



Republic of the Philippines  
Department of Health  
OFFICE OF THE SECRETARY

NOV 15 2019

**ADMINISTRATIVE ORDER**  
**No. 2019- 0054**

**SUBJECT: Guidelines on the Implementation of the Philippine Approach to Sustainable Sanitation (PhATSS)**

**I. RATIONALE**

Safe water, improved sanitation, and proper hygiene practices are essential for the country to achieve its health, social, and economic goals. To this end, the Department of Health (DOH) has issued Administrative Order 2010-0021, entitled "Sustainable Sanitation as a National Policy and a National Priority Program of the DOH". It aims to achieve Zero Open Defecation (ZOD) status and attain universal access to safe and adequate sanitary facilities by 2028 which are also the goals of the Philippine Health Agenda (2016-2022) and aligned with the health targets of the *FOURmula One* (F1) Plus and the Sustainable Development Goals (SDG) of safely managed sanitation services by 2030.

However, nine (9) years after the sustainable sanitation policy has been issued, sanitation remains a public health problem. According to the 2017 Annual Poverty Indicators Survey, 6 percent of Filipinos still do not have toilets and are most likely practicing open defecation, while another 19 percent use unimproved sanitation facilities. This translates to an estimated 25 million Filipinos whose practices pose a serious threat to the population in terms of health, nutrition, protection, education, environment, and productivity.

Considering the variety of sanitation conditions at the local level, the Local Government Units (LGUs) require a practical and progressive program strategy to attain these policy targets and gradually achieve sustainable sanitation. By virtue of Presidential Decree 856 or the Sanitation Code of the Philippines, DOH is tasked to assist local health offices in developing public health programs. A monitoring and evaluation system shall also be put into place to be able to guide DOH and Local Government Units (LGUs) in planning a comprehensive and sustainable sanitation program to be able to meet national policy targets on sanitation.

Through the implementation of the Philippine Approach to Sustainable Sanitation (PhATSS), local governments shall be able to convert the national sanitation goals into doable steps. PhATSS allows LGUs to determine the best combination of programmatic approaches, technologies and services that need to be put in place based on the specific context of each geographical unit. Through the PhATSS verification and certification mechanism that tracks the situation of each community, it would be easier to assess LGU performance, take supportive action and mobilize resources towards the improvement of their sanitation conditions.

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## II. OBJECTIVES

This Order aims to:

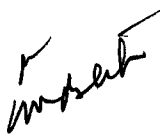
1. Provide the implementing guidelines to operationalize the national policy on sustainable sanitation (DOH A.O. 2010-0021) and achieve the SDG on sanitation;
2. Guide local health offices in assisting local sanitation planners and stakeholders in the formulation of local plans and interventions and assist LGUs to help them respond to the challenge of increasing access, especially of the poor, to sustainable sanitation, in a guided and progressive manner;
3. Provide LGUs a practical sanitation program strategy to gradually achieve sustainable sanitation; and
4. Contribute to the reduction of risks and diseases related to environmental sanitation as well as progressively achieve the SDG targets on sanitation in the Philippines.

## III. SCOPE

This Administrative Order shall apply to all units of DOH, other concerned national government agencies (NGAs), Bangsamoro Autonomous Region of Muslim Mindanao (BARMM), Local Government Units (LGUs), and development partners engaged in the planning, implementation, and monitoring of environmental sanitation programs.

## IV. DEFINITION OF TERMS

1. **Community-Led Total Sanitation (CLTS)** refers to an approach to achieve and sustain Zero Open Defecation (ZOD) status, utilizing Participatory Rural Appraisal methods for communities to assess their sanitation profile, analyze their defecation practices and its consequences, and plan actions to address the problem.
2. **Grade 0 (G0) or Open Defecation Status** is the status of the community wherein open defecation is being practiced, members of the community are not using sanitary toilet facilities, and human feces are openly visible or exposed to the environment.
3. **Grade 1 (G1) or Zero Open Defecation (ZOD) Status** is the status of the community wherein households have stopped practicing open defecation and are using sanitary toilet facilities, and no human feces are openly visible or exposed to the environment.
4. **Grade 2 (G2) or Basic Sanitation Status** is the status of the community wherein households, schools, child development centers, and public institutional facilities have their own sanitary toilets that are functional; and communities properly manage animal excreta and properly dispose their solid waste, in addition to maintaining the norm that open defecation is unacceptable.



5. **Grade 3 (G3) or Sustainable Sanitation Status** is the status of the community wherein households, private establishments and public institutional facilities have access to safely managed sanitation services; water service providers pro-actively ensure the safety of drinking water; and, the community can maintain its G2 status and the norm that open defecation is unacceptable.
6. **Household** refers to a social unit consisting of a person living alone or a group of persons who sleep in the same housing unit and have a common arrangement in the preparation and consumption of food.
7. **Open Defecation (OD)** is the presence of human excreta in open spaces, drains and bodies of water.
8. **Public Institutional Facilities** refer to government-operated and maintained facilities such as schools, child development centers, rural health units, barangay health stations, barangay halls, provincial, city or municipal halls, public markets, slaughter houses, hospitals, plazas, transportation terminals and ports, and evacuation centers.
9. **Philippine Approach to Sustainable Sanitation (PhATSS)** refers to a sanitation program strategy and monitoring framework that local governments use to move communities from open defecation status to sustainable sanitation status.
10. **Safely managed sanitation services** refer to where excreta are safely disposed on site or transported and treated and disposed in situ; stored temporarily and then emptied and transported to treatment off-site; or transported through a sewer with wastewater and then treated off-site.
11. **Sanitary or improved toilet** refers to an approved type of toilet facility used for receiving, safely containing (i.e., ensures hygienic separation of human excreta from human contact) and disposing human waste. The type of sanitary toilet includes the following as per NEDA Board Resolution No. 12, series of 1995: 1) Sanitary Pit Privy; 2) Ventilated Improved Pit; 3) Pour Flush Toilet to a receiving sewer, septic tank or leaching pit; and 4) Flush Toilet to a receiving sewer or septic tank.
12. **Unsanitary or unimproved toilet** refers to a toilet facility that does not safely contain nor dispose human waste (i.e., does not ensure hygienic separation of excreta from human contact).

## V. GENERAL GUIDELINES

1. The DOH Central Office shall facilitate agreements with NGAs and other entities in carrying out the objectives of this Order.
2. The DOH Central Office through the Environmental-Related Diseases Division of the Disease Prevention and Control Bureau shall provide technical support in the implementation of PhATSS guidelines. The DOH Center for Health Development (CHD) Offices shall cascade the implementation of the same to LGUs.



3. The national and regional Inter-Agency Committee on Environmental Health (IACEH/RIACEH) through its Water Supply, Sanitation and Health Technical Working Group (TWG), shall serve as the coordination body and the main technical assistance provider to LGUs, pursuant to Executive Order 489, series of 1991. This is to ensure alignment of contributions of other government agencies in partnership with other existing inter-agency technical groups (e.g. Inter-Agency TWG on Septage and Sewerage Management) in the implementation of this Order.
4. PhATSS implementation shall be guided by the principles of equity, participation, responsiveness, accountability and transparency. Implementation shall be anchored on a community-based participatory process that leads to positive behavior change among households and communities and that encourages progressively increasing demand for sustainable sanitation.
5. The selection of sanitation technologies and services shall be guided by existing national standards and take into consideration operational feasibility in terms of environmental and geographical conditions; affordability; and cultural and gender acceptability.
6. LGUs shall establish an enabling environment towards a sustainable sanitation program. Sanitation improvement shall be prioritized in barangays which have elevated levels of open defecation, those that are under-served, and those which have the lowest levels of sanitation conditions, as determined by their respective LGUs. LGUs that are in a position to achieve G3 or sustainable sanitation status can do so.
7. Budget shall be made available by all concerned units and offices of DOH, other relevant government agencies, LGUs to support the implementation of this Order. Funding purposes shall include, but not limited to: inter-agency coordination, capacity development, monitoring, provision of incentives and rewards, communication campaigns, and materials augmentation.
8. Funding for roll-out of communication campaigns and packages shall be provided at the national, regional, provincial, and municipal levels. Where relevant, LGUs shall engage in sanitation financing to support disadvantaged persons or groups or to bridge the viability of sanitation services.

## **VI. SPECIFIC GUIDELINES**

### **1. PhATSS levels as basis for LGU sanitation programming**

- a. LGUs shall endeavor to progressively advance towards the highest level of PhATSS following the targets set forth in Annex 1.
- b. The four sanitation levels of PhATSS shall serve as the basis for LGUs to determine their baseline status and to identify priority program components suited to their target level (see Annex 2).
- c. All of the following criteria per grade shall be complied to determine the sanitation level of the LGUs:

| Sanitation Level                                   | Criteria   |
|--|--|
| <b>Grade 0 (G0)<br/>Open Defecation</b>            | <ul style="list-style-type: none"> <li>i. Open defecation is being practiced</li> <li>ii. There are members of the community who are not using sanitary toilet facilities</li> <li>iii. Human feces are openly visible or exposed to the environment</li> </ul>  |
| <b>Grade 1 (G1)<br/>Zero Open Defecation (ZOD)</b> | <ul style="list-style-type: none"> <li>i. Open defecation is not practiced;</li> <li>ii. 100% of households have access to sanitary toilets, either through individual household facilities, shared toilets (provided a maximum of 3 households and not more than 15 individuals share one facility), or communal toilets (provided there is no space for household toilets);</li> <li>iii. Availability of water and soap at or near the toilet in all household toilets;</li> <li>iv. Proper disposal<sup>1</sup> of excreta and/or diapers of children, elderly and persons with disabilities;</li> <li>v. Existence of a functional coordinating body in the LGU that addresses water, sanitation, and hygiene (WASH) issues;</li> <li>vi. Existence of a local ordinance and a functional ZOD monitoring team to sustain ZOD status;</li> <li>vii. Presence of an approved action plan/operational plan and funding allocation to reach G2 status.</li> </ul>   |
| <b>Grade 2 (G2)<br/>Basic Sanitation</b>           | <ul style="list-style-type: none"> <li>i. Open defecation is not practiced and all households are properly disposing sanitary napkins and diapers;</li> <li>ii. 100% of households have their own sanitary toilet, and have available water and soap at or near their toilets;</li> <li>iii. All schools have safe, functional, and gender segregated toilets, with overall pupil to toilet seat ratio not exceeding 101:1;</li> <li>iv. All Child Development Centers (CDCs) have at least one age-appropriate sanitary toilet that is safe and functional;</li> <li>v. All other public institutional facilities have, at least, one functional sanitary toilet;</li> <li>vi. All households and public institutional facilities are practicing segregation and/or composting of solid waste at source;</li> <li>vii. Presence of functional materials recovery facility in the barangay;</li> <li>viii. Availability of a mechanism to sustain the local ordinance on ZOD, in addition to creating a local ordinance on having toilets in all households, schools, CDCs, and other public institutions, animal excreta management, solid waste management and a monitoring mechanism to sustain G2 status; and</li> <li>ix. Sanitation financing to reach G3 status allocated through localized sectoral master plans and local development plans.</li> </ul> |
| <b>Grade 3 (G3):<br/>Sustainable Sanitation</b>    | <ul style="list-style-type: none"> <li>i. Verified and certified G2 status</li> <li>ii. All schools, CDCs, and other public institutional facilities, including healthcare facilities, have met the applicable national</li> </ul>   |

<sup>1</sup> Proper disposal means any of the following ways: (1) disposing feces in the toilet then throwing the soiled diaper in a pit, if available, or (2) disposing used napkins and diapers in a separate garbage bag and disposed as solid waste through local solid waste collection facility, as per DENR.

|  |  |
|--|--|
|  | <p>standards for sanitation facilities, including PWD-accessibility and gender-segregation</p> <ul style="list-style-type: none"> <li>iii. All households, schools, CDCs, and other public institutional facilities, including healthcare facilities, have access to safely managed sanitation services appropriate to their toilet type;</li> <li>iv. All households, schools, CDCs, and other public institutional facilities are practicing segregation and/or composting of solid waste at source and have access to solid waste management services;</li> <li>v. Presence of functional drainage system, where it is needed;</li> <li>vi. All water service providers have water safety plans that are monitored and audited by the Municipal Local Drinking Water Quality Committee;</li> <li>vii. Sustain enforcement of all local ordinances on sanitation, and ensure existence of local ordinances on water safety plans, on safely managed sanitation services, and on functional drainage systems; and</li> <li>viii. Localized sector masterplan and monitoring mechanism integrated in relevant local development plans and budgeting documents to sustain G3 status.</li> </ul> |
|--|--|

## 2. PhATSS Implementing Mechanisms

### a. Creating an enabling environment towards a sustainable sanitation program

- 1) **Institutional Mechanisms at the Local Levels.** LGUs shall organize a local coordination body to implement this Order, either through an existing local inter-sectoral body or by establishing a local coordination body to oversee water and sanitation concerns. The local coordination body organized at the provincial, municipal/city, and barangay levels, shall be responsible for planning, budgeting, and monitoring, assessing, and verifying of water and sanitation programs and services, including PhATSS sanitation levels.
- 2) **Policies.** LGUs shall formulate and promulgate local ordinances, executive orders, and/or resolutions to implement the different program components of this Order based on the recommendation of the local coordination body.
- 3) **Sectoral Analysis, Planning and Funding.** On a regular basis, LGUs shall conduct or use available sectoral analysis to identify practices, resources, needs and gaps in implementing a sustainable sanitation program. LGUs shall include in the sectoral analysis the results of various WASH assessments from different entities such as, but not limited to, schools, day care centers, and healthcare facilities. Such sectoral analysis, including the assessment of PhATSS level, shall be the basis for planning and funding a local sectoral master plan following

national SDG targets. These plans shall be integrated into the local development plans and local investment programs, including the Local Investment Plan for Health (LIPH).

- 4) **Capacity Building.** With support from relevant government agencies at the regional and provincial levels, LGUs shall invest in enhancing the capacity of staff and persons involved in PhATSS implementation.
- 5) **Monitoring.** LGUs, through their respective local coordination bodies, shall regularly monitor and submit reports. Progress reports are expected from the barangay and consolidated at each level – by the Sanitary Inspector (municipality or city), and Sanitary Engineer (province); and shall be shared every six months to local chief executives and the WASH inter-sectoral coordination bodies for planning and budgeting purposes. The list of indicators are provided in Annex 3.

Consolidated monitoring reports and results of PhATSS service level certification shall feed into relevant national monitoring systems, such as the DOH's Field Health Services Information System (FHSIS), among others.

- 6) **Recognition, Rewards, and Incentives System.** DOH, through CHDs, shall introduce a recognition, rewards, and incentives systems for municipalities, cities and provinces that have achieved LGU-wide PhATSS certification. The LGUs, on the other hand, shall recognize barangays, communities, and households. The sanitation levels of PhATSS shall be used as basis for giving recognition/ rewards/ incentives to LGUs, which have been certified as fully compliant by the LGU PhATSS Verification Team.
- 7) **Knowledge Management and Accountability.** Each DOH CHD and its catchment provinces shall review progress and effectiveness of PhATSS implementation on a regular basis, and share the learnings, including any innovations and best practices. LGUs shall document and publicly share best practices and lessons learned in its implementation, with support from DOH and other NGAs. Learning visits to other communities implementing PhATSS are encouraged.

#### **b. Stimulating Participatory Demand Creation**

- 1) **Advocacy with Local Chief Executives and Other Local Officials.** The DOH Central Office, DOH CHD, through the Provincial Department of Health Office (PDOHO)'s Development Management Officer (DMO) or the DOH CHD Regional Sanitary Engineer or the Regional Coordinator – Environmental Health Program and Regional DILG, shall lead the conduct and/or support advocacy activities to gain the political commitment and support of the local chief executives and other officials in implementing PhATSS.

- 2) **Participatory Planning.** LGUs, through the local coordination bodies, shall involve community members, particularly the disadvantaged persons/groups, people's organizations, NGOs, and private sector representatives in problem identification, analysis, objectives and priority setting, action planning and program monitoring.
- 3) **Community-Led Total Sanitation (CLTS) Approach.** In areas where open defecation is predominantly practiced, LGUs shall be guided by the CLTS approach to trigger communities in changing their sanitation behavior. The LGUs may form and train a CLTS Triggering Team.
- 4) **WASH Communication Campaigns.** LGUs shall utilize WASH communication campaigns, such as that of *Goodbye, Dumi! Hello, Healthy!* and other related communication packages, to encourage barangays to eliminate open defecation practices, improve their sanitation level, and reinforce proper sanitation and hygiene practices. These behaviors change communication activities shall engage different population segments of the community using audience-specific communication tools.

**c. Increasing access to affordable and appropriate sanitation supplies and services**

- 1) **Targeted Assistance to Disadvantaged Persons/Groups.** LGUs shall define and identify disadvantaged persons/groups that shall be supported to improve their sanitation facilities. Preferably, the assistance shall prioritize those disadvantaged persons/groups living in barangays that have achieved G1 status. LGUs shall decide on the form and value of the assistance to be provided by the local government.
- 2) **Strengthening Access to Credit for Business Development and Households.** LGUs shall facilitate linkages between microfinance institutions (MFIs) and local business or providers of sanitation supplies and services. LGUs shall also facilitate households' access to information on financial or credit services for sanitation facility improvement.
- 3) **Sanitation Marketing.** LGUs shall promote various sanitation options that are affordable and appropriate and shall motivate households to adopt options that best fit their situation. LGUs may partner with the private sector to strengthen local supplier capacity and/or expand the variety of sanitation supplies and services.
- 4) **Septage and Sewerage Management.** LGUs shall work with relevant stakeholders to develop and implement a septage / sewerage plan including the construction, operation, and maintenance of related facilities with support from other resource partners through the National Sewerage and Septage Management Program (NSSMP). LGUs shall also provide land where the septage or sewerage treatment plant shall be built, as specified in the Clean Water Act.



- 5) **Solid Waste Management.** LGUs shall develop and implement an approved 10-year solid waste management plan in accordance with the Solid Waste Management Act (R.A. 9003), including the construction, operation, and maintenance of related facilities.
- 6) **Drinking-Water Quality Management.** Based on DOH AO 2017-0010 (Philippine National Standards for Drinking Water), LGUs shall establish and operationalize a Local Drinking Water Quality Monitoring Committee (LDWQMC) that shall monitor the quality of safe drinking water. In addition, LGUs shall ensure that all drinking-water service providers formulate and implement their Water Safety Plans (WSPs).

**d. Mainstreaming Climate Change Action (CCA) and Disaster Risk Reduction and Management (DRRM)**

In support of RA 10121 (Philippine Disaster Risk Reduction and Management Act of 2010), DOH, LGUs, NGAs and other development partners shall ensure that local CCA and DRRM plans include WASH in their climate change adaptation, disaster prevention, mitigation, response and recovery actions. The DRRM plans shall ensure that evacuation centers have safe water supply and safe, functioning and gender-segregated toilets. Similarly, PhATSS implementation shall contribute to reducing vulnerability of households and communities through improved WASH behaviors, climate and disaster risk-informed sanitation facility construction and other resilience-building strategies.

**VII. ROLES AND RESPONSIBILITIES**

**1. DOH Central Office – Disease Prevention and Control Bureau**

- a. Lead the coordination and monitoring of PhATSS implementation through the Water Supply, Sanitation and Health TWG of the national IACEH or any other relevant sector coordination body.
- b. Develop, review, and update policies, plans, technical guidelines, manual of operations, and training manuals that shall be the reference of LGUs.
- c. Hold advocacy and knowledge management activities with the NGAs and DOH CHDs.
- d. Undertake capacity development and technical assistance to CHDs and other DOH's partner agencies.
- e. Utilize resources, in accordance with existing budgets of programs, such as funds, human resources and materials for inter-agency consultations, capacity building activities, sanitation materials, incentives and rewards, and real-time monitoring and evaluation system.
- f. Consolidate reports from the CHDs and DOH-deputized agencies and use the data for policy development, planning, and advocacy.
- g. Develop communication campaigns in collaboration with other national government agencies and development partners.

## **2. DOH Center for Health Development (CHDs)**

- a. Utilize the regional IACEH or any other relevant sector coordination body for coordinating and monitoring PhATSS implementation.
- b. Hold advocacy activities with the LGUs and other partners to support PhATSS implementation.
- c. Ensure that regional health plans are supportive of the technical assistance requirements of LGUs as indicated in their local WASH sectoral plans.
- d. Roll-out PhATSS by providing technical support, augmentation of sanitation materials or subsidies, and provision of incentives / rewards.
- e. Allocate funds to augment LGU resources in the implementation of these guidelines.
- f. Monitor the progress of PhATSS implementation through the monitoring system established (see Annex 3 and 4) and share reports to the DOH Environmental Related Diseases Division (ERDD) for policy development, planning, and investment purposes.
- g. Consolidate and analyze reports submitted by all PHOs and chartered cities and use the data for policy development, planning, recognition and advocacy.

## **3. Province, Municipality, City, and Barangay LGUs**

Following their respective mandates and jurisdiction:

- a. Enact and enforce local policies and ordinances to implement PhATSS guidelines.
- b. Form or designate a local coordination body that shall be responsible for program implementation, monitoring and evaluation.
- c. Mobilize the participation of key stakeholders in program planning, implementation and monitoring.
- d. Consolidate, verify, and analyze monitoring reports and submit every quarter to their respective DOH Center for Health Development office.
- e. Coordinate with other LGUs, national agencies and other stakeholders to support PhATSS implementation and capacity development, and to share reports and lessons learned.
- f. Advocate sustainable sanitation to their respective constituents using communication materials produced by DOH, other NGAs, or development partners.

## **4. Department of the Interior and Local Government (DILG)**

- a. Support the conduct of advocacy activities at the LGU level towards effective delivery of basic WASH services.
- b. Participate in local WASH sectoral planning and budgeting at the provincial and city/municipal levels and ensure that sectoral targets and programs are integrated in the LGU's development plans.
- c. Include sanitation facilities in the Assistance to Municipalities (AM) Program and SALINTUBIG menu of services, and in other relevant programs.
- d. Participate in the national and regional IACEH, and inter-sectoral coordinating bodies at the provincial, city/municipal, and barangay level on WASH.

**5. Department of Public Works and Highways (DPWH)**

- a. Provide guidance on achieving specific criteria under the PhATSS G3 status related to the NSSMP, through their participation in the national and regional IACEH, or other relevant program coordination meetings.
- b. Provide technical and financial assistance to qualified LGUs on the feasibility study preparation; and on the implementation of the septage or sewerage management plan.
- c. Promote PhATSS within relevant units of DPWH.
- d. Coordinate with DepEd and DSWD to ensure that all schools and evacuation centers have appropriate WASH facilities, following DOH approved sanitation facility designs.

**6. Department of Environment and Natural Resources (DENR)**

- a. Provide guidance on achieving specific criteria under G2 and G3 status of PhATSS, related to the Solid Waste Management Act, and the Clean Water Act, through their participation in the national and regional IACEH.
- b. Participate in PhATSS Verification and Certification processes to be done at the barangay/ municipal/ city/ provincial levels, specifically for G2 and G3 verification.
- c. Support the promotion of PhATSS within DENR Environmental Management Bureau.
- d. Support and provide capacity building for LGUs in operationalizing the designated Water Quality Management Area (WQMA) and implement the WQMA Action Plan.
- e. Provide funds for the preparation of the feasibility study for septage treatment plants in designated WQMA.

**7. Department of Education (DepEd)**

- a. Provide guidance on achieving specific criteria under G2 and G3 status of PhATSS in relation to the WASH in Schools Program, through their participation in the national and regional IACEH, or in other relevant inter-sectoral coordinating bodies at the provincial, municipal/city, and barangay levels.
- b. Participate in PhATSS Verification and Certification processes to be done in the barangay/municipal/city/provincial levels, specifically for G2 and G3.
- c. Share the report on the status of WASH in Schools program implementation to the Provincial / City/ Municipal WASH Council.
- d. Support the promotion of PhATSS within relevant units of DepEd and in schools.

**8. Department of Social Welfare and Development (DSWD)**

- a. Provide guidance on achieving specific criteria under G2 and G3 status of PhATSS related to WASH in Early Childhood Care Development (ECCD) program, through their participation in the national and regional IACEH, or in other relevant inter-sectoral coordinating bodies at the provincial, municipal/city, and barangay levels.

- b. Conduct capacity building activities for DSWD regional, provincial, and municipal counterparts on WASH in ECCD.
- c. Coordinate with the Provincial Health Office in rolling out sanitation related programs to ensure program coherence.
- d. Participate in PhATSS Verification and Certification processes at the barangay/ municipal/ city/ provincial levels, specifically for G2 and G3.
- e. Ensure that evacuation centers have appropriate WASH facilities, following the DOH approved sanitation facility designs.

#### **9. National Economic and Development Authority (NEDA)**

- a. Integrate and identify opportunities for financing of PhATSS under the Water Supply and Sanitation Masterplan.
- b. Monitor the achievement of overall sectoral targets under Water Supply and Sanitation Masterplan, particularly on sanitation.
- c. Monitor the integration of WASH in sectoral development plans at the regional level.
- d. Participate in the national and regional IACEH.

#### **10. Other National Government Agencies (NGAs)**

Other agencies that shall be involved in the implementation of PhATSS include, but not limited to: Early Childhood Care and Development (ECCD) Council, Local Water Utilities Administration (LWUA), National Council on Disability Affairs (NCDA), National Commission on Indigenous Peoples (NCIP), and Philippine Information Agency (PIA). Within each agency's mandate and jurisdiction, contribute to PhATSS strategy roll-out and achievement of national sustainable sanitation targets:

- a. Provide technical guidance to LGUs in ensuring that sanitation program meet the needs of persons with disabilities, indigenous people, and other disadvantaged sectors.
- b. Support the conduct of advocacy and communication activities.
- c. Coordinate with DOH and other relevant local authorities in implementing programs/ projects/ activities that are related to or may affect PhATSS implementation.

#### **11. Development Partners**

- a. Coordinate with DOH and the relevant local authorities in promoting and implementing PhATSS.
- b. Submit to the Municipal/Provincial/Regional Center for Health Development Office reports on the status of their respective program implementation.

## **VIII. REPEALING CLAUSES**

The provisions from previous issuances and other related orders that are inconsistent or contrary to this order are amended and modified accordingly.

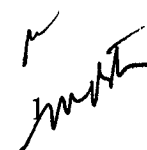
## **IX. EFFECTIVITY**

This order shall take effect immediately.

  
**FRANCISCO T. DUQUE III, MD, MSc.**  
Secretary of Health

**Annex 1: PhATSS Targets**

|             | <b>G1</b>               |          | <b>G2</b>               |          | <b>G3</b>               |          |
|-------------|-------------------------|----------|-------------------------|----------|-------------------------|----------|
|             | <b>No. of Barangays</b> | <b>%</b> | <b>No. of Barangays</b> | <b>%</b> | <b>No. of Barangays</b> | <b>%</b> |
| <b>2018</b> | 4,625                   | 11%      | 293                     | 0.7%     | 0                       | 0%       |
| <b>2019</b> | 9,971                   | 24%      | 420                     | 1.0%     | 0                       | 0%       |
| <b>2020</b> | 15,316                  | 36%      | 4,596                   | 10.9%    | 2,102                   | 5%       |
| <b>2021</b> | 20,662                  | 49%      | 8,771                   | 20.9%    | 3,784                   | 9%       |
| <b>2022</b> | 26,008                  | 62%      | 12,946                  | 30.8%    | 5,045                   | 12%      |
| <b>2023</b> | 31,354                  | 75%      | 17,121                  | 40.7%    | 7,437                   | 18%      |
| <b>2024</b> | 36,699                  | 87%      | 21,296                  | 50.7%    | 9,410                   | 22%      |
| <b>2025</b> | 42,045                  | 100%     | 25,472                  | 60.6%    | 11,384                  | 27%      |
| <b>2026</b> |                         |          | 29,647                  | 70.5%    | 13,357                  | 32%      |
| <b>2027</b> |                         |          | 33,822                  | 80.4%    | 15,331                  | 36%      |
| <b>2028</b> |                         |          | 42,045                  | 100.0%   | 17,304                  | 41%      |
| <b>2029</b> |                         |          |                         |          | 21,630                  | 51%      |
| <b>2030</b> |                         |          |                         |          | 25,956                  | 62%      |



**Annex 2: Sanitation Technologies, Behaviors and Program Approaches Needed for each PhATSS Service Level**

| <b>SERVICE LEVEL</b>              | <b>COVERAGE</b> | <b>SANITATION TECHNOLOGY</b>                | <b>SANITATION BEHAVIOR</b>  | <b>PROGRAM APPROACHES/ INTERVENTIONS</b>   |
|-----------------------------------|-----------------|---|---|--|
| <b>G0<br/>Open<br/>Defecation</b> | Household       | None,<br>With toilet - in use or not in use | Open defecation   | <ul style="list-style-type: none"> <li>• WASH Situational analysis, planning/ LSSP, budgeting, program monitoring</li> <li>• Local ordinance on ZOD, creation of Local coordinating body</li> <li>• Community-Led Total Sanitation</li> <li>• Goodbye Dumi, Hello Healthy communication strategy</li> <li>• Orientation on gender responsive, inclusive and resilient WASH facilities at the household</li> </ul>  |
| <b>G1<br/>ZOD</b>                 | Household       | Sanitary toilet (individual)                | <ul style="list-style-type: none"> <li>• Abandon the practice of open defecation</li> <li>• Proper disposal of diapers</li> <li>• Handwashing practice</li> </ul> | <ul style="list-style-type: none"> <li>• WASH Situational analysis, planning/ LSSP, budgeting, program monitoring</li> <li>• Local ordinance on solid waste segregation and composting, and animal excreta</li> <li>• Training on low-cost toilet designs</li> <li>• Sanitation financing through microfinance institutions or government subsidy</li> <li>• Sanitation marketing for local suppliers of sanitation products and services</li> <li>• May K na Kami communication strategy</li> <li>• Orientation on gender responsive, inclusive and resilient WASH program</li> </ul> |
|                                   |                 | Sanitary toilet (communal or shared)        |   |  |

*Frank*

| SERVICE LEVEL                            | COVERAGE                  | SANITATION TECHNOLOGY  | SANITATION BEHAVIOR   | PROGRAM APPROACHES/ INTERVENTIONS  |
|--|---------------------------|--|---|--|
|  |                           |  |   | <ul style="list-style-type: none"> <li>• WASH in Schools program</li> <li>• WASH in ECCD program</li> <li>• Rewards for ZOD barangay</li> </ul>  |
| <b>G2<br/>Basic<br/>Sanitation</b>       | Household                 | Sanitary toilet (individual)<br><i>*communal allowed in exceptional cases</i>  | <ul style="list-style-type: none"> <li>• Abandon the practice of open defecation</li> <li>• Proper disposal of diapers, sanitary napkins</li> <li>• Handwashing practice</li> <li>• Segregation and composting of solid waste</li> <li>• Proper disposal of animal excreta</li> </ul> | <ul style="list-style-type: none"> <li>• WASH Situational analysis, planning/ LSSP, budgeting, program monitoring</li> <li>• Local ordinance on septage /sewerage management, water safety planning</li> <li>• Septage / sewerage feasibility studies, planning and construction (where applicable)</li> <li>• Wastewater facility feasibility studies, management planning and construction (where applicable)</li> <li>• Training on water safety planning</li> <li>• Orientation on gender responsive, inclusive and resilient WASH facilities at the household</li> <li>• WASH communication strategy</li> <li>• Rewards for G2 barangays</li> </ul> |
|  | Schools                   | Sanitary toilet, gender segregated   |   |  |
|  | Child Development Centers | Sanitary toilet, age-appropriate   |   |  |
|  | Healthcare facilities     | Sanitary toilet  |   |  |
|  | Other Public Institutions | Sanitary toilet  |   |  |
|  | Barangay                  | <ul style="list-style-type: none"> <li>• Presence of MRF</li> <li>• Presence of solid waste collection service</li> </ul>  |   |  |
| <b>G3<br/>Sustainable<br/>Sanitation</b> | Household                 | <ul style="list-style-type: none"> <li>• Sanitary toilet (individual)<br/><i>*communal allowed in exceptional cases</i></li> <li>• Access to septage/ sewage collection, treatment and disposal</li> </ul> | <ul style="list-style-type: none"> <li>• Abandon the practice of open defecation</li> <li>• Proper disposal of diapers, sanitary napkins</li> <li>• Handwashing practice</li> <li>• Segregation and composting of solid waste</li> </ul>  | <ul style="list-style-type: none"> <li>• WASH situation monitoring to sustain G3 status</li> <li>• Rewards for G3 barangays</li> </ul>   |
|  | Schools                   | <ul style="list-style-type: none"> <li>• Sanitary toilet</li> <li>• Access to septage/ sewage collection, treatment and disposal</li> </ul>  |   |  |



| SERVICE LEVEL | COVERAGE                  | SANITATION TECHNOLOGY  | SANITATION BEHAVIOR   | PROGRAM APPROACHES/ INTERVENTIONS |
|---------------|---------------------------|--|---|-----------------------------------|
|               | Child Development Centers | <ul style="list-style-type: none"> <li>• Sanitary toilet, gender segregated</li> <li>• Access to septage/ sewage collection, treatment and disposal</li> </ul>   | <ul style="list-style-type: none"> <li>• Proper disposal of animal excreta</li> <li>• Access septage collection services or appropriate excreta disposal on-site</li> <li>• *Water service providers have implemented water safety plans</li> </ul> |                                   |
|               | Healthcare facilities     | <ul style="list-style-type: none"> <li>• Sanitary toilet</li> <li>• Access to septage/ sewage collection, treatment and disposal</li> <li>• Wastewater management, in hospitals</li> </ul>   |   |                                   |
|               | Other Public Institutions | <ul style="list-style-type: none"> <li>• Sanitary toilet, child appropriate</li> <li>• Access to septage/ sewage collection, treatment and disposal</li> <li>• Wastewater management, where applicable (e.g., slaughterhouse, market)</li> </ul> |   |                                   |
|               | Barangay                  | <ul style="list-style-type: none"> <li>• Presence of MRF</li> <li>• Solid waste collection service</li> </ul>  |   |                                   |
|               | Water Service Providers   | Water Safety Plan  |   |                                   |

**ANNEX 3**

(for use by the Municipal / Provincial Health Office)

**PhATSS Implementation Monitoring Report Form**

| <b>Indicator</b>                               | <b>Description</b>  | <b>Numerator</b>   | <b>Denominator</b>                                       |
|--|---|--|--|
| <b>Open Defecation (OD) rate</b>               | Proportion of households practicing OD (proportion of households without access to any toilet facility) | Number of households without access to any toilet facility     | Total number of households                               |
| <b>Sanitary (improved) Toilet coverage</b>     | Proportion of households using their own sanitary toilet  | Number of households using their own sanitary toilet           | Total number of households                               |
| <b>Unsanitary (unimproved) Toilet coverage</b> | Proportion of households using their own unsanitary toilet  | Number of households using their own unsanitary toilet         | Total number of households                               |
| <b>Shared toilet coverage</b>                  | Proportion of households using a shared, communal or public toilet                                      | Number of households using a shared, communal or public toilet | Total number of households                               |
| <b>CLTS triggering rate</b>                    | Proportion of barangays, where CLTS is appropriate, that have been triggered                            | Number of barangays that have been triggered                   | Total number of barangays recommended for CLTS           |
| <b>G1 success rate</b>                         | Proportion of barangays that have achieved ZOD or G1 status   | Number of barangays that have achieved ZOD or G1 status        | Total number of barangays                                |
| <b>G2 success rate</b>                         | Proportion of barangays that have achieved G2 status  | Number of barangays that have achieved G2 status               | Total number of barangays                                |
| <b>G3 success rate</b>                         | Proportion of barangays that have achieved G3 status  | Number of barangays that have achieved G3 status               | Total number of barangays                                |
| <b>PhATSS budget utilization</b>               | Proportion of PhATSS program budget that have been disbursed  | Total PhATSS budget disbursed within current fiscal year       | Total PhATSS budget appropriated for current fiscal year |
| <b>WASH Plan</b>                               | Proportion of LGUs that have an approved LSSP or any other WASH sectoral plan                           | Number of LGUs with an approved LSSP or WASH sectoral plan     | Total number of LGUs                                     |



| <b>Indicator</b>                     | <b>Description</b>   | <b>Numerator</b>                                      | <b>Denominator</b>   |
|--------------------------------------|--|---|--|
| <b>Level 1 water supply coverage</b> | Proportion of households using Level 1 drinking water source   | Level 1 water supply coverage                         | Proportion of households using Level 1 drinking water source |
| <b>Level 2 water supply coverage</b> | Proportion of households using Level 2 drinking water source   | Level 2 water supply coverage                         | Proportion of households using Level 2 drinking water source |
| <b>Level 3 water supply coverage</b> | Proportion of households using Level 3 drinking water source   | Level 3 water supply coverage                         | Proportion of households using Level 3 drinking water source |
| <b>Surface water coverage</b>        | Proportion of households using surface water (river, lake, dam, pond, stream, irrigation channel) for drinking | Number of households using surface water for drinking | Total number of households                                   |

## ANNEX 4

### **GUIDELINES ON PhATSS VERIFICATION AND CERTIFICATION OF BARANGAYS, MUNICIPALITIES/CITIES AND PROVINCES**

#### **Rationale**

In 2015, DOH issued Department Memorandum Number 2015-21 to provide Regional Center for Health Development (CHDs) a guideline on the verification and certification of barangays for Zero Open Defecation (ZOD) Status. ZOD is one of the targets set for all barangays to achieve by 2022, based on the Administrative Order Number 2010-21, entitled as *Sustainable Sanitation as a National Policy and Priority Program*.

With the adoption of PhATSS) as an operational strategy of the national policy on sustainable sanitation, the ZOD verification and certification guidelines, as per DM Number 2015-021, would need to be amended.

The amendments shall include additional guidelines on the procedure for verifying and certifying succeeding sanitation levels of PhATSS and allow municipalities, cities, and provinces to be certified. Under PhATSS, there are four (4) sanitation levels that describe the prevailing sanitation practice and quality of sanitation service available in a community. Each service level corresponds to a set of criteria that shall be verified for compliance before a community is certified.

This guideline shall apply to all concerned units of DOH, other national government agencies, LGUs, and development partners engaged in the design and implementation of sustainable sanitation programs. Dissemination of the information to all concerned is hereby requested.

#### **PhATSS Levels**

For the barangay, municipality, city, or province to be certified using PhATSS Sanitation levels, the community should have achieved the following criteria at the time of verification:

##### **Grade 0 (G0): Open Defecation**

- a) Open defecation is being practiced
- b) Members of the community are not using sanitary toilet facilities
- c) Human feces are openly visible or exposed to the environment

##### **Grade 1 (G1): Zero Open Defecation (ZOD)**

- a) Open defecation is not practiced;
- b) 100% of households have access to sanitary toilets, either through individual household facilities, shared toilets (provided a maximum of 3 households and not more than 15 individuals share one facility), or communal toilets (provided there is no space for household toilets);

- c) Availability of water and soap at or near the toilet in all household toilets;
- d) Proper disposal<sup>2</sup> of excreta and/or diapers of children, elderly and persons with disabilities;
- e) Existence of a functional coordinating body in the LGU that addresses water, sanitation, and hygiene (WASH) issues;
- f) Existence of a local ordinance and a functional ZOD monitoring team to sustain ZOD status;
- g) Presence of an approved action plan/operational plan and funding allocation to reach G2 status.

**Grade 2 (G2): Basic Sanitation**

- a) Open defecation is not practiced and all households are properly disposing sanitary napkins and diapers;
- b) 100% of households have their own sanitary toilet, and have available water and soap at or near their toilets;
- c) All schools have safe, functional, and gender segregated toilets, with overall pupil to toilet seat ratio not exceeding 101:1;
- d) All Child Development Centers (CDCs) have at least one age-appropriate sanitary toilet that is safe and functional;
- e) All other public institutional facilities have, at least, one functional sanitary toilet;
- f) All households and public institutional facilities are practicing segregation and/or composting of solid waste at source;
- g) Presence of functional materials recovery facility in the barangay;
- h) Availability of a mechanism to sustain the local ordinance on ZOD, in addition to creating a local ordinance on having toilets in all households, schools, CDCs, and other public institutions, animal excreta management, solid waste management and a monitoring mechanism to sustain G2 status; and
- i) Sanitation financing to reach G3 status allocated through localized sectoral master plans and local development plans.

**Grade 3 (G3): Sustainable Sanitation**

- a) Verified and certified G2 status
- b) All schools, CDCs, and other public institutional facilities, including healthcare facilities, have met the applicable national standards for sanitation facilities, including PWD-accessibility and gender-segregation
- c) All households, schools, CDCs, and other public institutional facilities, including healthcare facilities, have access to safely managed sanitation services appropriate to their toilet type;
- d) All households, schools, CDCs, and other public institutional facilities are practicing segregation and/or composting of solid waste at source and have access to solid waste management services;
- e) Presence of functional drainage system, where it is needed;

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<sup>2</sup> *Proper disposal means any of the following ways: (1) disposing feces in the toilet then throwing the soiled diaper in a pit, if available, or (2) disposing used napkins and diapers in a separate garbage bag and disposed as solid waste through local solid waste collection facility, as per DENR.*

- f) All water service providers have water safety plans that are monitored and audited by the Municipal Local Drinking Water Quality Committee;
- g) Sustain enforcement of all local ordinances on sanitation, and ensure existence of local ordinances on water safety plans, on safely managed sanitation services, and on functional drainage systems; and
- h) Localized sector masterplan and monitoring mechanism integrated in relevant local development plans and budgeting documents to sustain G3 status.

## **ORGANIZING THE VERIFICATION AND CERTIFICATION TEAM**

A verification and certification team shall be established at the municipal/city level (for assessing barangays) and the provincial level (for assessing municipalities). The agencies and members of the verification and certification team shall be identified through a local ordinance, executive order, or council resolution. The composition of the team shall include, but not be limited to:

### **A. For barangays under municipalities / cities:**

- 1) Municipal/City Health Officer (as Core Team Leader) or his/her representative/s
- 2) Sanitation Inspector
- 3) Sangguniang Bayan Councilor for Health or his/her representative/s
- 4) Representative/s from the Municipal/City Local coordinating body
- 5) Representative/s from Provincial Health Office<sup>3</sup> or the Provincial DOH Office
- 6) Representative/s from Civil Society Organizations (CSOs)
- 7) Representative from the Department of Education District Office (for G2 verification)
- 8) Representative from the Municipal/City Social Welfare and Development Office (for G2 verification)
- 9) Representative from Municipal/City Environment and Natural Resources Office (for G2 and G3 verification)
- 10) Representative from Provincial Environment Management Unit (for G3 verification)
- 11) Representative from DPWH or District Office (for G3 verification)

### **B. For barangays under highly urbanized cities:**

- 1) City Health Officer (as Core Team Leader) or his/her representative
- 2) Sanitation Inspector
- 3) Sangguniang Panglungsod Councilor for Health or his/her representative
- 4) Representative from the City Local coordinating body
- 5) Representative from the Regional Health Office (Environmental Health / PDOHO)
- 6) Representatives from Civil Society Organizations (CSOs)
- 7) Regional representatives from DepEd (for G2 verification)
- 8) Regional representatives from DSWD (for G2 verification)
- 9) Regional representatives from DENR (for G2 and G3 verification)
- 10) Regional representatives from DPWH (for G3 verification)

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*Optional for cities*

## STEPS IN VERIFICATION AND CERTIFICATION OF PhATSS LEVELS

| If applying for...                                | Prepare the following documentation requirements  |
|---|---|
| <b>Grade 1 (G1)</b><br>Zero Open Defecation (ZOD) | <ul style="list-style-type: none"> <li>• Community map</li> <li>• Copy of barangay ordinances on Zero Open Defecation and on establishing monitoring team</li> <li>• Barangay Action plan to reach G2 (Form D)</li> <li>• List of all household heads of all residents in the barangay</li> </ul>   |
| <b>Grade 2 (G2)</b><br>Basic Sanitation           | <ul style="list-style-type: none"> <li>• Copy of G1 Certificate - <i>Not required for those applying for simultaneous G1 &amp; G2 certification</i></li> <li>• Community Map</li> <li>• Copy of Barangay Action plan to reach G3 (Form D)</li> <li>• Copy of Annual Investment Program (from either the barangay, municipal, city) that reflects budget allocations for sanitation to reach G3</li> <li>• Local ordinance on management of animal excreta and solid waste</li> <li>• Equipment list used for solid waste collection</li> <li>• Schedule of collection of garbage</li> <li>• List of designated EcoAides</li> <li>• List of household head names of all residents of the barangay</li> <li>• List of all public institutional facilities located in the barangay</li> </ul>  |
| <b>Grade 3 (G3)</b><br>Sustainable Sanitation     | <ul style="list-style-type: none"> <li>• Copy of G3 certificate</li> <li>• Community map</li> <li>• Copy of updated WASH Sectoral Plan (<i>Please refer to PhATSS Toolkit for the template</i>)</li> <li>• Copy of current Annual Investment Program that includes programs/ projects/ activities related to sanitation</li> <li>• Copy of local ordinance on management of septage/ sewerage and wastewater and water safety plan</li> <li>• If there is a septage / sewerage treatment plant located in the barangay:               <ul style="list-style-type: none"> <li>○ Copy of STP Permit</li> <li>○ Copy of Septage Collector Transport Permit</li> </ul> </li> <li>• List of household head names of all residents of the barangay</li> <li>• List of all public institutional facilities located in the barangay</li> <li>• Minutes of the meeting of the Local Drinking Water Quality Monitoring Committee regarding Water Safety Plans</li> <li>• List of Water Service Providers located in the barangay</li> </ul> |

The verification and certification process are done at each service level of PhATSS. A barangay is expected to proceed to the next service level, based on PhATSS Framework, through regular assessment and planning by their local coordinating body.

Handwritten signature and initials in the bottom right corner of the page.

## **A. PhATSS Service Level Verification and Certification of Barangays**

1. **Documentation requirements.** Prior to requesting for verification, the Barangay LGU prepares the following necessary documentation required for PhATSS Service Level that they aim to apply for.
2. **Request.** The Barangay LGU submits the following requirements to the Municipal/City PhATSS Verification and Certification Team:
  - Form A - Request Letter (Form A1/ A2/ A3 corresponds to service level applied for)
  - Monitoring report following the official DOH monitoring system
  - Copy of PhATSS Service Level certificate (depending on existing certified service level)
3. **Verification.** At least fifty percent plus one of the official Verification and Certification Team members should be present during the verification and certification activity in the requesting barangay. There should at least be one representative either from the Provincial DOH Office and the Provincial Health Office in all verification and certification activities in the barangay. Use Form B during the verification and certification exercise.

All PhATSS levels (G1 to G3) includes some criteria referring to households. The Municipal/City PhATSS Verification and Certification Team randomly selects at least 10 percent of the households in the barangay and visits these households on the spot for interviews and assessment.

For G2 to G3 verification that involves some criteria referring to public institutional facilities, the Team randomly samples 50 percent of each type of public institutional facilities and visits them on the spot for interviews and assessment.

For G3 verification, the Team inspects the Septage Treatment Facility and the Wastewater Facility, located in the requesting barangay.

4. **Certification.** The Municipal/City PhATSS Verification and Certification Team awards the G1/G2/G3 certification to the Barangay.





**B. PhATSS Service Level Certification for Municipalities/ Cities:**

- 1) To apply for municipal or city -wide certification, the Municipal Health Office shall submit to the municipal / city Councilor for Health a Municipal/City PhATSS Certification Report (Form C) that contains the following:
  - a. Confirmation of the presence of a representative from the Provincial Health Office or the Provincial DOH Office (Central for Health Development or CHD in the case of HUCs) in all the barangay verification and certification activities;
  - b. Compilation of PhATSS Service Level certificates of all barangays; and
  - c. Result of latest quarterly monitoring report, using a consolidated sanitation monitoring report, following the official monitoring report of DOH, of the municipality or city.
- 2) Upon verification of the validity of the documents, the municipal / city Councilor for Health shall file a resolution endorsing the certification of their municipality as having complied with all the criteria for either G1/G2/ G3 of PhATSS.
- 3) A copy of the approved Municipal/City resolution, monitoring report from the official monitoring system of DOH, and the Municipal/City PhATSS Certification Report (Form C) shall be forwarded to the respective Provincial Local coordinating body, or in the absence of such, to the Provincial Health Office.
- 4) Upon satisfactory review of the reports, the Provincial Health Office and the Provincial DOH Office shall jointly confer and award a municipal-wide or city-wide PhATSS Service Level (G1/G2/G3) certification.

**C. PhATSS Service Level Certification for Provinces:**

As soon as the Municipal/ City PhATSS Certification Report (Form C) from all municipalities and cities of the province have been received, the Provincial Health Office shall submit a notice to the Provincial Councilor for Health to sponsor a resolution declaring a provincial-wide PhATSS certification has been achieved (for either G1/G2/G3 sanitation levels). This resolution shall be forwarded to their respective DOH CHD for conferring and awarding PhATSS Service Level certification.

## **GRANTING OF AWARDS AND INCENTIVES**

The MLGU or PLGU shall recognize PhATSS certified barangays; and, it is strongly encouraged to celebrate their G1/G2/G3 status through a special event or occasion, where the certification and reward shall be presented to give honor, pride, and prestige to the concerted efforts of the residents and local officials.

DOH CHDs shall recognize MLGUs and PLGUs with municipal-wide and provincial-wide PhATSS Service Level certifications during the World Toilet Day (November 19) event, every year.

## **MONITORING AND VALIDITY**

1. G1/G2/G3/G4 status and its improvement shall be monitored every quarter by the Barangay Local coordinating body, using the official monitoring system of DOH. Monitoring results shall be reported to the Sanitation Inspector to consolidate. The Municipal Health Officer shall present the consolidated results during the quarterly Local coordinating body meeting or the earliest next possible meeting of the Local Health Board. The results from the municipal level shall also be submitted to the Provincial Sanitation Coordinator.
2. For recording and monitoring purposes, program planning, and for possible giving of citation and rewards, the Provincial LGU shall submit a quarterly report to the DOH CHD using the official monitoring system of DOH
3. The Provincial Local coordinating body, or in the absence of such, the Provincial Health Office. They shall also conduct spot checks of the certified G1/G2/G3 barangays annually. During which, the G1/G2/G3 certification status of the barangay may be revoked, if the barangay does not maintain the criteria required in PhATSS service level, and only after two failed spot checks.
4. Only the Provincial Local coordinating body, or in the absence of such, the Provincial Health Office, has the power to revoke PhATSS Service Level certification.
5. The same process of verification and certification shall be followed to reinstate their status.

## **BUDGET REQUIREMENTS**

1. The municipal, city and provincial Local coordinating body, and through the support of the local health offices, shall pro-actively plan for and propose a budget for the monitoring, verification and certification activities, including the sanitation rewards or incentives.
2. The requesting municipal / city LGU shall fund for the travel related expenses of their staff for the verification and certification activities.
3. Travel expenses (transportation and other incidental expenses) of the members of the verification and certification team, who are not under the employ of the requesting municipal or city LGU, shall be funded through the sanitation program of the provincial LGU.
4. Honoraria for the verification team may be provided based on available funds from the Provincial/Municipal LGU and following applicable government rules and procedures.

**PhATSS Form A1**  
[For use by the Barangay]

**LETTER OF REQUEST FOR VERIFICATION AND CERTIFICATION OF  
ZERO OPEN DEFECATION (G1) STATUS**

Date: \_\_\_\_\_ (Name) \_\_\_\_\_  
Municipality/City Health Officer  
Municipality/City of \_\_\_\_\_  
Province of \_\_\_\_\_

Dear Sir/Madam:

This is to inform you that our barangay has complied with the criteria required for G1 or ZOD status as of (DATE) \_\_\_\_\_. Our barangay officials have done the following activities<sup>4</sup> to mobilize the community in reaching the criteria for G1 or ZOD status:

\_\_\_\_\_  
\_\_\_\_\_

We take pride for having implemented the following innovative<sup>5</sup> approaches to achieve G1 status:

\_\_\_\_\_  
\_\_\_\_\_

In this regard, we would like to request the Municipal/City Verification and Certification Team to conduct the verification exercise and certify our status as a ZOD (G1) barangay. Enclosed is our report and other attachments, for your reference.

Thank you very much.

Respectfully yours,

\_\_\_\_\_  
(SIGNATURE OVER PRINTED NAME)  
Barangay Captain

<sup>4</sup> Examples are forming barangay ZOD monitoring team, passing a local ZOD ordinance, conduct of CLTS triggering activities, use of Goodbye Dumi! Hello Healthy! Campaign tools, etc.

<sup>5</sup> Innovative approaches in terms of mobilizing community members, constructing toilets using indigenous materials, appropriate toilet designs and enforcing the ZOD policy, etc.



**PhATSS Form A1 / continuation**

The following documentation requirements for G1 verification and certification are attached to this request letter:

- Simple community map indicating key boundaries and landmarks of the barangay, households, and toilets. This shall support the verification team in planning for the verification visit.
- Copy of our barangay ordinance on zero open defecation
- Copy of Barangay Action Plan (Form D) indicating our activities to reach G2 or Basic Sanitation Status
- Copy of Municipal/ City Annual Investment Program or Barangay Development Plan that provides funding to reach G2 activities



**PhATSS Form B1**

[For use by the Verification &amp; Certification Team]

**G1 OR ZOD STATUS  
VERIFICATION AND CERTIFICATION FORM**

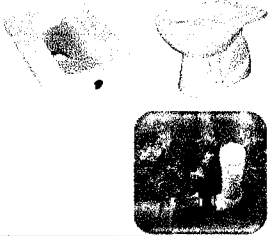
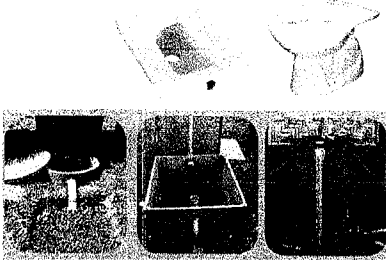
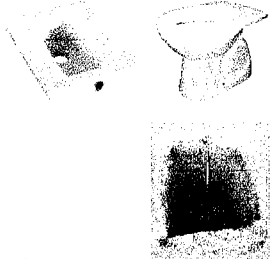
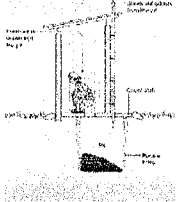
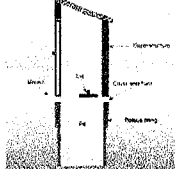
Date: \_\_\_\_\_ Municipality/City: \_\_\_\_\_  
 Barangay: \_\_\_\_\_ Province: \_\_\_\_\_  
 Population: \_\_\_\_\_ Number of Households: \_\_\_\_\_

**OBSERVATION IN THE BARANGAY (Sample at least 10% of the total number of households)**

| NAME OF HOUSEHOLD HEAD   | HH#1 | HH#2 | HH#3 | HH#4 | HH#5 |
|--|------|------|------|------|------|
| 1) Is there a toilet?<br>(Y/N)   |      |      |      |      |      |
| 2) Is it being used?<br>(Y/N)  |      |      |      |      |      |
| 3) Is the toilet functional and well maintained <sup>6</sup> ?<br>(Y/N)  |      |      |      |      |      |
| 4) Is there soap and water at/or near the toilet? (Y/N)  |      |      |      |      |      |
| 5) Are children, elderly, and PWDs' feces and diapers properly disposed <sup>7</sup> ?<br>(Y/N/NA if there are no children, PWD, elderly members in the household) |      |      |      |      |      |
| 6) Are there no more feces found in open spaces in the community?<br>(Y/N)   |      |      |      |      |      |

<sup>6</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.

<sup>7</sup> Disposing feces in the toilet then throwing the soiled diaper in a pit, if available. If not, dispose separately and include in the collection of solid waste.

| NAME OF HOUSEHOLD HEAD  | HH#1  | HH#2 | HH#3 | HH#4 | HH#5 |
|---|---|------|------|------|------|
| 7) What type of toilet is present?<br><i>Check the toilet type that applies.</i>    |   |      |      |      |      |
|    | Flush/ pour<br>flush to<br>sewer  |      |      |      |      |
|     | Flush/ pour<br>flush to<br>septic tank                                      |      |      |      |      |
|   | Flush/ pour<br>flush to pit   |      |      |      |      |
|  | Ventilated<br>Improved<br>Pit Latrine<br>(with vent,<br>lid, floor<br>slab) |      |      |      |      |
|  | Pit Latrine<br>(with lid,<br>floor slab)                                    |      |      |      |      |
| Others, please describe in the space provided                                       |   |      |      |      |      |
| 8) Does the household use a shared toilet <sup>8</sup> ?<br>(Y/N)                   |   |      |      |      |      |
| 8.1 If yes, how many people use the<br>toilet?                                      |   |      |      |      |      |
| 9) Does the household use a communal/<br>public toilet? (Y/N)                       |   |      |      |      |      |

<sup>8</sup> A shared toilet should be shared only by 2-3 households and not more than 15 individuals. If more than 15 people use the toilet, then the barangay shall not be certified ZOD/G1.

12/ 

## G1 / ZOD VERIFICATION AND CERTIFICATION SUMMARY

|                             |  |  |  |
|-----------------------------|--|--|--|
| <b>Barangay:</b>            |  | <b>Total Households:</b>                                 |  |
| <b>Municipality / City:</b> |  | <b>Total Households Visited by the Verification team</b> |  |
| <b>Province:</b>            |  |  |  |

| <b>G1 or ZOD Status Certification Questions</b>  | <b>Yes</b> | <b>No</b> |
|--|------------|-----------|
| A. There are NO VISIBLE SIGNS OF OPEN DEFECACTION in the Barangay <i>(Note: please check OD sites)</i>   |            |           |
| B. Do all households have YES responses for questions 1-6 above?   |            |           |
| C. Do all households using a shared toilet meet the recommended number of households or persons sharing the toilet?  |            |           |
| D. Is there a local ordinance that prohibits open defecation and establishes a barangay monitoring team to sustain the ZOD Status? <i>(Ask the barangay to provide a copy)</i> |            |           |
| E. Is there an Action Plan approved to get to G2? <i>(Ask the barangay to provide a copy)</i>  |            |           |
| F. Is there a monitoring report submitted by the barangay? <i>(Ask the barangay to provide a copy)</i>   |            |           |

*If YES is answered to all questions above (A-F), the barangay can be declared as ZOD certified.*

|   |  |
|---|--|
| <b>SHOULD THE BARANGAY BE CERTIFIED ZOD? (Yes / No)</b> |  |
| <b>DATE OF CERTIFICATION</b>                            |  |

|   |                                   |
|---|-----------------------------------|
| <b>If the barangay is not CERTIFIED ZOD, what is the recommended action for the barangay?</b> | <b>Target date for completion</b> |
|   |                                   |

### VERIFICATION AND CERTIFICATION TEAM

|   | NAME | DESIGNATION | OFFICE | SIGNATURE |
|---|------|-------------|--------|-----------|
| 1 |      |             |        |           |
| 2 |      |             |        |           |
| 3 |      |             |        |           |
| 4 |      |             |        |           |
| 5 |      |             |        |           |
| 6 |      |             |        |           |
| 7 |      |             |        |           |

*\*Additional rows may be added should there be more members in the verification team*

13



**PhATSS Form A2**  
[For use by the Barangay]

**LETTER OF REQUEST FOR VERIFICATION AND CERTIFICATION OF  
BASIC SANITATION (G2) STATUS**

Date: \_\_\_\_\_  
(Name) \_\_\_\_\_  
Municipality/City Health Officer  
Municipality/City of \_\_\_\_\_  
Province of \_\_\_\_\_

Dear Sir/Madam:

This is to inform you that our barangay has complied with the criteria required for G2 or BASIC SANITATION status as of (DATE) \_\_\_\_\_. Our barangay officials have done the following activities<sup>9</sup> to mobilize the community in reaching the criteria for G2 or Basic Sanitation status:

|  |
|--|
|  |
|--|

We take pride for having implemented the following innovative<sup>10</sup> approach to achieve G2 status –

|  |
|--|
|  |
|--|

In this regard, we would like to request the Municipal/City Verification and Certification Team to conduct the verification exercise and certify our status as an BASIC SANITATION (G2) barangay. Enclosed is our report and other attachments, for your reference.

Thank you very much.

Respectfully yours,

\_\_\_\_\_  
(SIGNATURE OVER PRINTED NAME)  
Barangay Captain

<sup>9</sup>Examples are forming barangay monitoring teams, mobilizing the support of MFIs for sanitation financing, provision of subsidy, using community rewards to support poorest and disadvantaged persons/groups, etc.

<sup>10</sup>Innovative approaches in terms of mobilizing community members, constructing toilets and enforcing local ordinances related to sanitation, etc.



**PhATSS Form A2 / continuation**

*The following documentation requirements for G2 verification and certification are attached to this request letter:*

- Simple community map indicating key boundaries and landmarks and facilities in the barangay. This shall support the verification team in planning for the verification visit.
- Copy of our Barangay G1 or Zero Open Defecation Status certificate (optional)
- Copy of local ordinance on proper disposal of animal excreta, and solid waste
- Copy of Barangay Action Plan (Form D) indicating our activities to reach G3 or Sustainable Sanitation Status
- Copy of Municipal/ City Annual Investment Program or Barangay Development Plan that provides funding to reach G3 activities
- Equipment list used for solid waste collection
- Schedule of collection of garbage
- List of designated EcoAides
- List of household head names of all residents of the barangay
- List of all public institutional facilities located in the barangay

A handwritten signature in black ink, appearing to be 'M. M. M.', with the date '15' written above it. There is a small mark below the signature.

**G2 OR BASIC SANITATION STATUS  
VERIFICATION AND CERTIFICATION FORM**

Date: \_\_\_\_\_ Municipality/City: \_\_\_\_\_  
 Barangay: \_\_\_\_\_ Province: \_\_\_\_\_  
 Population: \_\_\_\_\_ Number of Households: \_\_\_\_\_


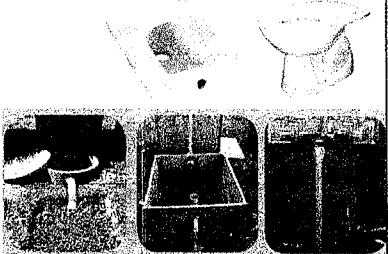
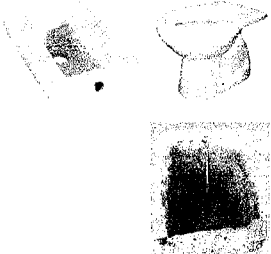
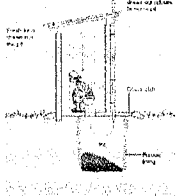
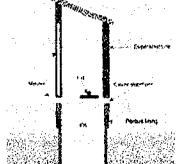
**PART I. HOUSEHOLDS**

**OBSERVATION IN THE BARANGAY** *(Sample at least 10% of the total number of households)*

| NAME OF HOUSEHOLD HEAD   | HH#1 | HH#2 | HH#3 | HH#4 | HH#5 |
|--|------|------|------|------|------|
| 1) Is there a toilet? (Y/N)  |      |      |      |      |      |
| 2) Is it being used? (Y/N)   |      |      |      |      |      |
| 3) Is the toilet functional and well maintained <sup>11</sup> ? (Y/N)  |      |      |      |      |      |
| 4) Is there soap and water at/or near the toilet? (Y/N)  |      |      |      |      |      |
| 5) Are children, elderly, and PWDs' feces and diapers properly disposed <sup>12</sup> ? (Y/N/NA if there are no children, PWD, elderly members in the household) |      |      |      |      |      |
| 6) Are there no more feces found in open spaces in the community? (Y/N)  |      |      |      |      |      |
| 7) Are there no sanitary napkins found in open spaces in the community? (Y/N)  |      |      |      |      |      |
| 8) Does the household practice waste segregation and /or composting? (Y/N)   |      |      |      |      |      |
| 9) Does the household dispose their garbage properly? (Y/N)  |      |      |      |      |      |

<sup>11</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.

<sup>12</sup> Disposing feces in the toilet then throwing the soiled diaper in a pit, if available. If not, dispose separately and include in the collection of solid waste.

| NAME OF HOUSEHOLD HEAD  | HH#1   | HH#2 | HH#3 | HH#4 | HH#5 |
|---|--|------|------|------|------|
| 10) What type of toilet is present?<br><i>Check the toilet type that applies.</i>   |  |      |      |      |      |
|    | Flush/ pour<br>flush to sewer  |      |      |      |      |
|   | Flush/ pour<br>flush to septic<br>tank                                   |      |      |      |      |
|   | Flush/ pour<br>flush to pit  |      |      |      |      |
|    | Ventilated<br>Improved Pit<br>Latrine<br>(with vent, lid,<br>floor slab) |      |      |      |      |
|    | Pit Latrine<br>(with lid, floor<br>slab)                                 |      |      |      |      |
| Others, please describe in the space provided   |  |      |      |      |      |
| 11) Is the household using their own toilet? <sup>13</sup><br>(Y/N)   |  |      |      |      |      |
| 12) If the household is not using their own toilet,<br>state the reason, and take a photo of the house<br>and its immediate surroundings. |  |      |      |      |      |

**Visit the Materials Recovery Facility (MRF) in the barangay**

Is the MRF functional? (Yes/ No) \_\_\_\_\_

Name of MRF: \_\_\_\_\_

Location: \_\_\_\_\_

<sup>13</sup> If the household is sharing a toilet with other households or if the household is using a public or communal toilet then the barangay shall not be certified.

## PART II. PUBLIC INSTITUTIONAL FACILITIES

*Public Institutional Facilities refer to government-operated and maintained facilities such as rural health units, barangay health stations, barangay halls, provincial, city or municipal halls, public markets, slaughter houses, hospitals, plazas, transportation terminals and ports, and evacuation centers.*

### II. A. Schools

*Sample at least 50% of all schools in the barangay.*

|  | S#1      | S#2      | S#3      | S#4      | S#5      |
|--|----------|----------|----------|----------|----------|
| <b>Name of School</b>  |          |          |          |          |          |
| <b>Person Interviewed</b>  |          |          |          |          |          |
| (A) Number of Students or Pupils                                       |          |          |          |          |          |
| (B) Total Number of Functional Toilets in the school                   |          |          |          |          |          |
| Average Pupil-Functional Toilet Ratio (1 toilet = A/B pupils)          | 1: _____ | 1: _____ | 1: _____ | 1: _____ | 1: _____ |
| 1. Number of functional toilets that are safe for children to use      |          |          |          |          |          |
| 2. Is there water and soap near/at all toilets? (Y/N)                  |          |          |          |          |          |
| 3. Are the toilets gender segregated? (Y/N)                            |          |          |          |          |          |
| <b>Check type of toilet present:</b>                                   |          |          |          |          |          |
| Flush/ pour flush to sewer   |          |          |          |          |          |
| Flush/ pour flush to septic tank                                       |          |          |          |          |          |
| Flush/ pour flush to pit   |          |          |          |          |          |
| Ventilated Improved Pit Latrine  |          |          |          |          |          |
| Pit Latrine  |          |          |          |          |          |
| Others   |          |          |          |          |          |
| 4. Does the school practice waste segregation and/or composting? (Y/N) |          |          |          |          |          |
| 5. Does the school dispose their garbage properly? (Y/N)               |          |          |          |          |          |

## II. B. Child Development Centers (CDC)

Sample at least 50% of all CDCs in the barangay.

|   | S#1 | S#2 | S#3 | S#4 | S#5 |
|---|-----|-----|-----|-----|-----|
| <b>Name of CDC</b>  |     |     |     |     |     |
| <b>Person Interviewed</b>   |     |     |     |     |     |
| 1. Is there a toilet? (Y/N)   |     |     |     |     |     |
| 2. Is the toilet functional and well maintained <sup>14</sup> ? (Y/N)         |     |     |     |     |     |
| 3. Is the toilet safe for children / children with disabilities to use? (Y/N) |     |     |     |     |     |
| 4. Is there water and soap near/at all toilets? (Y/N)                         |     |     |     |     |     |
| <b>Check type of toilet present:</b>  |     |     |     |     |     |
| Flush/ pour flush to sewer  |     |     |     |     |     |
| Flush/ pour flush to septic tank  |     |     |     |     |     |
| Flush/ pour flush to pit  |     |     |     |     |     |
| Ventilated Improved Pit Latrine   |     |     |     |     |     |
| Pit Latrine   |     |     |     |     |     |
| Others  |     |     |     |     |     |
| 5. Do they practice waste segregation and/or composting? (Y/N)                |     |     |     |     |     |
| 6. Do they dispose their garbage properly? (Y/N)                              |     |     |     |     |     |

<sup>14</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.

## II. C. Healthcare Facilities and other Public Institutional Facilities

Healthcare facilities refer to barangay health stations, rural health units, and hospitals. Other public institutional facilities refer to all other government-operated and maintained facilities such as barangay halls, provincial, city or municipal halls, public markets, slaughter houses, plazas, transportation terminals and ports, and evacuation centers.

Sample at least 50% of all health care facilities and other public institutional facilities in the barangay.

|  | I#1 | I#2 | I#3 | I#4 | I#5 |
|--|-----|-----|-----|-----|-----|
| <b>Name of Institution</b>   |     |     |     |     |     |
| <b>Person Interviewed</b>  |     |     |     |     |     |
| 1. Is there a toilet? (Y/N)  |     |     |     |     |     |
| 2. Is there at least one toilet that is functional and well maintained <sup>15</sup> ? (Y/N) |     |     |     |     |     |
| 3. Is there water and soap near/at all toilets? (Y/N)  |     |     |     |     |     |
| <b>Check type of toilet present:</b>   |     |     |     |     |     |
| Flush/ pour flush to sewer   |     |     |     |     |     |
| Flush/ pour flush to septic tank   |     |     |     |     |     |
| Flush/ pour flush to pit   |     |     |     |     |     |
| Ventilated Improved Pit Latrine  |     |     |     |     |     |
| Pit Latrine  |     |     |     |     |     |
| Others – please describe   |     |     |     |     |     |
| 4. Do they practice waste segregation and/or composting? (Y/N)                               |     |     |     |     |     |
| 5. Do they dispose their garbage properly? (Y/N)   |     |     |     |     |     |

<sup>15</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.

**G2 / BASIC SANITATION  
VERIFICATION AND CERTIFICATION SUMMARY**

(Page 1)

DATE OF VERIFICATION VISIT: \_\_\_\_\_

|                 |  |                            |  |                 |  |
|-----------------|--|----------------------------|--|-----------------|--|
| <b>Barangay</b> |  | <b>Municipality / City</b> |  | <b>Province</b> |  |
|-----------------|--|----------------------------|--|-----------------|--|

|   | Households | Schools | Child Development Centers | Public Institutional Facilities |
|---|------------|---------|---------------------------|---------------------------------|
| Total Number in the Barangay            |            |         |                           |                                 |
| Number visited by the Verification Team |            |         |                           |                                 |

| <b>G2 or Basic Sanitation Status Certification Questions</b>   | Yes | No |
|--|-----|----|
| <b>Part I – Households</b>   |     |    |
| A. There are NO VISIBLE SIGNS OF OPEN DEFECATION in the Barangay<br><i>(Note: please check OD sites)</i>   |     |    |
| B. Do all sampled households have YES responses for questions 1-7 in Part I?   |     |    |
| C. Do all sampled households use their own sanitary or improved toilet? <i>(refer to questions 10-12 in Part I)</i>  |     |    |
| D. Is there a functional MRF in the Barangay?<br><i>(Note: Please visit and check the MRF if operational)</i>  |     |    |
| E. Do all sampled households practice proper garbage disposal appropriate to their context? <i>(refer to questions 8-9 in Part I)</i>  |     |    |
| <b>Part II – Public Institutional Facilities</b>   |     |    |
| F. Do all sampled schools have YES responses for Part II-A?  |     |    |
| G. Do all sampled schools meet or are below the 1:101 toilet to pupil ratio?   |     |    |
| H. Do all sampled child development centers have YES responses for   |     |    |
| I. Part II-B?  |     |    |
| J. Do all sampled health care facilities and other public institutional facilities have YES responses for Part II-C?   |     |    |
| K. Do all sampled health care facilities and other public institutional facilities use a functional sanitary or improved toilet?   |     |    |
| <b>Part III – Sanitation Program Governance</b>  |     |    |
| L. Is there a local ordinance that prohibits open defecation and establishes a barangay monitoring team to sustain the ZOD and G2 Status?<br><i>(Ask the barangay to provide a copy)</i> |     |    |
| M. Is there a local ordinance on having toilets in institutions, schools, and child development centers?   |     |    |
| N. Is there a local ordinance on animal excreta management?<br><i>(Ask the barangay to provide a copy)</i>   |     |    |
| O. Is there a local ordinance on solid waste management?<br><i>(Ask the barangay to provide a copy)</i>  |     |    |
| P. Is there a monitoring report submitted by the barangay?<br><i>(Ask the barangay to provide a copy)</i>  |     |    |
| Q. Is there an approved Barangay Action Plan to get to G3?<br><i>(Ask the barangay to provide a copy)</i>  |     |    |
| R. Is there funding allocation for G3 activities in the Municipal / City Annual Investment Program / Barangay Development Plan / Localized Sectoral Masterplans?                         |     |    |

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**LETTER OF REQUEST FOR VERIFICATION AND CERTIFICATION OF SUSTAINABLE SANITATION (G3) STATUS**

Date: \_\_\_\_\_

(Name) \_\_\_\_\_  
Municipality/City Health Officer  
Municipality/City of \_\_\_\_\_  
Province of \_\_\_\_\_

Dear Sir/Madam:

This is to inform you that our barangay has complied with the criteria required for G3 or SUSTAINABLE SANITATION status as of (DATE) \_\_\_\_\_. Our barangay officials have done the following activities<sup>16</sup> to mobilize the community in reaching the criteria for G3 or Sustainable Sanitation status:

\_\_\_\_\_  
\_\_\_\_\_

We take pride for having implemented the following innovative<sup>17</sup> approach to achieve G4 status –

\_\_\_\_\_  
\_\_\_\_\_

In this regard, we would like to request the Municipal/City Verification and Certification Team to conduct the verification exercise and certify our status as a SUSTAINABLE SANITATION (G3) barangay. Enclosed is our report and other attachments, for your reference.

Thank you very much.

Respectfully yours,

\_\_\_\_\_  
(SIGNATURE OVER PRINTED NAME)  
Barangay Captain

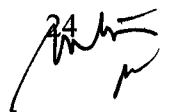
<sup>16</sup> Examples are forming barangay monitoring team, passing a local ordinance on septage and wastewater management, conduct of water safety planning, etc.

<sup>17</sup> Innovative approaches in terms of mobilizing municipalities within the ILHZ to manage and/or access septage treatment facilities, and enforcing local ordinances on sanitation, etc.

**PhATSS Form A3 / continuation**

*The following documentation requirements for G3 verification and certification are attached to this request letter:*

- Simple community map indicating key boundaries and landmarks of the barangay, households, and toilets. This shall support the verification team in planning for the verification visit.
- Copy of our Barangay G2 or Basic Sanitation Status certificate
- Copy of updated WASH Sectoral Plan
- Copy of current Annual Investment Program that includes programs/ projects/ activities related to sanitation
- Copy of local ordinance on management of Septage/Sewerage and Wastewater
- Copy of local ordinance on management of Water Safety Planning
- Copy of Septage Treatment Plant Permit (if the septage/sewerage treatment plant is in the barangay)
- Copy of Septage Treatment Plant - Collector Transport Permit (if the septage/sewerage treatment plant is in the barangay)
- Equipment list used for solid waste collection
- Schedule of collection of garbage
- List of designated EcoAides
- List of household head names of all residents of the barangay
- List of all public institutional facilities located in the barangay
- List of all water service providers located in the barangay



**G3 OR SUSTAINABLE SANITATION STATUS  
VERIFICATION AND CERTIFICATION FORM**

Date: \_\_\_\_\_ Municipality/City: \_\_\_\_\_  
 Barangay: \_\_\_\_\_ Province: \_\_\_\_\_  
 Population: \_\_\_\_\_ Number of Households: \_\_\_\_\_

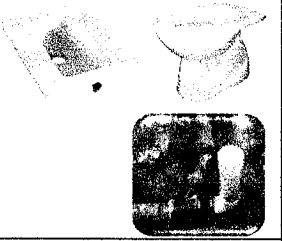
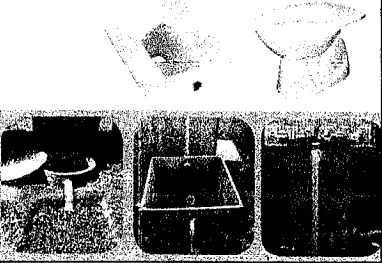
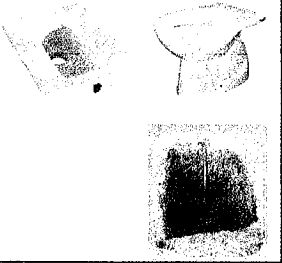
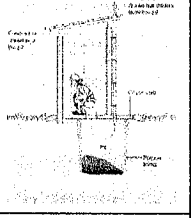
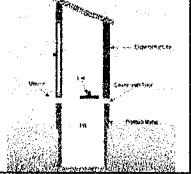
**PART I. HOUSEHOLDS**

*Sample at least 10% of the total number of households.*

| NAME OF HOUSEHOLD HEAD  | HH#1 | HH#2 | HH#3 | HH#4 | HH#5 |
|---|------|------|------|------|------|
| c. Is the toilet functional and well maintained <sup>18</sup> ? (Y/N)   |      |      |      |      |      |
| d. Is there soap and water at/or near the toilet? (Y/N)   |      |      |      |      |      |
| e. Are there no feces, sanitary napkins, diapers and solid waste found in open spaces in the community? (Y/N) |      |      |      |      |      |
| f. Have you ever emptied your septic tank or pit? (Y/N)   |      |      |      |      |      |
| g. If yes to Q#4, what did you do with the collected excreta /fecal sludge?                                   |      |      |      |      |      |
| h. If no to Q#4, what do you plan to do once the pit/septic tank is full?                                     |      |      |      |      |      |

<sup>18</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.

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| NAME OF HOUSEHOLD HEAD  | HH#1  | HH#2 | HH#3 | HH#4 | HH#5 |
|---|---|------|------|------|------|
| i. What type of toilet is present?<br><i>Check the toilet type that applies.</i>  |   |      |      |      |      |
|    | Flush/ pour<br>flush to<br>sewer  |      |      |      |      |
|    | Flush/ pour<br>flush to<br>septic tank                                      |      |      |      |      |
|   | Flush/ pour<br>flush to pit   |      |      |      |      |
|    | Ventilated<br>Improved<br>Pit Latrine<br>(with vent,<br>lid, floor<br>slab) |      |      |      |      |
|    | Pit Latrine<br>(with lid,<br>floor slab)                                    |      |      |      |      |
| Others, please describe in the space provided   |   |      |      |      |      |
| 13) Is the household using their own toilet? <sup>19</sup> (Y/N)  |   |      |      |      |      |
| 14) If the household is not using their own toilet, state the reason, and take a photo of the house and its immediate surroundings. |   |      |      |      |      |
| 15) Does the household practice waste segregation and /or composting? (Y/N)   |   |      |      |      |      |
| 16) Does the household dispose their garbage properly? (Y/N)  |   |      |      |      |      |

<sup>19</sup> If the household is sharing a toilet with other households or if the household is using a public or communal toilet then the barangay shall not be certified.

26  
MME  
K

## PART II. PUBLIC INSTITUTIONAL FACILITIES

*Public Institutional Facilities refer to government-operated and maintained facilities such as rural health units, barangay health stations, barangay halls, provincial, city or municipal halls, public markets, slaughter houses, hospitals, plazas, transportation terminals and ports, and evacuation centers.*

### II. A. Schools

*Sample at least 50% of all schools in the barangay.*

|   | S#1 | S#2 | S#3 | S#4 | S#5 |
|---|-----|-----|-----|-----|-----|
| <b>Name of School</b>   |     |     |     |     |     |
| <b>Person Interviewed</b>   |     |     |     |     |     |
| 1. Are the toilets functional and well maintained <sup>20</sup> ? (Y/N)   |     |     |     |     |     |
| 2. Is there water and soap near/at all toilets? (Y/N)                     |     |     |     |     |     |
| 3. Are the toilets gender segregated? (Y/N)                               |     |     |     |     |     |
| 4. Does the school practice waste segregation and/or composting? (Y/N)    |     |     |     |     |     |
| 5. Does the school dispose their garbage properly? (Y/N)                  |     |     |     |     |     |
| 6. Have the school ever emptied their septic tank or pit? (Y/N)           |     |     |     |     |     |
| 7. If yes to Q#6, what was done with the collected excreta /fecal sludge? |     |     |     |     |     |
| 8. If no to Q#6, what do you plan to do once the pit/septic tank is full? |     |     |     |     |     |

<sup>20</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.

## II.B. Child Development Centers (CDC)

Sample at least 50% of all CDCs in the barangay.

|   | CDC #1 | CDC #2 | CDC #3 | CDC #4 | CDC #5 |
|---|--------|--------|--------|--------|--------|
| <b>Name of CDC</b>  |        |        |        |        |        |
| <b>Person Interviewed</b>   |        |        |        |        |        |
| 1. Are the toilets functional and well maintained <sup>21</sup> ? (Y/N)       |        |        |        |        |        |
| 2. Is there water and soap near/at all toilets? (Y/N)                         |        |        |        |        |        |
| 3. Is the toilet safe for children / children with disabilities to use? (Y/N) |        |        |        |        |        |
| 4. Do they practice waste segregation and/or composting? (Y/N)                |        |        |        |        |        |
| 5. Do they dispose their garbage properly? (Y/N)                              |        |        |        |        |        |
| 6. Have the CDC ever emptied their septic tank or pit? (Y/N)                  |        |        |        |        |        |
| 7. If yes to Q#6, what was done with the collected excreta /fecal sludge?     |        |        |        |        |        |
| 8. If no to Q#6, what do you plan to do once the pit/septic tank is full?     |        |        |        |        |        |

<sup>21</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.

**II.C. Healthcare Facilities and other Public Institutional Facilities**

*Health care facilities refer to barangay health stations, rural health units, and hospitals. Other public institutional facilities refer to all other government-operated and maintained facilities such as barangay halls, provincial, city or municipal halls, public markets, slaughter houses, plazas, transportation terminals and ports, and evacuation centers.*

*Sample at least 50% of all other public institutional facilities in the barangay.*

|   | I#1 | I#2 | I#3 | I#4 | I#5 |
|---|-----|-----|-----|-----|-----|
| <b>Name of Institution</b>  |     |     |     |     |     |
| <b>Person Interviewed</b>   |     |     |     |     |     |
| 1. Are the toilets functional and well maintained <sup>22</sup> ? (Y/N)       |     |     |     |     |     |
| 2. Is there water and soap near/at all toilets? (Y/N)                         |     |     |     |     |     |
| 3. Do the sanitation facilities meet the applicable national standards? (Y/N) |     |     |     |     |     |
| 4. Do they practice waste segregation and/or composting? (Y/N)                |     |     |     |     |     |
| 5. Do they dispose their garbage properly? (Y/N)                              |     |     |     |     |     |
| 6. Have the facility ever emptied their septic tank or pit? (Y/N)             |     |     |     |     |     |
| 7. If yes to Q#5, what was done with the collected excreta /fecal sludge?     |     |     |     |     |     |
| 8. If no to Q#5, what do you plan to do once the pit/septic tank is full?     |     |     |     |     |     |

<sup>22</sup> "Well maintained" refers to the cleanliness of the immediate surrounding and inside of the toilet; "functional" means that the toilet is in good working condition.



### III. Water Service Providers

Sample 50% of water service providers located in the barangay.

|  | I#1 | I#2 | I#3 | I#4 | I#5 |
|--|-----|-----|-----|-----|-----|
| Name of Water Service Provider (WSP)   |     |     |     |     |     |
| Person Interviewed   |     |     |     |     |     |
| 1) Does the water service provider have a water safety plan? (Y/N)   |     |     |     |     |     |
| 2) When was the last time that their Water Safety Plan audited by the Local Drinking-Water Quality Monitoring Committee? |     |     |     |     |     |

### IV. Materials Recovery Facility (MRF) in the barangay

Randomly select and visit a Materials Recovery Facility (MRF) in the barangay

Is the MRF functional? (Yes/ No) \_\_\_\_\_

Name of MRF: \_\_\_\_\_

Location: \_\_\_\_\_

30/1/15  
r

**G3 or SUSTAINABLE SANITATION STATUS  
VERIFICATION AND CERTIFICATION SUMMARY**

|                 |  |                                |  |                 |  |
|-----------------|--|--------------------------------|--|-----------------|--|
| <b>Barangay</b> |  | <b>Municipality /<br/>City</b> |  | <b>Province</b> |  |
|-----------------|--|--------------------------------|--|-----------------|--|

|  | <b>Households</b> | <b>Schools</b> | <b>Child<br/>Development<br/>Centers</b> | <b>Other Public<br/>Institutional<br/>Facilities</b> | <b>Water<br/>Service<br/>Providers</b> |
|--|-------------------|----------------|--|--|--|
| <b>Total Number of<br/>in the Barangay</b>         |                   |                |  |  |  |
| <b>Number visited<br/>by Verification<br/>Team</b> |                   |                |  |  |  |

| <b>G3 or Sustainable Sanitation Status Certification Questions</b>  | <b>Yes</b> | <b>No</b> |
|---|------------|-----------|
| <b>Part I - Households</b>  |            |           |
| A. There are NO VISIBLE SIGNS OF OPEN DEFECATION in the Barangay <i>(Note: please check OD sites)</i>   |            |           |
| B. Do all sampled households have YES responses for questions 1-3 in Part 1?  |            |           |
| C. Is there a functional MRF in the Barangay? <i>(Note: Please visit and check the MRF if operational)</i>  |            |           |
| D. Do all sampled households practice proper garbage disposal appropriate to their context? <i>(refer to questions 13-14 in Part I)</i>   |            |           |
| E. Do all sampled households, which have experienced full pits/ septic tanks, availed of safe sanitation services <sup>23</sup> ? <i>(refer to question 5 in Part I)</i>                  |            |           |
| F. Is there no solid waste in all sampled waterways/ creeks/ covered canal?   |            |           |
| <b>Part II – Public Institutional Facilities</b>  |            |           |
| G. Do all sampled schools have YES responses for Part II-A?   |            |           |
| H. Do all sampled child development centers have YES responses for Part II-B?   |            |           |
| I. Do all sampled healthcare facilities and other public institutional facilities have YES responses for Part II-C?   |            |           |
| J. Do all sampled public institutional facilities, schools and CDCs, which have experienced full pits/ septic tanks, availed of safe sanitation services?                                 |            |           |
| <b>Part III – Water Service Providers</b>   |            |           |
| K. Do all sampled water service providers have a water safety plan audited by the Local Drinking-Water Quality Monitoring Committee?  |            |           |
| <b>Part IV – Sanitation Program Governance</b>  |            |           |
| L. Is there a local ordinance that prohibits open defecation and establishes a barangay monitoring team to sustain the G1, G2, and G3 Status? <i>(Ask the barangay to provide a copy)</i> |            |           |
| M. Is there a local ordinance requiring proper disposal of animal excreta and solid waste? <i>(Ask the barangay to provide a copy)</i>  |            |           |
| N. Is there a local ordinance requiring all water service providers in the barangay to come up with a water safety plan? <i>(Ask the barangay to provide a copy)</i>                      |            |           |
| O. Is there a local ordinance on septage / sewerage management? <i>(Ask the barangay to provide a copy)</i>   |            |           |
| P. Is there a monitoring report submitted by the barangay?  |            |           |

<sup>23</sup>Safe sanitation services refer to SDG definition where collected excreta from sewer lines receive secondary treatment; or where excreta collected from septic tanks or other improved toilet facility are either disposed in situ (on-site) or transported and treated off-site.

3/1/20  
✓



**PhATSS Form C**

**PHATSS CERTIFICATION REPORT**

Date: \_\_\_\_\_

(Name) \_\_\_\_\_

Councilor on Health

Municipality/City of \_\_\_\_\_

Province of \_\_\_\_\_

Dear Sir/Madam:

As part of the commitment of our **municipality / province of**

\_\_\_\_\_, we are glad to inform you that all our barangays in  
the **municipality/city of** \_\_\_\_\_ have been verified and certified (*indicate*  
PhATSS *service level status: G1/G2/G3*), following the Department of Health's PhATSS .

Our records show that the official Verification and Certification Team have followed the recommended procedure in verifying and certifying all the barangays, and each verification visit included a representative from *Provincial Health Office, Provincial DOH Office, or the DOH Center for Health Development (for highly urbanized cities)*.

Enclosed is the compilation of the verification and certification forms of all barangays and the latest PhATSS Implementation Monitoring Report Form (Annex 3).

Thank you very much.

Respectfully yours,

\_\_\_\_\_  
(Signature over Printed Name)  
Provincial/ Municipal / City Health Officer  
(Insert name of province/municipality/city)

**PhATSS Form D: Barangay Action Plan**

| DATE                            | ACTIVITY                         | PERSON IN CHARGE   | PERSONS INVOLVED       | BUDGET            | SOURCE OF FUNDS |
|---------------------------------|----------------------------------|--|------------------------|-------------------|-----------------|
| <i>Example:</i><br>January 2019 | <i>House-to-house monitoring</i> | <i>Barangay Sanitation Aides,<br/>Barangay Nutrition Scholars,<br/>Barangay Health Workers</i> | <i>BSAs, BNS, BHWs</i> | <i>PHP 50,000</i> | GAD Fund        |
|                                 |                                  |  |                        |                   |                 |
|                                 |                                  |  |                        |                   |                 |
|                                 |                                  |  |                        |                   |                 |
|                                 |                                  |  |                        |                   |                 |
|                                 |                                  |  |                        |                   |                 |

Prepared by:

(SIGNATURE OVER PRINTED NAME)

Designation:

Approved by:

(SIGNATURE OVER PRINTED NAME)

Barangay Captain

