

Technical Guide Notes Barangay Disaster Risk Reduction and Management Plan and Committee (English)















Barangay Disaster Risk Reduction and Management Plan and Committee Technical Guide Notes

I. PRIMARY INFORMATION ABOUT THE BARANGAY:

The following required information may be culled out from the Barangay Development Plan:

- A. Physical, Environmental and Geographical Characteristics of the Barangay
 - a. Location and Territory
 - b. Bodies of Land and Water
- B. Information on Population and Residence
 - a. Population based on Gender/Sex
 - b. Population according to age
 - c. Number of houses according to Built (materials used)
 - d. Number of Houses according to Type of Ownership

Description per category:

- Owned the house and the land on which it stands are owned by the occupant.
- Rented the house they live-in is owned by someone else and they only pay for its use per month or depending on what is agreed by both parties.
- Shared with owner living with the homeowner. It can be paid or free to live in the house.
- Shared with renter they live under the same roof and provide a share of the rent to one or more families or individual tenants as well.
- Owned (House) the house is owned, but the land is not theirs/occupied for free by the landowner (rural communities: Farmers/Fisherfolks, IPs etc.)
- Informal Settler Families (ISF) the house is located in an area without asking permission from the owner or they illegally built the house there even if it is owned by the government or a private individual.
- C. Information on Livelihood
 - a. Primary Livelihood of Residents in the Barangay
- D. Infrastructures and Institutions that provide service to the Barangay
- E. Buildings and other Infrastructures in the Barangay
- F. Primary Facilities and Services in the Barangay
- G. Inventory of Institutions, Sectors, and other Volunteer Groups in the Barangay (Including those related to the environment, health, etc.)
- H. Inventory of Human Resources

II. BARANGAY DISASTER RISK REDUCTION AND MANAGEMENT COMMITTEE (BDRRMC)

The Barangay Development Council (BDC):

The Barangay Development Council (BDC) will serve as the Local Disaster Risk Reduction and Management Council in the barangay level, and will coordinate directly with the Barangay Disaster Risk Reduction and Management Committee (BDRRMC). The responsibilities of the BDC are as follows:

- I. Approve, monitor and evaluate the implementation of the Barangay Disaster Risk Reduction and Management Plan (BDRRM Plan), and conduct regular reviews and tests to ensure that it remains compliant with other programs and plans in the national and local levels;
- 2. Ensure that disaster risk reduction (DRR) and climate change adaptation (CCA) are embedded in the plans, programs and budget at the local level, as a strategy for continuous development and poverty reduction;
- 3. Recommend and implement forced or preemptive evacuation for residents, when needed; and
- 4. Conduct meetings with the Barangay Development Council (BDC) once every three months, or as needed.

The Organization of the Barangay Disaster Risk Reduction and Management Committee (BDRRMC):

The Barangay Disaster Risk Reduction Management Committee (BDRRMC) is a committee of the Barangay Development Council (BDC) mandated by law, the Republic Act 10121, also known as the 'Philippine Disaster Risk Reduction and Management Act of 2010'. The NDRRMC-DILG-DBM and CSC JMC No. 2014 -1 also state the "implementing guidelines" in establishing the LDRRMOs at BDRRMCs at the local government to manage and lead the safety measures and protocols to be observed by members of the community. The said committee shall lead in the implementation of programs and activities within the barangay in order to prevent or mitigate the effects of impending emergencies and disasters on the residents, households, livelihoods, and other elements of the barangay.

The committee is comprised of members coming from various sectors, such as education, religious organizations, and representative from different organizations within the barangay. The committee is led by the Punong Barangay as chairperson.

The identified sectors must have an active and meaningful role in the process of planning, implementation, monitoring, and evaluation of all activities stated in the BDRRM Plan and Committee. Examples of these are: children sector, youth sector, women's sector, elderly, persons with disabilities, among others. Their participation in the BDRRMC should be established, through an Executive Order from the Punong Barangay or through a resolution from the Sangguniang Barangay.

The primary basis for inclusion in the above-mentioned sectors of the BDRRMC is being a duly-recognized organization with active programs or projects within the barangay. A legitimate organization should have a certification from any relevant government agency or the local government unit (LGU). These groups should also actively participate and contribute to the development programs of the barangay.

If they are not yet registered with any government agency, they may submit a letter to the barangay for them to be recognized as a legitimate organization. Please refer to DILG MC No. 2018-146 for the guidelines on the accreditation of NGOs and their membership to the barangay-based institutions like the BDRRMC.

Various government agencies such as DILG, LGA, OCD and others are providing relevant training and orientation to continuously strengthen the capacity of BDRRMCs to perform their duties efficiently. The result of the QAS for BDRRMP/C is also one of the bases of these agencies in providing technical assistance.

The BDRRMC shall create an organogram (organizational structure) which lists the respective tasks and responsibilities of each sub-committee. The number of sub-committees will depend on the context of the area or barangay.

RESPONSIBILITIES AND ACTIVITIES OF THE BDRRMC

The Barangay Disaster Risk Reduction Management Committee (BDRRMC), under the Barangay Development Council (BDC), is tasked to do the following responsibilities, without bias:

- 1. Set the overall direction, development, reform and coordination of the barangay's programs on Disaster Risk Reduction and Management (DRRM);
- 2. Ensure that all programs, design, and coordination work in the Disaster Risk Reduction Management (DRRM) adheres to the rules and regulations of the National Disaster Risk Reduction and Management Council (NDRRMC);
- 3. Manage and support risk assessment at contingency planning activities;
- 4. Gather local information related to natural hazards or risks, vulnerabilities or weaknesses, and develop and maintain risk maps in the barangay;
- 5. Organize and conduct trainings and orientations related to DRRM to members of the community;
- 6. Assign a Focal Person per thematic area (prevention and mitigation, preparedness, response and recovery and rehabilitation), who will ensure that all approved programs and activities are duly implemented;
- 7. Ensure that there is a representative from the Barangay Council for the Protection of Children (BCPC), as well as a focal point for the barangay violence against women and children desk;
- 8. Conduct and implement a comprehensive and unified local plan, based on the instructions of the NDRRMC;
- 9. Develop and submit the Barangay Disaster Risk Reduction and Management Plan (BDRRMP) to the Sangguniang Barangay, through the Barangay Development Council (BDC).
- 10. Prepare and submit the annual budget of the BDRRMP and programming of the BDRRM Fund to the Sangguniang Barangay, through the BDC; and
- II. Ensure that all used and damaged supplies are replenished or replaced in preparation for any impending calamity or emergency.

- 12. Organize, train and strengthen the capacities of emergency response teams and volunteers;
- 13. Organize, train and strengthen the capacities of Barangay Health Emergency Response Teams (BHERTs), which are comprised of: Executive Officer, Barangay Tanod, and two (2) Barangay Health Workers (it is preferred that at least one of them is a nurse o midwife) for every 5,000 persons in the barangay;
- 14. In the event of a health emergency (epidemic/pandemic), the following shall be the responsibilities of the BDRRMC, according to Section VIII, Letter G of IMC 2020-01 of the DILG, DOH, NEDA at DICT:
 - a. Ensure that residents have a Philhealth Identification Number;
 - b. Conduct community programs or activities related to prevention, monitoring and first-line response;
 - c. Partner with NGOs, CSOs, and other institutions in the implementation of appropriate and approved strategies to control and contain the epidemic/pandemic; and
 - d. Support the following activities:
 - i. Implement preventive measures through the BHERTs
 - ii. First response to be led by the BHERTs
 - iii. Assist in the conduct of contact tracing, as assigned by the City or Municipal Health Officer; and
 - iv. Assist in transporting patients.
 - e. Other activities and tasks stated in the JMC.

Theme	Tasks/Activities		
Prevention and Mitigation	Conduct a research/study on the vulnerabilities and strengths/capacities of the barangay;		
	Ensure that there is coordination between the barangay and the city or municipal government which it is part of, in order to access pertinent data, documents, researches, maps, health hazards, etc.;		
	Lead in the implementation of plans relating to DRRM/CCA and Health Emergency;		
	Suggest and support the implementation of laws relating to DRRM/CCA and Health Emergency;		
	Assist in the implementation of laws, programs and activities geared towards reducing the impact or damage caused by disasters or emergencies in the barangay;		
	Lead tree and Mangrove-planting initiatives;		
	Comply with and implement laws on proper solid waste management.		
	Provide trainings to the response teams and other members of the BDRRMC to capacitate them for quick and immediate response during disasters; and		
	Coordinate and work with the Barangay Health Stations (BHS) and Rural Health Units (RHU) in the conduct of activities that will increase the awareness and knowledge of residents on proper nutrition and safety practices.		

Theme	Tasks/Activities		
Preparedness	Lead in the implementation and development of barangay plans relating to DRRM/CCA/Health Emergency and response (e.g.: BDRRM Plan, Contingency Plan, Public Service Continuity Plan); Strengthen the partnership with different People's Organizations, Sectoral Groups, NGOs, CSOs, and other local agencies of the government to jointly conduct trainings and capacity building activities related to DRRM, climate change adaptation and public health;		
	Conduct regular simulation exercises or drills to prepare for the identified primar hazards and risks.		
	Disseminate information on disaster preparedness, and other types of emergencies to all residents of the barangay, especially those living in disaster-prone areas;		
	Ensure that the Barangay Council for the Protection of Children (BCPC) is active and receives regular training on child protection, particularly for children with disabilities, before, during and after emergencies;		
	Conduct trainings for persons who will respond to the needs of vulnerable groups, such as women, expecting mothers, elderly, persons with disabilities, etc.		
	Ensure that the plans and activities of the school and barangay are coordinated;		
	Ensure that there are adequate equipment and supplies necessary in preparing for and responding to emergencies;		
	Ensure that there are working and complete communication devices, as well as a reliable system to regularly update and coordinate with authorities;		
	Lead in the development of plans, including mechanisms and systems on how to implement, monitor, and evaluate programs, projects and activities of the barangay on DRRM-CCA, as well as public health issues;		
	Ensure that there is ample participation of representatives from the children's sector, youth, women, expecting mothers, breastfeeding mothers, persons with disabilities, elderly, indigenous groups, and other sectors within the barangay, in the conduct of planning, research, and implementation of programs, projects and activities related to DRRM-CCA;		
	Ensure that all members of the BDRRMC are provided with adequate information on laws, such as RA 10121, RA 9729, RA 10821, RA10174, RA 9003 and other policies related to DRRM-CCA, health emergency, conflict, among others:		
	among others; Ensure that there is adequate and working Early Warning System, based on the identified hazards and risks, such as calamities, health emergency, conflict, among others;		

Theme	Tasks/Activities	
Preparedness	Ensure that the school's Early Warning System is coordinated and in accordance	
•	with the Early Warning System of the barangay;	
	Ensure that the barangay's Early Warning System is coordinated and in accordance with the Early Warning System of the city or municipality it is part of;	
	Ensure that there is adequate supply of food and non-food items, as well as equipment that will respond to the needs of children, women, and other vulnerable groups during times of calamities, health emergencies, conflict, and others;	
	Ensure adequate personal protective equipment (PPE) for response teams;	
	Ensure ample supply of food and non-food items, as well as equipment, inside schools that can be used by students and teachers during times of emergencies;	
	Ensure that there is proper, secure, and adequate number of evacuation centers and isolation facilities to be used in times of calamities, health emergencies, conflict, and others;	
	Develop systems that include primary data necessary in planning and response;	
	Ensure that there are funds allocated for the implementation of programs, projects and activities related to DRRM-CCA, and public health;	
	Conduct advocacy projects that will heighten the awareness and knowledge of residents on proper nutrition and health and safety protocols and practices; and	
	Ensure the BHERT's provision of health education to the residents of the barangay, that is in accordance with the DOH Risk Communication for Epidemic/Pandemic Health Situation.	
Response	Activate the Barangay Operations Center (24/7);	
	Activate the Comprehensive Emergency Program for Children (CEPC);	
	Activate the Incident Command System (ICS);	
	Ensure that the evacuation centers and isolation facilities have adequate equipment and supplies, in accordance with the law;	
i	Provide factual and timely information, as well as early warning to the community, for the immediate and safe evacuation of residents, particularly those living in disaster-prone areas;	
	Coordinate with authorities in order to access factual information on the early warning;	
	Conduct immediate assessment and evaluation of the affected population and submit the report to the authorities;	

Theme	Tasks/Activities		
Response	Record the number, names age and gender of those who need immediate assistance, especially those belonging to the vulnerable sectors, such as children, children with disabilities, expecting mothers, breastfeeding mothers, elderly, elders with disabilities, and others. Submit this report to the BDC and M/CDRRMO for immediate assistance and aid;		
	Conduct search, rescue and retrieval operations, in coordination with the authorities;		
	Conduct clearing operations after the disaster or calamity to ensure the cleanliness of the community and safety of the residents;		
	Coordinate with the city or municipality for the declaration of 'state of calamity';		
	Activate all groups or volunteers that can assist in the response;;		
	Conduct an immediate meeting to discuss the response plan;		
	Ensure the proper management of Evacuation Centers, in accordance with the protocols of the Camp Coordination and Camp Management;		
	Designate breastfeeding stations, child-friendly space, women-friendly space, WASH facilities, etc. inside the evacuation centers;		
	Designate separate restrooms for males, females, and persons with disabilities;		
	Monitor patients, or persons with communicable ailments to prevent the spread of disease inside the evacuation centers;		
	Regular and proper reporting of identified patients to the rural health unit or any available doctor or medical personnel near the evacuation center;		
	Immediate isolation of persons identified with communicable diseases inside the evacuation centers; and		
	Ensure that all Essential Health Service Packages (EHSP), such as Medical and Public Health, including the Minimum Initial Service Package (MISP) for Sexual and Reproductive Health (SRH), Mental Health and Psychosocial Support (MHPSS), Water Sanitation and Hygiene (WASH), at Nutrition in Emergencies, can be accessed from the barangay health centers and evacuation centers, through the coordination with members of the Health cluster.		

Theme	Tasks/Activities		
Response	During an epidemic/pandemic:		
	Ensure that health protocols are being observed by residents of the barangay;		
	Conduct an early identification of the affected population and submit the report to the City/Municipal Health Officer;		
	Conduct regular visitation in the homes of afflicted persons and persons under monitoring (PIM);		
	Respond to the immediate needs of the affected population, particularly in providing basic necessities, as well as identify if they need to be isolated from the rest of their families;		
	Conduct contact tracing;		
	Assist in managing isolation facilities and ensure ample supplies and equipment, in coordination with the City/Municipal Health Office;		

Theme	Tasks/Activities	
Response	Maintain regular coordination with the City/Municipal Health Office; and Coordinate with the LGU for the updated health protocols in the city or municipality.	
Recovery and	In partnership with the C/MDRRMO, and other local government agencies,	
Rehabilitation	assist in the conduct of damage assessment, recovery and rehabilitation in the covered areas, and	
	Conduct consultations with different representatives within the barangay, including vulnerable sectors: children, persons with disabilities, women, elderly, indigenous groups, CSOs, and others, to solicit recommendations for the immediate and sustainable solutions to the impact of calamities or pandemic to the barangay.	

III. PARTICIPATORY COMMUNITY RISK ASSESSMENT (PCRA):

The Participatory Community Risk Assessment (PCRA) is a method of identifying risks or dangers that could be encountered, as well as the extent of damage these risks may cause to the community. This is conducted through a collective inquiry of the strengths and opportunities present within the barangay to help lessen the risks and dangers.

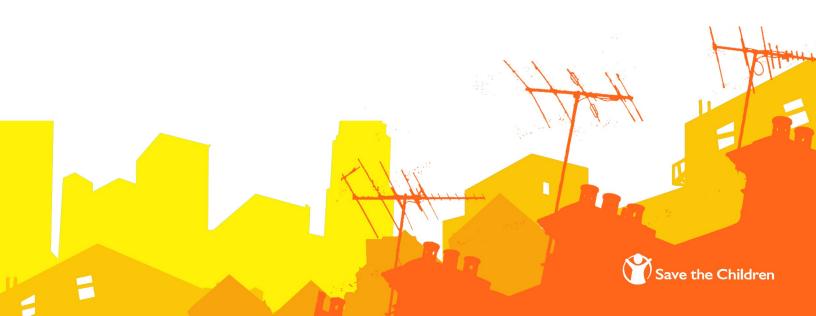
The PCRA is jointly conducted by different sectors in the community, including representatives from the children sector, youth, persons with disabilities, elderly, women and other vulnerable groups.

Component	Process Description	Reference/Data Source
Participatory Community Risk Assessment (PCRA) I. Identifying calamities or disasters in the past years and their impact to the community	Review previous calamities experienced by the community in the last 10 to 50 years. List down the impacts on the population, facilities, etc. Indicate the number, worth or percentage of damage to properties. Cite the source of the information/data. Disaster impacts: Number of casualties - write the number or percentage of the population affected according to the categories. Damage to property - write the number, amount or percentage of damages. Similar to farm and animals (e.g. carabao or cow). Poultry and fowls (eg chickens, ducks or ducks). The term farm and animals are the animals that help farmers in tilling the land, planting, harvesting and other farm works.	RDANA, PDNA, LGU Disaster Reports

Component	Process Description	Reference/Data Source
Participatory Community Risk Assessment (PCRA) 2. Identifying possible risks or dangers that could affect the barangay	Coordinate with the office of the MDRRMO o MPDO and request hazard or risk maps, and other information related to hazards that may occur in the barangay.	Hazard or risk maps from PHILVOCS, PAGASA, MGB/DENR or the city/municipality
<i>3</i> /	Identifying possible hazards and risks based on scientific data or through the experience of the residents of the barangay.	https://hazardhunter.georisk.gov.ph/
	List down on the first column all the hazards that can affect the barangay — whether natural, man-made or health emergency. For a list of Health Hazards, refer to Annex A.	
	On the second, third and fourth column, put a number (refer to the scale: I to 5), depending on the analysis of the status of the barangay. Add the numbers on the three columns, then divide by 3 to get the average.	



Component	Process Description	Reference/Data Source
3. Vulnerabilities or Weaknesses of the Barangay	Factors in determining the vulnerabilities and capacities of the barangay:	
4. Capacities or Strengths of the Barangay	 Physical and Material Location (Is it safe or disaster-prone?) Design of buildings (materials used) Economic activity (livelihood and other skills, bodies of land and water, livestock, capital, access and control of production) Infrastructures and services (roads, health fcilities, schools, electricity, communication, transportation, housing, etc.) Human capital (mortality rate, diseases, nutritional status, population literacy, and poverty level) Environmental factors (forests, soil quality, erosion, etc.) Social or Organizational Population composition and quality (Are there more children/youth or elderly? Is there a large percentage of vulnerable groups?) 	



Component	Process Description	Reference/Data Source
3. Vulnerabilities or Weaknesses of the Barangay	 Laws and administrative structures Decision structures Levels of participation 	
4. Capacities or Strengths of the Barangay	 Divisiveness/disagreements (ethnicity, race, religion, ideologies, political leanings, language, structures and methods of mediating during conflict) Justice system/ lack of justice, equality, opportunities/space to participate in political processes. Community organizing (formal/informal, traditional or government) Relationship with government Unity or connectedness 	
	Motivational or Attitudinal	
	 Attitude towards change Possessing the ability to affect change in their immediate environment and do what is right Initiative (or lack of initiative) Faith, determination, and fighting spirit Belief system, ideologies, at and sense of pride Belief in fate/luck, hopelessness, loss of faith 	
	Dependency/independenceAwareness, unity, and cooperation	



Component	Process Description	Reference/Data Source
3.1 Public Health Vulnerability	Refer to Annex D for the Public Health Vulnerability Assessment Matrix Identify areas that are most vulnerable to hazards. List down the purok/sitio that are disaster-prone. Consider the following parameters in identifying the vulnerabilities of the community: • Access to health and medical services in the affected areas; • The state of health or populations at risk, based on their health service coverage, population immunity, disease burden, etc. • Social determinants of health, such as access to good housing, potable water, sanitation, education, etc. • Presence of vulnerable groups in the affected areas • Social and organizational aspects: health leadership, decision-making structures, administrative structures, institutional arrangements, and community participation • Attitudinal and motivational aspects of the residents: value of health, being open or acceptable to change, understanding their role in reducing health risks, initiative, and cooperation Refer to Annex E for the example	

Component	Process Description	Reference/ Data Source
5. Map of the barangay, which shows the different risks or hazards that could affect the residents and cause damage to the community	Coordinate with the C/MPDO o C/MDRRO and request for copies of the barangay's hazard maps, which indicate possible risks — natural or man made. (e.g. flood-prone and landslide-prone areas, etc.)	City/Municipal hazard maps that can be obtained at the MDRRM Office or the risk profile, hazard maps, etc. of the city or municipality
	All possible risks and hazards that may occur within the barangay should have a map. Indicate in the map the designated evacuation centers, as well as the safe evacuation routes.	GeoRisk maps can be generated from the GeoRisk Philippines website through this link https:// hazardhunter.georisk.gov.p
6. Develop an exposure database of those that can be directly affected by risks and hazards	The Exposure Database contains information on the different elements that may be affected by calamities and disasters, such as population, property, infrastructures, livelihood, and natural resources, which are found within disaster-prone areas.	
6.1.1 Number of families and individuals, according to age and health condition, who are at risk from any type of risk or hazard	 Number of families and individuals, based on age and health condition, who may be affected by any type of risk or hazard: Column for number of families Column for number of individuals, according to gender, including members of the LGBTQ community Column for the number of children, according to age (the age bracket should be based on the law) Column for the number of persons with disabilities Column for the elderly, according to age Column for the persons who are sick (refer to table 6.2) 	RA 10821 "Children's Emergency Relief and Protection Act"

6.1.2 Detailed number of Persons with Disabilities Identify the number of persons with disabilities that may be affected by primary hazards and risks, according to age and gender (refer to the column on number of persons with disabilities on Table 6.1.1) 6.1.3 Number of families at risk of hazards and disasters per sitio/purok/block/street Identify the number of persons with disabilities that may be affected by hazards and risks, according the following columns:	Component	Process Description	Reference/ Data Source
of hazards and disasters per affected by hazards and risks, according the		disabilities that may be affected by primary hazards and risks, according to age and gender (refer to the column on number of	
 Column for the number families living in residences without title or legal documents Column for informal settlers Column for families with stable sources of livelihood Column of number of families with awareness or information on the possible effects of hazards and risks Column for the number of families with access to information, through radio, TV, newspaper, social media, etc. to receive announcements from authorities regarding the impending hazard or risk Column for the number of families with access to financial assistance provided by government or the private sector Column for the number of families with access to early warning system 	of hazards and disasters per	 affected by hazards and risks, according the following columns: Column for the number families living in residences without title or legal documents Column for informal settlers Column for families with stable sources of livelihood Column of number of families with awareness or information on the possible effects of hazards and risks Column for the number of families with access to information, through radio, TV, newspaper, social media, etc. to receive announcements from authorities regarding the impending hazard or risk Column for the number of families with access to financial assistance provided by government or the private sector Column for the number of families with 	CDRA

Component	Process Description	Reference/Data Source
6.1.4 Number of Persons with illnesses or communicable diseases (based on the data from the Health Center/MHO)	Coordinate with the Barangay Health Centers and Municipal Health Offices to obtain the number of individuals with serious or communicable diseases, based on the Priority Diseases/Syndromes and Conditions Targeted for Surveillance of the DOH.	DOH PIDSR Manual of Procedure
	Refer to Annex F for the list of priority diseases, symptoms and conditions to be monitored.	
7.1 Number of individuals at risk of hazards per purok or sitio, based on the following categories	Identify the number of individuals and families who may be affected by hazards and risks per purok, sitio, zone, block or street, according to three categories	
	Refer to the hazard maps provided by the C/MPDO or C/MDRRMO.	
	Do this for every type of hazard or risk that needs appropriate programs and interventions	
7.2. Inventory of equipment, infrastructures, establishments, facilities and livelihood that are at risk during hazards and disasters	Place on the second column the total number from the first column. Compute the percentage of the possible effect or impact in the event of a hazard or risk in the fourth column, insert the name of the place where it can be seen or located	Refer to the barangay profile or the Community-Based Monitoring System (CBMS)
	Do this for every type of hazard or risk that needs appropriate programs and interventions	
8. Primary issues or problems encountered by vulnerable groups, such as children and youth, women, expecting mothers, breastfeeding mothers, persons with disabilities (PWDs), senior citizens and indigenous groups, during calamities and disasters	The barangay may utilize different tools and methods to identify possible issues or problems that may be experienced by different vulnerable groups during times of natural or man-made disasters. Make use of the "Problem Tree Analysis" and other applicable methods.	

Component	Process Description	Reference/Data Source
Primary issues or problems encountered by vulnerable groups, such as children and youth, women, expecting mothers, breastfeeding mothers, persons with disabilities (PWDs), senior citizens and indigenous groups, during calamities and disasters (continuation)	After doing the "problem tree analysis" or other tools, confirm if the items identified on the table can be expected to happen in the barangay. Follow the instructions on the table. You may add items to the table, as needed.	DOH PIDSR Manual of Procedure
9. List designated evacuation centers at isolation facilities of the barangay, city and municipality (whether government or privatelyowned)	List all the designated evacuation centers within the barangay, whether owned by the government or the private sector. Under the column "Owner", check whether it is owned by the government or private.	
	Under the column "Inspected by an engineer", check whether "yes" or "no", and include the date of inspection. Indicate whether there was a memorandum of agreement or memorandum of understanding (MOA or MOU) for its use.	
	For quarantine facilities that will be used in times of health emergencies, such as pandemic or epidemic, provide similar information as what was done for evacuation centers.	
10. Inventory of evacuation centers or areas where families can relocate or stay during disasters	On the first column, indicate the areas in the barangay which are most prone to disasters.	
	On the second column indicate the number of families and individuals residing in the affected areas.	
	On the third column, indicate the number of families and individuals who will be directly affected by disasters and emergencies.	
	On the fourth column, indicate the name of evacuation centers owned by the government.	

Component	Process Description	Reference/Data Source
	On the fifth column, indicate the number of families and individuals who can be accommodated by government-owned evacuation centers. (Plan A).	
	On the sixth column, indicate the remaining number of families and individuals who cannot be accommodated by Plan A.	
	On the seventh column, indicate the names of privately-owned facilities that can be used as evacuation.	
	On the eighth column, indicate the number of families and individuals who can be accommodated by privately-owned evacuation centers.	
	On the ninth column, indicate the number of families and individuals who cannot be accommodated by neither Plan A or Plan B.	
II. List of places/areas where affected residents can evacuate during times of impending or current disaster	On the first column, write what level of risk/danger can be experienced in a particular area within the barangay according to three categories (Low, Medium and High)	
	On the second column, indicate the areas in the barangay which are most prone to disasters.	
	On the third and fourth column, indicate the actual number of families and individuals residing in the area.	
	On the fifth and sixth column, indicate the number of families and individuals who will be directly affected by disasters and emergencies.	
	Create a table per hazard/disaster identified (e.g.: tsunamis, fires, earthquakes, etc.).	

Component	Process Description	Reference/Data Source
12. List of places/areas where sources of livelihood can be evacuated (livestock, fishing boats, etc.	On the first column, indicate the safe evacuation areas for sources of livelihood, such as livestock (carabaos, cows, goats, poultry, etc), fishing equipment, (boats, fish nets, and other gears and paraphernalia), among others.	
	On the second column, indicate the place of origin where the items will be evacuated from.	
	On the third column, indicate the number of items that can be accommodated by the evacuation site.	
	Create a table per hazard/disaster identified (e.g.: tsunamis, fires, earthquakes, etc.).	
13. Inventory of prepositioned food and non-food items	On the first column, indicate the food and non-food items that can be utilized inn the event of an emergency or disaster. These items should be prepositioned or stored in the barangay or any designated warehouse.	
14. List of designated evacuation centers that will serve as distribution sites for relief goods (food and non-	On the first column, indicate the name of the name of the evacuation center or area where the relief distribution will take place.	Camp Coordination and Camp Management
food items)	On the second column, indicate what types of relief goods (food/NFI) will be distributed to the affected population.	

Component	Process Description	Reference/Data Source
	On the third column, indicate the quantity of relief goods that will be distributed to the affected population.	Camp Coordination and Camp Management
	On the fourth column, indicate the unit of measurement (weight, etc.) will be used.	
	On the fifth column, write the name of the beneficiary of the relief goods (head of the family).	
	On the sixth column, write the address of the beneficiary of the relief goods.	
I5. Distribution process of relief goods to affected families and individuals	On the first column, indicate the process of distribution of relief goods, whether it will be done in a designated evacuation center or will be distributed each household.	
	On the second column, indicate the origin or source of the relief goods (barangay, city, municipality, province, national, NGO and other possible sources of relief goods).	
16. Inventory of trainings and orientations attended by members of the BDRRMC	On the first column, list the different trainings and orientations that members of the BDRRMC should attend or undergo.	Listo si Kap
	Include trainings and orientations that the members have not attended yet. The trainings and orientations listed on the table should match those in the plan.	
	If the trainings and orientations listed on the table have been attended by the members, continue filling out the table up to the sixth (6th) column.	
17. Inventory of response equipment that can be utilized during calamities and disasters	On the second column, put a check if the identified equipment can be found in the barangay and if they are functional, put a cross if none.	Listo si Kap

Component	Process Description	Reference/Data Source
	Identified equipment that are not available in the barangay should be included in the plan (BDRRMP/AIP) for purchase. The equipment should be itemized based on the template. Chainsaw is optional, and may be purchased as needed.	Listo si Kap
18. Community-Based Early Warning System (EWS) for Natural, Man-Made, Conflict and Health Hazards (Refer to Health Alert Notification System)	The barangay's Early Warning System (EWS) should be based on the priority hazard identified on Annex B. There should be a specific EWS per type of hazard. This has to be coordinated with the city or municipality, and the neighboring barangay. EWS should also be coordinated with the school/s within the barangay. Refer to ANNEX G for the example of Early Warning System at the community level.	

IV. LEGAL BASIS OF THE BDRRM PLAN

Listed here are all the policies and other legal bases of the BDRRM Plan, from the national to local government, as well as other agencies. Include other barangay policies that may not be included in the list.

V. FULL BDRRM PROGRAM

Proseso ng pagtukoy ng mga programa, proyekto at gawain sa BDRRM.

Prior to identifying the programs, projects or activities that will be included in the BDRRM Plan, review the results of the Risk Assessment, which can be found at the beginning of the plan. Here is the recommended process of prioritizing the programs, projects and activities of the barangay:

I. With the members of the community, review the results of the Risk Assessment conducted, which includes information about the possible risks and hazards, vulnerabilities, as well as the capacities and strengths of the barangay.

2. List all the identified capacities and vulnerabilities using the template below:

Summary of Results of the Participatory/Community Risk Assessment

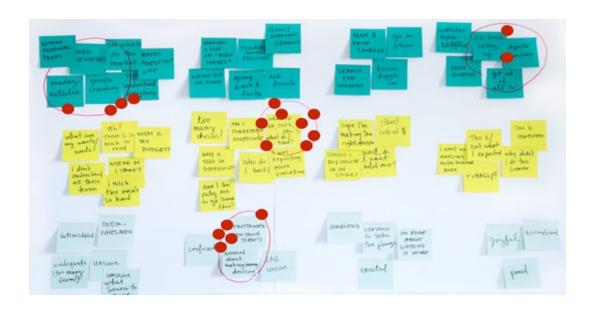
Category	Capacities (Refer to Part III. Participatory Risk Assessment, Number 4. Capacities and Strengths of the Barangay)	Vulnerabilities (Refer to Part III. Participatory Risk Assessment, Number 3. Vulnerabilities and Weaknesses of the Barangay)
Physical and Material		
Social and Organizational		
Attitudinal or Motivational		

Materials:

Metacards

Manila Paper / Easel Paper

3. From the list, identify the priority vulnerabilities that need to be addressed by the barangay. Make use of recommended tools, such as the Dot Voting or Pairwise Ranking, as seen below:



Option I: Dot-Voting (tool)

Dot-Voting is a simple tool or method used to identify the priority vulnerabilities that need to be addressed by the community, and will serve as basis for planning the programs, projects and activities for DRRM.

Materials:

Sticker dots

Pentel pen / Marker (alternative)

Each individual will be given dots (the facilitator will decide how many dots will be distributed).

Before voting, the facilitator shall discuss the importance and objectives of the activity.

For members of the community with disabilities, the facilitator can assign a person to help them vote.

After the orientation, and when all members have *dots*, the members will be allowed a few minutes to decide their votes before sticking the *dots* on the metacards.

				Rani	k-Ordering	g Example	9				
		Sample of	Rank-Orde	ering Issues: F	rom the First	Internationa	I Convocation	n, Houston 200	9		
Issue ID	Violence (V)	Balancing (B)	Poverty (P)	Restricted roles (RD)	Healthcare (H)	Empower ment (EM)	Education (ED)	Reproducti ve (RP)	Aging (A)	TOTAL	Rank
Jobs	1/\	,	P	J/RD	н	EM	ED	RP	,	3	7
Violence		~	P/V	· ·	н	EM	ED	RP	~	4	6
Balancing			Р	RD	н	EM	ED	RP	A	0	10
Poverty				P	Н/Р	EM	ED	RP	Р	5	5
Roles					н	EM	ED	RP	RD	2.5	8
Healthcare						EM	ED	H/RP	н	6	4
Empowerment							ED/EM	EM	EM	8.5	1
Education								ED	ED	8.5	1
Reproductive									RP	6.5	3
Aging										1	9

Option 2. Pair-Wise Ranking Tool

Pair-wise Ranking, which is also called *Preference Ranking*, is a method to identify the order of priority of the vulnerabilities mentioned.

Materials:

Manila Paper, Marker, Meta cards

On the top row, write the identified vulnerabilities, based on the results of the Participatory Risk Assessment. Refer to the sample table above.

On the space where the first vulnerability and second vulnerability intersect, compare and identify which one needs to be prioritized more. Do this to the remaining vulnerabilities until all items have been compared.

4. After identifying the priority vulnerabilities, the members can already determine what programs can be implemented to help address them. Write these down on Table V: full BDRRM Program on the template.

Table V. Full BDRRM Program

In identifying the programs, projects and activities (PPAs), ensure that vulnerable groups or sectors, such as the children, youth, persons with disabilities, elderly, women, etc. have ample representation in these meetings and they are able to give their recommendations.

Ensure, as well, that they will be able to benefit or derive from these programs, projects and activities.

Title	Description
Thematic Area /Program	Prevention & Mitigation , Preparedness , Response , Rehabilitation and Recovery
Priority Programs	Programs that respond to each DRR functional area (Prevention & Mitigation, Preparedness, Response, Rehabilitation and Recovery). These are usually comprised of other projects and activities.
Objectives of the Program	A short summary of why the program is implemented and what its objectives are.
Expected Results	What are the expected results in the implementation of the program?
Budget	How much are the needed funds to implement the program?.
Resources (non-monetary requirements)	Other non-monetary needs to implement the program.
Timeline	Number of years the program will be implemented.

Example:

Thematic Area / Program	Priority Programs	Objectives of the Program	Expected Results	Budget	Resources (non-monetary requirements)	Timeline
Prevention and Mitigation	Relocation of atrisk families	Households (families and individuals) will be safe during disasters	Evacuate 100 families living near the to safe ground	5,000,000.00	Human resource (facilitators)	3 years
Preparedness	Preparation of Evacuation Centers	Respond to the needs of evacuated families	Provide adequate and proper facilities and equipment in the evacuation centers	100,000.00	Medical supplies and equipment	3 years
Response	Evacuation and rescue operation	Evacuate the affected population, particularly members of the vulnerable sector/groups	Orderly conduct of the evacuation nd rescue operation	600,000.00	Fuel, Vehicles	3 years
Rehabilitation & Recovery	Provide livelihood activities to affected families.	Assist in providing livelihood to those who have lose their jobs or sources income due to the disaster	Provide a source of income for families who lost their livelihoods	300,000.00	Human resources	3 years



VI. PROGRAMS, PROJECTS AND ACTIVITIES (PPAs)

This section gives a more detailed description of the projects and activities indicated in the priority program.

Table VI. Programs, Projects and Activities

Title	Description
Thematic Area /Program	Prevention & Mitigation, Preparedness, Response, Rehabilitation and Recovery
Priority Program	Programs that respond to each DRR functional area (Prevention & Mitigation, Preparedness, Response, Rehabilitation and Recovery). These are usually comprised of other projects and activities.
Projects and activities implemented	Projects and activities indicated in the program
Annual Target	Based on the expected results (refer to Table V), determine the number or percentage of beneficiaries of the service/ program per year, or the number or percentage of projects and activities to be implemented. Refer to the number of affected population based on the Barangay Disaster Risk Profile. Example: 100 families per year 50 trees to plant per year
Expected Results	Expected results from the program per year.
Indicators	Measurable basis of the results of the project or activity. This is usually in the form of a percentage.



Title	Description
Allotted funds per year (YI, Y2, Y3)	The amount of funds necessary to implement the project or activity per year.
Source of funds	Where the funds will be coming from. Funds can either come from the barangay's budget, or from other sources, such as the municipality or province.
Person/committee responsible	Person or committee responsible for the implementation of the project or activity.
Roles of each member	Responsibilities or tasks of each person or committee in the implementation of the project or activity.

Turn to the next page to see the sample table.



VI. Program, Projects and Activities (PPAs)

THEMATIC AREA	Priority	Projects and	Annual	Expecte	Indicators	Allo	Alloted funds per year	ds	Source of funds	Person	Roles of each
	Frograms	activities implement	arget	d Kesuits		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	72	<u> </u>		Kesponsible	member
Prevention and	Relocation of at-risk families	Purchase land to serve as relocation site	Yrl: 2 hectares for 100 families	Purchase land to serve as relocatio n site	Total size of land puchased	. ξ	. o	2	LGU LDRRM fund, congressional fund	Brgy Captain and barangay council	Coordinate with the LGU in order to raise funds from other sources Pass a barangay resolution for the use of the land as relocation site
		Conduct a consultation with the families who will be relocated	At least two (2) consulta tions per year	The consultat ion has been conducte d with all affected families	Number of consultations conducted with affected families	10K	10K	10K	BDRRM fund	BDRRMC, Community facilitator	Conduct community organizing and consultations with affected families
		Relocation of families living in the coast	Y1: 30 families Y2: 30 families Y3: 40 families	affected families have been relocate d to safety	Number of families relocated	250K	250K	300K	LGU LDRRM fund, congressional fund	Brgy Captain,	Coordinate with government agencies for the relocation plan

THEMATIC AREA	Priority Programs	Projects and activities	Annual Target	Expecte d Results	Indicators	Allo P (amo	Allotted funds per year (amount in Peso)	ods (osa)	Source of funds	Person Responsible	Roles of each member
		pe				7	Y2	۲3			
Prevention and Mitigation	Relocation of at-risk families	Relocation of families living near the coast	Y1: 30 families Y2: 30 families Y3: 40 families	families have been relocate d to safety	Number of families relocated	250K	250K	300K	LGU LDRRM fund, congressional fund	BDRRMC	Prepare all necessary documents for the relocation
Preparedness	Preparing the evacuation centers	Purchase of generators	YI: I generat or	Ensure electricit y in the evacuati on centers even during blackout s	Number of generators purchased	100K	0	0	BDRRM fund	Brgy captain,	Canvass the cost of generators
		Make sure adequate and functioning restrooms	YI: 5 restroo ms	Adequat e and orderly restroo ms for males and females	Orderly	150K	0	0	BDRRM fund	BDRRMC	
Response	Evacuation and rescue operation	Evacuation and rescue operation	100% of affected families re evacuate d	Affected families are relocate d	Number of persons evacuated durng the disaster	200K	200K	200K	BDDRM Fund	BDRRMC	

THEMATIC AREA	Priority	Projects and Activities	Annual	Expecte d results	Indicators	Allo P (amo	Allotted funds per year (amount in Peso)	ods (osa)	Source of funds	Person responsible	Roles of each member
)	pe				Ιλ	Y2	Y3			
Response	Evacuation and rescue operation	Evacuation and rescue operation	100% of the affected populatio n are evacuate d	Evacuate all affected populati on during disasters	Number of persons evacuated during disasters	200K	200K	200K	BDDRM Fund	BDRRMC	
Rehabilitation & Recovery	Provide livelihood for affected families	Implement cash for work for affected individuals who lost their livelihood	85% of affected families were provide d livelihoo	Provide source of income for families who lost their livelihoo d	Number of families that were provided livelihood through cash for work	100K	100K	100K	SLP	BDRRMC	Coordinate with DSWD to obtain funds

VII. MONITORING AND EVALUATION

This section will serve as guide on how to monitor the full implementation of the BDRRM Plan, as well as the projects and activities identified.

Table VII. Monitoring and Evaluation

a. Monitoring and evaluation of projects and activities in the Barangay DRRM Plan

Title	Description
Objectives of the Thematic Area	Write down the identified PPAs from the objectives of the BDRRM Plan. Refer to the first part of the plan (Objectives)
Priority programs	Programs that respond to each DRR functional area (Prevention & Mitigation, Preparedness, Response, Rehabilitation and Recovery). These are usually comprised of other projects and
Projects and activities implemented	Projects and activities included in the priority programs Refer to Table VI.
Annual target	Based on the expected results (refer to Table V), determine the number or percentage of beneficiaries of the service/program per year, or the number or percentage of projects and activities to be implemented. Refer to the number of affected population based on the Barangay Disaster Risk Profile. Refer to Table VI. Programs, Projects and Activities
Expected results	Expected results from the projects and activities per year Refer to Table VI. Programs, Projects and Activities.
Indicators	Expected results from the program per year. Measurable basis of the results of the project or activity. This is usually in the form of a percentage. Refer to Table VI. Programs, Projects and Activities
Accomplishment/Progress per year YI Y2	Identify the accomplishments and progress based on the expected results (use annual target as basis)
Y3	

Title	Description
Means of Verification	Documents to prove the activities implemented and the accomplishments achieved.
Remarks (challenges and other factors that affected the implementation of the activities)	Indicate any hindrances or challenges in the implementation of the projects and activities

Update the data annually, or depending on the agreement with the BDRRMC. The group shall submit a monitoring and evaluation report every BDRRMC meeting. The data may also be used fore reports that need to be submitted to the city or municipality.

Turn to the next page for the sample table.



Remarks (Mga balakid o dahilan kung bakit natapos o hindi ang	gawain)			
Means of Verification		Titulo ng Lupa (Land title)	Attendance sheet, minutes of meeting	Accomplishment report
pli t/ sss	7	0	7	20
Accompli shment/ Progress per year	Y2	0	7	25
Ā ⊵ ē ē	ΥI	2	m	25
Indicators		Kabuuang sukat ng nabiling lupa	Bilang ng konsultasyon na naisagawa sa apektadong pamilya	Bilang ng pamilyang nailipat sa relocation site
Expected Results		Makabili ng lupang lilipatan/ relocation site	Naisagawa ang konsultasyon sa lahat ng apektadong pamilya	Nailipat ang tirahan ng 100 pamilya sa mas ligtas na lugar
Annual Target		Y I: 2 ektarya para sa 100 pamilya	Dalawang (2) konsultasyon o higit pa bawat taon	Y1: 30 pamilya Y2: 30 pamilya Y3: 40 pamilya
Projects and activities implemen		Makabili ng Iupang lilipatan/ relocation site	Magsagawa ng konsultasyon sa mga pamilyang ililikas	Relokasyon ng mga pamilya na nasa baybayin
Priority Programs		Relokasyon o paglipat sa nga pamilyang nasa panganib (at-risk families)		
Objectives of the BDRRM Plan		Mag develop o makapag-patayo ng nga lilipatan o "settlement areas" na malayo sa mga natukoy na geohazard sites		

Remarks (factors that affected the implementat ion of the activities)		Delay in the purchase and delivery of the generator	Delay in the repair of restrooms due to lack of funds	
Means of Verification		Purchase documents/ Receipt	Design/Plan, Contract	Report; Camp records log
iish / ss rr	χ	0	0	0
Accomplish ments/ Progress per year	72	_	w	150 perso ns(90 adults , 60 childr en)
¥	7	0	0	0
Indicators		Number of generators purchasedi	Number of functioning restrooms	Number of persons evacuated (children and adults)
Expected		Ensure electricity in the evacuation center even during blackouts	Adequate and proper restrooms for males and females	Evacuate all affected population during the disaster
Annual Target		۲۱: ۱	YI: 5	
Projects and activities implemen ted		Purchase of generator	Adequate and clean restrooms	Evacuation and rescue operation
Priority programs		Preparation of evacuation centers		
Objectives of the Thematic Area		Orderly and effective response to communities during time of emergencies		

Remarks (factors that affected the implementatio n of the	מרחעוופ <i>י)</i>	
Means of Verification		SLP report
olis s/ ss ar	£Å	50 ies of 100 % of affec ted famil
Accomplis hments/ Progress per year	YI Y2	0
Å - G	7	0
Indicators	Number of families provided with livelihood though cash for work	
Expected		Provide a source of income to families who lost their livelihood
Annual		
Projects and activities implemen ted		Implement cash for work for affected families
Priority Programs		Provide livelihood to affected families
Objectives of the Thematic Area		Provide assistance and support to communities during times of emergencies.

b. Fund source and allocation based on the Local Disaster Risk Reduction and Management Fund (based on COA Circular No. 2012-002 dated, September 12, 2012)

Title	Description
Particulars	Indicate the particular items that should be itemized in each column, from the Quick Response Fund to Total.
Quick Response Fund	Refers to 30% of not less than 5% allocation or LDRRM Fund from regular sources of the barangay, such as the IRA (Internal Revenue Allotment).
Mitigation Fund	Refers to 70% of not less than 5% allocation or LDRRM from regular sources of the barangay, such as the IRA (Internal Revenue Allotment).
NDRRM Fund	Refers to the funds or financial aid from the NDRRM or national government agencies to respond to the needs of those who are affected by disasters and calamities
From other LGUs	Refers to the funds or financial aid from other local government units to respond to the needs of those who are affected by disasters and calamities
From other Sources	Refers to the funds or financial aid from the private sector, groups or individuals to respond to the needs of those who are affected by disasters and calamities
Total	Refers to the total amount of funds received by the barangay to respond to the needs of those who are affected by disasters and calamities

BDRRMF Appropriation Rate = Amount Allocated for BDRRMF CY/Estimated Amount of Regular Sources

ANNEXES OF THE BDRRM PLAN

Use as annexes at the last part of the BDRRM plan all the documents and information, such as the following;

- •Sangguniang Barangay Resolution adopting the BDRRM Plan
- •Sangguniang Barangay Ordinance on the Utilization of BDRRM fund
- •EO or Sangguniang Barangay Resolution on the Creation and Composition of the BDRRM Committee
- •Specific Members of the Committee and other Partners (Directory)
- •Memoradum of Agreement (MOA) o Memorandum of Understanding (MOU) with partners (schools, private and others)
- •Protocols (Communication, Relief, Response, etc)
- •Contingency Plan
- Photos
- And others

ANNEX A: PUBLIC HEALTH HAZARDS

	Exa	mples of Differe	nt Health Hazar	ds*	
Biological	Physical	Ergonomic	Chemical	Safety	Psychological
 Communicable diseases such as COVID-19, Ebola, Flu, Hepatitis, HIV/AIDS, Rabies, Tuberculosis, STIs, Zika, HINI, etc. Food and waterborne diseases, such as Cholera, Diarrhea Vector-borne diseases, like Leptospirosis, Dengue, Chikungunya Vaccinepreventable diseases, like Measles, Diphtheria, Tetanus, Pertussis, Poliomyelitis, Mumps, Rubella, etc. Parasitic infections, such as Taxoplasmosis, Trichomoniasis, 	High temperatures in the environment Environments causing dizziness Hypothermia Radiation Vibration Noise (e.g. hearing loss) Unsatisfactory lighting	 Musculoskelet al injuries (MSIs) Repetitive strain injuries (RSIs) Long-term back pains, and eventually strokes 	Cancers from carcinogens Disorders to the central nervous system (CNS) Possible lung, kidney, or liver damage Chemical hazards found in construction work: asbestos, lead, silica, vapor, gases, fumes, etc.	Machinery and equipment related houses Energy hazards (e.g. falls, struck by incidents, kinetic released energy) Material handling hazards	 Occupational stress Workplace violence Verbal abuse Bullying Sexual harassment Anxiety Depression Drug Abuse Smoking

^{*}Note: There can be other examples other than the items listed in the table

ANNEX B: Identifying possible risks or hazards that could affect the barangay

Example:

Risk or hazard	Probability	Effect	Management	Basis	Average	Ranking
Floods	4	3	3	Purok 1, 2 and 5 are low-lying areas No proper drainage system in the barangay Close to the river bank No specific early warning system para sa for floods and other possible disasters The BDRRMC is not active and does not hold regular meetings	3.3	_
Fire	3	2	4	25% of houses are made of light materials No fire hydrants in the barangay and the fire station is far No organized fire volunteers in the barangay	3	2



ANNEX C: Public Health Risk Assessment

Public Health - Risk Assessment Matrix (page 3 of Public Health Template)

Priority Hazards			Risk to the Comm	nunity	
	Tao (People)	Ari-arian (Properties)	Serbisyo (Services)	Kapaligiran (Environment)	Kabuhayan (Livelihood)
Typhoon	 Probability of death Probability of disease, spread or worsening of diseases, injury 	 Probability of loss/damage of health facilities Probability of breakdown in security 	Probability of breakdown or disruption in essential health services	Probability of contamination	Probability of presence of hazardous activities on sources of livelihood e.g. mining
Fire	disability	Probability of breakdown in lifelines			
Armed Conflict					
Earthquake					



ANNEX D: Public Health Vulnerability Matrix

Public Health Vulnerability: Vulnerability to Disease Outbreaks: Sample

	People	Properties	Services	Environment	Livelihood
• a. b.	Extremes of Age 60 and above 20 years and below	Limited local resources No or inadequate Isolation facilities	Inadequate or inefficiency in the delivery of healthcare No or poor access	Geographical Location: coastal/ island, low lying areas, mountainous	Type of livelihood that may cause health risks from emergencies/ disaster situations
• a.	Gender Disease predilection to either males or females	 Inappropriate developmental policies No BHS or RHU or hospital in the barangay or at least 500/1000 meters from 	Inadequate social and organizational integration/ coordination of	areas, urban/ rural a. Low access to health care services Geographically isolateand	a. HW managing the Disease outbreak B. Food and beverage workers being exposed while at work may transmit the disease
a. b.	Disability Hemiplegic cases Bed ridden patients	the barangay	health system a. Poor vaccination coverage	disadvantaged areas (GIDAs) a. Not fully developed Health system	
• a.	Lack of information, education and communication Lack of people's awareness to current disease outbreaks				
• a.	Malnutrition Severely malnourished more prone to illness				
• a.	Societal stratification Low income groups not able to maintain good health status				
• a.	Political perception Poor support for health programs				
	High burden of illness/ injuries Competes with er cases for stics needs				

ANNEX E: Public Health Vulnerability Assessment Matrix

Public Health- Vulnerability Assessment Matrix

			Vulnera	bilities of the Co	mmunity	
Priority Hazard	Vulnerable Areas	People	Properties	Services	Environment	Livelihood
Example: Typhoons	Purok I	High cases of Pneumonia No communication/ coordination between the barangay and municipality Male adults and youth refuse to seek medical treatment	Barangay Health Center needs repair	Hindi sapat ang suplay ng bakuna sa tigdas No water-testing laboratory	Most families are living near the coast No source of potable water Many areas for breeding mosquitoes	High cases of fishing-related accidents

ANNEX F: List of priority diseases, symptoms and conditions that need to be monitored (According to DOH)

Epidemic-Prone Diseases	Diseases Targeted For Eradication Of DOH	Other Diseases Or Conditions Of Public Health Importance
 Acute Viral Hepatitis Anthrax Bacterial Meningitis Cholera Dengue Human Avian Influenza Influenza-like Illness Leptospirosis Meningococcal Disease Paralytic Shellfish Poisoning Severe Acute Respiratory Syndrome (SARS) Typhoid And Paratyphoid Fever 	I 3. Poliomyelitis (Acute Flaccid Paralysis)I 4. MeaslesI 5. Neonatal TetanusI 6. RabiesI 7. Malaria	18. Acute Bloody Diarrhea 19. Acute Hemorrhagic Fever 3. Acute Encephalitis Syndrome/ Japanese Encephalitis 20. Adverse Event Following Immunization (AEFI) 21. Diphtheria 22. Hand Foot and Mouth Disease 23. Non-Neonatal Tetanus 8. Pertussis

ANNEX G: Sample Early Warning System for Natural Hazards (Flooding)

Alort I evel	Sitwasyon o	Warning Signal	Powcon_In_Charge	Mga Dapat Gawin ng	Mga Dapat Gav	Mga Dapat Gawin ng BDRRMC
	Senyales	V al IIII S CISITAL		Pamilya	Sub-Committee	Gawain
0	• No rain	• None	• None	 Normal family activity 	BDRRMC	 Normal BDRRMC activity
	• 3.1 meters water level rise	• 10 second every 15 minutes siren	• Caroline Tomales	Putting things in the higher ground	 Punong Barangay 	• Convene the BDRRMC
_	in Piao and Tangian River	spunos		• Keview and Kefill the content of the "GO Bag"	• Communication, Monitoring and Warning	Monitor river condition Issue warning bulletin Validate Rainfall and water level Advise riverside residents to prepare for possible evacuation
					 Search and Rescue 	 Review and re-assess the available response equipment/materials
2	• 4.6 meters water level rise in Piao and Tangian River	30 seconds every 10 minutes siren sounds	Arnold Ignacio	 All household properties and important documents are in a safe place Animals and Livestock are transferred to safe areas 	Communication, Monitoring and Warning	Monitor river condition Issue warning bulletin Validate Rainfall and water level No Evacuation
æ	• 5.5 meters water level rise in Piao and Tangian River	• I minute every 5 minutes siren sounds	Marilou Delos Santos	IMMEDIATE EVACUATION of areas projected to be effected	• Communication, Monitoring and Warning and Health	 Issue warning bulletin Assist Evacuees in the evacuation centers

Ang halimbawang ito ay mula sa Center for Disaster Preparedness (CDP)

HEALTH ALERT NOTIFICATION SYSTEM:

Health Alert Notification System for Barangays

Introduction

The Health Alert Notification System will provide early warning to the lowest level of governance which is the Barangay of diseases that are observed to be rising in number that may lead to outbreak or epidemic. This provides opportunity for the Barangays to implement measures that would be needed to prevent and control the spread of the disease.

Objective of this System:

- 1. To provide Early warning to All Barangays of rising number of cases seen in the health facilities that are coming from within the barangay or from neighboring barangays that pose a threat to the health and welfare of the community
- 2. To provide appropriate health advisories that would prevent and control further spread of the disease
- 3. To identify the roles and responsibilities of the City Health Office/Municipal Health Office, the Epidemiology surveillance unit, the Barangay Officials and BHERTs, Health facilities (BHS, RHU, Hospitals, etc)

Concept of Implementation

Daily consultation reports from the different LGU health facilities (BHS, RHU, BeMonc, CeMonc, LGU and Private Hospitals) shall be submitted to the City/Municipality Health Office Epidemiology and Surveillance Unit. (CESU/MESU). The Epidemiology and Surveillance unit will consolidate, analyze and identify the ten leading causes of consultations and to highlight diseases that have rising incidence and pose a threat for an outbreak or epidemic which will be reported to the City/Municipal Health Officer for appropriate action such as but not limited to a. Issuance of Health Alert Memorandum to the Barangays, b. Provide Health Advisories and Guidance on measures to be implemented and take appropriate actions and activities to immediately prevent and control the further escalation of the incident. Barangays upon receipt of the Health Alert Memorandum shall disseminate the same to its community by: a. posting the Health Alert Memo in the Barangay bulletin board, b. Barangay meeting called for the purpose c. distribution of Health Advisories, etc.

Roles and Responsibilities:

- I. City/Municipal Health Officer
- a. Oversee the implementation of this Health Alert Notification System in the Barangays
- b. Issue the Health Alert Memorandum to the barangays
- c. Provide Guidance and Health advisories as appropriate
- d. Implement measures required to prevent and control further escalation of the Health concern
- 2. Epidemiology and Surveillance Unit
- a. Collect, Consolidate, Analyze data collected from the reporting health facilities
- b. Identify the ten leading causes of consultation in the respective facilities and submit their report to the City/Municipal Health Office highlighting the diseases with the potential of further increasing which might lead to an outbreak or epidemic.
- c. Continuous monitoring and disease surveillance
- 3. Barangay Level

Barangay Chair and Officials

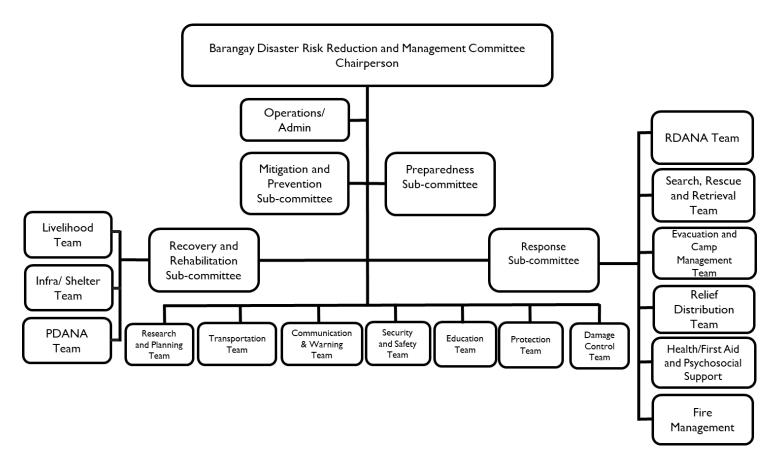
- a. Ensure that the Health Alert Memorandum and Health Advisories are posted on the Barangay Office Bulletin Board and other public poster spaces for the appreciation of the community
- b. Conduct an information and communication drive/meeting for information dissemination and action planning
- c. Coordinate with the City/Municipal Health Office for guidance and support on measures to implement to control further escalation of the health event.
- d. Mobilize the BHERTS to carry out health activities required to address the health event.

Barangay Health Emergency Response Team

- a. Shall post the Health Alert Memorandum and Health Advisories issued once received in the Barangay Bulletin Board and other designated poster areas in the barangay
- a. Coordinate the health related activities with the appropriate health officials and health facilities
- b. Conduct Contact tracing as needed with the help of designated BHW and other accredited volunteers
- Assist in monitoring of health status of cases and provide report of health status update to the City Health office/officer
 d.
- 4. Health Facilities (BHS, RHU, BeMonc, CeMonc, Hospitals, Evacuation Facilities Health Stations)
- a. Shall submit daily census report of cases seen to the CESU/MESU for collation, analysis and disease surveillance
- b. Shall notify the concerned barangays of increasing number of cases especially those with clustering and have the potential to develop into an outbreak or epidemic
- c. Shall coordinate with the BHERTS on matters related to the health and welfare of the barangay community
- d. Shall provide appropriate medical interventions and health advisories in case of outbreaks or epidemics.

ANNEX H

Mungkahing Organogram (Organizational Structure) ng Barangay Disaster Risk Reduction and Management Committee



Ito ay mungkahi lamang at maaari itong i-modify ayon sa kalagayan ng barangay.