EXPLANATORY NOTE

Article 11, Section 15, of the Constitution explicitly provides that "the State shall protect and promote the right to health of the people and instill health consciousness among them."

A "public health emergency" is defined by the World Health Organization (WHO) as "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 facilities or incidents or permanent or long-term disability (2001). Generally, a declaration of a state of public health emergency permits a head of state to suspend certain state regulations and modify the functions of state agencies to address the situation, be it an epidemic or pandemic.

The WHO denotes that an epidemic is "the occurrence in a community or region of cases of an illness, specific health-related behavior, or other health-related events clearly in excess of normal expectancy. The community or region and the period in which the cases occur are specified precisely." And a pandemic "is the worldwide spread of a new disease."

Human history has seen the occurrence of disease outbreaks which have claimed huge parts of the population. Across the centuries, humanity has been hit with plagues, epidemics and pandemics of diseases such as yellow fever, influenza, poliomyelitis, cholera, dengue fever, Chikunguya, Ebola, Zika, Acquired Immuno-Deficiency Syndrome (AIDS), Severe Acute Respiratory Syndrome (SARS), Middle East Respiratory Syndrome (MERS) and the current Corona Virus Disease (COVID-19) pandemic.

The American scientist Benjamin Franklin coined the saying that "an ounce of prevention is worth a pound of cure." Hence this measure is in furtherance of that adage and is a major improvement of the late Senator Miriam Defensor-Santiago’s measure, Senate Bill No. 1573 or the Pandemic and All-Hazards Preparedness Act.
This bill is built upon such wisdom by seeking to strengthen national response and preparedness for public health emergencies, such as those which result from natural calamities and severe weather events, recent outbreaks and pandemics, bioterrorism, mass casualties, chemical and radiation emergencies.

Preparedness refers to activities and measures taken in advance to ensure effective response to the impact of hazards, including the issuance of timely and effective early warnings and the temporary evacuation of people and property from threatened locations. It also refers to pre-disaster activities, including an overall strategy, policies, and institutional and management structures, that are geared to helping at-risk communities safeguard their lives and assets by being alert to hazards and taking appropriate action in the face of an imminent threat or the actual onset of a disaster.

This bill gives the Department of Health the appropriate mandate to undertake measures, such as evaluation, planning, organizing, and training, to improve national preparedness for public health emergencies.

In view of the foregoing, the immediate passage of this measure is earnestly sought.

Approved,

RUTH MARIANO-HERNANDEZ
2nd District, Laguna
Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
First Regular Session

HOUSE BILL No. 6671

Introduced by REP. RUTH MARIANO-HERNANDEZ

AN ACT
STRENGTHENING THE COUNTRY’S NATIONAL PREPAREDNESS AND RESPONSE TO
PUBLIC HEALTH EMERGENCIES

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 "National Public Health
Emergencies and Health Hazards 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 the following:

(A) Provisions for continually increasing the country’s public health care
infrastructure, increase and protection of all human resources in public hospitals,
preparedness, response capabilities, and surge capacity of ambulatory care facilities,
dental health facilities, and critical care service systems;
(B) Plans and programs 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 and paramedic systems;

(C) Provisions to reinforce the respect of human rights, including the unique needs of senior citizens, women, children, and individuals with disabilities in a public health emergency;

(D) Strategic initiatives in research and development 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 Health Emergencies — An inter-agency Task Force on Public Health Emergencies under the control and supervision of the Secretary of Health shall be established in order to conduct research necessary for the creation of the Strategy.

(A) The Task Force shall be composed of competent representatives from the following:

(1) Department of Health (DOH);
(2) Department of Science and Technology (DOST);
(3) Department of Budget and Management (DBM);
(4) Department of Information and Communications Technology (DICT);
(5) Department of Transportation (DOTr);
(6) Department of Interior and Local Government (DILG);
(7) Department of Labor and Employment (DOLE);
(8) Department of Social Welfare and Development (DSWD);
(9) Department of Agriculture (DA); and,
(10) Philippine National Red Cross (PNRC).

(B) 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 a timely and appropriate manner as is practicable, including from the time a public health threat is identified;

(4) Ensure that coherent health and medical information distributed by the government during a public health emergency is delivered in a manner that considers the range of communication needs of the intended recipients, including at-risk individuals;

(5) Maintain and implement a data-driven response that is medical- and science-based to any sort of public health emergency, including epidemics, pandemics, and the like;

(6) Create a coherent operational plan in case of the need to cancel any or all modes of public transportation. Ensure that health care workers and relevant frontline personnel in all public and private hospitals, quarantine facilities and essential work stations are not hampered by mobility limitations due to a public health emergency. Mercy and/or sweeper flights should be provided to (a) repatriate overseas Filipinos in distress, (b) repatriate foreign nationals to their countries of origin, and (c) increase mobility of health care workers across the country; and,

(7) Ensure the unhampered nationwide flow of food and medical supplies, medicines, equipment and related essential manufactures and products; and,

(8) Provide national government support to substantially capacitate local government units (LGUs) in all levels to aid public health care facilities and the general populace in their respective jurisdictions.

SECTION 5. Creation of Medical Reserve Corps. - The Secretary of Health shall establish a medical reserve corps composed of volunteer health workers and professionals. The Medical Reserve Corps shall be called to duty during public health emergencies.

SECTION 6. Authorization of Appropriations. - To carry out the provisions of this Act, an annual amount of at least Ten Billion Pesos (P10,000,000,000.00) shall be included in the General Appropriations Act. Additional sums as may be necessary for each fiscal year are authorized to be appropriated by Congress.

SECTION 7. Separability Clause. - If any provision or part thereof is held invalid or unconstitutional, the remainder of the law or the provision not otherwise affected shall remain valid and subsisting.
SECTION 8. **Repealing Clause.** - Any law, presidential decree or issuance, executive order, letter of instruction, memorandum circular, administrative order, rule, or regulation contrary to or inconsistent with the provisions of this Act is hereby repealed, modified, or amended accordingly.

SECTION 9. **Effectivity Clause.** - This Act shall take effect fifteen (15) days after its publication in the *Official Gazette* and a newspaper of general circulation.

*Approved;*