# Situational Analysis

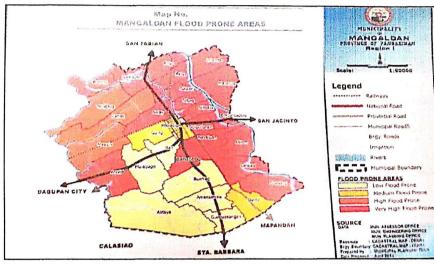
Disaster	Year	Effects (Who were affected? What were the effects? How much was the damage		is/ interventions done b the disaster s, service providers, informa resource)	pefore, during and after	Who were the players at each specific time frame?	What were the learnings/ realizations from managing this disaster? Specifically, what are the gaps and weaknesses that need to
		in peso terms?)	Before	During	After	rame r	be addressed?
Typhoon	2022	Increase Respiratory Tract Infections due to bad weather	Meeting with HERT, Inventory of Medicines, Evacuation Site Visit	Monitoring for possible landfall	Feedback and inventory of medicines	MHO, MDRRMO	Early preparation is beneficial
EREID(HFMD, COVID19)	2022	Quarantine depression and resulted to mental health issues, Mild to Moderate Covid 19 illness resulted to absences and loss of job, Severe Covid 19 illness resulted to hospitalization and worst to death	Revisited IATF Protocols, Update according to New Quarantine guidelines	Monitoring of complications, MPHS	Disinfection, Reporting, MHPSS	MHO, DOH, DILG,, MDRRMO	MPHS and early consultation are most cost-effective in prevention of transmission and complication
Covid19 Outbreak	2019- 2021	Quarantine depression and resulted to mental health issues, Mild to Moderate Covid 19 Illness resulted to absences and loss of job, Severe Covid19 illness resulted to hospitalization and worst to death	Meeting with LCE. Creation of Local IATF thru EO by LCE. Identification of possible temporary isolation facilities, Procurement of medicines. Procurement of PPEs.	BHERTs closely monitor the movement of PUI and PUMs. PUI with symptoms are referred for RT PCR, Confirmed Covid19 with moderate to severe symptoms are referred to Tertiary Hospital. Covid Patients not accommodated in the hospital are managed at home with Oxygen support.	Report, Feedback to LCE. Continuous monitoring of Physical and Mental Health effect of Covid19 to patients. Psychosocial education(MHPSS) to those recovered with Covid19 Illness. Continuous promotion of MPHS to prevent transmission of Covid19.	LCE, MHO, DOH, PHO, DILG, MDRRMO, PNP, MSWD, GSO	Unable to build isolation facility, Unexpected events results to bigger expenses

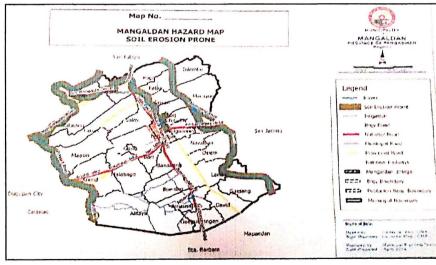
	of c	looding resulted to increase f chances of being infected	OpCen and vheck the lines of communication and other emergency supplies. Monitor	sick evacuees, observe MPHSS, and proper hygiene inside the evacuation center, give	Feedback, reporting to LCE and other involved agencies. Continuous monitoring until flood subside and evacuees returned safely to their	LCE MÜRRMO	Flood Warning System is very essential for prompt evacuation that community should be warned
Flood 201			PAG-ASA, check generator and other	psychoeducation to evacuees	safely to their houses	LCE, MĎRRMO, MHO, BFP, MSWD	that community should be warned

## Hazard Identification and Prioritization

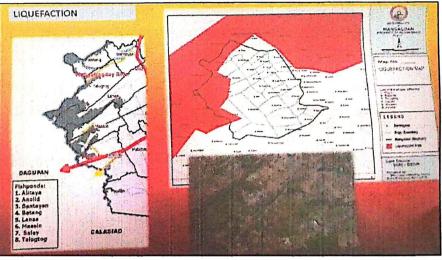
Hazard	Severity	Frequency	Extent	Duration	Manageability	Total	Rank
	(a)	(b)	(c)	(d)	(e)	(a+b+c+d-e)	
Typhoon	4	4	4	4	4	12	1
Flood	4	3	4	3	3	11	2
Disease Outbreak	3	3	3	2	2	9	3
Earthquake	2	2	2	2	2	6	4

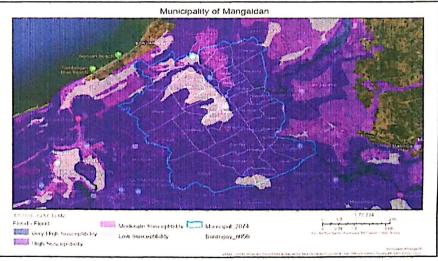
## Hazard Mapping





#### DRRM-H Plan 2023





## **Vulnerability Assessment**

11	Mula analida Assas			Vulnerabilities		
Hazard	Vulnerable Areas	People	Properties	Services	Environment	Livelihood
		Lack of awareness on				
		Water-Borne Diseases				
		and its effect and	Houses made of light	Delay in procurement		M
Typhoon	Municipal wide	prevention	materials	services	Untidy Environment	Loss of livelihood
			Inadequate excreta			
	Low Lying Areas,	Lack of Awareness on	disposal facilities,			•
	Brangay near	Water-Borne Diseases,	Damaged water	Delay in garbage	Proliferation of vector	
	Riverbanks and	its effects on health	facilities, clogged	collection, inadequate	breeding sites,poor	Damaged agricultural
Flood	obstructed canals	and its prevention	canals	potable water supply	drainage sysytem	lands, loss of livelihood
		Elderly, Person with				
		Comorbidities, Person				
		who are				
		Immunocompromised,		Inadequate Covid19		
		Pregnant women,		Antigen Testing, Lack		
		Children, Person with	Thickly Populated	of RT PCR testing,		
		Disabilities, Healthcare	communities, Lack of	Delay in Procurement	Thickly Populated	Loss of Primary
Covid19 Outbreak	Municipal Wide	Workers, Unvaccinated	Isolation Facility	of Medicines and PPEs	Communities	Source of Income



# Capacity Assessment

Municipality/ Barangay	Head of Institution	Head of the Health Office of Institution	Available DRRM Plan	DRRM-H Plan	Health Emergency Response Tean	Head Emergency Commodities	Emergency Operation Center
Mangaldan	Hon. Mayor Bona Fe De Vera Parayno	Dr. Larry B. Sarito	Yes	Yes	Yes	Yes	Yes

# Inventory of Resource Networks

Government Agencies/ Non- Government Organizations/ Civil Society Organizations	Services/ Products that may be Utilized in Times of Disasters/ Emergencies	Contact Person/s	Contact Details	Focal Person
MDRRMO	Rescue Operations	Rodolfo Corla		
MSWD	Rellef Operations	Rowena De Guzman	09178120404	Rowena De Guzman
PNP	Peace and Order	Pcol Roland Cabatan	09507708580	Pcpl Louiesa Ramos
BFP	Rescue Operations	Fire Marshall Ken Combate	09224800388	Sarah Jane Libao
Pangasinan Medical Society	Medical Assistance	Dr. Mark Harry Tandoc	09175837555	Dr. Jalice Cayabyab
	Rescue Operations, Medical,			
Philippine Red Cross	Blood Donation	Raymund Lim	09328794954	Raymund Lim

### Risk Assessment

	\\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\	Сар	acity	Health Risk*
Hazard	Vulnerabilities	Strengths	Weaknesses	110012111011
			Some members of household belong	j
		Developed Preparedness and	to vulnerable population such as	
		Response Plan and WASH Plan,	Elderly, those with comorbidities,	
	Families with houses made	Household members trained for	bedridden, pregnant women and	Outbreak of food-water-and
Typhoon	of light materials	rescue operations	children	vector-borne diseases
		Household members trained for	Delay weather forecast, Delay in	Outbreak of food-water-and
	Families living in low-lying	rescue operations, Availability of	evacuation, Inadequate capacity of	vector-borne diseases,
Flood	areas, or near riverbanks	Evacuation Center	Evacuation Center	Drowning
	Densed Population of the			
	Community, some members		Some members of household belong	
	of the household are elderly,		to vulnerable population such as	
	person with comorbidities,		Elderly, those with comorbidities,	
	disability, pregnant women,	IATF protocols/guidelines is available	bedridden, pregnant women and	Morbidity and Mortality,
Covid19	and children	and implemented	children, Unavailable Vaccine	Mental Health Illness

# Prevention and Mitigation Plan

Hazard	Vulnerability	Strategies and Activities	Time Frame		urce	Agency/ Office/	Indicator
Tidzaio	Valiforability	Ottolegies and Activities	Time (Tame	Required	Source	Person-in-Charge	maioator
		1.1 Conduct First Aid Workshop and					
		Disaster Preparedness workshop,					
		Organize Rescue Operation/Disaster					
		Team, 1.2 Training of Trainors in		IEC	MHO,RSI,		Trained Personnel,
	Houses made of light	Barangay with WASH, 1.3 Appoint	2 <sup>nd</sup> quarter	materials,	MDRRMO,	MHO, DRRMO	Organized BHERT,
Typhoon	materials	Barangay Sanitation Inspector	of 2024	snacks	Barangay	Punong Barangay	Appointed BSI
		1,1 Conduct First Aid Workshop and				, and the second	
		Disaster Preparedness workshop,					
		Organize Rescue Operation/Disaster					
		Team, 1.2 Training of Trainors in		IEC	MHO, RSI,		Trained Personnel,
	Living in low-lying areas	Barangay with WASH, 1.3 Appoint	2 <sup>nd</sup> quarter	materials,	MDRRMO,	MHO, DRRMO	Organized BHERT,
Flood	and near riverbanks	Barangay Sanitation Inspector	of 2024	snacks	Barangay	Punong Barangay	Appointed BSI
	1.1 Risk of contracting						Adequate supply of
	Fungal Infections						antifungal creams,
Disease	1.2 Risk of contracting						Inventory of water
Outbreak(Water	Water-Borne	1.1 Procure Antifungal cream, 1.2	A1.	IEC	MHO, RSI,		supply, Absence of
and Water-	Diseases, 1.3	Conduct Inspection of Water supply, 1.3	4th quarter of	materials,	MDRRMO,	MHO, DRRMO	vector breeding
borne Dses)	Dengue Outbreak	Implement strictly 5S	2024	snacks	Barangay	Punong Barangay	sites

### **PUBLIC HEALTH PREPAREDNESS PLAN**

#### **Risk Reduction**

				Resource		
Risks	Strategies and Activities	Time Frame	Required	Source	Person-in- Charge	Indicator
Morbidity and Mortality from Diseases due to Disease Outbreak	Update DRRM-H Plan 2023, Formulate WASH PLAN 2023 and present to LCE for approval, integrate WASH plan to DRRMH	Second quarter of 2023	Venue/Meals	MHO, MDRRMO	MHO, MDRRMO, RSI/WASH Focal Person	Updated DRRM-H plan, WASH Plan
Drowning and near drowning Incidence	Organize Rescue operations	Second quarter of 2023	Venue/Meals	MDRRMO, MHO	MHO, MDRRMO, BFP	Workshop output

### **PUBLIC HEALTH RESPONSE PLAN**

		Steps to be Undertaken		
Activity	Pre-Impact	Impact	Post-Impact	Person-in-Charge
	(0 day)	(0-48 hours)	(>48 hours)	
Activation of Operation Center (OpCen) on a 24/7 basis and Incident Command System (ICS)	Assume incident commander and activation of OpCen and ICS	Transfer command if need arises	Reconvene	МНО
Provision of Medical services	Inventory of Medical Supply and Equipments	Medical check-up, Disease Surveillance, Hygiene Promotion, MPHS	Monitoring of Medical Illnesses, Continuous MHPSS	МНО
Provision of WASH services:				
Provision and construction of excreta facilities	1.1 Assessment of excreta facilities,	1.1 Ensure the functionality of sanitation facilities,	1.1 Repair and construction of excreta facilities and tollet separate from men and women	RSI, MHO, MEO
2, Vermin Control	2.1 Misting and Fogging at the evacuation center	2.2 Implement infectious vector control measures if necessary	2,3 Continuous monitoring	
3, Hygiene Promotion	3.1 Information Dissemination campaign on WASH	3.2, Continue Hygiene Promotion,Distribution/Provision of Hygiene Kit. Etc.	3.3 Reiteration WASH	WASH coordinator/Hygiene promoter

### **PUBLIC HEALTH RECOVERY AND REHABILITATION PLAN**

Activity	Steps to be	Undertaken	Person-in-Charge
Activity	Within 1 Year	1 to 3 Years	reison-in-charge
Integrate WASH Plan to DRRM-H	Seminar on WASH	Integrate WASH on DRRM-H	MHO, RSI
Appointment of BSI	Recommend to All PB to assign BSI	BSI in all 30 brgys	RSI, MHO, PB
Seminar on NiE	Nutrition staff to attend NiE Seminar	Training of Trainors(NiE)	Monette Bautista, BNS, Nutritionist

Prepared by:

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HON, BONA FE DE VERA-PARAYNO Municipal Mayor