



## ADMINISTRATIVE ORDER NO. 23 COMPLIANCE REPORT

- (1) NAME OF DEPARTMENT/AGENCY/LGU: PROVINCIAL GOVERNMENT OF ISABELA - PROVINCIAL DISASTER RISK REDUCTION AND MANAGEMENT OFFICE
- (2) SUBMITTED UPDATED CITIZEN'S CHARTER TO ARTA ON JULY 25, 2020:    [ ] Yes        [ ] No
- (3) LIST OF ALL FRONTLINE SERVICES AND CORRESPONDING LEGAL BASIS

GOVERNMENT SERVICE	LEGAL BASIS		OFFICE/AGENCY REGULATIONS		
	Governing Law(s) (Number and Short Title) <sup>1</sup>	Specific Provision in the Governing Law(s) as Basis <sup>2</sup>	Issuance/Policy Title	Date of Effectivity	Other Issuances/Policies it Effectively Repeals/Amends
Request for Rescue or Emergency Assistance	DOH Administrative order No. 2016 – 0029 V.E. no 1-5 “ Rules and Regulations governing Ambulance Service”  DOH Section VI A4 of Administrative order no. 2010-003 “National Policy on Ambulance Use and Services”	General Rescue Protocol For Ambulance Response  No. IV Page 8-10 Of Emergency Response Protocol And Procedures Manual		For Approval by the Provincial Governor	
Request for Transfer of Patient from hospital to hospital (within Isabela only)					
Request for Transfer of Patient from hospital to hospital (outside Isabela)					
Request for Trainings	Republic Act 101021 “PDRRM Act of 2010” Section 12, C no. 4				
Request for Putting- Up of first Aid station for Special Events		No. 11 page 33-35 of Emergency Response Protocol and Procedures Manual		For Approval by the Provincial Governor	

<sup>1</sup> Number and short title of the governing law which mandates and gives power to the agency or LGU to regulate and/or offer the service

<sup>2</sup> Cite section number and quote provision identified in the governing law



**(4)SERVICE INFORMATION PER GOVERNMENT SERVICE<sup>3</sup>**

<b>GOVERNMENT SERVICE: REQUEST FOR RESCUE OR EMERGENCY ASSISTANCE</b>					
<b>SERVICE INFORMATION</b>					
<b>LIST OF REQUIREMENTS</b>		<b>LIST OF STEPS AND PROCEDURES</b>		<b>Total Processing Time</b>	<b>Total Fees to be</b>
<b>Requirement</b>	<b>Legal Basis</b>	<b>Client Steps/Procedures as indicated in the Citizen's Charter</b>	<b>Legal Basis</b>		
A. Txt/ SMS cellular phone/telephone call to the PDRRM Office Hotline number. B. Oral/verbal request thru personal appearance or walk-in request	V page 11-14 of Emergency Response Protocol and Procedures Manual	Direct cp/telephone call or txt/SMS to the PDRRM Office hotline for processing by the concerned person or staff	V page 11-14 of Emergency Response Protocol and Procedures Manual	2 minutes	None
Approved request of the requesting party		Alert/Send Response Team		1minute	None
Approved request of the requesting party		The requesting party shall be informed of the status of his/her request		2 minutes	None
<b>TOTAL</b>				<b>5 minutes</b>	<b>None</b>



GOVERNMENT SERVICE: REQUEST FOR TRANSFER OF PATIENT FROM HOSPITAL TO ANOTHER HOSPITAL (WITHIN ISABABELA/ AOR)					
SERVICE INFORMATION					
LIST OF REQUIREMENTS		LIST OF STEPS AND PROCEDURES		Total Processing Time	Total Fees to be Paid
Requirement	Legal Basis	Client Steps/Procedures as indicated in the Citizen's Charter	Legal Basis		
A. Nurse from the hospital point of origin B. Referral Form from the hospital point of origin. C. Accomplished Release, Waiver, and Quitclaim Form by patient/ parents, guardian or relatives.	V page 11-14 of Emergency Response Protocol and Procedures Manual  Sec.V.F no. 1-3 "Information Management" section of Administrative order No. 2016 – 0029 " Rules and Regulations governing Ambulance Service"	File a letter request; or Direct cp/telephone call or txt/SMS to the PDRRM Office Hotline for processing by the concerned person or staff	V page 11-14 of Emergency Response Protocol and Procedures Manual  Sec.V.F no. 1-3 "Information Management" section of Administrative order No. 2016 – 0029 " Rules and Regulations governing Ambulance Service"	5 hours	None
Approved request or call		Alert/ Send response team		3 minutes	None
Approved request or call		The requesting party shall be informed of the status of his/her request		3 minutes	None
<b>TOTAL</b>				<b>5 hours, 6 minutes</b>	<b>None</b>



GOVERNMENT SERVICE: REQUEST FOR TRANSFER OF PATIENT FROM HOSPITAL TO ANOTHER HOSPITAL (OUTSIDE ISABELA)					
SERVICE INFORMATION					
LIST OF REQUIREMENTS		LIST OF STEPS AND PROCEDURES		Total Processing Time	Total Fees to be Paid
Requirement	Legal Basis	Client Steps/Procedures as indicated in the Citizen's Charter	Legal Basis		
A. Nurse from the hospital point of origin. B. Referral Form from the hospital point of origin C. Accomplished Release, Waiver, and Quitclaim Form by patient/ parents, guardian or relatives.	General Rescue Protocol For Ambulance Response	File a letter request; or Direct cp/telephone call or txt/SMS to the PDRRM Office Hotline for processing by the concerned person or staff	General Rescue Protocol For Ambulance Response	8 hours	None
Approved request or call		Alert/Send response Team		2 minutes	None
Approved request or call		The requesting party shall be informed of the status of his/her request		5 minutes	None
<b>TOTAL</b>				<b>8 hours, 7 minutes</b>	<b>None</b>



GOVERNMENT SERVICE: REQUEST FOR TRAININGS					
SERVICE INFORMATION					
LIST OF REQUIREMENTS		LIST OF STEPS AND PROCEDURES		Total Processing Time	Total Fees to be Paid
Requirement	Legal Basis	Client Steps/Procedures as indicated in the Citizen's Charter	Legal Basis		
<p>A. The requesting party shall include in his/her request:</p> <p>(a) Type of training.</p> <p>(b) Venue of training.</p> <p>(c) Number of participants.</p> <p>(d) Date and Duration of training.</p> <p>B. Requesting party shall arrange budgetary requirement with the PDRRMO</p>	<p>Section 12 C No. 4 of the Republic Act 101021 "PDRRM Act of 2010"</p>	<p>File a letter request addressed to the Governor thru the PDRRM Officer for processing by the concerned person or staff</p>	<p>Section 12 C No. 4 of the Republic Act 101021 "PDRRM Act of 2010"</p>	<p>3-5 Days</p>	<p>None</p>
<p>Approved training request and proposal</p>		<p>Organize training team</p>		<p>30 minutes</p>	<p>None</p>
<p>Approved Training request and proposal</p>		<p>Alert/Send Training Team to the Training place</p>		<p>20 minutes</p>	<p>None</p>
<b>TOTAL</b>				<p>5 days and 40 minutes</p>	<p>None</p>



GOVERNMENT SERVICE: REQUEST FOR PUTTING-UP OF FISRT AID STATION FOR SPECIAL EVENTS					
SERVICE INFORMATION					
LIST OF REQUIREMENTS		LIST OF STEPS AND PROCEDURES		Total Processing Time	Total Fees to be Paid
Requirement	Legal Basis	Client Steps/Procedures as indicated in the Citizen's Charter	Legal Basis		
<p>A. The requesting party shall indicate:</p> <p>(a) kind/nature of the occasion</p> <p>(b) Place/venue</p> <p>(c) Date and Duration of the station</p> <p>(d) Estimated number of participants and other persons.</p> <p>(e) VIP, if any.</p> <p>B. The requesting party shall provide the foods of the Rescue Team.</p>	Section 2 page 33-35 of General Rescue Protocol For Ambulance Response	File a letter request addressed to the Governor thru the PDRRM Officer for processing by the concerned person or staff	General Rescue Protocol For Ambulance Response	1 day	None
Approved request		Alert/ Send team on duty.		20 minutes	None
Approved request		The requesting party shall be informed of the status of his request		10 minutes	None
<b>TOTAL</b>				<b>1 day and 30 minutes</b>	<b>None</b>