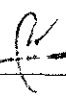


FIFTEENTH CONGRESS OF THE REPUBLIC )  
OF THE PHILIPPINES )  
First Regular Session )

SENATE  
OFFICE OF THE SECRETARY

10 JUL 19 11:03

SENATE  
S. No. 1540

RECEIVED BY 

Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

Vision loss can, especially without appropriate rehabilitation and skills training, significantly impact an individual's ability to conduct activities of daily living, as well as developmental learning, communicating, working, health, and quality of life. While it is believed that half of all blindness can be prevented, the number of Filipinos who are blind or visually impaired is expected to double by 2030. One in twenty preschoolers experience visual impairment which, if unaddressed, can affect learning ability, personality, and adjustment in school.

Vision rehabilitation helps people with vision loss to live safely and independently at home and in the community, reduce medication errors, cook and perform other daily activities reliably, and avoid accidents which may lead to injury or even the onset of additional disabilities, especially among older persons living with vision loss.

Greater efforts must be made at the national and local levels to increase awareness of vision loss and its causes, its impact, the importance of early diagnosis, treatment, and rehabilitation, and effective prevention strategies.

This Act intends to establish a full-scale integrated public health strategy to comprehensively address vision loss and its causes that, at a minimum, includes the following: communication and education, surveillance, epidemiology, and prevention research, and programs, policies, and systems change.<sup>1</sup>

  
MIRIAM DEFENSOR SANTIAGO

<sup>1</sup> This bill was originally filed in the Fourteenth Congress, Second Regular Session

10 JUL 19 AM 10:03

SENATE  
S. No. 1540

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Introduced by Senator Miriam Defensor Santiago

1 AN ACT  
2 MANDATING THE DEPARTMENT OF HEALTH TO ESTABLISH HEALTH PROGRAMS  
3 TO PREVENT VISION LOSS  
4

5 *Be it enacted by the Senate and the House of Representatives of the Philippines in*  
6 *Congress assembled:*  
7

8 SECTION 1. *Short Title.* This Act shall be known as the "Vision Preservation Act."

9 SECTION 2. *Preventive Health Measures with Respect to Vision Loss.*

10 A. Communication and Education-

11 1. In General - The Secretary of Health acting through the National Center for  
12 Disease Prevention and Control and the Degenerative Disease Office, shall expand  
13 and intensify programs to increase awareness of vision problems, including  
14 awareness of the following:

15 a. the impact of vision problems; and

16 b. the importance of early diagnosis, management, and effective prevention and  
17 rehabilitation strategies.

18 2. Activities - In carrying out this subsection, the Secretary may--

19 a. conduct public service announcements and education campaigns;

20 b. enter into partnerships with eye-health professional organizations and other  
21 vision-related organizations;

22 c. conduct community disease prevention campaigns;

23 d. conduct testing, evaluation, and model training for vision screeners based on  
24 scientific studies; and

1 e.evaluate strategies to reduce barriers to access to treatment by optometrists and  
2 ophthalmologists.

3 3. Evaluation – In carrying out this subsection, the Secretary shall -

4 a.establish appropriate measurements for public awareness of vision problems;

5 b.establish appropriate measurements to determine the effectiveness of existing  
6 campaigns to increase awareness of vision problems;

7 c.establish quantitative benchmarks for determining the effectiveness of activities  
8 carried out under this subsection; and

9 d. not later than 12 months after the date of the enactment of this section, submit a  
10 report to the Congress on the results achieved through such activities.

11 B. Surveillance, Epidemiology, and Health Services Research -

12 1. In General - The Secretary shall expand and intensify activities to establish a solid  
13 scientific base of knowledge on the prevention, control, and rehabilitation of vision  
14 problems and related disabilities.

15 2. Activities - In carrying out this subsection, the Secretary may--

16 a. create a national ongoing surveillance system;

17 b. identify and test screening modalities;

18 c. evaluate strategies to reduce barriers to access to treatment by optometrists,  
19 ophthalmologists, and other vision rehabilitation professionals;

20 d. evaluate the efficacy and cost-effectiveness of current and future interventions  
21 and community strategies; and

22 e. update and improve knowledge about the true costs of vision problems and  
23 related disabilities.

24 C. Programs, Policies, and Systems-

25 1. In General - The Secretary shall expand and intensify research within the Center  
26 for Disease Prevention and Control on the prevention and management of vision  
27 loss.

28 2. Activities - In carrying out this subsection, the Secretary may--

- a. build partnerships with voluntary health organizations, nonprofit vision rehabilitation agencies, and local public health agencies, eye-health professional organizations, and organizations with an interest in vision issues;
- b. work with health care systems to better address vision problems and associated disabilities; and
- c. award grants for community outreach regarding vision loss to health care institutions and national vision organizations with broad community presence.

SECTION 3. *Prevention and Treatment of Underserved, Minority, and other Populations.* – The Secretary of Health shall likewise institute the following:

A. Expansion and Intensification of Vision Programs - The Secretary shall expand and intensify programs targeted to prevent vision loss, treat eye and vision conditions, and rehabilitate people of all ages who are blind or partially sighted in underserved and minority communities, including the following:

1. Vision care services at community health centers receiving assistance
2. Vision rehabilitation programs at vision rehabilitation agencies, eye clinics, and hospitals.

B. Voluntary Guidelines for Vision Screening- The Secretary, in consultation with eye-health professional organizations and other vision-related organizations, shall develop voluntary guidelines to ensure the quality of vision screening and appropriate referral for comprehensive eye examinations and subsequent vision rehabilitation services.

SECTION 4. *Vision Rehabilitation Professional Development Grants.* - The Secretary of Health may make grants to eligible institutions of higher education or nonprofit organizations for the purpose of activities described in Section (2) (C) (2) (a) relating to vision rehabilitation professional development.

A. Use of Funds - - The Secretary may not make a grant to an institution of higher education or a nonprofit organization under this section unless the institution or organization agrees to use the grant for the following:

1 1. Developing and offering preparatory and continuing education training  
2 opportunities (incorporating state-of-the-art approaches, technologies, and  
3 therapies to meet the unique needs of older adults with vision loss) in -

4 a. geriatrics among vision rehabilitation professionals, including professionals in  
5 the vision rehabilitation therapy, orientation and mobility, and low vision  
6 therapy fields; and

7 b. vision rehabilitation among occupational therapists and others in related  
8 rehabilitation and health disciplines.

9 2. Conducting, and disseminating the findings and conclusions of, research on the  
10 effectiveness of preparatory and continuing education training under paragraph  
11 (1).

12 3. Developing and disseminating interdisciplinary course curricula for use in the  
13 preparation of new professionals in vision rehabilitation, occupational therapy,  
14 and related rehabilitation and health disciplines.

15 4. Educating physicians, nurses, and other health care providers about the value of  
16 vision rehabilitation, to increase appropriate referral by such professionals for the  
17 full range of vision rehabilitation services available to older individuals with  
18 vision loss.

19 B. Eligibility- To be eligible to receive a grant under this section, an entity shall be a  
20 university, academic medical center, national or regional nonprofit organization,  
21 community rehabilitation provider, or allied health education program, or a consortium of  
22 such entities, that -

23 1. offers or coordinates education or training activities among professionals  
24 described in subsection (A)(1); or

25 2. agrees to use the grant to expand its capacity to coordinate such activities.

26 C. Distribution of Grants- In awarding grants under this section, the Secretary shall  
27 ensure that grantees offer or coordinate training for current and emerging professionals -

1           1. from a variety of geographic regions and a range of different types and sizes of  
2           settings and facilities, including settings and facilities located in rural, urban, and  
3           suburban areas; and

4           2. serving a variety of populations of older individuals with vision loss, including  
5           racial and ethnic minorities, low-income individuals, and other underserved  
6           populations.

7           D. Application- To seek a grant under this section, an entity shall submit to the Secretary  
8           an application at such time, in such manner, and containing such information as the  
9           Secretary may require.

10          SECTION 5. *Separability Clause.* – If any provision or part thereof is held invalid or  
11          unconstitutional, the remainder of the law or the provision not otherwise affected shall remain  
12          valid and subsisting.

13          SECTION 6. *Repealing Clause.* – All laws, presidential decree or issuance, executive  
14          orders, letter of instruction, administrative order, rule and regulation contrary to, or inconsistent  
15          with the provisions of this Act are hereby repealed, modified, or amended accordingly.

16          SECTION 7. *Effectivity Clause.* – This Act shall take effect fifteen (15) days following  
17          its publication in at least two (2) newspapers of general circulation.

18          Approved,  
19