

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

SEVENTEENTH CONGRESS
First Regular Session

House Bill No. **764**

HOUSE OF REPRESENTATIVES
RECEIVED
DATE: 30 JUN 2018
TIME: 11:46 PM
BY: [Signature]
REGISTRATION AND
BILLS AND INDEX SERVICE

Introduced by **DIWA Party-list Representative Emmeline Y. Aglipay – Villar**

EXPLANATORY NOTE

What is more valuable than a child? Yet what is more helpless than a newborn? While infant mortality rates in the country have drastically improved since the Millennium Development Goals were introduced almost three decades ago, statistics show that we still suffer more than twenty infant deaths per thousand births. Even a single avoidable fatality is too high, but to tackle the issue will require localized studies. There are a wide variety of factors that can affect infant mortality, and the measures to be adapted in each community must be responsive to their particular needs.

This bill – based on House Bill No. 955 filed in the 16th Congress by Rep. Gary C. Alejano and Rep. Francisco Ashley L. Acedillo, but with a slight modification to the immunity provision -- seeks to establish a local community focused infant mortality initiative that can properly assess and find redress for specific factors that affect infant mortality.

Emmeline Y. Aglipay

EMMELINE Y. AGLIPAY – VILLAR
Representative, DIWA Party-list

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**AN ACT TO ESTABLISH AN INFANT MORTALITY PROGRAM TO REDUCE
THE RATE OF INFANT MORTALITY IN THE COUNTRY PROVIDING FUNDS
THEREFOR AND FOR OTHER PURPOSES**

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

SECTION 1. Short Title. - This Act shall be known as the "Infant Mortality Initiative Act of 2016".

SECTION 2. Declaration of Policy. - It is the policy of the State to protect and promote the right of health of the people, including the rights of children to survival, and to develop healthy and fully as individuals.

SECTION 3. Definition of Terms. – As used in this section, the term –

- (1) "Coalition" means a national or local health coalition or consortium;
- (2) "Department" means the Department of Health;
- (3) "FIMR" means a fetal and infant mortality review committee;
- (4) "Infant mortality" means the death of a live-born infant within 364 days after the infant's birth;
- (5) "Infant mortality rate" means the number of infant deaths per 1,000 annual live births.

SECTION 4. Objectives of this Act. – The objectives of this Act include:

- (1) Determining the significant social, economic, cultural, safety, and health system factors that exist in communities all over the country related to infant mortality through a practice collaborative approach. Both perinatal periods of risk and fetal infant mortality reviews may be used;
- (2) Developing a series of interventions and policies that address these factors to improve the service systems and community resources;

- (3) Participating in the implementation of community-based interventions and policies that address problems in infant mortality rates;
- (4) Assessing the progress of interventions.

SECTION 5. Administration of the Infant Mortality Initiative. — The Infant Mortality Initiative shall be administered through a collaboration among the Department of Health, which shall act as the lead agency in implementing this Act, the Dept. of Interior and Local Government, Local Government Units and their respective local health coalitions, and public universities or colleges having expertise in public health. A local community shall develop an interdisciplinary team to serve as part of a local practice collaborative. Both perinatal periods of risk and fetal infant mortality reviews may be used. A case review shall be conducted by each participating coalition using professional in-house staff or through contracts with an outside professional. Public universities or colleges having expertise in public health shall provide technical assistance in developing a standard research methodology based on the fetal and infant mortality review method. Public universities or colleges having expertise in public health shall assist each participating coalition in determining the selection of comparison groups, identifying data collection and housing issues, and presenting findings and recommendations. A single methodology for the reviews conducted through the initiative shall be used by each participating coalition. The department shall distribute funding to each coalition that participates in the initiative through annual grants that are subject to specific appropriations by the Legislature.

SECTION 6. Functions of the Infant Mortality Initiative. – Each participating coalition shall:

- (1) Develop an interdisciplinary team to oversee the process in its local Community.
- (2) Use perinatal periods of risk methodology when appropriate to examine infant deaths in its community.
- (3) Use a modified FIMR approach to examine infant deaths in its community by:
 - (a) Creating a case review FIMR team that may include obstetricians, neonatologists, perinatologists, pathologists, registered nurses, social workers, hospital and clinic administrators, social service agencies, researchers, citizens and consumers, and other experts considered necessary to conduct a standardized review of infant mortality.
 - (b) Hiring or contracting with professional staff that may include licensed nurses and social workers to abstract and present individual case reviews that omit identifying information regarding infant deaths compared to live births to the case review team.
 - (c) Developing abstracts of sample infant mortalities and comparative live births that omit identifying information and that identify social, economic, cultural, safety, and health system factors that are associated with infant mortality rates in each community. The number of abstracted cases that must be conducted by each participating coalition shall be determined by a standard research methodology developed in conjunction with a public university or college having expertise in public health.
 - (d) Presenting abstracts that omit identifying information to its case review team at least quarterly for their review and discussion.

- (4) Develop findings and recommendations for interventions and policy changes to reduce racial disparities in infant mortality.

SECTION 7. Grant Awards. - The department shall award annual grants, subject to specific appropriations by Congress. The department shall award at least one grant to a coalition representing urban communities and at least one grant to a coalition representing rural communities. Grant awards shall be given to those coalitions representing communities with the least infant mortality rates.

SECTION 8. Evaluation and Reports. - The department shall conduct an annual evaluation of the implementation of the initiative describing which areas are participating in the initiative, the number of reviews conducted by each participating coalition, grant balances, and recommendations for modifying the initiative. All participating coalitions shall produce a report on their collective findings and recommendations within one (1) year following the effectivity of this law, to the President of the Senate, the Speaker of the House of Representatives, and the Secretary of Health.

SECTION 9. Immunity. — Each participating coalition, its case review team members, and professional staff are immune from liability for actions in good faith taken pursuant to this Act.

SECTION 10. Implementing Rules. - The Department of Health shall develop the implementing rules and regulations necessary to effectively implement the provisions of this Act, in collaboration with other concerned agencies of the government, thirty (30) days after the effectivity of this Act.

SECTION 11. Authorization of Appropriation. – For the purposes of this Act, the sum of Twenty Million Pesos (P20,000,000) for the current fiscal year shall be allotted to the Department of Health for the proper carrying out of this Act, and such other sums as may be necessary for each succeeding fiscal year.

SECTION 12. Separability Clause. - If any provision of this Act is declared unconstitutional or invalid, the remainder thereof not affected thereby shall continue to be in full force and effect.

SECTION 13. Repealing Clause. - All laws, decrees, orders, rules and regulations or other issuance or parts thereof inconsistent with the provision of this Act are hereby repealed, amended or modified accordingly.

SECTION 14. Effectivity. - This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.

Approved,