



Republic of the Philippines
Province of Oriental Mindoro
MUNICIPALITY OF ROXAS

OFFICE OF THE SANGGUNIANG BAYAN

EXCERPTS FROM THE JOURNAL OF THE 58TH REGULAR SESSION OF THE 11TH SANGGUNIANG BAYAN OF ROXAS, ORIENTAL MINDORO HELD ON 29 AUGUST 2023, 1:00 P.M. AT THE SANGGUNIANG BAYAN SESSION HALL.

Present:

Municipal Vice Mayor Jerwin S. Dimapilis	- Presiding Officer
Councilor Robert S. Quiatchon	- Member
Councilor John John S. Yason	- Member
Councilor Lucille T. Bacay	- Member
Councilor Juan Rafael M. Talens	- Member
Councilor Robert A. Baticos	- Member
Councilor Veil Charleo B. Cusi	- Member
Councilor Marietta R. Pajila	- Member
Councilor Elmer P. Salibio	- President, Liga ng Barangay
Councilor Elmira May V. Tarac	- Member, MSKF President

Absent:

Councilor King Philip B. Dimapilis	- Member
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RESOLUTION NO. 364
Series of 2023

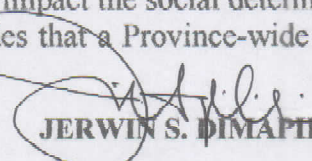
RESOLUTION ADOPTING THE MINIMUM REQUIREMENTS OF DISASTER RISK REDUCTION AND MANAGEMENT IN HEALTH SYSTEM FOR THE GOVERNANCE AND IMPLEMENTATION OF DRRM-H POLICIES AND PROGRAMS IN THE MENTAL HEALTH PSYCHOSOCIAL SUPPORT SERVICES (MHPSS)

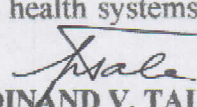
WHEREAS, on March 2019, the National Objectives for Health 2017-2022 was issued by the Department of Health were on Chapter 3, Service Delivery on the Challenges and Implications, elaborated on the country's vulnerability to disaster risks and inadequate local support to disaster preparedness, response and management which then provided its objective and target to intensify strategies to reduce public health threats by working towards institutionalizing resilient health systems, among others;

WHEREAS, on October 2019, the DOH issued Administrative Order No. 2019-0046 or the National Policy on Disaster Risk Reduction and Management in Health (DRRM-H), which necessitated the institutionalization of DRRM-H to enhance the capacities of the health system to manage health risks, and attain resilience in the communities;

WHEREAS, on the same month, then Secretary Francisco Tiongson Duque III, signed the Implementing Rules and Regulations (IRR) of RA No. 11223, in which Rule IV, Health Service Delivery, Section 17.2 provides that the DOH shall endeavor to the network contracting of the province-wide and city-wide health systems for the delivery of population-based health services including those that impact the social determinants of health. In addition, Section 17.3 (d) provides that a Province-wide and City-wide health systems shall have


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timely, effective and efficient preparedness and response to public health emergencies and disasters, and other means to ensure delivery of population-based health services;

WHEREAS, the Implementing Rules and Regulations (IRR) of RA No. 11223, under Section 19 on the Integration of Local Health Systems into Province-wide and City-wide Health System elaborated the implementation of health service delivery and health systems management. To give better emphasis, in the same Section, the health service delivery function was defined as the management of the health service delivery operations of public health programs which includes disaster risk reduction and management among others within the province/city-wide health system;

WHEREAS, the Implementing Rules and Regulations (IRR) of RA No. 11223, under Rule Xi. Miscellaneous Provisions Section 41 on Transitory Provision provides that at the minimum, managerial and technical integration shall be characterized by a functional disaster risk reduction and management in the health system among other requirements as its primary focus;

WHEREAS, the Local Government Code of 1991, Section 16, General Welfare provides that local government shall exercise powers necessary, appropriate or incidental for its efficient and effective governance, and those which are essential for the promotion of general welfare. Further, within their respective territorial jurisdictions, local government units shall ensure and support, among other things, the promotion of health and safety;

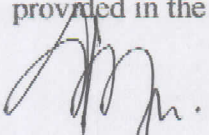
WHEREAS, the Local Government Code of 1991, Section 17, Basic Services and Facilities, also states that local governments are granted powers to discharge functions and responsibilities to provide basic services and facilities. At the province/city levels, these refer to health and social welfare services which include the implementation of programs and projects amongst many others;

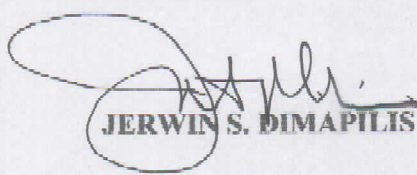
WHEREAS, with these powers, this Municipality organizes and implements a functional DRRM-H System for public health and hospital using this Ordinance's procedures and technical specifications necessary for the operationalization and transition, which considerations of the context of the "New Normal";

NOW THEREFORE, be it **RESOLVED** by the Sangguniang Bayan of Roxas, Oriental Mindoro that:

Section 1. Disaster Risk Reduction and Management in Health Planning Committee. The Disaster Risk Reduction and Management in Health (DRRM-H) System, as organized by the Municipal Health Office shall appoint or designate a DRRM-H Manager and/or create a Planning Committee to initiate functions expected of the system and provide guidance to the Local Health Board on DRRM-H System management and requirements.

Section 2. Disaster Risk Reduction and Management in Health Plan. The DRRM-H Plan shall be developed to provide strategic direction for the implementation and operationalization of the DRRM-H System. The Plan must be available, signed and approved, integrated into the Local Health and DRRM Plan among others, funded, and disseminated to stakeholders of the MHPSS. Moreover, this shall be tested through drills and exercises, revised and updated every (3) years in the event that a major disaster strikes. Further, the DRRM-H Plan may be created/enhanced based on the recommendations provided in the DRRM-H Planning Guide.


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Section 3. Health Emergency Response Team. The Health Emergency Response Team (HERT) is to be organized, trained and mobilized whenever necessary according to the needs of the affected area based on the type of events, emergencies, and disasters. In organizing the HERT, this shall comply with the minimum requirement set pursuant to the provisions of DOH AO 2018-0018, National Policy on the Mobilization of Health Emergency Response Teams:

1. Have the license to practice profession, if applicable;
2. With training in Basic Life Support and Standard First Aid;
3. Willing to be deployed in austere/severe environments anytime and anywhere;
4. Physically and mentally fit; and
5. Personnel with permanent plantilla position is a priority.

Additional training shall be required depending on the needed competency of the members of the HERTs based on their roles and functions. Moreover, there shall be a mechanism where their safety, security, and self-sufficiency are ensured.

Section 4. Health Operation Center or Emergency Operation Center. Monitoring and management of health events shall be facilitated through the establishment/activation of Operation Center/Emergency Operation Center in Emergencies and Disasters based on the latest guidelines.

Section 5. Health Emergency Commodities, Equipment, Devices, Transportation. The Municipal Health Office shall allot funds for the procurement, and make available and accessible essential health emergency commodities, equipment, and devices, including transportation in response to an emergency or disaster to deliver population-based services. These may primarily include the following but are not limited to: a. Assorted drugs/medicine; b. Kits for emergency and disaster; c. WASH Kit and Equipment; d. Nutrition Supplies; e. Medical Supplies and Equipment including PPE; f. Emergency go bag; g. Generator set/s; h. Handheld radios; i. Tents; j. Ambulance; k. Other commodities for the operationalization of the DOH Lead-Cluster (Public Health/Medical, Nutrition, Water, Sanitation and Hygiene and Mental Health and Psychosocial Support).

Section 6. Transitory Provisions. If the implementation of the present policy would require a process of transition from pre-enforcement, to facilitate anticipated reforms in functions, resources, roles and responsibilities, indicate in this section the timeline or conditions of the transition. All other requirements for the institutionalization of the DRRM-H System pursuant to the Universal Health Care law now mentioned shall be implemented.

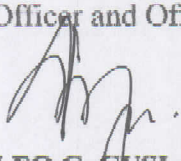
Section 7. Repealing Clause. In this section, indicate the Municipal ordinances, implementing rules and regulations, executive orders, or parts thereof, which are inconsistent with the provisions of the present policy that are repealed or modified accordingly.

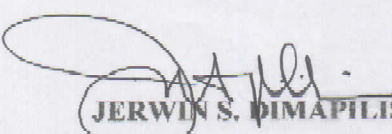
Section 8. Separability Clause. If, for any reason, any part or provision of this resolution is held unconstitutional or invalid, indicate in this section that other provisions hereof shall not be affected thereby, and shall continue to be in full force and effect.

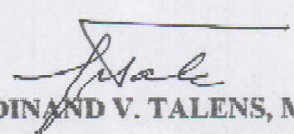
Section 9. Effectivity. This Resolution shall take effect immediately upon its approval.

RESOLVED, AS IT IS HEREBY RESOLVED, that the forgoing resolution, be approved.

RESOLVED FURTHER, that copies of this resolution be furnished to the Office of the Municipal Mayor, Office of the Municipal Disaster Risk Reduction and Management Officer and Office of the Municipal Health Officer for their information and guidance.


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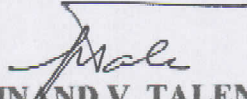

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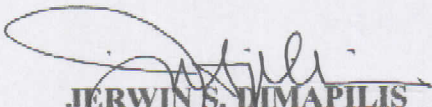
UNANIMOUSLY APPROVED.

Adopted: 29 August 2023

CERTIFIED CORRECT:


FERDINAND V. TALENS, MPA
Secretary to the Sangguniang Bayan

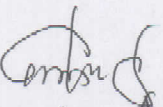
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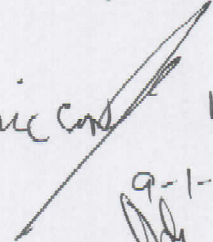

JERWIN S. DIMAPILIS
Municipal Vice Mayor

APPROVED:


LEO. G. CUSI, SR.
Municipal Mayor

mjerho:08292023


Geraldine M. Advincula
9-1-23


Lenie Cusi
9-1-23


PETER P. FUENTE
SEPT. 01, 2023 / 2:25 PM