



Republic of the Philippines
PROVINCE OF ISABELA
City of Ilagan

Office of the Governor

EXECUTIVE ORDER NO. 20 - 2020

REORGANIZING AND RATIONALIZING THE ESTABLISHMENT OF THE ISABELA PROVINCIAL TASK FORCE FOR COVID 19 (IPTF- COVID 19) IN LINE WITH THE NATIONAL STRATEGY FRAMEWORK AND ACTIVATION OF THE PROVINCIAL EMERGENCY OPERATIONS CENTER

WHEREAS, pursuant to Section 15, Article 2 of the 1987 Philippine Constitution Section 465 in relation to Section 16 of Republic Act 7160 which is known as the Local Government Code of 1991 empowers the Local Chief Executive to carry out measures for the faithful and appropriate enforcement and execution of laws and ordinances;

WHEREAS, on 12 February 2020, Executive Order No. 10 was issued, "Creation of Inter-Agency Task Force to prevent the entry of 2019 Novel Corona virus Acute Respiratory Disease (2019 nCoV ARD) in the province of Isabela;

WHEREAS, pursuant to CVRDRRMC Resolution No. 2, series of 2020, Executive Order No. 19 series of 2020 was issued re-organizing the Provincial Task Force following the structures of the Regional Task Force on COVID 19 to include the organization of the local Management of the Dead and Missing Person (MDM) Team;

Whereas, the LGUs shall activate a 24/7 Emergency Operations Center to be the link between the Isabela Provincial Task Force COVID -19 and other local task group that will be created;

NOW THEREFORE, I, **RODOLFO T. ALBANO III**, Governor of the Province of Isabela, by virtue of the powers vested in me by law, do hereby decree the reorganizing and rationalizing the establishment of the ISABELA PROVINCIAL TASK FORCE FOR COVID 19 (IPTF- COVID 19) in line with the national strategy framework and activation of the Provincial Emergency Operations Center.

Section 1. Composition. The Taskforce shall be composed, to wit:

Chairperson:	Hon. Rodolfo T. Albano III Governor
Vice- Chairperson:	Hon. Faustino G. Dy III Vice Governor
Response Clusters Heads:	Dr. Nelson O. Paguirigan Isabela Provincial Health Officer/Chief of Hospital- GFNDMH PBGGen Jimmy U. Rivera, Sr. (Ret.) Provincial Disaster Risk Reduction and Management Officer

Health Cluster

Head:	Dr. Arlene M. Lazaro Integrated Provincial Health Officer 1
Members:	Hon. Emmanuel Joselito B. Añes SP Committee on Health and Sanitation Mr. Daryl G. Gascon Assistant PGSO/ Executive Assistant

Nagkaisa para sa Isabela

Dr. Jose Ildefonso D. Costales, Jr.
Medical Center Chief – Southern Isabela Medical Center

Dr. Glenn Mathew G. Baggao
Medical Center Chief 2- Cagayan Valley Medical Center

Dr. Elsie A. Pintucan
Development Management Officer, PDOHO

Dr. Imelda M. Guilliermo
Provincial Health Officer I

Dr. Herrison O. Alejandro
Chief of Hospital- CDH

Dr. Edencita R. Paguirigan
Chief of Hospital- MARDH

Dr. Rhoda Jacqueline P. Gaffud
Chief of Hospital- EDH

Dr. Jesus C. Salvador
Chief of Hospital- SMCH

Dr. Desiree Sobelle D. Chiong
Chief of Hospital- Palanan District Hospital

Dr. Jacqueline Buduan
President Assn. of Municipal Health Officers- Isabela

Dr. Danilo Manango
Philippine Medical Association- Isabela Medical Society

Ms. Arcely Pinugu
BHW Federation President- Isabela

Engr. Arnel Noriega
HEMMS/ BHERT

Governance Cluster

Head: Engr. Corazon D. Toribio
Provincial Director- DILG

Members: Hon. Arnold S. Bautista
League of Municipalities President- Isabela Federation

Hon. Dante G. Halaman
Liga ng mga Baranggay President- Isabela Federation

Hon. Dax Paulo C. Binag
Sk Federeation President- Isabela

Hon. Gretchen F. Valdez
Indiginous Cultural Communities Sectoral Representative

Hon. Venus T. Bautista
Women Sectoral Representative

Ms. Madeline L. Macaling
School Division Superintendent- DepEd Isabela

Mr. Ricmar P. Aquino
President- ISU

Law and Order Cluster

Head: PCOL Mariano C Rodriguez
Provincial Director- IPPO

Members: FSUPT Apolonio G Diaz
Provincial Fire Marshall- BFP

LT COL Gladius Calilan
Batallion Commander – 95 IB 5ID PA

LT COL Remigio Dulatre
Batallion Commander – 86 IB 5ID PA

CAPT Charlie Q Rances
Commander, Philippine Coast Guard CGDNELZN

Atty. Constante A. Foronda, Jr.
Provincial Public Safety Officer

Economy Cluster

Head: Atty. Eduardo R. Cabantac
Provincial Planning and Development Coordinator

Members: Hon. Adrian Philip S. Baysac
Agricultural, Industrial Workers & Labor Sector Representative

Mr. Winston T. Singun
Provincial Director- DTI

Ms. Grace A. Pomar
Isabela Field Officer- DOLE

Ms. Marites E. Frogoso
Provincial Agriculturist

Mr. Manuel S. Acierto
Head Coordinator- BRO Farmers Assistance Program

Ms. Lilia C. Castillo
Provincial Cooperative Officer

Mr. Troy Alexander G. Miano
Provincial Tourism Officer

Mr. Charles Y. Lim
Representative- PCCI

Food and Non- Food Items Cluster

Head: Ms. Lucilla M. Ambatali
Provincial Social Welfare and Development Officer

Members: Isabela SWAD- DSWD

Ms. Maria Theresa A. Flores
Provincial Treasurer

Ms. Elsa M. Pastrana
Provincial Budget Officer

Ms. Antonieta M. Bulan
OIC Provincial Accountant

Ms. Marilyn G. Lopez
Provincial Internal Audit and Control Officer

Logistics Cluster

Head: Mr. Rodrigo T. Sawit
Provincial General Services Officer

Members: Engr. Virgilio S. Lorenzo
Provincial Engineer

All District Engineers- DPWH Isabela

Management of the Dead Cluster

Head: Engr. Corazon D. Toribio
Provincial Director- DILG

Members: All City and Municipal Local Government Operations Officer

Crisis Communication Cluster

Head: Atty. Elizabeth C. Binag
Provincial Information Officer

Members: Mr. Merlito G. Egdale, Jr.
Manager- PIA Isabela

Mr. Romy Santos
Consultant on Media Affairs- PGI

Secretariat: Isabela Provincial Health Office

The following teams are also designated and activated as a integral part of the Provincial Task Force:

1. Contact Tracing Team (CTT)

Team Leader: Ms. Arlene Martinez, PESU- Isabela
Ms. Victoria Ocampo, PESU- Isabela

2. Diagnostics and Testing Team (DTT)

Team Leader: Dr. Nelson O. Pagurigan, IPHO
Dr. Glen Mathew G. Baggao , CVMC
Dr. Jose Ildefonso D. Costales, Jr. , SIMC

3. Patient Management and Monitoring Team (PMMT)

Team Leader: Dr. Imelda M. Guillermo, IPHO I
Dr. Edencita R. Paguirigan, COH MARDH

3.1 *Isolation Facility Management Unit (IFMU):*

Dr. Rhoda Jacqueline P. Gaffud- Echague District Hospital Isolation Facility
Isabela Integrated Provincial Health
Office Medical Teams- Presidential Management Staff and Punta
Amelita Isolation Facility

3.2 *COVID Referral and Liason Unit (CRLU):*

Isabela Provincial Epidemiology and Surveillance Unit

3.3 *Reintegration and Psychosocial Counselling Unit (RPCU):*

Ms. Rose Nicasio, Provincial Social Welfare and Development Office
Ms. Mitzi Concepcion Caramat, Coordinator- Mental Health Program IPHO

4. Logistics and Resources Support Team (LRST)

Team Leader: Mr. Rodrigo T. Sawit, Provincial General Services Officer
Engr. Virgilio S. Lorenzo, Provincial Engineer
Ms. Antonieta M. Bulan, OIC Provincial Accountant

Section 3. Functions and Responsibilities. All Duties and responsibilities stated under Executive Order No. 10 Series of 2020 not in contrary herewith shall remain in force to include responsibilities required by the Regional Task Force for COVID-19 including those that are necessary for the proper execution of all protocols and models against the spread of COVID- 19 and additional tasks such as;

3.1 Contact Tracing Team- are responsible for the conduct of contact tracing for all persons with known exposure to a COVID- 19 patient to ensure that they are strictly observing the home- quarantine measures and monitor status of probable, suspected, and confirmed cases including family members with known contact to a confirmed case to mitigate possibility of contagion, and require and collate daily update from the LGU Task Force COVID- 19 and submit the same to the Regional Task Force COVID- 19. The team shall be led by the Isabela Epidemiology and Surveillance Unit, and shall include its members representatives from PNP, BFP, POPCOM, NGOs and LGU representatives.

Diagnostics and Testing Team- whose responsibility is to facilitate the conduct of the expanded testing and provide framework for formulation and operations, to respond to the prevention or mitigation of COVID- 19 through but not limited to, Real Time- Polymerase Chain Reaction (RT- PCR), blood testing to antibody testing, to temperature scanning and recording of symptoms. Testing of probable or suspected cases, both through PCR (swabbing) and Rapid Anti-Bodies Test Kit, must be conducted to effectively detect possible infection.

Patient Management and Monitoring Team- are responsible for keep tracking the status and health of all individuals whether those who are probable, suspected, or confirmed, including those who are in quarantine or scheduled to go in quarantine. Under the PMMT are the following:

Isolation Facility Management Unit- the IFMU shall provide framework for the formulation of identifying and/ or maintenance of isolation facilities that will house probable or suspected and/or confirmed cases of COVID-19 pursuant to existing guidelines of the Department of Health, and to enforce, regulate, and/or administer mandatory fourteen (14) days quarantine of concerned individual.

COVID Referral and Liaison Unit- the CRLU will serve as coordinators and/ or liaison between referral centers/hospitals and the LGUs, health providers, Primary healthcare units or laboratory facilities for all communications on COVID-19 concerns including but not limited to referrals, consultations, data requests, validation and follow- up. They are to guarantee the unhindered processing of symptomatic COVID-19 positive patients from the transfer and admissions thereof to concerned health facilities.

Reintegration and Psychosocial Counselling Unit- the RCPU responsibility revolves around the provision of psychosocial support to affected or individuals in need, the scope of which includes probable, suspected, and confirmed cases, and those who had contact with them, upon certification of completion of any mandatory quarantine period and/or release of a negative COVID- 19 test result by a competent, and authorized facility/agency. They shall mainly focus on recovered COVID- 19 patients who suffer discrimination from the society. They must exert to push for psychosocial programs and action plans to help patients, survivors and health workers overcome the psychosocial effects after experiencing the hardships of the pandemic. This will be their way to reintegration to the new normal.

Logistics and Resources Support Team- the LRST are responsible for the effective management, procurement, and distributions of all LGU resources for battling COVID- 19 or for the provision of assistance from relief packs, PPEs, disinfectants, and all other related resources including the determination of, and establishment of isolation and holding facilities. They are tasked of ensuring that necessary support and resources are ready available for the people throughout the duration of the localized quarantine.

3.2 CTT, DTT, PMMT and LRST Team Leaders are directed to identify the members of each team as deemed necessary, including which sectors or offices are to be represented, subject only to any requirement the national government may impose with regard to mandatory members, to fully discharge their roles and responsibilities to serve the needs of the Isabeleños. Submit to the IPTF- COVID 19 Chairperson the team members two days from receipt of this order.

3.3 The IPTF COVID -19 shall take the lead in all related situations and concerns, and closely coordinate with the DOH- Center for Health Development.

3.4 The Task Force shall make use of any available technology or application that could assist it in its actions relative to contact tracing.

3.5 Memorandum of Agreement and/or any other arrangements with different agencies and organizations, which will help the task force, are encouraged.

3.6 Video teleconference (VTC) an other media platforms may be used for easy coordination/ cohesive action.

Section 4. General Protocols to be Adopted by the IPTF COVID- 19 per DILG MC No. 2020-077:

1st Step: Contact Tracing

Agents of the Task Force, upon receipt of the report of a confirmed, suspected, or probable case, shall verify the identity of the confirmed/suspected/probable individual and establish contact with them either through phone, e- mail, or in-person outreach. (**Note: If the confirmed/suspected case is deceased, seek out their immediate family and use them for contact tracing*). The Task Force shall set the parameters on the potentially infectious period before the isolation of the confirmed/suspected/probable individual. This shall determine the period the individual is most infectious which will help in tracing other possible cases. (**Note: Per recent studies, this period is usually 48 hours before onset symptom for symptomatic cases*).

For the guidance of the Task Force, the probable contacts may be the following:

- a. Household members;
- b. Intimate partners;
- c. Individuals providing care for the household (kasambahay); and
- d. Individuals who has had close contact (closer than 6 feet) for a prolonged period (20-30 minutes)

2nd Step: Isolation:

Probable, and suspected cases, including those identified to have had contact with such cases, including confirmed cases, shall be put in isolation or required to undergo quarantine for a minimum of fourteen (14) days or when test results from a government acknowledged institution or testing kit yields negative results, whichever is shorter.

If probable and suspected cases, or contacts starts to show symptoms akin to COVID- 19, the Task Force shall refer cases to appropriate hospital. Individuals with mild symptoms are referred to Level 2 Hospitals while those manifesting severe symptoms are transferred to Level 3 Hospitals.

3rd Step: Testing

All cases and contacts of such cases shall be subject to appropriate tests. Infected individuals exhibiting mild symptoms and even those asymptomatic must be admitted. Provinces and highly urbanized cities must put up 1, 000 bed capacity isolation facilities to cater to possible surge of cases once ECQ is lifted.

4th Step: Integration or Referral

Upon release of credible test results, the LGU shall either cause the reintegration of the person to the community, if the result is negative, or the referral of the case to an appropriate facility, if the result is positive. In both cases, the LGU shall provide the person with psychosocial support. Positive cases shall then undergo again all the steps starting from 1st Step.

Each department, office, division, and agency of this province is hereby required, to the extent not inconsistent with law, to cooperate fully with the IPTF-COVID 19 within the limits of its statutory authority and to furnish the task force with such assistance on a timely basis as is necessary to accomplish the purposes of this Order.

Section 4. Funding. Funding for the operations of the Task Force shall be sourced from the Office of the Provincial Governor Funds.

Section 5. Separability Clause. Should any provision of this Order be declared invalid or unconstitutional, the other provisions unaffected thereby shall remain valid and subsisting.

Section 6. Repealing Clause. All issuances, orders, rules and regulations, or parts thereof that are inconsistent with any provision of this Order are hereby repealed or modified accordingly.

Section 7. Effectivity. This Executive Order shall take effect immediately.

Issued this 30th day of APRIL, 2020 in City of Ilagan, Isabela.


RODOLFO T. ALBANO III
Governor 

GFYA/NMRLJNG

Nagkaisa para sa Isabela