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Republic of the Philippines
QUEZON CITY
23RD CITY COUNCIL

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PROPOSED ORDINANCE NO. PO23CC-_____

AN ORDINANCE INSTITUTIONALIZING AND PROVIDING FOR THE ESTABLISHMENT AND OPERATIONALIZATION OF THE QUEZON CITY-WIDE HEALTH SYSTEM, INCLUDING ITS MANAGEMENT SUPPORT SYSTEMS, AND FOR OTHER PURPOSES

INTRODUCED BY COUNCILOR KRISTINE ALEXIA R. MATIAS, RN

WHEREAS, Section 15, Article II and Section 11, Article XIII of the 1987 Constitution declare the policy of the State to protect and promote the right to health of the people and to adopt an integrated and comprehensive approach to health development that makes essential goods, health, and other social services accessible at affordable cost;

WHEREAS, Sections 16, 76, 454, and 458 of Republic Act No. 7160, otherwise known as the "Local Government Code of 1991," authorize local government units to promote the general welfare, design and implement their organizational structures and staffing patterns, maintain or create offices necessary for efficient city governance, and enact measures and provide appropriations for local health services, subject to law and applicable Civil Service standards;

WHEREAS, Section 102 of Republic Act No. 7160 mandates the establishment of a Local Health Board in every city and prescribes its basic functions in relation to local health appropriations, policy advice, and technical committees;

WHEREAS, Section 19 of Republic Act No. 11223, otherwise known as the "Universal Health Care Act," provides for the integration of local health systems into province-wide and city-wide health systems and directs City Health Boards to oversee and coordinate such integration, manage the Special Health Fund, and exercise administrative and technical supervision over health facilities and health human resources within their territorial jurisdiction;

WHEREAS, Section 20 of Republic Act No. 11223 provides for the pooling and management, through a Special Health Fund, of resources intended for health services to finance population-based and individual-based health services, health system operating costs, capital investments, and such other lawful health expenditures as may be authorized under applicable national guidelines;

WHEREAS, Sections 19.13 to 19.15 of the Implementing Rules and Regulations of Republic Act No. 11223 provide that highly urbanized cities shall endeavor to integrate their health offices, health centers or stations, hospitals, and other city-managed health facilities into a city-wide health system and that each City Health Office shall have, at the minimum, a Health Service Delivery Division and a Health Systems Support Division, with an appropriate organizational structure and staffing pattern responsive to the size, population, geography, and service requirements of the city;

WHEREAS, Section 19.18 of the Implementing Rules and Regulations of Republic Act No. 11223 further provides that the City Health Board shall create a Management Support Unit to assist in its operations, including the management of the Special Health Fund;

WHEREAS, Executive Order No. 36, Series of 2025 reconstituted the Quezon City Health Board, established its expanded governance arrangements and standing committees, constituted a Management Support Unit from existing City Government personnel, and designated the Quezon City Health Department as the Secretariat of the Board;

WHEREAS, Ordinance No. SP-3207, Series of 2023 created a Health Promotion Unit in the Quezon City Health Department for the governance and implementation of health promotion policies, programs, and activities in the City-Wide Health System of Quezon City;

WHEREAS, Quezon City has existing health facilities, city hospitals, primary care facilities, public health programs, health information, epidemiology and surveillance, supply chain, referral, health promotion, emergency response, financing, administrative, and other systems which should be progressively coordinated within a unified city-wide health system while respecting the distinct statutory and organizational mandates of the concerned City offices and institutions;

WHEREAS, it is necessary to institutionalize the Quezon City-Wide Health System and its management support systems through an enabling ordinance that substantially follows national Universal Health Care integration standards while adapting them to the existing governance, financial, organizational, and operational arrangements of Quezon City;

WHEREAS, it is likewise necessary that the pending and future Rationalization and Organizational Restructuring Plan of the Quezon City Health Department conform to the minimum functional structure and responsibilities required of a strengthened City Health Office under the Universal Health Care Act, its Implementing Rules and Regulations, this Ordinance, and other applicable laws and national standards;

NOW, THEREFORE,

BE IT ORDAINED BY THE SANGGUNIANG PANLUNGSOD OF QUEZON CITY, IN SESSION ASSEMBLED:

ARTICLE I
GENERAL PROVISIONS

SECTION 1. TITLE. This Ordinance shall be known as the "**Quezon City-Wide Health System Institutionalization Ordinance.**"

SECTION 2. DECLARATION OF POLICY. It is the policy of Quezon City to progressively realize universal health care through an integrated, people-centered, primary care-oriented, equitable, responsive, accountable, and financially sustainable City-Wide Health System. The City shall pursue managerial, technical, and financial integration of its local health system consistent with Republic Act No. 11223 and shall preserve the respective legal mandates of City departments, offices, hospitals, boards, and facilities while strengthening coordination across the health care continuum.

SECTION 3. OBJECTIVES. This Ordinance seeks to attain the following objectives:

a. Progressively realize universal health care in Quezon City through clear delineation and coordination of the roles of the Quezon City Health Board, Quezon City Health Department, city hospitals, other City offices, health facilities, health care providers, communities, and development partners;
b. Ensure equitable access of Quezon City residents to quality and affordable promotive, preventive, curative, rehabilitative, palliative, mental, dental, and emergency health services, with appropriate prioritization of unserved, underserved, vulnerable, and marginalized populations;
c. Strengthen primary care and the health care provider network, including patient navigation, two-way referral, continuity of care, and appropriate linkages to secondary, tertiary, specialty, apex, and end-referral facilities;
d. Institutionalize and sustain management support systems for health planning, financing, human resources, information management, epidemiology and surveillance, supply chain

management, referral, disaster risk reduction and management in health, health promotion, and other systems required under applicable national standards;

e. Strengthen the Quezon City Health Department as the City Health Office and technical secretariat of the Quezon City Health Board; and
f. Ensure that the QCHD Rationalization and Organizational Restructuring Plan and future organizational revisions conform to the minimum functional structure required under the Universal Health Care Act and this Ordinance.

SECTION 4. GENERAL GUIDELINES. The integration and operation of the Quezon City-Wide Health System shall be guided by the following:

a. The Quezon City-Wide Health System shall organize, coordinate, and progressively integrate City-managed health services, facilities, systems, and resources in accordance with the Universal Health Care Act and its Implementing Rules and Regulations;
b. The system shall include, at the minimum, the Quezon City Health Department, City-owned or City-managed hospitals and other health facilities, health centers and other primary care facilities, and such public health and support units as may be lawfully included in the City-Wide Health System;
c. Private health care providers, professional organizations, civil society organizations, academe, development partners, and other stakeholders may participate through accreditation, contracting, partnership, referral, data-sharing, or other lawful arrangements consistent with national and local policies;
d. Integration shall not, by itself, abolish or transfer the statutory, fiscal, administrative, or personnel authority of any City department, office, hospital, board, or body. Functional coordination shall be undertaken with due regard to their respective mandates; and
e. Health system planning, budgeting, procurement, staffing, information management, and operational measures shall comply with applicable budgeting, accounting, auditing, procurement, Civil Service, data privacy, and other laws and regulations.

ARTICLE II
ORGANIZATION OF THE PUBLIC-LED HEALTH CARE PROVIDER NETWORK

SECTION 5. QUEZON CITY HEALTH BOARD AND HEALTH CARE PROVIDER NETWORK. The Quezon City Health Board, assisted by the Quezon City Health Department as Technical Secretariat and the Management Support Unit as Administrative Secretariat, shall facilitate and sustain the organization and operations of the public-led Health Care Provider Network and the Quezon City-Wide Health System. The Board shall remain constituted in accordance with Executive Order No. 36, Series of 2025, as may be amended or superseded by competent authority, subject to Republic Act No. 7160, Republic Act No. 11223, and applicable national standards.

A General Assembly among public-led Health Care Provider Network members and relevant stakeholders shall be conducted at least once a year, or as often as may be necessary, to discuss system performance, referral arrangements, operational concerns, health priorities, and other matters affecting the City-Wide Health System.

SECTION 6. COMPONENTS OF THE QUEZON CITY-WIDE HEALTH SYSTEM. The Quezon City-Wide Health System shall be composed of coordinated primary care provider network or networks and secondary and tertiary care providers, with linkages to appropriate specialty, apex, and end-referral facilities, as required under national standards.

a. Primary Care Provider Network. A coordinated network of public, private, or mixed primary care providers shall serve as the foundation of the City-Wide Health System. Primary care providers shall function as initial points of contact and patient navigators, facilitate two-way referral, and support continuity of care and appropriate access to patient records in accordance with law and applicable data privacy and interoperability standards.

b. City Hospitals and Other Referral Facilities. City-owned or City-managed hospitals, including the Quezon City General Hospital, Novaliches District Hospital, Rosario Maclang Bautista General Hospital, and such other facilities as may be established or included by law, shall participate in coordinated referral and service delivery arrangements consistent with their respective mandates, licensing, and accreditation.

c. Specialty and Apex Linkages. The City-Wide Health System shall maintain appropriate formal or operational linkages with specialty, apex, end-referral, and other health facilities identified or recognized by the Department of Health, subject to applicable laws, contracts, referral protocols, and institutional agreements.

SECTION 7. MANAGEMENT SUPPORT SYSTEMS UNDER THE QUEZON CITY-WIDE HEALTH SYSTEM. To sustain the operations of the Quezon City-Wide Health System, the City Government shall progressively maintain and strengthen the following management support systems and mechanisms, consistent with applicable national standards and existing City issuances:

1. Local Investment Plan for Health (LIPH) and Annual Operational Plan (AOP). The City shall maintain evidence-informed strategic and annual planning processes that identify health priorities, investment requirements, service delivery improvements, health systems strengthening interventions, and commitments of concerned stakeholders. The LIPH and AOP shall serve as principal bases for the programming and budgeting of health investments, subject to law.
2. Human Resources for Health Management and Development System. The City shall maintain competency-based human resource systems for health workforce planning, deployment, development, performance management, occupational well-being, succession, and retention, which shall include periodic workforce needs and gaps assessment, updated workforce information, training and competency development, and the creation or filling of necessary positions subject to applicable Civil Service, position classification, and budgeting rules.
3. Information Management System. The City shall progressively maintain an integrated and interoperable health information environment capable of timely generation, processing, reporting, and lawful sharing of health and health-related data for clinical care, public health, emergency response, policy development, planning, monitoring, and decision-making. This shall include, as applicable, electronic medical records, telemedicine, health information exchange, dedicated ICT support, and compliance with Republic Act No. 10173, its implementing rules, and relevant data protection and cybersecurity standards.
4. Epidemiology and Surveillance System. The City shall maintain functional epidemiology and surveillance capacities with appropriately trained personnel, technical protocols, data systems, and coordination mechanisms for disease surveillance, case and outbreak investigation, analysis, risk assessment, reporting, and timely public health action.
5. Supply Chain Management System. The City shall maintain a coordinated system for forecasting, selection, procurement, storage, inventory, distribution, utilization monitoring, and accountability for medicines, vaccines, medical supplies, equipment, and other health commodities. Existing Pharmacy and Therapeutics Committee arrangements and other applicable pharmaceutical management issuances shall be observed.
6. Patient Navigation and Referral System. The City shall maintain and periodically update referral and navigation protocols, directories of service capabilities, inter-facility communication arrangements, medical transportation coordination, feedback mechanisms, and formal referral linkages necessary to ensure continuity of care across the health care continuum.
7. Disaster Risk Reduction and Management in Health (DRRM-H) System. The City shall sustain a coordinated DRRM-H system that provides for preparedness, command and control, communication and coordination, emergency operations, health emergency response teams, essential health emergency commodities, patient transport, continuity of essential health services, and other measures required by applicable national and local disaster and health emergency policies.
8. Health Promotion Programs and Campaigns. The City shall sustain proactive, evidence-based, and population-wide health promotion policies, programs, campaigns, and

multisectoral interventions. The Health Promotion Unit established under Ordinance No. SP-3207, Series of 2023, and the Health Promotion Committee or equivalent mechanism established under existing City issuances shall continue to perform their lawful functions, subject to subsequent amendments and the approved QCHD organizational structure.

ARTICLE III
MANAGEMENT STRUCTURE OF THE QUEZON CITY-WIDE HEALTH SYSTEM

SECTION 8. QUEZON CITY HEALTH BOARD. The Quezon City Health Board shall be the principal governance and policy-setting body of the integrated local health system and shall exercise the functions provided under Republic Act No. 7160, Republic Act No. 11223, their implementing rules, and applicable City issuances. Its composition shall be governed by Executive Order No. 36, Series of 2025, as may be amended or superseded in accordance with law.

a. Propose or recommend to the Sangguniang Panlungsod, in accordance with Department of Health standards and applicable planning and budgeting rules, annual budgetary allocations for the operation, maintenance, and development of local health facilities and services;
b. Serve as an advisory body to the Sangguniang Panlungsod and the City Mayor on health policy, appropriations, health system development, and related public health matters;
c. Create, maintain, or recognize technical and standing committees, consistent with Department of Health standards and existing City issuances, to advise on personnel, procurement, grievance and complaints, personnel discipline, budget and operations review, health promotion, maternal health, medicines management, and other health system concerns;
d. Set overall health policy directions and strategic thrusts, including the development, review, and implementation of the LIPH, AOP, and other integrated health system plans;
e. Oversee and coordinate the integration and delivery of health services across the health care continuum;
f. Manage the Special Health Fund in accordance with Republic Act No. 11223 and applicable national and local financial management guidelines;
g. Exercise administrative and technical supervision over health facilities and health human resources within the scope authorized by law, without prejudice to the appointing, disciplinary, fiscal, and administrative authority vested in the City Mayor and other competent authorities; and
h. Perform such other functions as may be provided by law, ordinance, executive issuance, or applicable national health policy.

The Board shall meet at least once a month or as often as may be necessary. A majority of its members shall constitute a quorum for ordinary business, subject to the special quorum and voting requirements for health system plans, the LIPH, AOP, and budget proposals prescribed by the Universal Health Care Act Implementing Rules and Regulations and other applicable laws.

SECTION 9. MANAGEMENT SUPPORT UNIT. The Management Support Unit (MSU), as constituted under Executive Order No. 36, Series of 2025 and as may be subsequently reconstituted, shall serve as the administrative secretariat of the Quezon City Health Board, particularly for Board operations and the administration of the Special Health Fund. It shall be composed of existing City Government personnel or such personnel as may be lawfully designated or appointed, consistent with applicable staffing, budgeting, and Civil Service rules.

a. Assist in the preparation of Quezon City Health Board resolutions on the Special Health Fund budget and related financial and administrative matters;
b. Coordinate the preparation, review, approval, execution, utilization, liquidation, and reporting of budgetary and financial documents with the City Budget Department, City Accounting Department, City Treasurer's Office, QCHD, and other concerned offices;
c. Prepare, consolidate, or facilitate the submission of financial status reports and physical accomplishment reports required under applicable health financing arrangements;

d. Document Board meetings and activities relating to the functionality of the City-Wide Health System and maintain appropriate administrative records in coordination with the QCHD;
e. Assist in monitoring activities, management audits, performance reviews, and compliance reporting, as may be directed by the Board;
f. Coordinate with PhilHealth, the Department of Health, other national agencies, development partners, and City-Wide Health System stakeholders on matters within its mandate; and
g. Perform such other administrative and financial support functions as may be assigned by the Board consistent with law.

SECTION 10. QUEZON CITY HEALTH DEPARTMENT AS CITY HEALTH OFFICE. The Quezon City Health Department (QCHD), as the City Health Office of Quezon City, shall serve as the Technical Secretariat of the Quezon City Health Board, in close coordination with the Management Support Unit, and shall be responsible for the technical integration and supervision of the Quezon City-Wide Health System, particularly with respect to health service delivery and health systems management.

The QCHD shall perform, among others, the following functions:
a. Oversee and coordinate the day-to-day technical and operational activities of the City-Wide Health System falling within the lawful mandate of the QCHD;
b. Facilitate regular management coordination meetings and support the operationalization of the health care provider network based on approved plans and available resources;
c. Monitor the technical and operational performance of the City-Wide Health System, coordinate data collection and analysis, and recommend appropriate actions to the City Health Officer and the Quezon City Health Board;
d. Coordinate periodic monitoring and evaluation of health care provider network performance and the presentation of findings to the appropriate management or governance bodies;
e. Provide technical recommendations on the strategic allocation and utilization of health resources and the Special Health Fund, consistent with law, approved plans, and national and local guidelines; and
f. Perform such other technical secretariat, health service delivery, and health systems management functions as may be provided by law or assigned by competent authority.

Consistent with Sections 19.14 and 19.15 of the Implementing Rules and Regulations of Republic Act No. 11223, the QCHD shall have, at the minimum, the following functional divisions:

1. **Health Service Delivery Division (HSDD).** The HSDD shall manage and coordinate health service delivery operations, including primary care provider networks, health centers and other health facilities, clinical and special services within the mandate of the QCHD, public health programs, health promotion, epidemiology and surveillance, disease prevention and control, and disaster risk reduction and management for health, subject to the approved organizational structure and allocation of functions.
2. **Health Systems Support Division (HSSD).** The HSSD shall manage and coordinate health systems support functions, including health financing and planning, health information systems, procurement and supply chain coordination for health products and services, local health regulation, health human resource development, health infrastructure and logistics planning, health resilience, and other related systems, in close coordination with the concerned City departments and offices and subject to their respective statutory mandates.
3. **Administrative Division or Administrative Support Unit.** The existing administrative structure of the QCHD shall continue to provide personnel administration, records management, general administrative services, property accountability, internal coordination, document management, and other administrative support necessary for the operation of the Department. It shall remain functionally distinct from the HSSD unless

otherwise lawfully reorganized under the approved QCHD Rationalization and Organizational Restructuring Plan.

The permanent heads and staffing of the foregoing divisions shall be established, classified, appointed, designated, or filled only through the lawful personnel and organizational processes applicable to the City Government. Nothing in this Ordinance shall be construed as appointing, confirming, extending, or making permanent any Officer-In-Charge designation, concurrent assignment, or other interim personnel arrangement.

SECTION 11. QCHD RATIONALIZATION AND ORGANIZATIONAL RESTRUCTURING PLAN. The pending and any future QCHD Rationalization and Organizational Restructuring Plan shall conform to and operationalize the minimum functional framework established under Section 10 of this Ordinance and the applicable requirements of the Universal Health Care Act and its Implementing Rules and Regulations.

a. The Plan shall provide, at the minimum, for a Health Service Delivery Division, a Health Systems Support Division, and an Administrative Division or equivalent administrative support unit;
b. The Plan shall provide for the appropriate permanent leadership positions contemplated under Section 19.15 of the Universal Health Care Act Implementing Rules and Regulations, including an Assistant City Health Officer for the HSDD and another official of equivalent rank for the HSSD, if such plantilla items are not yet existing or appropriately aligned, subject to applicable Civil Service, position classification, budgetary, and appointing requirements;
c. Existing offices, units, programs, and functions, including the Health Promotion Unit established under Ordinance No. SP-3207, Series of 2023, shall be rationalized and aligned under the appropriate division without impairing functions mandated by law or valid City issuances;
d. The Plan shall take into consideration the size, population, geography, disease burden, health facility network, service delivery requirements, workforce needs, information and logistics requirements, and financial capability of Quezon City;
e. The Plan shall minimize duplication, preserve continuity of essential health services, respect the statutory mandates of other City departments, offices, and hospitals, and provide appropriate transition arrangements for affected personnel;
f. All personnel actions arising from the Plan shall comply with Civil Service law and rules, applicable position classification and compensation standards, security of tenure protections, budgeting, accounting, and auditing requirements; and
g. Future amendments or updates to the QCHD organizational structure shall preserve the minimum functional requirements established under national law and this Ordinance, unless such requirements are subsequently amended or superseded by law or binding national standards.

SECTION 12. TECHNICAL WORKING GROUPS AND STANDING COMMITTEES. The Quezon City Health Board may create, maintain, reconstitute, or recognize technical working groups, technical management committees, standing committees, and advisory bodies necessary to assist it in the governance and operation of the City-Wide Health System. Existing committees created or recognized under Executive Order No. 36, Series of 2025, Ordinance No. SP-3207, Series of 2023, and other valid City issuances shall continue to perform their lawful functions unless amended, reconstituted, or superseded by competent authority.

Such committees may assist in health needs assessment and integrated planning; patient navigation and referral; management support systems; health promotion; maternal, neonatal, child health and nutrition; medicines and therapeutics; workforce development; emergency preparedness; monitoring and evaluation; policy development; and other matters referred by the Board.

ARTICLE IV
ROLES AND RESPONSIBILITIES

SECTION 13. QUEZON CITY GOVERNMENT. The Quezon City Government shall sustain the implementation and progressive integration of the City-Wide Health System through the following:

a. Provide managerial, technical, and financial support and the resources necessary to maintain an integrated and sustainable City-Wide Health System, subject to law and available appropriations;

b. Promote the participation and commitment of patients and residents, health workers, civil society, private health providers, academe, professional organizations, development partners, and national government agencies in appropriate aspects of city-wide health system planning, delivery, monitoring, and evaluation;

c. Issue or enact such executive, administrative, and legislative measures as may be necessary to implement this Ordinance and applicable health system integration requirements;

d. Progressively create, fund, or fill necessary health and health-support positions based on approved staffing standards, service requirements, and available resources;

e. Strengthen the leadership and management capacities of City health officials, managers, and personnel through continuing capacity development and technical assistance; and

f. Maintain and periodically assess the functionality of the City-Wide Health System and its management support systems against national standards and locally approved performance indicators.

ARTICLE V
FINANCIAL MANAGEMENT AND SUSTAINABILITY

SECTION 14. SPECIAL HEALTH FUND AND FINANCIAL MANAGEMENT. The Quezon City Health Board shall manage the Special Health Fund in accordance with Republic Act No. 11223, applicable joint national guidelines on the allocation, utilization, monitoring, and accountability of the Special Health Fund, as amended or superseded, and applicable City issuances.

a. The Special Health Fund shall be utilized only for lawful health expenditures and purposes authorized under Republic Act No. 11223, applicable national guidelines, approved City health plans, and duly authorized work and financial plans;

b. Planning and budgeting for the Special Health Fund shall be facilitated by the Quezon City Health Board with the assistance of the Management Support Unit and QCHD, in coordination with the City Budget Department, City Accounting Department, City Treasurer's Office, and other concerned offices;

c. All disbursement, utilization, accounting, liquidation, and reporting shall comply with applicable budgeting, accounting, auditing, procurement, and Special Health Fund rules;

d. The City shall comply with applicable requirements for the submission of data and reports on the use and performance of the Special Health Fund; and

e. Nothing in this Ordinance shall be construed to alter the legal treatment of particular PhilHealth payment components, professional fees, provider payments, grants, subsidies, or other health funds that are governed by specific national or local laws, contracts, resolutions, or implementing guidelines. Such funds shall be administered in accordance with the rules specifically applicable to them.

SECTION 15. FINANCIAL SUSTAINABILITY. To promote financial sustainability of the Quezon City-Wide Health System:

a. The City shall provide appropriate local funding for health programs, projects, activities, personnel services, capital outlay, maintenance and other operating requirements through the annual or supplemental budget, subject to law and available resources;

b. The Special Health Fund shall serve as an authorized health financing mechanism and shall not be construed as replacing the City's regular responsibility to budget for essential health services and operations;

c. The City may receive and administer PhilHealth payments, national government grants and subsidies, donations, official development assistance, and other lawful health financing sources in accordance with the conditions governing each source;

d. Contractual arrangements, Terms of Partnership, memoranda of agreement, and other instruments required for the receipt or transfer of health funds shall be executed in accordance with law and the authority of the concerned City officials and bodies; and

e. Government budgeting, accounting, auditing, procurement, and financial management laws and regulations shall govern the receipt, allocation, disbursement, utilization, liquidation, and reporting of all public funds covered by this Ordinance.

ARTICLE VI
IMPLEMENTING RULES AND OPERATIONAL GUIDELINES

SECTION 16. IMPLEMENTING RULES AND GUIDELINES. Within ninety (90) days from the effectivity of this Ordinance, or within such reasonable period as may be determined by the City Mayor upon recommendation of the Quezon City Health Board, the Quezon City Health Board, through the QCHD and in coordination with the Management Support Unit, City Legal Department, City Budget Department, City Accounting Department, City Treasurer's Office, City Human Resource Management Department, City Planning and Development Department, City Procurement Department, and other concerned offices, shall formulate, harmonize, or update the necessary implementing, transition, technical, financial, and operational guidelines.

The implementing guidelines shall be consistent with Republic Act No. 11223 and its Implementing Rules and Regulations, Republic Act No. 7160, applicable Civil Service and public financial management rules, this Ordinance, and valid and subsisting City issuances.

ARTICLE VII
APPROPRIATIONS

SECTION 17. APPROPRIATIONS. The funds necessary for the initial implementation of this Ordinance shall be charged against available appropriations of the concerned City departments and offices, subject to applicable budgeting, accounting, auditing, procurement, and other laws. Funding requirements for newly created or reclassified positions, additional staffing, systems, facilities, equipment, and other requirements arising from the approved QCHD Rationalization and Organizational Restructuring Plan and the implementation of the City-Wide Health System shall be included in the appropriate annual or supplemental budget, as may be authorized by law.

ARTICLE VIII
MISCELLANEOUS AND TRANSITORY PROVISIONS

SECTION 18. CONTINUITY AND HARMONIZATION OF EXISTING ISSUANCES. Executive Order No. 36, Series of 2025; Ordinance No. SP-3207, Series of 2023; and other valid and subsisting City health ordinances, executive orders, office orders, special orders, resolutions, rules, and guidelines shall continue to have force and effect insofar as they are not inconsistent with this Ordinance;

Existing executive and departmental designations, concurrent assignments, interim arrangements, and internal work assignments shall remain subject to amendment, revocation, replacement, or reissuance by the competent appointing or designating authority. Nothing in this

Ordinance shall be interpreted as legislatively appointing any person, making any interim designation permanent, or restricting the lawful authority of the City Mayor, City Health Officer, or other competent authority over personnel actions.

To the extent that an existing City issuance is inconsistent with a mandatory requirement of Republic Act No. 11223, its Implementing Rules and Regulations, or this Ordinance, the inconsistent provision shall be harmonized, amended, or superseded in accordance with law.

SECTION 19. SEPARABILITY CLAUSE. If any part, section, or provision of this Ordinance is declared unconstitutional or invalid, the remaining provisions not affected thereby shall continue in full force and effect.

SECTION 20. REPEALING AND AMENDING CLAUSE. All ordinances, resolutions, executive orders, administrative issuances, rules, regulations, and parts thereof inconsistent with this Ordinance are hereby repealed, amended, or modified accordingly; provided that existing health programs, committees, systems, and operational arrangements shall continue unless expressly inconsistent with this Ordinance or law.

SECTION 21. EFFECTIVITY. This Ordinance shall take effect after compliance with the posting and publication requirements under Republic Act No. 7160 and other applicable laws.

ENACTED: _____

Submitted by:

KRISTINE ALEXIA R. MATIAS, RN
City Councilor, District 6