

**EXECUTIVE ORDER NO. 2022-007**

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## PROVIDING GUIDELINES ON THE IMPLEMENTATION OF COVID-19 ALERT LEVEL 2 IN NAGA CITY

**WHEREAS**, Naga City is among the local government units de-escalated by the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF-EID) to Alert Level 2 due to the continued improvement in the city's COVID19 numbers;

**WHEREAS**, in response to the aforesaid de-escalation, new policies must be implemented across the Naga City, with due accord to the guidelines set by IATF-EID;

**NOW THEREFORE, I, NELSON S. LEGACION**, Mayor of Naga City, by virtue of the powers vested in me by law, do hereby order the following:

## RULE I

### ENTRY TO ESTABLISHMENTS

Section 1. **Vaccinated Individuals.** Vaccinated individuals, regardless of age, shall be allowed entry to any commercial, private, and public establishments as well as places of worship upon presentation of the following in the main entrance of the building or facility:

- a. Vaccination Card
- b. E-Salvar QR ID or submission of the duly accomplished health declaration and contact tracing form

Section 2. **Unvaccinated Individuals.** In the case of unvaccinated individuals, they shall be allowed entry to any commercial, private, and public establishments as well as places of worship upon presentation of the following in the main entrance of the building or facility:

- a. negative antigen or RT-PCR test which shall be valid within 48 hours from the date and time of the test.
- b. E-Salvar QR ID or submission of the duly accomplished health declaration and contact tracing form

Section 3. **Exemption.** The following persons are not required to present proofs of vaccination and/or negative test results in entering establishments:

- a. persons involved in emergencies and those accessing medical care





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- b. unvaccinated children below 5 years old who are checked-in together with their fully vaccinated parents or guardians in DOT-accredited accommodation establishments.

**RULE II**  
**TRAVEL TO NAGA CITY FROM OTHER REGIONS**

Section 1. **Entry of Vaccinated Individuals.** Regardless of the place of origin in the Philippines, fully vaccinated and asymptomatic travelers shall be granted entry to Naga City without any quarantine and/or COVID19 testing requirement. However, travelers must present their respective vaccination and identification cards to the Barangay Health Emergency Response Task Force of the Barangay where they will be staying for information and monitoring.

Section 2. **Entry of Partially Vaccinated or Unvaccinated Individuals.** Partially vaccinated or unvaccinated Individuals as well as symptomatic travelers, regardless of vaccination status, are required to present negative antigen or RT-PCR test result taken within 48 hours before departure from place of origin, and valid identification card, to the Barangay Health Emergency Response Task Force of the Barangay where they will be staying for information and monitoring.

Section 3. **Exemption.** Persons involved in emergencies and those accessing medical care are not required to submit any proof of vaccination or negative test result to be granted entry to the city.

**RULE III**  
**PROHIBITED ACTIVITIES**

Section 1. **Prohibited Activities and Establishments.** Casinos, horse racing, cockfighting and operation of cockpits, lottery and betting shops, and other gaming establishments shall not be allowed to operate or be undertaken in areas classified under Alert Level 2, except as may be authorized by the IATF or the Office of the President of the Philippines.

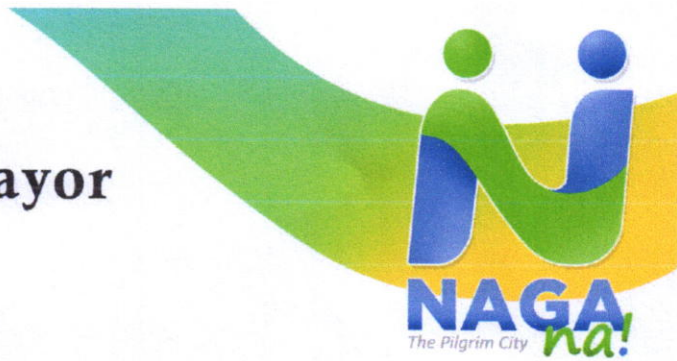
**RULE IV**  
**LIMITATION ON OPERATION OF CERTAIN ESTABLISHMENTS**

Section 1. **Venue Capacity.** Except for those enumerated under Rule III hereof, indoor establishments shall be allowed to operate, or be undertaken at a maximum of 50% indoor venue capacity for vaccinated individuals and 70% outdoor venue capacity.





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**Section 2. Vaccination Requirement for Workers.** All on-site workers/employees of establishments, or organizers of activities, must be fully vaccinated against COVID-19 and minimum public health standard must be strictly observed.

**Section 3. Allowed Establishments or Activities.** Subject to the limitation on venue capacity and the vaccination requirement for onsite workers and organizers, the following establishments, or activities, shall be allowed to operate, or be undertaken under Alert Level 2:

1. Venues for meetings, incentives, conferences, and exhibitions (MICE);
2. Permitted venues for social events, such as parties, wedding receptions, engagement parties, wedding anniversaries, debut and birthday parties, family reunions, and bridal or baby showers;
3. Visitor or tourist attractions such as libraries, archives, museums, galleries, exhibits, parks, plazas, public gardens, scenic viewpoints or overlooks, and the like;
4. Amusement parks or theme parks;
5. Recreational venues such as internet cafes, billiard halls, amusement arcades, bowling alleys, skating rinks, archery halls, swimming pools, and similar venues;
6. Cinemas and movie houses;
7. Limited face-to-face or in-person classes for basic education subject to prior approval of the Office of the President;
8. Limited face-to-face or in-person classes for higher education and for technical-vocational education and training;
9. In-person religious gatherings; gatherings for necrological services, wakes, inurnment, and funerals for those who died of causes other than COVID-19 and for the cremains of the COVID-19 deceased;
10. Licensure or entrance/qualifying examinations administered by their respective government agency, and specialty examinations authorized by the IATF subject to the health and safety guidelines as approved by the IATF;





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11. Dine-in services of food preparation establishments such as kiosks, commissaries, restaurants, and eateries, subject to DTI sector-specific protocols;
12. Personal care establishments such as barbershops, hair spas, hair salons, and nail spas, and those offering aesthetic/cosmetic services or procedures, make-up services, salons, spas, reflexology, and other similar procedures including home service options, subject to the sector-specific protocols of the DTI;
13. Fitness studios, gyms, and venues for individual non-contact exercise and sports; Provided that patrons/clients and workers/employees wear face masks at all times and subject to DTI sector-specific protocols.
14. Film, music, and television production subject to the joint guidelines as may be issued by the DTI, DOLE, and the DOH;
15. Contact sports approved by the LGU where such games shall be held
16. Funfairs/peryas or kid amusement industries such as playgrounds, playroom, and kiddie rides;
17. Venues with live voice or wind-instrument performers and audiences such as in karaoke bars, clubs, concert halls, and theaters; and
18. Gatherings in residences with individuals not belonging to the same household.

**RULE V**  
**PUBLIC TRANSPORTATION**

Section 1. **Passenger Capacity for Jeepneys and Buses.** Jeepneys and buses shall only operate at 70% passenger capacity, pursuant to LTRFB Circular No. 2021-064.

Section 2. **Passenger Capacity for PUVs with LGU Franchises.** The following public utility vehicles shall limit their passenger capacity to what has been authorized under City Ordinance No. 2021-089:

a. Trimobiles with regular and special franchises	Three (3) passengers
b. Taxicles and etrikes	Four (4) passengers
c. Padyak	Two (2) passengers





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Section 3. **Vaccination Requirement.** Drivers of all public utility vehicles must be fully vaccinated.

**RULE VI**  
**GOVERNMENT OPERATIONS**

Section 1. **Government Operations.** Agencies and instrumentalities of the government shall remain to be fully operational and shall adhere to at least an 80% on-site workforce. Those assigned to work off-site shall be subject to alternative work arrangements as approved by the head of agency in accordance with the relevant rules and regulations issued by the Civil Service Commission (CSC). Heads of agencies providing health and emergency frontline services, laboratory and testing services, border control, or other critical services shall operate at a workforce beyond the minimum when necessary to deliver their mandates.

**RULE VII**  
**PROTOCOL ON ISOLATION OF CONFIRMED PATIENTS**  
**AND TESTING AND QUARANTINE OF CLOSE CONTACTS**

Section 1. **Basis of Implementation.** Department Memorandum No. 2022-013 or the Updated Guidelines on Quarantine, Isolation, and Testing for COVID-19 Response and Case Management for the Omicron Variant” issued by Department of Health on January 14, 2022 as summarized in a matrix annexed as “Attachment A” to this Executive Order shall be implemented by all COVID19 units and task forces.

Section 2. **Home Isolation Requirement.** Confirmed COVID19 patients shall be allowed to isolate at home upon compliance of the following:

1. Pass both the clinical and social criteria under the Assessment Checklist of Clinical and Social Criteria for COVID-19 Home Isolation (*ANNEX 2*).
2. Submission of duly accomplished PhilHealth Claim Signature Form (CSF) signed authorization and consent to Participate in Teleconsultation and signed acknowledgement of COVID-19 Home Isolation Kit.

Those failing in the prescribed clinical and social criteria shall be isolated in the City’s Isolation Facility for a minimum of 14 days or upon the advice of the attending physician.





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**RULE VIII**  
**IMPLEMENTATION AND REPORTORIAL REQUIREMENT**

1. The members of the Health Emergency Response Task Force shall ensure faithful implementation of these rules and are directed to submit its report to the Secretary to the Mayor for collation on days indicated below:

<b>Agency/Office</b>	<b>Submission Schedule</b>	<b>Report Form</b>
1. Enforcement Cluster (NCPO and PSO)	Monday, Wednesday, and Friday	Report on Apprehensions
2. Quarantine Cluster/One Hospital Command	Daily	Critical Care and Isolation Facility Utilization Report
3. Safety Seal Team	Monday, Wednesday, and Friday	Compliance and Monitoring Report
4. CESU	Daily	COVID-19 Bulletin
5. Contact Tracing and Monitoring Center	Daily	Home Isolation Monitoring report
6. Vaccination Operations Center	Monday, Wednesday, and Friday	Vaccination Coverage, Vaccine Supply and Utilization Report
7. Analytics Team	Every Monday	Analytics and forecasting
8. Decontamination and Management of the Dead	Every Friday	Decontamination and Management of the Dead





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**RULE IX**  
**OTHER PROVISIONS**

Section 1. **Sanctions.** Failure of heads of establishments and places of worship to impose this rule and other succeeding applicable rules shall be prosecuted for non-cooperation of the person or entities punishable under Section 9 par. (d) or (e) of Republic Act No. 11332, otherwise known as the Mandatory Reporting of Notifiable Diseases and Health Events of Public Health Concern Act, and its Implementing Rules and Regulations.

Section 2. **Separability Clause.** Should any provision of this Order or any part thereof be declared invalid, the other provisions, insofar as they are separable from the invalid ones, shall remain in full force and effect.

Section 3. **Repealing Clause.** All executive issuances or parts thereof inconsistent with this Order are hereby repealed or modified accordingly.

Section 4. **Effectivity.** This Executive Order shall take effect on February 16, 2022.

Issued this 8<sup>th</sup> day of January 2022 in the City of Naga, Philippines.

**NELSON A. LEGACION**  
City Mayor

Attested by:

**FRANCISCO M. MENDOZA**  
Acting City Administrator

**Attachment A**

**Summary of Updated Quarantine and Isolation Protocols**





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		General Public	Healthcare workers and authorized sectors <sup>1</sup>
<b>QUARANTINE</b>			
Asymptomatic close contact	Fully vaccinated	At least 5 days from exposure <sup>2</sup>	At least 5 days from exposure IPCC may shorten up to
	Partially Vaccinated or Unvaccinated	At least 14 days from exposure	At least 14 days from exposure
<b>ISOLATION</b>			
Asymptomatic case	Fully vaccinated	At least 7 days <sup>3</sup> from positive test (Sample collection date)	At least 7 days <sup>3</sup> from positive test (sample collection date) IPCC may shorten up to 5 days if with booster
	Partially Vaccinated or Unvaccinated	At least 10 days <sup>3</sup> from positive test (sample collection date)	At least 10 days <sup>3</sup> from positive test (sample collection date)
	Fully vaccinated	At least 7 days <sup>3</sup> from onset of symptoms	At least 7 days <sup>3</sup> from onset of symptoms IPCC

<sup>1</sup> Hospital IPCC, PHO coordinated with provincial HIPCC, and other sectors authorized by the IATF with strict industry standards on IPC shall be authorized to implement further shortening of quarantine and isolation protocols for their fully vaccinated workers with boosters who are close contacts, suspect, probable, and confirmed cases whether asymptomatic, mild, or moderate, based on the institution's individualized risk and needs assessment.

<sup>2</sup> All asymptomatic close contacts should continue symptom monitoring for 14 days, strictly observe MPHS which includes wearing well-fitted masks, physical distancing, among others

<sup>3</sup> Isolation can be discontinued upon completion of the required days, provided that, they shall not develop fever for at least 24 hours without the use of any antipyretic medications and shall have improvement of respiratory symptoms. Except for immunocompromised individuals, repeat testing nor medical certification is not required for safe reintegration into the community. Time based isolation is sufficient provided the affected individual remains asymptomatic.



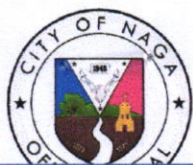


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Symptomatic, suspect, probable or confirmed case with MILD symptoms	Partially Vaccinated or Unvaccinated	At least 10 days <sup>3</sup> from onset of symptoms	At least 10 days <sup>3</sup> from onset of symptoms
Symptomatic, suspect, probable or confirmed case with MODERATE	Regardless of vaccination status	At least 10 days <sup>3</sup> from onset of	At least 10 days <sup>3</sup> from onset of symptoms
Symptomatic, suspect, probable or confirmed case with SEVERE and	Regardless of vaccination status	At least 21 days <sup>3</sup> from onset of	At least 21 days <sup>3</sup> from onset of symptoms
Immunocompromised <i>*Autoimmune disease, HIV, Cancer/ Malignancy, Transplant Patients, Undergoing steroid treatment, Patients with poor prognosis/</i>	Regardless of vaccination status	At least 21 days <sup>1</sup> from onset of symptoms with negative repeat RT-PCR	At least 21 days <sup>1</sup> from onset of symptoms with negative repeat RT-PCR





Name of the  
Establishment

Ipasa kinabukasan sa Public Safety Office sa City Hall ng Naga

## HEALTH DECLARATION FORM

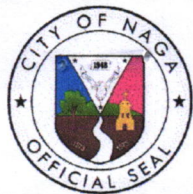
Full Name <b>(Buong Pangalan)</b> :	Date <b>(Petsa)</b> (MM/DD/YY) :
	Time <b>(Oras)</b> :
Complete Current Address <b>(Kasalukuyang tirahan)</b> :	
Mobile/Phone Number <b>(Numero ng telepono)</b> :	
Email Address :	

Put a check mark on the appropriate column of your response. **(Lagyan ng tsek sa angkop na sagot.)**

	Yes <b>(Oo)</b>	No <b>(Hindi)</b>
1. Are you experiencing or did you have any of the following in the last 14 days? <b>(Ikaw ba ay may nararanasan o nakaranas ng mga sumusunod na sintomas sa nakaraang 14 na araw?)</b>	a. Fever <b>(Lagnat)</b>	
	b. Cough and/or Colds <b>(Ubo at/o Sipon)</b>	
	c. Body pains <b>(Pananakit ng katawan)</b>	
	d. Sore Throat <b>(Pananakit o pamamaga ng lalamunan)</b>	
	e. Fatigue/Tiredness <b>(Pagkapagod)</b>	
	f. Headache <b>(Pananakit ng ulo)</b>	
	g. Diarrhea <b>(Pagtatae)</b>	
	h. Loss of taste or smell <b>(Nawalan ng panlasa o pang-amoy)</b>	
	i. Difficulty of breathing <b>(Pagkahapo o hirap sa pag hinga)</b>	
2. Have you had face-to-face contact with a probable or confirmed COVID-19 case within 1 meter and for more than 15 minutes for the past 14 days? <b>(May nakasalamuha ka ba na maaaring o kumpirmadong pasyente na may COVID-19 mula sa isang metrong distansya or mas malapit pa at tumagal ng mahigit 15 minuto sa nakalipas na 14 araw?)</b>		
3. Have you provided direct care for a patient with probable or confirmed COVID-19 case without using proper "Personal Protective Equipment (PPE)" for the past 14 days? <b>(Nag-alaga ka ba ng maaring o kumpirmadong pasyente na may COVID-19 ng hindi nakasuot ng tamang PPE (Personal Protective Equipment) sa nakalipas na 14 araw?)</b>		
4. Have you traveled outside the Philippines in the last 14 days? <b>(Ikaw ba ay nagbiyahe sa labas ng Pilipinas sa nakalipas na 14 na araw?)</b>		
5. Have you traveled outside the current city/municipality where you reside? <b>(Ikaw ba ay nagbiyahe sa labas ng iyong lungsod/munisipyo?)</b> If yes, specify which city/municipality you went to <b>(Sabihin kung saan)</b> : _____		

I hereby certify that the information given is true, correct and complete. I understand that failure to answer any question or any falsified response may have serious consequences. I understand that my personal information is protected by RA 10173 or the Data Privacy Act of 2012 and that this form will be





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**ASSESSMENT CHECKLIST OF CLINICAL AND SOCIAL CRITERIA FOR COVID-19 HOME ISOLATION BENEFIT PACKAGE**

Name of Patient: \_\_\_\_\_

Age: \_\_\_\_\_

Swab Test Result: \_\_\_\_\_

Date Done: \_\_\_\_\_

Testing Laboratory: \_\_\_\_\_

Panuto: Lagyan ng tsek mark ☒ ang kahon sa tabi ng iyong obserbasyon at rekomendasyon ayon sa mga kasagutan ng pasyenteng ineevaluate. Siguraduhing lahat ng kahon ay napunan ng tama at ang mga rekomendasyon ay ayon sa mga panuntunan na nakasulat sa baba.

**A. Clinical Evaluation**

Part 1. Signs and symptoms

- |                 |                              |                             |                       |                              |                             |
|-----------------|------------------------------|-----------------------------|-----------------------|------------------------------|-----------------------------|
| • Fever         | <input type="checkbox"/> Yes | <input type="checkbox"/> No | • Shortness of breath | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Cough         | <input type="checkbox"/> Yes | <input type="checkbox"/> No | • Chest pain          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Colds         | <input type="checkbox"/> Yes | <input type="checkbox"/> No | • Diarrhea            | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Muscle pain   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | • Loss of taste/smell | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Body weakness | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                       |                              |                             |

**Tandaan:** Kapag ang patient ay may shortness of breath, chest pain o iba pang sintomas ng malubhang COVID-19, wag nang ipagpatuloy ang checklist at irekomendang magpakonsulta sa doktor

Part 2. History of illness/Health risk factors

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| • Immune suppressed (katulad ng HIV, cancer and Tuberculosis)  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • May mga risk factors sa malubhang COVID-19 (obesity, >60 years of age, pregnancy, smoker)                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • May mga comorbidities (katulad ng hypertension, heart disease, diabetes and chronic kidney/lung disease) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Nangangailangan ng supportive care (katulad ng oxygen, antibiotics, intravenous hydration)               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Tandaan:** Kapag **Yes** sa dalawa o higit pa, ang patient ay hindi maaaring i-home isolate. Kapag **Yes** sa isa, ikonsulta sa doctor kung maaaring mag home isolation. Kapag **No** sa lahat, ang patient ay clinically eligible for home isolation at magpatuloy sa Social Criteria Evaluation.

**Clinically eligible for Home Isolation** ☐ Yes ☐ No

**B. Social criteria Evaluation**

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| 1. May sariling kwarto   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. May sariling banyo/toilet   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. May sapat na airflow/ventilation  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. May tagapangalaga o kakayanan ma-meet ang pang-araw-araw na pangangailangan             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. May sariling landline, cellphone, o laptop na maaaring magamit para sa teleconsultation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Tandaan:** Kapag ang patient ay may kahit isang sagot na "no" sa social criteria evaluation, ang patient ay **hindi** maaaring i-home isolate.

**Socially eligible for Home Isolation** ☐ Yes ☐ No

**Tandaan:**

- (1) Kapag na-meet ng patient **parehas** and social at clinical criteria, sila ay **maaring i-home isolate**.
- (2) Kapag naman na-meet nila ang **clinical criteria lamang**, sila ay dapat **i-isolate sa isang TTMF/CIU**.