

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

23 FEB -6 P 6 :24

RECEIVED BY: 

SENATE

S.B. No. 1840

Introduced by SEN. WIN GATCHALIAN

AN ACT
PROVIDING FOR THE MAGNA CARTA OF
BARANGAY HEALTH WORKERS

EXPLANATORY NOTE

Barangay health workers¹ (BHWs) form a core part of the country's frontline health system as we have seen during the height of the Covid-19 crisis. While they are not "medical personnel" per se, BHWs perform a crucial role in assisting and supporting physicians, dentists, nutritionists, public health nurses and midwives in delivering essential health services to their respective communities.

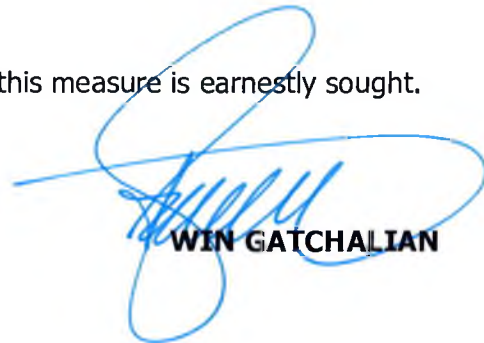
Aside from being a primary health care service provider, BHWs also perform other equally important roles. As a community organizer, BHWs bridge the communication barriers between the community and the health care delivery system, by assisting the community in identifying health problems, developing health plans, and taking action to promote their health and well-being. As an educator, BHWs provide updated and timely knowledge and skills to community members in the prevention and management of simple illnesses and in relevant health issues.

¹ a person who has undergone training programs under any accredited government and non-government organization and who voluntarily renders primary health care services in the community after having been accredited to function as such by the local health board in accordance with the guidelines promulgated by the Department of Health (DOH) (Sec. 3, RA 7883)

BHWs have different tasks depending on the agreement reached between community leaders, but there appears to be a disparity between the benefits, compensation and protection accorded to them by Republic Act No. 7883 or the "Barangay Health Workers' Benefits and Incentives Act of 1995" and the actual role, functions, and responsibilities they undertake.

Thus, this measure seeks to provide the much-needed improvement of the legally-mandated BHW benefits and incentives, to be more attuned with the changing needs of our barangay health frontliners, and in consideration of the vital role they currently endeavor for their communities - being the community organizer, educator, and primary health care service provider, all at the same time. In addition to those benefits and incentives under RA 7883, this bill will add the following: Monthly Honoraria; Transportation Allowance; One-time Gratuity Cash Incentive; Discount Privileges for BHWs; Health Benefits; Insurance Coverage; Sick and Maternity Leaves; Cash Gift; Disability Benefit; and the authority granted to the LGUs concerned to provide other health benefits to BHWs not otherwise provided by law.

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



WIN GATCHALIAN



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**AN ACT
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:*

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

3
4 **SEC. 2. Declaration of Policy.** - It is hereby declared the policy of the
5 State to protect and promote the right to health of people and adopt an
6 integrated and comprehensive approach to health development, and pursuant
7 thereto, it shall endeavor to make essential goods, healthcare and other social
8 services available to all the people. In line with the country's commitment to
9 accomplish health indicator targets under United Nations sustainable
10 development goals, the State shall adopt policies that promote the welfare and
11 well-being of barangay health workers who are the forefront of the delivery of
12 health care at the grassroots level, and effectively harness their potential as
13 partners in development.

14
15 **SEC. 3. Definition.** – As used in this Act, the term "*barangay health*
16 *worker*" refers to a person who has undergone training under any accredited
17 government or non-government organization (NGO), and who voluntarily

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

3

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

14

15 **SEC. 5. Registration.**– All BHWs shall be registered with the local health
16 board in the city or municipality in which they render service. Registered BHWs
17 shall be given appropriate proof of said registration.

18 The municipal and city health offices shall regularly update and maintain
19 the BHW Registry with the assistance of the BHW Federation. The BHW Registry
20 shall be subject to the approval of the municipal or city health board. The local
21 health offices shall submit a copy of the updated and duly approved registry to
22 the Provincial Health Office for consolidation and validation with the assistance
23 of the Provincial BHW Federation, which shall also be subject to the approval
24 of the Provincial Health Board. The Provincial BHW Registry shall be posted in
25 the municipal or city bulletin board and barangay health centers.

26 The Provincial BHW Registry shall be submitted on or before April 30 of
27 every year to the Department of Health (DOH) at the regional and national
28 levels for consolidation. The DOH is hereby mandated to maintain a national
29 registry of BHWs.

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

- 31 (a) Have rendered basic community health care services continuously
32 and satisfactorily for at least six (6) months immediately preceding

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

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

16

17 **SEC. 6. Accreditation.** -To further professionalize the health care
18 services rendered by the BHWs and ensure the health and welfare of the
19 community, a duly registered BHW must be accredited by the municipal or city
20 health board.

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

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

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

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

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

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

11

12 **SEC. 7. Roles, and Duties and Responsibilities of Barangay**
13 **Health Workers.** - As one of the key partners in a reformed health care
14 delivery system, the DOH and LGUs shall support BHWs as they perform the
15 following roles:

16 (a) Advocate - to support, promote and champion current health
17 programs, projects, and activities to improve access to quality health
18 services towards the improved health status of the community

19 (b) Educator - to guide and advise the community on the current DOH
20 and health priorities of LGUs such as the importance of a birth plan
21 and facility-based delivery in reducing maternal and infant deaths;
22 newborn screening for the early detection of congenital metabolic
23 disorders which may leads to mental retardation and even death,
24 among others;

25 (c) Disseminator - to maintain regular communication with local
26 professional health workers on health events and updates and
27 concerns relevant to the community and inform the same to the
28 community for appropriate action, if necessary;

29 (d) Linker - to facilitate access to any group or association of the
30 community with a relevant network of or specific health and non-
31 health service providers;

- 1 (e) Record Keeper - to maintain updated records of health data, health
2 activities and events in the community;
- 3 (f) Health Care Service Provider – to assist and provide basic health care
4 services as may be needed in the community in any health event.

5 The BHW shall perform the following duties and responsibilities:

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

28

29 **SEC. 8. Number of Barangay Health Workers (BHWs).**—Subject
30 to relevant laws, and in coordination with relevant government agencies and
31 respective local government units, the number of BHWs in every barangay shall

1 be guided by and based on the particular need of the barangay for BHW
2 services.

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

7 The residents of the barangay must be given preference in the
8 employment of BHWs.

9

10 **SEC. 9. *Incentives and Benefits.*** -All accredited BHWs who are
11 actively and regularly performing their duties and responsibilities shall be
12 entitled to the following incentives and benefits:

13 (a) *Monthly Honoraria* in the amount of not less than Three thousand
14 pesos (P3,000.00), subject to adjustment based on the prevailing
15 market value;

16 (b) *Hazard Allowance* in an amount to be determined by the local health
17 board of LGU concerned, which in no case shall be less than One
18 thousand pesos (P1,000.00) per month, subject to existing laws,
19 rules, and regulations;

20 (c) *Subsistence Allowance* equivalent to the meals they take in the
21 course of their duty, which shall be computed in accordance with
22 prevailing conditions as determined by the LGU concerned, which in
23 no case shall be less than One hundred pesos (P100.00) per day:
24 *Provided*, That the accredited BHW shall render service within the
25 premises of isolated barangay health stations in order to make it
26 available at any and all times;

27 (d) *Transportation Allowance* of not less than One thousand pesos
28 (P1,000.00) per month, subject to auditing rules and regulations, on
29 the condition that the availment of transportation services are in line
30 with the performance of the BHW's official duties and
31 responsibilities;

1 (e) *One-time Gratuity Cash Incentive* of not less than Ten thousand
2 pesos (P10,000.00) in recognition of the BHW's loyalty and
3 dedication and for having continuously and satisfactorily served for
4 at least fifteen (15) years;

5 (f) *Discount Privileges for BHWs.* – All BHWs shall be entitled to twenty
6 percent (20%) discount on all the items enumerated under Section
7 4(a) of Republic Act No. 9994, otherwise known as the Expanded
8 Senior Citizens Act of 2010: *Provided,* That the privileges shall not
9 be claimed if the BHW is eligible for a higher discount as may be
10 granted by the commercial establishment and/or other existing laws.

11 The commercial establishment may claim the discount
12 granted under this section as tax deduction based on the cost of
13 goods sold or services rendered: *Provided,* That the discount shall
14 be allowed as deduction from the gross income for the same taxable
15 year that the discount is granted: *Provided further,* That the total
16 amount of the claimed tax deduction net of VAT, if applicable, shall
17 be included in their gross sales receipt for tax purposes and shall be
18 subject to proper documentation and to the provisions of the
19 National Internal Revenue Code of 1997, as amended.

20 (g) *Training, Education, and Career Enrichment Programs.* - The DOH
21 shall, in coordination with the Department of Education (DepEd),
22 Commission on Higher Education (CHED), Technical Education and
23 Skills Development Authority (TESDA), DOH-recognized academic
24 institutions, other concerned agencies and non-government
25 organizations, provide information on and opportunities for
26 education and career enrichment for accredited BHWs, such as the
27 following:

28 1) Educational programs which credit the years of primary health
29 care service of the BHW towards higher education completion in
30 institutions with stepladder curricula, thus allowing them to
31 upgrade their skills and knowledge for community work or to

- 1 pursue further training as midwives, pharmacists, nurses or
2 doctors;
- 3 2) Continuing education, study and exposure tours, grants, field
4 immersion, scholarships; and
- 5 3) Special training programs such as traditional medicine, disaster
6 preparedness and other programs that address emergent
7 community health problems and issues.
- 8 (h) *Health Benefits.* – During their incumbency, all BHWs are entitled to
9 the following health benefits :
- 10 1) Free medical care, including surgery and surgical expenses,
11 medicines, x-ray and other laboratory fees, when confined in any
12 public hospital or health institution;
- 13 2) Emergency assistance not exceeding the amount of five thousand
14 pesos (P5,000.00) chargeable against the fund of the barangay
15 concerned, for expenses incurred in the nearest private hospital
16 or clinic in case of extreme emergency where there is no available
17 public hospital;
- 18 3) Mandatory and immediate membership in the Philippine Health
19 Insurance Corporation (Philhealth) as indirect contributors.
- 20 (i) *Insurance Coverage.* - All BHWs shall be granted insurance coverage
21 and benefits from the Government Service Insurance System (GSIS)
22 which shall be borne by the LGU concerned. For this purpose, the
23 GSIS shall design an insurance benefit package suited to the needs
24 and status of BHWs;
- 25 (j) *Sick and Maternity Leaves.* – All BHWs shall be entitled to sick and
26 maternity leaves as prescribed by the Local Health Board: *Provided,*
27 That, the BHWs shall continue to receive their monthly honoraria
28 while on leave, for such period in accordance with existing laws and
29 practices.
- 30 (k) *Cash Gift* – All accredited BHWs are entitled to cash gift of not
31 less than the minimum monthly honoraria to be given every

1 December from the general fund of the barangay or from such other
2 funds appropriated by the national government for the purpose;

3 (l) *Disability Benefit* – An accredited BHW who sustains injury or
4 sickness in the course of the performance of their duties shall be
5 entitled to Two thousand pesos (P2,000.00) for every year of
6 service;

7 (m) *Civil Service Eligibility.* – A second grade eligibility shall be granted
8 to accredited BHWs who have rendered five (5) years continuous
9 service as such: *Provided,* That, should a BHW become a regular
10 employee of the government, the total numbers of years served as
11 such shall be credited to the BHWs service in computing the
12 retirement benefits;

13 (n) *Free Legal Services.* – Legal representation and consultation services
14 shall be immediately provided by the Public Attorney’s Office to an
15 accredited BHW in cases of coercion, interference, and in other civil
16 and criminal cases filed by or against BHWs arising out of or in
17 connection with the performance of their duties as such;

18 (o) *Preferential Access to Loan.* - The DOH in coordination with other
19 concerned government agencies shall provide, within One hundred
20 eighty (180) days after the effectivity of this Act, a mechanism that
21 shall provide BHWs organized access to loan services. The agencies
22 providing loan services will set aside one percent (1%) of their
23 loanable funds for organized BHW groups that have community-
24 based income generating projects in support of health programs or
25 activities.

26 Notwithstanding the limitations under this section, all registered BHWs
27 shall be entitled to monthly honoraria and hazard allowance.

28 The LGUs concerned shall also endeavor to provide other health benefits
29 to BHWs not otherwise provided by law.

30

31 **SEC. 10. Annual Review.**– The local health boards shall conduct an
32 annual review of the BHW program, performance, as well as the benefits,

1 incentives and allowances enumerated in the immediately preceding Section
2 taking into consideration the current consumer price index as published by the
3 Philippine Statistics Authority.

4
5 **SEC. 11. *Discrimination Prohibited.*** – Discrimination against any BHW
6 by reason of gender, civil status, creed, religious, or political beliefs and ethnic
7 groupings in the exercise of their functions and responsibilities is hereby
8 prohibited.

9
10 **SEC 12. *Protection of BHWs.*** - No accredited BHW shall be removed
11 except for a valid cause as determined by the Local Health Board (LHB). The
12 LHB shall resolve termination cases against BHWs judiciously and not later than
13 ninety (90) days from the receipt of a complaint: *Provided,* That if a BHW is
14 found to be unjustly removed from service, the BHW shall be entitled to
15 reinstatement without loss of benefits and incentives from the time of
16 termination up to the time of reinstatement.

17
18 **SEC. 13. *Grievance Mechanism.*** – The LHB shall establish a grievance
19 mechanism as a means of processing complaints of BHWs against alleged acts
20 of discrimination and unjust removal from the service. The decisions rendered
21 by the LHB shall be final and executory.

22
23 **SEC. 14. *Municipal, City, Provincial, and National Federation of***
24 ***BHWs.*** — There shall be an organization of accredited BHWs for the purpose
25 of electing the municipal, city, provincial, and national-level federation in order
26 to ventilate, articulate, and crystalize issues affecting health care delivery
27 system and with utmost regard to service to patients and the continuous
28 operation of barangay health services in the interest of public health, safety, or
29 survival of patients.

30 The BHW federation for municipalities, cities, and provinces shall elect
31 their respective local federation boards of directors, and a set of national
32 officers to comprise the national board of directors to be headed by a president.

1 A Secretary-General shall be chosen from among the national federation
2 members to manage the day-to-day operation and activities of the federation.
3 The respective boards of directors may create such other positions as may be
4 necessary for the management of the affairs of the local and national
5 federation.

6

7 **SEC. 15. Representation in the Local Health Board and Primary**
8 **Health Care Provider Network.** — The President of the municipal or city
9 federation of BHWs shall be a member of the municipal or city local health
10 board. The respective presidents of the federation of BHWs of each city and
11 municipality federation of a province shall elect from among themselves their
12 representative to the provincial health board: *Provided,* That the BHW
13 representatives to the local health boards shall not be allowed to vote on the
14 registration, accreditation, and disciplinary or removal complaints of BHWs.

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

17

18 **SEC. 16. Prohibition from Engaging in Partisan Political Activity.**

19 - No BHW shall engage in any partisan political activity.

20

21 **SEC 17. Continuous Capacity Building for BHWs.** - The DOH shall
22 conduct continuous capacity building for BHWs that will enhance and upgrade
23 their knowledge and skills through various forms including online learning and
24 multimedia in major Philippine dialects.

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

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

1 The LGUs shall also implement a development program for BHWs that will
2 allow them to benefit from the ladderized training as provided under Republic
3 Act No. 10968, otherwise known as the Philippine Qualification Framework Act,
4 and Republic Act No. 10647, otherwise known as the “Ladderized Education Act
5 of 2014”, including academic credits for health-related courses.

6
7 **SEC. 18. *Observance of BHW Day.*** – Every barangay shall
8 commemorate BHW Day during April 7 of every year in recognition of the
9 service of Barangay Health Workers, their heroic services in times of crises, and
10 their indispensable role in promoting health and wellness among the citizenry.

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

14
15 **SEC. 19. *Penalty Clause.*** - Any local government official who violates
16 any provision of this Act may be administratively and criminally charged in
17 accordance with law.

18
19 **SEC. 20. *Appropriations.*** — The amount necessary for the
20 implementation of this Act shall be charged against the National Tax Allotment
21 of the LGUs, other local funds, the special health fund under Republic Act No.
22 11223, otherwise known as the “Universal Health Care Act”.

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

29
30 **SEC. 22. *Separability Clause.*** - If any portion or provision of this Act
31 is declared invalid or unconstitutional, other provisions hereof shall remain in
32 full force and effect.

1 **SEC. 23. Repealing Clause.** – Republic Act No. 7883, otherwise known
2 as the "*Barangay Health Workers' Benefits and Incentives Act of 1995*" is
3 hereby repealed. All laws, decrees, executive orders, rules and regulations,
4 which are inconsistent with this Act are hereby repealed or amended or
5 accordingly.

6

7 **SEC. 24. Effectivity.** - This Act shall take effect fifteen days (15) after
8 its publication in the *Official Gazette* or in a national newspaper of general
9 circulation.

Approved,