WHEREAS, Section 15 Article II of the 1987 Constitution states that the State shall protect and promote the right to health of the people and instill health consciousness among them;

WHEREAS, Section 2 (b) of Executive Order No. 168 (s.2014) mandates the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF) to prevent and/or minimize the entry of suspected or confirmed patients with emerging infectious diseases into the country;

WHEREAS, on September 16, 2020, the President issued Proclamation No. 1021 (s.2020) extending the period of the State of Calamity throughout the Philippines until September 21, 2021;

WHEREAS, the Department of Health (DOH), the University of the Philippines-Philippine Genome Center (UP-PGC), and the University of the Philippines-National Institutes of Health (UP-NIH) biosurveillance have detected B.1.1.7 (Alpha), B.1.351 (Beta), and P.1 (Gamma) variants of SARS-CoV-2 in the Philippines. The DOH, UP-PGH, and UP-NIH have likewise confirmed the presence of the B.1.617 (Delta) variant that was first detected in India;

WHEREAS, the continued implementation of proactive measures and restrictions must be put in place to slow down the surge in COVID-19 cases, stop further spread of variants, buy time for the health system to cope, and to protect more lives.

NOW, THEREFORE, BE IT RESOLVED, as it is hereby resolved, upon the recommendations of the Screening and Validation Committee, the IATF approves the following risk-level classifications of Provinces, Highly Urbanized Cities (HUCs), and Independent Component Cities (ICCs) effective immediately:

A. The following provinces, HUCs, and ICCs shall hereinafter be placed under Modified Enhanced Community Quarantine (MECQ) until 15 August 2021, without prejudice to their reclassification as may be warranted and the declaration of localized Enhanced Community Quarantine in critical areas:
1. For Luzon: Apayao and Laguna; and
2. Aklan

B. The Province of Cebu shall be placed under General Community Quarantine (GCQ) until 15 August 2021, without prejudice to their reclassification as may be warranted and the declaration of localized Enhanced Community Quarantine in critical areas, and with the observance and implementation of the following heightened restrictions:

1. Food preparation establishments such as commissaries, restaurants, and eateries may operate with their indoor dine-in services at the venue or seating capacity of twenty percent (20%), and with their al fresco or outdoor dine-in services at the venue or seating capacity of fifty percent (50%).

2. Personal care services, such as beauty salons, beauty parlors, barbershops, and nail spas, may operate up to thirty percent (30%) of venue or seating capacity. For this purpose, these establishments shall only provide services that can accommodate the wearing of face masks at all times by patrons/clients and service providers.

3. Meetings, Incentives, Conventions, and Exhibitions (MICE) events and social events in venue establishments shall not be allowed;

4. Outdoor tourist attractions, as may be defined by the Department of Tourism (DOT), shall remain to be allowed at thirty percent (30%) venue capacity with strict adherence to minimum public health standards;

5. Under the Safety Seal Certification Program, business establishments awarded Safety Seal Certifications shall be allowed to operate at an additional 10 percentage points beyond the prescribed on-site capacity or venue/seating capacity, whichever is applicable;

6. Indoor sports courts and venues and indoor tourist attractions shall not be allowed to operate;

7. Specialized markets of the DOT such as Staycations without age restrictions shall remain to be allowed at such capacities, protocols, and restrictions as may be imposed by the DOT;
8. Interzonal travel shall be allowed subject to restrictions of the local government unit of destination. Point-to-Point travel to areas under General Community Quarantine and Modified General Community Quarantine shall be allowed without age restrictions subject to an RT-PCR test-before-travel requirement for those below eighteen years old (18) and above sixty-five (65), and other protocols and restrictions as may be imposed by the DOT and the Local Government Unit of destination;

9. Religious gatherings shall be allowed up to ten percent (10%) of the venue capacity. Provided that, there is no objection from the local government unit where the religious gathering may take place. Provided, further, that the LGU may increase the allowable venue capacity up to thirty percent (30%). The religious denominations should strictly observe their submitted protocols and the minimum public health standards.

Gatherings for necrological services, wakes, inurnment, funerals for those who died of causes other than COVID-19 shall be allowed, provided that the same shall be limited to immediate family members, upon satisfactory proof of their relationship with the deceased and with full compliance with the prescribed minimum public health standards for the duration of the activity; and

10. Other provisions of the Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines, as amended, not affected by the foregoing shall continue to be in effect including those on interzonal travel into and out of the aforementioned areas and the operation of public transportation. The use of active transportation shall likewise be promoted.

C. All areas shall continue to implement the following measures:

1. Shorten detection to isolation/quarantine interval to less than five (5) days:
   a. Conduct active case finding in all areas, prioritizing those with clustering;
   b. Close contacts of suspect, probable, and confirmed cases must be traced within twenty-four (24) hours of detection of a case;
   c. Immediate isolation/quarantine and testing of cases and close contacts;
d. Rapid antigen tests may be used for confirmation of suspect/probable cases and close contacts;

e. Those who turn negative on rapid antigen test must undergo Reverse Transcription - Polymerase Chain Reaction (RT-PCR) test;

f. Local Government Units (LGUs) and Regional Epidemiological Surveillance Units (RESUs) must identify areas with case increases or clustering and facilitate immediate submission samples for sequencing from these areas through the Epidemiology Bureau and UP-Philippine Genome Center (within 7 days of sample collection);

g. The Department of Labor and Employment (DOLE) and Department of Trade and Industry (DTI) to ensure that workplaces and establishments conduct daily health and exposure screening, report identified cases and close contact to the LGU, and coordinate for investigation and response;

h. Workplaces to consider incentives that will encourage reporting and adherence to isolation/quarantine;

2. Prioritize facility-based isolation and quarantine to prevent household transmission:

a. Increase number and utilization of isolation and quarantine facilities and Temporary Treatment and Monitoring Facilities (TTMFs);

b. Deploy additional staff, as needed, to ensure that cases and close contacts are closely monitored and infection prevention and control protocols are strictly followed;

3. Make readily available and accessible health care capacities and systems in preparation for case spikes:

a. Each health facility must have a COVID-19 Surge Plan that will detail needed resources and how it shall be operationalized;

b. Define additional metrics that will serve as early warning to signal a beginning “surge”, such as emergency department occupation rate and number of pending admissions;

c. Needed logistics as indicated in the COVID-19 Surge Plan have to be secured and pre-positioned/readily accessible, including review of available supplies of ventilation requirements, oxygen tanks, regulators and canisters, and stockpiles of personal protective equipment and medicines, as needed;
d. LGUs should have triage and referral systems that will enable assessment of cases for swift management at the appropriate facility;

4. Ramp up vaccination among Priority Groups A2 and A3 populations to reduce the occurrence of more severe disease and fatalities. Parallel efforts to vaccinate the A4 population, if resources are adequate, will provide protection for the economic sector. The NTF Vaccine Cluster is directed to ensure sufficient vaccine supply of up to Four Million Doses for the National Capital Region, and an additional Two Million and Five Hundred Thousand Doses for Bulacan, Cavite, Laguna, and Rizal. All of the foregoing is subject to the availability of vaccine supply. The provincial, city and municipal local government units are likewise directed to intensify vaccination efforts during the period of Enhanced Community Quarantine;

5. Strictly enforce border control protocols at all ports of entry:
   a. Both air and seaports, including seaports for cargo vessels;
   b. Isolation and quarantine facilities must strictly implement infection prevention and control protocols;
   c. Close contacts among passengers have to be identified and closely monitored by the Bureau of Quarantine (BOQ);
   d. LGU must ensure proper endorsement, monitoring, and quarantine completion;

6. Continuously assess the COVID-19 situation at all levels:
   a. Regular assessment of trends of cases and admissions;
   b. The Department of the Interior and Local Government (DILG) to monitor that the Prevent - Detect - Isolate - Treat - Reintegrate (PDITR) Strategy of the National Task Force Against COVID-19 is implemented and enhanced case finding and contact tracing as well as proper isolation/quarantine are done; and

7. Disseminate information on the variants of concern and expected actions to be taken by individuals, establishments, and implementers:
   a. Correct information on the variants of concern to counter mis- and dis-information;
   b. Clear call to action on:
      i. Correct and consistent Minimum Public Health Standards (MPHS) implementation;
ii. Early consultation and adherence to isolation/quarantine guidelines;
iii. Implementation of adequate ventilation and safety protocols at workplaces and establishment; and
iv. Enhanced response by the LGUs to areas with case increases.

RESOLVED FURTHER, that the Chairperson and the Co-Chairperson shall be duly authorized to sign this Resolution for and on behalf of the Inter-Agency Task Force.

APPROVED this August 1, 2021, via *ad referendum*.

FRANCISCO T. DUQUE III  
Secretary, Department of Health  
IATF Chairperson

KARLO ALEXEI B. NOGRALES  
Secretary, Office of the Cabinet Secretariat  
IATF Co-Chairperson
CERTIFICATION

This is to certify that:

1. I am presently an Assistant Secretary of the Department of Health;

2. I am the Head of the Secretariat of the Inter-Agency Task Force (IATF) on the Management of Emerging Infectious Diseases created under Executive Order No. 168, (s.2014) and chaired by the Department of Health (DOH);

3. The IATF Secretariat holds office in the DOH Main Office, San Lazaro Compound, Tayuman, Sta. Cruz, Manila;

4. I am the custodian of the records of the IATF, including the Minutes of Meetings and Resolutions;

5. IATF Resolution No. 130-D was unanimously approved and adopted via ad referendum;

6. The foregoing resolution has been signed by Secretary Francisco T. Duque III and Secretary Karlo Alexei B. Nograles upon the authority of the IATF Members;

7. The aforesaid resolution has not been altered, modified nor revoked and the same is now in full force and effect:

8. I am executing this Certification for whatever legitimate purpose this may serve.

IN WITNESS WHEREOF, I have hereunto affixed my signature this 1st day of August 2021, Manila.

ATTY. CHARADE B. MERCADO-GRANDE
Assistant Secretary of Health
Head Secretariat, IATF