

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

FIFTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 2394

Introduced by **REP. ALFREDO "ALBEE" B. BENITEZ**

EXPLANATORY NOTE

The 1987 Constitution guarantees the protection and promotion of the health of its citizens and declares that the State shall endeavor to make health services available to everyone. As such, the role of health workers in the country is crucial in the delivery of health services.

The health sector in the Philippines continues to be beset with the exodus of nurses and doctors seeking higher-paying jobs abroad leading to poor delivery of health services in the country, especially in the rural areas. In 2009 alone, a total of 13,465 nurses were hired abroad (POEA, 2009). Nurse to patient ratio in the country is now at 1:40 up to 1:80 as oppose to the mandated 1:20 ratio.

Thus, Barangay Health Workers (BHWs) are being utilized more in the delivery of health services especially in the remote and rural areas because of the existing health human resource crisis.

However, a number of problems continue to hound the BHWs in terms of providing their allowances and honoraria. Some BHWs cannot even avail of the benefits as provided in the Republic Act 7883 or the Barangay Health Workers Benefits and Incentives Act because they are being removed due to various political issues in the local levels.

The crucial and heroic role that BHWs play makes them deserving of much more than what they are receiving today.

This proposed measure aims to provide a reasonable set of benefits and incentives to BHWs to compensate for the work that they perform in making health services accessible to all. It also provides for additional incentives such as health care coverage and scholarship programs to both BHWs and their dependents, accreditation of work experience for degree equivalent, remote assignment allowance and GSIS membership. In addition, this measure seeks to ensure that BHWs will not be removed from service without just cause.

The passage of this proposed measure will not only grant due recognition to the valuable services that BHWs render, but will hopefully encourage more people to serve as BHWs in their localities. Such increase in the number of BHWs would contribute positively to the goal of government for a more effective delivery of health services and make health care accessible to all.

In view of the foregoing, approval of this measure is earnestly sought.


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AN ACT PROVIDING FOR A MAGNA CARTA FOR BARANGAY HEALTH WORKERS

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

SECTION 1. Short Title - This Act shall be known as the "Magna Carta for Barangay Health Workers of 2010".

SEC. 2. Declaration of Policy - It is the policy of the state to protect and promote the right to health of people and adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all people. It shall then be its declared policy to promote and improve the social well-being and welfare of the Barangay Health Workers who are the forefront of the delivery of health care in the grassroots level. Towards this end, the State shall adopt policies that will guarantee enhanced quality of life of the Barangay health workers.

SEC. 3. Definition of Terms -

- a) Barangay Health Worker (BHW) - refers to a person who has completed the basic training program for Barangay Health Workers of DOH or training programs by any accredited government or non-government organization and who voluntarily renders primary health services in the community after having been accredited to function as such by the Local Health Board (LHB);
- b) Basic Training Program for Barangay Health Work - refers to the three (3) month training program for BHW applicants, which shall include internship for a duration of two months;
- c) Hazard - refers to the risks in work areas, units or stations to which BHWs are assigned or rendering services;
- d) BHW Organized Groups - refers to a group, association, confederation of BHWs at the barangay, municipal, city, provincial, regional, or national levels, having an independent and autonomous function such as those of People's Organizations (Pos) and NGOs and are registered in the Securities and Exchange Commission or the Cooperative Development Authority;
- e) Voluntary Services - refers to health and health-related activities rendered by a BHW on his/her own free will to the community for which he/she has no certificate of appointment and is not given any remuneration or salary;

- f) BHW Registration and Accreditation Committee (BHW-RAC) – refers to the body that facilitates the registration and accreditation of BHWs; and
- g) BHW Registry – list of registered and accredited BHWs to be maintained in the municipal, regional and national levels.

SEC. 4. Coverage – This policy shall cover all registered and accredited barangay health workers nationwide who voluntarily renders primary health care services and other health promotion functions: *Provided*, that they are not receiving salaries from any government agency or institution.

SEC. 5. Provision of Barangay Health Worker – There shall be provided at least one (1) health worker in every barangay throughout the country. Such health worker shall be under the control and supervision of the Department of Health in close coordination with the Local Government Health Officer. As far as practicable, the barangay health worker to be employed must be living in the barangay where he/she is to be assigned, or within the city or municipality in which the barangay is to be found.

SEC. 6. Basic Training Program for Barangay Health Work – The DOH shall develop a three-month training program for BHW applications. The first month shall include basic orientation and training on health programs and institutionalized health service delivery system, primary healthcare, basic community organizing, local health research, basic local resource generation and mobilization, training needs analysis, basic report writing and communication skills, and program planning and development. The program will also offer seminars on basic dental care, reproductive health, STI and HIV/AIDS prevention, nutrition, physical therapy, traditional and herbal medicine and reflexology.

As a requirement for the completion of the training program, applicants shall undergo an internship program where they will render health and community services in their own rural health units for two months to integrate their learnings from the orientation and with community healthcare services delivery.

A certificate of completion shall be issued by the municipal health officer to those who have finished the basic training program for barangay health work.

SEC. 7. Registration – The City or Municipal BHW Registration and Accreditation Committee (BHW-RAC) shall evaluate applications of BHWs and process the registration and accreditation of Barangay Health Workers (BHWs). The BHW-RAC shall propose the limitations on the number of BHWs per municipality or city based on the health needs and accessibility of health services in the area.

- a) **Qualifications for Registration** – To qualify for registration, a BHW must undergo the DOH basic training program for BHWs.
- b) **Procedure of Registration** – The BHW applicant shall submit to BHW-RAC his/her application and documents as may be required by the DOH. The BHW-RAC shall release result of the screening not later than seven (7) working days after the submission of complete application documents.

SEC. 8. Accreditation. – In order for barangay health workers to be entitled to some benefits and incentives under this Act, they must be duly-accredited by the local health board: *Provided*, that the BHW that will be eligible for accreditation must have rendered at least one (1) year of service in his/her barangay. Accredited BHWs shall be provided with a certificate of accreditation and a BHW Privilege Card.

The local health boards, through the provincial health boards in the case of municipalities, shall furnish a copy of registered and accredited BHWs to the DOH, which is hereby mandated to maintain a national registry of barangay health workers.

SEC. 9. BHW Registry – The CHDs shall be responsible in updating the BHW registry in their respective regions and shall submit an updated copy to the DOH Central office every quarter who shall be responsible in maintaining the national BHW registry, which shall be the reference of agencies that will be providing incentives and benefits to BHWs.

SEC. 10. BHW Privilege Card – all accredited Barangay Health Workers shall be provided with a privilege card as a proof that they are entitled to the benefits and incentives granted under this Act.

SEC. 11. Incentives and Benefits -

1. **Hazard Allowance** – All registered barangay health workers performing services in difficult areas, strife-torn or embattled areas, distresses or isolated stations, disease-infested areas or in areas declared under state of calamity or emergency for the duration thereof which expose them to great danger, contagion, radiation, volcanic activity/eruption occupational risks or perils to life as determined by the local health board and the local government unit concerned: *Provided*, that the hazard allowance shall be equivalent to the hazard allowance received by the rural health nurse in the barangay as mandated in Republic Act No. 7305.
2. **Subsistence Allowance** – All registered Barangay health workers who render service within the premise of isolated barangay health stations in order to make their services available at any and all times shall be entitled to subsistence allowance equivalent to the meals they take in the course of their duty, which shall be computed in accordance with prevailing circumstances as determined by the local government unit concerned: *Provided*, that the subsistence allowance shall be equivalent to the subsistence allowance received by the rural health nurse in the barangay as mandated in Republic Act No. 7305.
3. **Remote Assignment Allowance** – All registered Barangay health workers rendering services in remote areas or isolated barangays, which for reasons of far distance makes health care facilities inaccessible for the residents, shall be entitled to an incentive bonus in the form of remote assignment allowance: *Provided*, That the remote assignment allowance shall be equivalent to the subsistence allowance received by the rural health nurse in the barangay as mandated in Republic Act No. 7305.
4. **PHILHEALTH Compulsory Coverage**– All accredited Barangay Health Workers shall be enrolled in the National Health Insurance program for them to receive and avail of an adequate package of personal health services that must include in-patient hospital care, out-patient care, emergency and transfer services, and also other supplementary health benefits as may be defined by the Philippine Health Insurance Corporation (PHIC) and the local government unit (LGU) where they render services. The premium contribution shall be borne by the LGU concerned: *Provided*, That the national government shall subsidize fifty percent (50%) of the contributions of fourth, fifth and sixth class municipalities.
5. **GSIS Compulsory Coverage** – All accredited Barangay Health Workers shall be enrolled in the government service insurance system to enable them to receive and avail of the life insurance, retirement, disability and funeral benefits.

The standard monthly contributions, shall be borne by the LGU concerned; *Provided*, That the national government shall subsidize fifty percent (50%) of the contributions of fourth, fifth and sixth class municipalities.

6. **Medical Assistance** – Accredited BHWs shall avail of medical assistance from concerned LGUs, Philippine Charity Sweepstakes Office (PCSO) and DSWD for health care services, medical procedures and surgeries that are not covered by Philhealth.
7. **Medical Examination** – Compulsory medical examination shall be provided free of charge to all public health workers before entering BHW service and shall be repeated once a year as long as the BHW is still rendering services in their respective barangays.
8. **Compensation from Work-Related Injuries** – Any injury incurred by BHWs during the performance of their duties shall be compensated. The DOH shall release the corresponding rate of payment per possible injury.
9. **Preferential Access to Loans**
 - a. **For BHW organized groups** – Government agencies providing loan services will set aside one percent (1%) of their loanable funds for organized barangay health worker groups that have community-based income generating projects in support of health programs or activities.
 - b. **For individual BHWs** – Accredited BHWs shall have preferential access to loans such as, but not limited to housing loans, calamity loans, multi-purpose loans. The Department of Health, in coordination with other concerned agencies shall provide, within one hundred (100) days after the effectivity of this Act, an inventory of government loans that may be availed by individual BHWs and mechanisms on how accredited BHWs may access such loans.
10. **Free Legal Services** – Free legal representation and consultation services shall likewise be available for all accredited barangay health workers by the Public Attorneys Office. The DOH shall endeavor to enter into a Memorandum of Agreement (MOA) with the Integrated Bar Association of the Philippines (IBP).
11. **Training, Education and Career Enrichment Programs** – The DOH, in coordination with CHED and the University of the Philippines shall provide scholarships and opportunities for continuing trainings and studies for accredited BHWs. The program will include but not limited to the following:
 - a. Scholarship programs to courses that will upgrade their skills and knowledge for community work including but not limited to Bachelor of Science in Community Health, Midwifery, Nursing, Pharmacy and Medicine: Provided, that the BHW who will be afforded with scholarships is required to serve for at least five years after graduating from their chosen courses.
 - b. Study and exposure tours that will improve their knowledge on community health works as may be funded by the DOH or the LGU concerned.
12. **Support for Program Scholars** – Courses under the training, education and career enrichment programs shall be offered to BHWs free of charge. The Department of Health shall offer full scholarships, socialized subsidies, and “study now pay later” schemes for BHWs availing of the scholarship programs.
13. **Accreditation of Work Experience for Degree Equivalent** – The DOH, in coordination with CHED, shall release mechanisms or guidelines on the accreditation of years of service rendered by BHWs equivalent to appropriate degree in the field of medicine and community and social work that are available in state universities and colleges.
14. **Grant of Scholarships to Dependents of BHWs** – College scholarships to any state universities and colleges or TESDA scholarships shall be granted to a maximum of two (2) children of accredited BHWs.

15. Civil Service Eligibility - A second grade eligibility shall be granted to barangay health workers who have rendered five (5) years continuous service as such: Provided, that should the barangay health worker become a regular employee of the government, the total number of years served as barangay health worker shall be credited to his/her service in computing retirement benefits.

SEC. 12. Security of Tenure - No BHW shall be removed from the list of registered and accredited BHWs of cities or municipalities except when the BHW has been proven as non-performing, is no longer mentally and physically fit to perform his/her duties and or if the BHW is guilty of medical malpractice, falsification of documents, tampering of official government documents and of other criminal offenses to be determined by the DOH and other concerned agencies.

SEC. 13. Appropriations - An initial allocation of Fifty Million Pesos (50,000,000.00) shall be included in the General Appropriations Act to support the policies and objectives under this Act. Congress shall provide subsequent appropriations in the annual budget of the Department of Health under the General Appropriations Act.

Local governments shall adopt a cost-sharing financing scheme for the implementation of the basic course on Barangay Health Work depending on the income level of the concerned local government units.

SEC. 14. Implementing Rules and Regulations - The Department of Health, in consultation with the Department of Interior and Local Government, Civil Service Commission, CHED, TESDA, GSIS and the National Confederation of Barangay Health Workers, shall prepare within one hundred and eighty (180) days the necessary rules and regulations to implement the provisions of this Act. Rules and regulations issued pursuant to this section shall take effect thirty (30) days after publication in a newspaper of general circulation.

SEC. 15. Separability Clause - If any provision of this Act is declared invalid, the remainder or any of this provision hereof not affected thereby shall remain in force and effect.

SEC. 16. Repealing Clause - All laws, decrees, executive orders, presidential issuances and other administrative rules and regulations or parts thereof which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

SEC. 17. Effectivity - This Act shall take effect fifteen (15) days after its publication in at least two (2) national newspapers of general circulation.

Approved,