

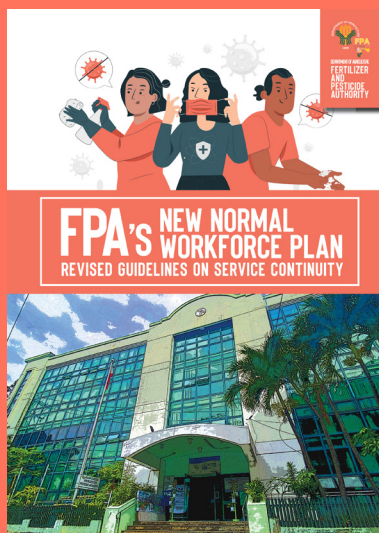


# FPA'S NEW NORMAL WORKFORCE PLAN

REVISED GUIDELINES ON SERVICE CONTINUITY







## The FPA'S New Normal Workforce Plan: Revised Guidelines on Service Continuity

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Department of Agriculture

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Published by:  
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ISBN: 978-621-96675-0-0 (Softbound)  
ISBN: 978-621-96675-1-7 (PDF)





# FOREWORD

The FPA'S New Normal Workforce Plan: Revised Guidelines on Service Continuity was prepared in consistent with the applicable issuances of the Department of Agriculture (DA) and other relevant government entities such as the Inter-Agency Task Force (IATF), Department of Health (DOH), and the Civil Service Commission (CSC).

As the COVID-19 pandemic continues to progress, the Non-Pharmaceutical Interventions (NPIs) have to be implemented FPA-wide. These guidelines consider the potential risks that threaten the service continuity of the Agency; hence, these provide guidance and information to assist the Agency to respond to the COVID-19 pandemic and assist the entire organization with response and recovery moving forward towards the "new normal" for the continuity of essential service operations and processes while protecting the welfare of the employees.

Due to the evolving situation caused by the COVID-19 and on considerations for State-level decision making, the laws and regulations will supplant the provisions of this Service Continuity Guide.



# EXECUTIVE DIRECTOR'S MESSAGE



Amid the health crisis, the unquestionable strength of our institution is adaptability. The Agency never stopped to seek ways to adapt and improve service rendering for the Filipino agricultural stakeholders even when most services around us shut down. We know very well that the farmers and fishers are one of the most vulnerable sectors, mainly because of economic setbacks resulting from disturbances in access to resources, and service deliveries.

There is a consistent threat in food security and livelihood that calls for the FPA as the regulating agency overseeing valuable inputs (fertilizers and pesticides) in food production to attempt to perform its duties while also putting in prime consideration the welfare of workforce in the battle line. Hence, the creation of the FPA'S New Normal Workforce Plan: Revised Guidelines on Service Continuity.

We focus our strength and resources on beating the pandemic while trying to give the same service despite limited capacity. This manual is in line with the provisions and guidelines imposed by the IATF, DOH, and the CSC. It shall provide protection and preliminary courses of action to the Agency staff and personnel who are at risk in the middle of performing their duties. We value our workforce and commend them for showing up, even when most services are halted.

I urge everyone to remain vigilant, kind, and respectful to each other and care for each other's holistic welfare, as it is a conscious effort for all of us to perform our respective functions and duties in these circumstances.

A stylized, handwritten signature in black ink, appearing to be 'WR' or similar, positioned above the printed name.

**WILFREDO C. ROLDAN**  
Executive Director



# DEPUTY EXECUTIVE DIRECTOR'S MESSAGE



The world health crisis has changed how we run our day-to-day life. While our safety and welfare are at the forefront of our concerns for the past years, the impact of the pandemic has undeniably hit sectors in different manners.

This is why, being in the position of service, the call to continue to serve is even greater. At one point, those who are in the public service and development sectors need to face off the anxiety and get things done, be it under very limited and different circumstances. The uncertainties should no longer delay us. We need to devise a way to adapt to the new normal situation, because our stakeholders, the Filipino farmers, are left vulnerable when movements are restricted, and services are delayed.

This handbook is an instrument to protect the workforce of the FPA, at the same time, reflects the effort of the Agency to carry on with the service it is mandated to provide for the Philippine agricultural sector.

In the pursuit of continued service, this guideline is created to protect the implementers and staff, and organize courses of action within the organization for better response, and prevention against the risk posed by our duty. In line with the mother department and frontline task force aimed at forwarding our welfare in this difficult time, we present to you the FPA's New Normal Workforce Plan: Revised Guidelines on Service Continuity.

We continue to see the conclusion of the pandemic together and move forward towards rebuilding the nation.

A handwritten signature in black ink, appearing to be 'Myer G. Mula'.

**MYER G. MULA, PhD**  
Deputy Executive Director for Fertilizer



# DEPUTY EXECUTIVE DIRECTOR'S MESSAGE



An unexpected global health crisis has transformed conventional socio-economic affairs that compelled everyone to live with and adapt to. Transition and work setup has been difficult for policies and project implementers, but most especially for those who live by day's wage. I am emphasizing the farming and fishing communities, which since time immemorial served as the backbone of the country.

The situation posed an unknown threat to break down the food supply chain, which then instantly jeopardized many Filipinos' livelihood. Those that have been greatly affected by mobility restrictions are in the rural areas, relatively dependent on farming and fishing activities. Having the responsibility and primary task to oversee the use of valuable agricultural inputs such as fertilizers and pesticides in food production, the Agency is driven to continue to operate, so as not to delay or pause the timely and essential delivery of services, now that strengthening food production is in the top priorities to sustain the nation during the pandemic.

With the confusions in health standards, FPA sought to figure out how to serve the public without risking the health of our workforce, and so, the FPA's New Normal Workforce Plan: Revised Guidelines on Service Continuity has been developed.

The guideline contains courses of action to be taken by the Agency in the serious effort to protect our workforce and maintain a humane approach for the continuation of our service.

I ask everyone to be extremely cautious and watchful as the threat remains in our periphery. Proven to be resilient, our compassion and dedication as a nation are put to test. May we all get through this, as one.

**ERIC C. DIVINAGRACIA**  
Deputy Executive Director for Pesticide







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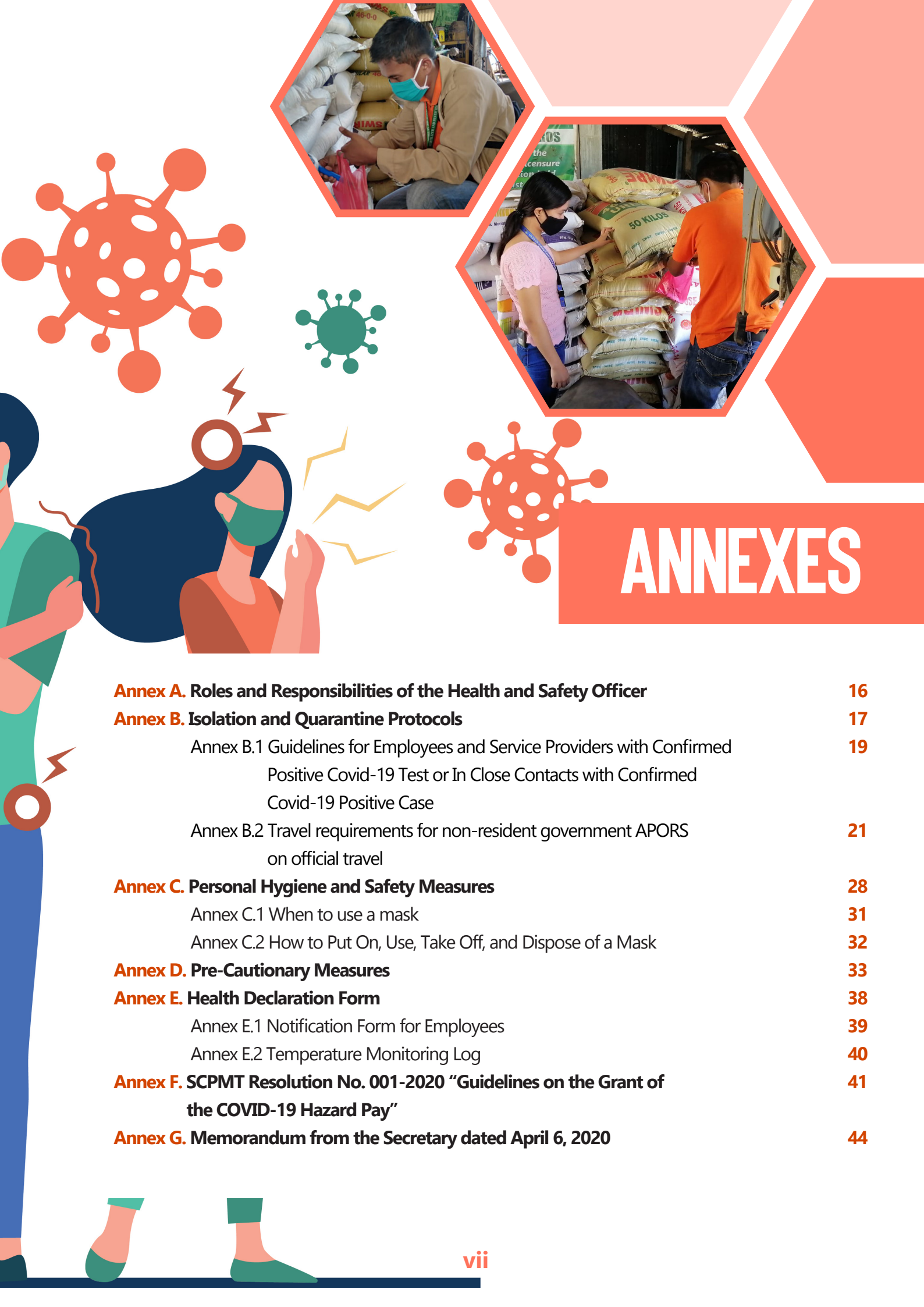
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# ACRONYMS



<b>APOR</b>	Authorized Persons Outside of Residence
<b>AWA</b>	Alternative Work Arrangement
<b>BHERT</b>	Barangay Health Emergency Response Teams
<b>COS</b>	Contract of Service
<b>CSC</b>	Civil Service Commission
<b>DA</b>	Department of Agriculture
<b>DOH</b>	Department of Health
<b>ECQ</b>	Enhanced Community Quarantine
<b>EID</b>	Emerging Infectious Diseases
<b>FPA</b>	Fertilizer and Pesticide Authority
<b>HRMS</b>	Human Resource Management Section
<b>IATF</b>	Inter-Agency Task Force
<b>ITS</b>	Information and Technology Services
<b>LOA</b>	Leave of Absence
<b>NPI</b>	Non-Pharmaceutical Interventions
<b>PMID</b>	Planning Management and Information Division
<b>PPE</b>	Personal Protective Equipment
<b>RT-PCR</b>	Reverse Transcription Polymerase Chain Reaction
<b>SCG</b>	Service Continuity Guidelines
<b>SCP</b>	Service Continuity Plans
<b>SCPMT</b>	Service Continuity Planning and Management Team
<b>WFH</b>	Work-from-Home



# BACKGROUND

This document serves as a guide to ensure service continuity and safety by all officials, employees and stakeholders of the Agency amidst the Coronavirus Disease (COVID-19) pandemic.

The primary consideration of this Guide are the following key services operational risks:

- a. Human Resource Management
- b. Process and Service Functions
- c. Logistics; and
- d. Communications

In the preparation for the New Normal, universal and mandatory safety measures and support mechanisms shall be provided, such as:

- a. Mandatory wearing of masks in public places and workplaces;
- b. Availability of handwashing and sanitizing stations;
- c. Mandatory social and physical distancing measured at least one (1) but preferably two (2) meters between individuals in all public spaces;
- d. Mandatory temperature checks of all individuals;
- e. Use of personal protective equipment or testing laboratories or facilities;
- f. Contact tracing systems for individuals who have been confirmed positive of the virus; and
- g. Placement of both online and offline information materials.

# DEFINITION OF TERMS

For purposes of this Guide, the following shall be defined as follows:

**Agency** - refers to the Fertilizer and Pesticide Authority.

**Alternative Work Arrangements** - refer to work arrangements consisting of a combination of the above enumerated work arrangements or other work arrangements appropriate/applicable to the agency subject to the prevailing alert level in the area where the agency is located and the nature of work/job performed by the employee/s.

**Alert Level 1** - refers to areas wherein case transmission is low and decreasing total bed utilization rate, and intensive care unit utilization rate is low.

**Alert Level 2** - refers to areas wherein case transmission is low and decreasing, healthcare utilization is low, or case counts are low but increasing, or case counts are low and decreasing but total bed utilization rate and intensive care unit utilization rate is increasing.

**Alert Level 3** - refers to areas wherein case counts are high and/or increasing, with total bed utilization rate and intensive care unit utilization rate at increasing utilization.

**Alert Level 4** - refers to areas wherein case counts are high and/or increasing, with total bed utilization rate and intensive care unit utilization rate at high utilization.

**Alert Level 5** - refers to areas wherein case counts are alarming, with total bed utilization rate and intensive care unit utilization rate at critical utilization.

**COVID-19** - refers to Coronavirus Disease 2019 which is caused by the virus known as the severe acute respiratory syndrome coronavirus2 (SARS-CoV-2).

**COVID-19 Alert Level System** - refers to the new Community Quarantine Classifications for dealing with COVID-19 covering entire cities, municipalities and/or regions; aimed to manage and minimize the risk of the disease through System Indicators, Triggers and Thresholds determined by the IATF to specify the public health and social measures to be taken in relation to the COVID-19 response, as may be updated based on new scientific knowledge, information about the effectiveness of control measures in the country and overseas, and its application.

**Department** - refers to the Department of Agriculture.

**Enhanced Community Quarantine (ECQ)** - refers to the implementation of temporary measures imposing stringent limitations on movement and transportation of people, strict regulation of operating industries, provision of food and essential services, and heightened presence of uniformed personnel to enforce community quarantine protocols.

**Minimum public health standards** - refers to guidelines set by the DOH, as well as sector-relevant guidelines issued by government agencies, to aid all sectors in all settings to implement non-pharmaceutical interventions (NPI), which refer to public health measures that do not involve vaccines, medications or other pharmaceutical interventions, which individuals and communities can carry out in order to reduce transmission rates, contact rates, and the duration of infectiousness of individuals in the population to mitigate COVID-19.



**New Normal** - refers to the emerging behaviors, situations, and minimum public health standards that will be institutionalized in common or routine practices and remain even after the pandemic while the disease is not totally eradicated through means such as widespread immunization. These include actions that will become second nature to the general public as well as policies such as bans on large gatherings that will continue to remain in force.

**Operational capacity** - refers to such a maximum number of employees who can be permitted or required to physically report to work on-site in a particular office or establishment.

**Service Continuity Plans (SCPs)** - refers to the Service Continuity Plans including Service Management, Human Resource Management, Process and Service Functions, Resource Management and Logistics and Communications.

**Skeletal workforce** - refers to the operational capacity which utilizes the smallest number of people needed for a business or organization to maintain its basic function.

**Service Providers** - refers to security and janitorial services and the like.

**Work-from-Home (WFH)** - refers to an output-oriented work arrangement that authorizes the personnel to produce outputs/results and accomplishments outside of the office.









# GUIDELINES

## 1. ON SERVICE CONTINUITY PLAN

### 1.1 Human Resource Management

The Agency's designated Health and Safety Officer shall ensure that all employees are familiar and in compliance with the Service Continuity Guidelines (SCG) during this period of the pandemic. The roles and responsibilities of the Health and Safety Officer are listed in **Annex A**.

Moreover, FPA has to ensure uninterrupted delivery of service to the public, a skeletal workforce shall be maintained.

The Human Resource Management and the General Service Section shall:

- a. Consider the Agency's operational capacity, suggest feasible alternative work arrangements such as Work-from-Home; Skeletal Workforce; and/or a combination of any of the above.

A Memorandum Order shall be issued for this purpose.

For Work-from-Home (WFH) arrangements, employees with immunodeficiency, comorbidities, or at high risk of being infected, as well as pregnant and those who are 60 years old shall be prioritized.

All Divisions shall adopt a clear output-based system. Employees should be given tasks to be performed to the full extent possible in terms of man-days per work week including dissemination through electronic platforms of relevant information of the Department's Agency's programs, projects and related matters concerning the COVID-19 pandemic (**Annex G**).

They are required to be on stand-by and be on-call as the exigency of service may so require. They shall always be available anytime to go work onsite or to go on official travel as required by the office. They are also reminded to make themselves available in all forms of communications whether through phone, electronic mail, messaging, and other means of communications. Failure to comply shall mean no compensation for the Contract of Service (COS) employees, while Leave of Absence (LOA) shall be filed for the permanent employees.

- b. Confidential information and intellectual property rights shall be protected and secured at all times;

The Health and Safety Officer shall monitor the health condition of all personnel and provide service provider for the conduct of reverse transcription polymerase chain reaction (RT-PCR) or antigen; and

- c. Strictly implement public health response measures such as contact tracing and social distancing.

### 1.2 Process and Service Functions

All Division Chiefs shall identify their respective frontline services with critical and essential functions and shall designate employees to carry out appropriate functions as declared by an Executive Order (EO). Precautionary measures must be observed



such as social distancing, reduction of physical contact, the use of PPEs, and among others through health protocol guidelines of the Department of Health (DOH).

### **Agency Operational Capacity**

**Alert Level 5.** The Agency shall observe the guidelines applicable to Enhanced Community Quarantine (ECQ) as provided for under the IATF Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines, as amended. The benefits applicable to ECQ shall be applicable in Alert Level 5.

**Alert Level 4.** The Agency shall remain to be fully operational and shall adhere to at least 40% on-site capacity while applying work-from-home and other flexible work arrangements and/or provided by guidelines by the Secretary of Agriculture.

**Alert Level 3.** The Agency shall remain to be fully operational and shall adhere to at least 60% on-site capacity while applying work-from-home and other flexible work arrangements and/or provided by guidelines by the Secretary of Agriculture.

**Alert Level 2.** The Agency shall remain to be fully operational and shall adhere to at least 80% on-site capacity while applying work-from-home and other flexible work arrangements and/or provided by guidelines by the Secretary of Agriculture.

**Alert Level 1.** The Agency shall operate, work, or be undertaken at full on-site or venue/seating capacity provided it is consistent with minimum public health standards and/or provided by guidelines by the Secretary of Agriculture.

### **1.3 Resource Management and Logistics**

The General Services Section shall ensure the maintenance of cleanliness of the office environment and arrange regular disinfection protocols throughout the workplace premises.

Set parameters for the rational and effective use of available resources and logistics.

### **1.4 Communications**

The Information and Technology Services (ITS) shall assist in the setting up of effective and efficient communication channels relevant to the service continuity.

## **2. WORKPLACE PRECAUTIONARY MEASURES**

The basic measures shall be implemented by the Agency and each employee as specified in **Annex D** (Paragraph V).

In general, these measures shall be included in the workplace risk assessment that shall cover all risks, including those caused by biological agents, as set out in national occupational health and safety legislation.

### **2.1 Duties and Responsibilities of the Agency**

Aside from the other duties/responsibilities of the Agency as specified in **Annex D** (Paragraph IV) of this document; the Agency shall further implement the following:

#### **2.1.1 Alternative Work Arrangements**

Alternative work arrangements shall be implemented during Alert 2 to Alert 5 aligned to the order of the Department to maintain social distancing measures and reduce physical contact.

As part of the COVID-19 countermeasures, all FPA personnel shall continue to as much as possible avoid public transport and crowded places. Alternative work arrangements will enable the organization to continue operations while prioritizing the safety of its employees.

All employees and service providers shall stay home if sick, experiencing a mild cough or low-grade fever (37.8°C or more) following the isolation and quarantine protocols in **Annex B**, or if they have had to take simple medications, such as paracetamol/acetaminophen, ibuprofen or aspirin, which may conceal symptoms of infection.

### **2.1.2 Personal Hygiene and Safety Measures**

All employees and service providers shall strictly follow personal hygiene and safety measures as listed in **Annex C**.

The Health and Safety Officer shall coordinate and provide relevant information to all employees and service providers as specified in **Annex A** (Items 1-3). Health Infographics shall be prominently displayed in common areas to encourage personal hygiene and for increased guidance.

To avoid gathering of crowds, information dissemination on the promotion of health advocacies and other initiatives for increased body resistance as protection from COVID-19 and other viruses shall be made through email blasts, audio announcements, and other available mass communication means.

The Health and Safety Officer shall ensure the availability of adequate resources and logistics as specified in **Annex A** (Items 6-7).

### **2.1.3 Cleanliness of the Work Environment**

The Agency, through the Health and Safety Officer and the General Services Section, shall ensure and maintain the cleanliness of the work environment to reduce the spread and risk of infection as provided in **Annex D** (Paragraphs IC and D).

#### **2.1.3.1 Protocols upon Entry**

The Agency, through the Health and Safety Officer and the General Services Section, shall ensure strict compliance with entry protocols as provided in **Annex D** (Paragraph IA).

#### **2.1.3.2 Work Environment**


The Agency, through the Health and Safety Officer and the General Services Section, shall ensure strict compliance with disinfection and waste disposal protocols as provided in **Annex D** (Paragraphs IB and C).

### **2.1.4 Protocol for Determination of Necessary Medical Action**

The Agency, through the Health and Safety Officer, shall determine appropriate action for employee/s with or without symptoms who have reason/s to suspect infection through the use of the Department of Health Screening Tool for COVID-19 <https://www.doh.gov.ph/2019-nCoV>.

The Health and Safety Officer, shall determine if the employee is:

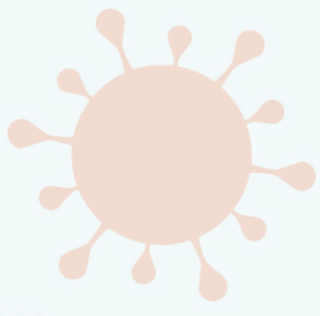
- a. returning from travel to affected areas, within the last 14 days;
- b. returning from travel anywhere else, within the last 14 days; and

- 
- c. unwell, displays flu-like symptoms and has reasons to suspect exposure to COVID-19.

Based on the results of the decision tools issued by the DOH (i.e. DOH Department Memorandum Order No. 2020-0178 on "Interim Guidelines on Health Care Provider Networks During the COVID-19 Pandemic), appropriate actions shall be executed as necessary.

While waiting for advice from the nearest health facility or hospital, the Health and Safety Officer with assistance from the General Services Section shall ensure strict compliance with all the measures provided in **Annex D** (Paragraph III).

### **2.1.5 Accommodation of Clients and Visitors**



The Agency, through the Health and Safety Officer and the General Services Section, shall ensure strict compliance with the precautionary measures provided in **Annex D** (Paragraphs I and II) on accommodating clients and visitors. These include submission of a duly accomplished Health Declaration Form (Annex E); disinfection of all in-bound vehicles and equipment; practicing of social distancing; avoiding face to face meetings; and the use of Personal Protective Equipment (PPEs).

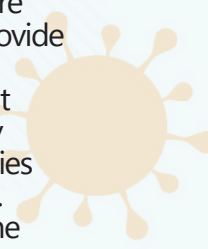
### **2.1.6 Organizing Meetings, Events, and Deploying Employees for Field Work**

As much as possible, the Agency discourages non-essential face-to-face meetings and/or events. Thus, alternative means to conduct internal and external meetings, training, and seminars to maintain social distancing measures and reduce physical contact shall be promoted and implemented.

Otherwise, the Agency shall be guided with the following key considerations as prescribed by the World Health Organization (WHO).

#### **2.1.6.1 Before the Meeting or Event**

Before a meeting or event, the concerned office of the Agency shall:

- a. Check and follow the advice from the authorities in the community where the meeting or event is to be conducted.
  - b. Develop and agree on a preparedness plan to prevent infection at the meeting or event, and consider the following questions:
  - c. Whether a face-to-face meeting or event is needed. Could it be replaced by a teleconference or online event?
  - d. Could the meeting or event be scaled down so that fewer people attend?
  - e. Verify information and communication channels in advance with key partners such as public health and health care authorities.
  - f. Pre-order sufficient supplies and materials, including tissues and hand sanitizer for all participants. The Agency shall have masks available to offer to anyone. Actively monitor where COVID-19 is circulating and advise participants in advance that if they have any symptoms or feel unwell, they should not attend. Make sure all organizers, participants, caterers, and visitors at the event provide contact details: mobile telephone number, email, and address where they are staying. The organization shall consider relevant data privacy laws, i.e. Data Privacy Act of 2012, and state clearly that their details will be shared with local public health authorities if any participant becomes ill with suspected infectious disease. Anyone who does not agree to this condition cannot attend the
- 



- event or meeting. Identify a room or area where any person who is feeling unwell or has symptoms can be safely isolated.
- g. Have a plan on how to safely transfer the sick person to a health facility.
  - h. Know the protocols if a meeting participant, staff member, or service provider tests positive for COVID-19 during or just after the meeting.
  - i. Agree in advance on a plan with your partner health care provider or health department.
  - j. Develop and agree on a response plan in case someone at the meeting becomes ill with symptoms of COVID-19 such as dry cough, fever, and malaise.

#### **2.1.6.2 During the Meeting or Event**

During the meeting or event, the concerned office of the Agency shall:

- a. Provide information or a briefing, preferably both orally and in writing, on COVID-19 and the measures that organizers are taking to make this event safe for participants.
- b. Build trust. For example, as an icebreaker, practice ways to say hello without touching.
- c. Encourage regular hand-washing or use of an alcohol rub by all participants at the meeting or event.
- d. Encourage participants to cover their face with the bend of their elbow or tissue if they cough or sneeze. Supply tissues and closed bins for disposal. Provide contact details or a health hotline number that participants can call for advice or give information.
- e. Display dispensers of alcohol-based hand rub prominently around the venue.
- f. If there is space, arrange seats so that participants are at least 1 meter apart.
- g. Open windows and doors whenever possible to make sure the venue is well ventilated.
- h. If anyone starts to feel unwell, follow a preparedness plan or call a health facility hotline. Depending on the situation in the area, or recent travel of the participant, place the person in the isolation room. Offer the person a mask.

#### **2.1.6.3 After the Meeting or Event**

After the meeting or event, the concerned office of the Agency shall:

- a. Retain the names and contact details of all participants for at least one month. This will help public health authorities trace people who may have been exposed to COVID-19 if one or more participants become ill shortly after the event.
- b. If someone at the meeting or event was isolated as a suspected COVID-19 case, the organizer should inform participants. They should be advised to monitor themselves for symptoms for the required no. of days (Annex B) and take their temperature twice a day.
- c. If they develop even a mild cough or low-grade fever (i.e. a temperature of 37.8° C or more) they should stay at home and self-isolate. This means avoiding close contact of less than one meter with other people, including family members. They should also call their health care provider or the local public health department, giving them details of their recent travel and symptoms.

#### 2.1.6.4 Deploying Employees for Field Work

As much as possible, the Agency shall defer from deploying employees for fieldwork unless deemed necessary to the continuity of the service. The Agency, through the Health and Safety Officer, shall be updated on the latest relevant advisories from the IATF, DOH and the Civil Service Commission (CSC).

If fieldwork is essential, employees are encouraged to observe personal hygiene and safety measures, use PPEs and maintain social distancing. The Agency shall provide assistance as be necessary.

## 2.2 Communications Responsibilities of Employees and Service Providers

### 2.2.1 Personal Hygiene and Safety Measures

All employees and service providers shall be guided by **Annexes C to C.2** detailing personal hygiene and safety measures and the proper use of a face mask.

Personal hygiene and safety measures shall be observed whether the employee or service provider is inside or outside the workplace to reduce the potential risk of infection and the spread of infection.

It is recommended that each employee or service provider carry a personal toiletry bag for his/her protection.

Also, all employees and service providers must increase their physical and mental resilience by practicing the following daily healthy habits:

- a. Eating nutritious and well-cooked food;
- b. Drinking plenty of fluid;
- c. Having adequate rest and at least eight (8) hours of sleep;
- d. Exercising regularly;
- e. Taking vitamins to boost immune systems; and
- f. Getting at least 30 minutes of sunshine daily.

### 2.2.2 Cleanliness of the Work Environment

All employees and service providers shall be guided by **Annex D** (Paragraph I) of this document in maintaining the cleanliness of their respective work environments.

In addition, the individual shall ensure that applicable cleanliness measures are also observed at home to reduce potential risk of infection and the spread of infection.

### 2.2.3 Protocol for Determination of Necessary Medical Action

All employees and service providers shall be guided by the Department of Health Screening Tool for COVID-19 <https://www.doh.gov.ph/2019-nCoV> if:

- a. returning from travel to affected areas, within the last 14 days;
- b. returning from travel anywhere else, within the last 14 days; and
- c. unwell, displays flu-like symptoms and has reasons to suspect exposure to COVID-19.

Based on the results of the decision tools issued by the DOH, appropriate actions shall be executed as necessary.

While waiting for advice from the nearest health facility or hospital, the Health and Safety Officer with the assistance from the General Services Section shall ensure strict compliance with all the measures provided in **Annex D** (Paragraph III).

#### **2.2.4 Attending Meetings, Events, and Field Work Protocol**

Before attending a meeting, event, or reporting for fieldwork, an employee shall verify if:

- Physical presence is required. Communicate with the organizer if digital or virtual attendance is possible; and
- It is safe to go outside. Check advisories and issuances from the IATF, DOH, LGU, and other government agencies.
- If the employee deems his/her physical presence necessary and has verified that access is being allowed by respective LGUs to reach the destination, the personnel may attend the meeting, event, or report to the fieldwork.
- The employee shall strictly observe personal hygiene and safety measures, use PPEs and observe social distancing at all times.

#### **2.2.5 Protocol of Employees with Symptoms and Suspect, Probable and Confirmed Cases including Close Contacts with Confirmed Positive Covid-19 Case**

All employees and service providers must report immediately with the Human Resource Management Section if they are experiencing low-grade fever, mild cough, sore throat, and other COVID-19 symptoms or in close contact with confirmed positive COVID-19 result and shall be guided by **Annex B-1**.

#### **2.2.6 Protocol of Employees on Official Travel to Agency's Regional and Provincial Offices**

All employees and service providers must report immediately with the Human Resource Management Section if they are experiencing low-grade fever, mild cough, sore throat, and other COVID-19 symptoms or in close contact with confirmed positive COVID-19 result and shall be guided by **Annex B-1**.

#### **2.2.7 Protocol on RTPCR and Antigen Testing Prior to Travel**

All employees shall be individually directed to go to testing facilities, hereby lessen the risk of spreading the virus to other staff. Employees who do not comply with the said directive will not be paid on the days he/she is in the quarantine period for COS and for permanent staff to apply for sick leave.











# ANNEXES



## **Annex A**

### **ROLES AND RESPONSIBILITIES OF THE HEALTH AND SAFETY OFFICER**

The Health and Safety Officer shall:

1. Actively monitor the development of the pandemic and stay updated on the latest issuances of the Philippine Government.
2. Coordinate with the DA SCPMT, the ITS of the Planning Management and Information Division (PMID) and all employees to ensure effective communication and implementation of procedures as called for by the authorities and/or the Department/Agency.
3. Coordinate on the provision of relevant information to employees such as:
  - measures on personal hygiene;
  - appropriate personal protective equipment and procedures on proper use;
  - medical devices and procedures on proper use;
  - social distancing measures; and
  - work environment measures.
4. Ensure the daily conduct of temperature and symptom monitoring of employees and all clients and visitors before entering work/office premises and prior to leaving the work/office premises.
5. Monitor closely, all employees, clients, and visitors that show symptoms and high fever. Procedures upon detection of visitors and employees that show symptoms shall be carried out as guided by the DOH Screening Tool for COVID-19 <https://www.doh.gov.ph/2019-nCoV>.
6. Ensure, through the General Services Section, availability of adequate supplies of the following:
  - medical devices (thermometers, thermal scanners, if possible),
  - face masks
  - soap
  - alcohol-based hand sanitizers containing at least 60% ethanol or isopropanol,
  - medicine for flu, common colds, sore throat, etc.
  - tissues or disposable wipes,
  - wastes bins; and
  - trash bags.
7. Ensure, through the General Services Section, availability of hand soaps in washrooms and alcohol-based hand sanitizers containing at least 60% ethanol or isopropanol on all entry/ exit points and common areas.
8. Maintain an updated contact information database of all employees with at least the following information: name, mobile number, email address, and home address.

## Annex B

### ISOLATION AND QUARANTINE PROTOCOL<sup>1</sup>

#### 1. Quarantine period for close contacts and travelers

Quarantine is for those who had been exposed and can possibly develop infection. Employees who become close contacts with confirmed cases of COVID-19 should quarantine.

##### a. 5 days quarantine for fully vaccinated individuals

Fully vaccinated asymptomatic close contacts of individuals with symptoms, suspect, probable, or confirmed cases shall quarantine for at least 5 days from the date of the last exposure. Quarantine can be discontinued at the end of the set quarantine period if they have remained asymptomatic during the whole recommended quarantine period regardless if testing has been done and resulted negative. (DOH Department Memorandum No. 2022-0013 dated January 14, 2022).

##### b. 14 days quarantine for partially vaccinated or unvaccinated individuals

Partially vaccinated or unvaccinated asymptomatic close contacts of individuals with symptoms, suspect, probable, or confirmed cases shall quarantine for at least 14 days from the date of last exposure. Quarantine can be discontinued at the end of the set quarantine period if they have remained asymptomatic during the whole recommended quarantine period regardless if testing has been done and resulted negative.

All asymptomatic close contacts shall not be required testing unless symptoms will develop, and should immediately isolate regardless of test results.

All asymptomatic close contacts shall conduct symptom monitoring for at least 14 days, regardless of shortened quarantine period. They shall strictly observe minimum public health standards, including physical distancing, hand hygiene, cough etiquette, and wearing of masks, among others, regardless of vaccination status.

#### 2. Isolation period for symptomatic/ asymptomatic and positive cases regardless of vaccination status

Isolation is for those who have been infected and tested positive for COVID-19, with or without symptoms, both fully vaccinated and unvaccinated

##### a. 7 days isolation for fully vaccinated individuals

All individuals with symptoms and suspect, probable, and confirmed cases presenting with mild symptoms, including individuals under priority groups A2 and A3 who are fully vaccinated, shall isolate for at least 7 days from the onset of signs and symptoms. Isolation can be discontinued without the need for repeat testing upon completion of the recommended isolation period, provided that they do not have fever for at least 24 hours without the use of any antipyretic medications, and shall have improvement of respiratory signs and symptoms.

<sup>1</sup>Source: Department of Health (DOH) Department Memorandum No. 2022-0013 dated January 14, 2022

All asymptomatic and fully vaccinated confirmed cases, shall isolate for at least 7 days from sample collection date. Isolation can be discontinued without the need for repeat testing, provided they have remained asymptomatic during the whole recommended isolation period. If symptoms develop within or after the prescribed period, the individual shall complete the required days of isolation depending on the severity of symptoms.

**b. 10 days isolation for partially vaccinated or unvaccinated individuals**

All individuals with symptoms and suspect, probable, and confirmed cases presenting with mild symptoms, including individuals under priority groups A2 and A3 who are partially vaccinated or unvaccinated, shall isolate for at least 10 days from the onset of signs and symptoms. Isolation can be discontinued without the need for repeat testing upon completion of the recommended isolation period, provided that they do not have fever for at least 24 hours without the use of any antipyretic medications, and shall have improvement of respiratory signs and symptoms.

All asymptomatic and partially vaccinated or unvaccinated confirmed cases, shall isolate for at least 10 days from sample collection date. Isolation can be discontinued without the need for repeat testing, provided they have remained asymptomatic during the whole recommended isolation period. If symptoms develop within or after the prescribed period, the individual shall complete the required days of isolation depending on the severity of symptoms.

**c. 21 days isolation for severe and critical symptoms regardless of vaccination status**

All individuals with symptoms and suspect, probable, and confirmed cases presenting with severe and critical symptoms, regardless of vaccination status, shall be isolated for at least 21 days from onset of signs and symptoms. Isolation can be discontinued without the need for repeat testing upon completion of the recommended isolation period, provided that they do not have fever for at least 24 hours without the use of any antipyretic medications, and shall have improvement or respiratory signs and symptoms.

All symptomatic immune compromised confirmed cases, shall be isolated for at least 21 days from onset of signs and symptoms, regardless of vaccination status. Isolation can be discontinued upon completion of the recommended isolation period, provided that they do not have fever for at least 24 hours without the use of any antipyretic medications, and shall have improvement or respiratory signs and symptoms. Repeat RT-PCR testing shall also be recommended for this group. If results turn out negative, they may be discharged from isolation. If results turn out positive, refer to an Infectious Disease Specialist who may issue clearance and discharge if warranted. These shall include patients with:

- a. Autoimmune disease
- b. HIV
- c. Cancer/malignancy
- d. Undergoing steroid treatment
- e. Transplant patients, and
- f. Patients with poor prognosis or bed-ridden



## Annex B.1

### GUIDELINES FOR EMPLOYEES AND SERVICE PROVIDERS WITH CONFIRMED POSITIVE COVID-19 TEST OR IN CLOSE CONTACTS WITH CONFIRMED COVID-19 POSITIVE CASE

#### 1. Symptomatic and Tested with Confirmed Positive Covid-19 Result

- Report immediately to the immediate supervisor and to the Human Resource Management Section (HRMS) and arrange for the appropriate Alternative Work Arrangement (AWA).
- Report to the Barangay Health Emergency Response Teams (BHERTs) regarding the matter.
- Report the result to the of the Antigen/RT-PCR Test to the HRMS and any development or progression of signs or symptoms to determine the required isolation/ quarantine period.
- Complete isolation period stated in the **Annex B**.
- Observe self-monitoring and fill out the FPA COVID 19 Self-Monitoring Form (<https://forms.gle/rTeXDz67EWTyw5dLA>).
- Upon returning to work, present the certificate of completion of isolation and the medical clearance from the BHERT, City Health, private doctor, or a government-accredited medical facility stating that the employee or the service provider is fit to work.



FPA COVID 19  
SELF-MONITORING FORM

#### 2. Asymptomatic and Tested with Confirmed Positive Covid-19 Result

- Report immediately to the immediate supervisor and to the Human Resource Management Section (HRMS) of the confirmed positive Covid-19 result and arrange for the appropriate Alternative Work Arrangement (AWA).
- Report to the Barangay Health Emergency Response Teams (BHERTs) regarding the matter.
- Complete the isolation period as indicated in the **Annex B**.
- Observe self-monitoring and fill out the FPA COVID 19 Self-Monitoring Form (<https://forms.gle/rTeXDz67EWTyw5dLA>).
- Upon returning to work, present the certificate of completion of isolation and the medical clearance from the BHERT, City Health, private doctor, or a government-accredited medical facility stating that the employee or the service provider is fit to work.

#### 3. Asymptomatic and Tagged as Close Contact with Confirmed Positive Covid-19 Result

- Report immediately to the immediate supervisor and to the Human Resource Management Section (HRMS) if the employee is in close contact with a confirmed positive Covid-19 result and arrange for the appropriate Alternative Work Arrangement (AWA).
- Report to the Barangay Health Emergency Response Teams (BHERTs) regarding the matter.
- Complete the quarantine period as specified in **Annex B**
- Observe self-monitoring and fill out the FPA COVID 19 Self-Monitoring Form (<https://forms.gle/rTeXDz67EWTyw5dLA>)
- Upon returning to work, present the certificate of completion of quarantine and the medical clearance from the BHERT, City Health, private doctor, or a government-accredited medical facility stating that the employee or the service provider is fit to work.

All employees must comply to the aforementioned guidelines and must report to work after the required isolation/quarantine period in accordance to their alternative work arrangements as recommended by the respective Division Chiefs. Otherwise, a Leave of Absence (LOA) shall be filed for the permanent employees and no compensation for the COS personnel for the absences beyond the isolation/quarantine period.

For free swab testing, the following Medical Facilities offer the said free testing services:

- Dr. Jose N. Rodriguez Memorial Hospital
- Gat Andres Bonifacio Memorial Medical Center
- Justice Jose Abad Santos General Hospital
- Ospital ng Tondo
- Ospital ng Sampaloc
- Ospital ng Maynila
- Sta. Ana Hospital



## **Annex B.2**

### **TRAVEL REQUIREMENTS FOR NON-RESIDENT GOVERNMENT APORS ON OFFICIAL TRAVEL**

#### **CAR**

##### **Baguio City (Executive Order No. 05, series of 2022)**

Essential travels for APOR shall still be allowed, upon presentation of complete documents as proof of authorized travel purposes. In such cases, pre-registration and documentary requirements as stated in Executive Order No. 139, series of 2021 shall apply.

##### **FULLY VACCINATED**

- QR Code (<https://hdf.baguio.gov.ph/>)
- Vaccination Certificate
- Original or Certified True Copy of Travel Order issued by the Head of Agency or his/her authorized representative

##### **UNVACCINATED/PARTIALLY VACCINATED**

- QR Code (<https://hdf.baguio.gov.ph/>)
- Original or Certified True Copy of Travel Order issued by the Head of Agency or his/her authorized representative.

##### **Abra (Executive Order No. Jan-02, series of 2022)**

##### **FULLY VACCINATED**

- 1 Valid Government issued ID
- Vaccination Card
- Travel or Mission Order
- Negative Rapid Antigen Test (sample tested within 24 hours prior to entry) or Negative RT-PCR Test Result (sample tested within 72 hours prior to entry)

##### **PARTIALLY VACCINATED**

- Temporarily not allowed to travel to the province

#### **REGION I**

##### **La Union (Executive Order No. 58, series of 2021)**

##### **FULLY VACCINATED**

- Napanam QR Code
- Government Issued ID
- Proof of official business with inclusive date of travel and itinerary
- COVID-19 Vaccination Card

##### **UNVACCINATED/PARTIALLY VACCINATED**

- Napanam QR Code
- Government Issued ID
- Proof of official business with inclusive date of travel and itinerary

##### **Pangasinan (Executive Order 001-2022)**

- To complement the prohibition on domestic travel of unvaccinated individuals outside Metro Manila as imposed by the MMDA, unvaccinated individuals from Metro Manila shall not be allowed



entry to the borders of Pangasinan except for emergency and humanitarian reasons.

- Presentation of valid ID and vaccination card shall be required at the borders.

### **Ilocos Sur (Executive Order No. 01, series of 2022)**

#### **COMING FROM ALERT LEVEL 2**

- Government or Company ID
- Vaccination card
- Proof of transaction in Ilocos Sur (Travel Order from company or Proof of Appointment)
- S-PASS
- If unvaccinated, must present a negative RT-PCR released, or antigen taken within 48 hours
- Should they stay in the province for more than 24 hours, they shall be allowed to stay only in DOT accredited AEs.

#### **COMING FROM ALERT LEVEL 3 & 4**

- Government or Company ID
- Vaccination card
- Proof of transaction in Ilocos Sur (Travel Order from company or Proof of Appointment)
- Negative RT-PCR released, or antigen taken within 48 hours
- S-PASS
- Should they stay in the province for more than 24 hours, must log in at the RHU of destination and shall be allowed to stay only in DOT accredited AEs.
- Unvaccinated individuals are not allowed to enter

### **Ilocos Norte**

- Negative RT-PCR with swab collected within 60 hours of arrival. Antigen test taken within 24 hours, OR an Antigen test upon arrival.
- Travel Order or Proof of Work
- Must minimize days of stay in Ilocos Norte, report to barangay of residence, and minimize movement while in Ilocos Norte.

## **REGION II**

### **Tuguegarao City (Cagayan Provincial Information Office)**

#### **COMING FROM ALERT LEVEL 3**

- S-PASS
- Negative antigen test valid within 74 hours, regardless of vaccination status.

#### **COMING FROM ALERT LEVEL 2 (Fully Vaccinated)**

- S-PASS
- Vaccination card

#### **COMING FROM ALERT LEVEL 2 (Not Fully Vaccinated)**

- S-PASS
- Negative antigen test valid within 72 hours

## REGION III

### **Aurora (Provincial Government of Aurora; Executive Order No. 2021-0040, s. 2021)**

- Valid ID
- Travel Order
- Itinerary of Travel

### **Bulacan (Executive Order No. 1, s. 2022)**

- Intrazonal and interzonal movement shall be allowed. However, reasonable restrictions may be imposed by the LGUs, which should not be stricter as those prescribed under higher alert levels; provided, that those below 18 years of age and those belonging to the vulnerable population shall be allowed access to obtain essential goods and services, or to work in permitted industries and offices.

### **Zambales (Provincial Government of Zambales, Provincial Tourism Office and Provincial Health Office Joint Advisory No. 3)**

#### **FULLY VACCINATED**

- Negative Rapid Antigen Test 24 hours before travel performed by a medical clinic or hospital

#### **TRAVELERS FROM NCR WITH NO COVID VACCINATION**

- Not allowed to undertake domestic travel

#### **TRAVELERS WITH NO OR PARTIAL COVID VACCINATION FROM ALERT LEVEL 2 AREAS**

- RT-PCR negative test result 48 hours before travel performed by a DOH accredited facility.

\*The tests shall be uploaded to the Zambales Visitor and Information and Travel Assistance (Vis.I.T.A) System.

## REGION IV

### **Aurora Palawan (Incident Management Team of Puerto Princesa Facebook Page)**

#### **FULLY VACCINATED (Stay for less than 4 Days)**

- Travel Order
- Vaccination Card or Certificate
- Airline Ticket
- S-PASS
- Rapid Antigen Result (taken 1 day before the departure date and will be valid upon check-in at NAIA)
- Detailed Itinerary

#### **FULLY VACCINATED (Stay for more than 5 Days)**

- Travel Order
- Vaccination Card or Certificate
- Airline Ticket
- S-PASS

- Rapid Antigen Result (taken 1 day before the departure date and will be valid upon check-in at NAIA)
- Mandatory Strict Hotel/Facility Quarantine for 7 days
- Mandatory antigen testing on the 5th, 6th or 7th day upon arrival to be scheduled by the monitoring and surveillance group

#### UNVACCINATED/PARTIALLY VACCINATED

- Travel Order
- Airline Ticket
- S-PASS
- RT-PCR Result (Test should be taken 2 days before the departure date and will be validated upon check-in at NAIA)
- Mandatory Strict Hotel/Facility Quarantine for 7Days at Own Expense.
- Mandatory antigen testing on the 5th, 6th or 7th day upon arrival to be scheduled by the monitoring and surveillance group.

#### **Marinduque (GovPresbyMarinduque Facebook Page)**

##### TRAVELERS FROM ALERT LEVEL 3 AREAS REGARDLESS OF VACCINATION STATUS

- Travel Coordination Permit/S-PASS from Travel Permit Unit
- Negative Antigen/RT-PCR result taken 3 days before arrival in the province.

##### FULLY VACCINATED TRAVELERS FROM ALERT LEVEL 2 AREAS

- Vaccination Card/Certificate
- TCP/S-PASS
- Government ID

##### UNVACCINATED OR PARTIALLY VACCINATED TRAVELERS FROM ALERT LEVEL 2 AREAS

- TCP/S-PASS
- Government ID
- Negative Antigen/RT-PCR result taken 3 days before arrival in the province.

#### **Romblon (\*)**

- S-PASS
- Vaccination Card
- Negative Antigen
- Government ID

#### **Quezon (\*)**

- Vaccination Card

#### **Oriental Mindoro (\*)**

- S-PASS
- Vaccination Card



### **Occidental Mindoro (\*)**

- S-PASS
- Vaccination Card
- Travel Order

## **REGION V**

### **Albay (Executive Order No. 1, series of 2022)**

Only fully vaccinated individuals shall be allowed entry in the Province of Albay. They shall, however, present the following at the borders of the province:

- Identification Card
- COVID-19 Vaccination/Booster Cards/DOH Vaccination Certificate

### **Masbate (\*)**

- S-PASS
- Vaccination Card
- Travel Order
- Camarines Norte (\*)

#### **FULLY VACCINATED**

- Vaccination Card

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Negative Antigen
- Travel Pass ([camnortetravelpass.com](http://camnortetravelpass.com))

### **Catanduanes (\*)**

#### **FULLY VACCINATED**

- Vaccination Card
- S-PASS

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Negative Antigen

### **Sorsogon and Camarines Sur (\*)**

- Vaccination Card

## **REGION VI**

### **Iloilo City (\*)**

#### **FULLY VACCINATED**

- Valid ID
- Approved SPASS(TPP)
- Vaccination Card or Vaccination Certificate

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Valid ID

- Approved SPASS(TPP)
- Negative RT-PCR Test result from any DOH-accredited taken within seventy-two (72) hours

### **Iloilo Province (\*)**

#### **FULLY VACCINATED**

- Valid ID
- Travel Order and Travel Itinerary
- Approved SPASS
- Vaccination Card or Vaccination Certificate

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Valid ID
- Travel Order and Travel Itinerary
- Approved SPASS

### **Antique (\*)**

#### **FULLY VACCINATED**

- Approved Travel Coordination Permit (TCP) from S-PaSS
- Vaccination Card

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Negative RT-PCR Test result from any DOH-accredited taken within seventy-two (72) hours
- Approved Travel Coordination Permit (TCP) from S-PaSS

### **Guimaras Island (\*)**

#### **FULLY VACCINATED**

- Vaccination Card
- Approved Travel Coordination Permit (TCP) from S-PaSS

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Negative RT-PCR Test result, showing that date of test is not more than three days prior to date of travel to Iloilo
- Approved Travel Coordination Permit (TCP) from S-PaSS

## **REGION VII**

### **Bohol (\*)**

#### **FULLY VACCINATED**

- Vaccination Card
- Valid ID

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Negative RT-PCR/Saliva Test result from any DOH-accredited taken within seventy-two (72) hours prior to departure

## REGION IX

### **Zamboanga Del Sur (Executive Order No. 2022-001)**

#### **FULLY VACCINATED**

- Vaccination Card
- Valid ID

#### **UNVACCINATED/PARTIALLY VACCINATED**

- Negative RT-PCR/Saliva Test result from any DOH-accredited taken within seventy-two (72) hours or Negative Antigen Test taken 48 hours prior to the date of travel

#### **TRAVELERS FROM ALERT LEVEL 3 AREAS**

- Vaccination Card
- Valid ID

### **Pagadian City (Executive Order No. 2022-001)**

- Negative RT-PCR/Saliva Test result from any DOH-accredited taken within seventy-two (72) hours upon arrival or
- Negative Antigen Test taken 48 hours upon arrival

## REGION XI

### **Davao City (\*)**

- DQR for contact tracing

## REGION XIII

### **Butuan City (Executive Order No. 63-A, Series of 2022)**

- Valid ID
- Travel Order
- Travel Itinerary
- Must pass symptom-screening at ports of entry and exit





## Annex C

### PERSONAL HYGIENE AND SAFETY MEASURES

- Wash hands regularly and thoroughly with soap and water. Use alcohol-based hand sanitizers containing at least 60% ethanol or isopropanol when soap and water are not available. Follow the steps as prescribed by the World Health Organization as indicated in page 29.
- Cover your mouth when coughing and sneezing. Use a tissue or cough and sneeze into bent elbow if tissue is not available. Dispose used tissues properly and disinfect hand immediately after. (Coughing and Sneezing Etiquette, p. 30)
- Wear a mask while inside the premises as prescribed by the IATF and LGU. Used mask should be disposed properly. Follow the steps on how to put on, take off, and dispose mask as prescribed by the World Health Organization as shown in **Annex C.2**.
- Avoid touching the eyes, nose, and mouth.
- Avoid physical contact such as hand shaking.
- Avoid sharing food, utensils, and personal hygiene items.
- Practice social distancing as prescribed by the DOH.

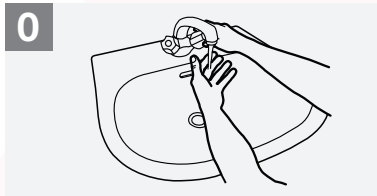


# How to Handwash?

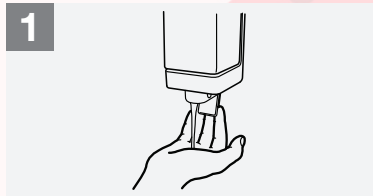
WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB



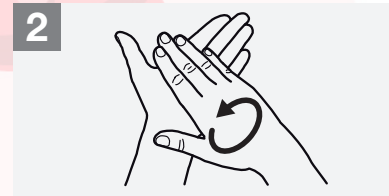
**Duration of the entire procedure: 40-60 seconds**



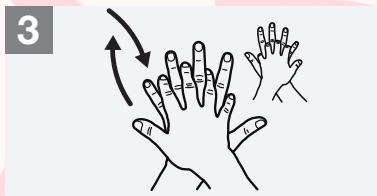
**Wet hands with water;**



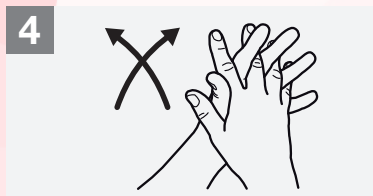
**Apply enough soap to cover all hand surfaces;**



**Rub hands palm to palm;**



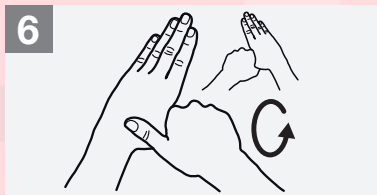
**Right palm over left dorsum with interlaced fingers and vice versa;**



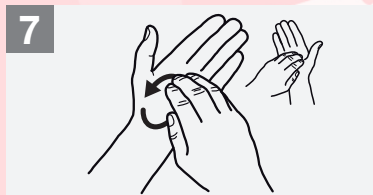
**Palm to palm with fingers interlaced;**



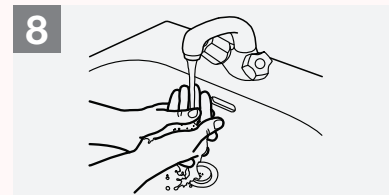
**Backs of fingers to opposing palms with fingers interlocked;**



**Rotational rubbing of left thumb clasped in right palm and vice versa;**



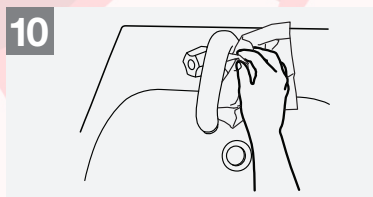
**Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;**



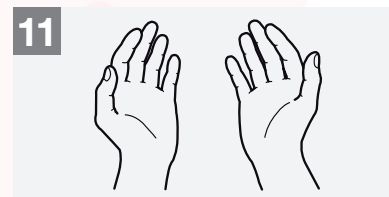
**Rinse hands with water;**



**Dry hands thoroughly with a single use towel;**



**Use towel to turn off faucet;**



**Your hands are now safe.**



**World Health Organization**

**Patient Safety**

A World Alliance for Safer Health Care

**SAVE LIVES**

**Clean Your Hands**

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May 2009

## Coughing and sneezing etiquette



Cover your mouth and nose with a tissue.



Dispose of your tissue properly.



If there is no tissue, cough or sneeze into the bend of elbow – not your hand.



If you sneeze or cough into hand, wash your hands as soon as possible.

Source: US Centres for Disease Control and Prevention



## Annex C.1

### WHEN TO USE A MASK

Under Section J of the Inter-Agency Task Force on Emerging Infectious Diseases (IATF-EID) Resolution No. 18 Series of 2020, "for areas placed under ECQ, the IATF hereby adopts the policy of mandatory wearing by all residents of face masks, ear loop masks, indigenous, reusable or do-it-yourself masks, face shields, handkerchiefs, or such other protective equipment that can effectively lessen the transmission of COVID-19, whenever allowed to go out of their residences pursuant to existing guidelines issued by the national government."

Masks are effective only when used in combination with frequent hand- cleaning with alcohol-based hand rub or soap and water<sup>2</sup>.

If you wear a mask, then you must know how to use it and dispose of it properly. For proper wearing and disposal of masks, refer to **Annex C.2**.



<sup>2</sup>Sources: <https://www.who.int/indonesia/news/detail/06-03-2020-media-statement-the-role-and-need-of-masks-during-covid-19-outbreak>

## Annex C.2

### HOW TO PUT ON, USE, TAKE OFF, AND DISPOSE OF A MASK<sup>3</sup>



World Health  
Organization

## How to **put on, use,** **take off and dispose** of a mask

1



Before putting on a mask, wash hands with alcohol-based hand rub or soap and water

2



Cover mouth and nose with mask and make sure there are no gaps between your face and the mask

Avoid touching the mask while using it; if you do, clean your hands with alcohol-based hand rub or soap and water

3



Replace the mask with a new one as soon as it is damp and do not re-use single-use masks

4



To remove the mask: remove it from behind (do not touch the front of mask); discard immediately in a closed bin; wash hands with alcohol-based hand rub or soap and water

<sup>3</sup>Source: how-to-use-mask-v0-1-print.pdf (who.int)



## **Annex D**

### **PRE-CAUTIONARY MEASURES**

#### **I. Reducing Transmission of COVID-19<sup>4</sup>**

To reduce transmission of COVID-19 and of similar pathogens and diseases, the following protocols shall be observed:

##### **A. Prior to entering the workplace:**

1. All employees and guests/clients shall:
  - a. Wear face mask;
  - b. Be subject to mandatory thermal scanning and use of hand sanitizer/alcohol:
    - i. Individuals with body temperature of 37.8 degree Celsius and above with cough and cold shall be denied entry and shall be advised to seek immediate medical attention. Concerned personnel shall inform their immediate supervisor of their condition within 12 hours.
    - ii. Those on duty or visitors who subsequently exhibit COVID-19-like symptoms after being allowed entry into the FPA premises shall be immediately escorted by designated personnel to the designated Holding Area before conveyance to a hospital, if necessary.
  - c. Spray alcohol/sanitizers on both hands and use foot baths;
  - d. Present the proof of full vaccination.
2. In-bound vehicles and equipment must undergo disinfection process through facilities (e.g. spraying) set up for the purpose;
3. All employees, guests and clients shall practice the prescribed social distancing of at least one-meter radius to the next person. Security personnel shall ensure that this rule is complied with, particularly, in cases where long queues are present.
4. Security staff tasked with the conduct of thermal scanning, drivers assigned for the vehicle disinfection activities and overall maintenance of order shall wear with appropriate PPEs.

##### **B. Inside the workplace or at operating areas:**

1. All employees, guests and/or clients shall:
  - a. Wear face mask at all times and remove the same only when eating/drinking. Makeshift cloth masks maybe used. Employees providing frontline services (i.e. services to and/or that entails face-to-face interaction with the general public) shall wear appropriate PPEs.
  - b. Practice social distancing. For queues, colored markings shall be taped on the floor at one meter apart.

<sup>4</sup>Source: Department of Health Administrative Order No. 2020-0015 dated April 27, 2020 paragraph C-2



- c. Strictly observe proper etiquette when coughing.
- d. Avoid congregating and engaging in long conversations.
- e. Avoid communal eating, as it is highly discouraged. Employees shall eat individually at their respective workstations and properly dispose of their leftovers. If the same is not possible, social distancing shall be maintained.
- f. Practice hand hygiene as often as necessary and avoid touching their eyes, nose, and mouth. Regular handwashing throughout the day shall be observed. For this purpose, handwashing with soap and water is recommended at or around 09:00am, 12:00nn and 03:00pm.
- g. Any mass and religious gatherings are suspended. Mass gathering is defined as any congregation of more than eight (8) individuals.
- h. All non-essential local and foreign travels are suspended.
- i. Employees reporting for the first time since the start of the quarantine on shall present a medical certificate of his/her being fit to work from the Barangay Health Emergency Response Team (BHERT), City Health, private doctor or a reputable government or government- accredited medical facility. The medical certificate should be issued not more than three (3) calendar days prior to reporting to office.
- j. All employees shall submit a duly accomplished Health Declaration Form. Heads of Offices shall ensure submission hereof.
- k. All employees shall daily monitor their temperature through the Temperature Monitoring Log (Annex E-2).

**C. Specific duties for the janitorial staff: The janitorial staff must ensure that:**

- a. Frequently handled objects such as doorknobs, switches, toilet facilities are cleaned and disinfected regularly, or at least once every two (2) hours.
- b. All work stations and/or other surfaces (e.g. tables, chairs and keyboards) are regularly cleaned and disinfected at least once a day.
- c. The holding area and eating areas are cleaned and disinfected immediately after every use.

**D. Specific Duties of the General Service Section:**

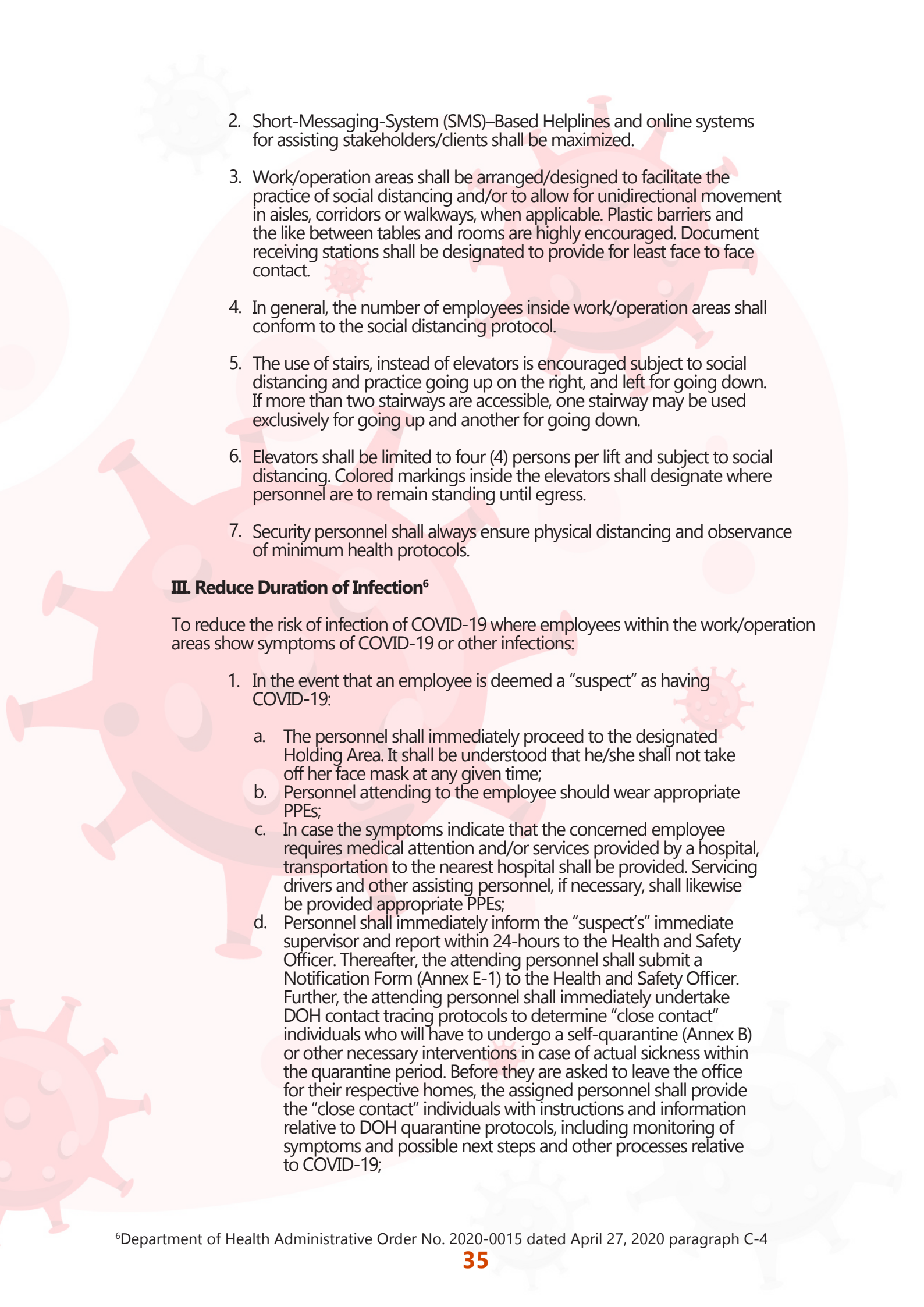
- a. Ensure that all washrooms and toilets shall have sufficient clean water and soap; and
- b. Make available hand sanitizers/alcohol in corridors, conference areas, elevators, biometric machine areas and other common areas.

## **II. Reducing Contact<sup>5</sup>**

To minimize contact rate between and among employees, guests and/or clients, aside from adopting alternative work arrangements; the following strategies are adopted:

1. As much as possible, all meetings and/or consultations shall be conducted without face-to-face interaction and conducted through tele or video-conferencing. If face-to-face interaction is absolutely required, meetings and/or consultations shall be limited to the least number of attendees possible and the shortest possible duration. Face-to-face meetings shall be conducted subject to the protocols on the wearing of face mask and social distancing.

<sup>5</sup>Department of Health Administrative Order No. 2020-0015 dated April 27, 2020 paragraph C-3

- 
2. Short-Messaging-System (SMS)–Based Helplines and online systems for assisting stakeholders/clients shall be maximized.
  3. Work/operation areas shall be arranged/designed to facilitate the practice of social distancing and/or to allow for unidirectional movement in aisles, corridors or walkways, when applicable. Plastic barriers and the like between tables and rooms are highly encouraged. Document receiving stations shall be designated to provide for least face to face contact.
  4. In general, the number of employees inside work/operation areas shall conform to the social distancing protocol.
  5. The use of stairs, instead of elevators is encouraged subject to social distancing and practice going up on the right, and left for going down. If more than two stairways are accessible, one stairway may be used exclusively for going up and another for going down.
  6. Elevators shall be limited to four (4) persons per lift and subject to social distancing. Colored markings inside the elevators shall designate where personnel are to remain standing until egress.
  7. Security personnel shall always ensure physical distancing and observance of minimum health protocols.

### **III. Reduce Duration of Infection<sup>6</sup>**

To reduce the risk of infection of COVID-19 where employees within the work/operation areas show symptoms of COVID-19 or other infections:

1. In the event that an employee is deemed a “suspect” as having COVID-19:
  - a. The personnel shall immediately proceed to the designated Holding Area. It shall be understood that he/she shall not take off her face mask at any given time;
  - b. Personnel attending to the employee should wear appropriate PPEs;
  - c. In case the symptoms indicate that the concerned employee requires medical attention and/or services provided by a hospital, transportation to the nearest hospital shall be provided. Servicing drivers and other assisting personnel, if necessary, shall likewise be provided appropriate PPEs;
  - d. Personnel shall immediately inform the “suspect’s” immediate supervisor and report within 24-hours to the Health and Safety Officer. Thereafter, the attending personnel shall submit a Notification Form (Annex E-1) to the Health and Safety Officer. Further, the attending personnel shall immediately undertake DOH contact tracing protocols to determine “close contact” individuals who will have to undergo a self-quarantine (Annex B) or other necessary interventions in case of actual sickness within the quarantine period. Before they are asked to leave the office for their respective homes, the assigned personnel shall provide the “close contact” individuals with instructions and information relative to DOH quarantine protocols, including monitoring of symptoms and possible next steps and other processes relative to COVID-19;

<sup>6</sup>Department of Health Administrative Order No. 2020-0015 dated April 27, 2020 paragraph C-4

- e. Work/operation areas deemed contaminated shall be immediately vacated and thereafter decontaminated with appropriate disinfectant (e.g. chlorine bleaching solution and 1:100 phenol- based disinfectant). Use of said work/operation areas shall be allowed only after 24 hours from decontamination. Decontamination/janitorial staff shall be provided appropriate PPEs; and
  - f. If the suspect personnel obtains conclusive negative test results for COVID-19, they may be allowed to return to work upon presentation thereof and a medical clearance that they are fit to work from the Barangay Health Emergency Response Team (BHERT), City Health, private doctor or a government or government-accredited medical facility. The same shall apply to all personnel with whom the suspect personnel have had contact with.
  - g. In addition, DOH Department Memorandum Order No. 2020-0178 on "Interim Guidelines on Health Care Provider Networks during the COVID-19 Pandemic" shall likewise be followed.
2. In the event that the personnel is sick or has fever but is not suspected to have COVID-19 (e.g. urinary tract infection, wound infection or any diseases not related to lungs or respiratory tract), the immediate supervisor must advise the personnel to take prudent measures to limit the spread of communicable diseases, as follows:
- a. Stay at home and keep away from work or crowds;
  - b. Take adequate rest and take plenty of fluids;
  - c. Practice personal hygiene to prevent spread of disease; and
  - d. Seek appropriate medical care if there is persistent fever, when difficulty of breathing has started, or when he/she becomes weak.

#### **IV. Duties of the Agency**

Relative to the foregoing and the overall role of the Agency as a public entity involved in the COVID-19 Response, shall:

- a. Continue providing guidelines for the prevention and control of COVID-19. Advocacy and IEC programs shall be taken from the IATF DOH, WHO and other reliable sources of information on COVID-19;
- b. Continue ensuring access by personnel to healthy food and clean water;
- c. Continue ensuring access to basic hygiene facilities such as toilets, handwashing areas and providing materials for health and safety (e.g. water, soap, alcohol/ sanitizer, disinfectant);
- d. Continue ensuring a clean and healthful work environment;
- e. Continue to protect its workforce through provision of PPEs and other support commodities, lodging, and transportation services as necessary and practical;
- f. Maintain a Holding Area complete with staff and the necessary equipment and PPEs;
- g. Designate a COVID-19 hotline for employees to report symptomatic cases and provide a daily monitoring scheme of cases with "suspect" condition; and
- h. Designate an overall COVID-19 Health and Safety Officer who shall ensure compliance with these Guidelines and recommend appropriate actions and measures to the Head of Office.



## V. Post Community Quarantine Scenario<sup>7</sup>

Prior to the resumption of normal office operations, the following activities and precautionary measures should be implemented:

- a. Continuous disinfection or decontamination activities on all its buildings, facilities and office vehicles. The disinfection should be part of the regular maintenance and upkeep of the agency.
- b. Continuous conduct of health status survey to ensure that all those reporting to the office are in tip-top shape and that no one is exhibiting any of the symptoms of COVID-19 disease.
- c. Further modification of the workplace layout, if needed, to ensure observance of physical distancing requirements of those who will be reporting to the office<sup>8</sup>.



<sup>7</sup>Section 6 on "Omnibus Guidelines on the Implementation Community Quarantine in the Philippines, Updated as of August 19, 2021" - areas where no normal community quarantine is in place can be considered as being under new normal.

<sup>8</sup>General Guideline 5.3. c MC no. 18, s, 2020, CSC Revised Interim Guidelines for Alternative Work Arrangement.

## ANNEX E

### HEALTH DECLARATION FORM

Full Name:	<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>
Nationality:			
Sex:			
Age:			
Contact Number:			
Email Address:			
Address in the Philippines:			
Foreign countries you have worked, visited, transited or travelled to in the past 14 days?			
Cities in the Philippines you have worked, lived, or transited in the past 14 days?			
Have you been sick in the past 30 days?	<input type="checkbox"/> <b>Yes</b> <i>Describe condition:</i>	<input type="checkbox"/> <b>No</b>	
Did you have any of the following in the last 14 days: fever, colds, cough, sore throat, or difficulty in breathing?	<input type="checkbox"/> <b>Yes</b> <i>Please specify:</i>	<input type="checkbox"/> <b>No</b>	
Have you been in close contact with farm animals or exposed to wild animals in the past 14 days?	<input type="checkbox"/> <b>Yes</b> <i>Describe circumstance:</i>	<input type="checkbox"/> <b>No</b>	
<p><b><u>Declaration:</u></b></p> <p>The information I have given herein is true, correct, and complete. I understand that failure to answer any question or any falsified response may have serious consequences. (RA 11332 also otherwise known as "Mandatory Reporting of Notifiable Diseases and Health Events of Public Health Concern Act" and Articles 171 and 172 of the Revised Penal Code of the Philippines.</p>			

Name and Signature  
Date:

\_\_\_\_\_

## ANNEX E.1

### NOTIFICATION FORM FOR EMPLOYEES

Name:		Location of quarantine:
Position:	Department/Division:	Contact Number:
Address:		
<p>Symptoms:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Fever   <input type="checkbox"/> Shortness of breath  <input type="checkbox"/> Others: (specify) _____         </div> <div style="width: 45%;"> <input type="checkbox"/> Dry Cough  <input type="checkbox"/> Sore Throat  <input type="checkbox"/> Runny Nose         </div> </div>		
Date and Time of fever onset:		
Date and Time of quarantine:		
Travel history with the last 14 days		
Countries visited:		
Flights taken:		

I attest that the information provided are true and accurate to the best of my knowledge.

Signature over printed name: \_\_\_\_\_

Date: \_\_\_\_\_

Healthy and Safety Officer signature over printed name: \_\_\_\_\_



## ANNEX E.2

### TEMPERATURE MONITORING LOG

Name:				
Department/Division:				
Date		Temperature reading		
		Reading at Time - In	Employee's Signature	Employee's Signature
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				
Day 8				
Day 9				
Day 10				
Day 11				
Day 12				
Day 13				
Day 14				

The employee/visitor shall keep a record of the temperature monitoring log. Each form is recommended to reflect temperature log every 14 days.

Coordinate with the Health and Safety Officer should your temperature reading be above 38°C.

## ANNEX F

### SCPMT RESOLUTION NO. 001-2020 "GUIDELINES ON THE GRANT OF THE COVID-19 HAZARD PAY"



Republic of the Philippines  
**OFFICE OF THE SECRETARY**  
Elliptical Road, Diliman  
1100 Quezon City

#### RESOLUTION NO 001-2020

**Service Continuity Planning and Management Team (SCPMT)**  
**Created under Special Order No. 346 dated March 19, 2020**

#### **GUIDELINES ON THE GRANT OF THE COVID-19 HAZARD PAY**

**WHEREAS**, the Office of the President issued Administrative Order No. 26<sup>1</sup> dated March 23, 2020 Re: Authorizing the Grant of Hazard Pay to Government Personnel who Physically Report for Work During the Period of Implementation of an Enhanced Community Quarantine Relative to the COVID-19 Outbreak;

**WHEREAS**, The Department of Budget and Management (DBM) issued Budget Circular No. 2020-1<sup>2</sup> dated March 24, 2020 Re: Guidelines on the Grant of the COVID-19 Hazard Pay;

**WHEREAS**, Section 4.0 of the DBM Circular No. 2020-1 provides the Guidelines and Conditions on the Grant of the COVID-19 Hazard Pay as follows:

4.1 The COVID-19 Hazard Pay to be granted shall not exceed P500/day per person, which shall be computed as follows:

$$\text{COVID-19 Hazard Pay} = \text{P500} \times \text{No. of Days Physically Reporting for Work During the Quarantine Period}$$

4.2. The personnel are occupying regular, contractual or casual positions, or are workers engaged through Contract of Service (COS), Job Order (JO) or other similar schemes;

4.3 The personnel/workers have been authorized to physically report for work at their respective offices or work stations on the prescribed official working hours by the head of agency/office during the period of implementation of Enhanced Community Quarantine measures in the area of such office or work station;

X X X

4.7 The COVID-19 Hazard Pay of an employee on detail to another government agency shall be granted by the parent agency;

**WHEREAS**, Sub-section 5.1.1 of Section 5.0 entitled Funding Source states that:

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*with prosperous farmers and fisherfolk*



**For NGAs, including SUCs:**

**"The amount required for personnel occupying regular, contractual or casual positions shall be charged against their available released Personnel Services (PS) allotments, while the amount required for COS or JO workers shall be charged against their available released Maintenance and Other Operating Expenses (MOOE) allotments, without the need for prior authority from the DBM, provided that all authorized mandatory expenses shall have been paid first."**

**WHEREAS**, Section 10 of DBM Circular entitled Retroactive Application states that:

**"The grant of the COVID-19 Hazard Pay shall be effective beginning March 17, 2020."**

**WHEREAS**, as discussed in a video-teleconference by the Service Continuity Planning Management Team which was held last April 14, 2020, skeletal workforce who reported during Saturdays and Sundays shall also be paid hazard pay;

**WHEREAS**, as agreed by the Service Continuity Planning Management Team, the following documentary requirements shall be attached to support the facilitation of the processing of the COVID-19 Hazard Pay:

- 1) Approved List of Skeletal Workforce signed by the heads of services, divisions, units, projects, programs that are authorized to report as per Administrative Orders No. 8 and 12 on the designated dates; (1<sup>st</sup> week to 4<sup>th</sup> week)
- 2) List of Skeletal Workforce validated in the Service Continuity Quick Response Information System (SCQRIS) which is SMS based as confirmed by the heads of offices (5<sup>th</sup> week onwards)
- 3) Accomplishment Report;
- 4) Duly Accomplished Daily Time Record or
- 5) FORM 48/Certified photocopy of time-in/time-out registry from logbook in lieu of DTR;


**NOW THEREFORE THE SERVICE CONTINUITY PLANNING MANAGEMENT TEAM (SCPMT) RESOLVES, AS IT IS HEREBY RESOLVED, TO APPROVE THE PAYMENT OF HAZARD PAY EFFECTIVE MARCH 17, 2020.**

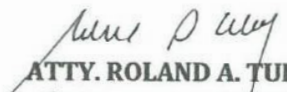
**IN WITNESS**, we have set our hands this 22<sup>nd</sup> day of April 2020 at the Department of Agriculture, Elliptical Road, Diliman, Quezon City.

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with prosperous farmers and fisherfolk

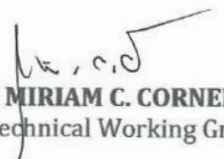


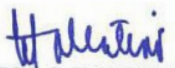



  
**UNDERSECRETARY ROLDAN G. GORGONIO**  
Chairperson, SCPMT

  
**ATTY. ROLAND A. TULAY**  
Chairperson, Secretariat


**ATTY. BENITO V. DANGAZO**  
Head, Technical Working Group


  
**DIRECTOR MIRIAM C. CORNELIO**  
Member, Technical Working Group

  
**TELMA C. TOLENTINO**  
Member, Technical Working Group


  
**ATTY. MELINDA D. DEYTO**  
Member, Secretariat


  
**JUNIBERT E. DE SAGUN**  
Member Secretariat

  
**CHERYL C. SUAREZ**  
Member, Secretariat

  
**JESSAMIN B. ARANAS**  
Member Secretariat

APPROVED/DISAPPROVED:

  
**WILLIAM D. DAR, Ph.D.**  
Secretary

DEPARTMENT OF AGRICULTURE  
  
In replying pls cite this code :  
For Signature: S-04-20-0201  
Received : 04/22/2020 11:32 AM

Enclosures:

<sup>1</sup>Administrative Order No. 26 issued by the Office of the President *with prosperous farmers and fisherfolk*  
<sup>2</sup>DBM Budget Circular No. 2020-1

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## ANNEX G

### MEMORANDUM FROM THE SECRETARY DATED APRIL 6, 2020



Republic of the Philippines  
**OFFICE OF THE SECRETARY**  
Elliptical Road, Diliman  
1100 Quezon City

#### MEMORANDUM FROM THE SECRETARY

**FOR :** USEC. ROLDAN G. GORGONIO  
Undersecretary for Administration and Finance and Chair of the  
Service Continuity Policy and Management Team

**DATE :** APRIL 06, 2020

**SUBJECT :** GRANT OF AUTHORITY RE: DISSEMINATION BY INDIVIDUAL PERSONNEL  
OF RELEVANT INFORMATION ON DEPARTMENT OF AGRICULTURE (DA)  
PROGRAMS, PROJECTS, AND RELATED MATTERS, PARTICULARLY ON  
THE DEPARTMENT'S INTERVENTIONS RELATIVE TO THE CURRENT  
EMERGENCY SITUATION DUE TO THE COVID-19 PANDEMIC


It is in the exigency of public service that the Department of Agriculture is able to reach out to the greatest number of our stakeholders, as possible, to inform them of the various programs and projects of the department, particularly those in which they may be interested to participate, especially in this time of national emergency. An aggressive information campaign should be undertaken to achieve this.

While the DA has its Agriculture and Fisheries Information Division (AFID), the goals of said information campaign will be greatly facilitated if department personnel will individually disseminate the information we need to put out to the public.

Accordingly, please issue a directive, in this regard, guided by the following parameters:

- (a) That all are encouraged to disseminate official information on DA programs and projects and related matters, especially those concerning the department's intervention in this time of national emergency due to the COVID-19 pandemic. For this purpose, information for dissemination shall be the posts of this Secretary and any relevant content in the DA Facebook account;
- (b) That the dissemination of said posts / information may be through *reposts* using individual/personal Facebook and other social media accounts or through other reasonable means of online information dissemination, provided that only accurate information is given out. (*e.g. e-mails, blogs; however, chats will not be considered as a sufficient form for information dissemination for the present purposes*);
- (c) That the dissemination of information pursuant to this Memorandum shall be considered part of the accomplishment of concerned personnel, and is especially expected of staff assigned to do work under the Work-from-Home Arrangement.

As Chairperson of the Service Continuity Policy and Management Team (SCPMT), you are hereby granted authority to employ the Service Continuity and Quick Response Info System to monitor compliance with the directive for information dissemination.

  
WILLIAM D. DAR, Ph.D.  
Secretary

DEPARTMENT OF AGRICULTURE

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# FERTILIZER AND PESTICIDE AUTHORITY

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