

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

SEVENTEENTH CONGRESS
First Regular Session

House Bill No. **720**

HOUSE OF REPRESENTATIVES	
RECEIVED	
DATE:	30 JUN 2016
TIME:	4:00 PM
BY:	<i>[Signature]</i>
REGISTRATION UNIT BILLS AND INDEX SERVICE	

Introduced by Congressman Alfredo D. Vargas III

EXPLANATORY NOTE

As stipulated in Article XIII, Section 11 of the Constitution, it is the responsibility of the State "to adopt and integrate a comprehensive approach to health development which shall endeavor to make essential goods, health, and other social services available to all the people at affordable cost."

Furthermore, Book IV, Title IX, Chapter 3 of the Administrative Code authorizes the Department of Health to define the national health policy and formulate and implement a national health plan in accordance with the government's general policies and plans.

According to the Department of Health (2014), trauma will be the second leading cause of death in five to 10 years. This is due to the lack of medical professionals, poor access to medical facilities, high cost of care, and lack of hospital infrastructures and equipment.

Therefore, it is vital for the State to immediately prioritize the improvement of trauma care in the Philippines. This bill seeks to achieve this by mandating the Department of Health to:

- (1) Identify designated trauma centers
- (2) Establish and operate a National Clearinghouse on Emergency Medical Services and Trauma Care; and
- (3) Provide for the standards with respect to trauma care centers and delivery systems.

Through this initiative, we are giving victims of physical trauma a better chance of survival from disability or death. Thus, the immediate passage of this bill is urged.


ALFREDO D. VARGAS III

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AN ACT
TO IMPROVE EMERGENCY MEDICAL SERVICE AND TRAUMA CARE

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 the “Emergency Medical Services and Trauma Care Improvement Act of 2016”.

SECTION 2. *Declaration of Policy.* – It is the policy of the State to protect and promote the right to health of the people.

SECTION 3. *Definition of Terms.* – As used in this Act.

- (A) “Designated Trauma Center” means a trauma center designated in accordance with this Act;
- (B) “Plan for the Provision of Emergency Medical Services” means a plan for a comprehensive, organized system to provide for the access, response, triage, field stabilization, transport, hospital stabilization, definitive care, and rehabilitation of patients of all ages with respect to emergency medical services;
- (C) “Trauma Care Component of the Plan for the Provision of Emergency Medical Services” means a plan for a comprehensive health care system, within rural and urban areas of the State, for the prompt recognition, pre hospital care, emergency medical care, acute surgical and medical care, rehabilitation, and outcome evaluation of seriously injured patients; and
- (D) “Secretary” shall mean the Secretary of Health.

SECTION 4. *Clearinghouse on Emergency Medical Services and Trauma Care* -

(A) ESTABLISHMENT - The Secretary shall provide for the establishment and operation of a National Clearinghouse on Emergency Medical Services and Trauma Care (hereinafter referred to in this title as the "Clearinghouse").

(B) DUTIES - The Clearinghouse shall -

(1) Foster the development of appropriate, modern emergency medical services, and trauma care (including the development of policies for the notification of family members of individuals involved in a medical emergency) through the sharing of information among agencies and individuals involved in planning, furnishing, and studying such services and care;

(2) Collect, compile, and disseminate information on the achievements of, and problems experienced by, national and local agencies and private entities in providing emergency medical services and trauma care, and in so doing, give special consideration on the unique needs of rural areas;

(3) Provide technical assistance relating to emergency medical services and trauma care to national and local agencies; and

(4) Sponsor workshops and conferences on emergency medical services and trauma care.

(C) FEES AND ASSESSMENTS - A contract entered into by the Secretary under this section may provide that the Clearinghouse shall charge reasonable fees or assessments in order to defray the costs of operating the Clearinghouse.

(D) AUTHORITY TO ENTER INTO CONTRACTS - The authority of the Secretary to enter into contracts under this section shall be to such extent or in such amounts as are provided in Appropriation Acts.

SECTION 5. *General Duties*. -

(A) IN GENERAL - The Secretary shall -

(1) Identify and establish trauma centers;

(2) Conduct and support research, training, evaluations, and demonstration projects with respect to emergency medical services and trauma care systems;

(3) Provide technical assistance to national and local agencies relating to emergency medical services and trauma care systems; and

(4) Establish guidelines for the development of uniform national and local data reporting systems as described in Section 6(B)(5).

(B) GRANTS, COOPERATIVE AGREEMENTS, AND CONTRACTS - The Secretary may make grants, and enter into cooperative agreements and contracts, for the purpose of carrying out subsection (A).

(C) CONSULTATION AND COORDINATION - The Secretary shall consult and coordinate with the appropriate departments and agencies to ensure that the implementation of this Act will not conflict with their responsibilities, with respect to emergency services.

SECTION 6. *Requirements with Respect to Designated Trauma Care Centers.* -

(A) PLAN - designated trauma center shall submit the trauma care component of the plan for the provision of emergency medical services (hereafter in this section referred to as the "Plan") to the Secretary.

(1) Trauma Care Component - For each fiscal year, each.

(2) Interim Plan - For each fiscal year, if a designated trauma center has not completed the plan, it may provide, in lieu of a completed plan, an interim plan or description of efforts made toward the completion of the plan.

(B) REQUIREMENTS OF PLAN - Each plan shall -

(1) Contain minimum standards and requirements for the designation of different categories of trauma centers (including facilities with specified capabilities and expertise in the care of the pediatric trauma patient) by such agency or entity, including standards and requirements for -

(a) Ensuring that such centers will have sufficient experience and expertise to be able to provide quality care for victims of injury which, in the case of level 1 or level 2 trauma center, include the number and types of trauma patients for whom such centers must provide care;

(b) The resources and equipment needed by such centers;

- (c) The availability of rehabilitation services for trauma patients;
and
 - (d) The provision of assurances that such centers may not refuse the transfer of a trauma patient because the patient is unable to pay for the care that the patient requires;
- (2) Contain standards and requirements for the implementation of regional trauma care systems, including standards and guidelines or medically directed triage and transportation of trauma patients;
 - (3) Contain standards and requirements for medically directed triage and transport of severely injured children to facilities with specified capabilities and expertise in the care of the pediatric trauma patients;
 - (4) Specify procedures for the evaluation of designated trauma centers and trauma care systems;
 - (5) Ensure that the standards and requirements address the special needs and problems of rural communities;
 - (6) Provide for the establishment in the designated trauma center of a central data reporting and analysis system for –
 - (a) identifying severely injured trauma patients within regional trauma care systems in their area of coverage;
 - (b) identifying the nature and cause of severe injuries, and if known, factors contributing to the injury;
 - (c) identifying patient outcomes;
 - (d) monitoring trauma care resources (including pre-hospital care) within a regional trauma care system (including relevant rehabilitation information);
 - (e) identifying patients transferred within a regional trauma system.
 - (7) provide periodic reviews of the transfers and the auditing of such transfers determined to be inappropriate;
 - (8) improve or establish injury prevention programs and conduct public education activities concerning obtaining access to emergency medical services and trauma care; and

