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NINETEENTH CONGRESS OF THE	)
REPUBLIC OF THE PHILIPPINES	)
First Regular Session	)

23 MAR -6 P5:51

SENATE

S. No. 1961

RECEIVED BY.

# Introduced by SENATOR RAMON BONG REVILLA, JR.

## **AN ACT**

INSTITUTIONALIZING AN EMERGENCY MEDICAL SERVICES SYSTEM (EMSS), CREATING FOR THE PURPOSE THE NATIONAL EMSS COUNCIL, AND APPROPRIATING FUNDS THEREFOR

#### **EXPLANATORY NOTE**

Article XIII, Section 11 of the 1987 Constitution mandates that "the State shall 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."

The World Health Organization (WHO) emphasizes that "Emergency Medical Services (EMS) systems form an integral part of any public health care system." EMS are vital for saving lives and reducing disability in emergencies such as accidents, heart attacks, or disasters. It acts as the first point of contact with the health system. Supporting its standard development and ensuring accessibility is a pillar to public health.

In the country, the current EMS system is seen as inefficient and fragmented with the absence of clear standards and lack of enforcement. Even with the existing directives, there remain challenges that hinder achieving a fully functional EMS system.

At present, the Department of Interior and Local Government operates the 911 Emergency Service Operation Center, which serves as a quick response mechanism primarily for public order concerns including fire alarms, among others. And at the forefront of developing EMS standards is the UP-PGH Department of Emergency

Medical Services, which focuses on training "competent, compassionate and ethical emergency medicine professionals responsive to the EMS needs." A functional EMS is a well-coordinated service responsive to the emergency from the nearest and most appropriate medical facilities.

In response, this measure seeks to institutionalize the emergency medical services system by professionalizing the sector and strengthening EMS delivery.

This measure proposes the establishment of the National Emergency Medical Services System Council which shall formulate policies and develop standards for the consistent provision of EMS, including vehicles, equipment and support services. Further, the bill mandates the adoption and use of 911 as the National Emergency Hotline Number.

In view of advancing EMS delivery mechanisms in the country, the passage of this measure is earnestly sought.

RAMON BONG REVILLA, JR.

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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 "Emergency Medical 1 Services System (EMSS) Act of 2023'. 2
- Sec. 2. Declaration of Policy. It is hereby declared the policy of the State to 3 protect and promote the right to health of the people. Pursuant to this policy, the 4 government shall institutionalize a standard, comprehensive, accessible, and 5 integrated system of Emergency Medical Services System and provide an environment 6 that will maximize the capability and potential of Emergency Medical Services 7 Personnel. 8
- Sec. 3. *Objectives.* This Act shall have the following objectives: 9
- a. To develop and institutionalize an Emergency Medical Services System at the 10 national and local levels; 11
- b. To establish a national Emergency Medical Services System Council; 12
- c. To encourage and promote the active participation of the private sector in the 13 provision of Emergency Medical Services (EMS); 14
- d. To institute the national standard for the provision of EMS; 15
- e. To provide a program of standardization for the training of EMS institutions and 16 personnel; 17

- f. To establish standards for design, accreditation, and regulation of emergency medical vehicles;
- g. To mandate the adoption and use of 911 as the National Emergency Hotline
   Number;
  - h. To establish and provide support services to the EMSS; and

- i. To promote public safety and make EMS accessible to the people especially
   those in need of emergency medical assistance.
  - Sec. 4. *Definition of Terms.* For purposes of this Act, the following terms shall be defined:
    - a. "Accredited Training Institutions" refer to any accredited government or nongovernment organization, authorized by the government to conduct EMS trainings and programs, such as the Philippine Red Cross, which meet the standards established by the Emergency Medical Services System Council (EMSSC), hereinafter referred to as the Council, created under Section 5 of this Act, in coordination with the Department of Health (DOH);
  - b. "Advanced Life Support" refers to a set of life-saving protocols and skills that extend and further, open airway, adequate ventilation and support circulation. It may include interventions used to treat and stabilize adult victims of life-threatening cardio-respiratory emergencies and to resuscitate victims of cardiac arrest. The interventions may include Cardio Pulmonary Resuscitation, basic and advanced airway management, tracheal intubation, medications, electrical therapy and intravenous (IV) access. It may also refer to a protocol of managing trauma victims that are designed to maximize management in the first hour after trauma for optimal long-term outcome. These interventions may include Basic Life Support, immobilization, venous cannula insertion, surgical airway, chest decompression, and administration of medications, among others;
    - c. "Ambulance" refers to an emergency medical vehicle designed and equipped for transporting sick or injured patients to, from, and between places of treatment by land, water or air, affording safety and comfort and preventing further illness or injury;

d. "Basic Life Support (BLS)" refers to actions and interventions used to resuscitate and stabilize victims of cardiac and respiratory arrests which include cardiopulmonary resuscitation (CPR), relief of foreign-body airway obstruction, control of bleeding, immobilization, dressing of wounds, administration of oxygen, taking vital signs including level of blood sugar, assisting a normal delivery, in pediatric, adults and elderly patients including pregnant women, among others;

- e. "Emergency Medical Dispatch" refers to the immediate identification and prioritization of medical emergency situations, the timely dispatch of appropriate resources, providing essential pre-arrival first-aid instructions and full endorsement to the receiving hospital. Dispatch encompasses all aspects of communication including request processing, coordination and support, documentation and monitoring;
- f. "Emergency Medical Services (EMS)" refers to a network of pre-hospital or pre-health care facility services coordinated to provide aid and medical assistance from the place of incident to the nearest appropriate hospital or health care facility, delivered by an EMS personnel. It may include basic and advanced life support;
  - g. "Emergency Care" refers to the independent delivery of emergency medical services by appropriately trained and certified EMS personnel, usually in a mobile or community setting, in full accordance with the Emergency Medical Services Treatment Protocols the Council created under this Act;
  - h. "Emergency Medical Services (EMS) Personnel' refers to a person trained and certified in rendering Emergency Care by any accredited government or nongovernmental organization, authorized by the government to conduct EMS training, such as the Philippine Red Cross;
  - i. "Emergency Medical Services Standard" refers to the standardization of the EMS Procedures outlining the approved clinical practices and therapies to be observed by the EMS personnel, as established by the Council, in coordination with the DOH and the Department of Interior and Local Government (DILG) which shall include interventions for BLS and ALS;

- j. "Emergency Medical Services (EMS) System" refers to the arrangement of personnel, facilities, and equipment for the effective and coordinated delivery of EMS required in the prevention, mitigation and management of incidents which occur either as a result of a medical emergency or accident;
  - k. "Emergency Response and Care" refers to the arrival of resources at the scene and the timely initiation and provision of appropriate interventions;

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- "Emergency Transport" refers to the transportation in an adequate means of medical transportation, of a patient to the nearest appropriate hospital or health care facility with continued provision of care and appropriate interventions en route;
- m. "Inter-Agency Referral and Transport" refers to the transport of a patient with an EMS personnel, if necessary, from one referring facility or agency to another receiving facility or agency for definitive care, as may be deemed necessary, in instances where the services are not available in the referring facility.
- Sec. 5. *Creation of the National Emergency Medical Services Systems Council.* There is hereby created the "National Emergency Medical Services Systems Council
  (EMSSC)", hereinafter referred to as the "Council", which shall be composed of the
  following members:
- 1. Secretary of the Department of Health (DOH) as Chairperson;
- 2. Secretary of the Department of Interior and Local Government (DILG) as Co-Chairperson;
- Director General of the Technical Education and Skills Development Authority
   (TESDA);
- 4. Chairperson of the Commission on Higher Education (CHED);
- Secretary of the Department of Transportation (DOTr)
- 6. Secretary of the Department of Information and Communications Technology (DICT)
- 7. President of the Philippine Health Insurance Corporation (PhilHealth);
- 8. Chairperson of the Professional Regulation Commission (PRC); and
- 9. Chairperson of the Philippine Red Cross (PRC);
- Sec. 6. *Meetings of the Council.* A majority of the Council shall constitute a quorum to conduct day-to-day business. A member of the Council may appoint a duly

- authorized representative to attend and vote on behalf of the member: *Provided,* that
- 2 it shall be in writing, duly signed by the member, and filed before the scheduled
- meeting: *Provided further*, that such authority may only be valid for such meeting.
- 4 Regular meetings shall be conducted by the Board at least once a month.
- 5 Notice, in writing, must be given three (3) days before the scheduled meeting.
- 6 Members of the Council are entitled to receive commensurate and reasonable per
- 7 diems subject to pertinent accounting and auditing rules and regulations.
- 8 Sec. 7. *Powers and Functions of the Council.* The Council shall perform the
- 9 following functions:
- a. To formulate policies on the EMSS;
- b. To develop standards in the provision of EMS to include, among others, the
- skills and competencies required for EMS personnel and the mandatory
- observation of such standards by all EMS personnel and such other entities;
- c. To formulate a Code of Ethics for EMS personnel;
- d. To develop and regulate reasonable standards for EMS personnel;
- e. To develop standards and protocols for the design, construction, equipment
- and operations of ambulances;
- f. To promote trainings and programs of Basic Life Support in the curriculum of
- all public and private tertiary education institutions;
- 20 g. To ensure coordination of all concerned institutions for the effective
- implementation of this Act;
- h. To monitor the compliance of all Local Government Units (LGUs), health
- facilities, and EMS personnel of the standards and requirements set out in this
- 24 Act;
- i. To generate resources from local, national and international
- organizations/agencies, whether government or private sector;
- j. To receive and accept donations and other conveyances including funds,
- materials and services by gratuitous title: *Provided,* that not more than thirty
- 29 percent (30%) of said funds shall be used for administrative expenses;
- 30 k. To prepare an annual budget of the Council and submit the same to the
- President for inclusion in the annual General Appropriations Act;
- I. To advise the President on matters pertaining to EMS;

m. To request any department, instrumentality, office, bureau or agency of the government, including LGUs, to render such assistance as it may require to carry out, enforce, or implement the provisions of this Act;

- n. To promote the conduct of studies, researches, and international cooperation among the DOH, training institutions, and other related organizations;
- To create the mechanisms for continuous education and re-certification and reaccreditation of EMS personnel;
- p. To create a mechanism for investigation and evaluation of professional claims, in case of breach, against EMS personnel, and the possible suspension or removal of their certification and accreditation; and
- q. To promulgate other rules and regulations, as may be deemed necessary.
- Sec. 8. Accredited Training Institutions. Training programs, courses, and continuing education for EMS personnel shall only be conducted by an Accredited Training Institution, as provided in Section 4(a) of this Act: *Provided,* That EMS Personnel may only be certified by an Accredited Training Institution: *Provided, further,* That certifications issued to EMS Personnel shall be valid for two (2) years 1 which may be renewable, subject to the guidelines which may be determined by the Council: *Provided, finally,* That following the accreditation of the EMS Personnel, there should be a permit by the Medical Director, or its equivalent, of the organization, where the EMS person practices emergency care, providing her/him with the power to perform ALS procedures.
- Sec. 9. *Ambulances.* The Council shall develop the standard and requirements for the design and specifications of ambulances which shall include a system that provides geolocation and time information to a receiver through the use of satellite systems and other necessary and adequate medical equipment. The Council shall also formulate protocols for the operations of ambulances.
- Sec. 10. *Inter-agency Referral and Transport.* The Council shall establish the prescribed guidelines on inter-agency referral and transport in accordance with Section 4 (m) of this Act.
- Sec. 11. Adoption of a Nationwide Emergency Hotline Number. There shall only be one (1) nationwide emergency hotline number to enable the public to efficiently access EMS. The National Telecommunications Commission (NTC) shall

- develop a program for the adoption of the nationwide emergency hotline number. NTC
- 2 shall consult and cooperate with national and local agencies and institutions, such as
- the Philippine Red Cross; LCDs and officials responsible for emergency services and
- 4 public safety; the telecommunications industry (including cellular and other wireless
- 5 telecommunications service providers); the motor vehicle manufacturing industry;
- 6 EMS providers; emergency dispatch providers; transportation officials; public safety,
- 7 fire service, and law enforcement officials; consumer groups; hospital emergency and
- 8 trauma care personnel, including emergency physicians, trauma surgeons and nurses:
- 9 Provided, That the nationwide emergency hotline number shall operate twenty-four
- 10 (24) hours a day and three hundred sixty-five (365) days a year.

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- Sec. 12. *Compliance of Telecommunications Industry.* It shall be the duty of every telecommunications industry to provide its subscribers with free access to the national emergency hotline number, in accordance with the implementing rules and regulations to be adopted pursuant to this Act.
- Sec. 13. Harmonization with Existing 911 Emergency Operation Center. The implementation of this Act shall be harmonized with the existing 911 Emergency Operation Center created under Executive Order 56, series of 2018.
- Sec. 14. *Prohibited Acts.* In addition to acts and omissions prescribed by the Constitution and existing laws, the following shall constitute prohibited acts and are hereby declared unlawful:
  - a. Any person who makes a call to the nationwide emergency hotline number, or performs any other means of communication, with intent to annoy, abuse, threaten, or harass the call taker, dispatcher, or any person who answers the call;
  - Any person who makes a call to the nationwide emergency hotline number and, upon being answered, makes or solicits any comment, request, suggestion, proposal, or sound which is obscene, lewd, lascivious, immoral, or indecent; and
  - c. Any person who gives a false report or false information in connection with a medical emergency, knowing the report or information to be false. For purposes of this Act, a call taker shall be defined as any person who handles the calls received through the nationwide emergency hotline number and transmits it to

the dispatcher who shall plan and monitor the appropriate emergency medical response. The plan involves dispatching EMS personnel, ambulances, and other vehicles, if necessary; tracking ambulance positions; liaising with other emergency services (such as fire, law enforcement authorities); maintaining contact with all units on assignment; and monitoring progress of the response. Call takers and dispatchers operate a variety of communications equipment including radio consoles, telephones, and computer systems, among others: *Provided,* that call takers and dispatchers shall be required to undergo training, as may be determined by the DOH, in coordination with the Department of Information and Communications Technology (DICT).

- Sec. 15. *Penalties*. Any person who shall commit any violation, as provided in Section 12 of this Act, shall be punished with the following:
  - a. First Offense. The offender shall be compelled to attend a seminar on the proper use of the nationwide emergency hotline number and a fine of Five Thousand Pesos (P5,000.00).
  - b. Second Offense. The offender shall be imposed with a fine of not less than Eight Thousand Pesos (P8,000.00) but not more than Fifteen Thousand Pesos (P15,000.00) or imprisonment of one (1) day to one (1) month, or both, at the discretion of the court.
  - c. Third and Succeeding Offenses. The offender shall be imposed with a fine of not less than Twenty Thousand Pesos (P20,000.00) but not more than One Hundred Thousand Pesos (P 100,000.00) or imprisonment of not less than one (1) month to six (6) months, or both, at the discretion of the court.
- Sec. 16. *Roles of the Local Government Units*. The LGUs are hereby mandated to develop and institutionalize an EMSS within their jurisdiction, including appropriations, programs, and activities that will ensure the implementation of this Act.
- Sec. 17. *Appropriations*. The Department of Health and the Department of Interior and Local Government shall include in their annual General Appropriations Act the amount needed for the full implementation of this Act.

- Sec. 18. *Implementing Rules and Regulations (IRR)*. The DOH and DILG, in coordination with the concerned departments, agencies, and institutions shall promulgate the IRR within ninety (90) days upon the effectivity of this Act.
- Sec. 19. *Repealing Clause*. All laws, decrees, executive orders, rules and regulations or other issuances or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.
- Sec. 20. *Separability Clause*. If any portion or provision of this Act is declared invalid or unconstitutional, the remainder of this Act or any provision not affected thereby shall remain in force and effect.
- Sec. 21. *Effectivity*. This Act shall take effect fifteen (15) days after its publication either in the Official Gazette or in two (2) newspapers of general circulation in the Philippines.

Approved,