

OFFICE ORDER NO. <u>002</u> Series of 2022

#### MWSS REGULATORY OFFICE'S (RO) COVID-19 ANTIGEN RAPID DIAGNOSTIC TESTING

Pursuant to the Department of Health issued Department Circular No. 2021-0581, s. 2021 imposing the Reminders on Mitigation Strategies and Implementation of Health Protocols for Possible COVID-19 Omicron Variant Community Transmission, as well as of the resumption of office work of the MWSS RO effective January 3, 2022, and to forestall and immediately arrest the perceived adverse impact of COVID-19, particularly the highly-transmittable Omicron variant, the conduct of Antigen Rapid Diagnostic testing (Nasopharyngeal swab procedure) to all MWSS RO Talents, individual Contract of Service, and institutional Contract of Service (Janitors and Security Guards) is hereby approved.

Likewise, the following are approved:

- 1. Schedule of Antigen Rapid Diagnostic testing on January 11, 2022 from 7:00AM to 12:00NN at the new MWSS RO Building Parking Area;
- 2. MWSS RO Internal Guidelines for COVID-19 Antigen Rapid Diagnostic Testing and Master list of all persons to be tested, on a per batch basis, attached as Annex "A"; and
- 3. The use of MWSS RO service vehicles to provide point-to-point transportation for talents from their residences to the new MWSS RO Building Parking Area and viceversa.

The attached MEMORANDUM from the Administration and Legal Affairs dated January 3, 2022 shall be made an integral part of this Order.

This Office Order shall take effect immediately.

January 5, 2022, Quezon City, Philippines.

PATRICK LESTER N. TY Chief Regulator

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#### MWSS RO INTERNAL GUIDELINES FOR COVID-19 ANTIGEN (NASOPHARYNGEAL SWAB) RAPID TESTING

- 1. In view of the resumption of office work at the MWSS RO after the holiday season and to forestall and immediately address the perceived adverse impact of COVID-19, particularly the highly transmissible Omicron variant, the MWSS RO engaged the services of De Los Santos Medical Center to conduct a Mass Testing using the Antigen Rapid Test. The Mass Testing will be on January 11, 2022, from 7:00AM to 12:00NN, at the new MWSS RO Building Parking Area.
- 2. All RO talents and other identified personnel are hereby encouraged to take the Antigen Rapid Test.

The following talents may not submit themselves for the Antigen Rapid test at the MWSS RO venue on the day of the mass testing:

- a) Those who were identified as suspected/confirmed case or 1st level general contact and still in quarantine or isolation;
- b) Those who have any of the symptoms related to COVID-19 on the day of the testing;
- c) Those who availed of full WFH arrangement, provided that they will not physically report to the office for the next two weeks; and
- d) Those who are on maternity leave.
- 3. Talents who are not listed in 2 above shall get clearance from the Chief Regulator why they will not submit themselves for COVID-19 test and shall observe WFH arrangement for the next two (2) weeks. If they need to physically report in the office for the next two (2) weeks, they have to take the same test first to ensure the safety of those talents who are regularly reporting to the office.
- 4. The schedule of testing shall be on a per batch basis to ensure that social distancing is maintained at the testing site. The Schedule will be coursed thru each area focal person.
- 5. Only asymptomatic talents, those without symptoms in the last seven (7) days prior to testing, may avail the Antigen Rapid test at the MWSS RO venue. Symptomatic talents on the day of the testing and or those who are categorized under 2a and would like to avail of the test may do so at the Delos Santos Hospital at a later time and day to be arranged thru the Administration Department. Asymptomatic talents who are categorized as 1st level general contact may avail of the test at the MWSS venue provided their respective area focal persons are informed one (1) day before the testing for appropriate scheduling.



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- 6. Talents who are classified under 2.a and 2.b cannot avail of the shuttle service.
- 7. Talents who are allowed to use the shuttle service shall observe the following:
  - a. Temperature checking shall be conducted prior to boarding the shuttle service;
  - b. Talents shall wear face masks at all times while onboard the shuttle vehicle and disinfect their hands with alcohol and or sanitizer provided in each shuttle, upon boarding and before disembarking;
  - c. Adequate ventilation shall be enforced inside the shuttle. All windows shall be fully opened while in transit; and
  - d. Talents, while inside the shuttle, shall avoid talking with each other, taking phone calls, eating, and removing their face masks.
- 8. All talents who will submit themselves for Antigen Rapid Test shall accomplish first a Testing/Registration Form¹ and the MWSS RO Daily Health Monitoring Form² prior to proceeding to the Registration Area located at the new MWSS RO Building Parking Lot as scheduled. A Safety and Health Committee and HR representative³ shall check all procedural requirements as well as the minimum health protocol before the conduct of the test. Talents shall then proceed to the Testing Area and will be called one by one by the assigned nurse/medical technologist from Delos Santos Hospital to administer the test.
- 9. Talents who tested negative for COVID-19 Antigen Rapid Test are allowed to go to their respective workstation, however, those who tested positive for COVID-19 Antigen Rapid Test shall go home immediately after the test and observe quarantine protocols.
- 10. The Safety and Health Committee shall report to the Chief Regulator talents with positive results and will closely coordinate with QCESU for contact tracing.

<sup>&</sup>lt;sup>1</sup> The testing/registration form shall be distributed on 10 January 2022.

<sup>&</sup>lt;sup>2</sup> This should be accomplished on or before 6 AM, 11 January 2022.

<sup>&</sup>lt;sup>3</sup> Appropriate PPEs will be provided during the testing



#### **MEMORANDUM**

MWSS Regulatory Office OFFICE OF THE CHIEF REGULATOR

RECEIVED

**FOR** 

PATRICK LESTER N. TY

Chief Regulator

THRU

CLAUDÍNE B. OROCIO-ISORENA

Deputy Administrator for Administration and Legal Affairs

**FROM** 

**RAMON A.**VAVIER

Department Manager for Administration Department

**SUBJECT** 

**COVID-19 ANTIGEN RAPID TEST** 

DATE

03 January 2022

On 08 December 2021, the Department of Health (DOH) issued Department Circular No. 2021-0581, s. 2021 imposing Reminders on Mitigation Strategies and Implementation of Health Protocols for Possible COVID-19 Omicron Variant Community Transmission, wherein the administrators of workplaces shall undertake active surveillance that includes among others, testing with RT-PCR or antigen test of employees that are high risk given the nature of their work, such as workers who cannot dutifully meet minimum public health standards, or in areas with frequent cluster s of symptoms, absences, or positive cases, subject to established and evidencebased protocols and guidelines on testing.

Moreover, on 20 August 2021, the DOH issued Department Circular No. 2021-0350 reiterating the use of the rapid antigen test as a substitute for RT-PCR shall be allowed for diagnostic testing of suspect, including symptomatic and asymptomatic close contacts who fit the suspect case definition or in the community during outbreaks for quicker case finding, provided that in any setting only FDA-certified antigen tests with sensitivity and specificity in conformity with Health Technology Assessment Council specifications are used.

Foregoing considered, in view of the resumption of office work of the MWSS RO after the holiday season and to forestall and immediately address the perceived adverse impact of COVID-19, particularly the highly-transmissible Omicron variant, may we respectfully recommend the following:

a. Conduct of Antigen Rapid Test to all MWSS RO talents, individual Contract of Service, and Institutional Contract of Service (Janitors and Security Guards);







- b. Engagement of external Service Provider to supply and administer the conduct of the Antigen Rapid Test;
- c. Procurement of the said engagement through Alternative Mode of Procurement Emergency Purchase in accordance with GPPB Resolution No. 03-2020, s. 2020; and
- d. Approval of the estimated cost in the amount of **One Hundred Thirty-Five Thousand Pesos (Php135,000.00)** chargeable against the approved Corporate Operating Budget of the MWSS RO for CY 2022 to be included in the revision of the Annual Procurement Plan for CY 2022.

For your approval.

Recommending Approval:

**CLAUDINE B. OROCIO-ISORENA**DA for Administration and Legal Affairs

PATRICK LESTER N. TY

Chief Regulator



## Republic of the Philippines Department of Health OFFICE OF THE SECRETARY

December 28, 2021

DEPARTMENT CIRCULAR No. 2021 - 0581

TO:

ALL DEPARTMENT UNDERSECRETARIES AND ASSISTANT SECRETARIES; DIRECTORS OF BUREAUS AND CENTERS FOR HEALTH DEVELOPMENT; MINISTER OF HEALTH – BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO (BARMM); SPECIAL AND SPECIALTY HOSPITAL DIRECTORS; CHIEFS OF MEDICAL CENTERS, HOSPITALS

AND SANITARIA; AND OTHER CONCERNED OFFICES

SUBJECT:

Reminders on Mitigation Strategies and Implementation of Health Protocols for Possible COVID-19 Omicron Variant Community Transmission

Many countries with high vaccination coverage are experiencing exponential increase in cases due to the COVID-19 Omicron variant. To date, the Philippines has detected 4 cases, all of whom have been properly tested and isolated. Still, we want to manage if not avert possible community transmission. As part of our preparations, the following stakeholders are enjoined to strengthen implementation of existing policies on COVID-19 response (Prevent-Detect-Isolate-Treat-Reintegrate) including Department Circular No. 2021-0562 (Ligtas Christmas sa Healthy Pilipinas: Guidance for Safe and Healthy Holiday Celebration during the COVID-19 Pandemic) and COVID-19 vaccination and specifically, undertake the following critical actions:

#### For Owners/Administrators of Establishments / Public Places / Public Transportation

- 1. Ensure 100% primary series and booster vaccination among employees, especially those belonging to A2 and A3 group
- 2. Strictly enforce health protocols among employees and clients/visitors (e.g. wearing masks except when eating, handwashing or hand sanitizing, adherence to maximum space occupancy and adequate ventilation, accepting clients/visitors with proof of vaccination, screening for symptoms at entry points)
- 3. Delegate staff to monitor activities classified as high risk under 3Cs (closed, crowded, close contact) within establishments
- 4. Promote the use of outdoor spaces as much as possible and availability of bike racks and bike lanes.

#### For Owners/Administrators of Workplaces

- 1. Provide option for work from home arrangements as much as possible
- 2. Ensure 100% primary series and booster vaccination among employees, especially those belonging to A2 and A3 group
- 3. Strictly enforce health protocols among employees and clients/visitors (e.g. wearing masks except when eating, handwashing or hand sanitizing, adherence to maximum space occupancy and adequate ventilation, accepting clients/visitors with proof of vaccination, restricting eating together in pantries or encouraging taking meals in their workstations, screening for symptoms at entry points)
- 4. Review existing protocols and ensure alignment with the DOH's Workplace Handbook on COVID-19 Management and Prevention [bit.ly/COVID19 WorkplaceHandbook]
- 5. Undertake active surveillance that includes among others, testing with RT-PCR or antigen test of employees that are high risk given the nature of their work, such as workers who cannot dutifully meet minimum public health standards (MPHS), or in areas with frequent clusters of symptoms, absences, or positive cases, subject to established and evidence-based protocols and guidelines on testing.

#### For Local Chief Executives and Local Health Authorities

- 1. Aggressively communicate risk of Omicron variant using attached messaging guide [See Annex A] and other materials [Link to materials: bit.ly/BIDASolusyonPlus COVID19Prevention]
- 2. Re-orient community leaders and health workers (tanods, BHERTS, BHWs) on basics of COVID-19 response to enable them to answer queries of and provide support to citizens more responsively [Link to materials: <a href="mailto:bit.ly/BIDASolusyonPlus\_COVID19Prevention">bit.ly/BIDASolusyonPlus\_COVID19Prevention</a>]
- 3. Utilize available technologies (Stay Safe, Tanod Kontra COVID-19 Response System, or any national and certified contract tracing application integrated with Stay Safe) for both active and passive contact tracing to augment manpower and resource limitations. Training modules are available through the DOH Academy and the Philippine Disaster Resilience Foundation websites [bit.ly/TanodKontraCOVID\_LGUTrainingModule].
- 4. Ensure implementation of MPHS and PDITR+ strategies. Closely monitor adherence to home quarantine and isolation protocols (e.g. conduct daily checks in-person of via mobile or telephone)
- 5. Operationalize (and prepare to scale up) telemedicine services and widely disseminate contact details (e.g. hotlines, chat groups, messenger accounts, DOH's KIRA chatbot) to the community
- Conduct house-to-house COVID-19 vaccination of priority group A2 and A3 with support of civil society, private sector, and development agency partners for community level interventions [Link to NVOC Advisory No 100: <u>bit.ly/VaxDemandGenComms\_CommunityPartners</u>]

#### For Public and Private Hospitals

- 1. Ensure 100% primary series and booster vaccination among health workers, especially those belonging to A2 and A3 groups.
- 2. Ensure sufficient stockpile of PPEs to ensure that all health workers are able to wear well-fitted face masks and appropriate Personal Protective Equipment (PPE)
- 3. Coordinate with the One Hospital Command Center for referral of patients.
- 4. Coordinate with Centers for Health Development for augmentation of health system capacity (e.g. beds, mechanical ventilators, oxygen, medicines, and other medical devices), especially when utilization rates are trending towards high risk
- 5. Make full use of the COVID19 Home Isolation Benefit Package (CHIBP) as an alternative option for isolation of confirmed mild and asymptomatic patients who meet the social and clinical criteria for home isolation. [Link to guidelines: <a href="https://www.philhealth.gov.ph/circulars/2021/circ2021-0014.pdf">https://www.philhealth.gov.ph/circulars/2021/circ2021-0014.pdf</a>]
- 6. Avail of Philhealth's Debit Credit Payment Method Phase 3. [Link to guidelines: <a href="https://www.philhealth.gov.ph/circulars/2021/circ2021-0023.pdf">https://www.philhealth.gov.ph/circulars/2021/circ2021-0023.pdf</a>]

#### For Primary Care Facilities

1. Continue provision of non-COVID-19 primary care services for a continuous and coordinated care to the communities with observance of the MPHS

#### For COVID-19 Testing Laboratories

- 1. Inform the COVID-19 Surveillance and Quick Action Unit of any changes in operating schedule from 28 December 2021 to 30 January 2022
- 2. Submit a linelist of all samples eligible for whole genome sequencing to their respective RESUs for evaluation and submit samples immediately upon approval. The UP Philippine Genome Center shall be open on December 30-31, 2021 with a 12:00NN cutoff.

#### For DOH Centers for Health Development

1. Ensure adequate preparation and provide needed technical assistance

Dissemination of the information to all concerned is requested.

For strict compliance.

RANCISCO T. DUDUÉ III, MD, MSc

Secretary of Health

### Annex A. Messaging Guide For National & Local Government Spokespersons On Possible Omicron Community Transmission

### Protection against COVID-19 and its evolving variants must include vaccination, testing and all safety protocols

Message 1: Strengthening health response and capacity needed to prepare for possible Omicron community transmission

Message 2: Vaccination including boosters is essential for added protection against Omicron and new covid variants

Message 3: Continued diligence in mask wearing, hand washing, distancing & ventilation remain critical

- Many countries with high vaccination coverage are experiencing exponential increase in cases due to the omicron variant. To date, the PHL has detected 4 cases, all of whom have been properly tested and isolated. Still, we want to manage if not avert a possible community transmission.
- First half of the preparation for a
  possible community transmission
  includes ensuring that telemedicine
  services are available to manage
  mild cases, enough hospital and
  ICU facilities and supply of
  medicines and oxygen tanks for
  severe and critical cases. The
  national and local government is
  working round-the-clock on these.
- Second half of the preparation for a possible community transmission is making sure fewer people will require care in hospitals and ICU. Everyone is enjoined to make this happen by getting themselves vaccinated with primary series and booster, diligently practicing mask-hugas-iwas-airflow, and early isolation and testing if with exposure or symptoms.

- Omicron may be mild for vaccinated, but as with any other COVID-19 variant, could still be severe for unvaccinated senior citizen and immunocompromised. Hence, we should ensure 100% vaccination among A2 and A3 as they have the highest likelihood of needing hospital and ICU facilities.
- Multiple studies have shown that there is additional protection against Omicron with provision of one booster dose. Starting December 22, 2021, one dose\* of booster for all fully vaccinated adults >18 years old may already be given as early as 3 months after the second dose of a two-dose series (AZ, Moderna, Pfizer, Sinovac) and 2 months after single dose Janssen. Filipinos may choose to be boosted with the same vaccine or different vaccine brand based on guidelines provided by the DOH, and subject to availability of these brands in their vaccination center.
- While COVID-19 vaccines are effective in protecting us from experiencing severe and critical COVID-19, it does not stop transmission of virus. This means that while we may be vaccinated, we may still have the virus but are asymptomatic. We can thus unknowingly pass on the virus to people around us if we do not wear our masks, sanitize our hands, practice physical distancing, and stay/meet in well-ventilated location.
- Similarly, despite being vaccinated, if we are 'experiencing any symptoms, we should isolate for 10 days and get tested to avoid infecting others.
- Sustainably cutting transmission will be important for schools and establishments to continue opening up and help us live with the virus.



# Republic of the Philippines Department of Health OFFICE OF THE SECRETARY

20 August 2021

DEPARTMENT CIRCULAR No. 2021-<u>035</u>0

**FOR** 

ALL UNDERSECRETARIES; ASSISTANT SECRETARIES; DIRECTORS OF BUREAUS, CENTERS FOR HEALTH DEVELOPMENT AND SERVICES; 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

OTHERS CONCERNED

SUBJECT:

Reiteration of Guidance on the Use of COVID-19 Rapid Antigen

**Test Kits** 

The Department of Health reiterates the acceptable use of COVID-19 Rapid Antigen Test Kits based on the World Health Organization (WHO) and Health Technology Assessment Council (HTAC) recommendations.

This is to provide guidance to all partners and stakeholders to take necessary steps in addressing the ongoing global concern on the spread of Coronavirus Disease (COVID-19) and to provide information on the proper protocol for the use of COVID-19 Rapid Antigen Test Kits.

Only COVID-19 antigen test kits that have fulfilled all of the following criteria may be procured and/or used:

- 1. Registered by the Philippine Food and Drug Administration (FDA); AND
- 2. Validated by the Research Institute for Tropical Medicine (RITM), OR WHO-Foundation for Innovative New Diagnostics (FIND), OR DOH-designated institutions, OR those included in the World Health Organization Emergency Use Listing(WHO-EUL)
  - (https://ritm.gov.ph/covid-19-kit-evaluation/completed-evaluations/sars-cov-2-rapid-a ntigen-ag-test/); AND
- 3. Satisfied the minimum specification of 80% sensitivity and 97% specificity set by the Health Technology Assessment Council (HTAC)

As provided for in Section II. L.2 of Department Memorandum No. 2020-0512, otherwise known as Revised Omnibus Interim Guidelines on Prevention, Detection, Isolation, Treatment and Reintegration Strategies for COVID-19, the use of the rapid antigen test as a

substitute for rRT-PCR shall be allowed for diagnostic testing of suspect, including symptomatic and asymptomatic close contacts who fit the suspect case definition, and probable cases (a) in the community or hospital setting when rRT-PCR capacity is insufficient, (b) in the hospital setting where the turnaround time is critical to guide patient cohort management, or (c) in the community during outbreaks for quicker case finding, provided that in any setting only FDA-certified antigen tests with sensitivity and specificity in conformity with HTAC specifications are used.

The following policies are also hereby reiterated for further reference:

- Department Circular 2020-0397 Reiteration of the Supplemental Guidance on the Use of Rapid Antigen Test Kits
- Department Memorandum 2020-0512 Revised Omnibus Interim Guidelines on Prevention, Detection, Isolation, Treatment, and Reintegration Strategies for COVID-19
- Department Memorandum 2021-0169 Interim Guidelines on Rapid Antigen Test Reporting for the NCR Plus Bubble
- Department Memorandum 2021-0252 HTAC Recommendations on RT-PCR and Rapid Antigen Testing for COVID-19
- Department Memorandum 2021-0323 Price Cap for COVID-19 Rapid Antigen Testing

All concerned agencies are instructed to ensure the immediate implementation of this Advisory. For any issues and concerns related to this Advisory, you may contact the Disease Prevention and Control Bureau through <a href="mailto:dpcbcovid@doh.gov.ph">dpcbcovid@doh.gov.ph</a>.

Dissemination to all concerned stakeholders is requested.

By authority of the Secretary of Health

MARIA ROSARIO SINGH-VERGEIRE, MD, MPH, CESO II

OIC-Undersecretary of Health Public Health Services Team