



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

March 6, 2020

DEPARTMENT MEMORANDUM

No. 2020 - 0111

TO: ALL UNDERSECRETARIES AND ASSISTANT SECRETARIES; DIRECTORS OF BUREAUS AND CENTERS FOR HEALTH DEVELOPMENT; MINISTER OF HEALTH – BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO); EXECUTIVE DIRECTORS OF SPECIALTY HOSPITALS AND NATIONAL NUTRITION COUNCIL; CHIEFS OF MEDICAL CENTERS, HOSPITALS, SANITARIA AND INSTITUTES; PRESIDENT OF THE PHILIPPINE HEALTH INSURANCE CORPORATION; DIRECTORS OF PHILIPPINE NATIONAL AIDS COUNCIL AND TREATMENT AND REHABILITATION CENTERS AND ALL OTHERS CONCERNED

SUBJECT: Guidelines on Harmonized Code Alert System for Coronavirus Disease 2019 (COVID-19)

I. BACKGROUND AND RATIONALE

After a cluster of pneumonia cases of unknown etiology was reported in Wuhan City, Hubei Province of China last December 31, 2019, Chinese health authorities preliminarily identified the cause of this viral pneumonia as a new or novel type of coronavirus (2019-nCoV).

With an increasing number of cases spreading to various territories and confirmed human-to-human transmission, the World Health Organization declared the outbreak as a Public Health Emergency of International Concern (PHEIC) last January 30, 2020.

The Department of Health (DOH) hereby issues these guidelines on the Harmonized Code Alert System for Coronavirus Disease 2019 (COVID-19) (hereinafter referred to as “Code”) to ensure comprehensive and well-coordinated response.

II. GENERAL GUIDELINES

1. All DOH Central Office, Centers for Health Development, DOH Hospitals, DOH attached agencies, and other health facilities shall incorporate the Code to their existing emergency preparedness, response and rehabilitation plans.
2. This Code shall be institutionalized in the DOH and in all health facilities. Health Emergency Management Bureau shall ensure that this is properly disseminated to all personnel and corresponding procedures shall be developed in the implementation of this code alert.



3. All health facilities and concerned offices shall establish and organize an Incident Command System and Emergency Operations Center for appropriate response.
4. DOH shall provide technical assistance to local government units (LGUs) and the private sector in the implementation of this Code.

III. IMPLEMENTING GUIDELINES

This Code adopts the Four Door Framework on the types and levels of response to outbreaks and epidemics. The framework provides an integrated and coordinated response for a specific stage represented by a “door” which was then assigned to a corresponding color code (White, Blue and Red) of Integrated Code Alert System of 2008 (Administrative Order 2008-0024), in the course of the public health emergency situation.

Harmonized Code Alert System				
Four Door Framework	Door 1	Door 2	Door 3	Door 4
Color Code	White	Blue		Red

A. Code White

1. Code White shall be declared when any of the following occurs::
 - a. Emergence of novel or emerging infectious disease infections that has been acknowledged by the global community to cause potential public health emergencies of international concern; and
 - b. A reported suspect or case identified outside the Philippines.
2. The following interventions and actions shall be taken:
 - a. Coordinate with Department of Foreign Affairs and embassies;
 - b. Strengthen surveillance at points of entry and quarantine;
 - c. Enhance disease surveillance to monitor cases outside the country;
 - d. Prepare laboratories and referral hospitals;
 - e. Prepare essential medicines, personal protective equipment (PPE) and other essential equipment;
 - f. Review and/or update protocols for case detection, case management, and referral based on previous occurrences of outbreaks;
 - g. Develop risk communication systems that focus on individual, household, and public awareness, including target-specific information, education, and communication materials.
3. Other Requirement:
 - a. Personnel to be on standby mode to support monitoring of event

B. Code Blue

1. Code Blue shall be declared when any of the following occurs:
 - a. An identification of even one (1) imported case inside the Philippines, or international proliferation persists due to increased globalization and mobility of travelers and products, and thus, threatens the lives and safety of Filipinos both here and abroad, as well as the Philippine economy in general; or



- b. WHO declaration of Public Health Emergency of International Concern (PHEIC)
2. Interventions and actions that shall be executed are the following:
 - a. Intensify Code White interventions;
 - b. Monitor actively flights from affected countries;
 - c. Initiate contact tracing of confirmed cases;
 - d. Enforce Health Declaration Checklist;
 - e. Implement surveillance, apprehension, and isolation of persons under investigation (PUIs) at points of entry;
 - f. Intensify standard infection prevention and control in health facilities;
 - g. Triage, isolate and manage PUIs in Level 2 and 3 hospitals;
 - h. Activate Incident Command System, and Emergency Operations Center
 - i. Coordinate regularly with other agencies and LGUs
 - ii. Administrative and Finance Section shall ensure availability of funds in cases of emergency purchase and the like
 - iii. Logistics Section shall coordinate with possible suppliers for additional requirements and ensure availability of transportation
 - i. Activate Inter-Agency Task Force on Emerging Infectious Diseases (IATF-EID)
 - j. Capacitate the Sub-National Referral Laboratories
 - k. Conduct inventory, procurement, prepositioning and augmentation of PPE, supplies and equipment for the response; and
 - l. Consider travel restrictions and implement, if necessary.
 3. Other Requirements
 - a. All those mentioned in Code White
 - b. Mobilize teams and resources
 - c. 50% of personnel should be on-standby for possible deployment
 - d. Leaves may be cancelled and personnel can be recalled
 - e. When the Code Blue Alert is activated, all DOH personnel mobilized shall be entitled to meal allowances during the entire activation period which is on top of the ordinary subsistence allowance due to the unusual nature of the situation. These personnel are entitled to claim overtime pay or compensatory overtime credit (COC) and other allowable benefits due to them. This shall be supported through the issuance of a pertinent Department Personnel Order / Regional Order / Hospital Order and which shall state funding of such overtime or COC subject to the usual accounting and auditing rules and regulations.

C. Code Red

1. Code Red Level 1 shall be declared when:
 - a. Identification of even one (1) case in the country due to localized transmission; or
 - b. Detection of sporadic cases and clusters of cases confined within affected areas.
2. Appropriate response for Code Red Level 1 would be to focus on the PUIs and confirmed cases; isolating them from the rest of the community and getting them



the supportive care and treatment that they need. The following are the interventions and actions to be implemented.

- a. Declare State of Public Health Emergency;
 - b. Strictly enforce unity of command, control, coordination and communication;
 - c. Implement intensive containment guidelines;
 - d. Continue rigorous contact tracing of confirmed cases;
 - e. Prioritize testing and management of severe and critical cases, and the vulnerable and high-risk groups;
 - f. Enforce self isolation for mild cases;
 - g. Monitor disease trends in the country;
 - h. Scale up laboratory capacity to cope up with the increasing number of PUIs and confirmed cases;
 - i. Strengthen non-pharmaceutical intervention, which may include appropriate suspension of classes and work;
 - j. Ensure back-up systems to address surge capacity such as tent facilities;
 - k. Reinforce level of public awareness, to minimize fear, reduce anxiety and unrest; and
 - l. Expand inter-agency, multi-level, whole-of-society coordination and response.
3. Code Red Level 2 is declared when a sustained community transmission has been established. This ensues when a series of clusters in a population has been infected with COVID-19 in a given period of time, and continues to extend its reach in other areas despite intensive control measures.
4. Interventions and actions for Code Red Level 2 that shall be enacted include:
- a. Implement mitigation measures, which may involve community quarantine of affected areas;
 - b. Identify and investigate clusters, and continue contact tracing of confirmed cases;
 - c. Focus on disease surveillance by monitoring the levels of activity and changes in the history of the disease;
 - d. Set all health facilities both public and private Level 2 and 3 hospitals, on full alert to receive confirmed cases;
 - e. Direct Level 1 hospitals to manage severe cases once the surge capacity of Level 2 and 3 hospitals can no longer accommodate them;
 - f. Intensify infection control and prevention at all levels of hospitals and community;
 - g. Strengthen non-pharmaceutical interventions including robust social distancing;
 - h. Strengthen risk communication;
 - i. Engage the community to enforce mitigation measures such as provision of supplies, supportive care to mild cases; and
 - j. Expand and sustain inter-agency, multi-level, whole-of-society coordination.
5. Other Requirements for Code Red
- a. All those mentioned in Code Blue
 - b. 100% of personnel should be on-standby for deployment
 - c. All types of leaves can be cancelled and can recall all personnel to report for duty
 - d. All operations not related to the event can be stopped

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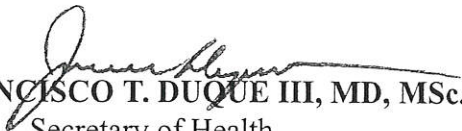
MAR 15 2020

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KMITS - RECORDS SECTION
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D. Downgrading/Deactivating the Code Alert

The Central Code Alert shall be downgraded/lowered or deactivated/lifted/suspended by the Secretary of Health based on the scale of the containment of the event while the agency will remain vigilant on issues that may lead to national concern.

For strict compliance.


FRANCISCO T. DUQUE III, MD, MSc.
Secretary of Health

