



REPUBLIC OF THE PHILIPPINES
PROVINCE OF PANGASINAN
MUNICIPALITY OF CALASIAO

EXECUTIVE ORDER NO. 20
Series of 2024

**AN ORDER ON THE ESTABLISHMENT OF INCIDENT COMMAND
SYSTEM (ICS) IN THE HEALTH OFFICE AND ACTIVATION OF
EMERGENCY OPERATION CENTER FOR HEALTH AND HEALTH
EMERGENCY RESPONSE TEAMS IN THE MUNICIPALITY OF CALASIAO
FOR EMERGENCIES AND DISASTERS**

WHEREAS, Republic Act No. 10121, otherwise known as the Philippine Disaster Risk Reduction and Management Act, was enacted in 2010. This act was mandated to strengthen disaster management in the Philippines. Furthermore, Section 2 mandates the establishments of the (ICS) as an on-scene Disaster Response and Management Mechanism;

WHEREAS, Rule 7 (h) of RA 10121 IRR also mandates the provision of emergency services and public assistance during or immediately after a disaster in order to save lives, reduce health impacts, ensure public safety and meet the basic subsistence needs of the people affected:

WHEREAS, the law has restricted the roles of key players during disasters giving local government units the capacity to manage disaster as "first responders and manage the adverse effects of emergencies and carry out recovery activities";

WHEREAS, the implementation of such roles requires the establishment of an Emergency Disaster) Operation Center for health which will serve as the base for the team who will govern responses and appropriate actions for pre-disaster, during disaster and post disaster responses;

NOW THEREFORE, L, KEVIN ROY Q. MACANLALAY Municipal Mayor of Calasiao, by virtue of the powers vested in me by law, do hereby order:

SECTION I. ESTABLISHMENT. The Emergency Disaster Operation Center for Health is established and is located in the Municipal Health Office and 2nd floor, RHU 1 Building. It monitors the occurrence of health emergencies and events with emergency potential through various communication media (mobile phones, E-mail messages, televisions, and newspapers) 24 hours a day, seven days a week, during disasters and calamities or During activation of code avert status Major sources of data are the HEMS Coordinators in the Provincial DOH Offices (PDOHO) and the DRRM-H Managers of the DOH Hospitals.



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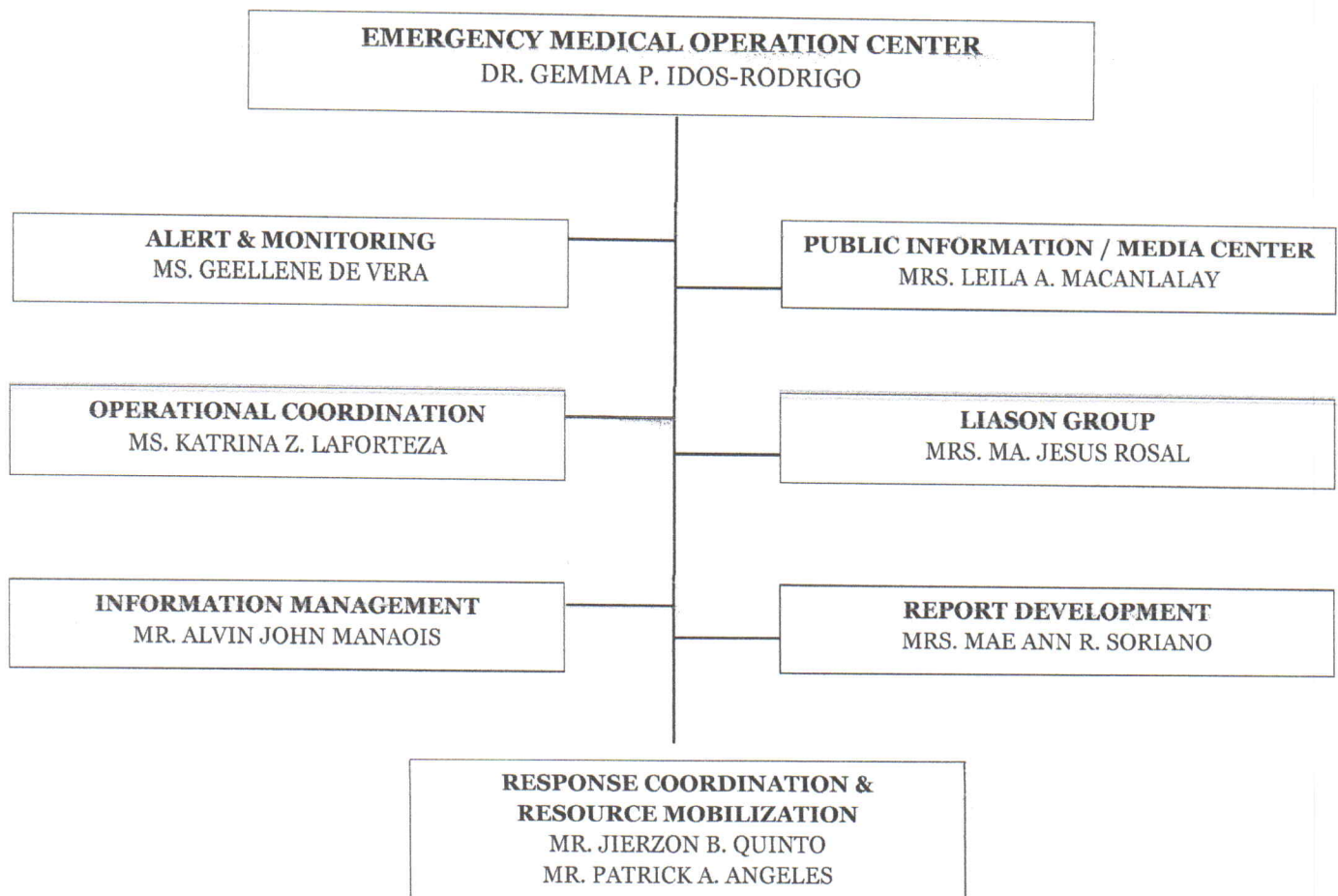
SECTION II. COMPOSITION. In support to the above stated policies the Operation Center is now composed of the following:

TEAM 1	TEAM 2
Team Leader: Dr. Gemma P. Idos-Rodrigo Members: 1. Maria Jesusa D. Rosal 2. Donna Untalan 3. Angie D. Fernandez 4. Emelita M. Saplan 5. Loida Parayno 6. Robert D. Andrada 7. Patrick Laurence A. Angeles 8. Dan August R. Solis 9. Amelita M. Diolazo Driver: Sergio L. Estrada	Team Leader: Dr. Justin Ross M. Bajao Members: 1. Mae Ann R. Soriano 2. Jacqueline P. Salazar 3. Ebezer B. Anchiboy 4. Liezl Z. Manongdo 5. Michael Gabriel V. Aquino 6. Pauline E. Ugaban 7. Geelene V. De Vera 8. Carlo D. Untalan 9. Philip E. Magsanoc Driver: R-jay P. Fernandez
TEAM 3	TEAM 4
Team Leader: Dr. Fritz Philip M. Maniquis Members: 1. Katrina Laforteza 2. Lynn A. Dela Fuente 3. Lilian S. Cabotaje 4. Nelson Abalos 5. Leila A. Macanlalay 6. John John Bauzon 7. Joel C. Cabucol 8. Jan Leonel Gutierrez 9. Jorie Ann S. Sanchez Driver: Gilbert D. Roxas	Team Leader: Dr. Gemma P. Idos-Rodrigo Members: 1. Jierzon B. Quinto 2. Teonida Liquiran 3. Josephine S. Palma 4. Ruth Ferrer 5. Sherwyne S. Serrano 6. Roan S. Tabili 7. Paulo Tamayo 8. Ariel Flores 9. Mc Daniel Dion Driver: Maverick I. Santillan



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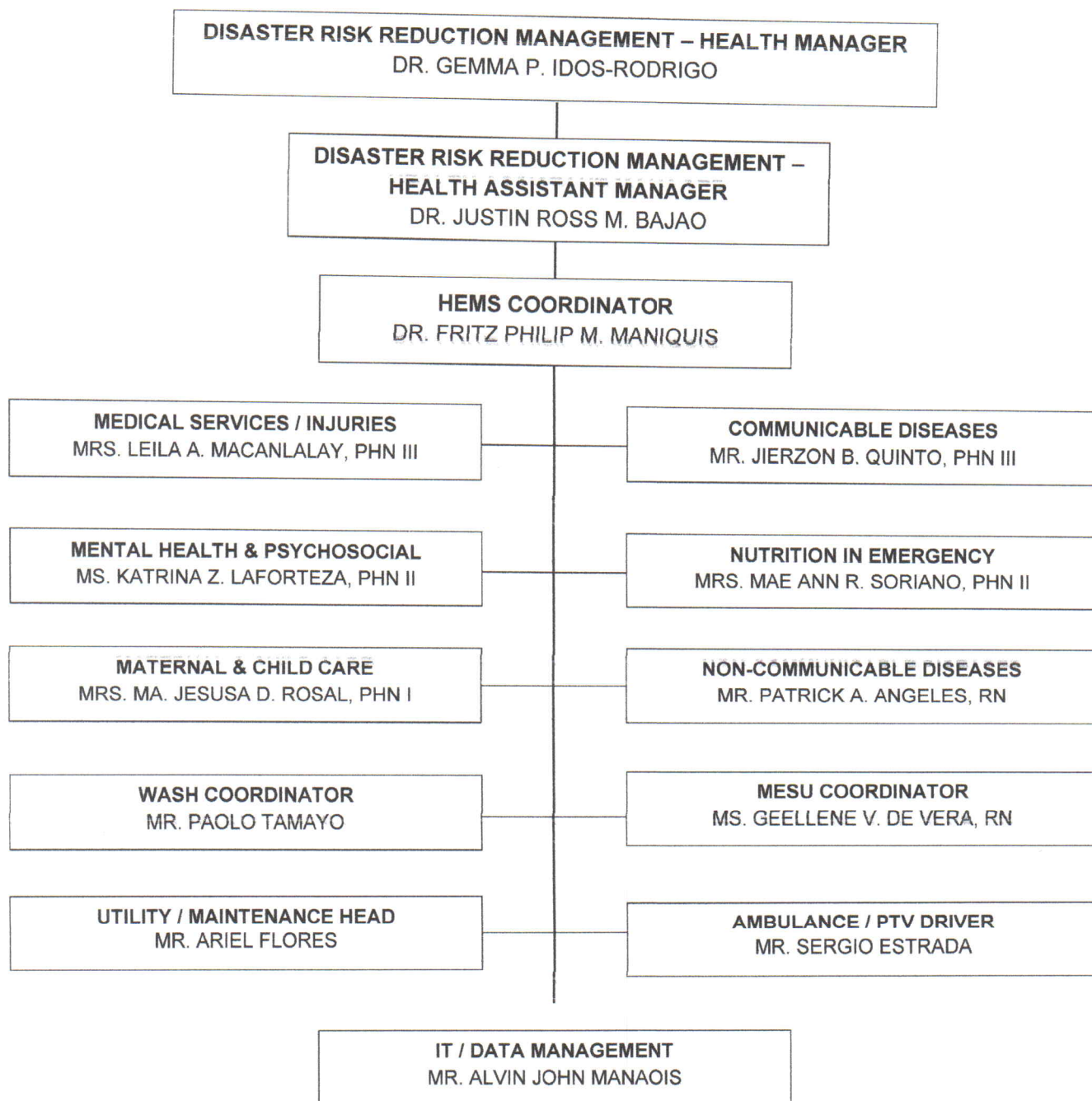
ORGANIZATIONAL CHART OF EMERGENCY OPERATION CENTER FOR HEALTH





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**ORGANIZATIONAL CHART OF HEALTH EMERGENCY
MANAGEMENT STAFF**





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SECTION III. FUNCTIONS

1. Report to the Disaster Operation Center twenty-four hours a day, seven days a week (24/7) during disasters and calamities.
2. Receive and log reports from Barangay Captains/ Officials to be relayed Incident Commander and MDRRM Officer.
3. Receive and act on reports and calls requiring emergency medical services and rescue and reliefs services;
4. Register evacuated calamity victims on official logbook and attend to their basic needs (Medical check – up, food, sleeping, materials and clothes as needed)

SECTION IV. DUTIES AND RESPONSIBILITIES

1. The TL shall be responsible in assigning schedules of duty of each member/ Emergency Officer on Duty (EOD). A schedule of duty covering the assigned dates for the year should be submitted by each team to the HEMS Office
2. The TL shall ensure the attendance of the team member/s on their specified schedule and shall facilitate the systematic conduct of duty required by the situation
3. In instances that an EOD cannot attend to his/her scheduled date, it will be his/her responsibility to find a replacement from his/her team. The TL. shall be informed of the replacement. Failure to come on duty shall be dealt with accordingly
4. During Regular/No Code Alert Status, the emergency operation center for health (OpCen) is open, Mondays to Fridays – 8:00 am to 5:00 am only. After office hours, during weekends and holidays, the OpCen of MDRRMO will take over and attend to the emergency health needs for continuum of care.
5. During a Code White Alert (Annex A), at least 2 members (At least 2 members composed of 1 technical and 1 non-technical staff; or both technical per shift) from the Team-on- duty shall go on a 24-hour duty, the Team-on-duty shall be placed on standby for immediate deployment if warranted and in case of code elevation
6. During Code Blue Alert (Annex A), One-half of the members of the Team-on-duty shall report to the OpCen. The team shall go on a 24-hour duty. All other Teams shall be placed on stand-by for immediate deployment if warranted and in cases that code is elevated. The number of team members on duty may increase depending on the discretion of the Responsible Official (RO) or the Incident Commander (IC)
7. During Code Red Alert (Annex A), all members of the Team-on-duty shall report to the OpCen. The team shall go on a 24-hour duty and accomplish the following tasks:
 - Detects potential hazards and emergency situations through media monitor or other possible sources of information and do appropriate action/s;



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- Facilitates validation and confirmation of incidents and casualties, if applicable;
- Accurately documents incidents and casualties, accomplish report and disseminate concerned agencies or parties,
- Facilitates referral and endorsement of casualties to appropriate health facilities;
- Facilitates health assistance to casualties;
- Performs other required measures to abide by the general principle and objectives of our operation as stated above

8. The TL shall ensure that the team will be able to perform the minimum required functions during their tour of duty. EODs at the OpCen must log in/out and in the attendance logbook

9. The Protocol on Notifying Superiors (Annex B) regarding events monitored shall be observed.



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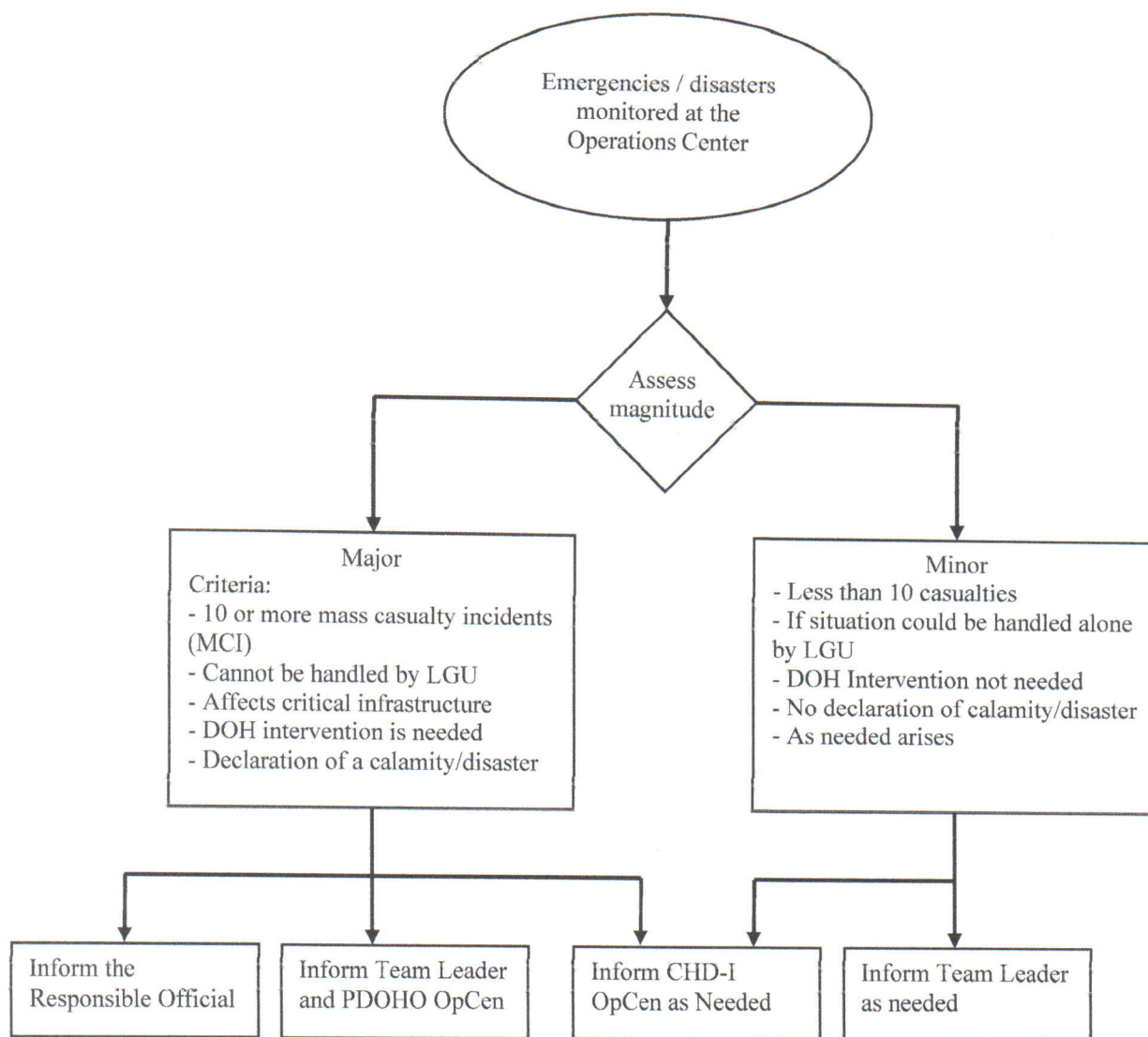
Annex A. Integrated Code Alert System of 2008 (*Administrative Order No. 2008-0024*)

Code WHITE	Code BLUE	Code RED
<ul style="list-style-type: none">• Strong possibility of a military operation within the area/region, e.g., coup attempt• Notification of an on-going epidemic by LGU, with adequate measures by local health personnel• Any planned mass action or demonstration within the catchment area• Forecast typhoons (Signal No. 2 up) the path of which will affect the area• National or local elections and other political exercises• National events, holidays, or celebrations in the area with potential for MCI• Any emergency with potentially 10-50 casualties (deaths, injuries)• Any other hazard that may result in emergency• Unconfirmed report of reemerging diseases, e.g., bird flu, SARS	<p>Any of the following conditions:</p> <ul style="list-style-type: none">• 50-100 casualties irrespective of tags for MCI.• Declaration of epidemic: confirmed/documented report of reemerging diseases (SARS, human to human avian flu) within the region• Declaration or calamity in any province in the region• Presence or evacuation centers estimated to last for more than a week which has public health implications• Magnitude of the disaster based on geographic coverage and number of affected population (more than 30%)• Any conditions that would require mobilization of resources of the entire region	<p>Any of the following is present:</p> <ul style="list-style-type: none">• Conditions resulting to mass dead and missing• Disaster declared in 2 or more provinces in the region or 30% of the cities in Metro Manila• Major facility or Hospital such as the Provincial/ City/ Hospital in area is not able to provide optimal services due to damages or 50% of staff are affected• Major facility or Hospital such as the Provincial/ City/ Hospital in area is not able to provide optimal services due to damages or 50% of staff are affected• Uncontrolled epidemic/ outbreak• Uncontrolled human to human transmission of SARS/ Avian Flu



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Annex B. Protocol on Notifying Superiors of Monitored Emergencies/Disasters



This order shall take effect immediately

Done this 15th of January 2024 in the Municipality of Calasiao, Pangasinan.

HON. KEVIN ROY Q. MACANLALAY
Municipal Mayor