

MUNICIPALITY OF ASINGAN OFFICE OF THE MUNICIPAL MAYOR



2/F Municipal Hall, Poblacion, Asingan, Pangasinan 2439 | Tel. (075) 632-8612 Website: www.asingan.gov.ph Email: asenso.asingan2022@yahoo.com

EXECUTIVE ORDER NO. 045, S. 2023

INSTITUTIONALIZING THE DISASTER RISK REDUCTION AND MANAGEMENT IN HEALTH (DRRM-H) SYSTEM, CREATING THE DRRM-H COMMITTEE, AND HEALTH EMERGENCY RESONSE TEAMS OF THE MUNICIPALITY OF ASINGAN, PANGASINAN, AND FOR OTHER PURPOSES

WHEREAS, Section 15 of Article II of the 1987 Constitution provides that the State shall protect and promote the right to health of the people and instill health consciousness among them;

WHEREAS, Section 16 of the Local Government Code of 1991 provides that every local government unit shall exercise the powers expressly granted, those necessarily implied therefrom, as well as powers necessary, appropriate, or incidental for its efficient and effective governance, and those which are essential to the promotion of the general welfare;

WHEREAS, the Department of Health issued Administrative Order No. 2020-0036, dated August 20, 2020, providing for the guidelines on the nationalization of Disaster Risk Reduction and Management in Health in province-wide and city-wide health systems, to support the National Objectives for Health (2017-2022) that espouses the development of resilient health systems in managing health risk brought about by natural, biological, technological, and societal hazards;

WHEREAS, emergencies, disasters, and other crises may cause ill-health directly or through the disruption of health systems, facilities, and services, leaving many without proper access to health care in times of emergency, this became evident when local and community transmission of Covid-19 occurred in the community;

WHEREAS, while health governance through the DOH is critical in driving the health resilience agenda, harnessing the strengths and potential of the LGUs to build their capacities to be resilient is an important part of the equation;

WHEREAS, there is a necessity to institutionalize the DRRM in Health in order to build a resilient health system based on primary health care that can reduce underlying vulnerability, protect health facilities and services, and scale up the response to meet the wide-ranging health needs in disasters;

NOW, THEREFORE, I, Engr. CARLOS F. LOPEZ, JR., Local Chief Executive of the Municipality of Asingan, Pangasinan, premises considered, by virtue of the powers vested in me by law, do hereby order and decree the following

SECTION 1. ESTABLISHMENT OF DRRM-H UNIT. Hereby strengthening the Disaster Risk Reduction and Management for Health (DRRM-H) Unit of the Municipality of Asingan, Pangasinan to effectively facilitate the institutionalization of DRRM-H.

SECTION 2. COMPOSITION. The DRRM-H Unit shall be composed of the following:

Responsible Official:

DRRM-H Manager:

Engr. CARLOS F. LOPEZ, JR. - Municipal Mayor Dr. RONNIE S. TOMAS - Municipal Health Officer

Assistant DRRM-H Manager: MICHELLE D. DESAMITO – Sanitary Inspector I

Members:

Medical and Public

Health Services:

MICHELLE D. DESAMITO - Sanitary Inspector I VICTORIA G. BALANGA - Rural Health Midwife II

MERCEDITA R. LOPEZ - Rural Health Midwife II

NITA L. ROMERO - Public Health Nurse III Nutrition and Emergencies:

LOURDES R. PADILLA - Rural Health Midwife III

CATHERINE M. DE GUZMAN - Rural Health Midwife II

Water, Sanitation and Hygiene: SHARON M. BUGARIN - Rural Sanitary Inspector I

JULIE A. PERALTA - Rural Health Midwife III CLARA G. LEAÑO - Rural Health Midwife II



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Mental Health and Psychosocial Support: MARILOU O. TORIO – Public Health Nurse II
MARY KRISSEL G. GELIDO – Rural Health Midwife II
CLARITA R. OGANIZA – Rural Health Midwife II

SECTION 3. DUTIES AND FUNCTION. The DRRM-H Unit shall have the following roles:

- A. Medical and Public Health Services
 - Ensure the continuity of health care services (acute emergency case, primary care and preventive care)
 - 1. Monitor the environmental infrastructure (water, sanitation and vector control)
 - Assess the needs of special populations (e.g., elderly, disability, children and pregnant
 - 3. Initiate injury and disease surveillance programs
 - b) Provide packages of services including commodities of:
 - Prevention and Control Communicable Disease
 - 2. Maternal and Child Health
 - 3. Minimum Initial Service Package and Sexual and Reproductive Health Interventions (MISP-SRH)
 - 4. Management of Injuries
 - 5. Control of Non-Communicable Diseases
- B. Nutrition and Emergencies
 - a) Protect the nutritional status of vulnerable groups affected by emergencies through the following responses:
 - 1. General food distribution
 - 2. Livelihood support Blanket supplementary feeding
 - 3. Infant and young child feeding support
 - 4. Micronutrient interventions
 - b) Ensure provision of packages of services in nutrition including commodities:
 - 1. Infant and Young Child Feeding
 - 2. Management of Acute Malnutrition
 - 3. Micronutrient Supplementation
- C. Water, Sanitation and Hygiene
 - a) Ensure the reduction of the transmission of fecal-oral disease and exposure to diseasebearing vectors through the promotion of:
 - 1. Good hygiene practices
 - 2. Provision of safe drinking water
 - 3. Reduction of environmental health risks
 - 4. Conditions that allow people to live with good health, dignity, comfort and security
 - b) Provide packages of services of water, sanitation and hygiene including commodities:
 - 1. Water supply
 - 2. Excreta Disposal
 - 3. Vector Control
 - 4. Solid Waste Management
 - 5. Drainage
- D. Mental Health and Psychosocial Support
 - a) Help people recover after crisis by strengthening and building the resilience of individuals and communities through the provision of the Mental Health and Psychosocial Support intervention pyramid:
 - 1. Basic services and security to meet the physical needs of affected community
 - 2. Community and family support
 - 3. Focused non-specialized support
 - 4. Specialized services
 - b) Provide packages of services of Mental Health and Psychosocial Support including commodities:
 - 1. Coordinated Mental Health Assessment
 - 2. Psychosocial interventions for affected communities and individuals
 - 3. Support to referral to higher level of care



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SECTION 4. MEETING AND QUORUM. The TEAM shall meet regularly or as often as maybe necessary. Regular meetings shall be determined by the Responsible Official, DRRM-H Manager and Assistant DRRM-H Manager.

SECTION 5. SUPPLEMENTARY CLAUSE. On matters not provided in this Order, any applicable laws and their corresponding implementing rules and regulations, executive orders, and relevant issuances therefore shall be applied in a supplemental manner.

SECTION 6. REPEALING CLAUSE. All orders, rules, regulations, and other related issuances inconsistent with or contrary to this Order are hereby repealed, amended, or modified accordingly. All other provisions of existing issuances which are not affected by this Order shall remain valid and in effect.

SECTION 7. SEPARABILITY CLAUSE. In the event any provision in this Order shall be declared invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not be affected or impaired thereby.

SECTION 8. EFFECTIVITY. This Order shall take effect immediately.

Let copies hereof be furnished to all concerned for information, reference, and guidance.

DONE this 27th day of December 2023 in the Municipality of Asingan, Pangasinan.

Engr. CARLOS FILOPEZ, JR. Municipal Mayor