



Republic of the Philippines
PROVINCE OF NEGROS ORIENTAL
City of Bayawan
Office of the Sangguniang Panlungsod

EXCERPT FROM THE MINUTES OF THE REGULAR SESSION HELD BY THE CITY COUNCIL OF BAYAWAN, NEGROS ORIENTAL ON APRIL 15, 2024 AT 10:00 AM AT THE SESSION HALL, LEGISLATIVE BUILDING GOVERNMENT CENTER.

RECORD OF ATTENDANCE

HON. HENRY E. CARREON, JR.	Vice Mayor & Presiding Officer	Present
HON. MARK FIDENCIO L. AURELIA		On Leave
HON. NARCISO N. CASIPONG		Present
HON. RUSMAR IAN D. TIJING		Present
HON. MERLITA R. GAUDIEL		Present
HON. NICO ANGELO L. LIM		Present
HON. ROLANDO B. ABRASALDO		Present
HON. KARL T. SARAÑA		Present
HON. LUIS J. SUMALPONG		Present
HON. FELIPE O. SANTIAGO, JR.		Present
HON. MA. LUCIANA T. TIZON		Present
HON. SEVERINO SALVADOR M. CAPULSO	LNMB President	Present
HON. EDILBERT J. BOLTIADOR	SK Federated President	Present

RESOLUTION NO. 338

“WHEREAS, pursuant to Section 16 (General Welfare), Section 26 and Section 447 (a)(1) of the Local Government Code of 1991 mandated the Local Government Units to use its necessary and appropriate powers to promote the general welfare of its people, particularly by promoting their health and safety and enhance their right to a balanced ecology;

“WHEREAS, Section 8 of R.A 11332 states the “Establishment of Epidemiology and Surveillance Units”. The Department of Health, in coordination with Local Government Units, shall ensure that the Epidemiology and Surveillance Units (ESUSs) are established and functional at all levels of Department of Health and its local counterparts, and public and private health facilities and laboratories, as well as seaports and airports in all provinces, cities and municipalities throughout the country;

“WHEREAS, the State also recognized the disease surveillance and response system of the Department of Health (DOH) and its local counterparts, as the first line of defense to epidemics and health events of public health concern that pose a high risk to public health and security;

“WHEREAS, this August Body believes that effective disease control and prevention can be realized with a functional disease and surveillance system;

“WHEREFORE, On motion of Honorable Councilor Mark Fidencio L. Aurelia and duly seconded by Honorable Severino Salvador M. Capulso, Liga Ng Mga Barangay President, the Council

“RESOLVED, To enact, as it hereby enacts the following ordinance:

ORDINANCE NO. 14

**AN ORDINANCE ESTABLISHING THE CITY
EPIDEMIOLOGY AND SURVEILLANCE UNIT IN THE CITY
OF BAYAWAN AND PROVIDING FUNDS THEREOF**

Be it ordained that:

Section 1. Title – This Ordinance shall be known as the “City Epidemiology and Surveillance Unit of the City of Bayawan.”

Section 2. Declaration of Principles and Policies - It is hereby declared the policy of the City to protect and promote the right to health of the people and instill health consciousness among them. It shall endeavor to protect the people from public threats through the efficient and effective disease surveillance of notifiable diseases including emerging and re-emerging infectious diseases, diseases for elimination and eradication, epidemics, and health events including chemicals, radio-nuclear and environment agents of International Health Regulations (IHR) of the World Health Organization (WHO). The city recognizes epidemics and other public health emergencies as threats to public health and national security, which can undermine the social, economic, and political functions of the States;

Section 3. Definition of Terms – For purposes of the Ordinance, the following terms are defined:

a. BESU – Barangay Epidemiology and Surveillance Unit;

b. CESU – City Epidemiology and Surveillance Unit;

c. Epidemiology – refers to the study of the distribution and determinants of health-related states or events in a specified population and the application of this study to the control of health problems;

d. Notifiable Diseases – refer to a disease that by virtue of Administrative Order No. 2008- 0009 of the Department of Health must be reported to the public health authority in the pertinent jurisdiction where the diagnosis is made. Such diseases are categorized into two according to the urgency of reporting, namely: Immediately Notifiable Disease or Syndrome Events and Conditions (Category I) and Weekly Notifiable Disease or Syndrome (Category II). Such disease includes:

A. Immediately Notifiable Disease/Syndrome /Events and Conditions (Category I)

- | | |
|--|----------|
| 1. Acute Flaccid Paralysis | 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. Severe Acute Respiratory Syndrome (SARS) | U04.9 |
| 10. Rabies | A82 |
| 11. Outbreaks | |
| 12. Clusters of Disease | |
| 13. Unusual Diseases or Threats | |

B. Weekly Notifiable Disease or Syndrome (Category II)

- | | |
|----------------------------|----------|
| 1. Acute Bloody Diarrhea | Syndrome |
| 2. Acute Encephalitis | Syndrome |
| 3. Acute Hemorrhagic Fever | Syndrome |

4. Acute Viral Hepatitis	B15- B17
5. Bacterial Meningitis	A37
6. Cholera	A30
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

e. **PESU**- refers to the Provincial Epidemiology and Surveillance Unit. It serves as the central point for data banking of health service delivery and disease surveillance systems;

f. **RESU**- Regional Epidemiology and Surveillance Unit;

g. **Stakeholders** – shall refer to health facilities, such as hospitals. Lying-in clinics, infirmaries, medical/surgical clinics, health centers, laboratories, and allied medical professionals.

Section 4. The Health Surveillance Unit- The Health Surveillance Unit of Bayawan shall be called “The City Epidemiology and Surveillance Unit” (CESU);

Section 5. Composition – The City Epidemiology and Surveillance Unit shall be composed of the following:

- (1) City Epidemiology and Surveillance Officer;
- (2) Assistant City Epidemiology and Surveillance Officer;
- (3) Encoder and record custodian;
- (4) Coordinators of each program, such as Health Emergency Management System (HEMS), Field Health Services and Information System (FHSIS) Surveillance, Maternal Child Health and Nutrition including Newborn Screening, and City Epidemiology and Surveillance Officers;
- (5) Rural Health Information System

Section 6. Duties and Responsibilities

- 1.) The City Epidemiology and Surveillance Unit shall have the following duties and responsibilities:
 - a. Be responsible for collecting, analyzing, and disseminating reliable and timely information on the health status, investigate disease outbreaks and other threats to public health;
 - b. Develop and maintain surveillance and other health information system that generates accurate, reliable, and timely information for decision-making;
 - c. Support the surveillance activities and programs of Provincial, Regional, and National Epidemiology and Surveillance Units;
- 2.) The City Epidemiology and Surveillance Officer shall have the following duties and responsibilities:

- a.) Coordinate with barangay disease coordinators for the systematic and timely reporting of reportable disease and other relevant health data;
 - b.) Review pertinent hospital records and laboratory tests, verify diagnosis based on standard case definition, and interview patients for more specific information that is deemed necessary in controlling the possible outbreak;
 - c.) Collate and analyze all reported data for review and appropriate action of the City Health Officer and other higher authorities;
 - d.) Update the City Health Officer and other higher authorities on the health status of the community;
 - e.) Submit an accurate, correct, and timely report to the Regional Epidemiology and Surveillance Unit daily for Category 1, weekly for Category 2 every Wednesday for notifiable disease and immediately whenever necessary;
 - f.) Perform other health surveillance functions which may be assigned by the City Health Officer or other local health authority;
- 3.) The Encoder shall be responsible for the encoding and generating computer outputs of all reported data for easy analysis of the end-users;
 - 4.) The City and Barangay Surveillance Coordinators shall be responsible for the active case finding and investigation of all reportable cases and other health information in the hospital and community respectively. They shall be responsible for the accomplishment and submission of surveillance forms to the PESU at the Provincial Health Office.
 - 5.) The Assistant Officer and Coordinators shall help their respective higher officers or coordinators in performing their respective tasks and shall act as the alternate whenever necessary.
 - 6.) The City Epidemiology and Surveillance Unit shall be guided by the following legal issuances among others;
 - a.) Administrative Order No. 2005- 0023 of the Department of Health (DOH), Implementation Guidelines for Formula One for Health Reforms. Section c2.c.iii. states that “Disease surveillance shall be intensified to assure that the targets for disease elimination, prevention, and control are attained.”;
 - b.) Administrative Order No. 2007- 0036 of the Department of Health (DOH) Guidelines on the Philippines Integrated Disease Surveillance and Response (PIDSRS) framework;
 - c.) Provincial Ordinance No. 2020- 007, Intensifying the precautionary measures to avert widespread contagion of COVID-19 and other Emerging Infectious Diseases in Bayawan and implementing sanctions for violations thereof and for other purposes.

Section 7. Reportable Health Data- The following health information/ data shall be reported to the City Health Office through to the City Health Epidemiology and Surveillance Unit.

- 1.) All notifiable diseases listed in Administrative Order No. 2000- 2009. (Adopting the 2000 Revised List of Notifiable Disease, Symptoms, Health Events and Conditions);
- 2.) Deaths and causes of deaths;
- 3.) Birth deliveries attended in the community and birthing facilities;
- 4.) Immunization given at birth;

5.) Newborn screening done at health facilities

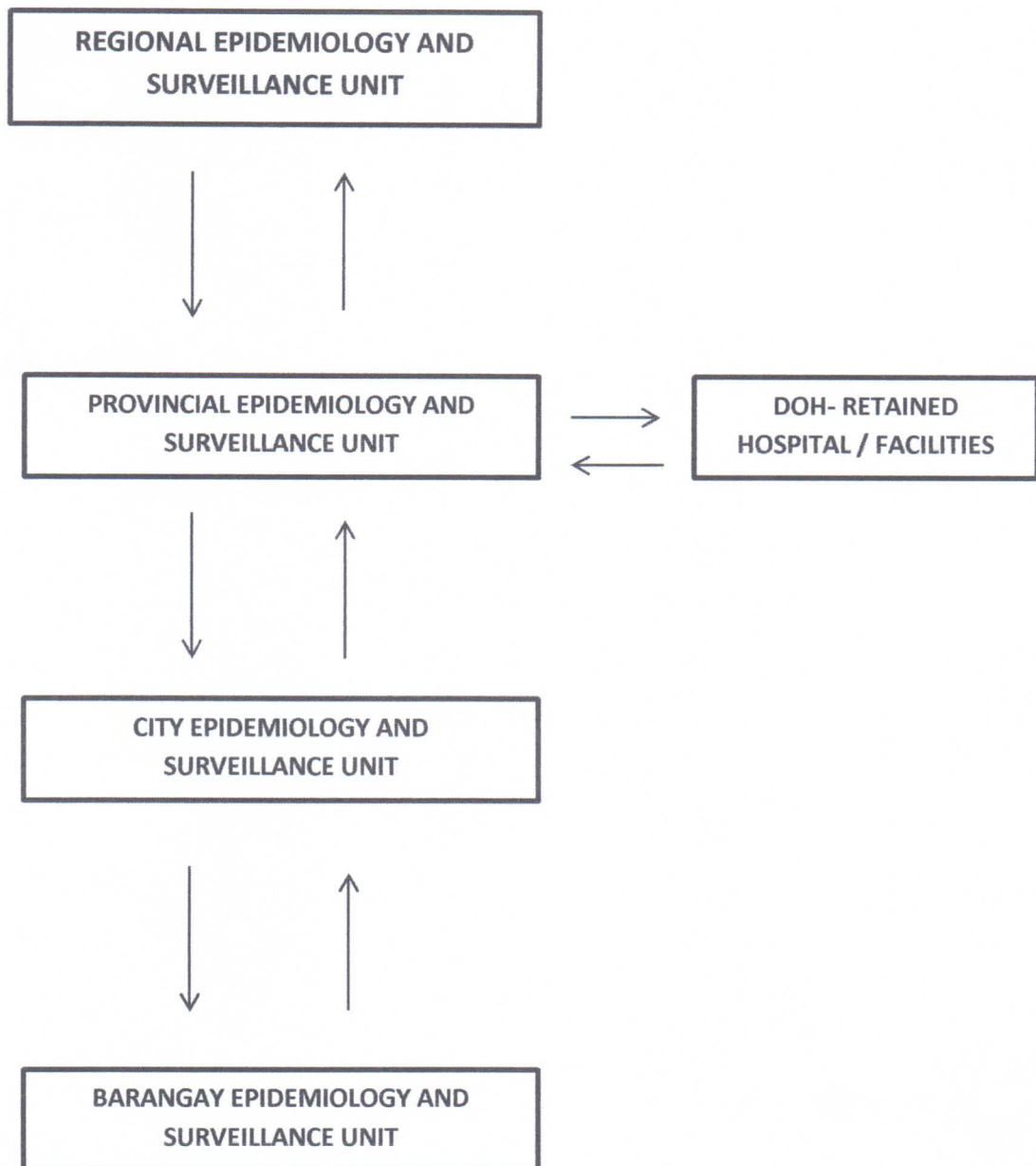
6.) Birth defects seen at the community and health facilities; and

7.) Other health data that may be prescribed by the PESU, RESU, or Epidemiology Bureau (EB)

Section 8. Coverage- All health facilities such as lying-in clinics, health centers, and all medical and non-medical entities as medical doctors, nurses, midwives, and allied medical professionals, are hereby mandated to report all attended cases listed in Section 7 of this Ordinance either directly in the CESU or through their respective barangay surveillance coordinators.

Section 9. Guidelines in Reporting – To avoid confusion and duplication of the report, the flow of reporting will be from the Barangay Epidemiology and Surveillance Unit (BESU) to the City Epidemiology and Surveillance Unit (CESU) to the Provincial Epidemiology and Surveillance Unit (PESU) and Regional Epidemiology and Surveillance Unit (RESU). Stakeholders will be reporting to their respective City Epidemiology and Surveillance Unit (CESU).

Flow of Reporting



The time frame for reporting health data to the City Epidemiology and Surveillance Unit shall be the following:

- 1.) Notifiable disease shall be reported based on the guidelines set by AO No. 2000-0009 of the Department of Health (Adapting the 2008 Revised List of Notifiable Diseases, Syndromes, Health Related Events and Condition);
- 2.) Deaths must be reported by relatives or attending medical or non-medical personnel within 48 hours, or within 72 hours if deaths occur on a Friday. If the cause of death, however, is due to a suspected communicable disease or a medical-legal case, it should be reported as soon as possible or within 24 hours.
- 3.) Birthing facilities shall be reported monthly in the community however shall be reported by a midwife, nurse, doctor, or relatives in the barangay surveillance coordinator or the nearest health center as soon as possible or within 48 hours after birth, or 72 hours if birth occurs on a Friday;
- 4.) Immunization and newborn screening are done at health facilities shall be reported monthly;
- 5.) Birth defects seen at birthing facilities or in the community must be reported as soon as possible to the PESU or the nearest health center.

Section 10. Manpower - The City Epidemiology Surveillance Officer (CESO), the Assistant City Epidemiology and Surveillance Unit, and the encoder shall be initially designated by the City Health Officer from among the regular personnel of the City Health Office. The Local Government Unit of Bayawan, depending on the availability of funds shall hire a dedicated epidemiologist or epidemiology and surveillance-trained personnel as the City Epidemiology Surveillance Officer;

All health facilities such as hospitals, puericulture infirmaries, and birthing facilities shall designate their Health- Disease Surveillance Coordinators and Assistant Coordinators

All Barangay shall establish a functional Barangay Epidemiology and Surveillance Unit (BESU).

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 and obtain a copy thereof of the patient suspected to have a communicable disease or cases with potential or significant impact of the health status of the community. Revised and obtain copies for disease or health investigation purposes;

Section 12. Implementation Rules-The City Health Officer upon the direction of the City Mayor shall, within thirty (30) days from the enactment of this Ordinance, promulgate the rules and regulations necessary for the implementation of this Ordinance, furnishing a copy thereof the Sangguniang Panlungsod;

Section 13. Prohibited Acts - The following shall be prohibited under this IRR:

13.1. Unauthorized disclosure of private and confidential information pertaining to a patients' medical condition or treatment ;

13.2. Tampering of records or intentionally providing misinformation;

13.3. Non-operation of the disease surveillance and response systems;

13.4. Non-cooperation of the person or entities that should report and/or respond to notifiable diseases or health event of public concern.

13.5. Disclosure of confidential information to the Epidemiology Bureau and its counterparts at the regional and local levels shall not be considered a violation of this Act under this section if the disclosure was made to comply with a legal order issued by a court of law with competent jurisdiction.

Section 14. Penal Provision- The following Penalties shall be imposed upon individuals or institutions of facilities found to have violated the Internal Rules and Regulations (IRR) of the provision of this ordinance;

1.) Against Public Employees- subject to pertinent Civil Service Rules and Regulations, the imposable penalties for erring government employees are the following;

First Offense-	Reprimand
Second Offense-	Suspension for One (1) to Fifteen (15) days
Third Offense-	Suspension for Sixteen (16) to Thirty (30) days

2.) Against private individual health/ institution/ facilities;

First Offense-	fine of ₱2,000.00
Second Offense-	fine of ₱3,000.00 and suspension of the business permit to Operate or Health and Sanitary Permit or Occupational Mayor's Permit for (3) Three months
Third Offense-	fine of ₱5,000.00 and recommended for revocation of the business permit to Operate or Health and Sanitary Permit or Occupational Mayor's Permit

Section 15. Appropriation - A sum of Two Million Pesos (₱2,000,000.00) shall be appropriated for equipment, supplies, and other subsequent funding that would be under the City Health Office for the effective implementation of this Ordinance.

Section 16. Separability Clause - if any section, paragraph, sentence, clause, or portion of this Ordinance is declared invalid for any reason, other provisions not affected thereby, shall remain in full force and effect;

Section 17. Repealing Clause- All City Ordinances, Resolution as well as pertinent rules and regulations thereof which are inconsistent with the provision of this Ordinance, are hereby repealed or modified accordingly;

Section 18. Effectivity – This Ordinance shall take effect upon its approval.

“Enacted.”


* * *

I hereby certify to the correctness of the foregoing resolution


* * *

JULIUS T. ESPARTERO
Secretary to the Sangguniang Panlungsod

ATTESTED:


HENRY E. CARREON, JR.
Vice Mayor
Presiding Officer

APPROVED:


JOHN T. RAYMOND, JR.
Mayor
Date: MAY 02 2024

Copy for:

- The Honorable Provincial Board, Dumaguete City