



Republic of the Philippines
SANGGUNIANG PANLUNGSOD
City Government of Pasig

Ordinance No. 5
Series of 2020

AN ORDINANCE ESTABLISHING THE PASIG CITY HEALTH DEPARTMENT, REVISING ITS ORGANIZATIONAL STRUCTURE AND STAFFING PATTERN, DEFINING THEIR FUNCTIONS, AND APPROPRIATING FUNDS THEREOF.

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WHEREAS, pursuant to Section 478 of Republic Act No. 7160, otherwise known as the Local Government Code of 1991 ("Code"), institutionalized the position of the Health Officer in every city with the main mandate of providing assistance and support to the Mayor to promote the health of the people in the City;

WHEREAS, the Code expressly authorizes the local government divisions to create such other offices as maybe necessary to carry out the purposes of the City Government, in accordance with law;

WHEREAS, since the establishment of the Pasig City Health Office, the Pasig City has gone through massive changes in population to substantive growth in the economy, and in order to fix and organize the current structure this compelled the city to modify some components of its organizational structure to address the accompanying expansion of its health services and respond to the changing needs of the constituents;

WHEREAS, in order to ensure the continues provision of direct of primary preventive and protective public health services in the city, there is a need to establish a Pasig City Health Department, define and rationalize its duties, functions and responsibilities, create an organizational structure, staffing pattern and upgrade its *plantilla* positions.

**NOW, THEREFORE,
BE IT ORDAINED BY THE CITY COUNCIL OF PASIG CITY IN
REGULAR SESSION ASSEMBLED:**

SECTION 1. PASIG CITY HEALTH DEPARTMENT – The Pasig City Health Department (PCHD) is hereby established as the main direct provider of effective, efficient and economical primary and protective health services to the constituents and to the Pasig City Government.

SECTION 2. PCHD REORGANIZATION – The PCHD is hereby reorganized as follows:



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2.1 There shall be in the PCHD three (3) offices namely: Health Emergency Management Office (HEMO), Health Education and Promotions Office (HEPO), and the Medical Supplies Depot (MSD); four (4) divisions, namely: Policy , Planning and Statistics Division (PPSD), Finance and Administration Division (FAD), Health Care Regulation and Enforcement Division (HCRED), and Health Field Operations Division (HFOD); and shall have three (3) clusters namely: Health Protection Cluster (HPC), Family Health Cluster (FHC), and Non-Communicable Diseases Cluster (NCDC);

2.2 Unless amended, changed or modified under Section 2 hereof the offices, divisions, and clusters of PCHD and their functions under existing law, ordinances and issuances shall subsist as constituted and provided therein. The PCHD Head shall be assisted by an Assistant Department Head for Administrative and Technical and an Assistant Department Head for Program Management;

2.3 The City Health Officer shall supervise the three (3) offices namely: Health Emergency Management Office (HEMO), Health Education and Promotions Office (HEPO), and the Medical Supplies Depot (MSD);

2.4 The Assistant City Health Officer for Administrative and Technical shall supervise the four (4) divisions, namely: Policy , Planning and Statistics Division (PPSD), Finance and Administration Division (FAD), Health Care Regulation and Enforcement Division (HCRED), and Health Field Operations Division (HFOD);

2.5 The Assistant Health Officer for Program Management shall supervise the three (3) clusters namely: Health Protection Cluster (HPC), Family Health Cluster (FHC), and Non-Communicable Diseases Cluster (NCDC);

SECTION 3. STAFFING PATTERN AND ORGANIZATIONAL STRUCTURE.-

The total *plantilla* positions of the PCHD shall have 1,502 positions. The positions in the Pasig City Health Office (CHO) shall be abolished except those positions already occupied. As such, filling the position in the PCHD shall give preferential accommodation to the regular employees and priority to casual employees of the CHO.

3.1 The restructured PCHD organizational chart shall be as follows:



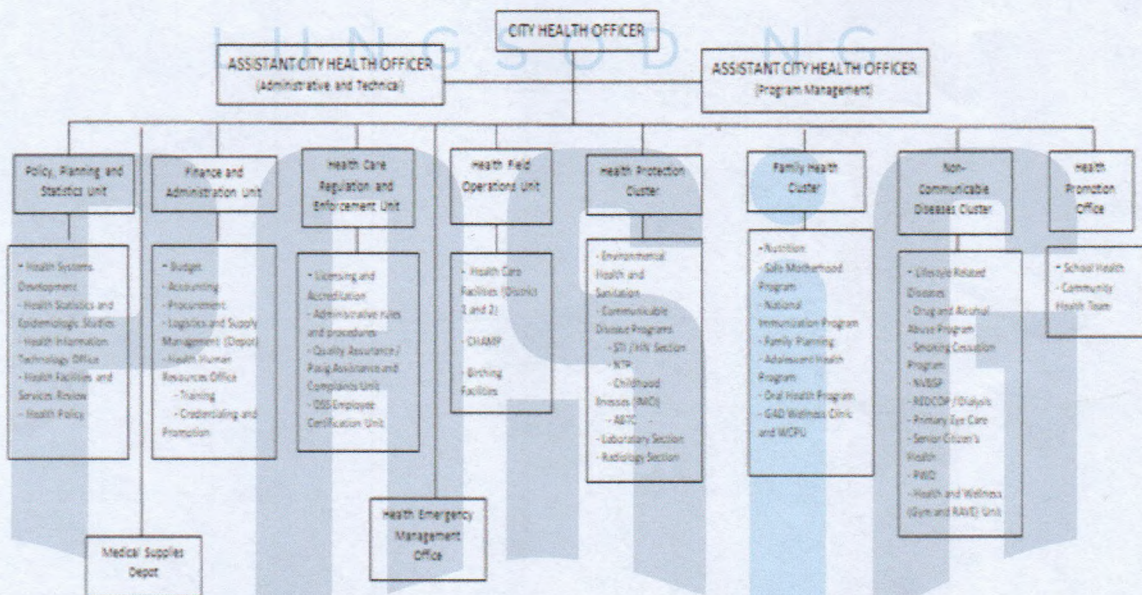
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CITY HEALTH DEPARTMENT



3.2 Summary of the departments' positions:

POSITION	NO.	SG
Accountant II	1	19
Administrative Aide III	272	3
Administrative Aide IV	14	4
Administrative Aide V	2	5
Administrative Aide VI	6	6
Administrative Assistant I	1	7
Administrative Assistant II	1	8
Administrative Assistant III	1	9
Administrative Assistant III	1	11
Administrative Officer II	2	11
Administrative Officer IV	1	15
Assistant Department Head II	2	25
Chief Administrative Officer	1	24
Dental Aide	35	4



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Dentist II	20	17
Dentist III	15	20
Dentist IV	2	23
Dentist V	1	24
Department Head II (CHO)	1	26
Fumigator	13	4
Fumigator Foreman	1	6
Health Education and Promotion Officer I	2	10
Health Education and Promotion Officer III	1	18
Laboratory Aide II	15	4
Laboratory Technician I	5	6
Laboratory Technician II	1	8
Logistics Management Officer II	1	15
Medical Officer IV	15	23
Medical Officer V	5	25
Medical Specialist III	24	24
Medical Technologist I	3	11
Medical Technologist II	47	15
Medical Technologist III	1	18
Medical Technologist IV	1	20
Medical Technologist V	1	22
Midwife II	84	11
Midwife III	43	13
Midwife IV	2	15
Nurse I	229	15
Nurse II	26	17
Nurse III	11	19
Nurse IV	3	20
Nurse VI	1	24
Nutrition Officer II	15	14
Nutrition Officer III	1	18
Nutrition Officer IV	1	20
Optometrist I	1	12
Pest Control Technician	2	7
Pest Control Worker 2	5	6
Pest Control Worker I	18	4
Pharmacist II	2	15
Physical Therapist 2	15	15
Physical Therapist 3	1	18



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Procurement Management Officer II	2	13
Property Custodian I	2	8
Psychologist I	7	11
Psychologist II	4	15
Psychologist III	1	18
Radiologic Technologist II	16	13
Radiologic Technologist III	1	11
Radiologic Technologist IV	1	20
Records Officer II	1	14
Rural Health Physician	50	24
Sanitary Inspector 1	27	6
Sanitary Inspector 2	8	8
Sanitary Inspector 3	4	11
Sanitary Inspector 4	1	13
Social Worker I	1	11
Training Specialist I	1	11
Administrative Aide III (PHA)	400	3
TOTAL	1502	

3.3 **QUALIFICATION STANDARDS** – The qualification standards for the above-listed positions shall be in accordance with the Civil Service guidelines and its implementing rules and regulations.

3.4. **FUNCTIONAL STATEMENT** – The offices, divisions and clusters, shall perform the following functions:

3.4.1 Health Education and Promotion Office – On the city level, the division is created to,

- Disseminate and document information on health policies, programs, issues and accomplishments;
- Prepare/formulate Health Promotion (HP) municipal operational plan;
- Supervise, monitor BHS midwives in the implementation of HP activities;
- Collaborate with DA, DECS, women's/religious groups in the implementation of health projects;
- Participate in research studies/surveys.
- Serve as depository for HP reference material;
- Maintain records and submit reports
- Coordinate health education activities in collaboration with School Health (led by nurses) and Commdivisionary Health Teams (composed of Barangay Health Workers and Pasig Health Aides)



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II. **HEMS** - In coordination with the Pasig City Disaster Risk Reduction Office, shall be accountable for preparing the department, the health care commdivisiony and the city of Pasig to respond effectively and efficiently to public health emergencies. Shall be responsible for coordinating department disaster-related planning; facilitating training and exercising for the entire department. The main activities include:

- a. Assess state of readiness to respond to public health emergencies
- b. Inventory resources available to respond to public health emergencies
- c. Develop and promulgate the DRRMH plans to respond to public health emergencies
- d. Exercise response and recovery plans in coordination with CDRRMO
- e. Develop an effective risk communications capacity that provides for timely information dissemination to citizens during a public health emergency
- f. Coordinate awareness, training, and practices with commdivisiony partners on how to prevent, respond to and recover from public health emergencies.

3.4.2. Medical Supplies Depot - This office shall have the following functions:

- a. Shall be responsible for the custody, disposal and control of medicines and medical supplies and equipment provided by the City and donations from the Department of Health (DOH);
- b. Keep a complete and updated record of all deliveries and withdrawals of medicines and supplies;
- c. Render an account or inventory on a monthly basis of the City's medicines supplies and equipment on hand and submit inventory report to the City Health Officer;
- d. Implement policies and procedures in accordance with the policies if the City Mayor and the Department of Health;
- e. Receive deliveries of medicines, medical supplies and equipment purchased by the City Government, delivered by the DOH or other national agencies to include donations;
- f. Check deliveries to bulk storeroom for safekeeping and storage;
- g. Release medicines, medical supplies and equipment to Health Centers, Medical Missions, and Lingap sa Barangay in accordance with the prescribed guidelines and forms of the city;
- h. Maintain and submit a monthly inventory report of medicines, medical supplies and equipment, to the City Mayor, City Health Officer, Pasig City General Hospital, Pasig City Children's Hospital, Accounting Department and Internal Audit Unit;
- i. Conduct regular follow-up of physical inventory of drugs of the different health centers and units;



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- j. Check the maintenance of the drug inventory control program;
- k. Perform such other functions as maybe assigned from time to time.

3.4.3. Administrative and Technical

I. Policy, Planning and Statistics Division – The purpose of this division is to provide a citywide process involving health care providers and consumers in the development and implementation of plans which will promote accessibility for all the people of Pasig to quality health services properly guided by existing needs or trends in disease occurrence.

a. Health Systems Development branch (Planning) –

- i. In close coordination with all the program managers, assists in the periodic planning and evaluation processes and prepares short, medium and long-term plans of the agency. Prepare and revise the City Health Office Annual Investment Plans for review and comment by the Local Health Board and final review and adoption by the city through the approval of the city mayor.
- ii. Determine the citywide health needs through consultation with health program managers and civil society organizations.
- iii. Prepare reports, studies and recommendations on emerging health issues, such as implementation of Universal Health Care in the city, care for the indigent and marginalized, medical ethics and standards for research.
- iv. Review on a periodic basis existing health care services and facilities to determine whether they are redundant, excessive or inappropriate services or facilities and make findings of any that are found to be so.

b. Health Statistics and Epidemiologic Studies –

- v. Assemble, maintain and analyze data concerning: status (and its determinants) of the health of the residents of Pasig City; status of the health care delivery system on the health of the constituency; the number, type and location of the city's health resources including health services, manpower and facilities; patterns of utilization of health resources and environmental and occupational exposure factors affecting immediate and long term conditions.
- vi. Display, analyze and interpret data for the Health Department and members of the Local Health Board.



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- vii. Responsible for disease surveillance, prevention, control and/or abatement of emerging infectious diseases.
- viii. Develops recommendations / hazards response plans to respond to natural or man-made disasters that are consistent with the DOH plans;
- ix. Investigates and monitors communicable diseases and provide statistical analysis of outbreaks;
- x. Provide disease information to the public and health care providers.

c. Health Information Technology –

- xi. Implement and maintain the City Health Department's Uniform Reporting System for all health facilities under the city.
- xii. As the records management function, it takes charge of the centralized and computerized management/keeping of records made by the health department or receiver by its operations or activities.
- xiii. It undertakes the computerization of records, utilizing document management software and administers the disposal and destruction of the valueless or unnecessary records, following the standards or guidelines for record disposal prescribed by the Records Management and Archives Office.
- xiv. Ensure fidelity of records and files under their care.

d. Health Policy branch –

- xv. Provide technical assistance to the Pasig City Council's Committee on Health, as well as the Local Health Board and the City Mayor's Office on the crafting of relevant ordinances, memorandums and executive orders that would impact health service delivery in the city.
- xvi. Assist the program managers in the crafting of relevant administrative rules and performance and management guidelines that would ensure proper implementation of programs in the barangays.

II. Finance and Administration Division– The Chief Administrative Officer, who supervises and controls the internal administration of the division, heads the FAU. The division shall provide support services in terms of human and financial resources management, assets and properties; efficient procurement, storage and distribution of supplies. It shall strictly adhere to sound accounting and auditing practices and be guided by circulars and other issuances of the Department of Budget and Management, Commission on Audit, Department of Health and the Civil Service Commission. Through its different sections, it shall:



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- 2.1 Extend support services to all the operating divisions and the City Health Officer, members of the Local Health Board and the Local Chief Executive;
- 2.2 Provide management with the necessary financial information in order to help the other operating divisions in planning, directing and coordinating their programs, projects and activities.
- 2.3 A General Support Services section which is directly under the supervision of the Chief Administrative Officer, shall be in charge of the reproduction and motor pool Services.

It is composed of several sections, each under a Section Chief, namely:

g. **Budget** – In coordination with the planning division, prepares budget proposals and allots obligation of funds

h. **Accounting**– This section takes charge of collection and disbursement of funds, maintains and prepares financial statements and reports, and maintain accounting records in strict adherence to the prescribed government accounting principles and standards.

- i. Rates of Allowances for Official Local and Foreign Travels of Government Personnel
- ii. Guidelines in the Release of Funds. (WBC # 463 S. 1999)
- iii. Guidelines in the use of Advice/Authority to debit account (DOF- DBM Joint Circular No. 1-99 S. 1999)
- iv. Revised Procedures in the Payment of Accounts Payable (DBM Circular No. S.1999)
- v. Appropriations, Allotment Obligations and Disbursement Process
- vi. Laws and Rules in Expenditures & Disbursement
 1. Modes of Disbursement
 2. Non Cash Availment Authority
 3. Tax Remittance Advice
 4. Advice to Debit Account
 5. Modified Disbursement System
- vii. Guidelines in the Granting, Utilization and Liquidation of Cash Advance
 1. Cash Advance for Travel
 2. Bonding of Accountable Officers
- viii. Personal Services: PERA / ADCOM / RATA / Clothing Allowance / Honoraria / Overtime / Bonus / Cash Gift / PIB



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- 1. Leave Benefits
 - a. Vacation Leave
 - b. Sick Leave
 - c. Terminal Leave
- 2. Monetization of Leave/Service Credits
 - a. Maternity leave
- ix. Accounting Forms

i. **Procurement** – Prepares purchase orders, procures medicines, supplies, materials and equipment necessary in the operations of the department in accordance with the prescribed government procedures such as:

- a. Government Electronic Procurement system (EO 40)
- b. Government Procurement Reform Act (RA 9184)
- c. Standard Operating Procedure for Purchasing and Inventory

j. **Logistics and Supply Management (Medical Supplies Depot)**- Provides, stores, and ensures timely distribution of supplies, materials and equipment necessary in the delivery of health services of the department and the health centers.

k. **Health Human Resources** – Through the City Human Resource Department, this section enforces laws, rules and regulations, administers personnel matters including the implementation of human resource development programs, and provision of benefits under the Magna Carta for Health Workers. It makes sure that rules and regulations as contained in the Omnibus Rules on Civil Service are properly implemented. Administers all personnel matters and promotes human resource development through the implementation of various training programs. In charge of monitoring of personnel compliance on pertinent policies, office rules and regulations with regards to: Allowable Transportation Allowance, Attendance to Flag Ceremony, Permit to Leave the Office, Rendering of Technical Assistance and Official Attendance to Conferences.

III. **Health Care Regulation and Enforcement Division** - Ensures compliance of all health facilities to the standards set by the relevant licensing authorities such as the Department of Health, PhilHealth and DOLE.



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I. Licensing and Accreditation-

- i. Ensure that the health facilities comply with at least the set minimum standards for regulation of health facilities and services;
- ii. Assist the health centers in the issuance of permits to construct, License to Operate and Certificate of Accreditation, as well as PhilHealth facility accreditation;

m. Administrative Rules and procedures-

- i. Assist the DOH in disseminating regulatory policies, standards, technical requirements, guidelines and SOPs for information and compliance;
- ii. Establish consultative mechanisms to ensure applicability of regulatory standards
- iii. Evaluate appropriateness/ relevance of existing standards

n. Quality Assurance / Pasig City Assistance and Complaints Division-

- i. Monitoring of health facilities and services to ensure sustainability of health facilities compliance with regulatory standards and compliance to local ordinances on health;
- ii. Conducts validation on complaints against health facilities, services and health-related services especially on providers not covered by the Professional Regulation Commission;
- iii. Provides recommendation to the city and relevant agencies on proper action against erring hospitals and other health facilities and services.

o. One Stop Shop Certification Division-

- i. Conducts pre-employment diagnostics and medical examination;
- ii. Ensures proper coordination with local businesses with regards to the scheduling of remote pre-employment medical services and timely release of medical results.
- iii. As part of their marketing function, they are in charge of disseminating information on the available services offered by the City Health Office.

IV. Health Field Operations Division – Assists the City Health Officer, program managers, the Local Health Board and LCE in determining the health needs of the commdivision, evaluating how well these are being met and identifying unmet needs for which public health programs are required.

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- a. **Health Care Facilities** – divided into the two districts (1 and 2), these will be administratively under the Assistant City Health Officers (one per district) and are primarily responsible in the direct delivery of health services to the residents of their respective barangays or catchment areas.
- iv. They provide information and consultation to individuals, families and/or guardians for decision –making to assure maximal access, utilization and effectiveness of resources;
 - v. Ensures compliance to program-based guidelines and disease-specific clinical practice guidelines in the conduct of delivering medical services;
 - vi. As gate-keepers of health, they facilitate referral of individual cases to appropriate divisions or higher level of care whenever necessary;
 - vii. Ensure proper documentation of individual records and timely submission of reports;
 - viii. Identifies gaps in services and make proper recommendations.
- b. **CHAMP** – Multispecialty Clinic providing diagnostic and health services in line with Maternal and Child Health, Non-Communicable diseases and HIV/AIDS. It consists of the following sub-sections:
- ix. **Lying In** – responsible for providing pre-natal, natal and ante-natal care and family planning services to the residents of Pasig;
 - x. **Wellness Clinic**- Provides risk assessment, screening and management of chronic diseases- diabetes, hypertension, cancer and primary eye care to the residents of Pasig;
 - xi. **PaTH Hub** – provides screening, management and monitoring of patients with HIV/AIDS. They also provide counseling services to patients and pregnant women with regards to HIV.
 - xii. **Laboratory** – provides laboratory services to the patients of the clinic as well as walk-in referrals coming from the health centers
 - xiii. **CHAMP Dialysis** – provides hemodialysis services to patients with chronic renal disease;
- c. **Lying In** – located in San Joaquin Super Center, Manggahan Super Center, Nagpayong Super Center and Santolan Super Center. These facilities responsible for providing pre-natal, natal and ante-natal care and family planning services to the residents of Pasig within the prescribed cluster area.



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3.4.4. Program Management

I. Health Protection Cluster –It is composed of a cluster of services that was set up to protect the public from threats to their health from infectious diseases and environmental hazards. Its main role is to provide an integrated approach to protecting public health from ensuring environmental health and sanitation, to screening for illnesses and management of communicable diseases.

d. Environmental Health and Sanitation- Responsible for implementing and maintaining environmental health and Sanitation health programs of Pasig City which includes the following components: Drinking-water supply, Sanitation (e.g excreta, sewage and septage management), Zero Open Defecation Program (ZODP), Food Sanitation, Air Pollution (indoor and ambient), Chemical Safety, WASH in Emergency situations, Climate Change for Health and Health Impact Assessment (HIA). The activities under this section are consistent with the mandates of the following policies:

- xiv. PD No. 856 – Code on Sanitation of the Philippines
- xv. EO No. 489 s. 1991 – The Inter-Agency Committee on Environmental Health (IACEH)
- xvi. National Objectives for Health (NOH) 2011-2016
- xvii. DOH A.O. 2010-0021 - Sustainable Sanitation as a National Policy and a National Priority Program of the DOH
- xviii. DOH A.O. 2014-0027 – National Policy on Water Safety Plan (WSP) for All Drinking-Water Service Providers
- xix. DOH A.O. 2017-0006 – Guidelines for the Review and Approval of the Water Safety Plans of Drinking-Water Service Providers
- xx. DOH A.O. 2017-0010 – Philippine National Standards for Drinking Water (PNSDW) of 2017

e. Communicable Disease Programs

xxi. STI / HIV Section – Reduce the transmission of HIV and STI among the vulnerable and at risk population and general population and mitigate its impact on the individual, family and community level. With regard to the prevention and fight against stigma and discrimination, the following are the strategies and interventions:

1. Ensure availability of free voluntary HIV Counseling and Testing Service within Pasig City;
2. Promote 100% Condom Use Program (CUP) especially for entertainment establishments;



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3. Provision of peer education and outreach;
4. Ensure multi-sectoral coordination through Philippine National AIDS Council (PNAC);
5. Ensure empowerment of commdivisionies;
6. Conduct commdivisiony assemblies and for a to reduce stigma;
7. Distribute male condoms distributed as education materials during outreach.

xxii. **NTP** – Mitigates and abates identified Tuberculosis cases/outbreaks to ensure that the general public is protected from infection through city-wide case management and care coordination. Ensures public access to appropriate diagnostic examinations (sputum examination, genexpert and Chest X-ray). Monitor Directly Observed Therapy (DOT) for active cases, ensure contact investigation and continuity of care by ensuring proper referral of cases to receiving facilities when patients leave the city. Provides program updates and IEC materials relevant of the program.

xxiii. **Child Health and Development** – Ensures that programs and projects are in place that would ensure the welfare of the children. It is grounded on the life cycle approach and weaves the rights of children. This approach ensures that the issues, needs and gaps are addressed in the different stages of the child's growth and development.

1. Enhance the capacity and capability of health facilities in the early recognition, management and prevention of common childhood illness
2. Strengthen commdivisiony based support systems and interventions for children's health
3. Foster linkages with local advocacy groups and professional organizations and to promote children's health.

xxiv. **Animal Bite Treatment Center** – Provides services aimed at eliminating rabies as a public health problem in Pasig City. Activities in line with this include:

1. Provision of post-exposure and pre-exposure prophylaxis
2. Health education and advocacy campaign on:
 - a. Responsible Pet Ownership (RPO)



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- b. RA 9482 known as the "The Anti Rabies Act of 2007" and enactment of and strict implementation of local rabies control ordinances.
- c. Early and proper management of animal bites.
- d. In coordination with the City Veterinary Office: promotion of dog vaccination, dog population control and control of stray animals.

xxv. Laboratory Section – Provides necessary laboratory tests to the public for screening and monitoring of disease states consistent with the clinical practice guidelines.

xxvi. Radiology Section – Provides necessary radiologic and ultrasonic examination to guide physicians in the diagnosis and management of disease states.

iii. Family Health Cluster- Provides all level of service delivery to assure an effective health system exists to maintain the full continuum of care throughout the life cycle from pre-conception to birth to adolescence to adulthood. Activities include conducting public health needs assessments, identification of health priorities and commdivisiony issues, data collection, systems and policy development, monitoring, planning and evaluation, and promotion of legislative initiatives that address health and safety of the family. Collaborates and coordinates with the stakeholders on health priorities and oppordivisionies.

f. Nutrition – Plans, implements, monitor and supervise the barangay nutrition program and supervises Barangay Nutrition Scholar(s). Organizes and conducts continuing education activities on health and nutrition and serves as resource for seminars/training on health & nutrition.

Conducts periodic field visits to monitor the implementation of the barangay nutrition programs and orientation, briefing and trainings for Barangay Nutrition Scholars and Pasig Health Aides in the barangay. Generates and submits pertinent data & reports of accomplishment to concerned agencies and establishes linkage, coordinates with GO's and NGO's involved in the Nutrition Program.

g. Safe Motherhood Program- Advocates and supports optimal health for all women of child bearing age and infants.

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- i. Ensure the delivery of the Maternal-Newborn Service Package through the establishment and mobilization of the service delivery network of public and private providers to enable them to deliver the integrated maternal-newborn service package. This include:
 1. Establishment of critical capacities to provide quality maternal-newborn services through the organization and operation of a network of Service Delivery Teams consisting of: Barangay Health Workers and BEmONC Teams composed of Doctors, Nurses and Midwives;
 2. Establishment of Reliable Sustainable Support Systems for Maternal-Newborn Service Delivery through such initiatives as:
 - a. Establishment of Safe Blood Supply Network with support from the City's Voluntary Blood Program;
 - b. Behavior Change Interventions in collaboration with the Health Education and Promotion Office;
 - c. Ensure sustainable financing of maternal - newborn services and commodities through locally initiated revenue generation and retention activities including PhilHealth accreditation and enrolment.
 - ii. Facilitates local maternal death reviews;
 - iii. Coordinates and collaborates with stakeholders to address issues related maternal health care.
- h. **National Immunization Program** – Ensures that infants/children and mothers have access to routinely recommended infant/childhood vaccines through the following strategies:
 - iv. Conduct of Routine Immunization for Infants/Children/Women through the Reaching Every Barangay (REB) strategy
 - v. Supplemental Immunization Activity
 - vi. Strengthening Vaccine-Preventable Disease Surveillance in coordination with the City's disease surveillance division.
- i. Family Planning - In line with the Department of Health FOURmula One Plus strategy and Universal Health Care framework, the Family Planning Program is committed to provide responsive policy direction and ensure access of Filipinos to medically safe, legal, non-abortifacient, effective, and culturally acceptable modern family planning (FP) methods. The components of this program include:



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vii. Provision of free FP Commodities that are medically safe, legal, non-abortifacient, effective and culturally acceptable to all in need of the FP service:

1. Forecasting of FP commodity requirements for the city;
2. Procurement of FP commodities and its ancillary supplies;
3. Strengthening of the supply chain management in FP and ensuring of adequate FP supply at the service delivery points

viii. Demand Generation through Commdivisiony-based Management Information System:

1. Identification and profiling of current FP users and identification of potential FP clients and those with unmet need for FP (permanent or temporary methods)
2. Dissemination of Information, Education Communication materials
3. Advocacy and social mobilization for FP

j. **Adolescent Health Program** – The mission of this program is to ensure that all adolescents have access to comprehensive health care and services in an adolescent friendly environment through the following strategies:

- ix. Health promotion and behavior change for adolescents
- x. Adolescent participation in governance and policy decisions
- xi. Developing/transfoming health care centers to become adolescent-friendly facilities
- xii. Expanding health insurance to young people
- xiii. Enhancing skills of service providers, families and adolescents
- xiv. Strengthening partnerships among adolescent groups, government agencies, private sectors, Civil Society organizations, families and commdivisionies
- xv. Resource mobilization
- xvi. Regular assessment and evaluation

k. **Oral Health Program**- Protect individuals from periodontal diseases that may affect their overall health, wellbeing and quality of life. Program Components include:

- xvii. Oral Examination, Instruction on infant's oral health care, Advice on exclusive breastfeeding
- xviii. Topical fluoride application



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- xix. Supervised Tooth Brushing
- xx. Oral Health Education and counselling on good oral hygiene, diet and adverse effects of tobacco/smoking and alcohol and sweetened beverages & food
- xxi. Atraumatic Restorative Treatment (ART)
- xxii. Oral prophylaxis/scaling
- xxiii. Pit and fissure sealant application
- xxiv. Temporary filling
- xxv. Permanent filling
- xxvi. Oral Urgent Treatment (OUT)

I. **GAD Wellness Clinic and WCPU** - The program primarily aims to reduce mortality, morbidity and disability due to the injuries related to violence against women and children.

xxvii. They are responsible for the medical examination and referral of cases of Violence Against Women and Children to the proper agencies;

xxviii. Being the clinic closest to the Pasig City hall. The clinic also is responsible for ensuring the health and wellness of the government employees by conducting the annual medical examination and providing out-patient consultation;

xxix. Provides Ultrasound and 2D Echocardiography tests to patients.

IV. **Non-Communicable Disease Cluster**- Initiates planning, development, management and evaluation on strategies in reducing the burden of chronic diseases through adoption of healthy lifestyles.

m. **Lifestyle Related Diseases** – Tasked to ensure sustainable health promoting environments and accessible, cost-effective, comprehensive, equitable and quality health care services for the prevention and control of NCDs, and guided by the principle of “Health in All, Health by All, Health for All” whereas Health in All refers to Health in All Policies, Health by All involves the whole-of-government and the whole-of-society and the Health for All captures the KP (KalusuganPangkalahatan) or the Universal Health Care (UHC). Program components include the control of the following diseases: diabetes, cardiovascular disease, cancer and chronic respiratory diseases. The objectives of the program include:



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- i. To strengthen leadership, governance, and multisectoral actions for the prevention and control of non-communicable diseases;
 - ii. To reduce modifiable risk factors for non-communicable diseases and underlying social determinants through creation of health-promoting environments;
 - iii. To strengthen health systems and increase access to quality medicines, products and services, especially at the primary health care level, towards attainment of universal health coverage;
 - iv. To promote and support research and development for the prevention and control of non-communicable diseases
 - v. To monitor the trends and determinants of non-communicable diseases and evaluate progress in their prevention and control
- n. **Drug and Alcohol Abuse Program (SATOP)** – Drug Abuse Treatment and Rehabilitation Centers (DATRCs), hospitals, medical centers and specialty hospitals provide services that are more sophisticated, technically demanding, and specialized than those available at a primary care facility. The range of services that these institutions offer includes outpatient, inpatient and hospital care, laboratory and special procedures, acute and emergency treatment, care, counseling, and rehabilitation. They may also provide health information, training, and administrative and logistical support to primary and commdivisionary health care programs.
- o. **Smoking Cessation Program** – This program is aimed at reducing the prevalence of smoking and minimizing smoking-related health risks through:
- vi. Promotion and advocacy of smoking cessation in Pasig City; and
 - vii. Provide smoking cessation services to current smokers interested in quitting the habit.
 - viii. Referral of patients with smoking-related diseases to higher level of care.
- p. **Voluntary Blood donation Services Program (VBSP)**- Promotes voluntary blood donation to provide sufficient supply of safe blood and to regulate blood banks. This aims to inculcate public awareness that blood donation is a humanitarian act.
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- q. **REDCOP / Dialysis** - This aims to decrease morbidity and mortality related to renal diseases through the provision of hemodialysis services to patients with renal failure. It also provides screening and monitoring of kidney function as well as health education to patients on renal diseases.
- r. **Primary Eye Care** – The program aims to reduce the prevalence of avoidable blindness in the Philippines through the provision of quality eye care. To reduce visual impairment due to refractive errors through the visual acuity screening of all sectors, provision of eye glasses and maintaining an eye glass bank. To reduce prevalence of visual disability in children through screening of children for visual disability. Together with the DOH, Pasig City, its partners and stakeholders commit to:
- ix. Strengthen partnership among and with stakeholder to eliminate avoidable blindness in the Philippines;
 - x. Empower commdivisionies to take proactive roles in the promotion of eye health and prevention of blindness;
 - xi. Provide access to quality eye care services for all; and
 - xii. Work towards poverty alleviation through preservation and restoration of sight to indigent Filipinos.
- s. **Senior Citizen's Health** – Shall take lead in providing leadership in planning, directing, administering, implementing, evaluating and coordinating health programs and services for adults sixty (60) years of age and older.
- t. **Persons With Disability (PWD)** - The mandate of the DOH to come up with a national health program for PWD was based on Republic Act No. 7277, "An Act Providing for the Rehabilitation and Self-Reliance of Disabled Persons and Their Integration into the Mainstream of Society and for Other Purposes" or otherwise known as "The Magna Carta for Disabled Persons" and the Implementing Rules and Regulations (IRR) of RA 7277. This document stipulated that the DOH is required to: (1) institute a national health program for PWDs, (2) establish medical rehabilitation centers in provincial hospitals, and (3) adopt an integrated and comprehensive program to the Health Development of PWD, which shall make essential health services available to them at affordable cost. In response to this, the DOH issued Administrative Order No. 2006-0003, which specifically provides the strategic framework and operational guidelines for the implementation of Health Programs for PWDs.



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So in accordance with this, a program was designed to promote the highest attainable standards of health and wellness for PWDs. The program aims to:

- xiii. To address barriers and improve access and reasonable accommodations of PWDs to health care services and programs.
- xiv. To ensure the accessibility, availability, appropriateness and affordability of habilitation and rehabilitation services for PWDs, including children with disabilities.
- xv. To ensure the implementation of policies and guidelines, health service packages, including financing and provider payment schemes for health services of PWDs.
- xvi. To enhance capacity of health providers and stakeholders in improving the health status of PWDs.
- xvii. To strengthen collaboration and synergy with and among stakeholders and sectors of society to improve response to a disability inclusive health agenda through regular dialogues and interactions.
- xviii. To provide the mechanism in facilitating the collection, analysis and dissemination of reliable, timely and complete data and researches on health-related issues of PWDs in order to develop and implement evidence-based policies and interventions.

- u. Health and Wellness (Gym and RAVE) Division – These divisions were created to provide venues for the public to engage in physical activity consistent with our goal to reduce sedentary activities and decrease risk for chronic diseases.

SECTION 4. ADJUSTMENT. –Department of Budget and Management Circular 2020-4 dated 17 July 2020 with the subject “Upgrading of the Entry Level of Nurse Positions” upgraded the minimum base pay of not lower than Salary Grade 15 for Nurses working in public health institutions. This shall be applicable for those nurse positions as stated in Section 3.2 hereof. Further, those nurses with casual status of appointment and those with employer-employee relationship status with the City Government currently assigned in the City Health Office shall be covered and their current salary grade shall be adjusted based on this Circular.

SECTION 5. APPROPRIATIONS.– The funds to cover the salaries and other benefits of the newly created positions shall be taken from any available funds and shall thereafter be appropriated in the annual budget of the Pasig City Health Department for the next fiscal year with the approval of the Chief Executive;

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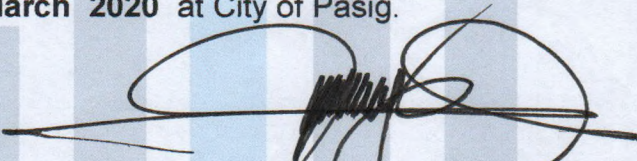
SECTION 6. SEPARABILITY CLAUSE – Should any provision of this Ordinance or any portion hereof be declared invalid or unconstitutional, the other provisions or portions hereof not affected be invalidly or unconstitutionality shall continue to be in full force and effect.


SECTION 7. REPEALING CLAUSE – All ordinances, resolutions, circulars, memoranda, orders and other issuances inconsistent herewith are hereby repealed or modified accordingly.

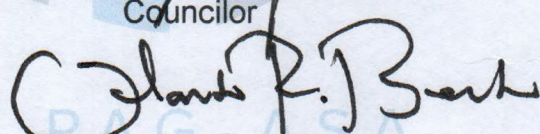
SECTION 8. EFFECTIVITY CLAUSE – This Ordinance shall take effect upon its approval.

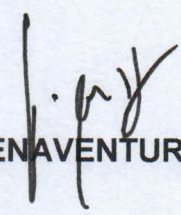
APPROVED, this 5th day of **March 2020** at City of Pasig.


FERDINAND A. AVIS
Councilor


MARIO C. CONCEPCION, JR.
Councilor


GREGORIO P. RUPISAN JR.
Councilor


ORLANDO R. BENITO
Councilor

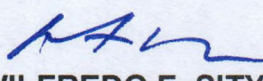

REYNALDO R. SAN BUENAVENTURA III
Councilor


RODRIGO B. ASILO
Councilor


REGINO S. BALDERRAMA
Councilor


CORAZON M. RAYMUNDO
Councilor


EDITHA C. SANTIAGO
Councilor


WILFREDO F. SITYAR
Councilor



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Amfarn

RIGOR J. ENRIQUEZ
LIGA President

GEORGIA LYNN P. CLEMENTE
SK Fed. President

RHICHIE GERARD T. BROWN
Councilor
Minority Floor Leader

ROSALIO D. MARTIRES
Councilor
Majority Floor Leader

Attested by:

IYO CHRISTIAN C. BERNARDO
City Vice-Mayor
Presiding Officer

APPROVED:

VICTOR MA. REGIS N. SOTTO
City Mayor

Attested by:

LOIDA U. VILLANUEVA
Acting City Council Secretary

Wain

Glenn Paul Bern

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