

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

Fifteenth Congress
First Regular Session

HOUSE BILL NO. 2831

Introduced by the Honorable Janette L. Garin, M. D.

EXPLANATORY NOTE

This bill aims to strengthen and expand the scope of the practice of midwifery in the Philippines by granting them additional powers as well as enhance the general welfare and commitment to service and professionalism of midwives by providing a minimum base pay for those working in public health institutions, amending for the purpose pertinent provisions of Republic Act No. 7392, otherwise known as the Philippine Midwifery Act of 1992.

As the Barangay is the basic social institution, so are midwives the frontline health providers of maternal and child care. Midwives comprise the largest occupational group in our public and private health systems and are often the first point of contact in local communities. They are the ones you find in rural health units, assisting in the delivery of babies and giving care to women and their newborns before, during, and after pregnancy. Around eighteen thousand (18,000) midwives are currently employed in the country.

The 2006 Family Planning Survey (FPS) showed a slow decline of maternal deaths from 209 (1993, NDS) to 162 for every 100,000 live births (maternal mortality ratio). The World Health Organization (WHO), United Nations Population Fund (UNFPA) and the World Bank (WB) 2005 Joint Report estimated around 4,600 mothers die annually while the 2008 National Demographic and Health Survey showed infant mortality rate (IMR) at 25 deaths per 1000 live births. The common reported direct causes of maternal deaths in Philippine Health Statistics are hypertension (28.14%), post-partum hemorrhage (17.2) and pregnancy with abortive outcome (8.3%). Among the neonates, the leading causes of deaths are asphyxia, sepsis and prematurity.

The good news is that the reduction of maternal and perinatal morbidity and mortality can be achieved with the help of midwives. However, at present, there are limitations on the scope of functions midwives can do to address the leading causes of maternal and newborns deaths. These limitations can be mitigated by an enabling policy environment that will support and empower midwives to save the lives of mothers and newborns, who are entitled to their rights to life, and the highest attainable standard to health.

Through this bill, midwives can better respond to emergency situations through administration of life-saving drugs, especially to hard-to-reach areas among the 42,000 villages where lives of mothers and newborns are at stake in the absence of doctors or referral facilities. Moreover, the approval of bill is a compliance with the United Nations Millennium Development Goals (MDGs), to which the Philippines is a signatory, which aims on accelerating improvements to reduce under-five children and maternal deaths all over the world by 2015.

Hence, approval of this bill is highly recommended.


JANETTE L. GARIN, M.D.

HOUSE OF REPRESENTATIVES

Quezon City, Metro Manila

FIFTEENTH CONGRESS

FIRST REGULAR SESSION

HOUSE BILL NO. 2831

Introduced by **Honorable Janette L. Garin, M.D.**

**AN ACT EXPANDING THE SCOPE OF THE PRACTICE OF MIDWIFERY, AMENDING FOR
THE PURPOSE REPUBLIC ACT 7392, OTHERWISE KNOWN AS THE PHILIPPINE
MIDWIFERY ACT OF 1992, AND FOR OTHER PURPOSES**

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

SECTION 1. Article III, Section 23 of Republic Act 7392 is hereby amended to read as
follows:

Sec. 23. Practice of Midwifery Defined. – The practice of midwifery consist in performing or rendering, or offering to perform or render, for a fee, salary, or other reward or compensation, services requiring an understanding off the principles and application of procedures and techniques in the supervision and care of women during pregnancy, labor and puerperium management of normal deliveries, including the performance of internal examination during labor except when the patient is with antenatal bleeding; health education of the patient, family and community; primary health care services in the community, including nutrition and family planning in carrying out the

written order of physicians with regard to antenatal, intra-natal and post-natal care of the normal pregnant mother in giving immunization, including oral and parenteral dispensing of oxytocic drug after delivery of placenta, suturing parietal lacerations to control bleeding, to give intravenous fluid during obstetrical emergencies, **ADMINISTER LIFE-SAVING DRUGS SUCH AS MAGNESIUM SULPHATE, OXYTOCIN, STEROIDS AND ORAL ANTIBIOTICS WHEN NO PHYSICIAN IS AVAILABLE**, provided [they have been trained for that purpose] they are appropriately trained for that purpose and certified proficient to perform the necessary care and services to prevent maternal deaths[; and may inject Vitamin K to the newborn:]

MIDWIVES ARE ALSO HEREBY ALLOWED TO ADMINISTER ESSENTIAL NEWBORN CARE INCLUDING, BUT NOT LIMITED TO, IMMUNIZATION AND INJECTING VITAMIN K TO THE NEWBORN.

Provided, however, that this provision shall not apply to students in midwifery schools who perform midwifery service under the supervision of their instructors[, nor to emergency cases].

DOH SHALL ISSUE GUIDELINES ON THE ACCREDITATION OF MIDWIVES TO PERFORM EMERGENCY OBSTETRIC AND NEONATAL CARE (E/EmONC). ALL PRACTICING MIDWIVES WHO INTEND TO PERFORM

E/EmONC MUST GET ACCREDITATION FROM DOH AFTER NECESSARY TRAININGS AND EXAMINATION AND OTHER REQUIREMENTS AS MAY BE REQUIRED BY DOH.

SECTION. 2. A new provision is inserted between Sections 23 and 24 of Republic Act No. 7395, to read as follows:

"SEC. 24. CONTINUING PROFESSIONAL EDUCATION - A REGISTERED MIDWIFE IS REQUIRED TO MAINTAIN COMPETENCE BY CONTINUAL LEARNING THROUGH CONTINUING PROFESSIONAL EDUCATION TO BE PROVIDED BY THE ACCREDITED PROFESSIONAL ORGANIZATION OR ANY RECOGNIZED PROFESSIONAL MIDWIFERY ORGANIZATION, PROVIDED, THAT THE PROGRAM AND ACTIVITY FOR THE CONTINUING PROFESSIONAL EDUCATION SHALL BE SUBMITTED TO AND APPROVED BY THE PROFESSIONAL REGULATION COMMISSION, AFTER DUE CONSULTATION WITH THE BOARD OF MIDWIFERY."

SECTION 3. The following provisions shall be inserted between sections 26 and 27 of Republic Act 7392, to read as follows:

"SEC. 27. STUDIES FOR MIDWIFERY MANPOWER NEEDS, PRODUCTION, UTILIZATION AND DEVELOPMENT - THE BOARD, IN COORDINATION WITH THE ACCREDITED PROFESSIONAL ORGANIZATION AND APPROPRIATE GOVERNMENT OR PRIVATE AGENCIES, SHALL INITIATE, UNDERTAKE AND CONDUCT STUDIES ON HEALTH HUMAN RESOURCE PRODUCTION, UTILIZATION, PLACEMENT AND DEVELOPMENT.

SEC. 28. COMPREHENSIVE MIDWIFERY PROGRAM - WITHIN ONE (1) YEAR FROM THE EFFECTIVITY OF THIS ACT, THE BOARD, IN COORDINATION WITH THE ACCREDITED PROFESSIONAL ORGANIZATION, NATIONAL ORGANIZATIONS, ACCREDITED SERVICE PROVIDERS AND THE DEPARTMENT OF HEALTH IS HEREBY MANDATED TO FORMULATE AND DEVELOP A COMPREHENSIVE MIDWIFERY PROGRAM THAT INCLUDES A VALID ASSESSMENT OF CAREER PERFORMANCE AND POTENTIAL, THUS, UPGRADE THE LEVEL OF SKILL AND COMPETENCE OF MIDWIVES IN THE COUNTRY. SUCH AS BUT NOT LIMITED TO THE AREAS OF SKILL OF MATERNAL AND CHILD CARE AND SUCH OTHER AREAS AS MAY BE DETERMINED BY THE BOARD. THE BENEFICIARIES OF THE PROGRAM ARE OBLIGED TO SERVE IN ANY RURAL OR COMMUNITY HOSPITAL FOR A PERIOD OF AT LEAST TWO (2) YEARS FROM THE DATE OF THE COMPLETION OF THE PROGRAM.

SEC. 29. SALARY AND COMPENSATION - IN ORDER TO ENHANCE THE GENERAL WELFARE AND COMMITMENT TO SERVICE AND PROFESSIONALISM OF MIDWIVES, THE MINIMUM BASE PAY OF MIDWIVES WORKING IN PUBLIC HEALTH INSTITUTIONS SHALL NOT BE LOWER THAN THE 1ST STEP OF HIRING RATE PRESCRIBED FOR SALARY GRADE 8 PURSUANT TO RA NO. 6758, OTHERWISE KNOWN AS THE "COMPENSATION AND CLASSIFICATION ACT OF 1989". PROVIDED THAT FOR MIDWIVES WORKING IN LOCAL GOVERNMENT UNITS, ADJUSTMENTS TO THEIR SALARIES SHALL BE IN ACCORDANCE WITH SECTION 10 OF THE SAME ACT.

SEC. 30. FUNDING FOR THE COMPREHENSIVE MIDWIFERY PROGRAM - THE ANNUAL FINANCIAL REQUIREMENT NEEDED TO TRAIN AT LEAST TEN PERCENT (10%) OF MIDWIVES OF THE PARTICIPATING GOVERNMENT HOSPITAL SHALL BE CHARGEABLE AGAINST THE INCOME OF THE PHILIPPINE CHARITY SWEEPSTAKES OFFICE AND THE PHILIPPINE AMUSEMENT AND GAMING CORPORATION, WHICH SHALL EQUALLY SHARE IN THE COSTS AND SHALL BE RELEASED TO THE DEPARTMENT OF HEALTH SUBJECT TO ACCOUNTING AND AUDITING PROCEDURES. PROVIDED, THAT THE DEPARTMENT OF HEALTH SHALL SET THE CRITERIA FOR THE AVAILMENT OF THIS PROGRAM.

SECTION 4. Implementing Rules and Regulations. – Within one (1) year from the approval of this Act, the Department of Health (DOH) shall promulgate a new implementing rules and regulations which shall be published in at least two (2) newspapers of general circulation.

SECTION 5. Separability Clause. – If any part or provision of this Act shall be held unconstitutional or invalid, other provisions which are not affected thereby shall continue to be in full force and effect.

SECTION 6. Repealing Clause. – All laws, issuances or parts thereof inconsistent with this Act are hereby repealed or modified accordingly.

SECTION 7. Effectivity. – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in at least two (2) newspapers of general circulation

Approved,