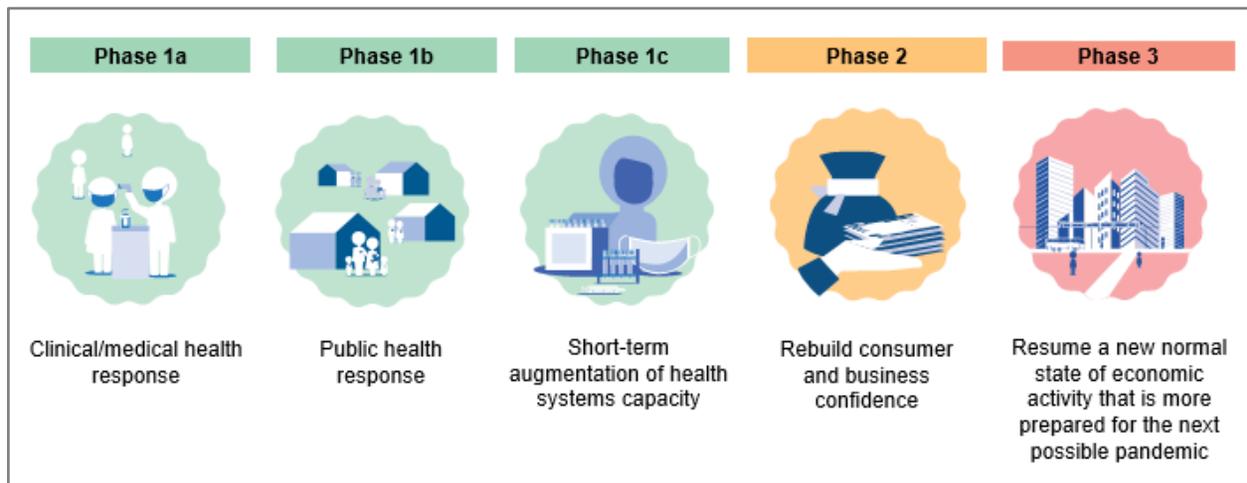


LGUs outside NCR can be better prepared to fight COVID-19

Presently, the epicenter of the Coronavirus Disease (2019) COVID-19 infection in the Philippines is the National Capital Region (NCR). This could be hugely attributed to the region’s major international airports and high population density. Before the implementation of the enhanced community quarantine (ECQ), people from across the country and the world have been moving in and out of NCR and this has contributed to the spread of COVID-19. Eventually, the pandemic has also reached other parts of the country and at this time, many local government units (LGUs) outside NCR can be better prepared to fight COVID-19.

To address the social and economic impact of COVID-19, the National Economic and Development Authority emphasizes the importance of implementing a whole-of-government and whole-of-society approach to protect the health and wellbeing of Filipinos. Thus, it has proposed a three-phased program of interventions in response to the pandemic.¹

Figure 1. NEDA’s three-phased program to address the social and economic impact of COVID-2019



This note suggests ways in which LGUs can carry out clinical/medical health response, public health response, and short-term augmentation of health systems capacity which are Phases 1a, 1b, and 1c of the program.

¹ The full NEDA report “Addressing the Social and Economic Impact of the COVID-19 Pandemic” can be accessed through this link: http://www.neda.gov.ph/wp-content/uploads/2020/03/NEDA_Addressing-the-Social-and-Economic-Impact-of-the-COVID-19-Pandemic.pdf

Mitigating Measures

The funding requirements for the interventions under these phases need to be determined in coordination with the relevant agencies. LGUs should also note that some of these measures will have to be undertaken immediately while with some, temporary solutions may be needed.

Phase 1a: Clinical/Medical Health Response

Phase 1a is the clinical and medical response to rising COVID-19 cases. It consists of interventions for early detection and testing, effective quarantine systems, and effective management and treatment of cases.

Early detection and tracing

Systems must be in place to facilitate contact tracing, as needed. Passengers in public transport can be required to fill up a Health Declaration Form, with contact details. Drivers and operators can compile these forms, to be submitted as needed. Other countries have used a Mobile App to keep a history of close contacts over a certain period. If Internet access is a problem, a simple diary will do. Needless to say, data should be kept confidential and used only for purposes of contact tracing. Thus, protocols for data submission and management need to be in place, consistent with the Data Privacy Law.

Each LGU must work with the regional health offices to set up protocols for referrals using data gathered. The interim guidelines on contact tracing for confirmed COVID-19 cases issued by the Department of Health must also be observed.²

Effective quarantine

DOH has already issued guidelines on home quarantine.³ LGUs can help in explaining the guidelines to persons under monitoring (PUMs), perhaps even translating the guidelines into the local language or transforming these into infographics. LGU personnel can also augment the DOH personnel in keeping track of the health conditions of the PUMs. LGUs must also be ready to provide for the basic necessities of these PUMs, as necessary.

Effective management and treatment

Much of the interventions on management and treatment of cases is the domain of medical institutions. However, LGUs can ensure that these medical institutions are supported in every aspect.

LGUs can arrange for regular transport services, or even temporary accommodation for health care workers. LGUs may need to issue special permits for the different transport or accommodation units.

² <https://www.doh.gov.ph/sites/default/files/health-update/DC2020-0048-Reiteration-of-DM2020-0068-Interim-Guidelines-on-Contact-Tracing-for-Confirmed-2019-nCoV-ARD-Cases.pdf>

³ <https://www.doh.gov.ph/sites/default/files/health-update/DM-Interim%20Guidelines%20for%20Home%20Quarantine.pdf>

Phase 1b

Phase 1b consists of public health measures: travel ban, ban on crowded gatherings, school closures, flexible work arrangements, limits on business operations and later on, work suspension.

In all these, LGUs need to issue clear guidelines, taking off from the directives of the Inter-Agency Task Force on Emerging Infectious Diseases. Information, education, and communication (IEC) materials to promote personal hygiene and boost the immune system need to be rolled out.

LGUs should also ensure that proper sanitation is maintained in all public places (wet markets, streets, barangay and municipal halls, transport terminals, etc.) Private establishments also need to be informed of the proper disinfection protocol and other measures to maintain cleanliness and sanitation. Thermal scanning among individuals that are about to enter these places and spaces is also suggested in order to curb the spread of the disease.

Surgical masks can be reserved for the use of health-related personnel, while non-medical personnel are encouraged to wear washable face masks. The wearing of face masks in public places is said to be one of the factors for the low COVID-19 infection rate in South Korea. DOST has partnered with a garment factory in Taytay, using technology developed by the Philippine Textile Research Institute to produce face masks that is water-repellent on one side, but can be washed up to 50 times over.

It is also important to ensure that the flow of basic goods and services is unhampered during this phase. LGUs may need to issue special passes for selected employees, delivery trucks of essential goods and designate special highway lanes, etc.

LGUs must be ready to deploy personnel to man the checkpoints. An orientation workshop with the checkpoint frontliners will definitely help clarify issues. They also need to be provided with adequate personal protective equipment (PPEs).

In order to mitigate the impact of work suspensions, government will implement a social amelioration package for the poor and vulnerable. LGUs can prepare for this by coming up with a registry of the poor and vulnerable households in their respective areas. The registry should include verifiable information as to the demographic information, socioeconomic status, usual occupation, address, contact information and if currently receiving any assistance from government.

There is bound to be a number of well-meaning individuals and organizations that will volunteer resources, in cash or in kind. A system to manage the receiving and deploying of these donations need to be put in place.

Phase 1c

Phase 1c calls for short-term augmentation of health facilities and human resources for health.

In NCR, hospitals have become spreading grounds for the disease. To date, ten medical doctors have died. To avoid or minimize the likelihood of these happening, LGUs must put up temporary outpatient consultation facilities that are not in hospitals. All residents must be informed that consultations for respiratory problems and fever will be at these temporary consultation facilities. Health care workers at these facilities need to be given the proper PPE.

If the LGU is able, a testing laboratory can be set up, subject to biosafety standards.⁴

Makeshift infrastructure is needed to isolate PUMs, especially if the houses of the PUMs are not suitable for self-isolation. LGUs can already identify suitable facilities and locations for this. Public school facilities may be an option, subject to the guidelines set by the Department of Education.⁵ Plans to convert or construct these facilities need to be drawn up; one that is near, but not in, a high-density area can be set up right away. Systems to implement the quarantine protocol need to be prepared including health monitoring systems, provision for food, water, and other basic necessities, etc.

LGUs also need to coordinate closely with all hospitals with respect to materials needed. Depending on the needs of other LGUs, there may be a need to produce these materials locally. NEDA has a number of recommendations on how certain businesses can be reconfigured to help in the fight against COVID-19. LGUs will need to expedite the permitting requirements, if needed. There is also the matter of facilitating the delivery of these needed materials.

Cross-cutting interventions

COVID-19 is a novel coronavirus, which means that there is a lot that we do not know about it. Extensive monitoring and health surveillance systems need to be undertaken to build the knowledge base, so that prevention, management and treatment can be improved. LGUs can help in the conduct of these systems. Smart LGUs can contribute even more. Now is the time for these LGUs to brainstorm on ways that they can contribute to this effort.

The interventions discussed above require utmost cooperation from the public. Thus, it is important to generate public support for the public health measures. It is important to be clear on why the measures are being undertaken, but that help will be given to those who need it the most.

A task force can be created at the local level that mimics the structure of the National Task Force on COVID-19. LGU actions, supplemented by private sector initiatives, need to be well-orchestrated. Most importantly, leadership has to be visible.

⁴ <https://apps.who.int/iris/bitstream/handle/10665/331138/WHO-WPE-GIH-2020.1-eng.pdf>

⁵ <https://www.deped.gov.ph/wp-content/uploads/2020/03/OM-OSEC-2020-002.pdf>