EIGHTEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES

First Regular Session



SENATE

S.B. No. 1444

20 APR 27 A11:00

RECEPT-DIBYC

INTRODUCED BY: SENATOR EMMANUEL D. PACQUIAO

AN ACT STRENGTHENING NATIONAL PREPAREDNESS AND BIORISK REDUCTION IN RESPONSE TO PUBLIC HEALTH EMERGENCIES

EXPLANATORY NOTE

Article XI, 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." Article XIII, Section 11 further mandates that the State shall adopt an integrated and comprehensive approach to health development.

The Philippines is no stranger to the occurrence of disease outbreaks and pandemics or the worldwide spread of a new disease. We were plagued by the Spanish flu pandemic of 1918, the A(H1N1) pandemic of 2009, SARS (severe acute respiratory disease) of 2003, among others.

Despite these experiences, we remain seemingly unprepared for times like these as manifested by how we currently face yet another pandemic brought by coronavirus disease (COVID-19). Now, thousands have already been reported infected with the disease in the country with a horrifying number of deaths increasing day after day. The situation forced the President to initially put the National Capital Region on a lockdown, eventually followed by a number of local government units across the country.

Clearly, there is a need to organize a systemic and orderly collective action to be headed by the Department of Health to ensure effectivity and efficiency in responding to any public health emergencies. Measures for preparedness against any outbreaks or pandemics must be organized in advance, including the security of supplies, timely early warnings, evacuations, security of the social welfare. Investment on bio-risk reduction must also be emphasized.

This bill seeks to give the Department of Health the responsibility to undertake necessary measures and gather concerned government agencies to advance national preparedness on any public health emergencies, especially on pandemics.

In view of the foregoing, approval of this bill is earnestly sought.

EMMANUEL D. PACQUIAO

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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 "Bio-risk Reduction and Pandemic Preparedness Act."

Section 2. Creation of a National Health Strategy for Public Health Emergencies. — The Secretary of Health shall spearhead the creation of a national health strategy to address public health emergencies. This strategy shall provide for integrated policy coordination and strategic direction with respect to all matters related to national public health and medical preparedness and execution and deployment of national response before, during, and following public health emergencies.

Section 3. Components of a National Health Strategy. The National Health Strategy shall include:

- (A) Provisions for increasing the preparedness, response capabilities, and surge capacity of ambulatory care facilities, dental health facilities, and critical care service systems;
- (B) Plans for optimizing a coordinated and flexible approach to the medical surge capacity of hospitals, other health care facilities, critical care, and trauma care and emergency medical systems;
- (C) Provisions taking into account the unique needs of individuals with disabilities in a public health emergency;
- (D) Strategic initiatives to advance countermeasures to diagnose, mitigate, prevent, or treat harm from any biological agent or toxin or any chemical, radiological, or nuclear agent or agents, whether naturally occurring, unintentional, or deliberate;

(E) Conduct of periodic evaluations of national and local preparedness and response capabilities which shall include drills and exercises to ensure medical surge capacity for events without notice.

Section 4. Creation of Task Force on Public Emergencies. – A task force under the control of the Secretary of Health shall be established in order to conduct research necessary for the creation of the Strategy. The Task Force shall be composed of representatives from:

- (1) The Department of Health (DOH);
- (2) The National Disaster Risk Reduction and Management Council (NDRRMC);
- (3) The Department of Interior and Local Government (DILG); and
- (4) The National Security Adviser;

The Task Force shall:

- (1) Monitor emerging issues and concerns as they relate to medical and public health preparedness and response for at-risk individuals in the event of a public health emergency;
- (2) Identify and minimize gaps, duplication and other inefficiencies in medical and public health preparedness and response activities and the actions necessary to overcome these obstacles:
- (3) Disseminate and update novel and best practices of outreach to and care of at-risk individuals before, during, and following public health emergencies in as timely a manner as is practicable, including from the time a public health threat is identified; and
- (4) Ensure that public health and medical information distributed by the government during a public health emergency is delivered in a manner that takes into account the range of communication needs of the intended recipients, including at-risk individuals.
- Section 5. Creation of Medical Reserve Corps. The Secretary of Health shall establish a medical reserve corps composed of volunteer health professionals. The Medical Reserve Corps shall be called into duty if needed during public health emergencies.
- Section 6. Authorization of Appropriations. To carry out the provisions of this Act, there are authorized to be appropriated such sums as may be necessary for each fiscal year.
- Section 7. Repealing Clause. All laws, decrees, orders, ordinances, rules and regulations or parts thereof inconsistent with this Act are hereby repealed or modified accordingly.
- Section 8. Separability Clause. If any provision of this Act is declared unconstitutional or otherwise invalid, the validity of the other provisions shall not be affected thereof.

Section 9. Effectivity Clause. This shall take effect fifteen (15) days after publication in at least two (2) newspapers of general circulation.

Approved,

