

NINETEENTH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)

23 FEB 21 P3:37

SENATE

RECEIVED BY: 

S. No. 1911

Introduced by Senator MANUEL "LITO" M. LAPID

AN ACT
PROVIDING FOR THE MAGNA CARTA OF BARANGAY HEALTH WORKERS

EXPLANATORY NOTE

In an article published in the *Journal of International Health*, it was discussed in the article that the Philippines was one of the first countries to adopt the primary health care (PHC) strategy in 1978 as a national strategy to deliver essential community health service related to the prevention and control of prevalent health problems, such as nutritional health promotion and education, maternal and child care, sanitation, and immunization through local health centers.¹

Primary health care is defined as "essential health care" that is based on scientifically accepted methods and technology and provides universal health care to all individuals and families in a community.² The cornerstones of Universal Health Care coverage are public health care and public health initiatives.³ In pursuing the goals of primary health care, the importance of services that is accessible, available, and affordable for the community has been emphasized.⁴

To bring health services to the basic political unit in the country, the government commissioned the Barangay Health Workers. They are usually non-medical personnel, a resident of the area whose work capacity is initially assessed by

¹ *Journal of International Health* Vol. 35 No. 1 2020 | Assessment of the role of community health volunteers in delivering primary health care in Manila, the Philippines

² World Health Organization | Declaration of Alma-Ata International Conference on Primary Health Care | September 6-12, 1978

³ World Health Organization | The World Health Report 2008: Primary Health Care Now More Than Ever | August 22, 2017

⁴ *Social Science Medicine* | Primary Health Care in the Philippines: Banking on the Barangays | Philips D.R. | 1986

the physician and recommended for hiring as health volunteers. BHWs are employed and trained by the health office as barangay nutrition scholars (as community links of the service providers who care for the malnourished, mobilize/ assist the community and upkeep records / reports) and further trained to assist in specific health programs such as tuberculosis program, maternal and child health, immunization, educating the members of the community, as well as recording of health, hygiene and environmental profile of their barangay.⁵

However, despite the barangay health worker's critical role as frontliners of our country's community-based health interventions, BHWs continue to be a sector that suffers from unfair remuneration and a lack of benefits. Adding to the many problems that impede the delivery of effective healthcare to our people.

Napakalaki ng papel na ginagampanan ng ating mga barangay health workers at ang kanilang di matatawarang ambag sa sektor ng pampublikong kalusugan at sa pambansang kaunlaran, nararapat na ipakita ng pamahalaan ang kanyang pagpapahalaga sa kanila sa pamamagitan ng pagsasabatas ng Magna Carta ng mga Barangay Health Workers na magsusulong ng kanilang kagalingan at magsisiguro ng kanilang mga karapatan.

This measure is a response to the call of the people from the public health sector to have a standardized allowance and benefits for our Barangay Health Workers. It seeks to recognize the invaluable contribution and sacrifices of our BHWs by introducing additional health benefits, compensation, incentives, free education and continuous training programs through a magna carta.

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


MANUEL "LITO" M. LAPID
Senator

⁵ Department of Health | R.A. 7883: Barangay Health Workers' Benefits and Incentives Act of 1995 | www.doh.gov.ph

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1 **AN ACT**
2 **PROVIDING FOR THE MAGNA CARTA OF BARANGAY HEALTH WORKERS**

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

3 **SECTION 1.** *Title.* — This Act shall be known as the "*Magna Carta of Barangay*
4 *Health Workers*".

5 **SECTION 2.** *Declaration of Policy.* — It is hereby declared the policy of the
6 State to protect and promote the right to health of people and adopt an integrated
7 and comprehensive approach to health development, and pursuant thereto, it shall
8 endeavor to make essential goods, healthcare and other social services available to all
9 the people.

10 In line with the country's commitment to meet health indicator targets under
11 United Nations sustainable development goals, the State shall adopt policies that
12 promote the welfare and well-being of barangay health workers who are the forefront
13 of the delivery of health care at the grassroots level, and effectively harness their
14 potential as partners in development.

15 **SECTION 3.** *Definition of Terms.* -- As used in this Act, the term "*barangay*
16 *health worker*" refers to a person who has undergone training under any accredited
17 government or non-government organization (NGO), and who voluntarily renders

1 primary healthcare services in the community after having been accredited to function
2 as such by the local health board.

3 **SECTION 4. Coverage.** — This Act shall apply to all barangay health workers
4 (BHWs) as defined under Section 3 of this Act: *Provided*, That all incentives and
5 benefits granted under this Act shall extend only to duly accredited BHWs, who have
6 undergone at least two (2) years of training: *Provided, however*, That duly registered
7 barangay health workers shall be entitled to a monthly honoraria and hazard allowance
8 as provided in Sec. 9 herein: *Provided, further*, That when the BHW receives a fixed
9 salary under a permanent appointment in any government office, by election to
10 another public office or by employment in the private sector, coverage under this Act
11 shall *ipso facto* cease as BHW shall be covered under applicable laws.

12 **SECTION 5. Registration.** — All BHWs shall be registered with the local health
13 board in the city or municipality in which they render service. Registered BHWs shall
14 be given appropriate proof of said registration. The municipal and city health offices
15 shall regularly update and maintain the BHW Registry with the assistance of the BHW
16 Federation. The BHW Registry shall be subject to continuous review and approval of
17 the municipal or city health board. The local health offices shall submit a copy of the
18 updated and duly approved registry to the Provincial Health Office for consolidation
19 and validation with the assistance of the Provincial BHW Federation, which shall also
20 be subject to the approval of the Provincial Health Board. The Provincial BHW Registry
21 shall be posted in the municipal or city bulletin board and barangay health centers.
22 The Provincial BHW Registry shall be submitted on or before April 30 of every year to
23 the Department of Health (DOH) at the regional and national levels for consolidation.
24 The DOH is hereby mandated to maintain a national registry of BHWs.

25 In order to qualify for registration, a Barangay Health Worker must:

- 26 a. Have rendered basic community health care services continuously and
27 satisfactorily for at least six (6) months immediately preceding the date
28 of the filing of application for registration in the barangay as
29 recommended by the Rural Health Midwife (RHM) or public health nurse

- 1 assigned to the barangay and by the head of the barangay health
2 workers association and certified by the Sangguniang Barangay;
- 3 b. Have completed the basic orientation and training for BHWs as
4 prescribed by the DOH and conducted by an accredited government
5 agency, or DOH-recognized academic institution, or (NGO);
- 6 c. Be at least eighteen (18) years of age at the date of the filing of the
7 application for registration; and,
- 8 d. Be physically and mentally fit.

9 It shall be the duty of the municipal and city health offices, in cooperation with
10 the Provincial Health Office and the DOH, to provide BHW applicants basic orientation
11 and training within six (6) months from the date of approval of their application.

12 **SECTION 6. Accreditation.** - To further professionalize the health care services
13 rendered by the BHWs and ensure the health and welfare of the community, a duly
14 registered BHW must be accredited by the municipal or city health board.

15 The municipal or city health board shall issue a certificate of accreditation to
16 qualified BHWs. In order to qualify for accreditation, the applicant BHW must:

- 17 a. Be registered in accordance with Section 5 hereof;
- 18 b. Have satisfactorily undertaken the role of a BHW in the locality as
19 provided for in Section 7 hereof, for at least two (2) years of continuous
20 and satisfactory service immediately prior to the filing of application for
21 accreditation; and
- 22 c. Have completed a regular training program on health care service and
23 community-based health program in order to upgrade and develop the
24 skills and competency required of a BHW. The training program shall be
25 institutionalized by the DOH, in cooperation with local government units
26 (LGUs).

27 It shall be the duty of the municipal or city government, as the case maybe, in
28 cooperation with the provincial government and DOH, to provide the applicant BHWs
29 the necessary support and opportunities for accreditation.

1 A BHW must complete the regular training program on health care service and
2 community-based health program within five (5) years from registration.

3 The municipal and city health boards or through their registration and
4 accreditation committee shall act on the applications for accreditation of BHWs not
5 than later thirty (30) days from the date of application.

6 The DOH shall also maintain an updated roster of accredited BHWs that is
7 accessible to the general public.

8 **SECTION 7. Roles, and Duties and Responsibilities of Barangay Health**
9 *Workers.* — As one of the key partners in a reformed health care delivery system, the
10 DOH and LGUs shall support BHWs as they perform the following roles:

- 11 a. Advocate - to support, promote and champion current health programs,
12 projects, and activities to improve access to quality health services
13 towards the improved health status of the community;
- 14 b. Educator - to guide and advise the community on the current DOH and
15 health priorities of LGUs such as the importance of a birth plan and
16 facility-based delivery in reducing maternal and infant deaths; newborn
17 screening for the early detection of congenital metabolic disorders which
18 may leads to mental retardation and even death, among others;
- 19 c. Disseminator - to maintain regular communication with local professional
20 health workers on health events and updates and concerns relevant to
21 the community and inform the same to the community for appropriate
22 action, if necessary;
- 23 d. Linker - to facilitate access to any group or association of the community
24 with a relevant network of or specific health and non-health service
25 providers;
- 26 e. Record Keeper - to maintain updated records of health data, health
27 activities and events in the community;
- 28 f. Health Care Service Provider – to assist and provide basic health care
29 services as may be needed in the community in any health event.

1 The BHW shall perform the following duties and responsibilities:

- 2 a. Height and weight monitoring, and reporting the same to the barangay;
- 3 b. Monitoring and following up of defaulted cases of immunization, family
- 4 planning, tuberculosis compliance to treatment and others, and
- 5 reporting the same to the barangay;
- 6 c. Reporting to the barangay any incidence of disease or any health cases
- 7 in the community;
- 8 d. Communicating and coordinating with the community to participate in
- 9 barangay health center activities;
- 10 e. Gathering of data about overall status of health of the community;
- 11 f. Administering first aid;
- 12 g. Conducting health visits;
- 13 h. Conducting birth planning for pregnant women;
- 14 i. Conducting health education;
- 15 j. Strengthening referral systems;
- 16 k. Collecting sputum;
- 17 l. Identifying people with disease and sickness;
- 18 m. Community health profiling;
- 19 n. Psychosocial debriefing for stress and post-calamity initiatives;
- 20 o. Responding in natural calamities and disasters; and
- 21 p. Coordinating closely with the local government health officer in the
- 22 implementation of health programs in the locality.

23 **SECTION 8.** *Number of Barangay Health Workers (BHWs).* — Subject to
24 relevant laws, and in coordination with relevant government agencies and respective
25 local government units, the number of BHWs in every barangay shall be guided by
26 and based on the particular need of the barangay for BHW services.

27 The DOH shall determine the ideal ratio of barangay health workers to the
28 number of households: *Provided,* That the total number of barangay health workers
29 nationwide shall not be less than one percent (1%) of the total population.

1 The residents of the barangay must be given preference in the employment of
2 BHWs.

3 **SECTION 9. *Incentives and Benefits.*** — All accredited BHWs who are actively
4 and regularly performing their duties and responsibilities shall be entitled to the
5 following incentives and benefits:

- 6 a. *Monthly Honoraria* in the amount of not less than Three thousand pesos
7 (P3,000.00), subject to adjustment based on the prevailing market
8 value;
- 9 b. *Hazard Allowance* in an amount to be determined by the local health
10 board of LGU concerned, which in no case shall be less than One
11 thousand pesos (P1,000.00) per month, subject to existing laws, rules,
12 and regulations;
- 13 c. *Subsistence Allowance* equivalent to the meals they take in the course
14 of their duty, which shall be computed in accordance with prevailing
15 conditions as determined by the LGU concerned, which in no case shall
16 be less than One hundred pesos (P100.00) per day: *Provided,* That the
17 accredited BHW shall render service within the premises of isolated
18 barangay health stations in order to make it available at any and all
19 times;
- 20 d. *Transportation Allowance* of not less than One thousand pesos
21 (P1,000.00) per month, subject to auditing rules and regulations, on the
22 condition that the availment of transportation services are in line with
23 the performance of the BHW's official duties and responsibilities;
- 24 e. *One-time Gratuity Cash Incentive* of not less than Ten thousand pesos
25 (P10,000.00) in recognition of the BHW's loyalty and dedication and for
26 having continuously and satisfactorily served for at least fifteen (15)
27 years;
- 28 f. *Discount Privileges for BHWs.* – All BHWs shall be entitled to twenty
29 percent (20%) discount on all the items enumerated under Section 4(a)
30 of Republic Act No. 9994, otherwise known as the Expanded Senior

1 Citizens Act of 2010: *Provided*, That the privileges shall not be claimed
2 if the BHW is eligible for a higher discount as may be granted by the
3 commercial establishment and/or other existing laws.

4 The commercial establishment may claim the discount granted under
5 this section as tax deduction based on the cost of goods sold or services
6 rendered: *Provided*, That the discount shall be allowed as deduction
7 from the gross income for the same taxable year that the discount is
8 granted:

9 *Provided further*, That the total amount of the claimed tax deduction net
10 of VAT, if applicable, shall be included in their gross sales receipt for tax
11 purposes and shall be subject to proper documentation and to the
12 provisions of the National Internal Revenue Code of 1997, as amended.

13 g. *Training, Education, and Career Enrichment Programs.* - The DOH shall,
14 in coordination with the Department of Education (DepEd), Commission
15 on Higher Education (CHED), Technical Education and Skills
16 Development Authority (TESDA), DOH-recognized academic institutions,
17 other concerned agencies and non-government organizations, provide
18 information on and opportunities for education and career enrichment
19 for accredited BHWs, such as the following:

- 20 1. Educational programs which credit the years of primary health
21 care service of the BHW towards higher education completion in
22 institutions with stepladder curricula, thus allowing them to
23 upgrade their skills and knowledge for community work or to
24 pursue further training as midwives, pharmacists, nurses or
25 doctors;
- 26 2. Continuing education, study and exposure tours, grants, field
27 immersion, scholarships; and
- 28 3. Special training programs such as traditional medicine, disaster
29 preparedness and other programs that address emergent
30 community health problems and issues.

1 h. *Health Benefits.* — During their incumbency, all BHWs are entitled to the
2 following health benefits:

3 1. Free medical care, including surgery and surgical expenses,
4 medicines, x-ray and other laboratory fees, when confined in any
5 public hospital or health institution;

6 2. Emergency assistance not exceeding the amount of five thousand
7 pesos (P5,000.00) chargeable against the fund of the barangay
8 concerned, for expenses incurred in the nearest private hospital
9 or clinic in case of extreme emergency where there is no available
10 public hospital; and

11 3. Mandatory and immediate membership in the Philippine Health
12 Insurance Corporation (Philhealth) as indirect contributors.

13 i. *Insurance Coverage.* — All BHWs shall be granted insurance coverage and
14 benefits from the Government Service Insurance System (GSIS) which
15 shall be borne by the LGU concerned. For this purpose, the GSIS shall
16 design an insurance benefit package suited to the needs and status of
17 BHWs;

18 j. *Sick and Maternity Leaves.* — All BHWs shall be entitled to sick and
19 maternity leaves as prescribed by the Local Health Board: *Provided, That,*
20 the BHWs shall continue to receive their monthly honoraria while on leave,
21 for such period in accordance with existing laws and practices;

22 k. *Cash Gift* — All accredited BHWs are entitled to cash gift of not less than
23 the minimum monthly honoraria to be given every December from the
24 general fund of the barangay or from such other funds appropriated by
25 the national government for the purpose;

26 l. *Disability Benefit* — An accredited BHW who sustains injury or sickness in
27 the course of the performance of their duties shall be entitled to Two
28 thousand pesos (P2,000.00) for every year of service;

29 m. *Civil Service Eligibility.* — A second grade eligibility shall be granted to
30 accredited BHWs who have rendered five (5) years continuous service as
31 such: *Provided, That,* should a BHW become a regular employee of the

1 government, the total numbers of years served as such shall be credited
2 to the BHWs service in computing the retirement benefits;

3 *n. Free Legal Services.* — Legal representation and consultation services shall
4 be immediately provided by the Public Attorney’s Office to an accredited
5 BHW in cases of coercion, interference, and in other civil and criminal cases
6 filed by or against BHWs arising out of or in connection with the
7 performance of their duties as such;

8 *o. Preferential Access to Loan.* — The DOH in coordination with other
9 concerned government agencies shall provide, within One hundred eighty
10 (180) days after the effectivity of this Act, a mechanism that shall provide
11 BHWs organized access to loan services. The agencies providing loan
12 services will set aside one percent (1%) of their loanable funds for
13 organized BHW groups that have community-based income generating
14 projects in support of health programs or activities. Notwithstanding the
15 limitations under this section, all registered BHWs shall be entitled to
16 monthly honoraria and hazard allowance. The LGUs concerned shall also
17 endeavor to provide other health benefits to BHWs not otherwise provided
18 by law.

19 **SECTION 10. Annual Review.** — The local health boards shall conduct an
20 annual review of the BHW program, performance, as well as the benefits, incentives
21 and allowances enumerated in the immediately preceding Section taking into
22 consideration the current consumer price index as published by the Philippine Statistics
23 Authority.

24 **SECTION 11. Discrimination Prohibited.** — Discrimination against any BHW by
25 reason of gender, civil status, creed, religious, or political beliefs and ethnic groupings
26 in the exercise of their functions and responsibilities is hereby prohibited.

27 **SECTION 12. Protection of BHWs.** — No accredited BHW shall be removed
28 except for a valid cause as determined by the Local Health Board (LHB). The LHB shall
29 resolve termination cases against BHWs judiciously and not later than ninety (90) days
30 from the receipt of a complaint: *Provided,* That if a BHW is found to be unjustly

1 removed from service, the BHW shall be entitled to reinstatement without loss of
2 benefits and incentives from the time of termination up to the time of reinstatement.

3 **SECTION 13. *Grievance Mechanism.*** — The LHB shall establish a grievance
4 mechanism as a means of processing complaints of BHWs against alleged acts of
5 discrimination and unjust removal from the service. The decisions rendered by the
6 LHB shall be final and executory.

7 **SECTION 14. *Municipal, City, Provincial, and National Federation of BHWs.*** —
8 There shall be an organization of accredited BHWs for the purpose of electing the
9 municipal, city, provincial, and national-level federation in order to ventilate, articulate,
10 and crystalize issues affecting health care delivery system and with utmost regard to
11 service to patients and the continuous operation of barangay health services in the
12 interest of public health, safety, or survival of patients.

13 The BHW federation for municipalities, cities, and provinces shall elect their
14 respective local federation boards of directors, and a set of national officers to
15 comprise the national board of directors to be headed by a president. A Secretary-
16 General shall be chosen from among the national federation members to manage the
17 day-to-day operation and activities of the federation. The respective boards of
18 directors may create such other positions as may be necessary for the management
19 of the affairs of the local and national federation.

20 **SECTION 15. *Representation in the Local Health Board and Primary Health***
21 ***Care Provider Network.*** — The President of the municipal or city federation of BHWs
22 shall be a member of the municipal or city local health board. The respective
23 presidents of the federation of BHWs of each city and municipality federation of a
24 province shall elect from among themselves their representative to the provincial
25 health board: *Provided,* That the BHW representatives to the local health boards shall
26 not be allowed to vote on the registration, accreditation, and disciplinary or removal
27 complaints of BHWs.

28 The BHWs shall also be part of the health care provider network, in the
29 implementation of health care services and programs.

1 **SECTION 16. *Prohibition from Engaging in Partisan Political Activity.*** — No
2 BHW shall engage in any partisan political activity.

3 **SECTION 17. *Continuous Capacity Building for BHWs.*** — The DOH shall
4 conduct continuous capacity building for BHWs that will enhance and upgrade their
5 knowledge and skills through various forms including online learning and multimedia
6 in major Philippine dialects

7 The DOH shall, in coordination with TESDA and other concerned agencies,
8 assist the LGUs in the development of education modules or materials to promote the
9 collective experiences and learnings of BHWs as well as to promote traditional and
10 complementary medicine.

11 The LGUs shall endeavor to establish their own training centers for their BHWs
12 and other health workers in coordination with the TESDA, NGOs, and other agencies
13 concerned.

14 The LGUs shall also implement a development program for BHWs that will allow
15 them to benefit from the ladderized training as provided under Republic Act No. 10968,
16 otherwise known as the Philippine Qualification Framework Act, and Republic Act No.
17 10647, otherwise known as the Ladderized Education Act of 2014, including academic
18 credits for health-related courses.

19 **SECTION 18. *Observance of BHW Day.*** — Every barangay shall commemorate
20 BHW Day during April 7 of every year in recognition of the service of Barangay Health
21 Workers, their heroic services in times of crises, and their indispensable role in
22 promoting health and wellness among the citizenry.

23 The DOH, in cooperation with the Department of the Interior and Local
24 Government (DILG) and all local government units shall hold simple ceremonies or
25 activities to highlight the indispensable role of BHWs in nation-building.

26 **SECTION 19. *Annual Report.*** — The Local Government Unit shall prepare and
27 submit an annual report to the Office of the President, through the DILG, containing

1 the list of accomplishments, status of the operations and program implementation of
2 this Act.

3 **SECTION 20.** *Joint Congressional Oversight Committee.* — There shall be a
4 Joint Congressional Oversight Committee on the Magna Carta of Barangay Health
5 Workers, which shall be jointly chaired by the Chairpersons of the Committees on
6 Local Government of the Senate and the House of Representatives. It shall be
7 composed of the Chairpersons of the Senate Committees on Health and Demography,
8 and Higher, Technical and Vocational Education, the Chairpersons of the Committees
9 on Health, and Higher and Technical Education of the House of Representatives, and
10 two (2) Members from each House representing the minority who shall be appointed
11 by the Senate President and the Speaker of the House of Representatives.

12 **SECTION 21.** *Penalty Clause.* — Any local government official who violates
13 any provision of this Act may be administratively and criminally charged in accordance
14 with law.

15 **SECTION 22.** *Appropriations.* — The amount necessary for the
16 implementation of this Act shall be charged against the National Tax Allotment of the
17 LGUs, other local funds, the special health fund under Republic Act No. 11223,
18 otherwise known as the "Universal Health Care Act".

19 **SECTION 23.** *Implementing Rules and Regulation.* — The DOH and the DILG
20 shall, in consultation with the DepEd, CSC, GSIS, and other concerned government
21 agencies and non- governmental entities, promulgate the rules and regulations to
22 implement this Act not later than One hundred eighty (180) days from the effectivity
23 of this Act.

24 **SECTION 24.** *Separability Clause.* — If any portion or provision of this Act is
25 declared invalid or unconstitutional, other provisions hereof shall remain in full force
26 and effect.

27 **SECTION 25.** *Repealing Clause.* — Republic Act No. 7883, otherwise known
28 as the "*Barangay Health Workers' Benefits and Incentives Act of 1995*" is hereby

1 repealed. All laws, decrees, executive orders, rules and regulations, which are
2 inconsistent with this Act are hereby repealed or amended or accordingly.

3 **SECTION 26. Effectivity.** — This Act shall take effect fifteen days (15) after its
4 publication in the *Official Gazette* or in a national newspaper of general circulation.

5 *Approved,*