



PAMBANSANG PUNONGHIMPILAN TANOD BAYBAYIN NG PILIPINAS
(National Headquarters Philippine Coast Guard)
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NHQ-PCG / HCGMED

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STANDING OPERATING PROCEDURES
NUMBER 07-20

GUIDELINES FOR HANDLING OF PCG PERSONNEL WITH COVID-19
IN THE WORKPLACE

I. AUTHORITY:

- A. Republic Act No. 11469 (Bayanihan to Heal as One Act)

II. REFERENCES:

- A. Memorandum from Chief of Coast Guard Staff dated 09 Jun 20
- B. DOH Department Order No. 2020-0131 dated 11 Mar 20
- C. C, TGLC-19 (Water Cluster) Memo dated 06 April 20
- D. DOH Department Order No 2020-039 dated 05 Feb 2020
- E. DOH Algorithm for COVID-19 Classification as of 07 April 2020
- F. DOH Department Circular No 2020-0258 dated 29 May 2020
- G. Decision Tool for Novel Coronavirus Assessment for Bureau of Quarantine and Hospitals as of 30 Jan 2020
- H. DOH Department Order No. 2020-0157 dated 10 April 2020

III. PURPOSE:

This SOP shall prescribe the guidelines and procedures in the handling of PCG personnel in relation to COVID-19 in the workplace.

IV. SCOPE:

This SOP shall apply to all PCG personnel assigned National Headquarters Philippine Coast Guard (NHQ – PCG), all Major Units, PCG Bases, PCG Districts and training centers.

V. DEFINITION OF TERMS:

A. Accredited Physician – authorized medical professional by District Medical Officer to evaluate the medical fitness of PCG personnel.

B. Close Contact – is 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 confirmed COVID-19 case.

C. Co-morbidity –refers to the co-occurrence of two or more diseases in the person.

D. Confirmed Case – any PCG personnel who tested positive for COVID-19 through laboratory confirmation at the National reference laboratory, sub-national reference laboratory or DOH certified laboratory testing facility.

E. Diagnostic Facility – referral facilities for the purposes of laboratory procedures in connection with the determination of COVID-19 and contact tracing as recommended by a PCG Medical Officer or Nurse Officer/Officer-In-Charge.

F. Etiology –refers to the cause, set of causes, or manner of causation of a disease or condition.

G. Hand Hygiene – procedure to ensure the complete cleaning of the upper extremities to minimize contracting the pathogen:

1. *Cleaning* refers to the removal of germs, dirt, and impurities from surfaces. Cleaning does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

2. *Disinfecting* refers to using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface *after* cleaning, it can further lower the risk of spreading infection.

H. Infection Control measures – processes undertaken to limit the spread of a disease:

1. Standard precautionary measures – includes proper hand hygiene, respiratory etiquette principles, appropriate patient placement, proper disinfection of clinical equipment, laundry and textile decontamination, and health worker safety.

2. Transmission based precautions – secondary tier of infection control and are to be implemented on top of Standard precautionary measures including contact precautions, droplet precautions, airborne precautions.

I. Medical Certification – a certification issued by a PCG Medical Officer or an Accredited Physician by PCG validating the overall fitness of an individual to effectively execute the functions of the PCG on shore and / or shipboard assignment.

J. Personal Protective Equipment (PPE) – pertains to appropriate physical barriers to the person through potential points of entry (eyes, nose and mouth), and in the prevention of infecting others (extremities).

K. Physical Distancing – maintaining a prescribed distance between two persons.

L. Physical Profiling – a system adopted to properly evaluate personnel for their fitness to continue their service. For the purposes of this SOP, it shall be defined as follows:

1. Physical Profile 1 (P – 1): No limitations to assignments /designations to ship / shore duties; No exemptions to all activities.

2. Physical Profile 2 (P – 2): With limitations to assignments / designations to ship / shore duties; May be exempted from various activities.

3. Physical Profile 3 (P – 3): Strict limitations to assignments / designations shore duties; multiple exemptions to various activities.

4. Physical Profile 4 (P – 4): Limited to office assignments; candidate for Complete Disability Discharge (CDD).

M. Probable Case – any PCG personnel who fulfills anyone of the following listed below:

1. Suspect case whose testing for COVID-19 is inconclusive; or

2. Suspect who tested positive for COVID-19 but whose test was not conducted in a national or sub-national reference laboratory or officially accredited laboratory for COVID-19 confirmatory testing.

3. Suspect case who died without undergoing any confirmatory testing.

N. Quarantine Facility – any designated quarantine facility where PCG personnel can be accommodated.

O. Recognized Testing Facility – any testing facility authorized by DOH capable of handling analysis of COVID-19 test procedures

P. Suspect Case – a person who is presenting with any of the conditions below:

1. All Severe Acute Respiratory Illness (SARI) Cases where NO other etiology that fully explains the clinical presentation.

2. Influenza Like Illness (ILI) Cases with any of the following;

i. With NO other etiology that fully explains the clinical presentation and history of travel to or residence in an area that reported local transmission of COVID-19 disease during the 14 days prior to symptom onset; or

ii. With contact to a confirmed or probable case of COVID-19 disease during the 14 days prior to the onset of symptoms.

3. Individuals with fever or cough or shortness of breath or other respiratory signs or symptoms fulfilling any one of the following conditions:

- i. Aged 60 years and above;
- ii. With a comorbidity;
- iii. Assessed as having a high-risk pregnancy; and / or
- iv. Health worker

Q. Telemedicine – online or phone-in consultation done to decongest the number of patients seeking consultation

VI. POLICIES:

A. General Policies

1. All PCG personnel shall strictly observe infection control measures during conduct of respective duties and assignment; ***DOH Department Circular No 2020-0039 "Interim Guidelines for 2019 Novel Coronavirus Acute Respiratory Disease (2019-nCov ARD) Response in the Workplace" (Annex A)***
2. All PCG personnel shall utilize appropriate personal protective equipment (PPE) at all times;
3. Any PCG personnel that presents any indication for COVID-19 disease, shall be referred to nearest CGMED clinic or medical facility for appropriate evaluation and management.
4. Medical assessment shall follow current DOH case definition for diagnosis COVID-19;
5. All medical personnel shall observe all precautionary measures during the duration of patient evaluation, quarantine, and discharge period;
6. All PCG personnel shall undergo medical evaluation after the prescribed quarantine or isolation period to determine fitness to resume Active Duty;
7. Any other situation not stipulated in following the provisions shall be subject to current Command policy;

B. Specific Policies

1. CG Medical Service shall be designated to undertake the following:
 - a. Unit primarily responsible to handle all PCG personnel in relation to COVID-19 disease management;
 - b. Designate appropriate quarantine areas to accommodate PCG personnel awaiting test results or complying with the prescribed demobilization procedures;
 - c. Supervise and implement appropriate isolation and quarantine protocols;
 - d. Classification and management of PCG personnel COVID-19 case shall be in accordance with latest DOH Algorithm for COVID-19 Classification; ***PCG Algorithm for COVID-19 Classification (Annex B)***
 - e. Facilitate conduct of Rapid Testing (Immunoassay), RT-PCR tests, or any other tests applicable to PCG personnel in relation to COVID-19; ***DOH Department Circular No 2020-0258 "Updated Interim Guidelines on Expanded Testing for COVID-19" (Annex C)***
 - f. Facilitate extraction of Confirmed COVID-19 personnel for isolation and monitoring at Eva Macapagal Terminal as Quarantine Facility;
 - g. Facilitate extraction of Probable COVID-19 personnel for 14 days Mandatory Quarantine at HCGMED Tent/identified quarantine facility;
 - h. Manage and monitor personnel classified as Suspect COVID-19 case;
 - i. Inform CPCG of all PCG personnel found positive (+) for COVID-19 disease;
 - j. Conduct contact tracing in coordination with Contact Tracing Team;
 - k. Supervise conduct of disinfection / decontamination measures in coordination with HSG and other support groups of major units, bases, training centers;
 - l. Supervise patient referrals and admission to medical facilities, as well as necessary support until recovery;
 - m. Conduct daily monitoring of COVID-19 patients in coordination with DOH, DOTr, and other concerned agencies;
 - n. Conduct stress debriefing, psychosocial support, and other modalities for affected PCG personnel in coordination with NP Section;

- o. Issue medical clearances for medical fitness to return to Active Duty;

2. Central Staff Offices / All PCG Units

- a. Ensure respective personnel shall follow strict hygiene practices and disinfection protocols for their respective offices;
- b. Strictly implement temperature monitoring when in respective offices;
- c. Ensure proficiency of personnel with the use of personal protective equipment;
- d. Ensure social as well as personal distancing is observed;
- e. Hand sanitizers and pocket alcohol dispensers shall be accessible;
- f. Determine personnel for risk assessment prior to assumption to or demobilization from respective offices;
- g. Diligently establish travel history and exposure of PCG personnel in reference to latest ***Decision Tool for Novel Corona Virus Assessment for Bureau of Quarantine and Hospitals (Annex D)***
- h. Prompt reporting of cases to assist in contact tracing and quarantine measures;
- i. Refer patients to CGMED for laboratory testing subject to availability of kits;
- j. Isolate respective personnel found positive of COVID-19 until proper turnover to CGMED personnel;
- k. All baggage's and personal belongings shall be subjected to prevailing decontamination procedures;
- l. Personnel in close proximity to a confirmed case shall be recommended to CGMED for conduct of appropriate test;
- m. Billeting areas shall be subjected to prevailing decontamination procedures;

3. Deployable Response Teams (DRTs)

- a. DRTs shall regularly conduct temperature measurement and health assessment aboard any water crafts carrying passengers as necessary;
- b. DRT personnel with symptoms shall be recommended for risk assessment;

- c. Contact tracing and quarantine measures shall be adopted for Probable cases;
- d. DRTs shall provide respective travel history and exposure risk in reference to latest BOQ Decision Tool;
- e. Identify temporary holding areas for DRT personnel until turnover to CGMED personnel;
- f. Personnel in close proximity to a confirmed case shall be recommended to CGMED clinic for conduct of appropriate test;

4. PCG Floating Assets

- a. Ensure personnel safety aboardship;
- b. Implement temperature monitoring of all personnel;
- c. Appropriate hand sanitizers, PPE's, shall be provided for designated areas;
- d. Designate temporary isolation areas aboardship while awaiting referral to CGMED;
- e. Implement disinfection and decontamination procedures of all common and billeting areas;
- f. Shipboard personnel in close proximity to a confirmed case shall be recommended to CGMED for conduct of appropriate test;

VII. PROCEDURE:

A. General Procedures

1. All PCG personnel and employees shall be continuously reminded to strictly observe personal hygiene, follow distancing advisories, and utilization of personal protective equipment wherever applicable;
2. Self-monitoring and assessment shall be advocated for, but not limited to the following COVID-19 symptoms (febrile episodes, dry cough, difficulty of breathing, or diarrhea)
3. Personnel subject for medical evaluation shall be endorsed to nearest CGMED facility for prompt management;
4. All PCG personnel for consultation shall be handled with strict confidentiality;
5. PCG personnel shall be accommodated from respective units at CGMED or District Clinics for conduct of proper medical attention;

6. Medical evaluation shall be conducted in well ventilated areas, with appropriate disinfectants;
7. All PCG personnel not suffering from emergency condition shall be encouraged the use of telemedicine for appropriate medical advice and care; **List of CG Medical Clinics with Contact Numbers (Annex E)**
8. Medical Officer shall determine appropriate diagnostic procedure, if warranted;
9. Patients which shows symptoms of COVID-19 disease must be referred for RT-PCR test for confirmation.
10. *All Symptomatic PCG personnel with relevant history of travel (local/abroad) and exposure to confirmed COVID-19 case shall be quarantined and tested for RT-PCR for confirmation.*
11. Asymptomatic PCG personnel who have travelled from places (local/abroad) with local transmission of the coronavirus disease or have close proximity to a confirmed case shall be subjected to medical examination/assessment and shall undergo appropriate test.
12. Isolation protocols shall be recommended for CONFIRMED cases, while Quarantine protocols shall be recommended for SUSPECT AND PROBABLE case;
13. NHQ-PCG assigned personnel shall be required to undergo periodic Rapid Test Screening (Immunoassay) in relation to demobilization protocols or prior to returning to duty;
14. CGMED personnel shall continuously report respective health condition for daily monitoring;
15. If symptoms occur within the quarantine period, a Medical Officer shall evaluate the individual for any indication for hospital referral.
16. After the quarantine period, subject PCG personnel shall be evaluated for issuance of Medical Clearance for Active Duty status;
17. Decontamination of office spaces, especially common areas and billeting shall be in accordance with current DOH disinfection protocols; **DOH Department Circular No 2020-0174 "Guidelines on Cleaning and Disinfection in Various Settings as an Infection Prevention and Control Measure Against COVID-19" (Annex F)**
18. All PCG personnel shall undergo debriefing prior to discharge from quarantine facility;
19. Medical certification shall be issued as a supporting document for proof of recovery or disease-free state;

B. Specific Procedures

1. Management of PCG personnel with COVID-19:

a. If the workplace has a Probable Case

- i. Sick personnel shall manifest concern to immediate supervisor and shall be subsequently endorsed to nearest CGMED clinic;
- ii. All close office contacts shall be reminded to observe strict hygiene and limit unnecessary exposure;
- iii. Quarantine areas within office spaces shall be identified, and utilized for the sick personnel where applicable while waiting for medical personnel;
- iv. Office spaces shall be immediately sanitized and disinfected;
- v. Sick personnel shall be quarantined for the duration of the prescriptive period until release of a negative diagnostic test result;

b. If the workplace has a Confirmed Case (Asymptomatic / Manageable Case)

- i. Sick personnel shall manifest concern to immediate supervisor and shall be subsequently endorsed to nearest CGMED clinic;
- ii. All proximate office contacts shall be recommended for testing;
- iii. Isolation areas within office spaces shall be identified, and utilized for the sick personnel where applicable while waiting for transfer to a designated PCG isolation facility;
- iv. Office spaces shall be immediately sanitized and disinfected;
- v. Sick personnel shall be isolated for the duration of the prescriptive period until release of a negative RT-PCR diagnostic test result or have been evaluated to be COVID-19 disease free;
- vi. Next of Kin, immediate family, or relatives shall likewise be required to provide medical as well as financial support as necessary;
- vii. Daily reports on status of sick personnel shall be conducted;
- viii. Vehicle utilized for transportation shall likewise follow routine sanitation and disinfection procedures;

- ix. If patient deteriorates or becomes unstable at any time during isolation, refer to the Emergency procedure (Section B.1.c.)
- c. If the workplace has a Confirmed Case (Severe / Emergency Case)
 - i. PCG personnel with unstable vital signs shall be immediately endorsed to nearest CGMED clinic / personnel, or any other medical facility for prompt management;
 - ii. Simultaneous coordination with COVID-19 referral hospital shall be made for unstable PCG personnel requiring emergency care;
 - iii. Next of Kin, immediate family, or relatives shall likewise be required to provide medical as well as financial support as necessary;
 - iv. Daily reports on status of sick personnel shall be conducted;
 - v. All proximate office contacts shall be recommended for testing;
 - vi. Office spaces shall be immediately sanitized and disinfected;

2. Central Staff Offices / Major Units

- a. PCG personnel recommended for evaluation shall proceed to HCGMED for assessment;
- b. CGMED personnel shall conduct medical history and evaluation;
- c. Appropriate diagnostic procedure shall be requested and prescribed with appropriate medications;
- d. Patients with indication for COVID-19 shall be recommended to CGMED Laboratory for appropriate testing;
- e. Patient samples shall be sent to COVID-19 testing facility;
- f. PCG personnel shall be accommodated to nearest accessible quarantine facility pending release of results;
- g. Upon release of results, PCG personnel shall be properly briefed as to corresponding procedures for isolation or quarantine;
- h. PCG personnel completing the prescribed quarantine period shall be evaluated for medical fitness to return to active duty;

3. Coast Guard Districts

- a. District personnel recommended for evaluation shall proceed to nearest CGMED Clinic for assessment;
- b. District CGMED personnel shall conduct medical history and evaluation;
- c. Appropriate diagnostic procedure shall be requested and prescribed with appropriate medications;
- d. Patients with indication for COVID-19 shall be recommended to nearest DOH accredited COVID-19 Laboratory for appropriate testing;
- e. PCG personnel shall be accommodated to nearest accessible quarantine facility pending release of results;
- f. Upon release of results, PCG personnel shall be properly briefed as to corresponding procedures for isolation or quarantine;
- g. PCG personnel completing the prescribed quarantine period shall be evaluated for medical fitness to return to active duty;

4. Deployable Response Teams (DRT)

- a. DRTs shall conduct temperature measurement and health assessment aboard any water crafts carrying passengers;
- b. Team Leaders shall determine respective personnel requiring risk assessment before reporting to designated posts or as part of demobilization;
- c. DRTs shall ensure prompt referral of team members to nearest CGMED clinic to assist in contact tracing and quarantine measures;
- d. CGMED personnel to establish travel history and exposure of PCG personnel in reference to latest BOQ Decision Tool;
- e. DRTs personnel determined to be probable cases shall secure in temporary holding areas for PCG personnel until turnover to CGMED personnel;

5. Units Afloat

- a. PCG personnel assigned aboard ship shall strictly observe infection control measures for COVID-19 at all times.
- b. All ship's crew and riders must undergo screening prior boarding respective vessels.

- c. Personnel who may exhibit symptoms while vessel is afloat shall be classified as "suspect" immediate referral to medical for appropriate care and shall be put in designated isolation room for quarantine.
- d. Upon arrival from deployment, ship's crew and riders who have close proximity to a confirmed case shall be subjected to medical assessment and shall undergo appropriate test.

VIII. RESCISSION:

All procedures inconsistent with this SOP are hereby rescinded.

IX. EFFECTIVITY

This SOP shall take effect upon publication

BY COMMAND OF ADMIRAL URSABIA JR PCG:

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