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LGU Guide for Rehabilitation & Recovery from **COVID-19**



LGU Guide for Rehabilitation and Recovery from COVID-19

A joint project of the
Department of the Interior and Local Government and the World Bank

with funding support from the
**Government of Japan and the Global Facility for
Disaster Reduction and Recovery**



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GFDRR
Global Facility for Disaster Reduction and Recovery

Acknowledgments

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Special thanks to the following team members:

Department of the Interior and Local Government

Anna Liza F. Bonagua, Director

EnP Jenifer G. Galorport, Division Chief

EnP Maria Angela Monica Salud B. Mamuyac, Assistant Division Chief

EnP Arce P. Fajardo, LGOO V

Jedd John A. Castillo, LGOO III

EnP Kristine Carmen D. Diones, LGOO III

Anna Victoria C. Quibot, LGOO III

Sir Jejomar B. Balaw-ing, LGOO II

Carlos Fundador T. Jayoma, LGOO I

World Bank

Lesley Jeanne Y. Cordero

Margarita R. Songco

Fides B. Borja

Miguel C. Dorotan

Mems D. Gamad

Elezor A. Trinidad



Republic of the Philippines
DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
DILG-NAPOLCOM Center, EDSA corner Quezon Avenue, West Triangle, Quezon City
<http://www.dilg.gov.ph>

MESSAGE



Warmest greeting and congratulations to the Department of the Interior and Local Government's Bureau of Local Government Development (DILG-BLDG) and the World Bank for jointly producing the ***LGU Guide for Rehabilitation and Recovery from COVID-19***.

This publication will serve as a primary reference for local government units (LGUs) as they seek to implement measures in recovering from the adverse impacts of COVID-19 in their areas of jurisdiction. Moreover, this guide will be our LGUs' roadmap in identifying affected sectors and prescribing strategies that may be applicable to local conditions.

With our country's transition to the new normal still ongoing, we are currently firming up our efforts to rebuild this country from the ground up. This means working closely with our international and local partners, as well as our LGUs, in altogether putting an end to this unseen scourge.

This may seem to be a challenging and protracted battle, but I assure our LGUs, the private sector, the Filipino citizenry, and the international community that the Department will remain steadfast in extending the needed support, cooperation, and assistance as we brave through the adversities of this global pandemic.

With the concerted efforts of the national and local governments, along with our key stakeholders, I strongly believe that we will manage to bounce back stronger, adapt better, and emerge victorious in this arduous fight for public health. Together, let us continue to consolidate our efforts as we heal and recover as one Filipino nation.

Again, my heartfelt appreciation to the World Bank and the DILG-BLGD. *Mabuhay!*

UNDERSECRETARY BERNARDO C. FLORECE, JR.
Officer-in-Charge





Republic of the Philippines
DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
DILG-NAPOLCOM Center, EDSA corner Quezon Avenue, West Triangle, Quezon City
<http://www/dilg.gov.ph>

MESSAGE



Being strategically located in the *Ring of Fire* and the typhoon belt in the Pacific, the Philippines has been besieged by the occurrence of natural disasters covering typhoons, earthquakes, and volcanic eruptions. While we take pride in our adaptive capacities and resiliency as evidenced by the fierce determination by which we have recovered from disasters that befell the country, nothing has prepared us for the challenges that we face in our bid to adequately respond and recover from the impacts of the COVID-19 pandemic.

Both the national and local governments are faced with the daunting task of jump starting recovery from the losses brought about by adverse impacts of COVID-19 while we continue to manage related risks and threats amidst the '*new normal*'.

For this purpose, the Department of the Interior and Local Government underscores the importance of planning for recovery among the local government units (LGUs). This way, they can ensure continuity in local service delivery while taking steps to institute measures and implement programs that can help local governments rise above the crisis.

Taking-off from the 'Rehabilitation and Recovery Planning Guide' prepared by the National Economic and Development Authority (NEDA), this LGU Guide provides the recovery framework, templates, and list of suggested strategies and programs, projects, and activities (PPAs) for COVID-19. The Guide likewise identifies fund sources that may be tapped by LGUs to fund and implement recovery and rehabilitation PPAs.

We hope that this Guide can provide the much needed guidance to our LGUs as we transition from the 'new normal' and recover from this pandemic. *Mabuhay!*

JONATHAN E. MALAYA
Undersecretary
Chair, Task Group on Governance
National Task Force COVID-19



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Republic of the Philippines
DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
DILG-NAPOLCOM Center, EDSA corner Quezon Avenue, West Triangle, Quezon City
<http://www.dilg.gov.ph>

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We would like to thank the National Economic and Development Authority (NEDA) for their invaluable inputs that provided the context for LGU COVID-19 rehabilitation and recovery efforts within the broader rehabilitation and recovery planning structure and initiatives of the National Government amidst the pandemic.

We acknowledge the contributions of the Office of Civil Defense (OCD) and the Department of Health (DOH) that shared their insights and sector priorities to further enrich the menu of recommended strategies contained in the Guide. Acknowledgment is likewise given to the local governments and DILG Regional Offices (ROs) that have enabled the compilation of innovative LGU response and recovery initiatives. We hope that the strategies and LGU initiatives can inspire other local governments to continue to innovate and undertake recovery programs that can address COVID-19 impacts.

Finally, we would like to convey our special thanks to those people and/ or institutions whose names may not appear here but have nonetheless contributed in the development and completion of this reference document.

We hope that this Guide can serve as a practical and useful reference for LGUs determined to recover from the debilitating impacts of the pandemic.




ANNA LIZA F. BONAGUA, CESO III
Director, DILG-BLGD 



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ACRONYMS

4Ps	<i>Pantawid Pamilyang Pilipino</i> Program
AFP	Armed Forces of the Philippines
AICS	Assistance to Individuals in Crisis Situations
AKAP	<i>Abot Kamay ang Pagtulong</i> Program
AKPF-DLP	<i>Abot Kaya Pabahay</i> Fund-Development Loan Program
ALPAS	<i>Ahon Lahat, Pagkaing Sapat</i> (Program)
ARISE	Philippines Accelerated Recovery and Investments Stimulus for the Economy of the Philippines
BCDA	Bases Conversion and Development Authority
BDRRMC	Barangay Disaster Risk Reduction and Management Council
BFP	Bureau of Fire Protection
BGCM	<i>Bayanihan</i> Grant Fund to Cities and Municipalities
BHERT	Barangay Health Emergency Response Team
BHW	Barangay Health Workers
BIR	Bureau of Internal Revenue
BMB	Biodiversity Management Bureau
BMCRPP	<i>Bangon</i> Marawi Comprehensive Rehabilitation and Recovery Plan
BPLS	Business Permits and Licensing System
BPSO	Barangay Public Safety Office
BSP	<i>Bangko Sentral ng Pilipinas</i>
C/ MDRRMC	City/ Municipality Disaster Risk Reduction and Management Council
C/ MLGOO	City/ Municipal Local Government Operations
CAAP	Civil Aviation Authority of the Philippines
CAMP	COVID-19 Adjustment Measures Program
CARES	Calamity Rehabilitation Support (Program)
CBMS	Community-based Monitoring System
CDP	Comprehensive Development Plan
CFI-CAP	Countryside Financial Institutions-Calamity Assistance Program
CFO	Commission on Filipinos Overseas
CHED	Commission on Higher Education
CLAP	Calamity Loan Assistance Program
CLUP	Comprehensive Land Use Plan
COA	Commission on Audit
COVID-19	Corona Virus Disease
CRAMMS	COVID Risk Assessment Monitoring and Management System
CSOs	Civil Society Organizations
DA	Department of Agriculture
DBCC	Development Budget Coordination Committee

DBM	Department of Budget and Management
DBP	Development Bank of the Philippines
DENR-LMB	Department of Environment and Natural Resources-Land Management Bureau
DepEd	Department of Education
DF	Development Fund
DICT	Department of Information and Communications Technology
DILG	Department of the Interior and Local Government
DND	Department of National Defense
DOE	Department of Energy
DOF-BLGF	Department of Finance-Bureau of Local Government Finance
DOH	Department of Health
DOLE	Department of Labor and Employment
DOST	Department of Science and Technology
DOT	Department of Tourism
DOTr	Department of Transportation
DROM	Disaster Response Operations Modality
DRRM	Disaster Risk Reduction and Management
DRRMC	Disaster Risk Reduction and Management Council
DSWD	Department of Social Welfare and Development
DTI	Department of Trade and Industry
ECQ	Enhanced Community Quarantine
EOC	Emergency Operations Center
ERF	Enterprise Rehabilitation Financing Facility
FMRs	Farm-to-Market Roads
GAA	General Appropriations Act
GCQ	General Community Quarantine
GDP	Gross Domestic Product
GFIIs	Government Financial Institutions
GOCCs	Government-Owned and Controlled Corporations
GPPB	Government Procurement Policy Board
GSIS	Government Service Insurance System
HEAL	Help via Emergency Loan Assistance for LGUs
HIV	Human Immunodeficiency Virus
HTAC	Health Technology Assessment Council
IATF	Inter-Agency Task Force
IATF-EID	Inter-Agency Task Force for the Management of Emerging Infectious Diseases
IATF-NTF	Inter-Agency Task Force - National Task Force
ICC	Investment Coordination Committee (ICC)
IC-EOC	Incident Command-Emergency Operations Center
ICT	Information and Communications Technology
IFWDPH	Innovations for Filipinos Working Distantly from the Philippines
IPs	Indigenous Peoples

IRA	Internal Revenue Allotment
I-RESCUE	Interim Rehabilitation Support to Cushion Unfavorably Affected Enterprises by COVID-19 (Lending Program)
IRR	Implementing Rules and Regulations
LAG	Livelihood Assistance Grant
LBP	Landbank of the Philippines
LCE	Local Chief Executive
LCMP	Localized Community Mortgage Program
LDIP	Local Development Investment Program
LDRRM	Local Disaster Risk Reduction and Management
LDRRMC	Local Disaster Risk Reduction and Management Council
LDRRMF	Local Disaster Risk Reduction and Management Fund
LDRRMO	Local Disaster Risk Reduction and Management Office
LDRRMP	Local Disaster Risk Reduction and Management Plan
LESU	Local Epidemiology Surveillance Unit
LGOO	Local Government Operations Officers
LGSF	Local Government Support Fund
LGSF-FA	Local Government Support Fund Financial Assistance
LGU	Local Government Unit
LGU-P4	PPPs for the People Initiative for Local Governments
LHO	Local Housing Office
LIGTAS-COVID	Local Isolation and General Treatment Areas for COVID-19
LMB	Land Management Bureau
LPCC	Local Price Coordinating Council
LPDO	Local Planning and Development Office
LSIs	Locally Stranded Individuals
LTF	Local Task Force
LWUA	Local Water Utilities Administration
MDTF	Multi-Donor Trust Fund
MERS-CoV	Middle East Respiratory Syndrome Coronavirus
MFIIs	Micro-Finance Institutions
MGB	Mines and Geosciences Bureau
MHO	Municipal Health Office
MOA	Memorandum of Agreement
MROF	Management of Returning Overseas Filipinos
MSEs	Micro and Small Enterprises
MSFF	Marginalized Small Farmers and Fishers
MSMEs	Micro, Small, and Medium Enterprises
NAEFIC	National Adverse Events Following Immunization Committee
NAMRIA	National Mapping and Resource Information Authority
NAP	National Action Plan
NCDDP	National Community-Driven Development Plan

NDRRM	National Disaster Risk Reduction and Management
NDRRMC	National Disaster Risk Reduction and Management Council
NDRRMF	National Disaster Risk Reduction and Management Fund
NEA	National Electrification Administration
NEDA	National Economic and Development Authority
NFA	National Food Authority
NGA	National Government Agencies
NHTS	National Housing Targeting System
NIA	National Irrigation Administration
NIC-EOC	National Incident Command-Emergency Operations Center
NIC-OPCEN	National Incident Command Operations Center
NITAG	National Immunization Technical Advisory Group
NTF	National Task Force
OCD	Office of Civil Defense
ODA	Official Development Assistance
OFW	Overseas Filipino Workers
OWWA	Overseas Workers Welfare Administration
P3-ERF	<i>Pondo Para sa Pagbabago at Pag-asenso</i> Enterprise Rehabilitation Fund
PCOO	Presidential Communications Operations Office
PDP	Philippine Development Plan
PDRRMC	Provincial Disaster Risk Reduction and Management Council
PERP	Provincial Economy Restart Plan
PEs	Procuring Entities
PFIIs	Private Financial Institutions
PHIVOLCS	Philippine Institute of Volcanology and Seismology
PMU	Project Monitoring Unit
PNP	Philippine National Police
PNVR	Philippine National Vaccine Roadmap
POEA	Philippine Overseas Employment Administration
PPAs	Programs, Projects, and Activities
PPE	Personal Protective Equipment
PPP	Public-Private Partnership
PSA	Philippine Statistics Authority
PSCP	Public Service Continuity Plan
PTB	Passenger Terminal Building
PUIs	Patients under Investigation
PUMs	Persons under Monitoring
PWDs	Persons with Disabilities
QRF	Quick Response Fund
RA	Republic Act
RDC	Regional Development Council
RDRRMC	Regional Disaster Risk Reduction and Management Council

RESPONSE	Rehabilitation Support Program on Severe Events
ROFs	Returning Overseas Filipinos
RORO	Roll-on/ Roll-off
RPMEs	Regional Project Monitoring and Evaluation System
RPOC	Regional Peace and Order Council
RREFP	Residential Real Estate Financing Program
RRP	Rehabilitation and Recovery Plan
RSBA	Registry System for Basic Sectors in Agriculture
RTF	Regional Task Force
RTF-BARM	Regional Task Force-Bangsamoro Autonomous Region in Muslim Mindanao
RTF-CAR	Regional Task Force-Cordillera Autonomous Region
RTF-NCR	Regional Task Force-National Capital Region
RUSF	Ready-to-Use Supplementary Foods
SAP	Social Amelioration Program
SARS	Severe Acute Respiratory Syndrome
SBC	Small Business Corporation
SBWS	Small Business Wage Subsidy
SCCCTS	South Cotabato COVID-19 Contact Tracing System
SEF	Special Education Fund
SHFC	Social Housing Finance Corporation
SLP	Sustainable Livelihood Program
SSS	Social Security System
STWGs	Sub-Technical Working Groups
SUCs	State Universities and Colleges
SURE	Expanded Survival and Recovery (Assistance Program)
TB	Tuberculosis
TESDA	Technical Education and Skills Development Authority
TG	Task Group
TMG	Technical Management Group
TOP	TESDA Online Program
TTMF	Temporary Treatment and Monitoring Facilities
TWG	Technical Working Group
TWG for AFP	Technical Working Group for Anticipatory and Forward Planning
WASH	Water, Sanitation, and Hygiene



Introduction

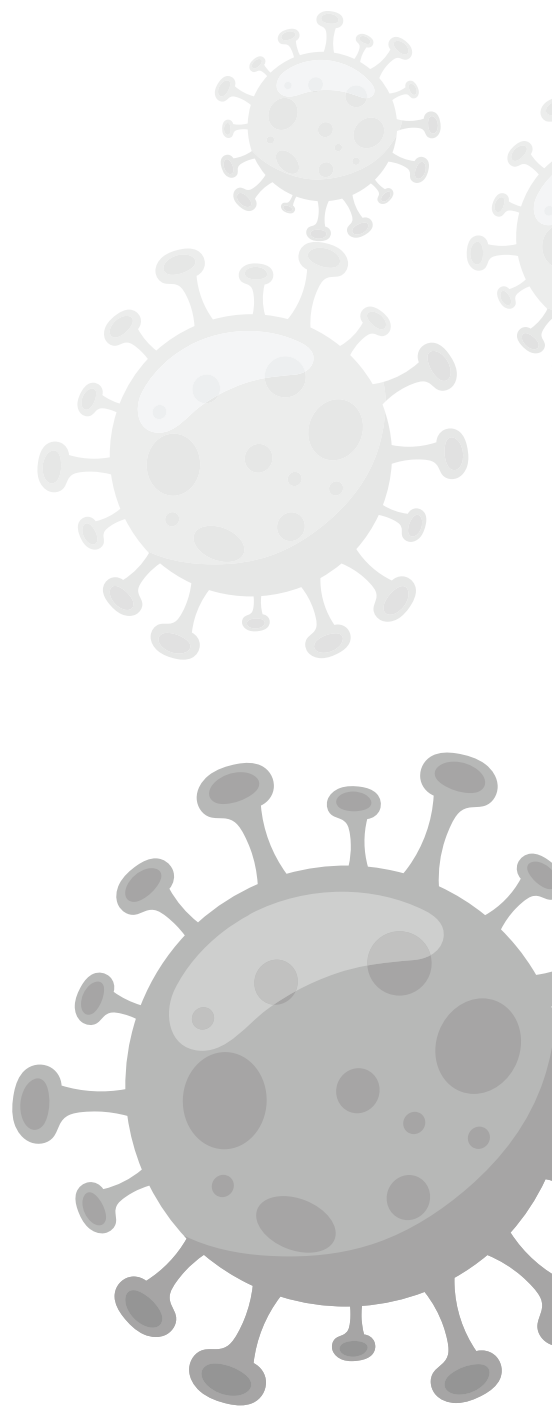
Background

Executive Order No. 168, dated May 26, 2014, created the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF-EID) in the Philippines with the emergence of the Severe Acute Respiratory Syndrome (SARS), Avian Influenza, Ebola, and the Middle East Respiratory Syndrome Coronavirus (MERS-CoV). These infections are acknowledged by the global community to cause potential public health emergencies of international concern. While the country was not as affected like other countries by these diseases, the law already provided for the creation of said Inter-Agency Task Force (IATF) that will manage emerging infectious diseases.

Currently, the country is experiencing the unprecedented impacts of COVID-19, a biological hazard the end of which is uncertain given the emergence of new variants of the disease and challenges in the implementation of a vaccination program, especially for local government units (LGUs). As of February 26, 2021, the Department of Health (DOH) reported total confirmed cases at 571,327, deaths at 12,247, and recoveries at 524,582. As regards the economy, gross domestic product (GDP) contracted by 9.5% in 2020.

As the country continues to respond to COVID-19, it also recovers from the losses and effects brought about by the impact of the disease while adapting to the new normal. This is particularly true for LGUs who are currently at the forefront of the response efforts and who will eventually lead the recovery process in their respective communities. The LGUs' familiarity with the concerns of their constituents as well as the available resources at their disposal will enable them to craft more appropriate, doable, and responsive recovery strategies.

The disaster management cycle consists of disaster prevention and mitigation, disaster preparedness, disaster response, and disaster rehabilitation and recovery, the objective of which is to minimize the impact of disasters during and after a disaster has occurred. While it would appear that these are discrete phases in a series of sequential steps, with a clear beginning and end within a finite period, this is far



from reality. These stages do not occur in isolation or in the order these are mentioned. They can overlap, are often inseparable, with the length of time of each phase dependent on the severity of the disaster.

Disaster rehabilitation and recovery covers measures that will ensure the return to normalcy, and even better, of localities and communities that were affected by disasters, through restoration, reconstruction, improvement, and other development activities within the principle of “Build Back Better.” The rehabilitation and recovery program can build on the response and relief initiatives that have already been implemented by LGUs. Moreover, the activities undertaken during the rehabilitation and recovery phase can contribute to preparedness and prevention for future hazardous events, such as the adoption of more stringent standards for physical infrastructure.

This guide, however, will focus on rehabilitation and recovery strategies from COVID-19 while adapting to the new normal. All information contained in this document is as of February 26, 2021.

Uses of the Guide

The Guide serves as a rehabilitation and recovery planning reference at the local level, particularly on COVID-19.

Specifically, this will have the following uses:

- serve as primary reference for Local COVID-19 Task Forces, Local Disaster Risk Reduction and Management Councils (LDRRMCs) in preparing rehabilitation and recovery programs, and local planners in the updating of medium- and long-term mandated plans of LGUs to sustain rehabilitation and recovery initiatives addressing COVID-19 impacts (the document is suggestive in terms of the process, programs or interventions, and templates for planning)
- suggest baseline data requirements for generation of LGUs for use in rehabilitation and recovery planning
- guide the coordination of rehabilitation and recovery efforts of LGUs, including their roles, responsibilities, and institutional structures
- provide a rehabilitation and recovery framework for COVID-19 that defines medium- and long-term goals and desired outcomes of sectoral interventions to inform the formulation of rehabilitation and recovery programs, projects, and activities (PPAs) that shall: (i) form part of a cohesive rehabilitation and recovery program for COVID-19 and/ or (ii) be integrated in the medium- and long-term mandated plans of LGUs

Guide Content

The Guide is divided into six parts, as follows:

Part 1. Disaster Rehabilitation and Recovery Framework

Part 2. Institutional Arrangements

Part 3. Rehabilitation and Recovery Program Planning Process

Part 4. Implementation Mechanisms

Part 5. Monitoring and Evaluation

Part 6. Communications Strategy

The Disaster Rehabilitation and Recovery Planning Guide (Planning Guide), developed by the National Economic and Development Authority (NEDA) and approved by the National Disaster Risk Reduction and Management Council (NDRRMC) on March 20, 2019, was used as the main reference in the preparation of this Guide. It was customized to address the LGU needs brought about by the pandemic. The Guide does not end with the formulation of a COVID-19 Rehabilitation and Recovery Program but, more importantly, suggests the integration of medium- to longer-term strategies and PPAs in LGU-mandated plans in line with national government recovery strategies and priorities. For ease of use of the LGUs, portions of the Planning Guide were retained in this document.

Guiding Principles for COVID-19 Rehabilitation and Recovery Planning

In preparing for a sustainable rehabilitation and recovery program, the following principles, though not exhaustive, may be considered:

- Consistent with the development goals and objectives of the locality, municipality, and city
- Broad enough to cover all affected sectors and fully integrated for ease of coordination
- Evidence-based: Uses the best available data from a wide range of sources, but this does not mean delaying the formulation of the program just to gather all the desired and latest information; timeliness should not be sacrificed
- Forward-looking: While based on statistical trends and informed predictions, it should consider the likely impact on future similar and emerging disasters; emerging disasters; though the current guide is on COVID-19, the lessons learned may be applicable to other biological hazards in the future
- Outward-looking: Takes account of situations and developments outside of the locality, such as neighboring municipalities, cities, regions, and the national government
- Inclusive: Takes into account the needs of all those directly and indirectly affected by the disaster
- Participatory: All stakeholders are consulted to the extent possible; this process shall instill public trust, partnership, collaboration, and unity of efforts
- Able to maximize use of local resources
- Transparent in the flow of funding and resources
- Timely and flexible
- Innovative and creative: Open to new ideas in addressing new challenges



Disaster Rehabilitation and Recovery Framework

1.1. Policy Framework for Disaster Rehabilitation and Recovery

Consistent with the Rehabilitation and Recovery Planning Guide, this Guide supports the two (2) global policy frameworks and international agreements that recognize the importance of a risk-informed and resilient environment: (a) Sendai Framework for Disaster Risk Reduction 2015-2030, and (b) the 2030 Agenda for Sustainable Development.

Locally, the Guide is anchored on and supports the (a) Philippine Disaster Risk Reduction and Management Act of 2010 (Republic Act No. 10121), (b) National Disaster Risk Reduction and Management (NDRRM) Framework, (c) NDRRM Plan 2011-2028, and (d) Philippine Development Plan (PDP) 2017-2022.

This Guide considered the health and COVID-19 laws and policies that were issued since the declaration of the state of national health emergency, including IATF-EID guidelines which provided for actions to prevent further transmission of the disease and respond to the impacts of COVID-19. These policies influenced protocols and strategies as the country is transitioning to the new normal. Among these are:

A. Mandatory Reporting of Notifiable Diseases and Health Events of Public Concern Act (Republic Act No. 11332), July 16, 2019

This law declares it a policy to protect and promote the right to health of the people and instill health consciousness among them. The people will be protected from public health threats through the efficient and effective disease surveillance of notifiable diseases, including emerging and re-emerging infectious diseases, diseases for elimination and eradication, epidemics, and health events, including chemical, radio-nuclear, and environmental agents of public health concern.

Among the objectives of the law are: “(b) To ensure the establishment and maintenance of relevant, efficient, and effective disease surveillance and response system at the national and local levels”; and “(e) To establish effective mechanisms for strong collaboration with national and local government health agencies to ensure proper procedures are in place to promptly respond to reports of notifiable diseases and health events of public health concern, including case investigations, treatment, and control and containment, including follow-up activities.”

Further, this law authorizes the Secretary of Health to declare epidemics of national and/ or international concern, except when the same threatens national security, in which case the President shall declare a state of public health emergency and mobilize government and non-government agencies to respond to

the threat. Provincial, city, or municipal health offices may only declare a disaster outbreak within their respective localities, provided that the declaration is supported by sufficient scientific evidence. Such evidence should be based on disease surveillance data, epidemiologic investigation, environmental investigation, and laboratory investigation.

B. *Bayanihan* to Heal as One Act (Republic Act No. 11469), March 25, 2020

This law declares the existence of a national emergency due to COVID-19 and authorizes the President to exercise certain powers, subject to certain restrictions and limitations, to carry out the declared national policy. Its effectivity is for a period of three months only.

Among the powers of the President under the law is to “ensure that all Local Government Units (LGUs) are: acting within the letter and spirit of all the rules, regulations, and directives issued by the National Government pursuant to this Act; are implementing standards of Community Quarantine consistent with what the National Government has laid down for the subject area while allowing LGUs to continue exercising their autonomy in matters undefined by the National Government or are within the parameters it has set; and are fully cooperating towards a unified, cohesive and orderly implementation of the national policy to address COVID – 19: Provided, That all LGUs shall be authorized to utilize more than five percent (5%) of the amount allocated for their calamity fund subject to additional funding and support from the National Government.”

Further, the President can direct the discontinuance of appropriated programs, projects, or activities (PPAs) of any agency of the Executive Department, including Government-Owned and Controlled Corporations (GOCCs) in the FYs 2019 and 2020 General Appropriations Act. Whether released or unreleased, the allotments remain unobligated. The President can then utilize the savings generated to augment the allocation for any item directly related to support operations and response measures necessary or beneficial in addressing the COVID -19 emergency. The funds made available can be used to augment the National Disaster Risk Reduction Fund or Calamity Fund and under allocations to LGUs, among others.

C. *Bayanihan* to Recover as One Act (Republic Act No. 11494), September 11, 2020

This law extends the President’s special powers to respond to COVID-19 under RA 11469. It also provides a Php165.5-billion response fund for addressing the health crisis, of which Php 25.5 billion will serve as “standby fund”.

This Act (1) provides support to healthcare frontliners, including expansion of health system capacities and facilities; (2) focuses on reviving the economy, allocating funds to cover sectors greatly affected by the pandemic, particularly the unemployed and displaced workers, micro, small, and medium enterprises (MSMEs), agriculture and fishery, transportation, and tourism; (3) provides support for students, teachers and schools considering adjustments in the learning system; (4) provides funds for hiring of contact tracers to facilitate early detection and isolation of close contacts of positive cases; and (5) provides funds to increase research and data analysis on COVID-19.

D. We Recover as One Report, May 2020

We Recover as One is the report crafted by the IATF-EID – Technical Working Group for Anticipatory and Forward Planning (IATF-EID-TWG for AFP) led by the NEDA. This was done in collaboration with various agencies and resource persons from the private sector and academe to provide a whole-of-government and whole-of-nation approach in responding to the health threats of COVID-19, rebuilding the country's confidence, and adjusting to the new normal.

The report contains the recommended priority policies, strategies, programs, and legislative actions to be adopted by the national government and, to a certain extent, by LGUs, in mitigating the adverse impacts of the pandemic and facilitating the resumption of social and economic activities in the country.

E. Recharge PH We Recover as One, August 2020

Recharge PH We Recover as One is a recovery program developed by the Task Group (TG) on Recovery led by NEDA which aims to refocus, sharpen the design, accelerate the implementation of strategies and programs to mitigate the impacts of COVID-19, and support the recovery of the country's economy.

The Recharge PH builds on the 'We Recover as One' report of the IATF-TWG for AFP, which contains the initial assessment of the socio-economic impacts of the pandemic.

F. Guidelines issued by the IATF-EID

Since the emergence of COVID-19 in the country, the IATF-EID has issued omnibus guidelines for the implementation of community quarantines to prevent, minimize, and manage further transmission of the disease. These guidelines define the criteria for the imposition of varying degrees of community quarantine in the country and provide the list of allowable socio-economic activities and measures for each quarantine level. These guidelines also prescribe governing policies to be adopted by National Government Agencies (NGAs) and LGUs in the management of COVID-19.

G. National Action Plan (NAP) Against COVID-19, March 2020 to 2021

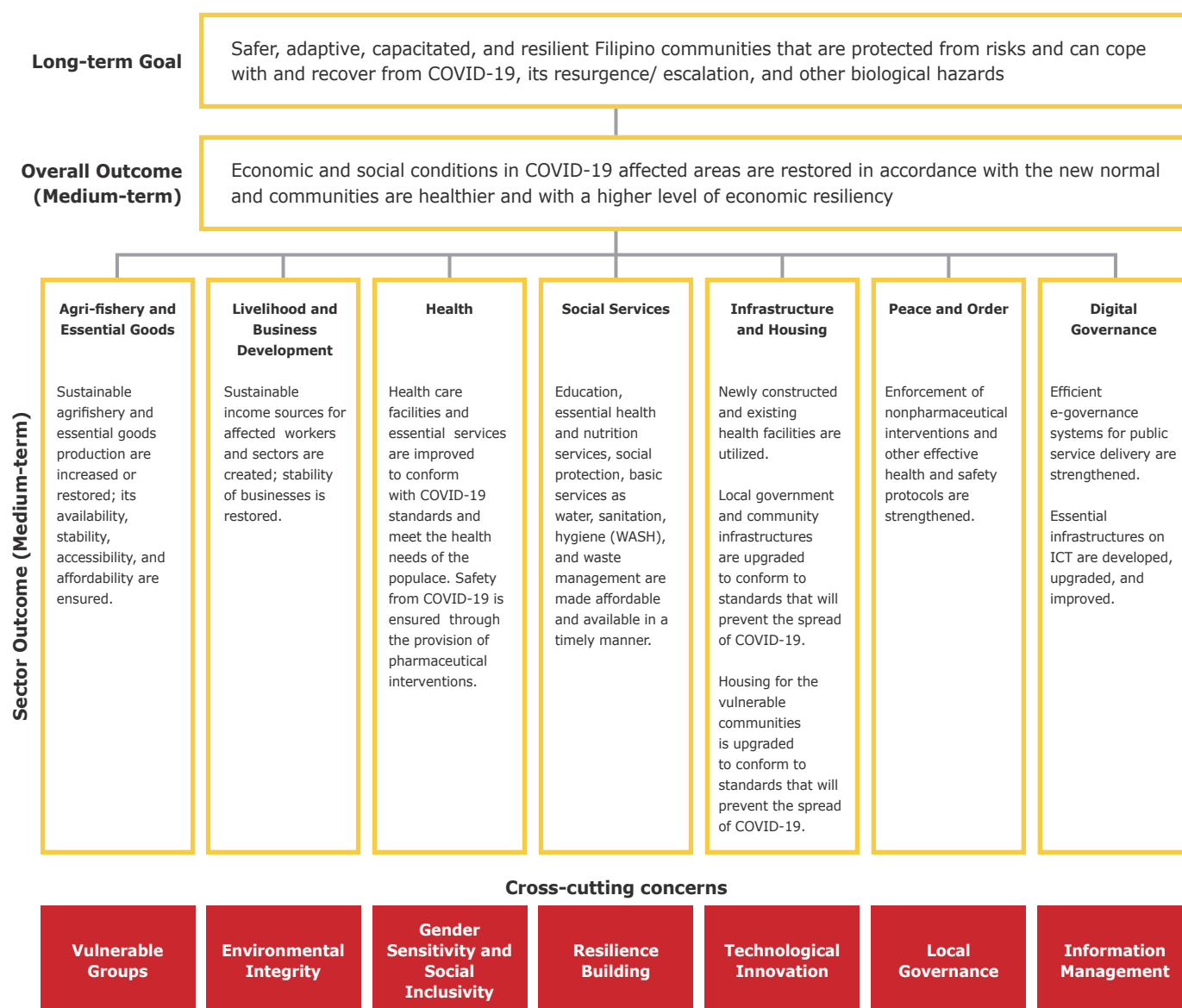
The NAP provides for the national government's strategy to respond to the COVID-19 crisis. It aims to protect the people from the virus while mitigating the social, economic, and security impacts of the pandemic. NAP Phase I, implemented from March to June 2020, focused on the prevention and containment of COVID-19 while mitigating its effects on the nation's economy. Phase II, implemented from July to September 2020, created a balance between protecting the health of the people and reviving the nation's economy. Phase III, covering October 2020 to March 2021, is the government's transition plan to the new normal, managing the health risk as the country prepares and waits for the vaccine to be made available. Phase IV will focus on the implementation of the vaccine program.

The LGUs are expected to localize the NAP based on their varying needs, ongoing interventions, and the impact of the pandemic. At the minimum, interventions across LGUs should be based on the NAP.

1.2. COVID-19 Rehabilitation and Recovery Framework

Rehabilitation and recovery from COVID-19 is guided by the framework below. This is consistent with the General Framework for Disaster Rehabilitation and Recovery and aligned with the NAP Against COVID-19. Figure 1 presents the COVID-19 Rehabilitation and Recovery Framework.

Figure 1. COVID-19 Rehabilitation and Recovery Framework





2 Institutional Arrangements

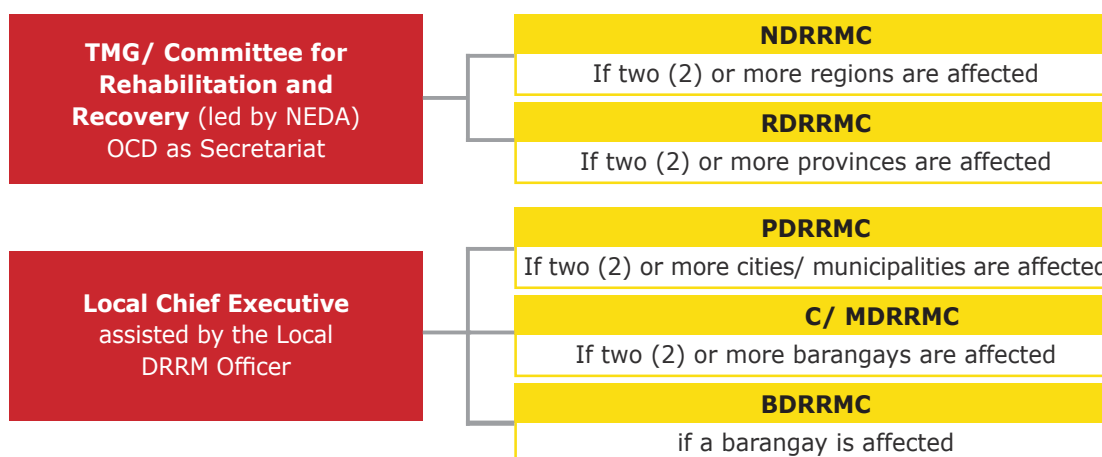
2.1. Coordination Structures

Institutionalizing a coordination structure is critical for the success of any rehabilitation effort because it delineates the roles and responsibilities of each stakeholder. An established coordination structure reduces confusion and makes rehabilitation and recovery activities more efficient. The following are the delineated structure and responsibilities for coordination, including the roles of each stakeholder involved.

A. Disaster Risk Reduction and Management Councils (DRRMCs)

DRRMCs at the national, regional, and local levels are the country's disaster management coordination structure as mandated by RA 10121 or the Philippine Disaster Risk Reduction and Management Act. The lead DRRMC in a disaster event depends on the geographical areas affected. If the area coverage of a disaster is greater, a higher level of administration takes the lead. In cases where two (2) or more regions are affected, the National Disaster Risk Reduction and Management Council NDRRMC is in charge. If two (2) or more provinces are affected, the Regional DRRMC (RDRRMC) leads the rehabilitation and recovery efforts. For disasters affecting two (2) or more cities or municipalities, the Provincial DRRMC (PDRRMC) takes the lead. However, it is important to note that in cases where two (2) independent cities or a combination of a province and an independent city are affected, the RDRRMC takes the lead in coordinating rehabilitation and recovery activities. Finally, for disasters affecting a smaller area, the City/ Municipality DRRMC (C/ MDRRMC) is in charge when only two (2) or more barangays are hit, while the Barangay DRRMC (BDRRMC) handles disaster situations confined to a single barangay. Figure 2 illustrates the coordination structure for rehabilitation and recovery.

Figure 2. Coordination Structure for Rehabilitation and Recovery



At the local level, the LDRRM Officer assists the Local Chief Executive in overseeing the overall rehabilitation efforts. However, in cases where the national government prescribes a different structure, the LGUs can adopt or mirror the proposed structure and later adjust as it deems fit.

B. National and Regional Task Force COVID-19

The National Task Force (NTF) for COVID-19 was created to implement the NAP for COVID-19 and carry out the IATF recommendations. NDRRMC Memorandum No. 32, series of 2020, organized the NDRRMC as the NTF while the RDRRMCs operate as the Regional Task Force (RTF). The Chair of the NTF is the Department of National Defense (DND) Secretary, Vice-Chair is the Department of the Interior and Local Government (DILG) Secretary, while the NTF Chief Implementer is the Presidential Adviser on the Peace Process. The NDRRMC determines the composition of the sub-task groups that will be created under the NTF. As the government implements Phase III of the NAP, it has reorganized its IATF-NTF structure to focus on the three clusters as response; on the COVID-19 vaccine; and on the recovery clusters. Figure 3 presents the national structure, and Figure 4 presents the corresponding regional structure.

Figure 3. IATF-NTF Expanded Organization Structure, August 2020

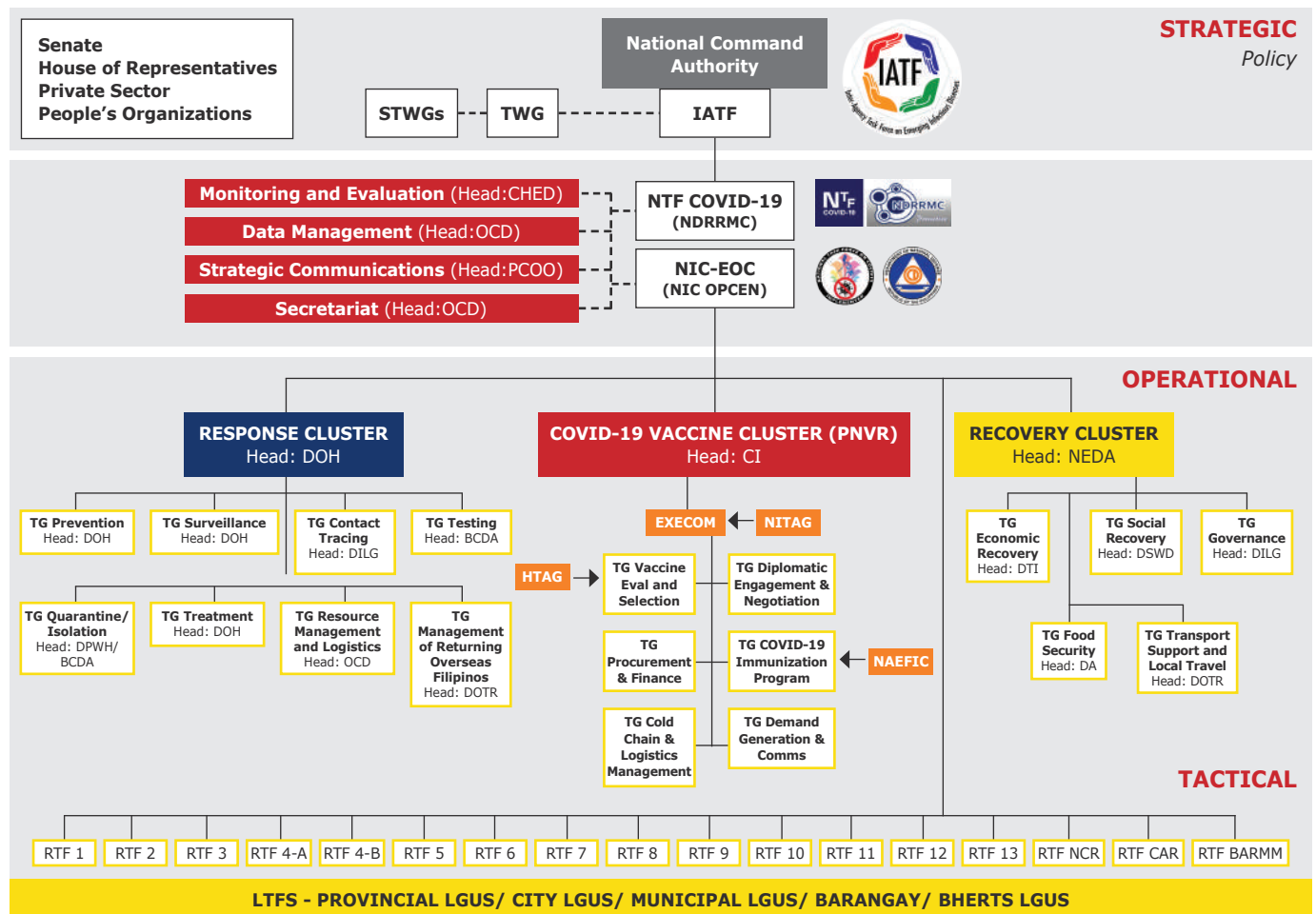
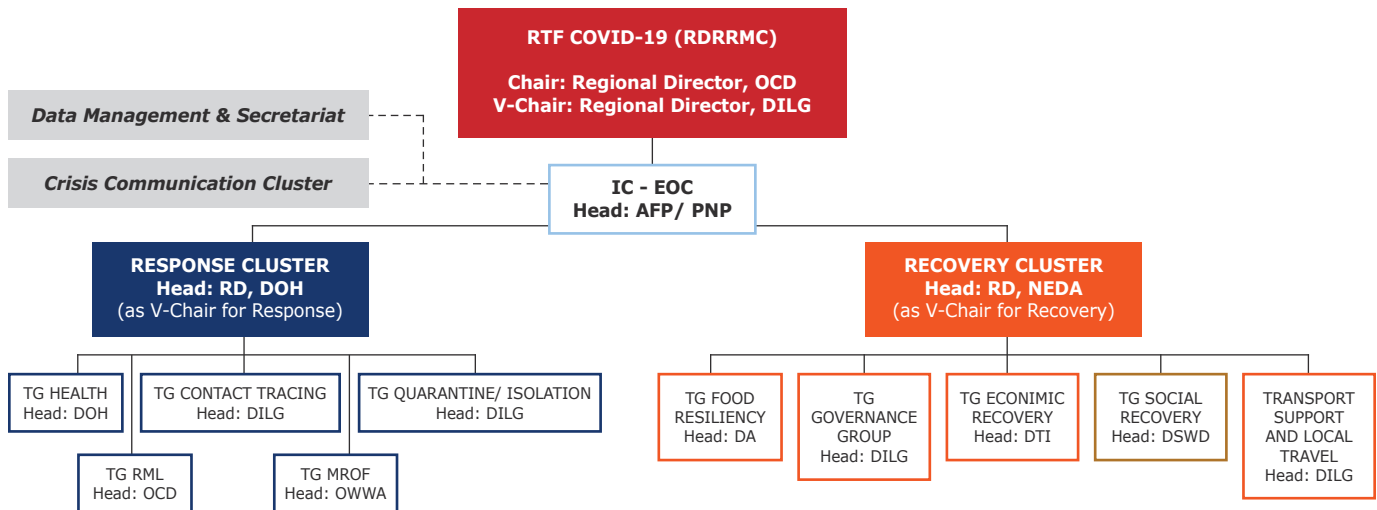


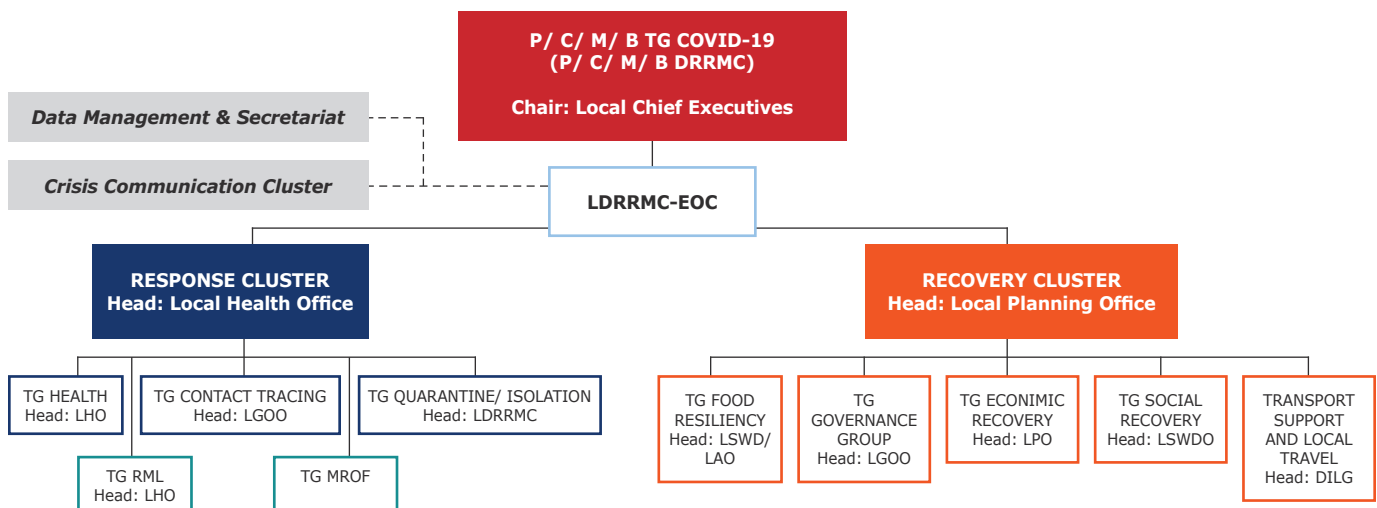
Figure 4. Regional Task Force Structure



C. Local Task Force Against COVID-19

DILG Memorandum Circular No. 2020-077, dated April 27, 2020, directed the LGUs to establish the Local Task Force (LTF) Against COVID-19 in every province, city, and municipality to align all local actions with the national strategy framework. The LTF should be comprised of, but not be limited to, the Local Chief Executive as the head and the department heads, such as the city/municipal local government operations office (C/ MLGOO), Philippine National Police (PNP), Bureau of Fire Protection (BFP), Local Disaster Risk Reduction and Management Office (LDRRMO), Municipal Health Office (MHO), Barangay Health Workers (BHW), Barangay Health Emergency Response Team (BHRT), Barangay Public Safety Office (BPSO), and the Local Epidemiology Surveillance Unit (LESU). The LGUs have the flexibility to structure their LTF based on their local needs, where specific clusters may be added depending on their local situation. Figure 5 presents the LTF structure based on NTF for NAP Phase III.

Figure 5. Local Task Force Structure



*Province/ City/ Municipality/ Barangay Task Groups

Adoption of the structure based on NAP, phase III prescription rationalizes the interrelationships of the LTF on COVID-19, the Local DRRMC, and the Local Planning and Development Office (LPDO). The structure facilitates evidence-based planning, as the Local Disaster Risk Reduction and Management Councils-Emergency Operations Center (LDRRMC-EOC) supports rehabilitation and recovery planning of LGUs with data analytics. The LPDO, as lead of the recovery cluster, ensures sustainability of rehabilitation and recovery interventions programmed in the mandated plans of local governments. While NAP implementation is constantly reviewed and prescribed structures may change, a planning function to include formulation of rehabilitation and recovery programs is instituted in the LPDO. This ensures continuity of rehabilitation and recovery efforts of local governments.

Considering the ad hoc nature of the TGs at the national and regional levels and under the COVID-19 LTF, the LGUs through the LCEs could adopt and adjust their COVID-19 LTF using the planning and implementation structure that is responsive and relevant to their respective areas. Taking into consideration their specific needs and concerns, the LGUs have the option to use the sample Rehabilitation and Recovery Committee and Sub-Committees below:

D. Rehabilitation and Recovery Committee

Rehabilitation efforts cover various concerns, such as employment, infrastructure, housing, and delivery of social services. To facilitate the coordination of rehabilitation and recovery program preparation, the LTF Against COVID-19 or the LDRRMC should create a planning committee with several sub-committees corresponding to the sectors under the program. These sectoral or sub-committees and their composition will depend on the interventions needed. The following sub-committees can be adopted for COVID-19 Rehabilitation and Recovery Program:

- **Agri-fishery and Essential Goods Sub-Committee**

The Agri-fishery and Essential Goods Sub-Committee, led by the local agriculture office, shall be responsible for the restoration of agriculture production and provision of support services for farmers/ fisherfolks/ laborers. This includes adequate farm and fisheries inputs and equipment and access to fisheries and crop financing for affected workers in the agriculture and fisheries sector. It shall closely coordinate with the Livelihood and Business Development Sub-Committee to ensure complementation of interventions throughout the entire agricultural, fisheries and/ or agribusiness value chain.

- **Livelihood and Business Development Sub-Committee**

The Livelihood and Business Development Sub-Committee shall be responsible for providing emergency employment assistance to the affected families, restoring sources of income or providing alternative opportunities for employment, reinvigorating micro, small and medium enterprise (MSME) development, and paving access to financing for businesses.

- **Health Sub-Committee**

The Health Sub-Committee, led by the local health office, shall be in charge of the management of COVID-19 outbreak. It shall ensure that minimum health standards and minimum health system capacity are implemented and enforced and that vaccination of the population is done in an orderly manner, particularly starting with the high-risk group.

- **Social Services Sub-Committee**

The Social Services Sub-Committee, led by the local social welfare development office, shall identify projects to address the welfare of affected communities, including the provision of continuing relief assistance to the most vulnerable groups, until they are ready to return to their normal lives. Of larger concern for the Sub-Committee are the provision of psychosocial programs for the victims, the rehabilitation of social services facilities, and the resumption of health, education, and other basic services.

The Sub-Committee shall also be responsible in ensuring a smooth transition from the relief and emergency phase to the early rehabilitation and recovery phase for the delivery of social services.

- **Infrastructure and Housing Sub-Committee**

The Infrastructure and Housing Sub-Committee, led by the local engineering office, shall be in charge of the construction, rehabilitation, or repurposing of health facilities for isolation/containment, the upgrading of local government and community infrastructure to conform to standards that will prevent the spread of infectious disease outbreaks, and the establishment of refrigeration facilities to be able to transmit the COVID-19 vaccine up to the LGU level. The Sub-Committee shall also be responsible for the development of appropriate safety standards in housing and settlements that will contain the spread of pandemics. It shall ensure that housing and settlements for affected communities, particularly the vulnerable sector, are upgraded to conform to minimum health standards.

- **Peace and Order Sub-Committee**

The Peace and Order Sub-Committee shall be responsible for the peace and order and security in the area. This includes seamless coordination with neighboring LGUs on the implementation of community quarantine measures and orderly access to supply chains, especially to medicines, PPEs, testing supplies, and other health commodities. The Sub-Committee shall also ensure that efficient and safe transportation and mobility systems are in place, with safeguards against infectious disease outbreaks.

- **Digital Governance Sub-Committee**

The Digital Governance Sub-Committee shall ensure that efficient e-governance systems for public service delivery are strengthened and that both public and private sectors are transitioning

to digital infrastructure. The Sub-Committee shall also ensure that essential infrastructures on Information and Communications Technology (ICT) are developed, upgraded, and improved.

The above-indicated sub-committees may also be situated in the COVID-19 LTF structure. For instance, under the NAP 3 recommended structure, the said committees can be subsumed under the Recovery Cluster TGs. Mapping out the different sub-committees under the various TGs can better identify priority sub-sector concerns and interventions.

The Local Chief Executive (LCE), as head of the LTF on COVID-19 or LDRRMC, should ensure that all interventions to address COVID-19 are implemented and delivered in a timely manner. The LGU should accordingly address implementation bottlenecks and ensure that public health considerations are integrated in all the interventions.

2.2 Role of Stakeholders

A. National and Local Government

The national government and LGUs are the primary players in disaster rehabilitation and recovery. The specific roles of NGAs in the implementation of rehabilitation and recovery PPAs depend on their agency mandates and the NDRRM Plan.

LGUs are the first line of support in the rehabilitation and reconstruction of affected areas. In most cases, it is the concerned RDRRMC that provides assistance to affected LGUs. The national government generally only provides financial or technical assistance when the impact of the disaster is huge and beyond the capacity of affected LGUs to address.

B. Civil Society Organizations and other Development Partners

The Civil Society Organizations (CSOs) and other development partners, which include the private sector, professional organizations, academe, and volunteer organizations, can support the implementation of disaster rehabilitation and recovery programs.

These organizations can provide technical expertise and additional knowledge on project development, organization, implementation, and monitoring and evaluation. Professional organizations and expert groups, such as of engineers, doctors, professors, and urban and environmental planners, can serve as focal points for expert advice on rehabilitation and recovery planning and on operational aspects of the project implementation.

Also, these organizations can cover a significant amount of the cost of rehabilitation and recovery programs; help design the structures and infrastructure to be built, in compliance with government resiliency standards; supply the materials needed for reconstruction; do the construction itself; and jumpstart local, regional, and national economies by quickly re-establishing their businesses in affected areas.

Even before a disaster happens, partnership with CSOs and other development partners, through a MOA or public-private partnership (PPP) arrangements, should be established. This is to have a clear mechanism for coordination and participation of the CSOs, private sector, academe, and professional organizations in the recovery phase. There should be pre-identified and pre-agreed roles for each stakeholder during the relief or emergency phase and in the rehabilitation and recovery phase. A mechanism for accreditation should be put in place for these professional organizations and institutions, so they can be deployed in affected areas and tapped when necessary.

C. Communities

Community participation is crucial in the rehabilitation and recovery process because of the communities' local knowledge and experience. As their interests are the primary consideration for rehabilitation and recovery interventions, affected communities need to be included and consulted throughout the rehabilitation and recovery process -- from assessing and defining problems and needs to identifying solutions and implementing projects. There should be a mechanism to ensure the participation of the community. The LGUs should work closely with affected communities in the course of the rehabilitation and recovery efforts.

Beneficiary participation will also allow the participation of vulnerable and marginalized sectors (including children and youth, women, the elderly, persons with disabilities, and members of certain social classes or ethnic groups) to influence decision-making in programs that affect them. A participatory process ensures community ownership of the government's programs for affected communities and guarantees long-term success, as these would address actual needs and provide sustainable solutions.



3 Rehabilitation and Recovery Program Planning Process

3.1 COVID-19 Rehabilitation and Recovery Program Planning Process

The preparation of a COVID-19 rehabilitation and recovery program involves a three-step process as follows:

Step 1. Rapid Assessment of COVID-19 Situation in the Locality

In order to prepare for the rehabilitation and recovery of a specific area from COVID-19, it is necessary to know the COVID-19 outbreak situation in the locality. It is important that the LGU knows the extent of impact of the pandemic; from which sector or part of the community the transmission is rampant; and what contributes largely to the local transmission, such as new entrants to the locality and non-compliance with health protocols. It is also critical that the LGU is aware of the behavior of the community/ people which contributes to the increase or decrease in the transmission cases.

LGUs may undertake a rapid needs assessment to determine/ estimate the needs and socioeconomic impact of the pandemic on the population. This will serve as basis in the formulation of a rehabilitation and recovery program. This is done through desktop exercise using available data which the LGU may already have in its database (e.g., community-based monitoring system (CBMS). These include designated statistics from the Philippine Statistics Authority (PSA) [demographic profile, housing, income and expenditure, poverty] and administrative data, such as land area and use, economic activity and livelihood, infrastructure facilities, social services, and hazards from concerned government agencies. LGUs' socioeconomic profile, housing needs and, for some, hazard profiles can be found in the local development and land use plans and local shelter plans. Disaster-related information are also available in the national and local DRRM Plans.

COVID-19 as a biological hazard is unlike geological and meteorological hazards. It is extremely important to gather data/ information from situational reports on the estimates of losses in key sectors, such as livelihood, employment, business, tourism, affected individuals, specifically the number of cases, casualties, recoveries, and the internally displaced persons per barangay. Further, it is important to establish a demographic profile of the community, with sex- and age-disaggregated data that captures the profile of the women and children and other vulnerable sectors, such as persons with disabilities (PWDs), indigenous peoples (IPs), and the elderly. It should likewise include an assessment of the consequent impacts of the COVID situation in the delivery of health services to cover other highly infectious diseases, such as those for Human Immunodeficiency Virus (HIV) and tuberculosis

(TB)¹ that may not have been sufficiently addressed during the pandemic. Such information will serve as input in the assessment of the situation of vulnerable sectors. LGUs need to include data on the number of Returning Overseas Filipinos (ROFs) and locally stranded individuals (LSIs) in their areas². Certain LGUs may have to include data related to a specific concern of their locality/ community, e.g., Bohol on tourism. Annex A provides a list of data requirements needed for the formulation of the rehabilitation and recovery program.

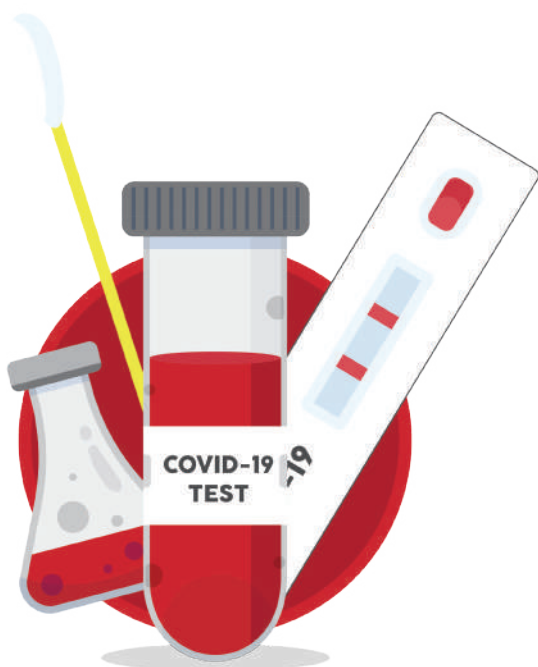
Step 2. Program Formulation

The LGUs shall prepare their Local Rehabilitation and Recovery Programs for COVID-19 that are confined to their locality, through the LTF for COVID-19. The involvement and leadership of the LPDO is strongly advised to facilitate integration and sustain implementation of rehabilitation and recovery initiatives identified and programmed in LGU-mandated plans.

Below are the suggested contents of the LGU COVID-19 Rehabilitation and Recovery Program:

I. Background and description of affected areas

This can include location of affected areas, topography, climate, natural resources, economic activities prior to pandemic, social and demographic data, and LGUs' health workforce and health system capacity. Information for this section can come from the existing plans of LGUs and from relevant agencies.



II. COVID-19 assessment and situational analysis

This portion should include the results of the rapid assessment on the COVID-19 situation in the locality.

III. Rehabilitation and recovery strategies

The rehabilitation and recovery program should include strategies that will aid in the achievement of the desired outcome and goal as specified in the COVID-19 Rehabilitation and Recovery Framework. The strategies should be consistent with the guiding principles for the rehabilitation efforts. Specific sector and sub-sector strategies should also be provided to help achieve short- and medium-term program objectives.

¹ Impact on health services delivery to include provision of HIV and TB screening (at the community)/ testing (at the facility), provision of antiretroviral drugs, and other care and support services for People Living with HIV and TB

² The DILG issued Memorandum Circular No. 2020-087 enjoining all LGUs to undertake necessary actions in the management of ROFs and LSIs.

Below are some samples of sector-specific strategies that LGUs may consider. These sectoral strategies, projects, and activities, while taking into consideration local priorities, needs, capacities, and institutions, among others, are guided by issuances from the national government.



Agri-fisheries and Essential Goods

- Restore or increase agriculture production and make support services accessible to farmers/ fisherfolks/ laborers
- Provide inputs for agricultural and fisheries production
- Ensure supply chains are unhampered
- Improve access of farmers and fisherfolk to credit and micro-insurance
- Provide capacity building and training activities, including the introduction of sustainable production technologies
- Set up systems to respond to bottlenecks in the transportation network, food community markets, logistics, and other supply chains, including the use of digital technology, where possible
- Enact regulations for food markets and abattoirs
- Implement food sufficiency program to include food garden and Plant, Plant, Plant programs of the Department of Agriculture (DA)
- Adopt urban agriculture, backyard/household gardening, and community farming
- Establish protocols in the transport and use of agricultural products in satellite markets in communities (e.g. *talipapa*)
- Establish mobile/online markets (*palengke*)
- Provide healthy and nutritious food packs to communities

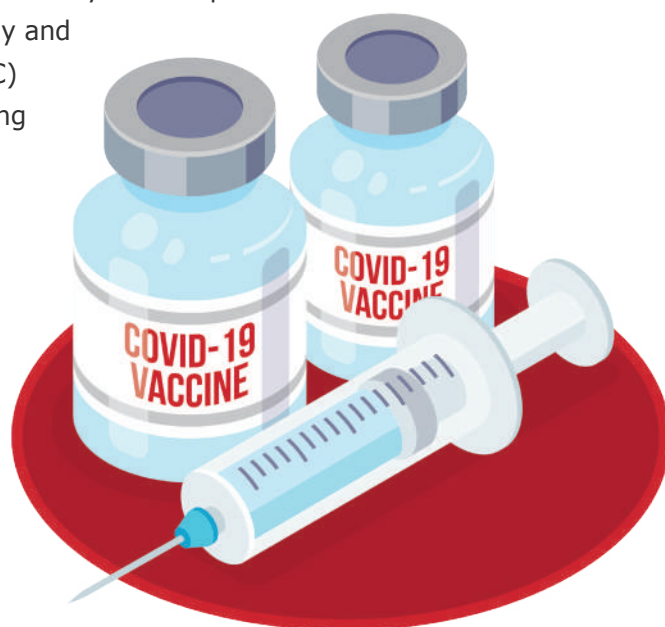
Livelihood and Business Development

- Create sustainable income sources for households and restore stability of businesses
- Improve access to financial services (loans, credit, guarantees) and micro-insurance for MSMEs and households
- Provide skills training
- Identify recovery activities that are relevant and effective in the community such as labor-intensive public works, slum upgrading, low-cost housing programs
- Implement Emergency Employment Program prioritizing employment of displaced workers (LSIs and ROFs)
- Provide alternative work/ source of income, skills training, and financial support (loan assistance) to displaced workers
- Provide assistance to public utility vehicle (PUV) drivers
- Ensure that the support services are in place to enable businesses to operate

- Provide incentives to businesses (deferment of local tax payment and/ or contributions to SSS, Philhealth, Pagibig; longer term repayment schemes)
- Defer payment of tax and utilities by tourism establishments during quarantine period
- Assess and monitor tourism enterprises' compliance to safety protocols procedures
- Develop business continuity plan and capacity building program for MSMEs
- Promote collaboration of retail and restaurant owners with delivery service providers
- Establish preventive measures in work places
- Develop a communication strategy with "safety of customers" as a core message (same as in the tourism industry)

Health

- Implement and enforce Minimum Public Health Standards and Minimum Health System Capacity Standards
- COVID-19 vaccination of the population, starting with the high-risk group
- Conduct localized, targeted mass testing
- Conduct intensive community disinfection and sanitation campaign
- Establish/ install hand washing and sanitation stations
- Enhance COVID-19 surveillance through active case finding, expansion of influenza-like illness (ILI), and Severe Acute respiratory infection (SARI) surveillance systems
- Establish contact tracing protocols, including hiring of qualified and trained staff and effective quarantine systems
- Conduct capacity training for LGU staff on contact tracing and surveillance.
- Enhance laboratory capacities to detect COVID-19
- Strengthen and implement protocol on surge capacities for the health system (human resources, medicines, and supplies such as Personal Protective Equipment or PPEs, etc.)
- Continue financial coverage for COVID-19-related testing and treatment
- Develop appropriate safety standards that will contain the spread of pandemics
- Establish telemedicine system to enhance LGU health system response
- Develop and implement communications strategy and Information, Education and Communication (IEC) materials on minimum health standards, including health risks and protection measures
- Intensify public health education campaign, including effective risk communication
- Integrate COVID-19 response with other health programs such as HIV and tuberculosis TB
- Develop person-centered strategies in the delivery of COVID-19 and other health services, such as HIV and TB
- Develop mechanism/ s to ensure continuity of health services, including HIV and TB amidst a health crisis





Social Services

- Continue the provision of social services programs, including non-COVID-related health services, with priority focus on severely affected areas and highly vulnerable population
- Provide adequate mental health and psychosocial support to aid individuals, including health workforce
- Establish community engagement and support groups
- Adopt alternative learning approaches
- Implement digital provision (payment system) of social protection programs, such as *Pantawid Pamilyang Pilipino* Program (4Ps), Social Amelioration Program (SAP), etc., to ensure and enhance safety and access
- Build digitization capacity of beneficiaries and staff of concerned NGAs and LGUs

Infrastructure and Housing

- Identify and acquire safe and suitable facilities for isolation and containment
- Establishment of refrigeration facilities to be able to transmit COVID-19 vaccine to the LGU level
- Develop new normal standards on infrastructure facilities and public transportation
- Conform infrastructure facilities and public transportation system to minimum health standards
- Construct/ establish quarantine facilities for suspect, probable, and positive cases to prevent the spread of infectious disease outbreaks
- Utilize health facilities constructed, rehabilitated, or repurposed for isolation/ containment
- Upgrade local government and community infrastructures to conform to standards that will prevent the spread of infectious disease outbreaks
- Construct WASH facilities, particularly in remote, densely populated, and underserved areas
- Provide temporary settlements for the homeless and for street dwellers
- Develop appropriate safety housing standards that will contain the spread of pandemics
- Put in place efficient and safe transportation and mobility systems with safeguards against infectious disease outbreaks

Peace and Order

- Ensure peace and order and security
- Establish clear coordination mechanism with neighboring LGUs on implementation of community quarantine measures
- Enhance capacity to implement coordinated community quarantine measures
- Implement protocols to avoid the spread of COVID-19 in vehicles and transport hubs
- Provide adequate access for supply chains, especially for medicines, PPEs, testing supplies, and other health commodities

Digital Governance

- Share health-related information and data analytics to GeoRiskPH³
- Strengthen the existing digital infrastructure to ensure connectivity even in remote areas
- Issue policies on the use of digital infrastructures
- Strengthen and expand telehealth system
- Establish Virtual COVID-19 Emergency Help Desk
- Implement phased transition of public and private sectors to a reliable digital infrastructure
- Adopt alternative learning approaches
- Conduct capacity training for stay-at-home mothers to better guide their children in distance learning (e-*Nanay* Tutorial of Malabon City)
- Conduct digital literacy training not only for recipients of social protection programs but for LGUs to facilitate the shift to digital payments
- Make digital payments affordable by encouraging mobile money providers to minimize their fees or charges

Cross-cutting Concerns

Consistent with national policies, the local rehabilitation and recovery program should ensure that inclusive and coherent strategies that address specific sectoral concerns are considered, such as:

Vulnerable Groups

- Make financing available, accessible, and affordable to the vulnerable groups to encourage self-recovery
- Establish emergency response programs for specific sectors (women, children/ youth, OFWs) may be implemented through a network of CSOs, volunteers, and youth groups



³ GeoRiskPH is an integrated data system developed by the Department of Science and Technology (DOST), with an analytical interface to share multi-hazard, exposure, and risk information to assist national and local authorities in accurately assessing risk. On July 1, 2019, the Government directed all its Departments and Agencies to use GeoRiskPH in physical planning and evidence-based policy-making.

- Build capacity of youth organizations as partners in governance through local youth development council and Kabayani-Youth Organization Registration Program (Kabayani-YORP)

Environmental Integrity

- Ensure compliance of health care facilities and treatment technologies to the standards for hazardous waste management
- Implement policies to improve disposal of healthcare wastes at the household or barangay level
- Improve environmental health and mitigate climate change (e.g., permanent adoption of telecommuting work arrangement as applicable, open and green urban spaces to reduce air pollution and carbon emissions and improve human health and well-being, more jobs in waste management sector, and mass media campaigns to promote environmental and public health awareness)
- Update and implement Ecological Solid Waste Management Program and Hazardous Waste Management Program
- Enforce activities that protect wildlife and their habitat.
- Strengthen implementation of forest protection, reforestation, and watershed management
- Improve access to safe and potable water
- Promote water conservation

Gender Sensitivity and Social Inclusivity

- Integrate gender-sensitive indicators into the Rehabilitation and Recovery Monitoring Framework to determine if gender-specific needs are addressed by identified interventions
- Ensure unhampered delivery of medical services to pregnant women and individuals with pre-existing medical condition
- Establish community engagement and support groups

Resilience Building

- Ensure that social infrastructure meets stringent public health and building design standards for infection control
- Install early warning systems and ensure that impending healthcare emergencies are covered
- Update Local Disaster Risk Reduction and Management Plan (LDRRMP) to include provisions for public health emergencies
- Conduct simulation exercises on emergency response
- Develop and conduct awareness campaigns and extensive information dissemination about emergency response, risk and vulnerability, and rehabilitation and recovery strategies



Technological Innovation

- Automate the Business Permits and Licensing System (BPLS)
- Develop and utilize mobile application to track the health conditions of PUIs and PUMs for COVID-19

Local Governance

- Strengthen capacity of LGUs to effectively prepare for and respond to public health emergencies
- Adopt a command and control structure for a coordinated Incident Command System
- Establish coordination mechanisms among NGAs, LGUs, NGOs, stakeholders
- Identify public spaces in communities, including sources to fund such
- Develop and update Public Service Continuity Plan (PSCP)
- Extend moratorium on government permits, licenses and fees during the recovery period
- Incorporate hazard and health standards in updating the Comprehensive Land Use Plans (CLUP)
- Provide comprehensive support services for local frontline workers, including temporary homes and free transportation
- Empower CSOs as partners of LGUs in addressing COVID-19
- Reorganize/ strengthen the Local Price Coordinating Council (LPCC) to facilitate price controls on basic necessities
- Strengthen the participation and involvement of the Sangguniang Kabataan in the fight against COVID-19
- Heighten information dissemination campaign through traditional and digital platforms

Information Management

- Document experiences, learnings, best practices, and sharing of these COVID-19 experiences for better preparedness in reducing the risks and impact of future public health emergencies
- Coordinate and consult with NGAs and neighboring LGUs on related issuances and policies for consistency, coherence, and seamless implementation of interventions
- Establish and use accurate baseline data for evidence-based policy-making and program implementation, including information on stranded persons
- Maintain strong information databases to manage future crises
- Establish monitoring and information system for COVID-19

LGUs are encouraged to innovate and consider other strategies they deem necessary, but these should be consistent with the NAP for COVID-19, national policies, guidelines, and standards.

The thematic focus of the above-cited rehabilitation and recovery strategies may fall within the concern of the identified Task Groups under the Local COVID 19 Task Force. They can assist the LPDO in coordination, data analytics, situational analysis, and identification of relevant rehabilitation and recovery projects, programs, and activities.



IV. PPAs, Funding Requirements, Timeline, and Implementation Arrangements

The detailed list of PPAs based on the strategies should be specified. Below is the template that can be used to indicate the specific PPAs.

Table 1. List of PPAs with Funding Sources and Implementation Period

Priority Programs, Projects and Activities (PPAs)	Location/ Site	Total Funding Requirement (in Php)	Annual Breakdown of Funding Requirement (in Php)			Funding Source	Implementing Office/ Department	Timeframe/ Implementation Period
			Year 1	Year 2	Year 3			
Sector: Governance Project: <i>KABATAAN LABAN SA COVID-19</i> Activities: 1. Development of IEC Campaign for Youth in Social Media Platforms 2. Posting of IEC posters/ tarpaulin along roads and highways	Laguna	200,000	100,000	100,000		General Fund	SK, Information Office	Year 1–Year 2

NOTES:

- 1. Priority PPAs** refers to short- (for implementation within a year), and medium-term (for implementation within the next three to four years) interventions, which are prioritized based on a specific set of criteria identified by the agency. These can be categorized by sector. Year 1 will include interventions that are already being implemented.
- 2. Location/ site** refers to the municipality/ city/ barangay where the PPA will be implemented or located.
- 3. Total Funding Requirement** refers to the aggregated cost of the annual funding requirement.
- 4. Annual breakdown of funding requirement** refers to the monetary value in pesos, of the PPA, for each year of implementation.
- 5. Funding Source** may be national government, local government, private sector, or development partner. If specific fund facility is known, this may also be indicated (i.e., NDRRMF, regular agency budget, LDRRMF, Official Development Assistance or ODA donations, etc.). The specific name of the organization may also be indicated in the case of private-sector- and development-partner-funded PPA.
- 6. Implementing agencies/ LGUs** refers to the specific national government agency and LGU responsible for executing the PPA.
- 7. Timeframe/ implementation period** refers to the number of months/ years or the exact months/ years that the PPA will be implemented. The LGUs will determine the timeframe of their respective Recovery Programs based on their local situation and impact assessment. It is expected that some PPAs will feed into their Comprehensive Development Plans (CDPs) and other local plans.

Some important considerations for financing recovery strategies and PPAs:

The national government agencies, including GOCCs and GFIs and LGUs, should prepare a list of their regular programs, projects, and activities that can be scaled up or reprogrammed in the event of a pandemic. The list should include project details such as the activities and outputs, geographic coverage, costs, and other information. This should be used as reference in preparing the rehabilitation and recovery program. The list of PPAs should also be updated by the agencies and LGUs on a regular basis.

To address COVID-19, NGAs and LGUs are implementing various interventions to overcome the outbreak. Annexes B and C provide a list of selected programs and projects that are commonly implemented by agencies and LGUs for rehabilitation and recovery as well as COVID-19 interventions.

Financing modalities for rehabilitation and recovery interventions should be put in place to provide funding options for COVID-19 rehabilitation and recovery. These can be funds under the General Appropriations Act, such as the NDRRM Fund or regular agency budgets, or other domestic resources that are managed by government agencies, including lending programs of GOCCs and GFIs (i.e., SBCorp., GSIS, Pag-IBIG Fund, etc.). Alternative sources (which may include foreign resources), which have the flexibility to respond immediately and appropriately to the nature of the COVID-19 needs, may also be identified (i.e., loans and grants, humanitarian assistance, donations, etc.).

V. Monitoring and Evaluation

As with all other projects of the LGU, the rehabilitation and recovery PPAs should be monitored and the results/ impacts evaluated to inform future plans and LGU initiatives. Part 5 of this guide contains a detailed discussion on monitoring and evaluation.

VI. Communications Strategy

The communications strategy can form a part of the rehabilitation and recovery program or may be a separate document. Part 6 of this guide provides information for formulating a communications strategy.

Step 3. Integration in the Comprehensive Development Plan (CDP) and other Relevant Plans and Programs

Development considerations as embodied in the LGUs' CDPs are not isolated nor detached. Rather, they should contribute to all aspects of the disaster management cycle, particularly disaster rehabilitation and recovery. COVID-19 introduced a "new normal" that drastically altered LGU needs and priorities.

The LGU should revisit its existing approved CDP, check if it is still responsive to the situation, and update as necessary. If the CDP is already due for updating or if the LGU is about to formulate its CDP, the results of the rapid assessment on the COVID-19 situation should be integrated in the situational analysis or sectoral workshops during CDP preparation or updating.

The review and/ or updating of the goals, objectives, and strategies of the CDP, and other local plans and programs of LGUs should be informed by the rehabilitation and recovery program framework, data analytics, and processes as provided in this Guide.

LGUs should ensure that the medium- and long-term rehabilitation and recovery PPAs should be integrated in their CDP, as well as in other relevant local plans and programs of LGUs such as the LDRRMP (if not yet considered), to ensure sustained support for LGU recovery and rehabilitation efforts.



4 Implementation Mechanism

4.1. Implementation Mechanism

This section outlines some implementation strategies that can be used to speed up the rehabilitation and recovery efforts of national and local governments.

A. National Government Programs

As in disasters, there are regular agency programs that can be expanded or scaled up to quickly address the rehabilitation and recovery needs in COVID-19-affected areas. Subject to existing policies and regulations, the agencies can revise the area coverage of their programs and realign their budgets to accommodate disaster-stricken locations. This arrangement is most applicable for early recovery activities, as it provides ready resources and immediately implementable activities. Because the approved budgets for realignment from these regular agency programs are limited, this arrangement is also recommended for early recovery activities that require minimal or average funding. The following sections outline some examples of such programs.

1. Nationwide Program for LGU Assistance

The program provides a catch-up mechanism to assist municipal governments in local governance. The program funds projects such as water systems, evacuation facilities, local access roads, small water impounding facilities, and sanitation and health facilities for municipalities nationwide. This program can be adopted to cover small-scale post-disaster repairs and reconstruction of damaged infrastructure, particularly projects that cannot be covered by the LGUs' limited budget. It must be noted, however, that certain performance criteria and other requirements must be met by LGUs for enrollment to the program.

2. National Community-Driven Development Program

This program adopts a community-driven development approach that allows communities to fully participate in the planning, implementation, and monitoring and evaluation of PPAs in their areas. Similar to the National Program for LGU Assistance, this program can also be adopted to cover small-scale post-disaster projects, particularly infrastructure and livelihood projects affecting one (1) or a few communities. The existing mechanism of the NCDDP specific to disaster response, early recovery, and rehabilitation projects, such as the Disaster Response Operational Modality (DROM), can already be adopted.

B. LGU Programs

Similar to national government programs, existing LGU programs and projects can be realigned to cover LGU-specific rehabilitation and recovery interventions. These programs are funded by the regular income of the LGU and by outside sources, such as grants. Since funds are readily available, albeit limited, this approach can be useful for projects and activities intending to address immediate and early recovery needs or for projects that do not require a huge budget.

In Joint Memorandum Circular No. 1, series of 2020, the DILG and the Department of Budget and Management (DBM) provided LGUs greater flexibility in the utilization of the 20% development fund to undertake critical, urgent, and appropriate measures to curtail and eliminate the threat of COVID-19 in their areas. This fund may be used for the procurement of PPEs and hospital equipment and supplies, among other necessary - COVID-19-related PPAs. Further, through the *Bayanihan* to Heal as One law, the Government has authorized all LGUs to utilize more than 5% of the allocated Local Calamity Fund and lifted the 30% cap on the amount appropriated for Quick Response Fund (QRF) during the existence of the state of national emergency due to COVID-19.

C. Partnership Programs

Given the challenges with fund availability, absorptive capacity, inadequate technical capacity, and other concerns that limit the immediate implementation and delivery of outputs of individual agencies or LGUs, partnership schemes can be an option to explore.

1. National Government – LGU Partnership Programs

NGAs can collaborate with LGUs by providing funds for NGA projects that are implemented at the local level. The budget of a line agency for a specific rehabilitation and recovery project will be downloaded to the implementing LGU. The project to be implemented can be nationally or locally identified.

This type of scheme can be an option for the implementation of a rehabilitation program that is nationally driven or formulated but also encourages the wider participation of LGUs in the implementation phase. It is necessary, however, that policy guidance and technical expertise are provided by the national government to LGUs for effective execution of this arrangement. These include, among others, provision of technical assistance in the preparation of project documents (proposals and programs of work) and guidance on the utilization of funds and liquidation of expenses.

2. LGU to LGU Collaboration

LGUs can partner among themselves for the implementation of projects. Under Section 33 of the Local Government Code, LGUs, through an appropriate ordinance by their local *Sanggunian*, are allowed to group themselves and coordinate their efforts, services, and resources for common undertakings. A MOA, with the terms and conditions agreed upon by the participating LGUs, is executed to formalize the collaboration.

This type of scheme can be an option for the implementation of projects that would benefit several localities and promote economies of scale. Some sample projects are roads that cut across several LGUs, bridges that connect two localities, shared production facilities or equipment, and social services facilities such as hospitals or health units and schools.

3. Government and Non-Government Collaboration

National or local governments can collaborate with NGOs, the private sector, and development partners in the implementation of rehabilitation and recovery projects and activities. Instrumentalities are executed to formalize the arrangements for collaboration.

The following sections outline some government and non-government collaboration arrangements that can be used in post-disaster rehabilitation and recovery.

3.a Public-Private Partnership (PPP)

The key aspects of this partnership and its management are detailed in RA 6957 as amended by RA 7718 or the Philippine Build-Operate-and-Transfer Law, its Implementing Rules and Regulations (IRR), and other relevant issuances. RA 7718 and its revised IRR cover all private sector infrastructure or development projects undertaken by NGAs, LGUs, GOCCs, GFIs, and state universities and colleges (SUCs), in accordance with contractual arrangements or schemes authorized by law. The guidelines for PPPs at both the national and local levels are summarized in Box 1.

Box 1. PPP Guidelines for National and Local Projects

PPPs will be subject to the approval and reporting procedure specified under the law:

- 1. National projects** - The projects must be part of the agency's development programs and should be approved as follows:
 - a. projects costing up to Php 300 million should be submitted to the Investment Coordination Committee (ICC) for approval;
 - b. projects costing more than Php 300 million should be submitted to the NEDA Board for approval upon recommendation of the ICC; and
 - c. regardless of amount, negotiated projects should be submitted to the NEDA Board for approval upon recommendation of the ICC.
- 2. Local projects** - Local projects to be implemented by LGUs should be submitted by the concerned LGU for confirmation as follows:
 - a. to the Municipal Development Council for projects costing up to Php 20 million;

- b. to the Provincial Development Council for projects costing more than Php 20 million up to Php 50 million;
- c. to the City Development Council for those costing more than PHP 50 million;
- d. to the Regional Development Council or, in the case of Metro Manila projects, the Regional Development Council for Metropolitan Manila, for those costing Php 50 million to Php 200 million; and
- e. to the ICC for projects costing above Php 200 million.

For local projects, concerned LGUs may formulate additional guidelines and procedures in accordance with the Republic Act (RA) and its IRR. In 2016, the DILG issued Memorandum Circular No. 2016-120, which specifies the guidelines for the implementation of PPPs for the People Initiative for Local Governments (LGU-P4). Through this scheme, LGUs can enter into a contractual arrangement with the private sector to implement public infrastructure or services projects. The LGUs are also encouraged to adopt an LGU-P4 Code to guide the implementation of such projects.

This arrangement can be used for the implementation of government projects with limited funding resources. This strategy can also help in better risk allocation, faster implementation, improved services, and possible generation of additional revenue.

3.b Cost-sharing arrangement

In this scheme, the national government or LGU identifies certain PPAs under the rehabilitation and recovery program that can be funded and implemented by partners. The private sector, development partners, and NGOs select which among the projects they would like to support or provide assistance to. To facilitate smooth implementation, the government is expected to provide a conducive environment for partners to implement the projects, including assistance in documentary processing and other needed permits. This can also include government right-of-way acquisition, land development, and provision of manpower or labor, specifically for infrastructure projects.

3.c Pre-Disaster Contract or Agreement Between the Government and a Private Sector Partner or International Organization

In massive government reconstruction efforts, there are inevitable delays in the implementation of projects due to the slow procurement process, limited absorptive capacity, limited staff complement of line agencies to implement specific rehabilitation and reconstruction projects, and limited availability of materials. To mitigate these recurring issues, the government can opt to execute a pre-disaster contract or agreement with a private company or international organization to deliver specific rehabilitation interventions.

The Philippines, through the Government Procurement Policy Board (GPPB), issued the Guidelines on the Use of Framework Agreement, subject to pilot implementation by the DBM-Procurement Service, Department of Education (DepEd), DOH, and DND. A framework agreement has the same concept as a pre-disaster contract executed in other countries. However, its application is limited to only certain types of projects, such as simple services like janitorial, security, catering, or maintenance work. It does not cover infrastructure projects that are implemented during post-disaster rehabilitation.

Given this limitation, it is important that a policy framework for pre-contract agreements, specifically for the implementation of rehabilitation projects, be put in place to explicitly indicate what kind of projects can be covered by this implementation scheme and what kind of terms are allowed by law. It is also important to standardize parameters, particularly in terms of quality specifications and cost estimates.

To facilitate the efficient and fast-tracked procurement for a rapid COVID-19 response and recovery, the GPPB has simplified the government procurement process by issuing a guide for all Procuring Entities (PEs) in the conduct of their procurement of projects under a state of calamity due to the COVID-19 pandemic. (<https://www.dbm.gov.ph/images/GPPB-NPM-3-2020-Res-Nos-3-and-5-2020.pdf>)

4.2. Financing COVID-19 Rehabilitation and Recovery

The availability of budget and financing resources is critical in ensuring the implementation of postdisaster rehabilitation and recovery programs. A duly funded rehabilitation and recovery program gives the government credibility and creates public trust that projects and activities will be implemented. Thus, alongside the formulation of the rehabilitation and recovery program, resource mobilization activities should also be conducted to ensure that funds will be generated and that a budget will correspondingly be allocated for relevant PPAs.

While the rehabilitation and recovery program is still being drafted, it is important that a budget review is simultaneously conducted by the finance and budget agencies as well as by the budget officers of the concerned implementing NGAs and LGUs for the early determination of available resources, financing requirements, and recommended financing strategy. This is most relevant when a budgetary appropriation gap is anticipated that may require a supplementary budget or an appeal for external or international financing assistance. This activity will also indicate concrete fund sources for specific programs and projects.

OPTIONS FOR FUND SOURCES

This section summarizes possible sources of funds and resources for the implementation of government rehabilitation and recovery interventions. Annex E provides a detailed list of possible LGU fund sources for disaster rehabilitation and recovery.

A. Annual General Appropriations

The usual sources of funding for rehabilitation and recovery PPAs are funds under the annual General Appropriations Act (GAA):

1. National Disaster Risk Reduction and Management Fund

The NDRRMF is a lump-sum appropriation in the GAA that can be used for various disaster risk reduction and management activities, including post-disaster rehabilitation and recovery interventions. The fund can be tapped by NGAs, SUCs, GOCCs, and LGUs to fund DRRM projects that are not covered by regular agency and LGU budgets. However, the NDRRMF can only cover rehabilitation PPAs of disasters that occurred in the last two (2) years. Furthermore, LGUs can only access the NDRRMF when its LDRRMF is insufficient to cover its rehabilitation activities.

To access the fund, project proposals (whether by a national agency or LGU) should be submitted to the NDRRMC for the review and evaluation of the OCD. The OCD recommends to the NDRRMC which proposals to endorse for approval of the Office of the President. The DBM administers the fund and releases financial resources directly to the implementing agencies or LGUs upon the President's approval of the project proposal. Details on the process and requirements for accessing the NDRRMF are provided in RA 10121 and in NDRRMC Memorandum Circular No. 45, dated March 14, 2017.

2. Regular Agency Budget

Funds for rehabilitation and recovery PPAs to be implemented in the medium-to long-term are usually lodged in agencies' regular budgets. Agencies are advised to include such PPAs in their annual budget proposals to ensure that funds are allocated. This is especially important for PPAs meant to be implemented over multiple years and which thus require multi-year contracting or obligational authority.

In certain cases, regular agency budgets can also be tapped for funding short-term rehabilitation and recovery PPAs. Commonly, this happens when the existing regular programs have been scaled-up for rehabilitation interventions. In large-scale disasters that have huge funding requirements, a budget modification is done to enable the utilization of agency savings to cover the funding gap for early recovery interventions.

On April 17, 2020, the DBM issued Local Budget Circular No. 125 regarding guidelines on the release and utilization of the *Bayanihan* Grant Fund to Cities and Municipalities (BGCM) pursuant to the *Bayanihan* to Heal as One law. The BGCM shall be released to cities and municipalities to boost their capacity in immediately responding to the COVID-19 emergency. The grant amount shall be equivalent to one month of FY 2020 Internal Revenue Allotment share of the cities and municipalities. Allowable projects are provided for in the Circular, which includes, among others, procurement of PPE, kits for COVID-19 testing, hospital equipment, and supplies.

On June 4, 2020, the House of Representatives approved House Bill No. 6815 or the Accelerated Recovery and Investments Stimulus for the Economy of the Philippines (ARISE Philippines). This stimulus package, amounting to Php 1.3 trillion, is designed to help the economy recover from the COVID-19 pandemic in the next four (4) years. The proposed amount is to be used for various forms of assistance to MSME and other key sectors affected by the pandemic; wage subsidies to critically-impacted businesses; cash-for-work programs for displaced workers; educational subsidies for students; loan guarantees for banks; interest-free loans for companies; the government's Build, Build, Build infrastructure program; and massive COVID-19 testing for the population.

B. LDRRMF

The primary funding source for LGU rehabilitation and recovery PPAs is the LDRRMF. The fund, which is earmarked for DRRM activities, amounts to a minimum of five (5) percent of the LGU's estimated revenue from regular sources. While the whole LDRRMF can be utilized for post-disaster activities, 30 percent is designated as a quick response fund (QRF). This can only be utilized when the LGU is under a state of calamity.

In previous disasters such as Typhoon Yolanda, there were LGUs that provided assistance to other severely affected LGUs from their own LDRRMF. As provided for in the IRR of RA 8185, an Act Amending Section 324 (d) of Republic Act No. 7160, otherwise known as the Local Government Code of 1991, LGUs may use its own local disaster funds as financial assistance for other disaster-affected LGUs upon the approval of the local *Sanggunian* (council).

LGUs can also utilize the unexpended LDRRMF from previous years for its rehabilitation and recovery PPAs. The QRF, for example, can be utilized if the LGU did not experience any calamity in a fiscal year. The unexpended LDRRMF is accrued to a special trust fund and will be exclusively used to support DRRM activities of the LDRRMF over the next five (5) years.

NDRRMF-DBM-DILG Joint Memorandum Circular No. 2013-1 provides the guide for LGUs on the allocation and utilization of the LDRRMF, including its unexpended balances.

C. Provisions under RA 11494, *Bayanihan to Recover as One Act*

LGUs have been authorized to realign their respective local funds, including, but not limited to, their development fund, Gender and Development Fund, Sangguniang Kabataan Fund, Special Education Fund (SEF), and other local funds, including unutilized or unreleased subsidies and transfers to address the COVID-19 pandemic.

A total amount of three billion five hundred million pesos (P3,500,000,000.00) has been appropriated as Local Government Support Fund financial assistance (LGSF-FA) and subsidy to LGUs. This will support local anti-COVID efforts and subsidize the payment of interest on new and existing loans secured by LGUs from GFIs.

D. Official Development Assistance Loans, Grants, Contingent Funds, Multi-Donor Trust Funds



1. Loans and Grants

Depending on the impact of the disaster, the government can take on new loans or restructure existing loans to fund necessary PPAs. Loans can be used to directly finance a specific project or as budget support to address the budgetary gap resulting from the need to implement the rehabilitation and recovery projects and activities. Similarly, grants, which most often are accompaniments of loans, can finance specific rehabilitation or reconstruction projects or other forms of technical assistance or advisory services.

However, program-type or budget support loans should go through the NEDA Board – Development Budget Coordination Committee (DBCC) approval process. Project loans—regardless of the amount—or foreign grants, depending on the threshold, will need to go through the NEDA Board-ICC approval process, subject to existing policies and guidelines.

2. Humanitarian Assistance and Emergency Funds

Humanitarian assistance and emergency funds – usually provided by bilateral, multilateral, and international development partners and channeled through national government, LGUs, NGOs, the private sector, or academe – can serve as additional sources of funding for recovery and rehabilitation PPAs. These funds can support PPAs that cover the humanitarian or emergency phase, as well as the rehabilitation and recovery phase.

3. Donations

Development partners, NGOs, private companies, and individual persons may provide cash or in-kind donations as a form of assistance to areas affected by disaster. A number of companies have a corporate social responsibility fund from which they source their donations. Similar to a Multi-Donor Trust Fund (MDTF) among development partners, some private companies also pool their funds into a private sector multi-donor fund through their business organizations or a conglomeration of companies. NGOs, on the other hand, usually conduct fundraising activities to solicit from partner organizations or individual donors to pool funds for donation.

Donations to the government can be provided directly to concerned implementing agencies or to affected LGUs, subject to compliance with

prevailing policies and laws. The national agencies that usually receive donations are DepEd, DOH, DSWD, OCD, and the NDRRMC. Guidelines are issued by the DBM, the Commission on Audit (COA), and other concerned agencies for the receipt, utilization, and audit of this type of fund.

LGUs under a state of calamity can also receive funds sourced from other LGUs' LDRRMF to support DRRM activities. A report on the utilization of the funds received from other LGUs will be submitted to the grantor LGUs. COA Circular No. 2012-002 provides accounting and reporting guidelines for the use of the LDRRMF of LGUs and NDRRMF given to LGUs.

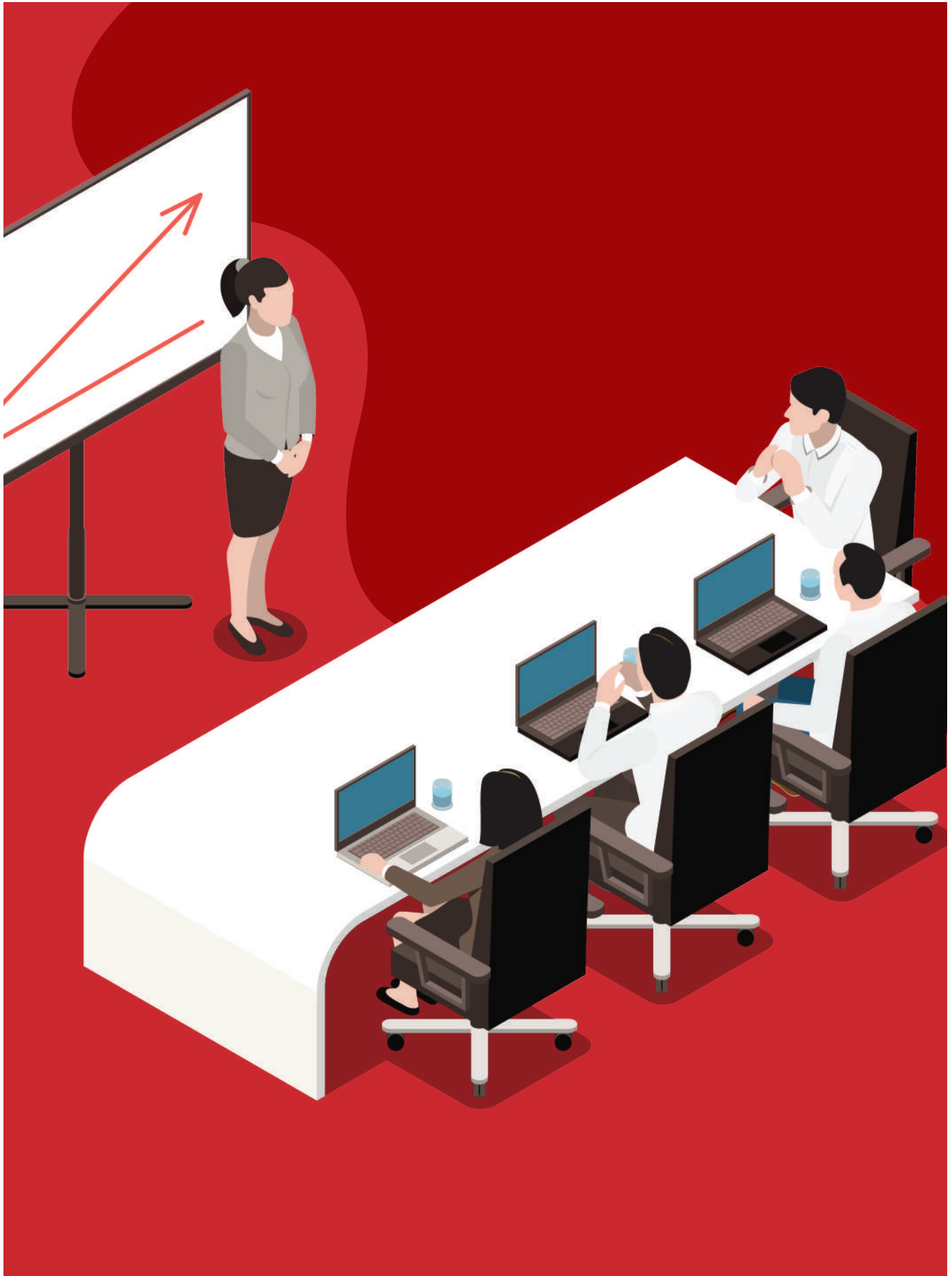
4. GFIs and GOCCs

GFIs and GOCCs have lending facilities that can provide financing for LGU rehabilitation and recovery projects. Under Section 297 of the Local Government Code, LGUs can contract loans, credits, and other forms of indebtedness with banks and other lending institutions to finance the construction and development of public facilities, infrastructure facilities, including housing projects and other capital investment projects.

Furthermore, GFIs and GOCCs can serve as conduits in providing financing assistance to specific groups, sectors, or individuals affected by a disaster. They can create lending programs, inclusive of a housing loan package and credit for business, for specific groups or individuals. The lending terms will be agreed upon by the implementing parties. As the nature of the program is for emergency purposes, the terms should be less rigid than the regular program of the GFIs and GOCCs. This will enable interest rates to be lower or be subsidized by the government and allow longer-term loan maturity.

The following, among others, are GFIs and GOCCs that have existing financing facilities or programs for COVID-19-affected individuals that can be tapped for the development of special lending programs for specific disaster-affected individuals:

- Land Bank of the Philippines (LBP): Help via Emergency Loan Assistance for LGUs (HEAL Lending Program); Interim Rehabilitation Support to Cushion Unfavorably Affected Enterprises by COVID-19 (I-RESCUE Lending Program)
- Development Bank of the Philippines (DBP): Rehabilitation Support Program on Severe Events (RESPONSE)
- Small Business Corporation (SBCorp): Enterprise Rehabilitation Financing Facility (ERF) Under the *Pondo Para sa Pagbabago at Pag-asenso* Enterprise Rehabilitation Fund (COVID-19 P3-ERF)
- Philippine Guarantee Corporation: MSME Credit Guarantee Program
- Social Security System (SSS): Calamity Loan Assistance Program (CLAP)
- Government Service Insurance System (GSIS): Financial assistance to eleven (11) government Local Isolation and General Treatment Areas for COVID-19 cases (LIGTAS COVID) centers



5 Monitoring and Evaluation

One of the critical aspects in monitoring and evaluating programs and projects is a well-defined reporting system at various levels. Ideally and whenever possible, this should be based on existing operational policies, structures, and mechanisms. This will save time and maximize financial resources for the development of and training on new reporting tools and mechanisms.

5.1 Progress Monitoring

The monitoring of programs and projects and assessment of progress is important in ensuring that the rehabilitation and recovery programs and projects stay on track to achieve their intended results. Monitoring generally involves the reporting of the status of implementation of individual PPAs with respect to inputs, outputs and processes, and problem solving sessions. This will address the issues and concerns that cause delays in implementation and field validation. The monitoring and evaluation system should be identified as part of the project development phase/ rehabilitation and recovery program formulation. Timely implementation and completion of projects will mitigate possible aggravation of the impacts of disasters.

A. Organizational Structure for Monitoring and Reporting

For the implementation of a cohesive COVID-19 Rehabilitation and Recovery Program, monitoring and evaluation of projects should generally be done by the LTF for COVID-19, specifically, the unit that was involved in the formulation of the rehabilitation and recovery program. In the Local COVID-19 structure under NAP III, the recovery cluster may best assume monitoring functions. The Task Force may opt to designate a specific project monitoring unit (PMU) or it may design an internal working arrangement for monitoring future rehabilitation programs and projects. This will ensure that monitoring will not be left out in the planning process and implementation stage. However, to ensure that long-term recovery programs will be sustained even when the pandemic eventually ceases, monitoring and evaluation processes should involve and be turned over to the regular department or offices which primarily implement the said program.

If a PMU is established, it can be a composite team with members coming from the different local department or offices tasked to implement the rehabilitation and recovery program components. This will ensure that when the task force is eventually dissolved, long-term recovery programs can be smoothly transitioned to the department/s or office/s primarily responsible for the said components.

With the establishment of a PMU, its functions and responsibilities should be made clear. The following are the key responsibilities of the unit designated for monitoring:

- Establish key performance indicators;
- Orient and assist involved agencies on the monitoring system and tool to be adopted;
- Consolidate the monitoring reports submitted by agencies and LGUs;
- Build, maintain, and regularly update the database on the programs and projects monitored;
- Coordinate with involved agencies on identified project implementation issues and concerns and recommended actions to be taken;
- Prepare periodic status reports on the implementation of programs and projects for submission to the Council and to the President, if necessary;
- Validate the status reports of agencies through field assessments of key projects, as necessary; and
- When the PMU is dissolved, facilitate transition and turn-over of responsibilities to the concerned departments or offices that implement long-term recovery and rehabilitation programs for the continued monitoring of program components (as an integral part of the regular monitoring and evaluation responsibilities of the respective departments or offices).

Since the PMU and the LTF for COVID-19 are both ad hoc, it is important that a transfer mechanism of the monitoring function be defined at the onset of the rehabilitation program. This will anticipate the possible abolition of the task force or ad hoc office, which will consequently abolish the PMU. Sustainability of monitoring activities is necessary to track the completion of the projects and evaluate the projects' impact for possible use in future recovery efforts.

It is essential that the concerned LGU Department or operating unit responsible for the delivery of sector outputs (components) of the program should be involved in the conceptualization, implementation, and monitoring of program components. This is necessary because these sector departments will also be formulating, implementing, and monitoring rehabilitation and recovery PPAS programmed in the medium- and long-term plans of the LGU. The same department or office shall take on the recovery programs as an integral component of their own regular programs should the PMU or the task force be eventually dissolved.

B. Monitoring Tool

In the monitoring of a cohesive COVID-19 Rehabilitation and Recovery Program, an appropriate monitoring tool should be developed or set up by the PMU. It can be developed from existing operational tools, provided that these existing instruments can be easily modified if needed. However, it would be more efficient if a standard tool and templates are used for all rehabilitation and recovery programs at the national and local levels. This will minimize the need for training staff in using new monitoring tools with every disaster.

In determining what monitoring tool to use, the following are some suggestions:

- A combination of online (web-based) and offline (i.e., MS Excel or MS Access) tracking tools is the most ideal. An online tracking tool is effective for multiple users as updating can be done simultaneously. A complementing offline tracking tool would be useful in cases where problems are encountered in the online system. It should, however, be ensured that these two (2) tracking tools are linked and inter-operable and that data information can be shared
- Key features of the tools:
 - simple, user-friendly, and cost-efficient;
 - allows for standardized reporting;
 - enables data sharing among NGAs, LGUs, and other stakeholders; and
 - can capture information from required forms of the DBM and other needed information for fiscal responsibility monitoring

Annex F provides a sample Monitoring and Evaluation Template that LGUs may use.

C. Monitoring and Reporting Arrangements

LGUs usually have existing mechanisms to track the progress of their projects. If a PMU is in charge of monitoring, focal persons responsible for coordinating and preparing the monitoring reports should be identified by each LGU to facilitate smooth monitoring and reporting. They will be the counterparts of the monitoring unit in each LGU. For rehabilitation and recovery PPAs provided with financing support by the national government and/ or high impact projects, the LGU shall submit reports to the monitoring unit, which then consolidates and elevates the monitoring reports to the relevant higher-level COVID-19 Task Force.

The monitoring reports should contain updates on the physical and financial accomplishments of the PPAs under the rehabilitation and recovery program. This should be in relation to the target outputs and funding requirements. Highlighting key issues and concerns in implementation and funding will facilitate immediate action from other concerned entities. This will also accelerate prompt policy direction or advice from the concerned COVID-19 Task Force for those projects funded by the National Government and/ or are high-impact.



The frequency of reports and prescribed date of submission of reports can vary depending on the prescribed requirements of the PMU, individual sector departments, Task Force on COVID-19, or external funders. At the minimum, an annual report should be prepared. However, this does not limit LGUs from flagging issues and concerns, which may be done more frequently than the formal reporting.

The overall discussion of implementation issues and bottlenecks can be done through an inter-department platform for problem solving. The platform can follow the planning structure for consistency, with the PMU as lead technical secretariat. The meeting of the inter-department platform should be done on a regular basis to immediately address issues and concerns.

The PMU, together with focal staff, should also conduct periodic field validation activities, particularly for major projects and those that have problematic implementation.

5.2 Outcome Evaluation

An outcome evaluation can be undertaken to determine the effectiveness and efficiency of interventions. It will assess whether the target outcomes (as indicated in the post-disaster rehabilitation and recovery framework) have been achieved and determine whether the interventions have contributed towards the achievement of target outcomes. This is most relevant for large-scale disasters, where the damages and losses have a huge impact on the affected communities. The results of the evaluation shall guide what other needed assistance should be provided by the government. The lessons learned and recommendations from the evaluation can also serve as a reference to improve policies and projects to be implemented in future rehabilitation and recovery interventions for similar disasters.

Outcome evaluation can be done for the whole rehabilitation and recovery program or for selected sectors, depending on the purpose of the evaluation. Only selected projects are evaluated in consideration of cost efficiency. A set of indicators should be identified for project selection. The indicators can include the number of project beneficiaries or affected stakeholders, contribution to overall income growth of the area or to its major economy, number of jobs generated, and provision of basic needs or services in the community.

For an inclusive and balanced evaluation of results, a participatory approach should be adopted where the relevant stakeholders are consulted. While the evaluation can be conducted by a third-party expert, the activity should be supervised by the proponent to ensure ownership of the results. It is more effective and efficient if the unit responsible for progress monitoring would supervise the evaluation because staff members are already familiar with the project and activities to be assessed.

Results of the evaluation should also be utilized as inputs to successor plans, such as the CDP and LDRRMP, among others. This way, lessons drawn can be made into actual actions and interventions to make future plans more effective and responsive.

5.3 Multi-Level Reporting Arrangements for COVID-19 Rehabilitation and Recovery Programs and Projects

Monitoring is essentially undertaken at the local level. However, monitoring, consolidation, and program evaluation at the higher level are needed for projects funded by the National Government. This is also needed for high-impact local projects that substantially contribute to the overall attainment of targets under the NAP of the NTF on COVID-19.

The LDRRMCs and LTF on COVID-19 are at the forefront in ensuring that National Government's efforts against COVID-19 are cascaded and locally implemented. They are likewise responsible in ensuring that local efforts, actual accomplishments, and bottlenecks in the implementation at their level are properly identified and subsequently elevated to higher levels. This also ensures that national-level assessment and evaluation of the country's recovery and rehabilitation efforts are informed by actual efforts on the ground.

Information requirements and structural arrangements for COVID-19 Rehabilitation and Recovery Program reporting are prescribed at the national level by the NDRRMC and the NTF on COVID-19. These are then cascaded by the National/ Regional/ Local DRRMCs and COVID-19 Task Forces. Reporting templates and mechanisms may have some nuancing at the regional level in consideration of existing reporting mechanisms on the ground.

Moreover, as emphasized in the previous section of this Guide, sustainability of adhoc reporting systems must also be taken into consideration. Attaining this may pose challenges to the existing set-up of the Task Force on COVID-19 since they are ad hoc in nature. While LGUs are encouraged to develop a transition mechanism for the eventual transfer of the monitoring and evaluation role from the ad hoc task force to the regular departmental function of local offices, LGUs may opt to adopt the Regional Project Monitoring and Evaluation System (RPMES) in the monitoring and reporting of the accomplishments of the local COVID-19 recovery PPAs.

The RPMES was institutionalized in 1993 for monitoring and evaluating development projects at the regional, provincial, and city/ municipal levels. The said system can provide a means for ensuring continuity of the monitoring and evaluation roles and functions for the short-term and long-term recovery efforts. Multi-level project monitoring instituted through the RPMES also provides a valuable source of input to budgeting and programming decisions. This can maximize utilization of meager resources for local development while facilitating greater participation of government agencies, LGUs, and CSOs at all levels. Using the existing institutional arrangement and guidelines of the RPMES⁴ allows for the submission of reports across all committee levels and participation of major stakeholders in its processes. It is therefore seen as a viable mechanism for LGUs to adopt a more sustainable and coherent monitoring and evaluation system where high-impact recovery and rehabilitation programs of LGUs can be monitored at the regional level.

⁴ Operational Guidelines of the Regional Project Monitoring and Evaluation System (RPMES) [2016]



6 Communications Strategy

A communications strategy is essential to the success of the government's COVID-19 rehabilitation and recovery efforts. A simple but effective communications strategy facilitates recovery by providing a platform for information exchange, feedback, and issue resolution. It is also a tool that can build trust, promote active participation, and ensure consensus on programs and projects among key stakeholders. Given the whole-of-government and whole-of-society approach to rehabilitation and recovery, it is important to maintain the flow of information in a timely manner. This will enable stakeholders to be informed and encouraged to participate in addressing issues and concerns related to reconstruction. Government agencies and LGUs should designate focal points for communication activities and establish reporting mechanisms to facilitate a smooth flow of information. A snapshot report will be helpful in providing an overview of the pressing rehabilitation and recovery issues and emerging trends so that government leaders can make informed decisions. This report can be circulated to agencies and LGUs so that they would have the same information and reference point.

At the onset of the rehabilitation and recovery phase, the lead agency or LGU should design a communications strategy that takes into consideration the social and cultural context of the affected areas. Good and effective communication contributes to other goals of the rehabilitation and recovery program, including transparency, accountability, and good governance. The communications strategy should consider the following components: (a) key principles, (b) core messages, (c) a spokesperson, (d) different forms of communications materials, and (e) communications channels. Details of these components are discussed in the following sections:

A. Key Principles

The following principles may be considered in the development of a sound and effective communications strategy for rehabilitation and recovery efforts:

- Establish communications protocols that would serve as the primary guide for national and local governments and other relevant stakeholders in implementing communications-related activities (e.g., discussion of rehabilitation and recovery programs, projects, and issues for regular updating and reporting). Identify a focal person or spokesperson who is experienced in addressing the media and the public.
- Manage people's expectations by providing proactive messages to address or clarify recovery issues (like possible delays in the implementation of programs and projects, issues on beneficiaries' selection process, etc.). Establish a feedback mechanism at the national and local levels to allow

affected communities to be heard and be responded to. Promote transparency and accountability throughout the recovery process.

- Involve the public and affected communities in the recovery process through the regular reporting of progress, by responding to issues raised, and by providing updates on the plans and timeframes of program implementation. Establish a regular schedule for releasing information and ensure the consistency of data provided to the public.

B. Core Messages

Core messages are the most important pieces of information the stakeholders need to hear and remember. They are the foundation of the communications strategy and should be used in all communications-related activities. The lead agency or LGU should craft straightforward and consistent messages outlining the following: (a) key roles of the government, the community, and other stakeholders; (b) sectoral rehabilitation and recovery priorities; (c) priority PPAs and their corresponding targets; (d) governing policies for recovery; (e) available rehabilitation and recovery funds; (f) timeframes for project commencement and completion; (g) implementation issues and proposed resolutions; (h) mechanisms for community involvement in the recovery process; and (i) overall progress of the recovery efforts.

Clear, concise, and honest messages will facilitate a common understanding of various rehabilitation and recovery concerns. Proactive and positive messages will help build public trust in government-led rehabilitation and recovery efforts. Customizing the messages to specific audiences is also important for effective delivery of relevant information. As rehabilitation and recovery progress over time, it is necessary to review the key messages to best reflect the situation at a given time.

A core message that may be explored given the current pandemic is *health and safety*, e. g., for private enterprises in resuming business functions, that their employees are healthy before returning to work and that they have a safe, sanitary work environment when they return to work; that their customers are reassured that all precautionary steps have been undertaken and operational risks have been reviewed to safeguard their health in the provision of their services (continued caution which is particularly important for the tourism and related sectors); and for national and local governments, that they were able to take care of the development needs of their constituencies, including provision of livelihood opportunities, protection against the recurrence of the health crisis, and resilience from future disasters.

C. Spokesperson

The messenger is as important as the message, so it is necessary to identify the focal persons or spokespersons for communications related activities at the national and local levels. The spokespersons lead their agencies or LGUs in promoting the government's activities and providing support for strengthening linkages among stakeholders. Alongside this, spokespersons are also expected to provide official statements on various rehabilitation and recovery issues. The spokespersons will help maintain a positive and consistent reputation for their agency or LGUs.

D. Forms of Communication Materials

Different forms of communications materials can be used to convey key recovery messages to affected communities and to other stakeholders. Commonly used forms of communications, such as print materials (posters, comics, hand-outs) and electronic communications (videos, radio clips, short films, text messages), will keep the public engaged in the rehabilitation and recovery process. Audio-visual materials are creative options of presenting the progress of the rehabilitation and recovery program as these are more engaging complements to traditional reporting methods.

E. Communications Channels

A communications channel is how key messages reach stakeholders. LGUs should indicate in the communications strategy which channels are practical and efficient for the target audience. For effective messaging, the LGU should select channels that can effectively capture the target audience's attention.

Channels that provide a venue for feedback and open communication among all stakeholders are especially important. Some of these channels include, but are not limited to:



Mass media. This includes utilization of traditional broadcast and print media, such as television, radio, and newspapers, to disseminate information or address issues relating to the recovery. Local community radio stations can be tapped to serve as venue for spokespersons to release statements and updates and respond to the public's queries.

Website. An accessible and well-designed rehabilitation and recovery website will serve as a vehicle to disseminate information and provide updates on recovery efforts. The website is a space for statements, feature stories, news articles, and infographics contributed by various stakeholders. This can also be a tool that will allow the public to monitor progress in the delivery of priority projects and allow individuals to participate in recovery efforts or pledge additional support.

Social and digital media. Due to its quick reach to various audiences, LGUs can use social and digital media for immediate announcement of statements or responses to critical situations. Social media can also be used to monitor public perceptions and receive feedback from stakeholders and the public. Mobile applications for monitoring the progress of the

rehabilitation program can also be designed to serve as another platform for citizen engagement. This will help the LGU reach out to a bigger audience within the country and abroad.

Press briefing. Regular press briefings will be an opportunity for the local chief executives to provide a more in-depth report of the progress of rehabilitation and recovery. As this interface with the media is intended to be held on a regular basis, spokespersons should be prepared with updated information on relevant recovery matters.



Community meetings. LGUs can spearhead direct engagement activities such as community dialogues, town hall meetings, and focus group discussions. These community meetings are effective in communicating with target audiences who cannot be easily reached through traditional media or in addressing situations where the information that needs to be conveyed is best explained through personal interaction. This channel can be effective for engaging community members and is flexible, as the information requirement would vary from one community to another.

Rehabilitation and recovery newsletter. A newsletter is meant to be simple and easy to read and write in the language and style understood by the affected communities. A good newsletter not only informs people about the rehabilitation and recovery progress, but also promotes engagement and interaction in the community. These materials can be distributed during community consultation meetings.

Information hubs. The LGU can establish knowledge hubs where the general public and other stakeholders can be updated on accurate information on the progress of rehabilitation and recovery efforts. The hubs can feature knowledge products such as program and project brochures, posters, reports, and other relevant information materials on the recovery initiatives of the government. A computer or an interactive facility can host relevant information to increase awareness and encourage the public to participate and become partners with the government in the recovery process. Dedicated personnel should manage the hub, entertain walk-in visitors, and respond to queries on rehabilitation.

The communications strategy implies that different forms of communications materials and channels can be used for different intended audiences. While these modalities can be used simultaneously, using various methods for different groups helps reinforce the information conveyed by the government. The affected population is more likely to reflect on the given information if the people are repeatedly exposed to the same messages from various sources. However, it is important that the government views the communications strategy as a work in progress that will need to be updated or revised as feedback is received from the affected population and other stakeholders. The lead department in an LGU should establish a system to process community feedback which can be used to implement corrective actions on the ground.

All the components of a communications strategy can be summarized in a way that will allow decision-makers to have a quick look at the issues, key messages, and the communications channels. Box 2 provides a sample summary of COVID-19 rehabilitation and recovery issues.

Box 2. Sample Snapshot of COVID-19 Rehabilitation and Recovery Issues and Possible Responses			
Issue/ Concern	Possible Response/ Action	Spokespersons	Communications Channels
Delay in the preparation of the rehabilitation and recovery plan	Explain that the preparation of a plan requires thorough vetting and consultation with stakeholders. There are also sensitivities that need to be considered in planning as all interventions must be sensitive to the customs of the area/s affected.	Representative/s from the LGU/s concerned	<ul style="list-style-type: none"> • TV • Radio • Social and Digital Media • Print • National/ Local Press Briefing
Referral procedures and bed occupancy rates of quarantine facilities	Discuss the procedures being followed. Assure the people that solutions, such as improved coordination and communication (among TTMF, facility managers, and medical center chiefs), will be done to correct the issue.	Representative/s from the LGU/s concerned	<ul style="list-style-type: none"> • TV • Radio • Social and Digital Media • Print • National/ Local Press Briefing

Box 2. Sample Snapshot of COVID-19 Rehabilitation and Recovery Issues and Possible Responses (*continuation*)

Issue/ Concern	Possible Response/ Action	Spokespersons	Communications Channels
Lack of clarity on the General Community Quarantine (GCQ) and Enhanced Community Quarantine (ECQ) policies, especially for those travelling to and from GQC and ECQ areas	Discuss the existing policies and provide information on where the general public can regularly access this information.	Representative/s from the LGU/s concerned	<ul style="list-style-type: none"> • TV • Radio • Social and Digital Media • Print • National/ Local Press Briefing
Lack of clarity on the policies of management of the dead/ disposition of cadavers (i.e. when cremation is necessary)	Discuss the existing policies and communicate with LGUs that “usual” burial can also be one of the options for disposition of cadavers under certain conditions.	Representative/s from the LGU/s concerned	<ul style="list-style-type: none"> • TV • Radio • Social and Digital Media • Print • National/ Local Press Briefing
Uncoordinated management of LSIs, ROFs, Overseas Filipino Workers (OFWs), and non-OFWs (e.g., manual endorsement system)	Assure the people that solutions, such as the establishment of an online endorsement system for faster coordination and a massive information campaign on the latest policy issuances, will be done to correct the issue.	Representative/s from the LGU/s concerned	<ul style="list-style-type: none"> • TV • Radio • Social and Digital Media • Print • National/ Local Press Briefing
Lack of transparency in the use of funds for rehabilitation and recovery	Report on the status of project financing. Specifically, discuss the following: <ul style="list-style-type: none"> • identified funding sources of projects • utilization status of government funds (e.g., NDRRMF, regular agency budgets, LGU funds) • funds pledged, committed, and actually given to the LGU 	Representative/s from the LGU/s concerned	<ul style="list-style-type: none"> • TV • Radio • Social and Digital Media • Print • National/ Local Press Briefing



Annexes

Annex A. Data Requirements

Core Element	Sector	Data	Details	Source
General Information		Land area		PSA/ CDP/ Comprehensive Land Use Plans (CLUP), National Mapping and Resource Information Authority (NAMRIA)/ Department of Environment and Natural Resources Land Management Bureau (DENR-LMB)
		Topography	Topographic map with description	PSA/ CDP/ CLUP, NAMRIA
		Political subdivision (for higher-level LGUs)		
		Income and Income classification		Department of Finance-Bureau of Local Government Finance (DOF-BLGF), LGU, CBMS
		Poverty Incidence		PSA
		Household level poverty indicator	Disaggregated household level data: <ul style="list-style-type: none"> • adult or child malnourishment • disrupted or curtailed schooling • child mortality within the household • Access to safe drinking water • Access to basic sanitation services • Access to clean cooking fuel • Access to basic assets (radio, 	

Annex A. Data Requirements *(continuation)*

Core Element	Sector	Data	Details	Source
			TV, telephone, computer, bike, motorbike, etc.) • access to reliable electricity	
		Total population	Disaggregated data by urban/ rural, subdivision (up to barangay level), age group, and gender	PSA, CBMS
		Population density		PSA
		Total OFWs	Disaggregated data by land-based or sea-based location, sex, and major geographical location (abroad)	PSA, Philippine Overseas Employment Administration (POEA), Overseas Workers Welfare Administration (OWWA), Commission on Filipinos Overseas (CFO)
		OFWs' remittances	Data is by country of source	<i>Bangko Sentral ng Pilipinas</i> (BSP), PSA
Land Use and Physical Environment	Settlement	Settlement areas	Disaggregated data by subdivision (up to the barangay level) with corresponding population count by individuals/ families; land use/ zoning map	CLUP, DENR-Biodiversity Management Bureau (DENR-BMB), PSA, LMB, NAMRIA
	Production	Utilized land	Disaggregated data by land resource, as applicable (agricultural, coastal/ marine, production forest, mineral, industrial, tourism, and others)	
		Idle land		
	Protection	Protected areas (if any)	Location and physical characteristics of protected areas	

Annex A. Data Requirements (continuation)

Core Element	Sector	Data	Details	Source
Economic Activity and Livelihood	Agriculture	Labor force participation rate and revenue generated (e.g., transportation, beauty, and fitness facilities, etc.) Number of MSMEs Number of farmers and fisherfolks Agricultural infrastructure and other production and post-harvest facilities	Disaggregated data by type (public or private), subsector, subdivision (up to barangay level), age group, and gender; include data on existing and proposed support facilities	Local Revenue Office, Public Employment Service Office
	Industry			
	Services			
	MSMEs			
	Informal sector			
	Tourism and recreation	Visitor arrivals by country of residence Arrivals by destination in the Philippines Tourism infrastructure (hotels, inns, etc.) Labor force in the tourism industry		PSA, Department of Tourism (DOT)
Infrastructure	Transportation	Roads (national, provincial, municipal, barangay)	Include total length, classification by surface type (i.e., paved or unpaved), and condition	DPWH, Local Engineering Office (for local public works)
		Bridges	Include total length, classification by type (i.e., permanent or temporary), and condition	
		Airport	Include classification (i.e., International, Principal Class 1, Principal Class 2, Community, Military, Unclassified), passenger and freight statistics, and conditions of Passenger Terminal Building (PTB)/ runway	DOTr, Civil Aviation Authority of the Philippines (CAAP)

Annex A. Data Requirements *(continuation)*

Core Element	Sector	Data	Details	Source
		Seaport	Include classification (i.e., Commercial, Roll-on/ Roll-off (RORO), Fishing [regional], fishing [communal], Feeder, Unclassified, passenger and freight statistics, and conditions of PTB/ port	DOTr, PPA, LGU (for locally managed ports)
	Communications	Telephone services (landline and mobile), television, radio, print, internet coverage, broadband area coverage	Include data on number of subscribers/ users/ clients and total value of physical assets	Department of Information and Communications Technology (DICT), Local Assessor's Office
	Power	Transmission lines, distribution facilities, power plants (e.g., hydroelectric, nuclear, coal, geothermal)	Include total length, classification by surface type (i.e., paved or unpaved), and condition	Department of Energy (DOE), National Electrification Administration (NEA)
	Water	Reservoirs, distribution facilities, pumping stations, and treatment facilities		Local Water Utilities Administration (LWUA), Local Water District, CBMS
	Government	Government buildings and facilities (i.e., national and local/ municipal buildings)		LGU
	Social Infrastructure	Education facilities (schools, training facilities, etc.)	Include classification (Public Basic, Private Basic, State College, State University, Private College, Private University, Technical/ Vocational, Review/ Training), description (e.g., building type, no. of storeys), and physical condition	DepEd, School Divisions, Commission on Higher Education (CHED)

Annex A. Data Requirements (continuation)

Core Element	Sector	Data	Details	Source
		Health facilities (hospitals, rural/ barangay health units)	Include classification (Government General, Government Specialty, Private General, Private Specialty, Primary Care, Custodial Care, Diagnostic/ Therapeutic, Specialized Out-Patient), description (e.g., building type, no. of storeys, bed capacity), and physical condition	DOH, Local Health Office
	Agriculture	Farm-to-Market Roads (FMRs), irrigation facilities	Include number, reach of service area, and condition	DA, National Irrigation Administration (NIA), Local Agricultural Office
	Other support infrastructure	Warehouses, waste management facilities		LGU
Housing	Community		Include data on existing and proposed facilities, type of shelter by material, and possible areas for future resettlement sites	PSA, LGU, Local Housing Board, National Housing Targeting System (NHTS), CBMS, CLUP
	Private Subdivision			
	Informal Settlement			
Social Services	Health	Health services	Include data on level/ category, bed capacity, type of services provided, number of personnel, number of barangay health stations	DOH, DOH Field Health Service Information System, Local Health Office, CBMS
	Education	Education services	Include data on classification, enrollment, available facilities, teacher-student ratio, student-classroom ratio)	DepEd, School Divisions, CBMS
	Government	Government services	Include data on type/ frequency of service (e.g., licensing, regulation, registration, emergency support)	LGU

Annex A. Data Requirements (continuation)

Core Element	Sector	Data	Details	Source
Hydrometeorological and Geologic Hazards		Hazard prone areas	Include flood-prone/ landslide-prone areas, fault lines, and susceptibility maps for each hazard	Mines and Geosciences Bureau (MGB)/ Philippine institute of Volcanology and Seismology (PHIVOLCS), CLUP
Peace and Security		Existing armed groups	Include data on identified insurgent groups and other illegal armed groups	

Annex B. Agency COVID-19 Rehabilitation and Recovery PPAs

Program	Implementing Agency	Program Description
Social Services Sector		
Assistance to Individuals in Crisis Situations (AICS)	DSWD	The programs provide integrated services that serve as social safety net or stop-gap measures to support the recovery of individuals and families in crisis or difficult situations.
4Ps	DSWD	Offered to affected families in the Rehabilitation and Recovery Plan (RRP), this program provides cash grants to the poorest families (with waived conditionalities in the case of the <i>Bangon Marawi</i> Comprehensive Rehabilitation and Recovery Plan or BMCRRP) for health and education.
Livelihood and Business Development		
<i>Tulong Panghanapbuhay sa ating</i> Disadvantaged/Displaced Workers; <i>Barangay Ko, Bahay Ko</i> Disinfection/Sanitation Project (TUPAD #BKBK)	Department of Labor and Employment (DOLE)	TUPAD is a community-based safety net program that provides temporary wage employment to the informal economy workers, such as, but not limited to underemployed, selfemployed and displaced marginalized workers, who have lost their livelihoods or whose earnings were affected due to the community quarantine.
COVID-19 Adjustment Measures Program (CAMP) for affected formal workers	DOLE	This is DOLE's safety net program for affected workers in the formal sector to mitigate the economic impacts brought about by COVID-19.

Annex B. Agency COVID-19 Rehabilitation and Recovery PPAs (continuation)

Program	Implementing Agency	Program Description
CAMP Abot Kamay ang Pagtulong Program (CAMP AKAP) for displaced land-based and sea-based Filipino Workers	DOLE	This is a one-time financial assistance for displaced OFWs due to COVID-19.
Small Business Wage Subsidy (SBWS)	DOF, SSS, Bureau of Internal Revenue (BIR)	This is the SAP for small business. It is a financial subsidy for employees in small businesses.
TESDA Online Program (TOP)	Technical Education and Skills Development Authority (TESDA)	This is an alternative learning system for TESDA courses intended for TESDA scholars and other persons.
Sustainable Livelihood Program (SLP)	DSWD	The SLP is a community-based program that provides skills training, livelihood grant, and employment assistance for poor Filipinos to improve their socioeconomic conditions. Beneficiaries are given two track options: 1) micro-enterprise development track or 2) employment facilitation track. As a prerequisite to these, the DSWD conducts social preparation and capacity-building activities.
Livelihood Assistance Grant (LAG)	DSWD	This is a financial assistance granted to SLP beneficiaries whose livelihoods were affected by the declaration of the community quarantine.
COVID-19 P3-ERF	DTI and Small Business Corporation (SBCorp)	This is a special microfinancing program for MSMEs affected by COVID-19.
Go Lokal!	DTI	This is a market access platform for MSMEs introduced by the DTI in collaboration with select retail partners for brand management and market acceleration. The program's primary goal is to help the country's MSMEs enter the mainstream market via the free services offered by DTI, such as: (i) merchandise development assistance to produce commercially viable products for the market, and (ii) market access to stores/ space provided by retail partners such as mall and retail operators.

Annex B. Agency COVID-19 Rehabilitation and Recovery PPAs (continuation)

Program	Implementing Agency	Program Description
P3	SBCorp	This is a financing program for microenterprises with an asset size not exceeding Php 3 Million at not more than 2.5% per month all-in interest rate and service charges.
Expanded Survival and Recovery (SURE) Assistance Program for Marginalized Small Farmers and Fishers (MSFF)	DA	This is a zero-interest loan program for eligible MSFFs. SURE has been expanded to include eligible Agri-based Micro and Small Enterprises (MSEs).
Financial Subsidy for Rice Farmers	DA	This is a one-time financial assistance to rice farmers with farm sizes of one (1) hectare and below and listed under the Registry System for Basic Sectors in Agriculture (RSBA).
Recovery Package for MSEs Engaged in Agriculture and Fisheries Food Production and other Supply Chain Activities	DA	This is a package consisting of financial assistance and capacity building for targeted MSEs to ensure the availability of food supply and help them recover their losses due to the ECQ.
SURE COVID-19 Loan Program	DA-Agriculture Credit Policy Council	This is a loan facility for individuals, groups, OFWs, and MSMEs engaged in agriculture and fisheries who need financial capital.
<i>Ahon Lahat, Pagkaing Sapat</i> (ALPAS) or the Plant, Plant, Plant Program	DA	This program includes expansion of farm areas, rice resiliency project, palay procurement fund for NFA, expanded SURE Aid and recovery program, social amelioration for farmers and farm workers, integrated livestock and corn resiliency project, revitalized <i>gulayan</i> project and urban agriculture, coconut-based diversification project, and fishery resiliency project.
iFWDPH: Innovations for Filipinos Working Distantly from the Philippines	DOST	This project will provide support and opportunities for OFWs and their families to establish technology-based enterprises in the country.

Annex C. Sample LGU COVID-19 Rehabilitation and Recovery PPAs

Program	Implementing Agency	Program Description
Health		
Marikina Molecular Diagnostics Laboratory	Marikina City	This establishes an LGU-owned COVID-19 testing facility that provides free COVID-19 testing for the residents of Marikina.
Telemedicine: Project that Promotes Health and Wellness of Locals in Accordance with Strict Social Distancing Protocol Amid COVID-19 Crisis	Taguig City, NCR	This is a program that maximizes the use of technology to increase access to health care service providers and online medical consultations.
Malunggay Tea to Help Boost Immune System	Dingalan, Aurora, Region III	This is a program by the <i>Sangguniang Kabataan</i> of the LGU promoting the health benefits of Malunggay tea against COVID-19.
<i>Dok-to-Door</i>	Mansalay, Occidental Mindoro, MIMAROPA	RHU staff of the LGU offer door-to-door primary health care services such as vaccination, family planning services, ready to use supplementary foods (RUSF) for malnourished children, and hypertensive patients, among others.
General Santos's Testing Laboratory – A "Game Changer" for SOCCSKSARGEN's COVID-19 Efforts	General Santos City, Region XII	This establishes the COVID-19 testing laboratory to cater to the SOCCSKSARGEN region.
Livelihood and Business Development		
Face Mask Project	Biñan City, Laguna, CALABARZON	This is a project providing livelihood opportunity for volunteer sewers through the mass production of face masks and PPEs.
Fish Trade	Nueva Valencia, Guimaras, Region VI	The endeavor aims to provide support to marginalized fisherfolks and hog raisers. With this plan, their catch and livestock will be purchased by the LGU for distribution to all affected families in the municipality.
Agri-Fisheries and Essential Goods		
Mobile <i>Palengke</i> / Online <i>Palengke</i> to Decongest Market	Pasig City, NCR, Plaridel, Bulacan, Region III	The concept has been replicated by other LGUs to strategically provide their respective constituents with access to market goods and commodities while ensuring social distancing and minimizing crowding and congestion in public areas, such as marketplaces.

Annex C. Sample LGU COVID-19 Rehabilitation and Recovery PPAs (continuation)

Program	Implementing Agency	Program Description
<i>Bespren sa Agrikultura</i>	Santiago City, Isabela, Region II	This is a program by the LGU that provides for the distribution of eggplant seedlings to support the agricultural sector and facilitate adequate food supply.
<i>Bahay Ko, Garden Ko Program</i>	San Fernando, Romblon, MIMAROPA	This covers the distribution of vegetable seeds, garden tools, and organic fertilizers to households, schools, and barangay community gardens to promote good nutrition and a healthy lifestyle among citizens and ensure adequate food supply.
<i>Bukas-Palad Kiosk</i>	Sorsogon City, Region V	This is a charity store where people in need can get items by exchanging their goods using a barter system.
<i>Barrio Tiangge, Midsayap Mobile Market</i>	Midsayap, South Cotabato, Region XII	All barangays were requested to make their covered courts or barangay halls available to serve as the Barrio <i>Tiangge's</i> venue. Barangay <i>Tanods</i> were also tapped for security to ensure that the public follow the minimum health standards, such as wearing of face mask and social/physical distancing during the Mobile Market Day. The program, which was able to yield income for businesses in the municipality during the time of quarantine, may be pursued as a continuing program.
Digital Governance/ Technological Innovation		
Go Manila! Mobile App: Shifting to E-Payment to Flatten the COVID-19 Curve	Manilla City, NCR	This is a locally developed mobile application that can be used by residents as an alternative platform for transacting business and paying bills (i.e., SSS, GSIS, PAG IBIG, etc.).
COVID Risk Assessment Monitoring and Management System (CRAMMS)	Tarlac, Region III	This is an application system developed for tracking the progress of symptoms of PUIs and PUMs.
South Cotabato COVID-19 Contact Tracing System (SCCCTS)	South Cotabato, Region XII	This is an android- and IOS-based mobile application called COVID-19 Contact Tracing System (SCCCTS) developed to hasten tracing of people that were exposed to COVID-19.

Annex C. Sample LGU COVID-19 Rehabilitation and Recovery PPAs (continuation)

Program	Implementing Agency	Program Description
Local Governance		
Provincial Economy Restart Plan (PERP)	Cotabato, Region XII	The PERP, which was developed by the province, contains immediate and long-term interventions and policies aimed at reviving the province's vibrant economy. These interventions include seed distribution, fisheries livelihood assistance, and the establishment of water facilities and feed mills, etc.
Triumvirate in Shielding CARAGA Region Against COVID-19	Region XIII	The CARAGA Regional Development Council (RDC), the Regional Peace and Order Council (RPOC), and the RDRRMC joined forces for the creation of the Regional Task Force COVID-19 known as One Caraga Shield. The One Caraga Shield endeavours to harmonize issuances, ensure coordinated actions in safeguarding the health and safety of Caraganons, and establish a smoother flow of interactions across provinces.
CBMS: Determining Rightful Beneficiaries of COVID-19 Social Protection Programs	Tacurong City, Sultan Kudarat, Region XII	Use of LGUs' CBMS data in determining eligible beneficiaries of the LGUs' program in addressing the COVID-19 Pandemic.
<i>Balik-Tacloban Project</i>	Tacloban City	Aligned with the <i>Balik-Probinsya, Bagong Pagasa</i> (BP2) Program being implemented by the national government, the project provides a five-step procedure to ensure that health protocols are in place for residents and returnee residents.
Social Services		
<i>Libro On-The-Go</i>	Odiongan, Romblon, MIMAROPA	This is a rolling library where books are rented for free and can be returned to the barangay hall after a week. The program aims to instill the value of continuous learning through reading.

Annex D. Menu of Rehabilitation and Recovery Fund Sources for LGUs

Fund Source	Legal Basis/ Short Description	Approving Authority	Allowable Projects	Maximum Amount Ceiling
1. Local Disaster Risk Reduction and Management Fund (LDRRMF)	RA 10121, NDRRM Act of 2010 – LGUs are mandated to allocate at least 5% from regular income sources to be set aside as the LDRRMF to support various disaster risk management activities.	LGUs	As provided for in DILG-MC 2012-73 and NDRRMC, DILG and DBM JMC 2013-1	30% of total fund for QRF and 70% for prevention, mitigation, response, and reconstruction PPAs
2. National Disaster Risk Reduction and Management Fund (NDRRMF)	RA 10121, NDRRM Act of 2010 – LGUs may access the NDRRMF, subject to the President's approval, in accordance with the favorable recommendation of the NDRRMC.	President	30% for QRF; 70% for prevention, mitigation, response, and reconstruction	30% of total fund for QRF and 70% for prevention, mitigation, response, and reconstruction PPAs
3. LDRRMF of other LGUs	IRR of RA 8185, An Act Amending Section 324 (d) of Republic Act No. 7160, otherwise known as the Local Government Code of 1991, allowing the use of local disaster funds as financial assistance for other disaster-affected LGU/s.	Donor LGUs' <i>Sanggunian</i> Board	Discretion of recipient LGU	Discretion of donor LGUs
4. Local Government Support Fund – Financial Assistance to LGUs (LGSF-FA)	RA 11465, 2020 GAA Special Provision No. 5; DBM Local Budget Circular No. 122 - Financial subsidy provided to LGUs to support priority programs and projects of the LGU included in the Local Development Investment Program (LDIP).	DBM	Includes construction, concreting, or rehabilitation of select infrastructures and insurance coverage for LGU facilities against natural calamities, etc.	Not specified
5. COVID-19 Local Government Support Fund (LGSF)	RA 11494, <i>Bayanihan</i> to Recover as One Act – This empowers and authorizes LGUs to exercise certain measures to boost their capacity to address the COVID-19 pandemic in their respective jurisdictions.	The appropriated amount of One Billion Five Hundred Million Pesos (Php 1,500,000,000.00) for COVID-19 LGSF shall be used to provide financial assistance to LGUs in their anti-COVID efforts. Its release and utilization will be governed by DBM LBC No. 128 dated September 17, 2020.		
6. Subsidy on Payment of Loans		The appropriated amount of One Billion Pesos (Php 1,000,000,000.00) each to the Land Bank of the Philippines (LBP) and the Development Bank of the Philippines (DBP) will be used to subsidize the payment of interest on new and existing loans secured by LGUs from government financial institutions.		

Annex D. Menu of Rehabilitation and Recovery Fund Sources for LGUs *(continuation)*

Fund Source	Legal Basis/ Short Description	Approving Authority	Allowable Projects	Maximum Amount Ceiling
7. Regular Agency Budget	RA 10121 – NDRRM Act of 2010 - All departments, bureaus, offices, and agencies of the government are authorized to use a portion of their appropriations to implement projects designed to address DRRM activities. This should be in accordance with the guidelines to be issued by NDRRMC in coordination with DBM.	Pending issuance of necessary guidelines		
8. 20% Development Fund (DF)	RA 7160, Local Government Code; DILG-DBM JMC Nos. 2017-1 and 2020-1, Updated guidelines on the appropriation and utilization of 20% of the annual internal revenue allotment (IRA) in view of the COVID-19 situation for development projects, which include select rehabilitation projects.	LGU	Rehabilitation of select infrastructure, purchase and development of land for relocation of disaster victims, and environment management projects.	
9. Calamity Rehabilitation Support (CARES) Program	A rehabilitation assistance program available in the form of loans to existing and new customers, including LGUs, for them to recover from the destruction brought about by calamities.	LBP	Repair or construction of facilities or equipment.	Actual need or up to 85% of project cost, whichever is lower but should be within LGUs' net borrowing capacity.
10. I-RESCUE Lending Program (Interim Rehabilitation Support to Cushion Unfavorably Affected Enterprises by COVID – 19)	This is a support program for SMEs, cooperatives, and micro-finance institutions (MFIs) which are affected by the adverse impact of the COVID-19 pandemic.	LBP	This can be availed of by SMEs, cooperatives, and MFIs for additional funds and loan restructuring under more flexible terms and conditions.	

Annex D. Menu of Rehabilitation and Recovery Fund Sources for LGUs *(continuation)*

Fund Source	Legal Basis/ Short Description	Approving Authority	Allowable Projects	Maximum Amount Ceiling
11. HEAL Lending Program (Help via Emergency Loan Assistance for LGUs)	This will support the LGUs in times of extraordinary events that have unprecedented multi-dimensional effects on the health sector, on the economy, on productive capacity and, especially, on the poor. It will help prop up local economies, improve delivery of health services, and provide humanitarian support to the most adversely affected sectors of the LGUs.		This can be accessed by LGUs for permanent working capital as additional source of funds for the provision of goods and services.	
12. Countryside Financial Institutions - Calamity Assistance Program (CFI-CAP)	The program offers term-loan rediscounting to eligible countryside financial institutions whose loan portfolios were affected by natural calamities.	LBP	This can be tapped by LGUs in developing a loan program that will provide financial access to private individuals and entrepreneurs to recover from their disaster losses.	
13. RESPONSE Program (Rehabilitation Support Program on Severe Events)	This will provide rehabilitation financing support to DBP and non-DBP borrowers, both public and private institutions, who have been adversely affected by calamities and/ or events arising from the occurrence of such calamities. This is to accelerate the assistance to the areas affected by calamities in order to rehabilitate/ rebuild businesses and socio-economic infrastructures.	DBP	Public and/ or private institutions located and/ or operating in areas declared to be in a state of calamity.	
14. Residential Real Estate Financing Program (RREFP)	This program offers financing support for shelter production and tenure for employees in the public and private sector, OFW families, new households, and homeless Filipinos. The program can be accessed by LGUs, NGAs for employee housing projects, private sector groups, private developers, cooperatives, microfinance institutions, private financial institutions, NGOs, homeowner associations supported by an LGU guarantee, private companies for their employees, and PPPs for housing projects.	DBP	<p>This can be tapped by LGUs and implementing agencies in developing post-disaster housing financial assistance packages for the affected population. This will supplement the regular NHA or LGU transitory and permanent housing programs.</p> <p>The loan can be used for land acquisition, site development, shelter construction, housing microfinance, and project preparation financing.</p>	

Annex D. Menu of Rehabilitation and Recovery Fund Sources for LGUs *(continuation)*

Fund Source	Legal Basis/ Short Description	Approving Authority	Allowable Projects	Maximum Amount Ceiling
15. Water for Every Resident (WATER) Program	The program will finance water supply programs of private companies, water districts, LGUs, Private Financial Institutions (PFIs), and MFIs with their capital investment, working capital requirement, refinancing of existing loan, consultancy services, and other PPAs.	DBP	This can be tapped by LGUs and implementing agencies in developing a loan program that will provide financial access to private companies, including GOCCs, to recover from their disaster losses. This includes rehabilitation/ reconstruction of damaged facilities and equipment, working capital, and additional investments needed.	
16. Sustainable Health Care Investment Program	The program offers a credit program for health care investment projects that promote availability, accessibility, and affordability of health care services to the lowest income groups. It can be tapped by LGUs, government-owned hospitals, private health care providers, partnerships, joint wholesale ventures, and DBP-accredited rural/ thrift banks and MFIs for relending.	DBP	The program can finance construction/ expansion/ rehabilitation/ rehabilitation upgrade of hospitals and medical clinics, acquisition of medical and nonmedical equipment, working capital for the preparation of feasibility study, engineering designs, and others.	
17. MSME Credit Guarantee Program	This will support the working capital loans to MSMEs facing economic difficulties as a result of COVID-19.	Philippine Guarantee Corporation	This can be tapped by MSMEs through universal, commercial, thrift and rural banks, as well as other financial institutions as eligible lenders.	
18. Financial aid to Local Isolation and General Treatment Areas for COVID-19 (LIGTAS COVID) Centers	This aims to enable LGUs to prevent further transmission and manage cases of COVID-19 at the family and community levels.	GSIS	Sixteen (16) government LIGTAS COVID centers are eligible for this assistance. The financial assistance will help cover the purchase of identified requirements of the LIGTAS centers like patient care equipment, individual hygiene kits, and oxygen support, among others.	

Annex D. Menu of Rehabilitation and Recovery Fund Sources for LGUs *(continuation)*

Fund Source	Legal Basis/ Short Description	Approving Authority	Allowable Projects	Maximum Amount Ceiling
19. Localized Community Mortgage Program (LCMP)	The program provides financial assistance to LGUs in the acquisition of land occupied by informal settlers and land where informal settlers will be relocated for their socialized housing projects.	Social Housing Finance Corporation (SHFC)	The program can serve as support for LGU post-disaster housing programs which require land acquisition.	
20. <i>Abot Kaya Pabahay</i> Fund - Development Loan Program (AKPF-DLP)	The program is intended for financing site development/ improvement and house/ building construction in SHFC-built communities. The program is available for government and private proponents of socialized housing projects.	SHFC	The program can serve as support for LGU and national government post-disaster housing programs, specifically for land development and housing construction.	
21. <i>Pondo sa Pagbabago at Pag-aseño</i> (P3)	This program provides an alternative funding source for qualified MSMEs, which includes market vendors and sari-sari store owners, through microfinancing institutions or cooperatives. This program can also be used for business expansion and/ or additional supplies/ inventory.	SBCorp	This can be tapped by LGUs and implementing agencies in developing livelihood-related financial assistance packages for the affected enterprises, particularly MSMEs.	
22. Official Development Assistance (ODA)	Multilateral and bilateral aid agencies and other foreign governments provide financial assistance either in the form of loans or grants to the national government or directly to the implementing agency or affected LGU	Through the DOF	This is for various rehabilitation and recovery projects as identified by donor agency/ies in coordination with the government.	Varies per project
23. NGOs and Private Sector	NGOs and the Private sector provide financial assistance through donations to the national government or directly to the implementing agency or affected LGU, or they implement projects in the affected areas.	Concerned organization	This is for various rehabilitation and recovery projects as identified by donor agency/ies in coordination with government	Discretion of donor organization

Annex E. Sample Monitoring and Evaluation Template

Results	Performance Indicators	Targets for Indicators	Data Source to Assess Performance (individual beneficiaries, groups of beneficiaries, organizations, partners, documents, etc.)	Collection Methods	Frequency	Responsibility Center
Goal/ Impact						
Objective/ Outcome (Medium-term)						
Outputs/ Deliverables/ Products and Services delivered						
Activities						
Inputs						

COVID-19 Rehabilitation and Recovery Programs and Projects									COVID-19 M&E Form	
Quarterly Physical Status of COVID-19 Rehabilitation and Recovery Program										
Region:										
Implementing Office:										
As of: (date)										
Program/ Project/ Activity	Location	Start Date	Target Completion Date	Total Target Outputs		Cumulative Accomplishments (Completed PPAs) as of reporting period	Actual Physical Accomplishment		Variance [a]-[b]	Remarks
				Unit	Total Target Outputs [a]		Accomplishment for the Quarter	Cumulative Total [b]		
Prepared by: Name: Designation:						Approved by: Name: Designation:				



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