

MALACAÑANG
MANILA
BY THE PRESIDENT OF THE PHILIPPINES

EXECUTIVE ORDER NO. 102

**REDIRECTING THE FUNCTIONS AND OPERATIONS OF THE
DEPARTMENT OF HEALTH**

WHEREAS, the Department of Health, hereafter referred to as DOH, has been transformed from being the sole provider of health services, to being a provider of specific health services and technical assistance provider for health, as a result of the devolution of basic services to local government units;

WHEREAS, the DOH seeks to serve as the national technical authority on health, one that will ensure the highest achievable standards of quality health care, health promotion and health protection, from which local governments units, non-government organizations, other private organizations and individual members of civil society will anchor their health programs and strategies;

WHEREAS, to effectively fulfill its refocused mandate, the DOH is required to undergo changes in roles, functions, organizational processes, corporate values, skills technology and structures;

WHEREAS, Section 20, Chapter 7, Title I, Book III of Executive Order No. 292 series of 1987, otherwise known as the Administrative Code of 1987, empowers the President of the Philippines to exercise such powers and functions as are vested in him under the law:

WHEREAS, Section 78 of the General Provisions of RA 8522, otherwise known as the General Appropriations Act of 1998, empowers the President to direct changes in organization and key positions of any department, bureau or agency;

WHEREAS, Section 80 of the same General Provisions directs heads of departments, bureaus and agencies to scale down, phase out or abolish activities no longer essential in the delivery of health services;

NOW, THEREFORE, I, JOSEPH EJERCITO ESTRADA, President of the Republic of the Philippines, by virtue of the powers vested in me by law, do hereby order the following:

SECTION 1. Mandate. Consistent with the provisions of the Administrative Code of 1987 and RA 7160 (the Local Government Code), the DOH is hereby mandated to provide assistance to local government



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units (LGUs), people's organization (PO) and other members of civic society in effectively implementing programs, projects and services that will:

- a) promote the health and well-being of every Filipino;
- b) prevent and control diseases among populations at risks;
- c) protect individuals, families and communities exposed to hazards and risks that could affect their health; and
- d) treat, manage and rehabilitate individuals affected by disease and disability.

SEC. 2. Roles. To fulfill its responsibilities under this mandate, the DOH shall serve as the:

- a) lead agency in articulating national objectives for health to guide the development of local health systems, programs and services;
- b) direct service provider for specific programs that affect large segments of the population, such as tuberculosis, malaria, schistosomiasis, HIV-AIDS and other emerging infections, and micronutrient deficiencies;
- c) lead agency in health emergency response services, including referral and networking systems for trauma, injuries and catastrophic events;
- d) technical authority in disease control and prevention;
- e) lead agency in ensuring equity, access and quality of health care services through policy formulation, standards development and regulations;
- f) technical oversight agency in charge of monitoring and evaluating the implementation of health programs, projects, research, training and services;
- g) administrator of selected health facilities at sub-national levels that act as referral centers for local health systems i.e. tertiary and special hospitals, reference laboratories, training centers, centers for health promotion; centers for disease control and prevention, regulatory offices among others;



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- h) innovator of new strategies for responding to emerging health needs;
- i) advocate for health promotion and healthy life styles for the general population;
- j) capacity-builder of local government units, the private sector, non-governmental organizations, people's organizations, national government agencies in implementing health programs and services through technical collaborations, logistical support, provision of grants and allocation and other partnership mechanisms;
- k) lead agency in health and medical research;
- l) facilitator of the development of health industrial complex in partnership with the private sector to ensure self-sufficiency in the production of biologicals, vaccines and drugs and medicines;
- m) lead agency in health emergency preparedness and response;
- n) protector of standards of excellence in the training and education of health care providers at all levels of the health care system; and
- o) implementor of the National Health Insurance Law; providing administrative and technical leadership in health care financing.

SEC. 3. Powers and Functions. To accomplish its mandate and roles the Department shall:

- a) Formulate national policies and standards for health;
- b) Prevent and control leading causes of health and disability;
- c) Develop disease surveillance and health information systems;
- d) Maintain national health facilities and hospitals with modern and advanced capabilities to support local services;
- e) Promote health and well-being through public information and to provide the public with timely and relevant information on health risks and hazards;



- f) Develop and implement strategies to achieve appropriate expenditure patterns in health as recommended by international agencies;
- g) Development of sub-national centers and facilities for health promotion, disease control and prevention, standards, regulations and technical assistance;
- h) Promote and maintain international linkages for technical collaboration;
- i) Create the environment for development of a health industrial complex;
- j) Assume leadership in health in times of emergencies, calamities and disasters; system fails;
- k) Ensure quality of training and health human resource development at all levels of the health care system;
- l) Oversee financing of the health sector and ensure equity and accessibility to health services; and
- m) Articulate the national health research agenda and ensure the provision of sufficient resources and logistics to attain excellence in evidenced-based interventions for health.

SEC. 4. Preparation of a Rationalization and Streamlining

Plan. In view of the functional and operational redirection in the DOH, and to effect efficiency and effectiveness in its activities, the Department shall prepare a Rationalization and Streamlining Plan (RSP) which shall be the basis of the intended changes. The RSP Plan shall contain the following:

- a) the specific shift in policy directions, functions, programs and activities/strategies;
- b) the structural and organizational shift, stating the specific functions and activities by organizational unit and the relationship of each units;
- c) the staffing shift, highlighting and itemizing the existing filled and unfilled positions; and



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- d) the resource allocation shift, specifying the effects of the streamlined set-up on the agency budgetary allocation and indicating where possible, savings have been generated.

The RSP shall be submitted to the Department of Budget and Management for approval before the corresponding shifts shall be affected by the DOH Secretary.

SEC. 5. Redeployment of Personnel. The redeployment of officials and other personnel on the basis of the approved RSP shall not result in diminution in rank and compensation of existing personnel. It shall take into account all pertinent Civil Service laws and rules.

SEC. 6. Funding. The financial resources needed to implement the Rationalization and Streamlining Plan shall be taken from funds available in the DOH, provided that the total requirements for the implementation of the revised staffing pattern shall not exceed available funds for Personnel Services.

SEC. 7. Separation Benefits. Personnel who opt to be separated from the service as a consequence of the implementation of this Executive Order shall be entitled to the benefits under existing laws. In the case of those who are not covered by existing laws, they shall be entitled to separation benefits equivalent to one month basic salary for every year of service or proportionate share thereof in addition to the terminal fee benefits to which he/she is entitled under existing laws.

SEC. 8. Implementing Authority. Following the approved RSP, the DOH Secretary, in addition to his authority to implement the RSP is hereby authorized to determine the type of agencies and facilities necessary to carry out the Department's mandate and roles, including the pilot testing of programs and such pre-corporatization of hospitals following strictly the principles of efficiency and effectiveness.

SEC. 9. Effectivity. This Executive Order shall take effect immediately.

DONE in the City of Manila this 24th day of May
Our Lord, Nineteen Hundred and Ninety-Nine.

By the President:

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PMS

Ronald B. Zamora

RONALDO B. ZAMORA
Executive Secretary



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