laboratory.

6.h. Prior to swabbing, all certified swabbers are required to wear a complete Personal Protective Equipment (PPE).

Section 7. Collection Kit and Specimen Handling

7.a. A collection kit normally contains a) swabs b) Virus Transport Medium (VTM) and c) bio hazard bag. The collection kit shall be kept in storage at a temperature ranging from 2-25 degrees centigrade.

7.b. Once a collection kit is opened and swab is completed, the VTM where the swab is now contained, should be stored in container where the temperature ranges from 2 to 8 degrees centigrade. Normally this would be stored in a vaccine container with ice.

7.c. The swabbed specimen should be sent to the laboratory as soon as possible.

7.d. In the event that the swabbed specimen cannot be sent to the laboratory within the same day, the specimen should be stored in a refrigerator with a temperature range of 2 to 8 degrees centigrade.

Section 8. Testing Protocol Using Rapid Test Kits

8.a. Symptomatic patients should be tested at least 5 days from the onset of any of the symptoms identified under Section 5.a.

8.b. Asymptomatic individuals with close or direct contact to confirmed COVID-19 positive patients should be tested at least 7 days from the latest date of direct contact or exposure to confirmed COVID-19 positive patient.

8.c. If the patient tests positive from a Rapid Test Kit, an RT - PCR test will have to be done and section **8.h.2** to **8.j.** should be followed. Contact tracing should be initiated immediately.

8.d. While waiting for the RT - PCR test results, the patient will remain either in home Quarantine (pursuant to Section 11.k.) or in the City/Municipal Quarantine Center, as the case may be.

8.e. Even if the patient tests negative in the rapid test, the patient shall not be discharged if he/she is symptomatic, in which case the Mayor has the option to place the patient under home or City/Municipal Quarantine (as the case may be) until such time that a confirmatory RT - PCR test yields a negative result.

8.f. Even if the patient tests negative in the RT-PCR but positive in the rapid test, the patient may be discharged unless the patient is symptomatic, in which case the patient will undergo home isolation or municipal quarantine (as the case may be) for 30 days from the last day said patient exhibited any symptom referred to in Section 5.a.

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- 8.g. As RT- PCR testing is the preferred mode of ascertaining whether an individual is presently COVID-19 positive, the use of Rapid tests should only be resorted to by each City or Municipality in the event that (1) the DOH accredited Virology Laboratory or Testing Center is not available or not able to accept specimens within the locality of Leyte, and (2) there are no other RT- PCR test kits available for use by the City/Municipality.
- 8.h. Rapid test can also be used for close contacts (based on contact tracing) while waiting for RT - PCR test results.
- 8.i. Upon the discretion of the Mayor or C/MHO for purposes of contact tracing and baseline monitoring, it is also possible to administer a rapid test on a person suspected of having COVID – 19 even if it has been more than 30 days since the last day of manifestation of any of the symptoms referred to in Section 5.a.
 - 8.i.1. If the result is negative in the test conducted in **Section 8.i.**, no further action is to be taken.
 - 8.i.2. If the result is positive in the test conducted in **Section 8.i.**, **Section 5.i.** and its attendant protocol should be followed.
- 8.j. A Rapid test should be administered by a health worker who has undergone orientation on the conduct of rapid test, preferably a physician, medical technologist, or nurse.

8.k. The Mayor and/or the C/MHO shall report all findings to the PHO and DOH.

Section 9. Leyte COVID-19 Resource Persons

9.a. A Special COVID-19 Committee is hereby created and tasked to regularly coordinate with the Leyte LMP and PHO, for the purpose of regularly updating the protocols to swiftly address urgent, pressing concerns and challenges in connection with the pandemic.

9.b. The Special COVID-19 Committee shall be composed of the following:

Chairman	Governor of the Province of Leyte
Vice-Chairman	Vice Governor of the Province of Leyte
Members	Chairman of the SP Committee on Health LMP Leyte Chapter President Other resource persons selected by the Special COVID-19 Committee

9.c. The Special COVID-19 Committee, upon consultation with the DOH accredited Virology Laboratory or Testing Center, DOH Region VIII, EVRMC, and the Provincial Health Office, shall nominate resource persons who shall continue to monitor, craft, and propose guidelines for the implementation and any necessary modifications for the Province's General COVID-19 Health Monitoring Protocol. The Special COVID-19 Committee may continue to consult private sector resource persons who spearheaded the crafting and adoption of ILP Testing Protocols which were integrated into the Province's General COVID-19 Health Monitoring Protocol.

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Section 10. Protocol For Overseas Filipino Workers (OFW)

10.a. OFWs Who Are Overseas Workers Welfare Authority (OWWA) Members

- 10.a.1. The OWWA shall communicate and coordinate with the Receiving LGU with jurisdiction over the OFW's declared address, regarding OFWs who are requesting to travel to their hometowns.
- 10.a.2. The OWWA shall accompany OFWs to their home province and will endorse them to the LGU representative of their home town (the Receiving LGU Representative) at the port of entry (airport or seaport). The Receiving LGU Representative shall brief the OFW on arrival procedures.
- 10.a.3. The Receiving LGU Representative shall bring the OFW to the Municipal Quarantine Facility for necessary health evaluation.
- 10.a.4. The C/MHO shall conduct a travel background interview. The C/MHO shall recommend either Rapid Test or RT-PCR Test on the patient.
- 10.a.5. For Rapid Test option, please refer to **Section 8**. For RT-PCR option, please refer to **Section 5.i.** onwards.
- 10.a.6. At the end of quarantine, the City/Municipal Health Office shall issue a Medical Certificate stating that said OFW has graduated from quarantine.

10.b. OFWs Who Are Non-Overseas Workers Welfare Authority (OWWA) Members

- 10.b.1. OFWs who are non-OWWA registered are encouraged to get in touch with the OWWA Office.
- 10.b.2. The BHERT shall also include all recently arrived OFWs in the Barangay Health Monitoring Report.
- 10.b.3. All non-OWWA member OFWs shall undergo the same process as OWWA members. If the OFW is already in the barangay and his arrival has just been recently discovered, **Section 8.c.** shall be applied.

Section 11. Protocol For Returning Local Residents and Balik-Probinsya Beneficiaries

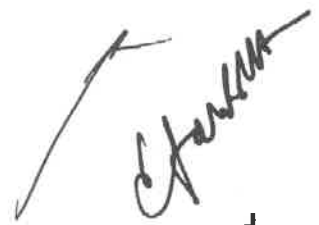
- 11a. **Returning Local Residents** refer to people who are currently located in provinces in the Philippines other than their home province, and who intend to go back to their home towns right after the quarantine in the origin province, city, or municipality is lifted.

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11.b. Balik-Probinsya Program is a National Government program open to Returning Local Residents and individuals who have signified their intention to relocate to their home province ("BP2 beneficiaries"), enabling them to avail of logistical assistance provided by the National Government to facilitate their migration or travel back to their respective hometowns. In this case, the National Government shall coordinate with the Receiving LGU for the purpose of sending individuals back to their respective hometowns. Efficient and expedient coordination between the National government and the Receiving LGU shall necessitate the prompt exchange of pertinent information, which shall include communicating and acknowledging receipt of the following information at the soonest possible time: (1) the names of the people intending to go home to their home towns, (2) destination address, (3) mode of transportation, and (4) port of arrival.

11.c. All Returning Local Residents and BP2 beneficiaries shall coordinate with the Mayor's office or the City/Municipal Health Office of their Receiving LGU prior to departure from their place of origin, and immediately upon their arrival at their respective home towns over which the Receiving LGU has jurisdiction.

11.d. The City/Municipal Health Officer (C/MHO) shall conduct a background interview prior to their arrival, and shall administer a COVID-19 test for each Returning Local Resident and BP2 beneficiary on or after the fifth (5th) day of their arrival in the territorial jurisdiction of the Receiving LGU.

11.e. All arriving individuals shall undergo 14 days quarantine in the designated City/Municipal Quarantine Center, or such other home Quarantine facility sanctioned by public health authorities in accordance with Section 11.k. If the capacity of the City/Municipal Quarantine Center is overwhelmed, the arriving individual shall be quarantined in the designated Barangay Quarantine Facility or accredited Quarantine Center.

11.f. If an RT - PCR test is not performed on the arriving individual, then a rapid test shall be conducted when available in accordance with the relevant provisions of Section 8.

11.g. The RT- PCR test shall be conducted on the arriving individual if, during the course of the 14 day quarantine, said individual develops any of the symptoms referred to in Section 5.a. If said individual tests negative for COVID-19, he or she shall complete the 14 day Quarantine. If the patient tests positive, then the RT-PCR test protocol under Section 5 should be followed.

11.h. In accordance with Section 8.g., if an RT - PCR test is not available, a Rapid test should be conducted. If the Rapid test yields a positive result, an RT - PCR test should be conducted.

11.i. If the Rapid test yields a negative result or if the Rapid test is not available, the person shall remain in Quarantine for 14 days starting from arrival, unless said person exhibits any of the symptoms referred to in Section 5.a, in which case, Section 8.e. shall apply.

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11.j. If the C/MHO suspects that the person has a high probability of being infected during the domestic travel (land, sea and air) and if the person is a candidate for RT - PCR test, then the RT - PCR test shall be conducted on said person on his/her 5th day from arrival at his/her hometown, in order for the Receiving LGU/municipality to ensure detectible viral load and to avoid false negative results in RT - PCR.

11.k. By default, all arriving individuals shall be Quarantined for 14 days in the Municipal quarantine area after assessment by the C/MHO. However, home Quarantine after assessment by C/MHO is an option subject under certain conditions:

11.k.1. Home Quarantine on Day 1 of arrival is possible on the condition that the arriving person/persons are going to stay in an exclusive house with no other existing residents for the duration of the 14 days quarantine. The house shall be inspected by the designated people from the Mayor's office. Home Quarantine will have to have an approval and concurrence from the Barangay Chairman. The Barangay Chairman shall ensure that the Quarantine protocols are adhered to.

11.k.2. Completion of the 14 days Quarantine by moving the person from the municipal/barangay Quarantine to home Quarantine is possible under the following condition: 1) the person has undergone RT - PCR test and the result is negative; 2) the house to which the person will be moving to has a dedicated room separate from the rest of the existing residents of the house; 3) preferably the Quarantine room has dedicated toilet and bath facilities.

11.k.3. The Barangay Chairman shall see to it that the person in Quarantine shall be monitored by posting the barangay tanod near the house of the person in Quarantine. The BHERT shall also monitor the health condition of the person in Quarantine and shall report information to the MHO on a regular basis.

11.l. The component City/Municipalities in the Province of Leyte are encouraged to pass an ordinance or resolution making it mandatory for each arriving person to report to the Office of the Mayor or the MHO to supplement the Mandatory Registration, Disclosure and Reporting for COVID-19 Contact Tracing, Surveillance, and Response Provincial Ordinance No. 2020-12.

11.m. The City/Municipalities in the Province of Leyte are also encouraged to formulate a reward system for those people who report arrival of any person who did not coordinate with the Office of the Mayor or the C/MHO, to supplement the Mandatory Registration, Disclosure and Reporting for COVID-19 Contact Tracing, Surveillance, and Response Provincial Ordinance No. 2020-12.

Section 12. Information Sharing And Contact Tracing

12.a. Once a person tests positive in either RT - PCR based testing or rapid testing, it is imperative that information should be shared with municipalities concerned so the spread of the COVID-19 virus can be contained.

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12.b. During the contact tracing, the Mayor should order a thorough interview with the patient who tested positive, complete with timeline and detailed narrative. The interview should be documented in writing, and if possible, with video or audio recording.

12.c. The information should be shared with the LGU and National Government Agencies (NGAs), particularly where these NGAs may be affected by the contact tracing underway due to exposure or possible contamination as a result of direct contact with a confirmed COVID-19 positive patient. The information sharing is intended to address the spread of COVID-19 envisioned by scenarios similar to the following example where Municipal A has a Confirmed COVID-19 positive patient who had contact with people in Municipal B, thus necessitating the sharing by Municipal A of its detailed interview with Municipal B so that Municipal B can take proper action including triggering contact tracing in Municipal B.

12.d. Data privacy shall be observed in the handling of protected information regarding a confirmed COVID -19 patient, in consonance with the guarantee protecting the data privacy rights of patients from unbridled disclosure to the public that has been proven to cause a real risk of severe harm to patients. As such, all personally-identifiable information gathered shall be treated with utmost confidentiality and should only be shared with pertinent authorities with the aim of ensuring public safety as the primary purpose.

12.e. The Mayor shall form a contact tracing team that includes , but not limited to, the following as members: 1) PNP personnel with background in Cognitive Interview; 2) City/Municipal Health Officer.

12.f. Contact tracing is a very crucial tool and how it is conducted and how it is shared will determine the spread or containment of COVID – 19 infection. Hence, during the conduct of contact tracing in a City/Municipality where COVID -19 infection has been recently discovered, the LMP, thru its chapter President, shall send an augmentation tracing team to assist the affected municipality.

12.g. The Mayor and/or the C/MHO shall report all findings to the PHO and DOH.

Section 13. Responsibilities of the Municipality or City

13.a. Prior to the conduct of swab test, the Mayor or C/MHO shall inform and coordinate with any one of the COVID-19 Resource persons.

13.b. The concerned municipality shall be responsible for the transportation of samples to the laboratory.

13.c. The Municipality shall enter into a MOA with an accredited DOH accredited Virology Laboratory or Testing Center and other independent or private RT - PCR testing laboratories that may be established and accredited, wherein the City/Municipality will only pay for the cost of the RT- PCR test kit and minor consumables every time a test is conducted and/or processed.

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13.d. The LMP and DOH accredited Virology Laboratory or Testing Center will not be expected to provide rapid test kits. Sourcing of Rapid test kits are within the discretion of the component Cities/Municipalities. However, the LMP may facilitate the sourcing of the rapid test kits for expediency.

13.e. Every component City/Municipality within the jurisdiction of the Province of Leyte should have their respective city/municipal Quarantine Center, city/municipal Isolation Facility, adequate Quarantine centers in the barangays, and at their option, privately owned or run accredited Quarantine Centers and Isolation Facilities.

13.f. Each LGU shall keep track of all the patients residing or based in their territorial jurisdiction who have undergone testing.

13.g. Each LGU shall strictly submit their updated Barangay Health Monitoring Report every Monday in accordance with Section 4.d.

13.h. Each City/Municipality shall have at least two qualified swabbers trained by qualified personnel of accredited DOH Virology Laboratory or Testing Center in accordance with Section 6.a.

13.i. The Mayor and/or the C/MHO shall report all findings to the PHO and DOH.

ARTICLE III

MANDATORY CRITERIA FOR RELEASING CONFIRMED COVID-19 POSITIVE PATIENTS FROM ISOLATION

Section 14. Criteria for Releasing COVID-19 Positive Patients from Isolation.

14.a. Asymptomatic Patients. An isolated Asymptomatic Patient who initially tested positive for COVID-19 and subsequently tested negative on the RT-PCR test after his or her Isolation period of fourteen (14) days shall be immediately released from Isolation. However, said patient shall remain in Isolation if he/she tests positive.

14.b. Symptomatic Patients. An isolated Symptomatic Patient who tested positive on the RT-PCR test after his or her Isolation period of fourteen (14) days shall remain in Isolation. Repeat RT-PCR test shall be administered to him or her every seven (7) days thereafter, until the result becomes negative, regardless of whether or not said patient shows any symptoms.

14.c. Other Cases. If an Isolated patient tested negative but is showing symptoms, the patient shall remain in Isolation until the symptoms have disappeared and the confirmatory RT-PCR test yields a negative result.

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ARTICLE IV

FUNDING

Section 15. Funding. Such amount as may be necessary for the proper and effective implementation of this Ordinance shall be taken from the available fund of the Provincial/City and Municipal Health Office, Provincial/City and Municipal Disaster Risk Reduction Management Office, concerned offices and other funds not otherwise appropriated.

The Governor, City or Municipal Mayor, as the case may be, is hereby authorized to utilize whatever funds that would be granted from the Bayanihan to Recover as One Act to Local Government Units.

ARTICLE V

PENAL PROVISIONS

Section 16. Penalties. Non-observance of any provision of this Ordinance by any person shall be fined with Five Thousand Pesos (Php5,000.00) or imprisonment not exceeding one (1) year or both, shall be imposed for each act at the discretion of the court.

If the offender is a public officer, the maximum penalty herein shall be imposed without prejudice to the filing of Administrative case and imposition of preventive suspension as warranted, during the pendency of the case.

If committed by a juridical person, the President, General Manager, Corporate Secretary or person with related interest in the Corporation or Partnership or Association shall be held liable or penalized accordingly.

ARTICLE VI

FINAL PROVISIONS

Section 17. Separability Clause. If, for any reason or reasons, any part or provision of this Ordinance shall be held unconstitutional or invalid, other parts or provisions hereof, which are not affected thereby, shall continue to be in full force and effect.

Section 18. Repealing Clause. All ordinances, rules and regulations, or part thereof, in conflict with, or inconsistent with any provisions of this Ordinance are hereby repealed or modified accordingly.

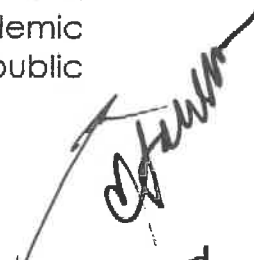
Section 19. Effectivity. This Ordinance shall take effect immediately upon approval due to the urgency of the concern caused by the COVID-19 pandemic. Should the declared state of national emergency be lifted, the regulations imposed in this Ordinance shall accordingly be suspended until a subsequent Declaration of State of Calamity is made in accordance with Section 16 of Republic Act No. 10121, or a subsequent Declaration of Epidemic or Public Health Emergency is made in accordance with Section 7 of Republic Act No. 11332.

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PASSED AND ENACTED on 18 September 2020 by the Sangguniang
Panlalawigan in session assembled.

Approved unanimously.


I HEREBY CERTIFY to the correctness of the foregoing resolution.


FLORINDA JILL S. UYVICO
Secretary to the Sanggunian


ATTESTED:



HON. GINA E. MERILO
Sangguniang Panlalawigan Member



HON. RANULFO S. ABELLANOSA
Sangguniang Panlalawigan Member


HON. TRINIDAD G. APOSTOL
Sangguniang Panlalawigan Member
(Virtually Present)


HON. RAISSA J. VILLASIN
Sangguniang Panlalawigan Member


HON. MA. CORAZON M. REMANDABAN
Sangguniang Panlalawigan Member
(Virtually Present)


HON. ANNA VICTORIA M. VELOSO-TUAZON
Sangguniang Panlalawigan Member
(Virtually Present)


HON. MESIAS P. AREVALO
Sangguniang Panlalawigan Member
(Virtually Present)

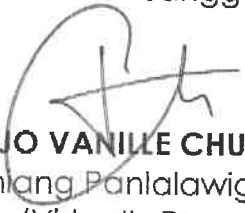

HON. MARIA CARMEN JEAN TORRES-RAMA
Sangguniang Panlalawigan Member
(Virtually Present)

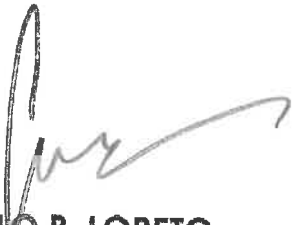

ATTY. FLORANTE A. CAYUNDA JR.
Sangguniang Panlalawigan Member


HON. EMMANUEL L. GACIS
Sangguniang Panlalawigan Member


HON. NOLIE C. CAÑA
Sangguniang Panlalawigan Member


HON. CHIQUI RUTH C. UY
Sangguniang Panlalawigan Member


HON. JO VANILLE CHUA-MERILO
Sangguniang Panlalawigan Member
(Virtually Present)



ATTY. CARLO P. LORETO
Vice Governor and Presiding Officer



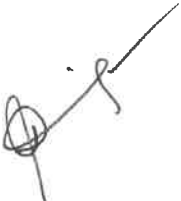
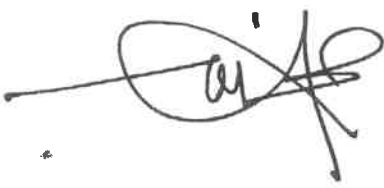
Approved:



LEOPOLDO DOMINICO L. PETILLA
Governor

13 OCT 2020

Date



Republic of the Philippines
Province of Leyte
City/Municipality of _____

BARANGAY HEALTH REGISTRATION FORM

CONTROL No.: _____ DATE: _____
PUROK/ZONE: _____ BARANGAY: _____

NGARAN: _____
CONTACT NUMBER: _____
BIRTHDAY: _____ SEX: _____ TIMBANG: _____
KAHITAAS: _____

PRE-EXISTING NA SAKIT OR KONDISYON: *(Paki check an mayda)*

- | | | |
|-------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Cancer (all types) | <input type="checkbox"/> Schisto |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Malnourished |
| <input type="checkbox"/> High Blood | <input type="checkbox"/> Sakit ha Atay | At iba pa _____ |
| <input type="checkbox"/> TB | <input type="checkbox"/> Sakit ha Bato | _____ |
| | | _____ |
| | | _____ |

REMARKS:

CERTIFIED BY: _____ NOTED BY: _____
HEALTH WORKER / BHERT / BHW _____
PUNONG BARANGAY _____



Amk...

Republic of the Philippines
Province of Leyte
City/Municipality of _____

BARANGAY HEALTH REGISTRATION FORM

CONTROL No.: _____ DATE: _____
PUROK/ZONE: _____ BARANGAY: _____

NGARAN: _____
CONTACT NUMBER: _____
BIRTHDAY: _____ SEX: _____ TIMBANG: _____
KAHITAAS: _____

PRE-EXISTING NA SAKIT OR KONDISYON: *(Paki check an mayda)*

- | | | |
|-------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Cancer (all types) | <input type="checkbox"/> Schisto |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Malnourished |
| <input type="checkbox"/> High Blood | <input type="checkbox"/> Sakit ha Atay | At iba pa _____ |
| <input type="checkbox"/> TB | <input type="checkbox"/> Sakit ha Bato | _____ |
| | | _____ |
| | | _____ |

REMARKS:

CERTIFIED BY: _____ NOTED BY: _____
HEALTH WORKER / BHERT / BHW _____
PUNONG BARANGAY _____



Republic of the Philippines
Province of Leyte
City/Municipality of _____

HEALTH PROTOCOL
CATEGORY C-1 PERSONS REGISTRATION FORM

Amplified

Category C-1 Persons are CROSS-BORDERS WORKERS who are _____ residents but working outside of the City/Municipality of _____

Should there be any changes on the status or information, please fill up a new form.

To the Punong Barangay, please submit this form to the _____ C/MHO.

PERSONAL DETAILS:

Name: _____

Last Name	First Name	Middle Name
_____	_____	_____

Home Address: _____

No.	Street	Barangay	Zone/Purok	City/Municipality
_____	_____	_____	_____	_____

Permanent Address: _____

No.	Street	Barangay	Zone/Purok	City/Municipality
_____	_____	_____	_____	_____

Birthday: _____ Age: _____ Sex: M / F

Contact Nos. _____

WORK DETAILS:

Name of Establishment: _____

Address: _____

No.	Street	Barangay	Zone/Purok	City/Municipality
_____	_____	_____	_____	_____

Contact No.: _____

Position: _____ Employer
_____ Employee

Nature of business: _____

Office _____ Factory/Warehouse _____
Store _____ Others _____

Does your job involve travel outside of your workplace? If yes, where, nature of travel and mode of transportation.

I understand that I am under the legal obligation to abide by the Covid-19 Health Protocols of _____, Leyte. I am aware that I may face criminal prosecution and be penalized under existing laws should I fail to observe the same.

Name and Signature

Date

CERTIFIED BY:

RECEIVED BY:

Punong Barangay / Employer

MHO

Date Received

Date Received

[Handwritten signatures and initials]

Republic of the Philippines
 Province of Leyte
 City/Municipality of _____

HEALTH PROTOCOL
 CATEGORY C-2 PERSONS REGISTRATION FORM

Category C-2 Persons are CROSS-BORDERS WORKERS who are Non-residents but working in the City/Municipality of _____. Should there be any changes on the status or information, please fill up a new form. Please submit this form to the C/MHO.

BUSINESS DETAILS:

Name of Establishment: _____

Address: _____
 No. _____ Street _____ Barangay _____ Zone/Purok _____ City/Municipality _____

Employer Name: _____

Contact Number.: _____

Nature of business: Office _____ Store _____ Factory/Warehouse _____ Others _____

EMPLOYEE NAME	ADDRESS	BIRTHDAY	AGE	POSITION	WITH COVID 19 HEALTH CONCERNS (EMPLOYEE / HOUSEHOLD / BRGY)	REMARKS

Note: REMARKS are details pertaining to the Health Status of an individual, their household, or barangay health status that affects public health.

I understand that I am under the legal obligation to abide by the Covid-19 Health Protocols of _____, Leyte. I am aware that I may face criminal prosecution and be penalized under existing laws should I fail to observe the same.

CERTIFIED BY:

 Employer Name and Signature

 Date

RECEIVED BY:

 City/Municipal Health Officer

 Date Received





HEALTH PROTOCOL

HEALTH CARE WORKER / FRONT LINERS WEEKLY HEALTH DECLARATION

Date: _____
Name: _____
Birthday: _____ Age: _____
Zone: _____ Barangay: _____
Name of Hospital / Institution: _____
Position: _____
Contact No.: _____

For Residents and Non-residents:

1. Do you have a newly arrived household member from outside of the province in the past 14 days?

____ No
____ Yes From where? _____

2. Does anybody in the household have any of the ff symptoms:

____ No		
____ Yes	Self	Others
	Colds	_____
	itchy Throat	_____
	Cough	_____
	Fever	_____

3. Is anybody in the household confined in a hospital?

____ No _____ Yes

4. Is anybody in the household declared to be a positive Covid-19 patient in the past 14 days?

____ No			
____ Yes	Current status:	Yes	No
	With symptoms	_____	_____
	Confined in Hospital	_____	_____
	Confined in Quarantine facility	_____	_____

For Residents only:

1. Have you been outside of the City/Municipality of _____ in the past 7 days?

____ No
____ Yes

	Self	
Who? (check)	_____	
Where?	_____	
How long?	_____	

Surveyed by:

Signature over Printed Name

Amber

HEALTH PROTOCOL

HEALTH CARE WORKER / FRONT LINERS WEEKLY HEALTH DECLARATION

Date: _____
Name: _____
Birthday: _____ Age: _____
Zone: _____ Barangay: _____
Name of Hospital / Institution: _____
Position: _____
Contact No.: _____

For Residents and Non-residents:

1. Do you have a newly arrived household member from outside of the province in the past 14 days?

____ No
____ Yes From where? _____

2. Does anybody in the household have any of the ff symptoms:

____ No		
____ Yes	Self	Others
	Colds	_____
	Itchy Throat	_____
	Cough	_____
	Fever	_____

3. Is anybody in the household confined in a hospital?

____ No _____ Yes

4. Is anybody in the household declared to be a positive Covid-19 patient in the past 14 days?

____ No			
____ Yes	Current status:	Yes	No
	With symptoms	_____	_____
	Confined in Hospital	_____	_____
	Confined in Quarantine facility	_____	_____

For Residents only:

1. Have you been outside of the City/Municipality of _____ in the past 7 days?

____ No
____ Yes

	Self	
Who? (check)	_____	
Where?	_____	
How long?	_____	

Surveyed by:

Signature over Printed Name

Ercus *[Signature]*

FORM F

Republic of the Philippines
Province of Leyte
City/Municipality of _____

_____ HEALTH PROTOCOL
INVENTORY OF HEALTH CARE WORKERS

Date: _____
Name: _____
Birthday: _____ Age: _____
Zone: _____ Barangay: _____
Name of Hospital / Institution: _____
Position: _____
Contact No.: _____

NAME OF HOUSEHOLD MEMBERS

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

Surveyed by: _____
Signature over Printed Name




FORM F

Republic of the Philippines
Province of Leyte
City/Municipality of _____

_____ HEALTH PROTOCOL
INVENTORY OF HEALTH CARE WORKERS

Date: _____
Name: _____
Birthday: _____ Age: _____
Zone: _____ Barangay: _____
Name of Hospital / Institution: _____
Position: _____
Contact No.: _____

NAME OF HOUSEHOLD MEMBERS

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

Surveyed by: _____
Signature over Printed Name