Republic of the Philippines
Quezon City
23rd SANGGUNIANG PANLUNGSOD

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PROPOSED ORDINANCE NO. PO23CC-_____, S, 2026

AN ORDINANCE INSTITUTIONALIZING A CHRONIC KIDNEY DISEASE EARLY DETECTION PROGRAM IN QUEZON CITY, PROVIDING FUNDS THEREFOR, AND FOR OTHER PURPOSES

Introduced by **Councilor KRISTINE ALEXIA R. MATIAS, RN**

WHEREAS, Section 16 of Republic Act No. 7160, otherwise known as the Local Government Code of 1991, mandates local government units to promote the general welfare, including the health and safety of their constituents;

WHEREAS, Republic Act No. 11223, otherwise known as the Universal Health Care Act, provides for the strengthening of primary care and local health systems to ensure access to quality and affordable health services;

WHEREAS, Chronic Kidney Disease, or CKD, is a serious non-communicable disease which may progress silently and may lead to kidney failure, dialysis, disability, financial hardship, and premature death if not detected and managed early;

WHEREAS, persons with diabetes, hypertension, obesity, cardiovascular disease, family history of kidney disease, and other related risk factors are more vulnerable to CKD and should be given access to early screening, counseling, follow-up, and referral services;

WHEREAS, the Quezon City Government recognizes the need to strengthen community-based CKD awareness, early detection, referral, and management as part of its primary health care and non-communicable disease programs;

NOW, THEREFORE,

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

SECTION 1. Short Title. This Ordinance shall be known as the **"Iwas Dialysis, Ligtas Kidneys Ordinance of Quezon City."**

SECTION 2. Declaration of Policy. It is hereby declared the policy of Quezon City to promote preventive health care, strengthen primary care services, and reduce the burden of Chronic Kidney Disease through early detection, health education, timely referral, and appropriate management of at-risk residents.

SECTION 3. Establishment of the Program. There is hereby established a **Chronic Kidney Disease Early Detection Program** in Quezon City, otherwise known as the **"Iwas Dialysis, Ligtas Kidneys Program,"** to be implemented by the Quezon City Health Department.

SECTION 4. Objectives. The Program shall have the following objectives:

a. Promote public awareness on CKD, its risk factors, prevention, and early signs;
b. Identify and screen residents who are at risk of CKD;
c. Provide counseling, follow-up, and referral for persons with abnormal or high-risk screening results;

d. Strengthen the capacity of health workers in CKD screening, patient education, and referral;
e. Integrate CKD early detection into existing primary care, non-communicable disease, PhilHealth, and community health programs; and
f. Generate local health data to guide policy, planning, budgeting, and program improvement.

SECTION 5. Priority Beneficiaries. The Program shall prioritize Quezon City residents who are at risk of CKD, including but not limited to persons with diabetes, hypertension, obesity, cardiovascular disease, family history of kidney disease, history of abnormal kidney-related findings, elderly residents, indigent patients, and other persons assessed by health professionals to be clinically at risk.

SECTION 6. Program Components. The Program shall include the following components:

a. **Health Promotion and Advocacy** – conduct of CKD awareness campaigns, community education, and information dissemination on kidney health, healthy lifestyle, and prevention of risk factors;
b. **Risk Assessment and Screening** – identification of at-risk individuals through health centers, barangays, community-based activities, and other appropriate venues;
c. **Screening Tests** – use of appropriate CKD screening tools and tests, including urine albumin-to-creatinine ratio testing, urinalysis, serum creatinine/eGFR, or other clinically indicated tests, subject to applicable standards, availability of resources, and health protocols;
d. **Post-Screening Counseling and Referral** – counseling of screened individuals, proper documentation of results, referral for confirmatory testing when indicated, and referral to appropriate health facilities or specialists;
e. **Continuity of Care** – integration of identified patients into existing primary care, non-communicable disease, PhilHealth/YAKAP, medicine access, nutrition, and other relevant city health services;
f. **Capacity-Building** – training of doctors, nurses, medical technologists, laboratory personnel, barangay health workers, and other concerned personnel on CKD screening, counseling, documentation, and referral pathways;
g. **Data Collection and Evidence Generation** – collection and analysis of program data for planning, policy development, monitoring, and evaluation, subject to confidentiality and data privacy safeguards;
h. **Partnerships** – coordination with national government agencies, professional societies, barangays, health facilities, academic institutions, civil society organizations, and other stakeholders; and
i. **Equipment, Supplies, and Logistics Support** – provision, procurement, acceptance, proper use, storage, maintenance, and accountability of equipment, supplies, forms, and other materials needed for the Program, in accordance with existing government rules.

SECTION 7. Lead Implementing Office. The **Quezon City Health Department** shall be the lead implementing office of this Ordinance. The City Health Officer may designate a Program Coordinator or technical working group to oversee planning, implementation, monitoring, and evaluation.

The QCHD shall coordinate with barangays, health centers, city-owned public hospitals, national government agencies, PhilHealth, and other concerned offices, subject to their respective mandates, capacities, and existing protocols.

SECTION 8. Role of Barangays. Barangays shall assist in community information dissemination, identification and mobilization of eligible beneficiaries, provision of suitable venues when available, crowd management, and referral of residents to the nearest health center or designated screening site.

SECTION 9. Referral Network. The QCHD shall establish a clear referral pathway for patients with abnormal or high-risk findings, including referral to appropriate physicians, diagnostic facilities, city-owned public hospitals, national government hospitals, private facilities, or specialist care, as may be necessary and available.

SECTION 10. Data Privacy and Confidentiality. All personal and health information collected under the Program shall be handled in accordance with the Data Privacy Act of 2012, its Implementing Rules and Regulations, and other applicable issuances.

The QCHD shall ensure informed consent, authorized access, secure storage, limited use of personal data, and de-identified or aggregate reporting whenever possible.

SECTION 11. Ethical Standards and Non-Endorsement. All partnerships, donations, technical assistance, training, and program support shall comply with applicable laws, rules on government ethics, procurement, donations, accountability of public property, and conflict-of-interest standards.

No activity under this Ordinance shall be construed as an endorsement of any specific private company, product, medicine, device, or commercial brand.

SECTION 12. Monitoring and Evaluation. The QCHD shall prepare an annual program report for submission to the Local Health Board and the Sangguniang Panlungsod, indicating, among others, the number of persons reached, screened, found at risk or positive, referred, followed up, and served, as well as implementation issues and policy recommendations.

SECTION 13. Implementing Rules and Guidelines. Within ninety (90) days from the effectivity of this Ordinance, the QCHD, in coordination with the Local Health Board and other concerned offices, shall issue the necessary implementing rules, guidelines, protocols, forms, referral pathways, data privacy safeguards, and monitoring tools for the effective implementation of this Ordinance.

SECTION 14. Appropriations. The amount necessary for the initial implementation of this Ordinance shall be charged against available appropriations of the Quezon City Health Department and other appropriate sources, subject to existing budgeting, accounting, auditing, procurement, and disbursement rules.

Thereafter, funds necessary for the continued implementation of the Program shall be included in the annual budget of the Quezon City Government.

SECTION 15. Separability Clause. If any provision of this Ordinance is declared invalid or unconstitutional, the remaining provisions not affected thereby shall remain valid and effective.

SECTION 16. Repealing Clause. All ordinances, resolutions, rules, regulations, and issuances inconsistent with this Ordinance are hereby repealed, amended, or modified accordingly.

SECTION 17. Effectivity. This Ordinance shall take effect after its publication in accordance with law.

ENACTED. _____

Submitted by:

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