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

Senate Office of the Secretary

SENATE A

, ,

AUG 22 P5:13

RECEIVED BY:

Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

The Constitution, Article 13, Section 12 states:

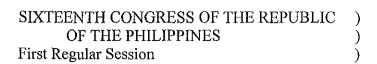
The State shall establish and maintain an effective food and drug regulatory system and undertake appropriate health, manpower development, and research, responsive to the country's health needs and problems."

Nosocomial infections are infections which are a result of treatment in a hospital or a healthcare service unit, but secondary to the patient's original condition. This type of infection is also known as a hospital-acquired infection (or more generically healthcare-associated infections). Health experts have warned that one out of 20 patients confined in a hospital or health care unit acquires infection during admission. Dr. Victor Rosenthal, of the World Health Organization's Infection Control Guidelines External Reviewer, said that in most developing countries, 15 out of 100 patients confined in the intensive care unit are at risk of acquiring hospital-related infection. Hospital-acquired infections have been identified as responsible for a large number of deaths in the world. The most efficient way to reduce the spread of this type of infection is to improve hygiene practices in the hospital.

This bill seeks to address a very much preventable cause of death and hospital-related illnesses by keeping track of all possible sources of infection that will guide hospital administrators in addressing these problems.*

MIRIAM DEFENSOR SANTIAGO

^{*} This bill was originally filed in the Fourteenth Congress, Second Regular Session.





AUG 22 P5:13

SENATE S. No. **1348**

Introduced by Senator Miriam Defensor Santiago AN ACT 2 REQUIRING DISCLOSURE OF HOSPITAL INFECTIONS Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled: SECTION 1. Definition. - As used in this Act, "hospital-acquired infection" shall mean 3 4 any localized or systemic patient condition that results from an adverse reaction to the presence of an infectious agent or agents, or its toxin or toxins; and was not present or incubating at the 5 6 time of the patient's admission to the hospital. 7 SECTION 2. Hospital Record. - All hospitals shall collect and maintain records of data 8 on hospital-acquired infection rates for specific surgical procedures and/or surveillance in critical 9 care and/or intensive care units performed by the hospital, as determined by the Secretary of 10 Health, including the following types of infections: 11 (A) Surgical Site Infections; 12 Ventilator Associated Pneumonia; (B) 13 (C) Central Line Related Bloodstream Infections; 14 Urinary Tract Catheter Infections; and (D) 15 Such other types of infections as shall be determined by the Secretary of Health. (E) 16 SECTION 3. Reporting. - The information obtained in accordance with section 2 of this 17 Act shall be reported as follows: 18 (A) Four times each year, on or before April 30, July 31, October 31, and January 31,

1

each hospital shall report all data collected on hospital-acquired infections in such hospital

19

20

during the immediately preceding quarter.

(B) Each year on or before March 1, the Department of Health shall submit a report to the Congress, summarizing the data included in the hospital quarterly reports for the previous calendar year. In addition, such report shall be available to the public upon request.

SECTION 4. Advisory Committee. – The Secretary of Health shall establish and appoint members to an advisory committee. The members of the advisory committee shall include representatives from the infection control department of both public and private hospitals, physicians, epidemiologists with hospital-acquired infection expertise, academic researchers, health insurers, health maintenance organizations, organized labor, consumer organizations, and purchasers of insurance, such as employers. The majority of the members of the advisory committee shall represent interests other than hospitals. The advisory committee shall work with the Department of Health to establish standards, rules, and regulations necessary to implement the provisions of this Act.

SECTION 5. Separability Clause. – If any provision of this Act is declared unconstitutional or invalid, the other sections or provisions hereof which are not affected thereby shall continue to be in full force and effect.

SECTION 6. Repealing Clause. – All laws, decrees, orders, rules, and regulations, or parts thereof, inconsistent with the provisions of this Act are hereby repealed, amended, or modified accordingly.

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

Approved,