

Regional Cluster: Health Cluster Operations Protocol [Health Services (Public Health and Hospitals), Water, Sanitation and Hygiene (WASH), Nutrition, Mental Health and Psychosocial Support (MHPSS)]

1. RATIONALE

In emergencies and disasters, delivery of appropriate and timely public health and medical interventions is critical in order to save lives and decrease preventable mortalities, morbidities, injuries and disabilities. The Health Cluster is comprised of the health emergency management systems of the Department of Health which was tasked to lead four (4) key sub-clusters: 1) Health (Public Health and Hospitals) 2) Water, Sanitation and Hygiene (WASH), 3) Nutrition and 4) Mental Health and Psychosocial Support (MHPSS) clusters each of which answers defined outcomes and objectives in the response plan working harmoniously with one another and with other clusters in large scale disaster response in the country.

2. OBJECTIVE

The Health Cluster comprised of the Health, WASH, Nutrition and MHPSS sub-clusters of the DOH aims to provide support for the delivery of appropriate and timely health services to the affected population.

3. CONCEPT OF OPERATIONS

The DOH Central Office oversees the entire operations and response of the health sector while the Regional Health Office coordinate closely with the LGU and provides technical as well as logistical support as necessary. In the event of a disaster, whose magnitude requires the Regional Health Office to request for assistance, the DOH Central Office together with the unaffected regions will provide necessary and appropriate assistance to the affected LGU. Under the supervision of the Regional Health Office, the DOH retained hospitals provide health services to the affected population. On the other hand, the district hospitals in the affected LGU are under the supervision of the provincial government. In a worst case scenario, where the local and regional health sector is non-functional, DOH Central Office/ non-affected Regional Office will assume operational control.

The following are the key players and actors in the implementation of this concept.

Lead Cluster: Department of Health MIMAROPA

a) Department of Health (DOH)

i. Pre-Disaster Phase (Health, WASH, Nutrition, and MHPSS)

- a. Release alert memo to all RHO
- b. Activate SMART Infoboard

- c. Raise code alert as appropriate
- d. Inventory of logistics (both CO and RHO)
- e. Preposition of logistics in RHO
- f. Stand-by Response Team
- g. Continuous monitoring and dissemination of information updates
- h. Close coordination with the corresponding DRRMC

ii. During Disaster Phase (Health, WASH, Nutrition, and MHPSS)

- a. DOH hospitals and RHO in affected regions will provide pre-hospital and hospital care
- b. Provide patient conduction
- c. Report and coordinate with advanced command post of the affected LGU
- d. Attend coordination meetings if any
- e. Continuous monitoring and reporting across levels

iii. Post-Disaster Phase

- 1. Health (Public Health and Hospitals)
 - a. Conduct Rapid Health Assessment (RHA)
 - b. Surveillance in Post Extreme Emergencies and Disaster (SPEED) activation
 - c. Deploy of medical teams to evacuation centers and priority communities
 - d. Augment logistics
 - e. Provide health services (e.g. general consultation and treatment, vaccinations, reproductive health services, chemoprophylaxis, health education, promotion, and advocacy including hygiene, nutrition, and psychosocial support, etc.)
 - f. Provide hospital services
 - g. Perform patient referral/ conduction to other hospitals
 - h. Provide continuous monitoring and reporting
 - i. Attend coordination meetings
 - j. Coordinate health sector response
 - k. Conduct health facility assessment, immediate cleaning/clearing activities, and repair to restore functionality
 - l. Participate in the conduct of PDNA/DANA/DALA and other assessments
 - m. Prepare recovery and rehabilitation plan
 - n. Documentation

2. WASH

- a. Assist in Rapid WASH Assessment
- b. Augment WASH logistics (e.g. water containers, water disinfectants, hygiene kits, water testing reagents, fund/supplies for toilet construction, and other WASH commodities)
- c. Augment provision of safe drinking water through the mobilization of water treatment units, water distribution tanks, and water storage tanks
- d. Coordinate the provision/distribution of adequate water supply for domestic use; installation/construction of toilet facilities; repair/restoration of water facilities; hygiene promotion from WASH cluster members and partners

- e. Provide technical assistance: installation and construction of toilet facilities; waste management; vector control
- f. Assist in continuous water quality monitoring
- g. Continuous monitoring and reporting of WASH activities and services
- h. Conduct coordination activities regarding WASH Cluster response
- i. Participate in the conduct of PDNA/DANA/DALA and other assessments
- j. Prepare recovery and rehabilitation plan
- k. Documentation

3. Nutrition

- a. Assist in Rapid Nutrition Assessment
- b. Augment Nutrition logistics (e.g. Vitamin A, multiple micro-nutrient packs, ferrous sulfate and folic acid, MUAC tapes, weighing scale, weight-for-height reference table, height board, breast-feeding kit)
- c. Coordinate the following: provision of ready-to-use supplementary and therapeutic food (RUTF/RUSF); human milk banking from Nutrition cluster members and partners
- d. Assist in the conduct of general and blanket supplementary feeding
- e. Coordinate the mobilization of nutrition assessment teams, infant feeding, and breast-feeding support groups
- f. Assist in the referral of severely malnourished patients to appropriate facilities
- g. Continuous monitoring and reporting of Nutrition cases and interventions
- h. Conduct coordination activities regarding Nutrition Cluster response
- i. Participate in the conduct of PDNA/DANA/DALA and other assessments
- j. Prepare recovery and rehabilitation plan
- k. Documentation

4. MHPSS

- a. Assist in Rapid MHPSS Assessment
- b. Augment psychotropic medications
- c. Coordinate the mobilization of MHPSS teams
- d. Assist in the following: provision of psychological first aid; activation of community and family support systems; and provision of other specialized MHPSS services
- e. Assist in the referral of cases to higher level of care
- f. Continuous monitoring and reporting of MHPSS cases and interventions
- g. Conduct coordination activities regarding MHPSS Cluster response
- h. Participate in the conduct of PDNA/DANA/DALA and other assessments
- i. Prepare recovery and rehabilitation plan
- k. Documentation

***In the event of mega disaster (e.g. Typhoon Yolanda),**

- a. Assume command and control by DOH CO or other non-affected RHO
- b. Mobilize all resources of the DOH to the affected regions
- c. Prioritize response over regular activities by all DOH offices and attached agencies

B. Cluster Member Agency (These are the other agencies that are needed to support the DOH, in its role as the Lead Agency for the Health Cluster. The following are the respective roles of the different agencies in support of the Health Cluster.)

Commented [M1]: Identify if activities are Pre-, During or Post-Disaster

a. Department of Social Welfare and Development (DSWD)

1. Assist in the provision of medical and health emergency services to the affected population in coordination with the Health Cluster Lead or the head of the deployed emergency health teams
2. Ensure the provision of facilities within evacuation centers that would be conducive to good health outcomes (e.g. breastfeeding corner, spaces for pregnant and lactating mothers, gender sensitive toilet and bathing facilities, medical consultation area, priority lane for vulnerable population etc.)
3. Take the lead in the provision of MHPSS services in evacuation centers and refer to the Health Cluster patients needing specialized care
4. Coordinate with Health Cluster regarding milk donations

b. Office of the Civil Defense (OCD)

1. Assist Health Cluster in the transport of medical teams and health logistics
2. Provide space in OCD logistics hubs for prepositioning of health logistics
3. Refer health related donations to the Health Cluster for clearance prior to acceptance
4. Refer foreign health teams to the Health Cluster for registration, coordination and deployment except for foreign military teams
5. Copy furnish Health Cluster with the post mission of the health component of foreign military teams involved in medical missions
6. Provide Health Cluster access to emergency telecommunications facilities

c. AFP

1. Provide security for health teams and logistics in areas with conflict or insurgencies
2. Provide transport for Health Cluster personnel and logistics
3. Coordinate with Health Cluster on the movement and activities of the AFP and foreign military health personnel
4. Coordinate with the Health Cluster alive victims from search and rescue operations
5. Take the lead in the provision of MHPSS services for military personnel and families and refer to the Health Cluster patients needing specialized care
6. Provide Health Cluster access to use of military health facilities
7. Provide Health Cluster reports on medical missions conducted

d. Department of the Interior and Local Government (DILG)

1. Facilitate coordination of DOH with LCE for Health Cluster Operations
2. Assist the Health Response Teams in coordinating with the LCEs

e. Philippine National Police (PNP) through the Health Service and Women and Children Protection Center.

1. Provide security for health teams and logistics in disaster areas
2. Provide transport for Health Cluster personnel and logistics if available

3. Coordinate with Health Cluster on the movement and activities of their health personnel
4. Refer to the Health Cluster victims of violence and patients needing specialized care
5. Provide Health Cluster access to use of police health facilities
6. Provide Health Cluster reports on medical missions conducted

f. Bureau of Fire Protection (BFP)

1. Coordinate with Health Cluster on the movement and activities of their health personnel
2. Assist Health Cluster in the distribution of water supply, and cleaning/ clearing of health facilities
3. Provide Health Cluster reports on medical missions conducted

g. Department of Education (DepEd)

1. Ensure the provision of facilities within schools used as evacuation centers that would be conducive to good health outcomes (e.g. breastfeeding corner, spaces for pregnant and lactating mothers, gender sensitive toilet and bathing facilities, medical consultation area, etc.)
2. Take the lead in the provision of MHPSS services in schools and refer to the Health Cluster patients needing specialized care
3. Assist in school-based surveillance and vaccination activities upon Health Cluster request

h. Department of Transportation and Communication (DOTC) through the Philippine Coast Guard (PCG)

1. Provide security for health teams and logistics during sea travel in high risk areas
2. Provide transport for Health Cluster personnel and logistics
3. Provide access to use of air and sea assets for emergency medical evacuation
4. Coordinate with Health Cluster on the movement and activities of their health personnel
5. Provide Health Cluster access to use of PCG health facilities
6. Provide Health Cluster reports on medical missions conducted

i. Department of Foreign Affairs (DFA)

1. Coordinate with Health Cluster the entry, processing, and deployment of Foreign Medical Teams (FMT) and other health related teams
2. Coordinate with Health Cluster regarding foreign donations

j. Department of Science and Technology (DOST)

1. Provide Health Cluster with regular updates of weather changes with advisories on possible hazards

k. Department of Environment and Natural Resources (DENR) through MGB 1. Provide Health Cluster with regular updates on landslide alert

l. Philippine Red Cross (PRC) 1. Assist in Health Cluster Operations 2. Assist Health Cluster in the provision of logistics 3. Provide Health Cluster reports on relevant activities conducted

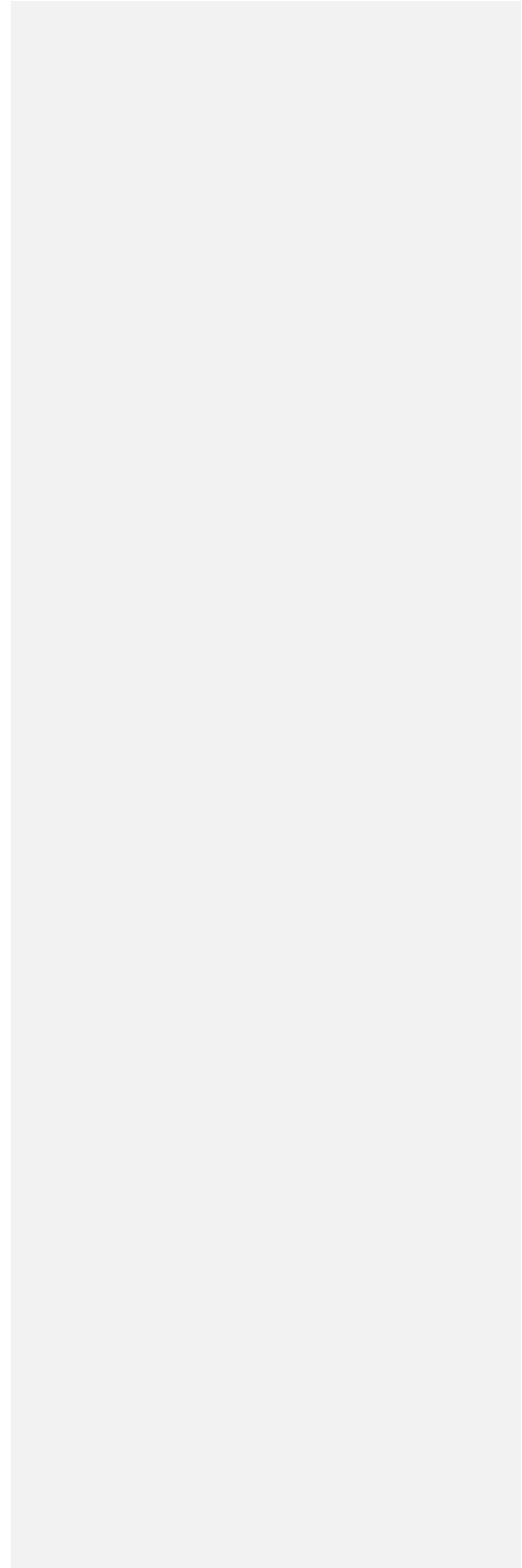
m. Volunteers/Civil Society Organizations/ and other Health Sector Partners

1. Coordinate with the Health Cluster in the conduct of Health Cluster Operations activities (e.g. registration, deployment, assignment, etc.)
2. Provide Health Cluster reports on Health Cluster Operations activities conducted

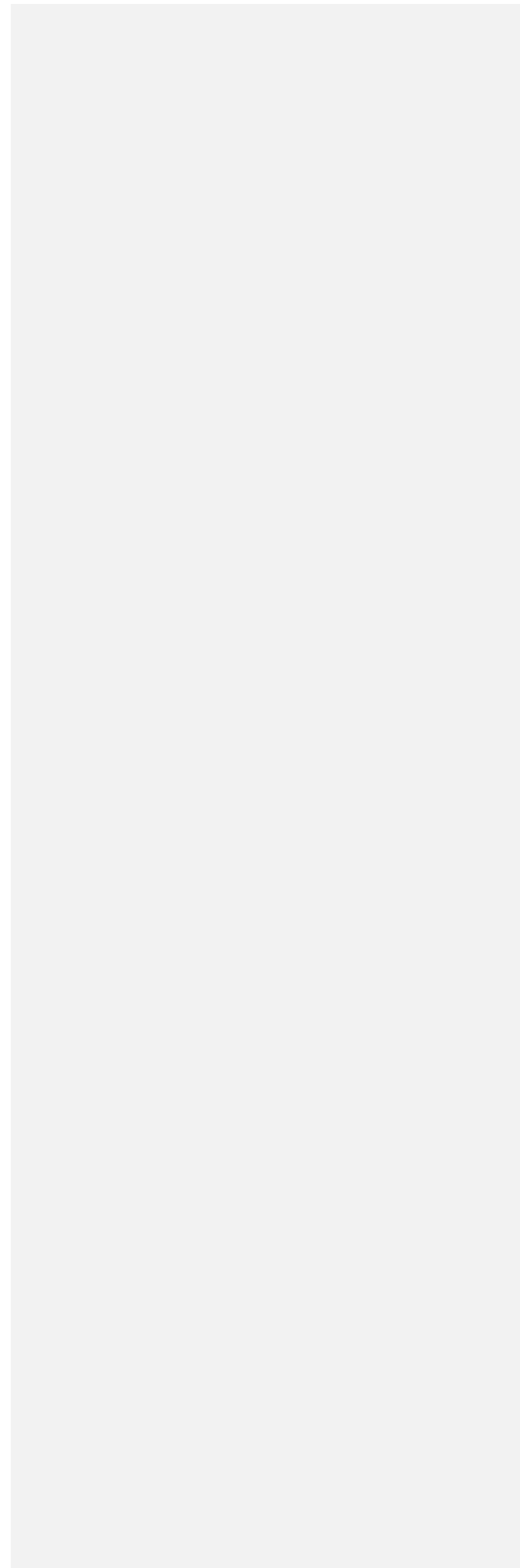
4. CONCEPT OF SUSTAINMENT

- a) The DOH as Cluster Lead will coordinate all support and requirements of the Health Cluster in their activities to augment the requirements at the affected areas during disasters.
- b) Concerned government agencies and their subordinate offices shall utilize their respective internal personnel. Additional personnel requirements shall be coordinated through the NDRRMC in collaboration with all Council members.

Pre-Disaster Phase
Department of Health



During Disaster Phase



Post Disaster Phase

