

19 JUL 1 P2:39

Introduced by **Senator Richard J. Gordon**

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

EXPLANATORY NOTE

According to the Philippine College of Surgeons, "Trauma remains one of the leading causes of death in the country despite the increased availability of life-saving equipment and ambulances in most hospitals."¹ In cases of Trauma, what's more important is that "you're able to initiate the treatment during the 'golden hour', that by doing so you can make a difference in the person, that is the patient surviving or the patient dying, and also prevent disability," says Dr. Alejandro Dizon, President of the Philippine College of Surgeons.²

Like Trauma, other life-threatening emergencies such as stroke, heart attack and similar medical emergencies necessitates the delivery of a fast, highly-efficient, and competent medical services at the 'golden hour'. This can only be made possible with the institutionalization of a 24/7 well-coordinated nationwide emergency medical services system that can respond to medical emergencies at any place and any time.

Emergency Medical Services System (EMSS) has long been in place in other countries such as Netherlands, Belgium, Czech Republic, Estonia, United Kingdom, Canada, with the most popular in the Unites States, for their 911 system.


Our Constitution supports the establishment of the EMSS as the same is an integrated and comprehensive approach that will protect and promote the health of the Filipinos. Article II, Section 15 of the 1987 Constitution provides that "The State shall protect and promote the right to health of the people and instill health consciousness among them." Further Article XIII, Section 11 of the 1987 Constitution likewise mandates that "the State shall adopt an integrated and comprehensive approach to health development which shall endeavor to make

¹ <https://www.pna.gov.ph/articles/1055850>

² Ibid.

essential goods, health and other social services available to all the people at affordable cost.”

With a working EMSS in place, many Filipino lives will be saved. For this purpose, urgent passage of this measure is earnestly sought.

A handwritten signature in black ink, consisting of several fluid, overlapping strokes that form a stylized representation of the name Richard J. Gordon.

RICHARD J. GORDON



SENATE

S. No. 88

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

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

1 SECTION 1. Short Title. - This Act shall be known as the "Emergency Medical
2 Services System (EMSS) Act".

3 SEC. 2. Declaration of Policy. - It is hereby declared the policy of the State to
4 protect and promote the right to health of the people. Pursuant to this policy, the
5 government shall institutionalize a standard, comprehensive, accessible, and
6 integrated system of Emergency Medical Services System and provide an
7 environment that will maximize the capability and potential of Emergency Medical
8 Services Personnel.

9 SEC. 3. Objectives. - This Act shall have the following objectives:

10 (a) To develop and institutionalize an Emergency Medical Services System at
11 the national and local levels;

12 (b) To establish a national Emergency Medical Services System Council;

13 (c) To encourage and promote the active participation of the private sector in
14 the provision of Emergency Medical Services (EMS);

15 (d) To institute the national standard for the provision of EMS;

1 (e) To provide a program of standardization for the training of EMS
2 institutions and personnel;

3 (f) To establish standards for design, accreditation, and regulation of
4 emergency medical vehicles;

5 (g) To mandate the adoption and use of 911 as the National Emergency
6 Hotline Number;

7 (h) To establish and provide support services to the EMSS; and

8 (i) To promote public safety and make EMS accessible to the people especially
9 those in need of emergency medical assistance.

10 SEC. 4. Definition of Terms. – For purposes of this Act, the following terms
11 shall be defined, as follows:

12 (a) Accredited Training Institutions refers to any accredited governmental or
13 nongovernmental organization, authorized by the government to conduct EMS
14 trainings and programs, such as the Philippine Red Cross, which meet the standards
15 established by the Emergency Medical Services System Council (EMSSC), hereinafter
16 referred to as the Council created under Section 5 of this Act, in coordination with
17 the Department of Health (DOH), among others, and duly registered, in good
18 standing, with the DOH;

19 (b) Advanced Life Support refers to a set of life-saving protocols and skills
20 that extend and further, open airway, adequate ventilation and support circulation.
21 It may include interventions used to treat and stabilize adult victims of life-
22 threatening cardiorespiratory emergencies and to resuscitate victims of cardiac
23 arrest. The interventions may include Cardio Pulmonary Resuscitation, basic and
24 advanced airway management, tracheal intubation, medications, electrical therapy

1 and intravenous (IV) access. It may also refer to a protocol of managing trauma
2 victims that are designed to maximize management in the first hour after trauma for
3 optimal long-term outcome. These interventions may include Basic Life Support,
4 immobilization, venous cannula insertion, surgical airway, chest decompression, and
5 administration of medications, among others;

6 (c) Ambulance refers to an emergency medical vehicle designed and
7 equipped for transporting sick or injured patients to, from, and between places of
8 treatment by land, water or air, affording safety and comfort and preventing further
9 illness or injury;

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

16 (e) Emergency Medical Dispatch refers to the immediate identification and
17 prioritization of medical emergency situations, the timely dispatch of appropriate
18 resources, providing essential pre-arrival first-aid instructions and full endorsement
19 to the receiving hospital. Dispatch encompasses all aspects of communication
20 including request processing, coordination and support, documentation and
21 monitoring;

22 (f) Emergency Medical Services (EMS) refers to a network of pre-hospital or
23 pre-health care facility services coordinated to provide aid and medical assistance

1 from the place of incident to the nearest appropriate hospital or health care facility,
2 delivered by an EMS personnel. It may include basic and advanced life support.

3 (g) Emergency Care refers to the independent delivery of emergency medical
4 services by appropriately trained and certified EMS personnel, usually in a mobile or
5 community setting, in full accordance with the Emergency Medical Services
6 Treatment Protocols established by the Emergency Medical Services System Council
7 (EMSSC), hereinafter referred to as the Council, created under this Act;

8 (h) Emergency Medical Services (EMS) Personnel refers to a person trained
9 and certified in rendering Emergency Care by any accredited government or
10 nongovernmental organization, authorized by the government to conduct EMS
11 training, such as the Philippine Red Cross;

12 (i) Emergency Medical Services Standard refers to the standardization of the
13 Emergency Medical Services Procedures outlining the approved clinical practices and
14 therapies to be observed by the EMS personnel, as established by the Council, in
15 coordination with the DOH and the Department of Interior and Local Government
16 (DILG) which shall include interventions for BLS and ALS;

17 (j) Emergency Medical Services (EMS) System refers to the arrangement of
18 personnel, facilities, and equipment for the effective and coordinated delivery of EMS
19 required in the prevention, mitigation and management of incidents which occur
20 either as a result of a medical emergency or accident;

21 (k) Emergency Response and Care refers to the arrival of resources at the
22 scene and the timely initiation and provision of appropriate interventions;

1 (l) Emergency Transport refers to the transportation in an adequate means of
2 medical transportation, of a patient to the nearest appropriate hospital or health
3 care facility with continued provision of care and appropriate interventions en route;

4 (m) Inter-Agency Referral and Transport refers to the transport of a patient
5 with an EMS personnel, if necessary, from one referring facility or agency to another
6 receiving facility or agency for definitive care, as may be deemed necessary, in
7 instances where the services are not available in the referring facility;

8 SEC. 5. Creation of the Emergency Medical Services Systems Council. – There
9 is hereby created the "Emergency Medical Services Systems Council (EMSSC)"
10 hereinafter referred to as the "Council" which shall be composed of the following
11 members:

12 (1) Secretary of the Department of Health (DOH) as Chairperson;

13 (2) Secretary of the Department of Interior and Local Government (DILG) as
14 Co-Chairperson;

15 (3) Director General of the Technical Education and Skills Development
16 Authority (TESDA);

17 (4) Chairperson of the Commission on Higher Education (CHED);

18 (5) Chairman of the Philippine Red Cross (PRC);

19 (6) President of the Philippine Health Insurance Corporation (PhilHealth); and

20 (7) Chairperson of the Professional Regulation Commission (PRC).

21 A majority of the Council shall constitute a quorum to conduct day-to-day
22 business. A member of the Council may appoint a duly authorized representative to
23 attend and vote in behalf of the member. Provided that, it shall be in writing, duly

1 signed by the member, and filed before the scheduled meeting. Provided, further,
2 that such authority may only be valid for such meeting.

3 Regular meetings shall be conducted by the Board at least once a month.
4 Notice, in writing, must be given three (3) days before the scheduled meeting.

5 Members of the Council are entitled to receive commensurate and reasonable
6 per diems, as may be determined by the Department of Budget and Management
7 (DBM). Provided that, the per diems collected per month shall not exceed the
8 equivalent of four (4) meetings, except in cases of extraordinary circumstances.

9 SEC. 6. Powers and Functions of the Council. - The Council shall perform the
10 following functions:

11 (a) To formulate policies on the EMSS;

12 (b) To develop standards in the provision of EMS to include, among others,
13 the skills and competencies required for EMS personnel and the mandatory
14 observation of such standards by all EMS personnel and such other entities;

15 (c) To formulate a Code of Ethics for EMS personnel;

16 (d) To develop and regulate reasonable standards for EMS personnel;

17 (e) To develop standards and protocols for the design, construction,
18 equipment and operations of ambulances;

19 (f) To promote trainings and programs of Basic Life Support in the curriculum
20 of all public and private tertiary education institutions.

21 (g) To ensure coordination of all concerned institutions for the effective
22 implementation of this Act;

23 (h) To monitor the compliance of all Local Government Units (LGUs), health
24 facilities, and EMS personnel of the standards and requirements set out in this Act;

1 (i) To generate resources from local, national and international
2 organizations/agencies, whether government or private sector;

3 (j) To receive and accept donations and other conveyances including funds,
4 materials and services by gratuitous title: Provided that, not more than thirty percent
5 (30%) of said funds shall be used for administrative expenses;

6 (k) To prepare an annual budget of the Council and submit the same to the
7 President for inclusion in the annual General Appropriations Act;

8 (l) To advise the President on matters pertaining to EMS;

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

12 (n) To promote the conduct of studies, researches, and international
13 cooperation among the DOH, training institutions, and other related organizations;

14 (o) To create the mechanisms for continuous education and re-certification
15 and re-accreditation of EMS personnel;

16 (p) To create a mechanism for investigation and evaluation of professional
17 claims, in case of breach, against EMS personnel, and the possible suspension or
18 removal of their certification and accreditation; and

19 (n) To promulgate other rules and regulations, as may be deemed necessary.

20 SEC. 7. Accredited Training Institutions. – Training programs, courses, and
21 continuing education for EMS personnel shall only be conducted by an Accredited
22 Training Institution, as provided in Sec. 4(a) of this Act. Provided that, EMS
23 Personnel may only be certified by an Accredited Training Institution. Provided
24 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
2 Council. Provided that, following the accreditation of the EMS Personnel, there
3 should be a permit by the Medical Director, or its equivalent, of the organization,
4 where the EMS person practices emergency care, providing her/him with the power
5 to perform ALS procedures

6 SEC. 8. Ambulances. - The Council shall develop the standard and
7 requirements for the design and specifications of ambulances which shall include a
8 system that provides geolocation and time information to a receiver through the use
9 of satellite systems and other necessary and adequate medical equipment. The
10 Council shall also formulate protocols for the operations of ambulances.

11 SEC. 9. Inter-agency Referral and Transport. – The Council shall establish the
12 prescribed guidelines on inter-agency referral and transport in accordance to Section
13 4 (m) of this Act.

14 SEC. 10. Adoption of a Nationwide Emergency Hotline Number. - There shall
15 only be one (1) nationwide emergency hotline number to enable the public to
16 efficiently access EMS. The National Telecommunications Commission (NTC) shall
17 develop a program for the adoption of the nationwide emergency hotline number.
18 NTC shall consult and cooperate with national and local agencies and institutions,
19 such as the Philippine Red Cross; LGUs and officials responsible for emergency
20 services and public safety; the telecommunications industry (including cellular and
21 other wireless telecommunications service providers); the motor vehicle
22 manufacturing industry; EMS providers; emergency dispatch providers;
23 transportation officials; public safety, fire service, and law enforcement officials;
24 consumer groups; hospital emergency and trauma care personnel, including

1 emergency physicians, trauma surgeons and nurses. Provided that, the nationwide
2 emergency hotline number shall operate twenty-four (24) hours a day and three-
3 hundred sixty-five (365) days a year.

4 SEC. 11. Compliance of Telecommunications Industry. - It shall be the duty of
5 every telecommunications industry to provide its subscribers with free access to the
6 national emergency hotline number in accordance with the implementing rules and
7 regulations to be adopted pursuant to this Act.

8 SEC. 12. Prohibited Acts. – In addition to acts and omissions proscribed by
9 the Constitution and existing laws, the following shall constitute prohibited acts and
10 are hereby declared unlawful:

11 (a) Any person who makes a call to the nationwide emergency hotline
12 number, or performs any other means of communication, with intent to
13 annoy, abuse, threaten, or harass the call taker, dispatcher, or any person
14 who answers the call;

15 (b) Any person who makes a call to the nationwide emergency hotline
16 number and, upon being answered, makes or solicits any comment, request,
17 suggestion, proposal, or sound which is obscene, lewd, lascivious, immoral, or
18 indecent; and

19 (c) Any person who gives a false report or false information in connection
20 with a medical emergency, knowing the report or information to be false.

21 For purposes of this Act, a call taker shall be defined as any person who
22 handles the calls received through the nationwide emergency hotline number and
23 transmits it to the dispatcher who shall plan and monitor the appropriate emergency
24 medical response. The plan involves dispatching EMS personnel, ambulances, and

1 other vehicles, if necessary; tracking ambulance positions; liaising with other
2 emergency services (such as Fire, law enforcement authorities); maintaining contact
3 with all units on assignment; and monitoring progress of the response. Call takers
4 and dispatchers operate a variety of communications equipment including radio
5 consoles, telephones, and computer systems, among others. Provided that, call
6 takers and dispatchers shall be required to undergo training, as may be determined
7 by the DOH, in coordination with the Department of Information and
8 Communications Technology (DICT).

9 SEC. 13. Penalties. – Any person who shall commit any violation, as provided
10 in Sec. 12 of this Act, shall be punished with the following:

11 (a) First Offense. – The offender shall be compelled to attend a seminar
12 on the proper use of the nationwide emergency hotline number and a
13 fine of Five Thousand Pesos (P5,000.00).

14 (b) Second Offense. – The offender shall be imposed with a fine of not
15 less than Eight Thousand Pesos (P8,000.00) but not more than Fifteen
16 Thousand Pesos (P15,000.00) or imprisonment of one (1) day to one
17 (1) month, or both, at the discretion of the court.

18 (c) Third and Succeeding Offenses. – The offender shall be imposed with a
19 fine of not less than Twenty Thousand Pesos (P20,000.00) but not
20 more than One Hundred Thousand Pesos (P100,000.00) or
21 imprisonment of not less than one (1) month to six (6) months, or
22 both, at the discretion of the court.

23 SEC. 14. Local Government Units. - The LGUs are hereby mandated to
24 develop and institutionalize an EMSS within each jurisdiction, including

1 appropriations, programs, and activities that will ensure the implementation of this
2 Act.

3 SEC. 15. Appropriations. - The Department of Health and the Department of
4 Interior and Local Government shall include in their annual General Appropriations
5 Act the appropriation needed for the implementation of this Act.

6 SEC. 16. Implementing Rules and Regulations. - The Council, in coordination
7 with the concerned departments, agencies, and institutions shall issue and
8 promulgate the rules and regulations within one hundred twenty (120) days upon
9 the effectivity of this Act.

10 SEC. 17. Repealing Clause. - All laws, decrees, executive orders, rules and
11 regulations or other issuances or parts thereof inconsistent with the provisions of
12 this Act are hereby repealed or modified accordingly.

13 SEC. 18. Separability Clause. - If any portion or provision of this Act is
14 declared unconstitutional, the remainder of this Act or any provision not affected
15 thereby shall remain in force and effect.

16 SEC. 19. This Act shall take effect fifteen (15) days after the completion of its
17 publication either in the Official Gazette or in a newspaper of general circulation in
18 the Philippines.

19 Approved,