

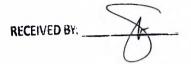
NINETEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES

First Regular Session

22 AUG -4 P6:24

SENATE

s. B. No. 1042



Introduced by SENATOR JOEL VILLANUEVA

AN ACT MANDATING THE STOCKPILING OF PERSONAL PROTECTIVE EQUIPMENT, AND APPROPRIATING FUNDS THEREFOR

EXPLANATORY NOTE

On March 7, 2020, the first local transmission of the Coronavirus disease (COVID-19) was confirmed by the Department of Health, triggering the declaration of a state of public health emergency on March 8, 2020, through Proclamation No. 922, and the imposition of the "community quarantine" on March 12, 2020, to prevent the further spread of the virus. On March 16, 2020, the "enhanced community quarantine" was implemented in the entire Luzon area, wherein all persons are required to remain at home, all modes of transportation had been suspended, provision of essential goods and services are regulated, and uniformed personnel strictly enforced quarantine procedures.

The immediate transmission and spreading of the COVID-19 across countries led to several concerns, including supply chain bottlenecks and the overwhelming of the global production capacity of Personal Protective Equipment (PPEs), with production backlogs of up to 4-6 months in fulfilling orders. In the Philippines, many health workers had to buy their own gloves and masks, which supplies are likewise in critical supply levels. Modified PPEs were used, such as non-porous knee-length gown made from plastic raincoat, ordinary plastic bag as shoe cover, face shield made out of hard plastic with

¹ ADB Briefs, Global Shortage of Personal Protective Equipment amid COVID-19: Supply Chains, Bottlenecks, and Policy Implications, April 2020, accessible at https://www.adb.org/sites/default/files/publication/579121/ppe-covid-19-supply-chains-bottlenecks-policy.pdf (date last accessed: August 3, 2022).

garter and foam for added comfort, and garden gloves as final gloves, among other initiatives to improvise PPEs.²

While Filipinos are known to be resilient, proactive changes in our existing policies should be undertaken to ensure the welfare and protection of our citizens, particularly our health workers who are at the forefront of the COVID-19 pandemic. To better equip and prepare our healthcare facilities for the present and future similar events, the necessity for the PPE Stockpiling Act is undeniable.

Under this bill, the DOH is mandated to establish a stockpile that would be adequate for healthcare workers and workers in critical industries for a period of up to ninety (90) days. All PPEs in the stockpile shall be new, unexpired, and not previously worn or used, and the DOH is required to conduct inventory management, and shall take into account certain guidelines in the procurement, management, and distribution of PPEs, to ensure that PPE stock levels and quality are maintained.

Thus, the immediate passage of this bill is earnestly sought.

SENATOR JOEL VILLANUEVA

² ANC, How COVID-19 frontliners are improvising with personal protection equipment amid lack of supply, accessible at https://news.abs-cbn.com/ancx/culture/spotlight/03/17/20/how-covid-19-frontliners-are-improvising-with-personal-protection-equipment-amid-lack-of-supplies (last accessed August 3, 2022).

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Introduced by SENATOR JOEL VILLANUEVA

AN ACT MANDATING THE STOCKPILING OF PERSONAL PROTECTIVE EQUIPMENT, AND APPROPRIATING FUNDS THEREFOR

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

SECTION 1. Short Title. - This Act shall be known as the "PPE"

Stockpiling Act."

SEC. 2. Declaration of Policy. – It is hereby declared the policy of the State to adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other

social services available to all the people at affordable cost. Towards this end, the State shall ensure the availability of, and access to, personal protective equipment (PPE) and other critical and strategic materials in times of public health emergencies and other emergencies by establishing and mandating a stockpiling system that would ensure adequate and immediate supply of these

materials in times of need.

SEC. 3. *Definition of Terms.* – As used in this Act, the following terms shall mean:

a) Workers in Critical Industries refers to workers in critical establishments, such as, but not limited to, the following, who are exposed to greater danger, contagion, virus, disease, or peril from natural calamities, such as volcanic activity/eruption:

 Hospitals, sanitaria, rural health units, main health centers, health infirmaries, barangay health stations, clinics, laboratories, and other health-related establishments;

1 (2) Morgues and mortuaries: Banks and other financial institutions providing money 2 (3) 3 transfer services: Groceries, supermarket, and convenience stores; (4) 4 5 (5) Public markets; 6 (6) Pharmacies or drugstores, or similar establishments 7 authorized to dispense medicines; 8 (7) Restaurants: Logistics and warehouse establishments: 9 (8) Food and medical manufacturing establishments; 10 (9)11 (10) Telecommunications companies; (11) Mass media companies, with respect to their reporters and 12 similar personnel in-charge of delivering news; 13 (12) Electric generation, transmission and distribution companies; 14 (13) Gasoline stations; 15 (14) Oil companies, with respect to their tanker drivers; 16 (15) Water distribution companies, including water delivery and 17 refilling stations; 18 (16) Companies engaged in sanitation, such as garbage 19 20 collectors: (17) Companies involved in the Philippine capital market, such as 21 the Philippine Stock Exchange and Philippine Dealing and 22 Exchange Corporation, among others; 23 (18) Hotels and similar establishments, upon such terms and 24 conditions as the appropriate agencies overseeing the 25 calamity, disaster or public health emergency prescribe; 26 (19) Mass public transportation companies; 27 (20) Civil aviation and maritime transport related companies; and 28 (21) Such other establishments which may be considered critical 29 in light of the nature of the state of calamity or emergency or 30 public health concern; 31 32 Health care worker means any worker who provides direct patient b) 33 care and services directly supporting patient care, including, but not 34 limited, to physicians, pharmacists, clinicians, nurses, aides, 35 technicians, janitorial and housekeeping staff, food services 36 workers, and nonmanagerial administrative staff, regardless of 37 38 status of employment; and 39 Personal protective equipment or PPE means protective 40 c) equipment for eyes, face, head, and extremities, protective 41 clothing, respiratory devices, and protective shields and barriers, 42 including, but not limited to, N95 and other filtering facepiece 43 respirators, elastomeric air-purifying respirators with appropriate 44 particulate filters or cartridges, powered air purifying respirators, 45 disinfecting and sterilizing devices and supplies, medical gowns 46 and apparel, face masks, surgical masks, face shields, gloves, and 47 shoe coverings. 48

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 SEC. 4. *PPE Stockpile.* – The Department of Health (DOH) shall establish and maintain a PPE stockpile which would be adequate for all workers in critical industries and health care workers for a period of ninety (90) days, and upon such guidelines as may be issued by the DOH, in coordination with proper government agencies.

As far as practicable, the guidelines for the procurement, management and distribution of PPEs shall take into account all of the following:

- a) The various types of PPE that may be required during a pandemic or other health emergency;
- b) The shelf life of each type of PPE and how to restock a portion of each type of PPE to ensure the procurements consist of unexpired PPE;
- c) The amount of each type of PPE that would be required for all health care workers and essential workers in the state during a 90-day pandemic or other health emergency;
- d) Lessons learned from previous pandemics and state emergencies, including but not limited to, supply procurement, management, and distribution:
- e) Geographical distribution of PPE storage;
- f) Guidance on how to establish policies and standards for PPE surge capacity to ensure that workers have access to an adequate supply of PPE during a pandemic or other health emergency;
- g) How distribution from any procurement shall be prioritized in the event that there is insufficient PPE to meet the needs of providers or employers of essential workers, including whether the worker or hospital concerned is:
 - 1) In a location with a high share of low-income residents, or is in an underserved area; or
 - 2) In a location with a high infection rate or high hospitalization rate related to the declared emergency.

Private healthcare facilities shall also be encouraged to establish and maintain a PPE stockpile to ensure adequate and accessible supply of PPEs in times of national emergency or other public health emergency.

SEC. 5. New and Unexpired PPEs; Inventory Level. – In all cases, all PPE in the stockpile shall be new, unexpired and not previously worn or used. DOH shall rotate through their stockpiles routinely to ensure that PPEs do not expire and are routinely replaced with new PPE.

In the event that the inventory of a type of PPE dips below the mandated level of supplies as a result of the distribution of that type of PPE to health care workers and workers in critical industries during a state of emergency, the SOH shall, as far as practicable, replenish its inventory to the mandated level within 30 days. In case of supply crunch or similar circumstances, the DOH shall be authorized to enter into negotiated and/or emergency procurement in accordance with law.

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SEC. 6. *Funding.* – The amount necessary for the initial implementation of this Act shall be sourced from the current budget of the DOH. Thereafter, the funds necessary for the continuous implementation of this Act in the ensuing years shall be included in the General Appropriations Act.

SEC. 7. *Implementing Rules and Regulations.* – Within sixty (60) days from the effectivity of this Act, the DOH, in consultation with relevant government agencies and other stakeholders, shall promulgate the rules and regulations to effectively implement the provisions of this Act.

SEC. 8. Separability Clause. – If for any reason, any provision of this Act is declared unconstitutional or invalid, the other parts or provisions hereof which are not affected thereby shall continue to be in full force and effect.

SEC. 9. Effectivity Clause. – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in at least two (2) newspapers of general circulation.

Approved,