



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

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 501



Introduced by Representative Crispin Diego “Ping” D. Remulla

AN ACT
UPHOLDING THE RIGHT OF PATIENTS TO THE REDRESS OF THEIR
TREATMENT-RELATED GRIEVANCES BY MANDATING THE CREATION OF
GRIEVANCE BOARDS IN ALL PUBLIC AND PRIVATE HOSPITALS
TO BE SUPERVISED BY THE DEPARTMENT OF HEALTH,
AND FOR OTHER PURPOSES

EXPLANATORY NOTE

The 1987 Philippine Constitution upholds the right of every Filipino to health and human dignity. Article II, Section 15 specifically provides that “The State shall protect and promote the right to health of the people and instill health consciousness among them.” In the evolving landscape of healthcare, characterized by increased access, heightened patient awareness, and rapid medical advancements, this constitutional mandate holds even greater relevance today.

Although recent efforts, such as the Universal Health Care (UHC) law, have expanded access to medical services nationwide, reports from the Department of Health (DOH) and the Philippine Health Insurance Corporation (PhilHealth) show that many patients continue to experience issues regarding the quality of healthcare. In 2023 alone, the DOH received over 1,200 patient complaints, ranging from substandard services and delays in treatment to allegations of malpractice and neglect. Unfortunately, the available legal remedies, such as civil suits under Article 2176 of the Civil Code, criminal charges under the Revised Penal Code,

or administrative complaints under the Medical Act of 1959, are often expensive, time-consuming, and intimidating for ordinary citizens.

To address this issue, there is an urgent need for a more straightforward, more accessible, and less adversarial system for addressing complaints in healthcare settings. This proposal envisions the establishment of a formal grievance redressal mechanism in all healthcare institutions, whether public or private. Each facility would establish a Grievance Committee composed of hospital administrators, licensed physicians, a representative from the local health office, and a representative from a local consumer arbitration officer. This committee would handle complaints related to acts or omissions by health professionals and seek to resolve them through fair and impartial mediation.

Patients or their representatives would be allowed to submit grievances, detailing their concerns and the relief they are seeking. The Grievance Committee would then review the case, conduct a fact-finding process, and strive to resolve the issue in a timely and respectful manner. Importantly, utilizing this grievance system does not prevent the complainant from pursuing further legal or administrative action. Instead, it provides an initial layer of institutional accountability that is both accessible and responsive to the public's concerns.

In recognition of the constitutional right to health and the pressing need for a patient-centered and transparent healthcare system, this bill aims to establish a grievance redress mechanism in all healthcare institutions nationwide.

A handwritten signature in black ink, appearing to read 'C. Remulla', with a stylized flourish at the end.

CRISPIN DIEGO "PING" D. REMULLA



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

1 **SECTION 1. Short Title.** - This Act shall be known as the “*Patients’ Grievance*
2 *Machinery Act*”.

3 **SEC. 2. Declaration of Policy.** - It shall be the policy of the State to protect and promote
4 the right to health of the people and instill health consciousness among them. Likewise, the
5 State values the dignity of every human person and guarantees full respect for human rights.
6 To this end, an efficient, effective and just grievance mechanism must be created to protect the
7 rights of patients to decent, humane and quality health care. This Act aims to establish a
8 reasonable mechanism for resolving problems and complaints in connection with their
9 treatment.

10 **SEC. 3. Definition of Terms.** - As used in this Act, the following terms are defined as
11 follows:

12 (1) *Grievance* - any complaint arising from injury or death by a patient in relation to his
13 or her diagnosis, prognosis and treatment by a physician and/or his or her assistant due to, but
14 not limited to, the following:

15 a. Gross negligence or gross incompetence in the practice of his or her profession:

b. Aiding or acting as a dummy of an unqualified or unregistered person to practice medicine;

c. Violation of the doctor-patient privilege:

(2) *Gross negligence* - pursuit of a course of conduct which would naturally and reasonably result in injury. It is characterized by want of even slight care, acting or omitting to act in a situation where there is a duty to act, not inadvertently but willfully and intentionally with a conscious indifference to consequences insofar as other persons may be affected. The existence of negligence in a given case is not determined by reference to the personal judgment of a person involved in the complaint, but what would be reckless, blameworthy or negligent in the man of ordinary intelligence, and prudence.

(3) *Grievance Board* - the grievance machinery instituted by a hospital that will receive, examine, investigate and resolve all grievances that may fall under its jurisdiction.

(4) *Legal Representative* - the members of the patient's immediate family or his or her guardian or counsel chosen by the patient to represent him or her.

(5) *Health Care Provider*- all medical and health personnel involved in the diagnosis, prognosis and treatment of a patient.

(6) *Hospital* - those health institutions defined as such under Republic Act 4226 or the Hospital Licensure Act of 1965.

(7) *Consumer Arbitration Officer* - persons appointed for the effective and efficient protection of consumer rights under Republic Act No. 7394 of the Consumer Act of the Philippines.

SEC. 4. Establishment of a Grievance Machinery in all Public and Private Hospitals.

- All hospitals are hereby mandated to create a grievance board that will receive, investigate, adjudicate, and recommend actions to arrive at settlement of complaints related to the diagnosis, prognosis and treatment of patients who sought the services of such health institution.

The Hospital-based grievance machinery shall be composed of at least five (5) members:

(1) One (1) grievance officer appointed and permanently designated by the hospital with a rank of supervisory or managerial, and who must not be a doctor or a physician, who shall act as the Chairperson;

(2) Three (3) doctors from the hospital's pool of physicians, provided that, none of them were part of the team who treated the patient-complainant and, provided finally, that

1 they are recognized experts in the field of medicine which is the subject matter of the
2 grievance;

3 (3) One (1) representative from the Philippine Medical Association;

4 (4) The local health officer or his duly authorized representative, provided, that the latter
5 ate least be a full-time staff of the local health unit, and at least a college graduate;

6 (5) One (1) consumer arbitration officer exercising jurisdiction over the area where the
7 hospital is located;

8 Each hospital shall prepare a list of experts for each filed who are authorized to sit in
9 the Board.

10 The Department of Health shall ensure the establishment of and oversee the grievance
11 committees created under this Act.

12 The successive steps in the procedure, the method of presenting grievances, and the
13 method of taking an appeal should be clearly stated and integrated in the hospital's rules and
14 regulations.

15 **SEC. 5. How grievance is taken; time for filing.** - A patient desiring to file a grievance
16 under this Act may file a complaint in writing, signed and sworn to by the patient himself or
17 herself, or his or her legal representative with the hospital's grievance board within thirty (30)
18 days from the happening of the event which forms basis of the complaint. The complaint must
19 state the act or omission complained of, the parties against whom the complaint is directed at,
20 the conduct or duty violated, other allegations that the complainant may deem necessary to
21 include.

22 **SEC. 6. Action on the grievance.** - Upon receipt of the grievance, the grievance officer
23 shall examine the allegations of the complaint and determine if falls within the jurisdiction of
24 the Grievance Board. The officer shall give due notice of the respondents. For purposes of
25 determining whether the complaint is actionable or not, the grievance officer may require or
26 allow the parties to submit affidavits, briefs or other documents as it may deem necessary
27 within such periods and under such conditions as it may consider appropriate.

28 The grievance officer shall have fifteen (15) days from the receipt of the complaint to
29 act on the same. If the complaint is considered not actionable for a valid cause, the grievance
30 officer shall inform the patient, or his or her legal representative, in writing, of the basis of the
31 said dismissal. Should the officer find that the complaint is actionable, he or she shall submit a
32 report to and recommend the case for mediation before the Board.

33 The Board shall resolve the grievance within thirty (30) days from receipt of the
34 officer's report.

1 Nothing in this Act shall deprive the patient the right to seek other remedies allowed
2 under the laws, provided that he or she shall not be allowed to recover twice for the same
3 remedy.

4 **SEC. 7. Remedies to be Awarded.** - Upon finding that the physician and/or his or her
5 assistants are guilty of any of the acts identified herein as grievances, the Board, though a
6 majority vote of all the members of the Board, except the Grievance Officer who endorsed the
7 grievance, may grant the relief prayed for by the complainant, provided, it shall be limited to
8 compensation for actual monetary loss and will not cover "pain and suffering or other explicitly
9 non-monetary losses. The Committee may likewise recommend the respondent for disciplinary
10 action under the civil service rules and regulations in case of public hospitals, and the
11 physician's medical association.

12 **SEC. 8. Rules of Procedure.** - The hospital shall promulgate rules of procedures
13 governing the resolution of grievances, Provided, it shall not be inconsistent with any of the
14 provisions of this Act, and Provided, Further, that prior to the implementation, the rules of
15 procedure shall be submitted to the Department of Health for the latter's approval. The
16 procedure should be adaptable to the handling of various types of grievances which may be
17 adjudicated under the hospital's grievance machinery and facilitate the settlement of
18 complaints as soon as possible after they arise. It shall also include the rules on taking appeal.
19

20 All the records received from the parties and the proceedings of the Board shall be
21 strictly confidential and cannot be disclosed, except upon lawful order of a competent court.

22 **SEC. 9. Appeal.** - Any party adversely affected by a decision, ruling or inaction by the
23 hospital-based grievance machinery on a patient's grievance, may file an appeal before the
24 Secretary of the Department of Health, who shall act on the appeal within thirty (30) days from
25 the receipt of the appeal.

26 **SEC. 10. Prescriptive Period.** - The time during which the case is submitted for
27 mediation shall toll the running of the prescriptive period for the filing of a civil or criminal
28 case under the Revised Penal Code or any administrative case under existing laws.

29 **SEC. 11. Protection Against Retaliation.** - No hospital, healthcare provider, or
30 personnel shall retaliate against any patient, relative, or staff member who files or assists in the
31 filing of a grievance. Acts of retaliation shall be subject to disciplinary measures, including
32 suspension or revocation of licenses, depending on the severity.

33 **SEC. 12. Rules and Regulations.** - The Secretary of Health, in consultation with the
34 Philippine Medical Association, the Philippine Hospital Association, the Philippine Health

1 Insurance Corporation and concerned private agencies, non-governmental organizations and
2 people's organizations shall promulgate such rules and regulations as may be necessary for its
3 implementation within one hundred eighty (180) days from the effectivity of this Act.

4 **SEC. 13. *Separability Clause.*** - If any provision or part hereof, is held invalid or
5 unconstitutional, the remainder of the law or the provision not otherwise affected shall remain
6 valid and subsisting.

7 **SEC. 14. *Repealing Clause.*** - All laws, decrees, orders, rules, and regulations or parts
8 thereof, inconsistent with this Act are hereby amended or modified accordingly.

9 **SEC. 15. *Effectivity Clause.*** - This act shall take effect fifteen (15) days following its
10 publication in a newspaper of general circulation.

Approved,