



Republic of the Philippines  
**DEPARTMENT OF HEALTH**  
**DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT**

JAN 13 2021

**JOINT ADMINISTRATIVE ORDER**

No. 2020- 0001-A

**SUBJECT: Amendment to Joint Administrative Order No. 2020-0001 entitled "Guidelines on Local Isolation and General Treatment Areas for COVID-19 cases (LIGTAS COVID-19) and the Community-based Management of Mild COVID-19 Cases"**

**I. RATIONALE**

Pursuant of the need to provide continued guidance to the Local Government Units in the ongoing COVID-19 pandemic response, the necessity of enhancing our Isolation strategy through the maximal use of Temporary Treatment and Monitoring Facilities is warranted. It has been demonstrated that efficient and effective isolation of COVID-19 patients in facility-based isolation has significantly controlled the rise of cases in areas where it was implemented.

Cognizant of the recommendations made during the 74<sup>th</sup> Meeting of the Inter-Agency Task Force (IATF) for the Management of Emerging Infectious Diseases last September 24, 2020, the Department of Health and the Department of the Interior and Local Government are to amend Joint Administrative Order No. 2020-0001.

Furthermore, the DOH has issued Department Memorandum No. 2020-0512, the "Revised Omnibus Interim Guidelines on Prevention, Detection, Isolation, Treatment and Reintegration Strategies for COVID-19" which provides the current protocols for surveillance, screening, contact tracing, quarantine or isolation, and testing interventions.

In line with these, the DOH and DILG Joint Administrative Order No. 2020-0001, entitled "Guidelines on Local Isolation and General Treatment Areas for COVID-19 cases (LIGTAS COVID-19) and the Community-based Management of Mild COVID-19 Cases" dated April 15, 2020, is hereby amended as follows:

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**II. AMENDMENTS**

FROM	TO
<p><b>V. General Guidelines:</b></p> <p>D. DOH shall issue separate guidelines pertaining to health care provider networks (HPCNs) during the COVID-19 pandemic, which all concerned including LGUs are enjoined to follow. BHERTs shall focus on active case finding (i.e. contact tracing), in coordination with the LIGTAS COVID Center.</p>	<p><b>V. General Guidelines</b></p> <p>D. All concerned, including LGUs, are enjoined to follow DM 2020-0178 entitled, "Interim Guidelines on Health Care Provider Networks (HCPN) During the COVID-19 Pandemic" and DM 2020-0334 entitled, "Strategies in Health Facility Coordination in Line with DM 2020-0178 entitled, "Interim Guidelines on Health Care Provider Network (HCPN) During COVID-19" for proper coordination of all suspect, probable, and confirmed cases, including their close contacts. In line with DILG-DOH-DICT-NEDA JMC 2020-01 entitled, "Organization and Mobilization of Composite Teams in Local Government Units for Community Mitigation of COVID-19," the BHERTs shall be responsible for implementing preventive measures, supporting the conduct of contact tracing at the household level, monitoring close contacts under home quarantine, providing first-line response, and coordinating with the LIGTAS COVID Center.</p>
<p><b>V. General Guidelines</b></p> <p>H. "Repatriates that have already undergone the required 14-day quarantine upon their arrival to the country, shall not be subjected to quarantine again."</p>	<p><b>V. General Guidelines</b></p> <p><i>Deleted</i></p>
<p><b>VI. Specific Guidelines</b></p> <p>A. Establishing a LIGTAS COVID Center. The special care facilities and quarantine or isolation units referred to by DILG MC No. 2020-064 are hereby renamed to LIGTAS COVID Centers, and shall follow the guidelines prescribed in this Order.</p>	<p><b>VI. Specific Guidelines</b></p> <p>A. The special care facilities and quarantine or isolation units referred to by DILG MC No. 2020-064 are hereby renamed to LIGTAS COVID Centers, which is conceptually interchangeable with temporary treatment and monitoring facilities, and shall follow the guidelines prescribed in this Order. LIGTAS COVID Centers shall be used to isolate suspect,</p>

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<p>Separate LIGTAS COVID-19 Facilities shall be provided for the following:</p> <ol style="list-style-type: none"> <li>1. Contacts;</li> <li>2. Suspect and Probable COVID-19 Cases with mild symptoms; and</li> <li>3. Confirmed COVID-19 Cases with mild symptoms.</li> </ol> <p>XXX</p>	<p>probable, and confirmed cases who are asymptomatic or manifesting mild symptoms.</p> <p>Separate LIGTAS COVID-19 Facilities <b>may</b> be provided to quarantine the following:</p> <ol style="list-style-type: none"> <li>1. Contacts;</li> <li>2. Recovering Suspect, Probable, Confirmed COVID-19 Cases</li> </ol> <p>XXX</p>
<p><b>VI. Specific Guidelines</b></p> <p>C.</p> <p>XXX</p> <p>While admission to a LIGTAS COVID Center or Mega LIGTAS COVID Center is preferred especially where these facilities are available, home quarantine is allowed for suspect and probable cases of COVID-19 who are either asymptomatic or with mild symptoms only, provided that ALL the requirements in the home care checklist (Annex F) are complied with. The HCW shall assess the household's capability for home care using the checklist in Annex F. The assessment includes ocular inspection and family interview</p> <p>XXX</p>	<p><b>VI. Specific Guidelines</b></p> <p>C.</p> <p>XXX</p> <p>Admission to a LIGTAS COVID-19 Facility or Mega LIGTAS COVID-19 Facility is required for suspect, probable and confirmed cases in the Community except in the following cases:</p> <ol style="list-style-type: none"> <li>a. As confirmed by the BHERT or local health officer through ocular inspection and family interview, the patient is NOT considered vulnerable or having comorbidities (i.e. minors, senior citizens, people with underlying health conditions, pregnant women, persons with disabilities that cannot carry-out self-care, and immunocompromised patients); does NOT manifest moderate, severe, or critical symptoms; AND that his/her home meets the conditions and requirements in the home care checklist (Annex F) are complied with; OR</li> <li>b. As confirmed by the local Regional Task Force on COVID-19, the TTMF within the region is fully occupied and the local government unit does not have sufficient isolation facilities.</li> </ol> <p>DOH DM 2020-0512, entitled "Revised Omnibus Interim Guidelines on Prevention, Detection, Isolation,</p>

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	<p>Treatment, and Reintegration Strategies for COVID-19” highlights the “quarantine or isolation first” approach, establishing exposure and identification symptoms. Hence, close contacts shall be quarantined or isolated immediately and managed according to the severity of symptoms. Testing, as appropriate, shall be conducted following the guidelines in the same issuance.</p> <p>If over the course of home quarantine or isolation, the condition of the contact, suspect, probable, or confirmed case of COVID-19 worsens or if they are unable to properly comply with home quarantine or isolation protocols, the said shall be admitted to a LIGTAS COVID Center or the appropriate health facility.</p> <p>XXX</p>
<p><b>VI. Specific Guidelines</b></p> <p>C.</p> <p>XXX</p> <p>“If self isolation is not possible based on assessment (e.g. crowded living conditions especially in the presence of vulnerable persons in the household), the contact, suspected, probable, or confirmed case of COVID-19 with mild symptoms shall be admitted to a LIGTAS COVID-19 facility.”</p> <p>XXX</p>	<p><b>VI. Specific Guidelines</b></p> <p><i>Deleted</i></p>

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<p><b>VI. Specific Guidelines</b></p> <p><i>E. Case Management in the LIGTAS COVID Center.</i> All patients shall be reminded of respiratory etiquette and home care instructions (See Annex E for household level guidance). HCWs shall instruct and/or assist patients on how to monitor oneself and record in a daily monitoring sheet (see Annex H) two times a day (8 AM-4 PM) the following: body temperature; respiratory symptoms (fever, cough, colds, sore throat); and other symptoms (e.g., body malaise, fatigue, etc.), and to call the attention of a HCW if with any symptom. HCWs shall provide symptomatic treatment for mild symptoms such as antipyretics during the duty shifts. HCWs shall report to the Manager any suspect cases that become symptomatic, and shall immediately refer cases with signs of severe pneumonia and new co-morbidities to the designated hospital or facility using referral criteria in Annex A.</p>	<p><b>VI. Specific Guidelines</b></p> <p><i>E. Case Management in the LIGTAS COVID Center.</i> All patients shall be reminded of respiratory etiquette and home care instructions (see Annex E for household level guidance). HCWs shall instruct and/or assist patients on how to monitor oneself and record in a daily monitoring sheet (see Annex H) two times a day (8AM-4PM) the following: body temperature, respiratory symptoms (fever, cough, colds, sore throat); and other symptoms (e.g., body malaise, fatigue, etc.), and to call the attention of a HCW if with any symptoms. <b><u>HCWs shall provide supportive care. These include antipyretics for fever, oral fluids for hydration, isolation in temporary treatment and monitoring facilities. Routine empiric antibiotics and routine anti-influenza drugs are not recommended for mild COVID-19 disease.</u></b> HCW shall report to the Manager any suspect cases that become symptomatic, and shall immediately refer cases with signs of severe pneumonia and new co-morbidities to the designated hospital or facility using referral criteria in Annex A.</p>
<p><b>VI. Specific Guidelines</b></p> <p><i>I. Discharge Protocols.</i> Patients in the LIGTAS COVID Centers may be discharged, and persons under home quarantine may end home quarantine once asymptomatic for the number of days prescribed in the latest clinical practice guidelines. The local health officer or his/her designated physician shall issue a Certificate of Completion of Quarantine or Isolation to those who are discharged or who shall be ending home quarantine.</p>	<p><b>VI. Specific Guidelines</b></p> <p><i>I. Discharge Protocols.</i> Patients in the LIGTAS COVID-19 Facility may be discharged, and persons under home quarantine may end home quarantine following the guidelines specified in DOH DM No. 2020-0512 and any subsequent amendments thereto. Discharge criteria for suspect, probable, and confirmed COVID-19 cases shall no longer entail repeat testing. Repeat testing should not be a prerequisite for the issuance of clearance or certification to be issued by medical doctors.</p>

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	<p>The local health officer or his/her designated physician shall issue a Certificate of Completion of Quarantine or Isolation to those who are discharged or who shall be ending home quarantine.</p>
<p><b>VII. Reporting and Coordination:</b></p> <p>The LIGTAS COVID Center Manager shall draft and submit a brief daily situation report including a census of contacts, suspect, probable and confirmed cases, including daily monitoring using the COVID-19 information system prescribed by the DOH to the BHERT, which in turn shall review and endorse the same to the LCTF and MESU/CESU who shall in turn submit a consolidated report to the PESU and RESU.</p>	<p><b>VII. Reporting and Coordination</b></p> <p>The LIGTAS COVID Center Manager shall draft and submit a brief daily situation report including a census of contacts, suspect, probable, and confirmed cases, including daily monitoring, and bed occupancies using the COVID-19 information systems prescribed by the DOH through its respective encoding or submission platforms, and to the respective local public health authorities. The BHERT shall also conduct strict daily monitoring of symptoms and adherence to protocol of those under home quarantine/isolation and include the said information in the situation report. The BHERT shall endorse consolidated reports to the LCTF and MESU/CESU who shall in turn submit a consolidated report to the PESU and RESU.</p>
<p><b>ANNEX E. Item B. Family Focused Care Plan:</b></p> <p><b>Families with member/s on home quarantine or self-isolation</b></p> <p>Physical Distancing:</p> <p>If a family member develops symptoms consistent with COVID-19, all household members must observe home quarantine for 14 days</p> <ul style="list-style-type: none"> <li>• Have the family member with the suspect/probable COVID-19 infection/exposure stay in a</li> </ul>	<p><b>ANNEX E. Item B. Family Focused Care Plan:</b></p> <p><b>Families with member/s on home quarantine or self-isolation</b></p> <p>Physical Distancing:</p> <p>If a family member develops symptoms consistent with COVID-19, re-assess the household member if considered as a suspect or probable case, and the corresponding clinical severity. Re-assess household contacts, if considered as close contact of a probable or confirmed case. Manage accordingly the cases and contacts on the detection, isolation,</p>

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separate space/area in the house with the least contact exposure to others, ideally in a spare room.

- Have the patient wear a mask at all times.
- Utensils and personal things of the family member who is a suspect/probable case should be separated from the things of other family members. These can be stored in separate recycled containers or boxes.
- Do not invite or allow social visitors to enter your home.
- If a family member needs to be attended to by home care, then carer/s or healthcare provider/s should have facemask and gloves.

If a family member is a vulnerable person:

- Let the vulnerable family member/s stay with relatives if possible. If not, make sure they will not be exposed to the suspect case, always maintaining at least 2 meters of distance.
- Minimize the time the vulnerable family member/s spend in shared spaces in the house.
- Make sure that the house is well-ventilated especially shared spaces.
- Emphasize proper hand hygiene and cough etiquette.

quarantine, and treatment services to be performed, and the setting of provision of these services, based on DOH DM 2020-0512 and any subsequent amendments thereto.

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<p>If a family member is a suspect, probable or confirmed case and is breastfeeding</p> <ul style="list-style-type: none"> <li>• At present no evidence to suggest that the virus can be transmitted through breast milk and benefits of breastfeeding outweighs any potential risks of transmission of the virus. Hence, this is an individual decision and should be discussed with your healthcare provider.</li> </ul>	
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**III. REPEALING CLAUSE**

All other provisions stipulated in DOH-DILG JAO 2020-0001 dated April 15, 2020 not affected by this amendment shall remain in effect.

**IV. EFFECTIVITY**

This Order shall take effect immediately.

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

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**UNDERSECRETARY BERNARDO C. FLORECE, JR.**  
 Officer-in-Charge, DILG



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