ADMINISTRATIVE ORDER
No. 01
Series of 2022

SUBJECT: INTERIM GUIDELINES ON THE OPERATION AND MANAGEMENT OF THE SWADCAP ISOLATION FACILITY

I. RATIONALE

The Department of Social Welfare and Development (DSWD) is committed to continuously protect its personnel by ensuring their safety, health and wellbeing. It has constantly updated its safety and health measures implemented in the workplace to improve the working conditions due to the emerging threat of the COVID-19 and the new variants.

The DSWD has employed strategies to strengthen contact tracing, isolation, and quarantine through its Safety and Health Protocols. One of its priorities is the establishment of the Isolation Facility. This will cater to the emerging needs of the affected DSWD personnel in terms of resources intended for the interventions, proper care, documentation, coordination, reporting, and address the adverse outcomes of the COVID-19 in line with the principles and strategies on isolation. With the technical assistance of the Department of Health (DOH), the necessary structures and amenities to operate an Isolation Facility were installed and set up at the Social Welfare and Development Center for Asia Pacific (SWADCAP).

On November 4, 2021, the SWADCAP Isolation Facility located at Barangay Pasong Tamo, Taguig City was formally opened for operation. It is generally aimed at providing a safe space for DSWD personnel for them to recover from COVID-19 infection, help alleviate their anxiety and fears of infecting their families, and to mitigate the threat of COVID-19 within the DSWD workplace.

II. LEGAL BASIS

1. DOH Certification of SWADCAP Temporary Treatment and Monitoring Facility (TTMF) for confirmed COVID-19 cases with mild symptoms under Department Memorandum No. 2020-0123 issued on October 21, 2021.

2. Memorandum from the Secretary dated 28 October 2020 on Guidelines on the Management of SWADCAP as DSWD COVID-19 Isolation Center

3. DSWD Advisory No. 2, s. 2021 - Enhanced DSWD’s Safety and Health Protocol in light of COVID-19 Pandemic

4. RA 11469 - “Bayanihan to Heal as One Act” states that “in view of the continuing rise of confirmed cases of COVID-19, the serious threat to the health, safety, security, and lives of our compatriots, the long-term adverse effects on their means
of livelihood, and the severe disruption of economic activities, a state of national emergency is hereby declared over the entire country."

5. Department of Health (DOH) Memorandum No. 2020-0056 dated 03 February 2020 or the Interim Guidelines for 2019 Novel Coronavirus Acute Respiratory Disease Response in the Workplace


III. OBJECTIVES

This order aims to guide the Department specifically the Central Office workforce (e.g. COVID 19 Action Team, Occupational Safety and Health Officers, Officials, Employees and/or workers), in the prevention of transmission and management of contact, suspect, probable, and confirmed cases of COVID-19 through the health protocols on isolation and use of the facility dedicated for its purpose.

IV. SCOPE AND COVERAGE

The guideline shall apply to the personnel of the Department of Social Welfare and Development-Central Office in Quezon City to include the nearby Field Office of the National Capital Region in Legarda, Manila, Field Office IV-A in Alabang, Manila, and Field Office IV-B in Malate, Manila.

It shall be noted that the COVID-19 Action Team works interdependently with the other committees of the DSWD COVID-19 Task Group Response and the Occupational Safety and Health Committee. Thus, the main scope of this guideline shall focus on specific procedures and protocols of the Isolation Facility as stated in the succeeding sections.

V. DEFINITION OF TERMS

1. Asymptomatic – a person with positive result of RTPCR but no manifestation of symptoms

2. Barangay Health Emergency Response Teams (BHERT) - a team established by DILG MC No. 2020-023 to help implement local prevention and mitigation, preparedness and response measures for COVID-19.
3. Close contact - a person without proper personal protective equipment (PPE) who is providing direct care for a confirmed COVID-19 case and a person who had direct physical contact, or lived, worked, transacted, or travelled in close proximity (less than 1 meter) for more than 15 minutes with a confirmed COVID-19 case.

4. COVID-19 - the Coronavirus Disease 2019 which is caused by the virus known as severe acute respiratory syndrome coronavirus2 (SARS-CoV-2).

5. COVID-19 confirmed - a person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

6. COVID-19 Mild Symptomatic Case - a person with symptoms such as having fever/headache, cough, colds, body/muscle pain, sore or itchiness of throat, loss of sense of smell/taste.

7. COVID-19 Symptomatic Case - a case who has developed signs and symptoms compatible with COVID-19 virus infection.

8. COVID-19 Action Team - a committee under the DSWD COVID-19 Response Task Group which has three (3) sub-committees which are the following; contact tracing, isolation and treatment.


10. Disinfection – the process of reducing the number of viable microorganisms on a surface to a less harmful level. It involves use of chemicals including but not limited to a bleach solution, and is more effective if done after cleaning.

11. Isolation - the separation of ill or infected persons from others to prevent the spread of infection or contamination.

12. Personal Protective Equipment (PPE) - the protective garments or equipment worn by individuals to increase personal safety from infectious agents (DOH Administrative Order No. 2020-0015).

13. Quarantine - the restriction of movement, or separation from the rest of the population, of healthy persons who may have been exposed to the virus, with the objective of monitoring their symptoms and ensuring early detection of cases.

14. Reverse Transcription Polymerase Chain Reaction (RT-PCR) - a nuclear-derived method for detecting the presence of specific genetic material in any pathogen, including a virus.

15. Rapid Antigen Test - a rapid diagnostic test suitable for point-of-care testing that directly detects the presence or absence of an antigen.
16. SWADCAP Isolation Center - the DSWD Temporary Treatment and Monitoring Facility (TTMF) certified by the Department of Health which caters to DSWD COVID-19 confirmed patients with mild symptoms, or asymptomatic or close contacts.

17. Social Welfare and Development Center for Asia and the Pacific - SWADCAP (as DSWD Isolation Facility) - a DSWD-managed facility where contact, suspect, probable, and confirmed cases of COVID-19 with mild symptoms, whose home environment cannot support physical distancing (e.g. crowded living conditions), can be temporarily housed for quarantine or isolation.

VI. OPERATIONAL GUIDELINES

A. Target User of the Facility

The facility shall serve the DSWD employees who tested positive in their Real-Time Reverse Transcription Polymerase Chain Reaction (RT-PCR) Test or Rapid Antigen Test who are either mildly symptomatic or asymptomatic.

Due to the limited capacity of the facility, priority shall be given to the employees without a separate isolation room and bathroom in their homes; who live in dormitories or bed space arrangements; who are not accommodated in their respective LGU isolation facilities due to non-availability of isolation rooms; and infected employees from other Field Offices.

Furthermore, special consideration may be given to stranded or in transit employees from other field offices to the National Capital Region who are considered close contacts may be isolated at the facility pending the result of his/her RT-PCR.

It shall be noted that employees who are experiencing symptoms shall undergo RT-PCR test or Rapid Antigen Test, inform the Human Resource Welfare Division- Clinic about his/her health status, and strictly undergo home quarantine while waiting for his/her result.

B. Admission of confirmed COVID-19 Employee

1. After a thorough clinical assessment of the health status of the confirmed COVID-19 positive employee, the Medical Officer shall send an electronic copy of the admission form to the confirmed COVID-19 positive employee to fill out. This includes his/her personal information, history of present illness, medical history, etc. including the copy of the official Rapid Antigen test and or RT-PCR result.

2. In case the employee has no internet connection or personal gadget to accomplish the electronic admission form, the nurse on duty shall assist in the filling up of the form, and provide the printed patient admission form for signature upon confinement to the facility.

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3 To include the Employee Dormitory in the DSWD Central Office
3. The duly accomplished patient admission form shall be signed and endorsed by the Medical Officer to the Facility Manager via email at dswdswadcapsilationfacility@dswd.gov.ph if found eligible to be admitted at the isolation facility. The emailed form may be printed and attached to the confirmed COVID-19 positive employee’s chart as part of his/her documents.

4. Upon confirmation of room availability by the Facility Manager, the pre-admission checklist (See Annex A) will be sent via email to the confirmed COVID-19 positive employee to guide them on what to bring during the confinement.

5. The Facility Manager and/or the Administrative Assistant shall inform the ambulance/vehicle driver to transport the confirmed COVID-19 positive employee to the isolation facility. The driver shall be informed of the residential address/current location of the personnel and shall wear appropriate PPEs (coveralls, face shield and facemask, and gloves).

6. Admission of confirmed COVID-19 employees at the facility shall be done from 8:00 am to 5:00 pm by the nurse-on-duty. Admission beyond 5:00 pm/before 8:00 am shall depend on the assessment of the Medical Officer and approval of the COVID-19 Action Chairperson.

7. The nurse-on-duty shall be responsible for briefing the confirmed COVID-19 positive employee on the facility’s protocols, house rules and adherence to respiratory etiquette and care instructions among others. (See Annex C)

8. The nurse-on-duty shall be responsible for distributing the admission kits to each confirmed COVID-19 positive employee upon confinement.

9. The nurse-on-duty shall coordinate with the Taguig BHERT through different means of communication like email, Short Messaging Service (SMS), and landline to inform that there is a confirmed COVID-19 positive employee admitted at the SWADCAP Isolation Facility for proper recording, monitoring, intervention, and further assistance as needed.

C. Management of Confirmed COVID-19 Employees

1. The nurse-on-duty shall regularly monitor the vital signs/health status of the confirmed COVID-19 positive employee and record it on his/her chart (clipboard) which shall be kept and updated daily. The chart shall contain the admitting history, monitoring sheet, medications given, and discharge note.

2. The nurse-on-duty shall ensure that the confirmed COVID-19 positive employee completes the required isolation for 14 days or more (depending on the progression of symptoms), and shall regularly update the Medical Officer and Taguig BHERT of his/her health status.

3. If the confirmed COVID-19 positive employee suddenly refuses to complete isolation at the facility, the nurse-on-duty shall inform the facility
manager and medical officer for appropriate action. A refusal form/consent will be provided for the employee to sign for referral by medical officer to another isolation facility through the assistance of Taguig BHERT.

4. In case the confirmed COVID-19 positive employee needs other medications for his/her symptoms, a teleconsultation with the Medical Officer may be done through the coordination of the nurse-on-duty. The Medical Officer shall inform the confirmed COVID-19 positive employee that in cases of non-availability of medicines at the clinic, he/she shall personally shoulder the costs of procurement. The Medical Officer shall also inform the nurse-on-duty of the prescribed medications needed.

5. If the confirmed COVID-19 positive employee has other needs, she/he shall coordinate with the nurse on duty. The facility manager shall coordinate with the employee’s family/relative for instructions on how to deliver said additional requested supplies.

6. In case the confirmed COVID-19 positive employee exhibits progression of symptoms into moderate, or severe symptoms, the nurse-on-duty and facility manager shall immediately coordinate with the Medical Officer for close health status monitoring and referral purposes. The Administrative Assistant may also contact the Taguig BHERT for referral and for transporting the confirmed COVID-19 positive employee to the nearest hospital, if the DSWD ambulance/vehicle is not available.

7. Once referred to the hospital, costs of hospitalization shall be shouldered by the confirmed COVID-19 positive employee. Coordination with DSWD Crisis Intervention Unit may be done by the employee’s concerned OBSUs (through the safety and health focal) for the facilitation of the medical/financial assistance.

8. Monitoring of the confirmed COVID-19 positive employee’s status while at the hospital shall primarily be the task of the medical clinic.

9. Psychosocial support shall be conducted through the HRMDS to manage stress and anxiety due to isolation. Other activities may include the following:

   a. A group messaging application for this endeavor may be established to provide peer support or kamustahan sessions
   b. One-on-one may also be provided to employees who may wish to engage in such activities to process and ventilate their fears and anxieties.

10. The nurse-on-duty shall be responsible for delivering the provided packed meals, medicines and other needs (including those brought by their family/relatives) outside the confirmed COVID-19 positive employee’s room during the scheduled meal time as stated below:
    
    Breakfast : 7:00-8:00 am
    Lunch      : 12:00-1:00 noon
    Dinner     : 6:30-7:30 pm
D. Discharge of Confirmed COVID-19 Employees

1. The Facility Manager, through the endorsement of the nurse-on-duty, shall inform the Medical Officer that a recovered employee is ready for discharge for appropriate action. In case there is a referral to the hospital, issuance of medical clearance from the hospital indicating that he/she has recovered shall be presented/submitted to the Medical Officer for further assessment and instruction.

2. The recovered employee shall request for a Certificate of Completion of Quarantine (CCQ) from the Taguig BHERT through the assistance of the nurse on-duty after completing the mandatory isolation at the SWADCAP Isolation Facility.

3. The nurse on duty shall assist in the submission of the issued CCQ to the Medical Clinic through email (furnishing a copy to the recovered employees) for the issuance of a fit to work clearance by the Medical Officer. The clearance shall be presented upon their return to office/work, for filing of appropriate leave (quarantine leave) and/or for financial assistance.

4. The facility manager or the administrative assistant shall arrange for the transportation of the recovered employees from the Isolation Facility to their respective residences/homes.

5. The Medical Officer/Clinic shall update the DSWD COVID-19 monitoring tool database regarding the status of the recovered employee in coordination with the Facility Manager.

E. Disinfection, Sanitation and Cleaning of the Isolation Facility

1. The Administrative Service shall spearhead the general cleaning and disinfection activity of the whole isolation facility every week.

2. Daily disinfection by the Sanitation Officer shall be done at areas frequently used such as but not limited to comfort rooms among others in the morning and afternoon, and between shifts, if applicable.

3. Upon discharge of the patient, disinfection of the room shall be conducted before use by another patient.

4. The Disinfection Team shall observe the following when conducting disinfection.
   a. Wear disposable or impermeable gloves and gowns for all tasks in the cleaning process, including handling trash.
   b. Wear additional Personal Protection Equipment (PPE) that might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash, if any.
   c. If there is a shortage of PPEs, wash hands often with soap and water for at least 20 seconds.
   d. Carefully remove gloves and gown to avoid contamination of the wearer and the surrounding area.

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e. Change clothes immediately after the cleaning and disinfecting activity.
f. Always wash hands immediately after removing gloves.
g. If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 70% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.

5. The confirmed COVID-19 positive employees and isolation staff shall practice waste segregation and dispose the waste in color-coded plastic containers or plastic garbage bags as follows:
   a. Black: for non-infectious dry waste like paper, carton, carbon paper, cans, bottles, plastics, straws and other biodegradable materials
   b. Green: for non-infectious wet waste like leftover and spoiled food, fruits, vegetable peelings and other perishable food
   c. Yellow: for infectious waste like tissue paper, sanitary napkin, used cotton, gauze, soiled disposable wares and utensils from patient’s meals, etc.

6. The maintenance officer shall ensure that proper segregation is practiced. If color-coded plastic containers or garbage bags are not available, labelled trash bins according to waste segregation shall be used.

7. Garbage containers shall be placed in strategic areas near the exit and shall be collected by the maintenance officer on a daily basis which shall be placed at the identified waste storage area.

F. Preparation and Handling of Food

1. The administrative assistant in coordination with the medical clinic shall plan and implement food-related concerns in the isolation facility.

2. The administrative assistant shall ensure the procurement and delivery of food on time, prepare the food up on delivery and endorse to the nurse on duty for distribution to confirmed COVID-19 employees. Observance of proper personal hygiene, safe food handling and serving practices must be practiced at all times.

3. Disposable wares and utensils, preferably biodegradable utensils and wares, shall be used for food distribution.

4. The assigned food distributor shall wear proper PPE and shall serve only up to the room door or entry passage to limit close encounters with the confirmed COVID-19 employee. All confirmed COVID-19 infected employees shall be instructed to leave soiled disposable wares and utensils outside the room every after meals for collection by the maintenance officer.

5. The food distributor shall discard the PPE properly and practice proper hand washing every after food distribution and collection of soiled disposable wares and utensils.
G. Other Provisional Guidelines

1. Authorized Personnel to enter the Isolation Facility
   a. The DSWD SWADCAP Isolation Facility is strictly prohibited to visitors. Gate keepers must ensure that community bystanders shall not enter the said facility. The following are the only authorized employees to enter:
      a. Medical Officer (as the need arises)
      b. Facility Manager
      c. Nurses
      d. Administrative Assistant V
      e. Sanitation Officer
      f. Maintenance/Housekeeping Officer
      g. Taguig BHERT personnel (as the need arises)
      h. Security Guards, and
      i. Other DSWD personnel on a case-to-case basis as authorized by the COVID-19 Action Team Chairperson.

   b. The security guard shall ensure that the following shall be done prior to entering the facility:
      a. Authorized individuals shall be screened for symptoms of COVID-19 and subjected to temperature checks.
         - Individuals with 37.4°C and below shall be allowed to enter;
         - Individuals with 37.5°C or higher shall rest for five (5) minutes then be re-checked. If with 37.4°C, the security guard shall allow entry of the person;
         - Individuals still with 37.5°C after resting shall be denied entry and shall be assessed by the nurse on duty.
         - Individuals who can enter shall provide the necessary details needed in the logbook and fill up the Individual Health Declaration Form using his/her own pen.

2. Preventive Measures
   a. Mandatory use of face mask and face shield especially when inside the facility regardless of alert levels. Proper use of PPE and/or laboratory gown and gloves shall be ensured at all times in accordance with DOH DM No. 2020-0176 (Interim guidelines on the rational use of PPE for coronavirus 2019).

   b. Perform hand hygiene with an alcohol-based hand rub or soap and water.

   c. Before leaving the isolation facility, the employees shall ensure the following:

   2 Memorandum Advisory on the General Guidelines on the Use of Face Shield in DSWD Premise dated 18 November 2021, cognizant to the Memorandum from the Executive Secretary of the Office of the President of the Philippines on the Protocols on the Use of Face Shields
- Dispose used PPE so as not to contaminate either the environment outside the isolation room or area, or other people.
- Remove the most contaminated PPE item first. Peel-off the gown and gloves and roll inside out.
- Properly dispose of the used PPE in the trash bin labeled as infectious waste at the designated doffing area located at the buffer zone.
- Perform hand hygiene with an alcohol-based hand rub or soap and water.
- Remove the goggles from behind and put them in a separate container.
- Remove the mask last by grasping the ties and discarding them in a rubbish bin.
- Perform hand hygiene

3. Work Arrangements

1. The Facility Manager shall be responsible in ensuring that the daily time record (DTR) of the personnel shall reflect the actual time of his/her rendered duty schedules to be supported by an Accomplishment Report (AR). It shall be prepared by the employee, reviewed and initiated by the Facility Manager and the HR authorized signatory, and approved by the COVID-19 Chairperson.

2. A fourteen (14) day shifting (stay-in at the facility) shall be rendered following the 14-day recovering cycle of confirmed COVID-19 infected individuals.

3. A weekly consolidated report shall be submitted by the Isolation Facility personnel to the Facility Manager which shall be reviewed and endorsed to the COVID-19 Chairperson for proper reporting to the Department of Health.

4. In case an employee from the Isolation Facility gets infected by COVID19, she/he shall immediately inform the Facility Manager and Medical Officer. Employee support and action shall be provided as necessary.

5. The infected facility staff shall undergo the same procedure for admission/discharge as that of a confirmed COVID-19 employee.

6. Erring employees shall be reported to the Facility Manager for endorsement to the COVID-19 Action Chairperson and the HRMDS for proper disciplinary measures/action.

7. Coordination with external partners (nearby hospitals, BHERT, AFP, DOH, etc) shall be made to provide appropriate levels of care to admitted patients and staff.

8. As a support to the Facility staff, a shuttle service shall be arranged to and from the MRT Magallanes Station.
VII. INSTITUTIONAL ARRANGEMENTS

1. The DSWD COVID-19 Response Task Group shall be the over-all authority in the operation of the DSWD COVID-19 Isolation Facility located at the SWADCAP- Barangay Pasong Tamo, Taguig City.

Figure 1. COVID-19 Response Task Group
Organizational Structure

2. The Isolation Facility shall be under the Sub-committee on Isolation of the COVID-19 Action Team. It shall be headed by a Facility Manager who is accountable to the head of the Sub-committee on Isolation. The facility shall be composed of a Facility Manager to be assisted by two (2) hired Nurses and two (2) Administrative Assistants, four (4) Security Guards, one (1) Sanitation Officer and two (2) Maintenance/Housekeeping Staff.

Figure 2. COVID-19 Action Team
Organizational Structure
3. The Human Resource Management and Development Service (HRMDS) shall be responsible for ensuring and monitoring the provision of needed assistance to DSWD COVID-19 affected employees.

4. The HRWD-Clinic shall be responsible for providing technical supervision of the staff managing the facility and the monitoring of COVID-19 affected DSWD employee's health status and referral to the Isolation Facility.

5. The Administrative Service shall provide logistical support for the operation and maintenance of the Isolation Facility.

6. The Social Welfare and Institutional Development Bureau (SWIDB) shall conduct a quarterly monitoring on the use of the SWADCAP as an isolation facility as part of its functions as the office in charge in the overall management of SWADCAP.

IX. FUNDING REQUIREMENT

The funding for the operationalization of the SWADCAP Isolation Facility shall be sourced from the budget of the Department, subject to existing rules and regulations.

X. REPEALING CLAUSE

This guideline amends all other existing guidelines and issuances inconsistent herewith, and are deemed repealed accordingly.

XI. EFFECTIVITY

This Administrative Order shall take effect immediately upon issuance and shall remain in force until a new guideline / protocols are developed based on prevailing circumstances of the pandemic.

Signed this 16th day of January 2022.

[Signature]

ROLANDO JOSELITO D. BAUTISTA
Secretary
Annex A

SWADCAP ISOLATION FACILITY
CARE MANAGEMENT PROCESS

- **Confirmed COVID-19 infected employee reports to the Medical Officer**
- **Medical Officer assesses the health status of the employee**
- **Medical Officer coordinates with the Facility Manager**
- **Facility Manager coordinates transport of employee**

**ISOLATION ROOM**

- **Nurse on-duty coordinates with BHERT**
- **Upon arrival at the facility, nurse on-duty assists the employee**
- **Transport of employee to facility**

**Services provided in the facility:**
- Tele-consultation with Medical Officer
- Provision of food
- Provision of psychosocial support
- Basic medicine
- Referral to hospital in case of emergency

**Upon completion of 14 days isolation:**
- Issuance of certificate of completion
- Medical certificate (fit to work)

**Transport of employee to residence**

**Employee reports back to work**
## PATIENT ADMISSION FORM

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### ADMISSION TEAM

In case of Emergency, Pls notify:

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### ADMISSION CHECKLIST

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**Patient Kit Issued (Male/Female)**

**Toiletries, Beddings, pillow, and personal blanket to be brought by patient**

**Informed Consent Signed**

**Clothes (14-21 days)**

**Orientation Given**

**House Rules**
- Wearing of Mask
- Handwashing
- No-Touch Policy
- Social Distancing 2 meters
- Cubicle Confinement
- Wi-Fi, smart phone, Viber, contact #

**Facility Set-up**
- Amenities
- Movement Flow
- Bathrooms
- Meal and Water area
- Waste disposal (cut-off time 9pm)
- Call Light
- Cubicle Assignment
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<td>SEPARATE CLEAN CLOTHES preferably WHITE, DRI-FIT CLOTHES, TOILETRIES AND SLIPPERS TO</td>
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Form Accomplished by:

(___________)
(Name and Signature)
SWADCAP ISOLATION FACILITY
SWADCAP DSWD
Barangay Pasong Tamo, Taguig City

INFORMED CONSENT FOR COVID ADMITTED PATIENTS

Date/Time: ____________________

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Isolation Rules and Regulations (Mga Alituntunin at Regulasyon):

1. No visitors shall be allowed inside the SIF. *(Mahigpit na ipinagbabawal ang bantay o pagdalaw habang nasa SIF.)*

2. Patients must bring their personal clothes, vitamins/medications, toiletries, and other personal effects and belongings (e.g. blanket, pillows, mug/tumbler, supplements, extra snacks) that are good for 14 days or as deemed necessary *(Ang mga pasenyte ay kailangang mayroong dalang mga pansariling damit, vitamins o gamot, at mga gamit pangkalinisan na sapat para sa 14 na araw.)*

3. Online shopping deliveries are strictly prohibited. Additional food and/or supplies needed by the patient must be coordinated with the Facility Manager. *(Mahigpit na ipinagbabawal ang online shopping deliveries sa lahat ng oras. Kung may karagdagang pagkain o supplies ang pasyente na ibibigay ng pamilya, maaring makipag-coordinate sa Facility Manager.)*

4. Face mask and face shield should be worn inside the premises of the facility. *(Panatilihin nakasuot ang face mask at face shield sa lahat ng oras.)*

5. Social distancing must be observed at least two (2) meters apart. *(Panatilihin ang social distancing na may dalawang (2) metro ang pagitan.)*

6. Regular sanitation should be practiced through proper hand washing with water and soap or by using alcohol. *(Panatilihin laging malinis ang mga kamay sa pamamagitan ng paghuhugas gamit ang tubig at sabon o paggamit ng alcohol.)*
7. Patients must stay within the designated cubicle except when using the bathroom and following the daily routine listed in the patient's schedule. (Manatili sa designated cubicle sa lahat ng oras maliban kung gagamit ng palikuran at mga nakalista sa schedule ng pasyente.)

8. Patients shall conduct body temperature self-monitoring twice a day (8AM and 4PM) and report to the nurse on-duty through SMS/Google Chat or the SIF Viber Hotline. (Isasagawa ng mga pasyente ang pag-monitor ng kaniyang temperatura, dalawang beses sa isang araw (8AM at 4PM), at ipapadala sa nurse on-duty sa pamamagitan ng SMS/Google Chat o sa SIF Viber Hotline.)

9. Patients shall get their meals at the designated areas during the provided schedules below: (Maaaring makuha ng pasyente ang kaniyang pagkain sa mga nakatakda lugar at oras:)
   - Breakfast (Almusal) — 7:00 AM to 8:00 AM
   - Lunch (Tanghalan) — 12:00 AM to 1:00 PM
   - Dinner (Hapunan) — 6:30 PM to 7:30 PM

10. Waste/garbage disposal shall be done on a daily basis at designated areas. Cut-off time is at 8:00 PM. (Ang basura ay dapat na ilagay sa itinakdang lugar kada araw bago ang 8:00 PM cut-off time.)

11. Doing laundry is STRICTLY prohibited. (MAHIGPIT na ipinagbabawal ang paglalaba.)

12. Designated cubicles MUST BE kept clean at all times. (Panatilihing malinis ang mga designated cubicles.)

13. Unnecessary noise should be avoided, especially during night time. (Iwasan na mag-ingay, lalo na sa gabi.)

14. The SIF strictly implements NO CONTACT/TOUCH POLICY. All patients must be capable of performing self-care and daily living activities. (Mahigpit na ipinapatupad ng SIF ang NO TOUCH POLICY. Ang lahat ng pasyente ay dapat na may kakayahang alagaan ang sarili at gawin ang mga pang-araw-araw na gawain.)

15. Other patients' privacy should be respected at all times. (Palagiang respetuhin ang privacy ng ibang mga pasyente.)

16. Taking of videos and pictures inside the SIF is STRICTLY prohibited. (Ang pagkuha ng video at picture ay MAHIGPIT na ipinagbabawal sa loob ng SIF.)

17. Smoking and vaping is STRICTLY PROHIBITED. (MAHIGPIT NA IPINAGBABAWAL ang paninigarilyo at paggamit ng e-cigarettes.)
18. Patients shall put their belongings in an enclosed bag upon discharge. (Ang mga gamit ng bawat pasyente ay ilalagay sa isang saradong bag kapag sila ay na-discharge na.)

19. For any immediate concerns or in case of untoward or unexpected events like manifestation of moderate and severe symptoms, immediately call the attention of the nurse on-duty through any available communication channels. (Para sa anumang agarang pangangailangan o kung may di-inaasahang kaganapan tulad ng pagkakaroong ng katamtaman o malubhang sintomas, agad ipagbigay-alam ito sa nurse na naka-duty sa pamamagitan ng anumang magagamit na linya ng komunikasyon.)

20. Patients who violate any of the rules and regulations shall be sanctioned. (Ang sinumang pasyente na lumabag sa mga alituntunin ay bibigyan ng babala.)

I hereby acknowledge that I have read, understood and will abide by the rules and regulations set forth by the SWADCAP Isolation Facility (SIF). (Ito ay patunay na aking nabasa at naiintidihan, at susunod sa mga alituntunin na ipanatutupad sa SWADCAP Isolation Facility (SIF).

_________________________________________
Signature over Printed Name (Pangalan at Lagda)

_________________________________________
Date (Petsa)

NOTE:
SIF is an air-conditioned facility. Please bring appropriate clothing (T-shirts, jogging pants, pants, jacket, and personal blanket; AVOID revealing clothes such as backless, spaghetti strap and very short shorts). There is a CCTV system for security and monitoring of patients within the facility.

The following will be provided:

- Daily meals (please advise if you have special diet or Halal foods)
- WiFi
- Thermometer
- Own cubicle with bed, table and chair
SWADCAP ISOLATION FACILITY
SWADCAP DSWD
Barangay Pasong Tamo, Taguig City

TRIAGE FORM

PERSONAL DETAILS
Name: ____________________________  Date/Time: ___________

[Last Name]  [First Name]  [Middle Name]

Age/Sex: ____________________________
Address: ____________________________
Religion: ____________________________
Cellphone No: ____________________________
Name of person in case of Emergency: ____________________________
Contact Number: ____________________________
Date of Exposure: ____________________________
Date of Result: ____________________________

Laboratory:
☐ COVID RT-PCR official Result  ☐ TIVE
☐ Date of swab test: ____________________________

SYMPTOMS:
☐ Fever  ☐ Confusion  ☐ Diarrhea
☐ Cough  ☐ Headache  ☐ Nausea
☐ Shortness of Breath  ☐ Sorethroat  ☐ Vomiting
☐ Muscle Ache  ☐ Colds  ☐ Fatigue

MEDICAL HISTORY:
☐ HPN  ☐ DM  ☐ Brochial Asthma  ☐ Previous Smoker
☐ Allergies:
☐ Other medical condition: ____________________________

☐ Check if needing special meals, specify: ____________________________

PSYCHOSOCIAL ASSESSMENT:
☐ Psychological/psychiatric conditions  ☐ History of Violent behavior

VITAL SIGNS:
BP: __________ HR: __________ RR: __________ Temp: __________ O2 Sat: __________

PERTINENT PE FINDINGS:

__________________________________________
Admitting Physician
Annex E

SWADCAP ISOLATION FACILITY
SWADCAP DSWD
Barangay Pasong Tamo, Taguig City

ADMISSION POLICY

SWADCAP ISOLATION FACILITY (SIF) is a 28-bed capacity makeshift medical facility designed to house DSWD personnel who are laboratory-confirmed positive COVID-19 cases asymptomatic/symptomatic (mild) with no comorbidities. The facility serves as a quarantine area to isolate positive cases from their families and the community.

ADMISSION CRITERIA:
SIF only admits the following patients:
1. Laboratory-confirmed positive for COVID.
2. Patients referred by DOH or BOQ shall be accepted for medical evaluation.
3. Referred patients should present clear chest x-ray result taken within 24 hours up to 5 days, Complete Blood Count, ECG and Urinalysis.
4. Adult male or female patients from 18 to 60 years of age and are confirmed DSWD employees.
5. Asymptomatic patients (absence of fever, sore throat, cough, shortness of breath, fatigue and diarrhea) or Symptomatic (mild cases).
6. No comorbidities (hypertension, diabetes, cardiovascular disease, cerebrovascular disease, chronic obstructive pulmonary disease (COPD), PTB, chronic kidney disease, and malignancy).
8. With adequate basic clothing good for two-three (2-3) weeks duration.
9. Referring hospital/institution shall provide RT-PCR testing facility for post quarantine prior to discharge.
10. Confirmed COVID-19 cases shall no longer entail repeat testing and can be tagged as recovered confirmed case without the need for further testing, provided that the medical officer clears the patient
- Asymptomatic patients who have completed 14 days of isolation at the temporary treatment and monitoring facility
- Symptomatic patients who have clinically recovered and are no longer symptomatic for at least 3 days and have completed at least 14 days of isolation at the temporary treatment and monitoring facility.
Annex F

SWADCAP ISOLATION FACILITY
SWADCAP DSWD
 Barangay Pasong Tamo, Taguig City

INFORMED CONSENT

I hereby give my consent to all authorized personnel/staff of the temporary treatment and monitoring facility to attend and provide treatment and/or medical advice deemed necessary for my care. I also give authorization for the facility to supply information from my health records to my insurance carrier/attorney/ and to the researcher.

Pinahihintulutan ko ang mga kawani ng pasilidad na ito na magsagawa ng kinakailangang gamutan na nararapat para sa panganganalaga sa akin. Pinahihintulutan ko rin ang pasilidad na ito na ibahagi ang impormasyon na nilalaman ng aking medical records sa aking insurance/sa aking abogado/at sa mga mananaliksik.

__________________________________________  __________________________________________
Signature Over Printed Name of Patient        Signature Over Printed Name of Next of Kin
                                            *(for minor and/or mentally incompetent patients)*

__________________________________________
Signature Over Printed Name of Designated Staff (Witness)
# Annex G

## NURSES NOTES

<table>
<thead>
<tr>
<th>Surname</th>
<th>First name</th>
<th>M.I</th>
<th>Age</th>
<th>Sex</th>
<th>Admission Number</th>
<th>Room Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Attending Physician:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date/Time</th>
<th>Progress Notes</th>
</tr>
</thead>
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PATIENT REFUSAL FORM

THE PATIENT:

YOU HAVE THE RIGHT TO INFORMATION REGARDING YOUR CONDITION AND THE RECOMMENDED PROCEDURES SO THAT YOU MAY HAVE THE PROPER DECISION AFTER KNOWING THE RISKS INVOLVED AND OTHER TREATMENT OPTIONS.

I, ____________________________, _____ y/o, a patient admitted at SWADCAP Isolation Facility, refuse the recommended medical intervention. I acknowledge that I have been informed of the importance of the treatment involved, available care, treatment alternatives and consequences of my decision. I hereby release my attending physician, __________________________________________, the facility and its employees from all responsibility for any ill effect which may result from this action.

Please check reason/s of refusal:

☐ Medical condition unrelated to treatment, please specify

______________________________________________________________

☐ Medical condition related to treatment, please specify

______________________________________________________________

☐ Prefer other hospital's/facility's equipment/service

______________________________________________________________

☐ Uncomfortable with facilities, please specify

______________________________________________________________

☐ Others, please specify

______________________________________________________________

__________________________________________  __________________________
SIGNATURE ABOVE PRINTED  DATE

(MMM/DD/YYYY)  

NAME OF PATIENT
<table>
<thead>
<tr>
<th>IF PATIENT IS INCOMPETENT TO SIGN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SIGNATURE ABOVE PRINTED NAME OF GUARDIAN</strong></td>
</tr>
<tr>
<td>☐ MOTHER ☐ FATHER</td>
</tr>
<tr>
<td><strong>RELATIONSHIP TO PATIENT:</strong></td>
</tr>
<tr>
<td><strong>DATE (MM/DD/YYYY)</strong></td>
</tr>
<tr>
<td><strong>PARENT/PATIENT CANNOT SIGN</strong></td>
</tr>
</tbody>
</table>

**ATTTESTATION OF WITNESS**

The individual who executed this affidavit appears to be sound mind, and under no threat, fraud or undue influence.

| **SIGNATURE ABOVE PRINTED NAME OF PATIENT** | **DATE (MMM/DD/YYYY)** |
### PATIENT'S DAILY SCHEDULE

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:00 AM</td>
<td>Wake up call</td>
</tr>
<tr>
<td>6:00 AM – 11:00 AM</td>
<td>Take a bath, personal necessities</td>
</tr>
<tr>
<td>8:00 AM</td>
<td>Vital Signs Check</td>
</tr>
<tr>
<td>7:00 AM - 8:00 AM</td>
<td>Breakfast</td>
</tr>
<tr>
<td>10:00 AM – 11:00 AM</td>
<td>Free Time</td>
</tr>
<tr>
<td>12:00 AM- 1:00 PM</td>
<td>Lunch</td>
</tr>
<tr>
<td>2:00- 6:00 PM</td>
<td>Free Time</td>
</tr>
<tr>
<td>4:00 PM</td>
<td>Vital Signs Check</td>
</tr>
<tr>
<td>6:30 PM –7:30 PM</td>
<td>Dinner</td>
</tr>
<tr>
<td>8:00 PM - 9: 00 PM</td>
<td>Free time</td>
</tr>
<tr>
<td>8:30 PM</td>
<td>Cut-off time of garbage disposal at designated area</td>
</tr>
<tr>
<td>10:00 PM - 6:00 AM</td>
<td>Free time/Sleep</td>
</tr>
</tbody>
</table>