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SENATE
S. No. 1573

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Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

The Constitution, Article 11, Section 15, provides that "the State shall protect and promote the right to health of the people and instill health consciousness among them."

A "public health emergency" is defined as an occurrence or imminent threat of an illness or health condition, caused by bio terrorism, epidemic or pandemic disease, or a novel and highly fatal infectious agent or biological toxin, that poses a substantial risk of a significant number of human fatalities or incidents or permanent or long-term disability (WHO/DCD, 2001).

History has seen the occurrence of plagues, calamities, and outbreaks which have claimed huge parts of the population. For instance, the Black Death (also known as the Black Plague or Bubonic Plague) was one of the deadliest pandemics in human history, widely thought to have been caused by a bacterium named *Yersinia pestis*, but recently attributed by some to other diseases. The total number of deaths worldwide was estimated at 75 million people, approximately 25–50 million of which occurred in Europe.

In June 2013, health experts started emergency international meetings to devise ways of combating a mysterious virus that has been described as the single biggest worldwide public health threat. Officials and doctors gathered in Cairo to examine ways of tackling the Middle East Respiratory Syndrome (MERS), feared to be a new pandemic deadlier than SARS. SARS refers to Severe acute respiratory syndrome, a viral respiratory disease of zoonotic origin caused by the SARS coronavirus (SARS-CoV). Between November 2002 and July 2003, an outbreak of SARS in Southern China caused an eventual 8,273 cases and 775 deaths reported in multiple countries.

The MERS virus has displayed an alarmingly high fatality rate. It has caused death in about 60 percent of patients so far, with 75 percent of cases in men and most in people with serious health conditions. There are currently no known treatments. Margaret Chan, WHO director-general, previously called MERS a “threat to the entire world”.

There is an old adage that states that “an ounce of prevention is worth a pound of cure.” This bill is built upon such wisdom by seeking to strengthen national response and preparedness for public health emergencies, such as those which result from natural disasters and severe weather, recent outbreaks and pandemics, bioterrorism, mass casualties, chemical emergencies, and radiation emergencies.

Preparedness refers to activities and measures taken in advance to ensure effective response to the impact of hazards, including the issuance of timely and effective early warnings and the temporary evacuation of people and property from threatened locations. It also refers to pre-disaster activities, including an overall strategy, policies, and institutional and management structures, that are geared to helping at-risk communities safeguard their lives and assets by being alert to hazards and taking appropriate action in the face of an imminent threat or the actual onset of a disaster.


This bill gives the Department of Health the mandate to undertake measures, such as evaluation, planning, organizing, and training, to improve national preparedness for public health emergencies.

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1 AN ACT
2 STRENGTHENING NATIONAL PREPAREDNESS AND RESPONSE TO PUBLIC HEALTH
3 EMERGENCIES

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

4 SECTION 1. *Short Title.* - This Act shall be known as the "Pandemic and All-Hazards
5 Preparedness Act."

6 SECTION 2. *Creation of a National Health Strategy for Public Health Emergencies.* -
7 The Secretary of Health shall spearhead the creation of a national health strategy to address
8 public health emergencies. This strategy shall provide for integrated policy coordination and
9 strategic direction with respect to all matters related to national public health and medical
10 preparedness and execution and deployment of national response before, during, and following
11 public health emergencies.

12 SECTION 3. *Components of a National Health Strategy.* - The National Health Strategy
13 shall include:

14 (A) Provisions for increasing the preparedness, response capabilities, and surge
15 capacity of ambulatory care facilities, dental health facilities, and critical care service systems;

16 (B) Plans for optimizing a coordinated and flexible approach to the medical surge
17 capacity of hospitals, other health care facilities, critical care, and trauma care and emergency
18 medical systems;

19 (C) Provisions taking into account the unique needs of individuals with disabilities in
20 a public health emergency;

1 (D) Strategic initiatives to advance countermeasures to diagnose, mitigate, prevent, or
2 treat harm from any biological agent or toxin or any chemical, radiological, or nuclear agent or
3 agents, whether naturally occurring, unintentional, or deliberate;

4 (e) Conduct OF periodic evaluations of national and local preparedness and response
5 capabilities which shall include drills and exercises to ensure medical surge capacity for events
6 without notice.

7 SECTION 4. *Creation of Task Force on Public Emergencies.* – (A) A task force under
8 the control of the Secretary of Health shall be established in order to conduct research necessary
9 for the creation of the Strategy. The Task Force shall be composed of representatives from:

10 (1) The Department of Health;

11 (2) The National Disaster Risk Reduction and Management Council (NDRRMC);

12 (3) The Department of Interior and Local Government (DILG);

13 (4) The National Security Adviser; and

14 (5) The Philippine National Red Cross (PNRC).

15 (B) The Task Force shall:

16 (1) Monitor emerging issues and concerns as they relate to medical and public health
17 preparedness and response for at-risk individuals in the event of a public health
18 emergency;

19 (2) Identify and minimize gaps, duplication and other inefficiencies in medical and
20 public health preparedness and response activities and the actions necessary to
21 overcome these obstacles;

22 (3) Disseminate and update novel and best practices of outreach to and care of at-risk
23 individuals before, during, and following public health emergencies in as timely a
24 manner as is practicable, including from the time a public health threat is
25 identified; and

26 (4) Ensure that public health and medical information distributed by the government
27 during a public health emergency is delivered in a manner that takes into account

1 the range of communication needs of the intended recipients, including at-risk
2 individuals.

3 SECTION 5. *Creation of Medical Reserve Corps.* -- The Secretary of Health shall
4 establish a medical reserve corps composed of volunteer health professionals. The Medical
5 Reserve Corps shall be called into duty if needed during public health emergencies.

6 SECTION 6. *Authorization of Appropriations.* - To carry out the provisions of this Act,
7 there are authorized to be appropriated such sums as may be necessary for each fiscal year.

8 SECTION 7. *Separability Clause.* - If any provision or part thereof is held invalid or
9 unconstitutional, the remainder of the law or the provision not otherwise affected shall remain
10 valid and subsisting.

11 SECTION 8. *Repealing Clause.* - Any law, presidential decree or issuance, executive
12 order, letter of instruction, administrative order, rule, or regulation contrary to or inconsistent
13 with the provisions of this Act is hereby repealed, modified, or amended accordingly.

14 SECTION 9. *Effectivity Clause.* - This Act shall take effect fifteen (15) days after its
15 publication in at least two (2) newspapers of general circulation.

Approved,