

1 (A) Provisions for increasing the preparedness, response capabilities, and surge
2 capacity of ambulatory care facilities, dental health facilities, and critical care
3 service systems;

4 (B) Plans for optimizing a coordinated and flexible approach to the capacity of
5 hospitals, other health care facilities, critical care, and trauma care and emergency
6 medical systems;

7 (C) Provisions taking into account the unique needs of individuals with
8 disabilities in a public health emergency;

9 (D) Strategic initiatives to advance countermeasures to diagnose, mitigate,
10 prevent, or treat harm from any biological agent or toxin or any chemical,
11 radiological, or nuclear agent or agents, whether naturally, occurring, unintentional,
12 or deliberate;

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

16 SECTION 4. ***Creation of Task Force on Public Emergencies.*** - (A) A task force
17 under the control of the Secretary of Health shall be established in order to conduct
18 research necessary for the creation of the Strategy. The Task Force shall be composed
19 of representatives from:

- 20 1. The Department of Health;
- 21 2. The National Disaster Risk Reduction and Management Council (NDRRMC);
- 22 3. The Department of Interior and Local Government (DILG);
- 23 4. The National Security Adviser; and
- 24 5. The Philippine National Red Cross (PNRC).

1 (B) The Task Force shall:

- 2 1. Report directly to the President of the Philippines to make timely reports and
3 recommendations regarding the control measures and activities being
4 undertaken for the containment/addressing of the public health emergency;
- 5 2. Monitor emerging issues and concerns as they relate to medical and public
6 health preparedness and response for at-risk individuals in the event of a public
7 health emergency;
- 8 2. Identify and minimize gaps, duplication and other inefficiencies in medical
9 and public health preparedness and response activities and the actions
10 necessary to overcome these obstacles;
- 11 3. Disseminate and update novel and best practices of outreach to and care of at-
12 risk individuals before, during, and, following public health emergencies in as
13 timely a manner as is practicable, including from the time a public health threat
14 is identified;
- 15 4. Ensure that public health and medical information distributed by the
16 government during a public health emergency is delivered in a manner that
17 takes into account the range of communication needs of the intended recipients,
18 including at-risk individuals; a
- 19 5. Create Technical Working Groups (TWGs) to address other concerns that are
20 affecting the medical health emergency such as economic, social amelioration
21 and security plans and arrangements, to minimize the impact of such
22 emergency to the general public; and

1 6. Perform such other functions as may be ordered or may be necessarily related
2 to its mandated functions.

3 SECTION 5. ***Creation of Medical Reserve Corps.*** - The Secretary of Health shall
4 establish a medical reserve corps composed of volunteer health professionals. The
5 Medical Reserve Corps shall be called into duty if needed during public health
6 emergencies.

7 SECTION 6. ***Authorization of Appropriations.*** - To carry out the provisions of this
8 Act, there are authorized to be appropriated such sums as may be necessary for each
9 fiscal year;

10 SECTION 7. ***Separability Clause.*** - If any provision or part thereof is held invalid
11 or unconstitutional, the remainder of the law or the provision not otherwise affected
12 shall remain valid and subsisting.

13 SECTION 8. ***Repealing Clause.*** - Any law, presidential decree or issuance,
14 executive order, letter of instruction, administrative' order, rule, or regulation contrary
15 to or inconsistent with the provisions of this Act is hereby repealed, modified, or
16 amended accordingly.

17 SECTION 9. ***Effectivity Clause.*** - This Act shall take effect fifteen (15) days after
18 its publication in at least two (2) newspapers of general circulation.

19 Approved,



Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

Nineteenth Congress
First Regular Session

HOUSE BILL NO. 1548



Introduced by Representative Jorge Antonio P. Bustos

EXPLANATORY NOTE

Article 11, Section 15, of the 1987 Constitution specifically states:

"The State shall protect and promote the right to health of the people and instill health consciousness among them."

At the start of this millenium, the world was faced and infected with several new strains of deadly viruses: a viral respiratory disease caused by SARS (Severe Acute Respiratory Syndrome) coronavirus (SARS-CoV) in the years spanning 2002-2003, and the Middle East Respiratory Syndrome (MERS), said to be deadlier than SARS-CoV, on 2013. These could have made us rethink and prioritize our healthcare structure and laws better. These could have been reason enough for us to prepare for bigger threats with communicable and transmissible diseases that have not been addressed by modern technology.

Here comes the year 2020. With the onslaught of COVID-19 that has infected almost two million¹ people across the world and has killed more than one hundred thousand people, government preparedness to address the same has never been this crucial. While the World Health Organization (WHO) has declared COVID-19 a "public health emergency"² which should at least trigger an immediate response

¹ As of April 13, 2020, source: www.who.int

² An occurrence or imminent threat of an illness or health condition, caused by bio terrorism, epidemic or pandemic disease, or a novel and highly fatal infectious agent or biological toxin, that poses a substantial risk of a significant number of human fatalities or incidents or permanent or long-term disability (WHO/DCD, 2001).

system from all nations or constituencies affected by such an alarming infection or occurrence, the scenario being depicted in various areas around the world seems to be quite the opposite: there is an obvious lack of preparedness to meet such an emergency, and lack of enabling laws and statutes to help people cope and rise above these pandemics.

While some may say that the Filipinos have already developed and instilled in their cultures a sense of resiliency because as fate would have it, we are a nation prone to disasters, both brought about by nature or man-made. As an archipelago, we have witnessed storm after storm, earthquake after earthquake, calamity after calamity, yet we have devised so many ways that have helped us survive through it. But the current health pandemic that is wrecking havoc to our world is slowly eating away our people, our resources, our economy and our social systems. It is a kind that can be likened to a war, but with an invisible and unknown enemy. We cannot fight it with guns, and the only ammunition we know is to not mingle with anyone, and stay within the confines of our homes. We cannot deny to ourselves that we have not prepared fully well for this invisible war. Our government has not equipped itself with the proper enactment to face this kind of world pandemic.

As time is of the essence, let this proposed cement the role of the President, as our chief Executive, with the guidance of the health sector, particularly the Department of Health, to lead the national response and preparedness for public health emergencies, to cover all those emanating from natural disasters and weather conditions, those resulting from chemical, biological, radiological, or nuclear agents, including emerging infectious diseases, or emergencies, or as may they be declared as pandemics, bioterrorism or mass casualties.

Our preparedness shall determine and ensure that all activities and measures taken in advance shall be our government's response to minimize, if not eradicate the impact of hazards, including the issuance of timely and effective public health emergency plans and evacuation, risk assessment and management, including pre-disaster activities, and structures to help address contingencies and all possible health and safety scenarios and containment of the disease/outbreaks and their concomitant risks be made at the soonest possible instance.

This bill is also in honor of the late Senator Mirian Defensor Santiago who, in keeping with her ideals for pre-emptive action against pandemics, filed a similar bill in 2014. May we now truly understand that all things are possible, and it is never too

late to prepare too early, for the fruits of preparedness will always benefit our community as a whole.

The immediate passage of this bill is earnestly sought.

A handwritten signature in blue ink, appearing to read 'Jorge Bustos', is positioned above the printed name.

CONG. JORGE ANTONIO P. BUSTOS