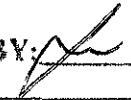




10 NOV -3 P 1:49

SENATE
S. No. 2573

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EXPLANATORY NOTE

The Constitution, Article 2, Section 15 provides:

“The State shall protect and promote the right to health of the people and instill health consciousness among them.”

According to the National Health Institute of the University of the Philippines, six of ten Filipinos who succumb to sickness die without ever seeing a doctor.¹ Hence, it is time for Filipinos to discuss and learn about future health care decisions for themselves and their family, and possibly start thinking about options that can help them with these choices, like advance directives.

Advance directives are decisions that can be written down prior to medical treatment, so the family can carry out a person’s wishes for health care if this person is unable to communicate them.

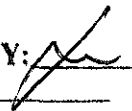
Thus, this bill directs the Secretary of Health, directly or through grants, contracts, or interagency agreements, to develop a national campaign to inform the public of the importance of advance care planning and of an individual’s right to direct and participate in his or her health care decisions. The comprehensive public education campaign shall raise awareness of the importance of planning for care near the end of life.


MIRIAM DEFENSOR SANTIAGO

¹<http://newsinfo.inquirer.net/inquirerheadlines/nation/view/20100413-263926/Health-care-beyond-reach-of-poor-say-critics>

'10 NOV -3 P1:49

SENATE
S. No. 2573

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1 AN ACT
2 DIRECTING THE SECRETARY OF HEALTH TO DEVELOP AND IMPLEMENT A
3 NATIONAL PUBLIC EDUCATION CAMPAIGN ON THE IMPORTANCE OF ADVANCE
4 CARE PLANNING AND OF AN INDIVIDUAL'S RIGHT TO DIRECT AND PARTICIPATE
5 IN HIS OR HER HEALTH CARE DECISIONS

Be it enacted by the Senate and the House of Representatives of the Philippines in Congress assembled:

6 SECTION 1. *Short Title.* – This law shall be known as the “Advance Directives
7 Education Act”.

8 SECTION 2. *Definition of Terms.* – For purposes of this Act:

9 (a) “Advance care planning” means the process of:

- 10 (1) determining an individual's priorities, values and goals for care in the
11 future when the individual is no longer able to express his or her wishes;
- 12 (2) engaging family members, health care proxies, and health care providers
13 in an ongoing dialogue about:
- 14 (i) the individual's wishes for care;
- 15 (ii) what the future may hold for people with serious illnesses or
16 injuries;
- 17 (iii) how individuals, their health care proxies, and family members
18 want their beliefs and preferences to guide care decisions; and
- 19 (iv) the steps that individuals and family members can take regarding,
20 and the resources available to help with, finances, family matters,
21 spiritual questions, and other issues that impact seriously ill or
22 dying patients and their families; and

1 (3) executing and updating advance directives and appointing a health care
2 proxy.

3 (b) "Advance directive" means a will, medical directive, health care power of
4 attorney, or other written statement by a competent individual that is recognized under existing
5 laws and indicates the individual's wishes regarding medical treatment in the event of future
6 incompetence.

7 (c) "End-of-life care" means all aspects of care of a patient with a potentially fatal
8 condition, and includes care that is focused on specific preparations for an impending death.

9 (d) "Health care power of attorney" means a legal document that identifies a health
10 care proxy or decisionmaker for a patient who has the authority to act on the patient's behalf
11 when the patient is unable to communicate his or her wishes for medical care on matters that the
12 patient specifies when he or she is competent. Such term includes a special power of attorney
13 that relates to medical care.

14 (e) "Secretary" means the Secretary of the Department of Health.

15 (f) "Will" means any legal document, with formalities prescribed by law, which is
16 used to specify the type of medical care, including any type of medical treatment, including life-
17 sustaining procedures if that person becomes permanently unconscious or is otherwise dying,
18 that an individual wants provided or withheld in the event the individual cannot speak for
19 himself or herself and cannot express his or her wishes; and that requires a physician to honor the
20 provisions of upon receipt or to transfer the care of the individual covered by the document to
21 another physician that will honor such provisions.

22 SECTION 3. *National Public Education Campaign.* –

23 (a) In general. – Not later than 1 January 2012, the Secretary, shall, directly or
24 through grants, contracts, or interagency agreements, develop and implement a national
25 campaign to inform the public of the importance of advance care planning and of an individual's
26 right to direct and participate in their health care decisions.

27 (b) Content of educational campaign. – The national public education campaign
28 established under paragraph (a) shall:

- 1 (1) employ the use of various media, including regularly televised public
2 service announcements;
- 3 (2) provide culturally and linguistically appropriate information;
- 4 (3) be conducted continuously over a period of not less than 5 years;
- 5 (4) identify and promote the advance care planning information available on
6 the Department of Health, as well as any other relevant government
7 advance care planning resources;
- 8 (5) raise public awareness of the consequences that may result if an individual
9 is no longer able to express or communicate their health care decisions;
- 10 (6) address the importance of individuals speaking to family members, health
11 care proxies, and health care providers as part of an ongoing dialogue
12 regarding their health care choices;
- 13 (7) address the need for individuals to obtain readily available legal
14 documents that express their health care decisions through advance
15 directives (including wills, comfort care orders, and powers of attorney for
16 health care);
- 17 (8) raise public awareness regarding the availability of hospice and palliative
18 care; and
- 19 (9) encourage individuals to speak with their physicians about their options
20 and intentions for end-of-life care.

21 (c) Evaluation. --

- 22 (1) In general. -- Not later than 1 July 2013, the Secretary, shall conduct a
23 nationwide survey to evaluate whether the national campaign conducted
24 under this Act has achieved its goal of changing public awareness,
25 attitudes, and behaviors regarding advance care planning.
- 26 (2) Baseline survey. -- In order to evaluate the effectiveness of the national
27 campaign, the Secretary shall conduct a baseline survey prior to
28 implementation of the campaign.

1 (3) Reporting requirement. – Not later than 31 December 2013, the Secretary
2 shall report the findings of such survey, as well as any recommendations
3 that the Secretary determines appropriate regarding the need for
4 continuation or legislative or administrative changes to facilitate changing
5 public awareness, attitudes, and behaviors regarding advance care
6 planning, to the appropriate committees of the Congress.

7 SECTION 4. *Separability Clause.* – If any provision of this Act shall be declared
8 unconstitutional, any other provision not affected thereby shall remain in full force and effect.

9 SECTION 5. *Repealing Clause.* – All laws, decrees, orders, rules and regulations, or
10 parts thereof inconsistent with this Act are hereby repealed or amended accordingly.

11 SECTION 6. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication
12 in at least two (2) newspapers of general circulation.

Approved,

/fldp