

CITY ORDINANCE NO. 17-11 (GENERAL)

Author

: SP Member Kerby J. Salazar

Chair, Committee on Health

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: SP Member Vivencio Q. Lozares, Jr.

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SP Member Jowie S. Carampot SP Member Walter C. Martinez

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SP Member Constancia S. Felizardo

CREATING THE CITY EPIDEMIOLOGY AND SURVEILLANCE UNIT (CESU) AND DIRECTING ALL STAKEHOLDERS TO REPORT ALL NOTIFIABLE DISEASES AND OTHER IMPORTANT HEALTH DATA, NECESSARY IN THE PRIORITIZATION AND IMPLEMENTATION OF HEALTH PROGRAMS AND PROJECTS IN THE CITY OF GENERAL TRIAS, AND CLARIFYING THE MANDATE, FUNCTIONS, MANPOWER AND LOGISTIC REQUIREMENTS OF SUCH UNIT.

WHEREAS, the City of General Trias is committed to the national mission of providing quality, equitable and accessible health services for all as a fundamental human rights of every person;

WHEREAS, as provided in Section VI-C.4 of Administrative Order No. 2010-0036, health-related Millennium Development Goals (MDG) of the Aquino Health Agenda (AHA) shall be attained by ensuring public health measures to prevent and control communicable diseases, adequate surveillance and preparedness for emerging and reemerging diseases;

WHEREAS, also provided in the abovementioned Administrative Order, particularly Section V.1, the Department of Health shall engage local health systems (provinces and their component LGUs, cities, private and public health care providers, local partners, and families) through the formation of regional clusters based on their catchment areas as also supported by Section VII-C.4 which states that "Local Government Units are encouraged to organize Community Health Teams and Service Delivery Networks in partnership with the private sector/s for effective delivery of health service packages, and whenever appropriate, contract private providers to supplement available services or provide other services that cannot be delivered by existing public providers";

WHEREAS, Resolution 48.13 (1995) of World Health Assembly (WHA) urges Member States to strengthen active surveillance, improve infectious disease diagnostic capacity, enhance communications, encourage antimicrobial sensitivity testing, foster rational antimicrobial practices, increase skilled staff in epidemiology efforts, promote applied research and accurate and timely reporting;

WHEREAS, Article 5-1 (Surveillance) of International Health Regulations (IHR) of 2005 urges Members States to develop, strengthen and maintain as soon as possible but no later than five years from the entry into forces of these Regulations, the capacity to detect, assess, notify and report events in accordance with these Regulations;

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WHEREAS, Republic Act 3573 (Law on Reporting of Communicable Disease-an Act Providing for the Prevention and Suppression of Dangerous Communicable Disease, November 26, 1929) requires all individual and health facilities to report notifiable diseases to local and national health authorities;

WHEREAS, under Administrative Order No. 2005-0023 (Implementing Guidelines for Formula One for Health as Framework for Health Reforms) states that "Disease Surveillance shall be intensified to ensure that the targets for disease elimination, prevention and control are attained";

WHEREAS, under Administrative Order No. 2007-0036 (Guidelines on the Philippine Integrated Disease Surveillance and Response (PIDSR) Framework) provides a framework for PIDSR to guide its implementation at all levels of the health care delivery system as well as both the public and private sectors;

WHEREAS, Republic Act 10121 (Philippine Disaster Risk Reduction and Management Act of 2010) stipulates the different measures that the national, regional, local government need to plan and implement in preparation for and response to an emergency and disaster, Section 9 (d) to develop and ensure the implementation of national standards in carrying out disaster risk reduction programs including preparedness, mitigation, prevention, response and works from data collection and analysis, planning, implementation, monitoring and evaluation. Section 9 (k) ensures that government agencies and LGUs give top priority and take adequate and appropriate measures in disaster risk reduction and management. The organization at the Local Government Level, Section 11 states that the existing Provincial, City and Municipal Disaster Coordinating Councils, and for the Barangay Development Councils which shall serve as the Local Disaster Risk Reduction and Management Council (LDRRMC);

WHEREAS, the City Health Office had different tasks on Surveillance in Post Extreme Emergencies and Disaster (SPEED) manual and Hazard Prevention and Vulnerability Reduction Plan in Health and Health Hazards of the Health Emergency and Management System (HEMS);

WHEREAS, diseases surveillance is a critical component of public health systems, providing essential information for the optimal health care delivery and cost effective disease control and prevention strategies;

WHEREAS, timely reporting of vital health information will help the policy makers to formulate strategies for appropriate interventions or actions to address health problem;

WHEREAS, a functional health or disease surveillance system is useful for priority setting, planning resource mobilization and allocation, prediction and early detection of epidemics and monitoring and evaluation of health programs;

WHEREAS, City Epidemiology and Surveillance Unit (CESU) should provide "total quality" epidemiologic services and these include services related to health information systems, outbreak investigations and control, health status assessment, program monitoring and evaluation, and health education/training;

WHEREAS, the Sangguniang Panlungsod believes that an effective disease control and prevention can be realized with a functional disease and surveillance system.

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NOW, THEREFORE, on motion of SP Member Kerby J. Salazar duly seconded by all Members present,

Be it ordained by the Sangguniang Panlungsod of General Trias in session assembled, that:

SECTION 1. TITLE. This ordinance directing all stakeholders to report all notifiable diseases and other important health data necessary in prioritizing and implementation of health programs and projects in the city shall be known as the "City of General Trias Epidemiology and Surveillance Unit or CESU Ordinance".

SECTION 2. DEFINITION OF TERMS. As used in this Ordinance, the following terms shall mean:

- a. Epidemiology refers to the study of the distribution and determinants of health related states or events in specified populations, and the application of this study to the control of the health problems;
- b. CESU refers to the City Epidemiology and Surveillance Unit;
- c. Notifiable Disease refers to disease that, by virtue of Administrative Order No. 2008-0009, must be reported to the public health authority in the pertinent jurisdiction where the diagnosis is made. Such is categorized into two according to the urgency of reporting namely:
 - c.1. Immediately Notifiable Disease/Syndrome, Events and Conditions (Category I):

Nan	Name of Diseases/Syndrome		ICD10 Code	
1.	Acute Flaccid Paralysis (AFP) syndrome			
2.	Adverse Event Following Immunization (AEFI) syndrome			
3.	Anthrax	A22		
4.	Human Avian Influenza	J10		
5.	Measles	B05		
6.	Meningococcal Disease	A39		
7.	Neonatal Tetanus	A33		
8.	Paralytic Shellfish Poisoning	T61.2		
9.	Rabies	A82		
10.	Severe Acute Respiratory Syndrome	UO4.9		
11.	Outbreaks			
12.	Clusters of Diseases			
13.	Unusual Diseases or Threats			
c.2.	Weekly Notifiable Disease/Syndrome (Category II):		/	

Name of Diseases/Syndrome		ICD10 Code	
1.	Acute Bloody Diarrhea syndrome		
2.	Acute Encephalitis syndrome		
3.	Acute Hemorrhagic Fever syndrome		
4.	Acute Viral Hepatitis	B15-B17	
5.	Bacterial Meningitis	A87	
6.	Cholera	A00	
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7.	Dengue	A90-A91
8.	Diphtheria	A36
9.	Influenza-like Illness	J11
10.	Leptospirosis	A27
11.	Malaria	B50-B54
12.	Non-Neonatal Tetanus	A35
13 .	Pertussis	A37
14.	Typhoid and Paratyphoid Fever	A01

d. Disaster - a serious disruption of the functioning of a society causing widespread human, material or environmental losses, which exceed the ability of the affected society to cope using only its own resources;

e. Emergency - any occurrence which requires immediate response;

f. Hazards – any phenomenon which has the potential to cause disruption or damage to human and the environment; and

g. Stakeholders - refer to health facilities such as hospitals, lying-in clinics, infirmaries, medical/surgical clinics, health centers, laboratories and all medical and nonmedical entities such as medical doctors, nurses, midwives, allied medical professionals and barangay health workers.

SECTION 3. SCOPE AND COVERAGE. All health facilities, such as Barangay Health Stations/City Health Offices, private/government hospitals, lying-in clinics, infirmaries, medical/surgical clinics, health centers, laboratories and all medical and nonmedical entities such as medical doctors, nurses, midwives, allied medical professionals and barangay health workers are hereby mandated to report all attended cases listed in Section 7 of this Ordinance either directly to the CESU or through their respective hospital, city or barangay surveillance coordinators.

SECTION 4. THE HEALTH SURVEILLANCE UNIT. The Health Surveillance Unit of the City of General Trias shall be called the City Epidemiology and Surveillance Unit (CESU).

SECTION 5. COMPOSITION. The City Epidemiology and Surveillance Unit (CESU) shall be composed of the following:

- a. City Epidemiology Surveillance Officer (Nurse II);
- b. Health Education Promotion Officer (Nurse II);
- c. City Epidemiology Nurse;
- d. City Epidemiology Clerk;
- e. Encoder;
- f. Disease Surveillance Coordinator (in every Hospital in the City of General Trias);
- g. Barangay Disease Surveillance Coordinator (in every Barangay); and
- h. Others, Disease Surveillance Coordinator (in every Private Clinic).

SECTION 6. DUTIES AND RESPONSIBILITIES. The City Epidemiology and Surveillance Unit (CESU) shall be responsible for collecting, analyzing and disseminating reliable and timely information on health status, investigate disease outbreaks and other threats to public health.

It shall develop and maintain surveillance and other health information system that generates accurate, reliable and timely information for decision making.

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It shall establish network with sentinel hospitals, clinics and other surveillance units and shall support the surveillance activities and programs of the Provincial, Regional and National Epidemiology and Surveillance Unit.

The City Epidemiology Surveillance Officer (Nurse II) shall:

- 1. Coordinate with hospitals, clinics and Barangay Disease Coordinators for the systematic and timely reporting of reportable diseases and other relevant health data,
- 2. Review pertinent hospital records and laboratory tests, verifying diagnosis bases on standard case definition and interview patients for more specific information that is deemed necessary in controlling possible outbreak,
- 3. Develop, maintain and evaluate public health surveillance systems in coordination with other LGUs, Government and Nongovernment Agencies and Regional or Central Health Agencies,
- 4. Train or educate health personnel in epidemiologic methods including data collection, analysis and presentation,
- 5. Collect, process, analyze and disseminate information on vital health statistics and programs,
- 6. Develop training materials and information packages on Epidemiology and Public Health, and
- 7. Collect, update and maintain reference materials on Epidemiology and Public Health;

The Health Education Promotion Officer (Nurse II) shall:

- 1. Assess needs, assets and capacity for Health Education,
- 2. Plan Health Education,
- 3. Implement Health Education,
- 4. Conduct evaluation and research related to Health Education,
- 5. Administer and manage Health Education,
- 6. Serve as a Health Education Resource Person, and
- Communicate and advocate for health and Health Education;

The City Epidemiology Nurse shall:

- 1. Implement Public Health Surveillance,
- 2. Monitor local health personnel conducting disease surveillance,
- and/or assist other health personnel in 3. Conduct investigation,
- 4. Assist in the conduct of rapid surveys and surveillances during disasters,
- 5. Assist in the conduct of surveys, program evaluations, and other epidemiologic studies,
- 6. Assist in the conduct of training courses in Epidemiology,
- 7. Assist the City Epidemiologist in preparing the annual work and financial plan for the CESU, and
- 8. Be responsible for inventory and maintenance of CESU equipment;

The City Epidemiology Clerk shall:

- 1. Process voucher and other papers,
- 2. File reports and correspondences,
- 3. Assist in the conduct of training courses in Epidemiology,



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- 4. Assist in conducting disease surveillances, outbreak investigations and surveys, and
- 5. Be responsible for inventory and maintenance of CESU supplies and materials.

The Encoder shall be responsible for data entry and generate computer outputs of all reportable data for easy analysis of the end users.

The Hospitals, Private Clinics and Barangay Surveillance Coordinators shall be responsible for active case finding and investigation of all reportable cases and other health information in hospital and community respectively. They shall be responsible for the accomplishment and submission of surveillance forms to the CESU at the City Health Office.

The assistant officers and coordinators shall help their respective health officer or coordinator in performing their respective tasks and shall act as the alternate whenever necessary.

SECTION 7. The City Epidemiology and Surveillance Unit (CESU) will be guided by the following legal issuance/s:

- 1. Republic Act 3573 (Law on Reporting of Communicable Disease) requires all individuals and health facilities to report notifiable diseases to local and national authorities;
- 2. Administrative Order No. 2010-0036 (Implementing Guidelines for the Aquino Health Agenda (AHA) as framework of Unified Health Care, Section VI-C.4) states that health-related Millennium Development Goals (MDG) of the Aquino Health Agenda (AHA) shall be attained by ensuring public health measures to prevent and control communicable diseases, adequate surveillance and preparedness for emerging and reemerging diseases;
- 3. Administrative Order No. 2005-0023 (Implementing Guidelines for Formula One for Health as framework for Health Reforms) states that "Disease surveillance shall be intensified to ensure that the targets for disease elimination, prevention and control are attained"; and
- 4. Administrative Order No. 2007-0036 (Guidelines on the Philippine Integrated Disease Surveillance and Response (PIDSR) Framework). This Administrative Order provides the framework for PIDSR to guide its implementation at all levels of the health care delivery system as well as both the public and private sectors.

SECTION 8. REPORTABLE HEALTH DATA. The following health data shall be reported to the City Health Office through the City Epidemiology and Surveillance Unit (CESU).

- 1. All notifiable diseases as listed in the Administrative Order No. 2008-0009 - Adopting the 2008 Revised List of Notifiable Diseases, Syndromes, Health Related Events and Conditions;
- 2. Deaths and cause of death;
- 3. Birth deliveries attended in the community and birthing facilities;
- 4. Immunizations given at birth;
- 5. Newborn screening done at health facilities;
- 6. Birth defects seen at the community and health facilities; and
- 7. Other health data which may be prescribed by the City Epidemiology and Surveillance Unit (CESU), Provincial Epidemiology and Surveillance Unit (PESU), Regional Epidemiology and Surveillance Unit (RESU) or National Epidemiology Center Department of Health (NEC-DOH).

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SECTION 9. GUIDELINES IN REPORTING. The time frame for reporting health data to the City Epidemiology and Surveillance Unit (CESU) shall be the following:

- Notifiable disease shall be reported based on the guidelines set by Administrative Order No. 2008-0009 – Adopting the 2008 Revised List of Notifiable Diseases, Syndromes, Health Related Events and Conditions;
- 2. Death must be reported by relatives or attending medical or nonmedical personnel within 48 hours or within 72 hours if death occurs on a Friday. If the cause of death however is due to a suspected communicable disease or a medico legal case, it should be reported as soon as possible within 24 hours;
- 3. Birth attended at birthing facilities shall be reported on a monthly basis. Birth attended at home or in the community however, shall be reported by traditional birth attendant, midwife, nurse, doctor or relative to the Barangay Surveillance Coordinator or to the nearest Health Center as soon as possible or within 48 hours after birth or within 72 hours if birth occurs on a Friday;
- 4. Immunization and newborn screening done at health facilities shall be reported on a monthly basis; and
- 5. Birth defects seen at birthing facilities or in the community must be reported as soon as possible to the CESU or to the nearest health center.

SECTION 10. MANPOWER. The City Epidemiology Surveillance Officer (Nurse II), Health Education Promotion Officer (Nurse II), City Epidemiology Nurse, City Epidemiology Clerk and Encoder shall be initially designated by the City Health Officer and will be coming from the regular personnel of the health office. The City Government of General Trias must allocate funds to a dedicated City Epidemiology Surveillance Officer (Nurse II) preferably with training on Basic Epidemiology and Public Health Surveillance, Electronic PIDSR (ePIDSR); City Nurse Epidemiologist with training on Basic Epidemiology and Public Health Surveillance, ePIDSR; City Clerk Epidemiologist with training on Basic Epidemiology and Public Health Surveillance, ePIDSR; and Encoder for the City Epidemiology and Surveillance Unit (CESU).

All health facilities such as hospitals, infirmaries and birthing facilities shall designate the Health/Disease Surveillance Coordinators and Assistant Coordinators who shall become members of General Trias CESU.

All Barangay Chairperson shall designate the Barangay Health Disease Surveillance Coordinators and Assistant Coordinators and shall likewise become part of General Trias CESU.

SECTION 11. AUTHORITY TO REVIEW HEALTH RECORDS. The City Epidemiology Surveillance Officer or his/her authorized representative, upon written recommendation or order of the City Health Officer shall be authorized to review the chart or medical and laboratory records of patients suspected/confirmed to have communicable disease or cases with potential or significant impact on the health status of the people of the City of General Trias. Records review however, shall be treated with utmost confidentiality and shall never be used other than that for disease or health surveillance or investigation.

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REPUBLIC OF THE PHILIPPINES REGION IV -A (CALABARZON) PROVINCE OF CAVITE CITY OF GENERAL TRIAS

OFFICE OF THE SANGGUNIANG PANLUNGSOD

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SECTION 12. LOGISTICS. In order for the CESU staff to function efficiently and effectively, the unit should be provided with the following:

1. An officer equipped with:

- a. Computer and printer with access to internet,
- b. Phone and fax machine,
- c. Cellular phone/Handheld Radio or some mobile communication system, and
- d. Refrigerator with freezer for storage of specimen;
- 2. With regular access to the following:
 - a. Reproduction equipment (e.g. photocopier, mimeograph, duplo machine),
 - b. Documentation equipment (e.g. digital camera, tape recorder, typewriter), and
 - c. Presentation equipment (e.g. laptop computer, LCD projector);
- 3. Office and laboratory supplies and materials; and
- 4. Vehicle with assigned driver.

SECTION 13. CAPABILITY TRAINING OF CESU STAFF. In order to upgrade their capabilities, CESU staff should be allowed to attend appropriate training courses and participate in the Annual/Zonal Field Epidemiology Training Program Scientific Conference and upgrading seminars, provided that their attendance in such courses does not disrupt the delivery of vital health services.

SECTION 14. PENAL PROVISIONS. The following administrative sanctions shall be imposed upon individuals or institutions or facilities found to have violated the provision of this Ordinance:

1. Against Public Employees. In accordance with the Administrative Code and Pertinent Civil Service Rules and Regulations, erring government employees found to be liable and depending on the gravity of the violation shall be imposed the appropriate penalty by the disciplining authority:

First Offense

Reprimand,

Second Offense

Suspension for One (1) to Thirty (30) days,

and

Third Offense

Dismissal from office:

2. Against private individuals, health institutions/facilities. Persons/institutions/facilities who violate this Ordinance and/or its Implementing Rules and Regulations shall upon conviction be punished with the penalty of:

First Offense Second Offense Fine of Php 3 000.00,

Fine of Php 4 000.00, and

Third Offense Fine of Php 5 000.0

Fine of Php 5 000.00 and recommendation

for suspension of Business Permit,

Health and Sanitation Permit

or Occupational Mayor's Permit.

SECTION 15. APPROPRIATION. The City Health Office shall submit a work and financial plan for the CESU. The City Government of General Trias shall appropriate a budget for the effective implementation of the proposed work and financial plan from appropriation funding sources.

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SECTION 16. SEPARABILITY AND REPEALING CLAUSE. In the event that any clause, sentence, paragraph or part of this Ordinance shall be declared invalid or void, the other provisions shall not be affected thereby. All other ordinances, resolutions and pertinent rules and regulations which are inconsistent with provisions of this Ordinance are hereby repealed, amended or modified.

SECTION 17. EFFECTIVITY. This Ordinance shall take effect 15 days upon approval of the Sangguniang Panlungsod and after compliance with the posting/publication requirements as provided in the Local Government Code of 1991 (RA 7160).

ORDAINED under THIRD/FINAL READING on 18 JULY 2017.

KEREYJ, SALAZAR

JONAS GLYN P LABUGUEN

SP Member

SP Member

WALTER C. MARTINEZ

SP Member

SP Member

SP Member

CHRISTOPHER N. CUSTODIO
SP Member

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VIVENCIO Q. LOZARES, JR.

SP Member

FLORENCIO D. AYOS

SP/Member

HERNANDO M. GRANADOS

SP Member

CONSTANCIA S. FELIZARDO SP Member/LNB President

CERTIFIED TRUE AND CORRECT:

WENCESLAO P. CAMINGAY Secretary to the Sanggunian

ATTESTED:

MAURITO C. SISON
City Vice Mayor/Presiding Officer

APPROVED:

ANTONIO A. FERRER City Mayor