COMMENTS ON THE PRESIDENT'S FOURTH REPORT TO THE JOINT CONGRESSIONAL OVERSIGHT COMMITTEE (JCOC)

Office of Senator Francis N. Pangilinan

21 April 2020

We acknowledge the incorporation of some of our proposals, as included in the Senate Comments on the President's Third Report to the JCOC. In particular, we welcome the changes made in the manner of reporting the status of Social Amelioration Programs (SAPs).

We reiterate our comments on the Third Report, which include the following, among others:

- → TRANSPARENT REPORTING. In aid of effective monitoring and transparency, other programs and projects must be reported using our recommended six-column summary model, to include: 1) program; 2) implementing agency; 3) actual number of beneficiaries served; 4) target number of beneficiaries; 5) actual amount released; and 6) total budget (as adopted in Table 1: Summary of Implementation of SAPs, page 2)
- → CASH POSITION OF GOVERNMENT. We regret that the Fourth Report still does not inform Congress of the current cash position of government. We would like to see the detailed budget of expenditures and sources of financing (BESF) tables for the COVID-19 Response in the President's next report. The public needs to be reassured that we have enough resources to fund our fight against the pandemic and that these funds are being used for their intended purposes efficiently and swiftly.

We will monitor the commitment made by the President on page 1 of the Fourth Report to Congress (the "Report") to continuously address the comments and observations from the Senate in his succeeding reports.

Following are our recommendations and comments on the Report:

A. Social Amelioration Programs

1. The Department of Social Welfare and Development's (DSWD)

Assistance to Individuals in Crisis (AICS) Program. According to the Report, emergency subsidies reached 4,054,360 family beneficiaries or 22.58 percent of the total 17,956,083 family beneficiaries. In a span of two-weeks (last reported accomplishment was on 06 April 2020, Second Report to Congress), only 332,527 additional beneficiaries were served, most of whom are Pantawid beneficiaries

→ On Table 1, we note that there is a discrepancy on the total number of beneficiaries served as of 18 April 2020. The indicated total is 4,054,360 families; however, the breakdown indicated --3,721,833 4Ps + 617,141 non-Pantawid -- add up to 4,338,974 family beneficiaries served. Please clarify.

P73.84 billion or 91.03 percent of the total budget for 13,556,093 non-*Pantawid* beneficiaries, which make up 75.5 percent of the total number of beneficiaries, have been downloaded to Local Government Units (LGUs).

In our Comments to the Third Report, we noted the tedious validation process of the lists of additional beneficiaries submitted by LGUs to DSWD. According to the Fourth Report, the DSWD has forged a total of 1,454 Memoranda of Agreement on SAPs with cities and municipalities¹ as of 18 April. Per our estimates, said number of MOAs already covers 95 percent of the total 1,515 cities and municipalities nationwide.²

Considering these, we expect that:

- → The MOAs with LGUs will shorten/fast-track the DSWD's validation process
- → Funds will have reached majority of the beneficiaries in the coming days (we note the schedule of payouts for non-*Pantawid* beneficiaries to be from 08 to 24 April 2020, as indicated in footnote number 3)
- → Any other causes of delay are to be included in the President's next report to Congress, with the corresponding actions taken by government to address said delays
- 2. <u>Fast-Tracking the Delivery of Assistance</u>. We commend the DSWD and the Department of Information and Communications Technology (DICT) for coming up with the *ReliefAgad* application, as well as the Philippine Institute for Development Studies' (PIDS) for providing Community-Based Monitoring System data to LGUs. These would help fast-track the delivery of the cash subsidies.
 - → We would like to see updates on these in the President's succeeding reports.
- 3. <u>Publication of Lists of Beneficiaries</u>. On 18 April, the Department of the Interior and Local Government (DILG) has directed *Punong Barangays* to post the list of target beneficiaries in conspicuous public places within their communities to ensure transparency in the identification of beneficiaries of

Excluding those in the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM), which facilitated the transfer of funds from the DSWD to the LGUs

This figure excludes the cities and municipalities in the BARMM

the DSWD's AICS.³ We welcome this development as this was also one of our recommendations.

- → We would like to be updated on the compliance of barangays in the President's succeeding reports.
- → We also reiterate our recommendation to remove the ID requirement to reach and serve 5 to 7.5 million Filipinos who do not have official birth certificates and who are likely unable to president "valid" IDs. The publication of the names of beneficiaries should be enough to address transparency concerns on said recommendation.
- 4. <u>Department of Agriculture's Financial Subsidy for Rice Farmers</u>. Of the 591,246 total farmer beneficiaries, cash subsidies have reached only 52,043 beneficiaries or 8.80 percent. Fund utilization is low at P645 million or 21.50 percent of the total P3 billion budget.
 - → May we be clarified on the slow implementation? What are the impediments in releasing the assistance to farmer beneficiaries?

B. Protection of Persons Deprived of Liberty (PDLs)

According to the Bureau of Corrections (BuCor), 19 prisoners and one staff member at the Correctional Institution for Women in Mandaluyong City have contracted the virus. The Bureau of Jail Management and Penology (BJMP) has also reported that nine (9) detainees and nine (9) personnel at the Quezon City Jail also tested positive for the virus.⁴

→ Given the overcrowded situation in our prisons, the virus can spread rapidly. Page 4 of the Report indicated that the BJMP has been strictly monitoring and enforcing preventive measures against COVID-19; however, the Department of Justice (DOJ) must put in place plans and protocols in the event of an outbreak in jails.

DILG, DILG to Punong Barangays: Post list of SAP beneficiaries in barangay hall for transparency, Published on 18 April 2020, Available at https://www.dilg.gov.ph/news/DILG-to-Punong-Barangays-Post-list-of-SAP-beneficiaries-in-barangay-hall-for-transparency/NC-2020-1100, Accessed on 21 April 2020.

GMA News Online, DOJ in talks for mass COVID-19 testing at Mandaluyong women's prison, Published on 21 April 2020, Available at https://www.gmanetwork.com/news/news/news/nation/734949/doj-in-talks-for-mass-covid-19-testing-at-mandaluyong-women-s-prison/story/, Accessed on 21 April 2020.

C. Assistance to Other Sectors and Partnership with LGUs

On page 7 of the Report, as a result of discussions among concerned government agencies and representatives of crematoriums and funeral parlors in the NCR, a fixed cremation rate of P25,000.00 will be charged from indigent Persons Under Investigation (PUI)/COVID-19 fatalities.

Said fee will be covered by the DSWD Memorandum Circular No. 04, Series of 2020 dated March 30, 2020, which provides a maximum amount of Php25,000.00 burial assistance per deceased for indigent COVID-19 confirmed cases and PUIs.⁵

We note that on 27 March 2020, the DILG issued Memorandum Circular No. 2020-063, entitled the *Interim Guidelines on the Management of Human Resources for Patient Under Investigation (PUI) and Confirmed Coronavirus Disease 2019 (COVID-19) Cases* (the "<u>Subject Guidelines</u>") to "provide a standard process on properly managing human remains of [PUIs] and confirmed COVID-19 Cases" because of the "potentially infectious" nature of such remains. Under the Subject Guidelines, LGUs may release issuances or ordinances to <u>put a price cap or impose a price freeze on funeral services</u> located within their jurisdiction8

Under the Subject Guidelines, the cost of the burial or cremation "shall be borne by the nearest kin." Cost shall be borne by the city or municipal government if: (a) the kin is not financially capable of defraying these costs; (b) the deceased had no kin.¹⁰

The Subject Guidelines, however, <u>does not include breaking the price cap or price freeze in its list of prohibited acts</u> under Section 5.10. It also appears that none of the penalties under the *Bayanihan* Act are applicable to breaking price caps or price freezes in relation to burial/cremation services. Section 6(c) of the *Bayanihan* Act appears to only cover goods and articles of prime necessity – not burial/cremation services.

Further, the Subject Guidelines only empowers and does <u>not compel LGUs to impose price caps/price freezes</u>.¹¹

→ The DILG may want to explore requiring LGUs to impose a price freeze or a price cap on burial and cremation services. Should the DILG make price freezes/price caps mandatory, LGUs who do not do so may be penalized under Section 6(a) of the *Bayanihan* Act.

⁵ MC 04-2020, part VII(A).

⁶ Subject Guidelines, sec. 2.1.

Subject Guidelines, sec. 4.5.

⁸ Subject Guidelines, sec. 4.8.

⁹ Subject Guidelines, sec. 4.8.

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See Subject Guidelines, sec. 4.8.

- D. Referral Hospitals, COVID-19 Bed Capacity, Isolation Facilities, Health Personnel and Equipment
 - → May we clarify if the total number of referral hospitals (693), dedicated COVID-19 bed capacity (8,714), and mechanical ventilators (1,697) already covers the entire country, or just Luzon?
 - → Since government has started conducting mass testing, there is an expected surge in COVID-19 related cases. To understand whether the converted facilities and equipment are enough, can the Department of Health (DOH) provide estimates on the "adequate" number of health care workers (doctors, nurses, other hospital staff), facilities, and medical equipment to address the surge?
 - → May we know the status of current and additional isolation facilities, including the number of patients these can cater to, and (target) date of becoming operational, vis-à-vis DOH estimates on the "adequate" number of isolation facilities?

E. Update on Test Kits, Testing Centers, and Expanded Testing

We note that with only 42,215 individuals and 48,171 samples tested as of 16 April 2020, we are among the lowest in Asia in terms of testing capacity per one million people.

- Does government have a national or local testing capacity target, expressed in the number of tests over population? How close are we to this target if any? We note that this information is critical for officials at the national and local levels of government as they decide whether or not to impose or lift community quarantines.
- → How many individuals were tested since the start of targeted expanded testing on 14 April 2020?
- → Does the DOH have a list of private groups or individuals who are conducting rapid tests on their own? What are the results from these tests?
- → When will the 918,000 SARS-Cov-2RT-PCR test kits arrive? How will these be distributed? Why are we procuring these tests only now? How many RT-PCR tests do we actually have on hand?

F. Provision of Healthcare Resources Supplies and Equipment

We note that the Report does not include updates on the 1 million Personal Protective Equipment (PPEs) for health workers procured by the government from China.

The PH government entered into a **government-to-government** deal with the People's Republic of China in March 2020 to procure **one million sets of PPEs worth P1.8 billion**. ¹² Each PPE set, which costs **P1,750.00**, contains coveralls, N95 masks, gloves, head cover, shoe cover, goggles, surgical mask, and surgical gown.

Of the 1 million sets of PPEs procured in March, only 97,000 sets arrived from China as of 14 April.

- The first tranche consisting of 15,000 sets of PPEs arrived from China on 31 March 2020. After undergoing inspection and quality assurance, these were distributed, through the Office of Civil Defense (OCD), to the following government hospitals designated for the treatment of COVID-19 patients:
 - Philippine General Hospital 2,000 sets
 - Dr. Jose Rodriguez Memorial Hospital 2,590 sets
 - Lung Center of the Philippines 2,800 sets
 - East Avenue Medical Center 770 sets
 - San Lazaro Hospital 2,780 sets
 - Armed Forces of the Philippines Medical Center 1,100 sets¹³
- National Task Force (NTF) COVID-19 chief implementer Secretary Carlito Galvez Jr. announced on 02 April 2020 that the remaining 985,000 sets of PPEs are expected to be delivered to the Philippines from 06 to 24 April.¹⁴
- 3. Earlier this month, the Philippine Air Force said it has made at least five (5) trips to Xiamen starting 6 April to pick up the supplies. Only **70,000 sets** or less than 10 percent of the total supplies have been transported to Manila since then.¹⁵

(6 April trip, 12k PPEs; distributed on 7 April) The Research Institute for Tropical Medicine, Manila Doctor's Hospital, Marikina Valley Medical Center, Veterans Memorial Medical Center, Quezon City General Hospital, MCU Hospital, Quezon Institute, Jose B. Lingad Memorial Regional Hospital, and Ninoy Aguino Stadium

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DOH, https://www.doh.gov.ph/doh-press-release/FIRST-BATCH-OF-1M-PROCURED-PERSONAL%20-PROTECTIVE-EQUIPMENT-SETS-ARRIVES-IN-THE-COUNTRY, Accessed on 20 April 2020.

The figures reported by the DOH do not add up to 15,000 sets of PPEs Source: DOH, https://www.doh.gov.ph/doh-press-release/doh-reassures-covid-19-frontliners-PPEs-are-on-the-way, Accessed on 20 April 2020.

Rappler, https://www.rappler.com/nation/256819-galvez-government-procurement-ppe-china-coronavirus, Accessed on 20 April 2020.

The OCD reported in its website that two (2) of the five (5) trips made (6 and 7 April 2020) each brought home 12,000 sets of PPEs, which were distributed to:

- 4. As of 14 April 2020, an additional **12,000 sets** of PPEs arrived at NAIA on board a special commercial flight.
- 5. The PH government said it will send its navy ships to China this week (25 April) to pick up more or less 250,000 <u>cargoes</u>. ¹⁶
 - → There has to be a proper accounting of 1) PPEs procured from China; 2) PPEs procured by the OCD and other agencies; and 3) donations received from the private sector and other entities. This and the breakdown of distribution to various hospitals should be made public and included in the President's succeeding Reports to Congress.
 - → May we be clarified if the cargoes arriving on 25 April will contain all remaining PPEs from China?
 - → When is the target date of distribution of the remaining PPEs from China? Can we expect these to be distributed by next week?
 - → According to previous reports from the OCD on the distribution of the PPEs that arrived from China, they were distributed to hospitals identified by the DOH a day after their arrival. Considering the volume of PPEs expected to arrive this week, are there systems in place to ensure that there will be no bottlenecks in the distribution? The OCD may consider tapping the Regional Offices and local DRRMO in the distribution process.

No information on the remaining 3 trips/46,000 PPEs.

Source: OCD, http://www.ocd.gov.ph/news/607-ocd-distributes-additional-doh-procured-ppes-to-hospitals.html, Accessed on 20 April 2020.

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⁽⁷ April trip, 12k PPEs; distributed on 8 and 9 April) Tondo Medical Center, National Children's Hospital, Rizal Medical Center, Jose R. Reyes Memorial Medical Center, Las Pinas General Hospital and Satellite Trauma Center, National Kidney and Transplant Institute, San Lorenzo Ruiz Women's Hospital, Ilocos Regional Training Medical Center, National Center for Mental Health, Quirino Memorial Medical Center, Batangas Medical Center, Baguio General Hospital and Medical Center

CNN PH, https://www.cnnphilippines.com/news/2020/4/15/philippine-navy-ships-ppe-china.html, Accessed on 20 April 2020.