

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

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 838



INTRODUCED BY **REP. KRISTINE ALIXIE B. TUTOR**

THIRD DISTRICT, BOHOL

EXPLANATORY NOTE

Art II, Section 15 of the 1987 Philippines Constitution provides that, "The state shall protect and promote the right to health of the people and instill health consciousness among them." Further, under Article XIII, Section II of the 1987 Constitution provides that "The state shall adopt an integrated and comprehensive approach to health development, which shall endeavor to make essential goods, health and other social services available to all the people at an affordable cost."

The state recognizes the dynamic role of midwives in the provision of preventive and promotive health care services, including primary health care services for women, children and other members of the community. It is for this reason this bill seeks to promote and strengthen the practice of midwifery. The midwives are the frontliners in the delivery of healthcare services particularly in geographically isolated disadvantaged area. (GIDA) Rebel infested areas and other areas where others fear to tread.

Midwifery professions is presently regulated by RA 7392, or the Philippines Midwifery Act of 1992. This bill aims to strengthen the regulatory and professional practice of midwifery in the Philippines, through the enhancement of the general welfare and commitment to services and professionalism of midwives working in public and private institutions.

The strengthening of the practice of midwifery profession seek to result in health services that would be more accessible, affordable and appropriate to address needs of the patients. This also has the purpose that no mother will die or be injured in the process of giving life to a healthy newborn baby.

In view of the forgoing considerations approval of this bill is earnestly requested.

REP. KRISTINE ALEXIE B. TUTOR

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INTRODUCED BY **REP. KRISTINE ALIXIE B. TUTOR**

THIRD DISTRICT, BOHOL

AN ACT STRENGTHENING THE PRACTICE OF MIDWIFERY AS A PROFESSION IN THE PHILIPPINES, PROVIDING FUNDS THEREFOR, REPEALING FOR THE PURPOSE REPUBLIC ACT NO. 2644, OTHERWISE KNOWN AS "THE PHILIPPINE MIDWIFERY LAW" AND REPUBLIC ACT NO. 7392, OTHERWISE KNOWN AS THE PHILIPPINE MIDWIFERY ACT OF 1992

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

ARTICLE I

TITLE

SECTION 1. *Short Title.* – This Act shall be known as the "Philippine Midwifery Act".

ARTICLE II

DECLARATION OF POLICY AND DEFINITION OF TERMS

SEC. 2. *Declaration of Policy.* – It is hereby declared the policy of the State to assume responsibility for the protection and enhancement of the midwifery profession. The State shall adopt measures that will continuously improve the knowledge, skills and competence, and ethical standards of midwives to prevent the increase in maternal and infant mortality rates. It is further declared a policy of the State to strengthen the practice of midwifery as an allied medical profession so that no mother will die or be injured in the process of giving life to a healthy newborn.

The State also recognizes the critical role of midwives in the provision of preventive and promotive health care services for women, children and other members of the community.

SEC. 3. Definition of Terms. – As used in this Act:

- (a) *Accredited Integrated Professional Organization (AIPO)* refers to the concerned Board and Professional Regulation Commission (PRC) Accredited Integrated Professional Organization for a given profession which is specifically mandated by the provision of Professional Regulatory Law (PRL) to integrate the professionals into one national organization and where the membership therein by the professional is automatic and mandatory.
- (b) *Bachelor of Science in Midwifery* refers to a four (4) year degree program consisting of general education and professional courses leading to a Bachelor's degree in Midwifery.
- (c) *Code of Ethics* refers to the set of principles of practices and standards of behavior that shall govern the ethical conduct, moral obligations, and professional duties to be observed by all registered and licensed midwives.
- (d) *DOH Clinical Practice Guidelines* refers to the evidence-based document developed by Department of Health (DOH), in consultation with relevant public and private stakeholders, that presents the appropriate health care for specific clinical circumstances, with the goal of delivering the optimal care to clients.
- (e) *Life Saving Drugs* refers to the drugs such as oxytocin, magnesium sulfate, antenatal steroids and antibiotics among other medicines used to prevent and manage pregnancy related complication.
- (f) *Medicine Delivery Network* refers to the network of organizations that provides or makes arrangements to provide equitable, comprehensive, integrated, and continuous good quality health services to a defined population, with minimum duplications and inefficiencies.
- (g) *Midwife* refers to a person who has successfully completed midwifery education and program and who is registered and licensed to practice by the Professional Regulatory Board of Midwifery and the PRC as defined under Republic Act (RA) No. 7392 or the "Philippine Midwifery Act of 1992."

- 1 (h) *Skilled Health Professionals* refer to the providers such as midwives,
2 doctors, or nurses who were educated, licensed, and trained to proficiency
3 in the skill needed to manage pregnancies, childbirth, and the immediate
4 newborn period and in the identification, management and referral of
5 complications in mothers and newborns.

6
7 **ARTICLE III**
8 **THE BOARD OF MIDWIFERY**

9
10 **SEC. 4. *Composition of the Board.*** – There shall be a Board of Midwifery,
11 hereinafter referred to as the Board, which shall be under the direct supervision of the
12 PRC. It shall be a collegial body composed of a chairperson and four (4) members to
13 be appointed by the President of the Republic of the Philippines.

14
15 **SEC. 5. *Qualifications of the Chairperson and Members of the Board.*** –

- 16
17 (a) The Chairperson of the Board shall, at the time of appointment, must have
18 the following qualifications:

- 19
20 (1) A natural born citizen and resident of the Philippines;
21 (2) Of good moral character;
22 (3) A graduate registered midwife;
23 (4) Have at least 10 years in practice as a midwife; and
24 (5) A holder of master's degree or doctorate degree in any of the
25 following fields: public health, maternal and child health, community
26 health, primary health care, health services administration, health
27 systems or health care management;

- 28
29 (b) The three (3) members of the Board shall, at the time of the appointment,
30 must have the following qualifications:

- 31
32 (1) A natural born citizen and resident of the Philippines;
33 (2) Of good moral character;
34 (3) A graduate registered midwife;
35 (4) Have at least ten (10) years in practice as a midwife; and
36 (5) A holder of master's degree or doctorate degree in any of the
37 following fields: public health, maternal and child health,

community health, primary health care, health services administration, health systems or health care management;

(6) Have at least ten (10) years in practice as a midwife prior to their appointment;

(c) One (1) member of the Board shall, at the time of the appointment, must have the following qualifications:

(1) A natural born citizen and resident of the Philippines;

(2) Of good moral character; and

(3) Have at least five (5) years in practice as an obstetrician-gynecologist preferably diplomate prior to the appointment.

SEC. 6. Disqualifications of the Board Members. – The following are disqualified to become members of the Board:

(a) Member of the faculty, whether full time or part time or lecturer of any school, college or university where a regular course is midwifery;

(b) Those who have pecuniary interest, directly or indirectly in any school, college or university during their term of office as member of the Board;

(c) Officer or member of the Board of Trustees of a midwifery organization; and

(d) Those who hold positions which violate the provisions of RA No. 6713, otherwise known as the "Code of Conduct and Ethical Standards for Public Officials and Employees" or which violates incompatibility of office under items a to c of this Section.

SEC. 7. Terms of Office. – The Chairperson shall hold office for six (6) years without reappointment. Two (2) members shall hold office for four (4) years without reappointment. Two (2) members shall hold office for three (3) years subject to reappointment for only one term. Any vacancy in the Board occurring within the term of a member shall be filled for the unexpired portion of the term only.

SEC. 8. Compensation of Board Members. – The Chairperson, and members of the Board shall receive compensation and allowances or other benefits pursuant to the provisions of RA No. 8981 and other pertinent laws comparable to the compensation and allowances received by the chairperson and members of existing professional regulatory boards.

SEC. 9. Removal of Board Members. – Any members of the Board may be removed by the President of the Republic of Philippines, upon the recommendation of the PRC, for neglect of duty, incompetence, or unethical, immoral, and dishonorable conduct after having been given the opportunity to defend oneself in a proper administrative investigation conducted by the PRC.

SEC. 10. Powers and Duties of the Board. – The Board shall supervise and regulate the practice of midwifery profession and shall have the following powers, duties and functions:

- (a) Enforce the provisions of this Act;
- (b) Conduct Professional Licensure Examination for midwifery;
- (c) Administer oaths in accordance with the provision of this Act;
- (d) Issue, suspend, or revoke certificates of registration for the practice of midwifery;
- (e) Maintain a registry of midwives in good standing in cooperation with AIPO;
- (f) Maintain and collect data of midwives in the country in coordination with PRC Information and Communications Technology Service and the DOH by requiring the registration of all midwives in the National Health Workforce Registry or other human resource for health data collection system of the government and during their initial registration and renewal of licenses;
- (g) Provide inputs on national and global midwifery practice to the Commission on Higher Education (CHED) to be considered in the development and periodic updating of the midwifery curriculum;
- (h) Conduct hearings and investigations to resolve complaints against midwives for malpractice, unethical and unprofessional conduct, and violation of this Act or its implementing rules and regulations, and in connection therewith;
- (i) Issue *subpoena ad testificandum* and *subpoena duces tecum* and to punish with contempt persons obstructing, impeding, or otherwise interfering with the conduct of such proceedings upon application with the court, or both;
- (j) Promulgate a Code of Ethics, in coordination and consultation with AIPO and professional organizations representing registered and practicing midwives in the Philippines, within one (1) year from the effectivity of this Act;
- (k) Conduct inspection and monitoring of educational institutions and facilities where midwifery services are offered or midwifery programs are taught to

- ascertain that the standards of midwifery education are properly complied with and maintained at all times;
- (l) Submit an annual report to the PRC at the end of each calendar year, giving a detailed account of its proceedings and the accomplishments and recommending measures to upgrade and improve the conditions affecting the midwifery practice and education;
 - (m) Adopt an official seal to authenticate its official documents;
 - (n) Attend meetings regularly;
 - (o) Study the conditions affecting midwifery education and the practice of the midwifery profession in the Philippines;
 - (p) Assess the standards pertaining to the retraining and skills enhancement programs designed for midwives seeking advanced training or those in need of bridging education;
 - (q) Undertake initiatives and establish support mechanisms aimed at enhancing the retirement preparedness of midwives, with the objective of ensuring their post-retirement years are marked by financial security, personal fulfillment, and strong support;
 - (r) Adopt a proactive approach in actively engaging a diverse range of stakeholders within the sector to foster the advancement and development of midwifery practice in the Philippines;
 - (s) Subject to the approval of the PRC, set ethical and professional standards for the practice of midwifery and adopt such rules and regulations as may be necessary to carry out the provisions of this Act; and
 - (t) Represent the Board in sectoral management.

SEC. 11. *Meetings of the Board.* – The Board shall hold a regular meeting at least once a month within the PRC premises or in such other places as may be agreed upon on such date and time fixed by the Board. A special meeting may be called by the chairperson or any of its two (2) members to consider, deliberate or act upon urgent and important matters. The Board Secretary shall keep the minutes of the regular and special meetings of the board. The minutes shall be signed and certified as correct by the members of the board present.

1 **SEC. 12. *Administrative Supervision of the Board and Custodian of its***
2 ***Records.*** – The members of the Board shall be under the general supervision of the PRC.
3 All records, including examination paper, applications for examinations, administrative and
4 other investigative cases conducted by the Board shall be under the custody of the PRC.

5
6 **ARTICLE IV**
7 **MIDWIFERY EDUCATION**

8
9 **SEC. 13. *Standards for Midwifery Education.*** – To ensure quality midwifery
10 education in the Philippines, the CHED has the following duties and responsibilities in
11 coordination with the Professional Regulatory Board of Midwifery:

- 12
13 (a) Establish standards for midwifery education, including the setting of minimum
14 qualifications of faculty, and the facility requirements for training, and among
15 others;
- 16 (b) Develop and periodically review the basic curriculum in consultation with the
17 DOH, the Board, AIPO, Association of Philippine Schools of Midwifery, and
18 other midwifery organization;
- 19 (c) Monitor and evaluate the performance of midwifery programs of schools,
20 colleges, and institutions;
- 21 (d) Examine the facilities of universities and colleges of midwifery, and those
22 seeking permission to open the midwifery courses prescribed; and
- 23 (e) Impose appropriate sanctions on institutions that do not fulfill the
24 aforementioned standards, such as downgrading or withdrawal of
25 accreditation, and termination of the program or school course, among others,
26 in coordination with the Board.

27
28 **SEC. 14. *Schools of Midwifery.*** – To become a duly accredited and legally
29 constituted higher education institution for midwifery education and training as provided for
30 in RA No. 7392, a school of midwifery shall have applied and secured a permit from the
31 Commission CHED. The school shall operate a midwifery program in accordance with the
32 existing policies, standards and guidelines for midwifery education.

33
34 **SEC. 15. *Qualifications of Faculty.*** – The faculty shall have academic preparation
35 appropriate to teaching assignment, as follows:

- 1 (a) A holder of a master's degree in health and social sciences or a degree of Doctor of
2 Medicine;
- 3 (b) Has a proof of competence in the chosen field of specialization;
- 4 (c) A registered nurse or registered midwife in the Philippines with at least one (1) year
5 of satisfactory teaching experience or one (1) year of efficient performance in
6 maternity ward: *Provided*, That a registered midwife may be allowed to follow up
7 student midwives in the community ward provided that said midwife has at least two
8 (2) years of experience in the area of assignment and has undergone training in the
9 supervision of students; and
- 10 (d) A member of good standing of AIPO or other national association of midwives.

11
12 **SEC. 16. *Mandatory Continuing Professional Development.*** – A registered
13 midwife is required to maintain competence by continual learning through Continuing
14 Professional Development (CPD). The Implementation of the CPD programs and activities
15 for the midwifery profession shall be governed by RA No. 10912, otherwise known as the
16 “Continuing Development Act of 2016” and its Implementing Rules and Regulation.

17 18 **ARTICLE V**

19 **PROFESSIONAL LICENSURE EXAMINATION AND REGISTRATION OF MIDWIVES**

20
21 **SEC. 17. *Professional Licensure Examination Required.*** – All applicants for
22 registration to the practice of midwifery in the Philippines shall be required to pass the
23 Professional Licensure Examination which shall be given by the Board in such places and
24 dates as may be designated by the PRC: *Provided*, That it shall be in accordance with RA
25 No. 8981: *Provided, further*, That for those who are graduates of a two (2) year diploma
26 courses and are already registered midwives prior to the passage of this Act shall be given
27 an equivalency to a four (4) year degree program. The parameters to such equivalency
28 shall be based on the following:

- 29
30 (a) Years of experience;
- 31 (b) Ladderized education or training already taken; and
- 32 (c) Continuing professional development requirements.

1 Upon compliance with the established parameters, the PRC shall issue the appropriate
2 registration to the midwives. Those who fail to comply with the established parameters
3 shall be allowed to take the Professional Licensure Examination for a four year degree
4 course.

5
6 **SEC. 18. *Scope of Professional Licensure Examination.*** – The scope of
7 Examination for the practice of midwifery shall consist of the following:

- 8
9 (a) Newborn, infant and child health related procedures to midwifery;
10 (b) Obstetrical anatomy and physiology;
11 (c) Obstetrics including essential intrapartum and basic emergency obstetric care;
12 (d) Principles of Microbiology and parasitology as applied to midwifery practice;
13 (e) Pharmacology as applied to midwifery practice;
14 (f) Midwifery procedures;
15 (g) Primary Health Care which covers community care, public health, and
16 preventive care;
17 (h) Maternal nutrition, newborn, infant and young child feeding including
18 breastfeeding and complementary feeding;
19 (i) Responsible parenthood, family planning, adolescent health and reproductive
20 health;
21 (j) Ethics and legal jurisprudence of midwifery practice;
22 (k) Professional growth and development, and entrepreneurship; and
23 (l) Other subjects that the Board may deem necessary for inclusion from time to
24 time.

25
26 **SEC. 19. *Prerequisite and Qualifications of Applicants for Professional***
27 ***Licensure Examination.*** –

28 In order to be admitted to the Professional Licensure Examination for midwifery, an
29 applicant must be:

- 30
31 (a) Mentally, emotionally and physically sound with a certificate of good moral
32 character signed by the Head of a recognized and duly government midwifery
33 institution or midwifery school from where the applicant graduated;
34 (b) A graduate of midwifery in a government recognized and duly accredited
35 institution; and

1 (c) At the time of the issuance of a certificate of registration, a citizen of the
2 Philippines and at least eighteen (18) years of age.

3
4 For purposes of admission to the midwives', the applicant must submit the
5 following documentary requirements:

- 6
7 (a) Philippine Statistics Authority authenticated copy of the certificate of live
8 births;
9 (b) Certified true copy of the official transcript of records;
10 (c) Duly accomplished form, certified as true and correct by the clinical instructor
11 and dean or principal of the school of midwifery attesting to the applicant's:
12 (1) Handling of at least twenty (20) actual deliveries
13 (2) Suturing of at least five (5) perineal lacerations
14 (3) Insertion of at least five (5) intravenous fluids
15 (4) Conduct of at least ten (10) internal examinations
16 (d) Other documents that the Board may require provided any additional
17 requirement has been subject of prior consultation and is duly announced in a
18 public document.

19
20 **SEC. 20. Fees for Professional Licensure Examination.** – The applicants for
21 examination for the practice of midwifery shall pay an examination fee as prescribed by
22 the PRC.

23
24 **SEC. 21. Ratings in the Professional Licensure Examination.** – To be qualified as
25 having passed the professional licensure examination for midwives, the examinee must
26 obtain a general rating of seventy-five percent (75%) in the written test with no grade lower
27 than fifty percent (50%) in any of the examination subjects.

28
29 **SEC. 22. Report on the Results of the Board Examinations.** – As a result of fully
30 computerized examination, the Board shall, within thirty (30) days after the examination,
31 report the ratings obtained by each examinee to the PRC. The PRC shall, after days from
32 receipt, release to the public the results of the Board examinations.

33
34 **SEC. 23. Oath of Profession.** – All successful examinees shall be required to take
35 an oath of profession before the Board or any government official authorized to administer
36 oaths prior to entering the midwifery practice.

1 **SEC. 24. Issuance of Certificate of Registration/Professional License and**
2 **Professional Identification Card.** – A certificate of Registration and Professional License
3 as a midwife shall be issued to an applicant who passed the application upon payment of
4 the prescribed fees. Every certificate of registration and professional license shall show the
5 full name of the Chairperson of the PRC and of the members of the Board, and the official
6 seal of the PRC.

7
8 **SEC. 25. Registration of Nurse Midwife.** – A Certification of Registration may be
9 issued to registered nurses who passed the examination for midwives: *Provided*, That the
10 nurse, before being allowed to take the examination submit written evidence to the Board
11 that one has handled at least twenty (20) delivery cases as certified by the municipal, city or
12 Provincial Health Officer or chief of a duly registered or recognized hospital, DOH and
13 PhilHealth accredited birthing centers.

14
15 **SEC. 26. Inhibition Against the Practice of Midwifery.** – No person shall practice
16 or offer to practice midwifery in the Philippines, as defined in this Act without holding a valid
17 Certificate of Registration and Professional License as midwife.

18
19 **SEC. 27. Foreign Reciprocity.** – A certificate of registration and professional license
20 maybe issued to midwives registered under the laws of a foreign country or state. *Provided*,
21 That the requirements for registration or licensing of midwives in said country are
22 substantially the same as those prescribed under this Act: *Provided, further*, That the laws of
23 such state or country grant the same privileges to registered midwives of the Philippines.

24
25 **SEC. 28. Exemption in Taking a Bridging Course.** – Midwives who possess a
26 diploma degree and obtained a PRC license prior to the implementation of this Act shall be
27 no longer required to undertake bridging courses for the eventual attainment of a Bachelor's
28 degree. Their status as midwives with valid licenses shall be maintained. Conversely,
29 midwives with a diploma degree who acquired their PRC license after the implementation of
30 this Act are obligated to successfully complete bridging courses leading to the conferment
31 of a Bachelor's degree while retaining their license to practice.

ARTICLE VI
PRACTICE OF MIDWIFERY

SEC. 29. *Practice of Midwifery Defined.* – The practice of midwifery consists of performing, rendering or offering for a fee, salary or other reward or compensation services requiring an understanding of the principles and application of procedures and techniques in:

- (a) Managing normal and uncomplicated pregnancies and deliveries;
- (b) Identifying pregnancy complications and danger signs, and immediate referral of high-risk pregnancy woman to the appropriate facility in the service delivery network;
- (c) Caring for the newborn, and proper assessment initial management, and immediate referral of newborn complications;
- (d) Carrying out the written order of physicians on natal, ante-natal, intra-natal and post-natal care of the normal pregnant mother which includes the following:
 - (1) Oral and parenteral dispensing of oxytocic drug before or after delivery of placenta as a measure to prevent postpartum hemorrhage, provided the delivery is normal, spontaneous and single birth; and
 - (2) Suturing of 1st degree (small, skin deep tears which usually heal naturally) and 2nd degree (deeper tear affecting the muscle of the perinium as well as the skin this require stitches) of perineal lacerations to control bleeding and giving of intravenous fluid insertion during obstetrical emergencies provided they have been trained for that purpose.
- (e) Providing family planning services which include modern and natural family planning method including counseling on informed choices to women of reproductive age;
- (f) Administering recommended vaccines related to Maternal and child health care and as vaccinator as stated in Section 9 of RA No. 11525, otherwise known as the “COVID-19 Vaccination Program Act of 2021”;
- (g) Providing primary care in the community, with emphasis on preventive and promotive health care services;
- (h) Performing the following procedures to a newborn, infant or young child:

- (1) Four core-time bound interventions during the first 60-90 minutes of life of the newborn in accordance to the Essential Newborn Care
 - (a) Immediate and thorough drying;
 - (b) Early skin to skin contact;
 - (c) Properly-timed clamping and cutting of the cord after 1 to 3 minutes; and
 - (d) Non-separation of the newborn from the mother for early breastfeeding initiation and rooming in.
- (2) Administration of the following after the first full breastfeeding of the newborn:
 - (a) Recommended dose of Intramuscular Vitamin K to prevent Hemorrhagic disease of the newborn;
 - (b) Ophthalmic prophylaxis ointment to prevent neonatal conjunctivitis;
 - (c) Intramuscular administration of Hepatitis B vaccine;
 - (d) Intradermal administration of Bacillus Calmette Guerin (BCG) vaccine;
 - (e) Newborn Screening; and
 - (f) Performing other tasks or procedures to be determined by the DOH: *Provided*, That the scope, requirements and interpretation of said functions shall be specified in the Clinical Practice Guidelines to be jointly promulgated by the DOH and the Professional Board of Midwifery in consultation with AIPO and other midwifery organizations.

SEC. 30. *Revocation and Suspension of Certificate of Registration and Cancellation.* – The Board shall have the power to revoke or suspend the validity of a certificate of registration of a midwife for any of the causes mentioned in the preceding section, or in cases of: (a) unprofessional conduct; (b) professional malpractice; (c) clear professional incompetence; (d) serious ignorance or negligence; (e) assisting or performing abortion in the practice of midwifery; or (f) using fraud, deceit or false statements to obtain a certificate of registration. From the final decision of the Board, appeal maybe taken to the PRC whose decision shall be final and executory.

1 **SEC. 31. *Refusal to Issue Certificate of Registration.*** – The Board shall refuse to
2 issue a certificate of registration to any person convicted by the court of competent
3 jurisdiction of any criminal offense involving moral turpitude, and to any person guilty of
4 immoral or dishonorable conduct. The Board shall give the applicant a written statement
5 setting forth the reason or reasons for its action, which statement shall be incorporated in
6 the records of the Board.

7
8 **SEC. 32. *Reissuance and Replacement of Revoked Certificates.*** – The Board
9 may, for reasons of equity and justice and upon proper application therefor issue another
10 copy of the certificate upon payment of dues, and in so doing, it may exempt the applicant
11 for the requisite examination.

12
13 **SEC. 33. *Midwives Positions in Public Health Facilities.*** – All public health
14 facilities such as government owned and controlled corporation with original charter, DOH-
15 retained hospitals, local government unit-managed hospitals at the district level, shall have
16 plantilla positions for midwives: *Provided*, That the compensation of midwives working in
17 public health service shall not be lower than Salary Grade 11 as entry salary for midwives,
18 pursuant to RA No. 6758, otherwise known as the “Compensation and Position
19 Classification Act of 1989. Also, as provided for under the Civil Service Law, a government
20 employee has to work eight (8) hours a day or forty (40) hours a week: *Provided, further*,
21 That for midwives working in health facilities under local government units, adjustment to
22 their compensation shall be in accordance with Section 10 of the same Act: *Provided*,
23 *furthermore*, other benefits and entitlements shall also be provided to midwives by their
24 public health employers in accordance with existing laws.

25
26 **SEC. 34. *Midwives in Private Health Facilities.*** – Midwives employed or contracted
27 by private health facilities shall have salaries and benefits not lower than the minimum wage
28 set by the Department of Labor and Employment. Government midwives who practice in
29 private facilities after their regular office hours shall comply with the existing guidelines set
30 by the Civil Service Commission and DOH.

31
32 **SEC. 35. *Midwives with Birthing Centers.*** – Midwives who shall establish and
33 manage their own birthing centers shall comply and be properly guided with the regulatory
34 standards and operating procedures as defined by the Department of Health; This shall
35 take into consideration certain requirements such as to number of facilities providing

maternal care services in a particular geographic or territorial jurisdiction and based on an assessment of actual maternal care service requirement in a particular community.

Midwives offering services in these facilities should likewise comply with PhilHealth Certification and Accreditation standards. Midwives with birthing facilities and offering pregnancy and other reproductive health related services shall both be accredited as service provider and a Modern Family Planning accredited facility to comply with quality standards. Claims on maternal and newborn care package and family planning service must be paid on time.

ARTICLE VII PROHIBITED ACTS AND PENALTIES

SEC. 36. *Prohibited Acts.* – No person shall:

- (a) Practice midwifery in the Philippines within the meaning of this Act without a certificate of registration issued in accordance herewith;
- (b) Present or use the certificate of registration of another;
- (c) Give any false or forged evidence to the PRC in order to secure a certificate of registration;
- (d) Use a revoked or suspended certificate of registration;
- (e) Assume, use or advertise, as a registered midwife or a registered nurse midwife or appending to one's name the letters R.M. without having been conferred such title by the PRC; and
- (f) Advertise any title description tending to convey the impression that one is a registered midwife.

SEC. 37. *Penal Provisions.* – Any person who shall violate any of the provisions stated in Section 36 of this Act or any of its implementing rules and regulations as promulgated by the Board, subject to the approval of the PRC, shall upon conviction, be punished to a fine of not less than Fifty thousand pesos (Php 50,000) nor more than One hundred thousand pesos (Php 100,000), or to suffer imprisonment for a period of not less than to two (2) years nor more than seven years, or both such fine and imprisonment at the discretion of the court.

ARTICLE VIII FINAL PROVISIONS

SEC. 38. *Enforcement of this Act.* – It shall be the primary duty of

the PRC and the

Board to effectively implement this Act. Any of the duly authorized law enforcement agencies and officers of national, provincial, city, or municipal governments shall, upon written or request of the PRC or the Board, render assistance in enforcing the provisions of this Act and to prosecute any person violating the same.

SEC. 39. Appropriations. – The amount necessary for the implementation of this Act

shall be included in the annual General Appropriations Act.

SEC. 40. Implementing Rules and Regulations. – Within 90 (days) after the

effectivity of this Act, the Board and the PRC, in coordination with the AIPO and national

organization of midwives, the DOH, the Department of Budget and Management and

other concerned government agencies, shall in consultation with relevant stakeholders in

the private sector, formulate such rules and regulations necessary to carry out the

provisions of this Act. The implementing rules and regulations shall be published in the

Official Gazette or in any newspaper of general circulation.

SEC. 41. Separability Clause. – If, for any reason, any part or section of this Act

shall be declared unconstitutional or invalid, other sections or provisions hereof which are

not affected thereby shall continue to be in full force and effect.

SEC. 42. Repealing Clause. – RA No. 2644, otherwise known as the “Philippine

Midwifery Law” and RA No. 7392, otherwise known as the “Philippine Midwifery Act of

1992” are hereby repealed and all laws, decrees, orders, instructions, rules and regulations,

and other issuances or parts therefor inconsistent with this Act are likewise repealed or

amended accordingly.

- 31 **SEC. 43. Effectivity Clause.** – This Act shall take effect fifteen
 (15) days after its
- 32 publication in the *Official Gazette* or in a national newspaper of general
 circulation.

Approved,