EXPLANATORY NOTE

With the devolution of health services to local government units (LGUs) through the Local Government Code of 1991, Barangay Health Workers (BHWs) have since served as indispensable frontliners in the delivery and promotion of the government’s healthcare programs and services. They have provided vital services in our health and nutrition education, family planning campaigns and services, maternal, newborn and child health care, immunization programs, and the promotion of good hygiene and sanitation practices. In our Barangay Health Centers, they have provided the necessary assistance to physicians, nurses, or midwives for primary health care, or birthing services.

Unfortunately, the existing law, Republic Act No. 7883, otherwise known as the “Barangay Health Workers’ Benefits and Incentives Act of 1995,” treats BHWs as mere volunteers that are entitled to mere allowances and other incentives that are incommensurate with the services they give as public health workers. They are not given, moreover, the security of tenure that befits the level of commitment necessitated by the role that BHWs play.

In acknowledgment of the existing policy shortfall, and of the importance of the role and services of BHWs in the delivery of our primary health care services in the community, this measure proposes to grant BHWs the compensation and benefits package, including security of tenure, of public health workers.

This change of policy is also aimed to further strengthen and improve the government’s delivery of health care services by empowering BHWs and improving and systematizing their services.

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

JOHN REYNALD M. TIANGCO
Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

EIGHTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 874

INTRODUCED BY REP. JOHN REYNALD M. TIANGCO

AN ACT MANDATING THE APPOINTMENT OF BARANGAY HEALTH WORKERS IN BARANGAYS, AND PROVIDING FOR THEIR DUTIES AND RESPONSIBILITIES, COMPENSATION AND BENEFITS, AND FOR OTHER PURPOSES

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

Section 1. Short Title – This Act shall be known as the “Barangay Health Workers Act of 2019.”

Section 2. Declaration of Policy – It is hereby declared the policy of the State to protect and promote the right to health of the people by providing the conditions of health empowerment, where each individual has adequate access to information and services that will bring about health and well-being, and by delivering effective health care programs and services based on the needs of the communities.

Towards this end, the State recognizes that the Primary Health Care Approach is an effective strategy towards realizing health empowerment and effective health care programs and services through community-based participatory strategies.

The State recognizes, moreover, the indispensable role of Barangay Health Workers as the front liners in the Primary Health Care Approach; and the importance of strengthening and systematizing their services, and of providing them just compensation, consistent with the principle of equal pay for equal work and work of equal value.

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

a.) Barangay Health Worker (BHW) – shall refer to a person who is appointed to act as a health worker in a barangay unit in accordance with Section 4 hereof;

b.) Magna Carta for Public Health Workers – shall refer to Republic Act No. 7305; and
c.) Public Health Worker (PHW) – shall be as defined in Sec. 3 of the Magna Carta for Public Health Workers as referring to all persons who are engaged in health and health-related work, all persons employed in all hospitals, sanitaria, health infirmaries, health centers, rural health units, barangay health stations, clinics and other health-related establishments owned and operated by the Government or its political subdivisions with original charters and shall include medical, allied health professional, administrative and support personnel employed regardless of their employment status.

Section 4. Appointment and Qualifications. – There shall be appointed in each barangay such number of BHWs as the Department of Health (DOH) shall determine and recommend in consideration of the number of households in a barangay; provided, that the total number of BHWs per barangay shall not be less than three (3), nor more than one percent (1%) of the barangay’s total population.

The city or municipal mayor, as the case may be, shall appoint the BHWs in all barangays in the city or municipality on the strength of their accreditation by the local health board; provided, that the local health board shall only issue accreditation to the following:

a.) A person who has completed the BHW training program of the DOH, or the Technical Education and Skills Development Authority (TESDA), or undergone a training specific for BHW by a TESDA–accredited or DOH-accredited institution, and has passed the BHW training assessment, and obtained the certification therefor;

b.) All active barangay health workers at the time of the effectivity of this Act, regardless of accreditation or training status, who have previously served for at least one (1) year; provided, that they undergo and pass the BHW assessment by DOH/TESDA-accredited assessors, and obtained the equivalent certification.

All active and existing barangay health workers accredited by the local health board under Republic Act No. 7883 shall be given preference in the appointment of BHWs pursuant to this Act.

Section 5. Duties and Responsibilities. – The BHWs shall perform in their respective barangays the followings duties and responsibilities:

a.) Those which the DOH, or the city, municipal or barangay Sanggunian shall provide by ordinance, subject to the guidelines to be promulgated jointly by the DOH and Department of Interior and Local Government (DILG), in connection with the delivery of basic and primary health care services, the implementation of family planning, feeding and nutrition, and immunization programs, disaster response and mitigation, sanitation programs, and anti-drug abuse rehabilitation and information
campaigns, and the establishment of national or local health management information systems;

b.) Provide assistance to physicians, dentists, nurses, nutritionists, or midwives who are employed, stationed, or are otherwise providing services at the barangay health center, daycare center or birthing center;

c.) Administer first aids, and respond in natural calamities and disaster; and

d.) Gather data about the health profile of the barangay, incidence of communicable or chronic diseases, environmental or health hazards in the barangay, and other public health-relevant event or information, and report the same to the local health board.

Section 6. Compensation and Benefits. — The entry pay level of a BHW shall be the prevailing rate equivalent to Salary Grade One (SG 1).

BHWs shall also be entitled to the following standards, incentives, and benefits provided for Public Health Workers under the Magna Carta for Public Health Workers:

a.) Normal hours of work;
  b.) Overtime pay for overtime work;
  c.) Rest day;
  d.) Night-shift differential;
  e.) Hazard allowance;
  f.) Subsistence allowance;
  g.) Longevity pay;
  h.) Free medical examination;
  i.) Compensation for injuries;
  j.) Leave benefits;
  k.) Retirement pay; and
  l.) Right to self organization.

Further, BHWs shall be covered by the existing statutory benefits such as GSIS, Philhealth, and Pag-ibig, and be entitled to the following additional benefits:

a.) Training, Education and Career Enrichment Programs.— The DOH, in coordination with the DILG, other government departments, agencies and non-government organizations, shall provide opportunities for the following:

1.) Educational programs which shall recognize years of primary health care service as credits to higher education in institutions with stepladder curricula that will entitle BHWs to upgrade their skills and knowledge for community work or to pursue further training as midwives, pharmacists, nurses or doctors;
Continuing education, study and exposure tours, training, grants, field immersion, scholarships, etc.; and

Special training programs such as those on traditional medicine, disaster response and preparedness, and other programs that address emergent community health problems and issues.

b.) Free Legal Services.— Legal representation and consultation services for barangay health workers shall be immediately provided by the Public Attorneys Office in cases of coercion, interference, and in other civil and criminal cases filed by or against barangay health workers arising out of or in connection with the performance of their duties as such.

c.) Preferential Access to Loans.— The DOH in coordination with other concerned government agencies shall provide a mechanism for access to loan services by organized barangay health workers. The agencies providing loan services will set aside one percent (1%) of their loanable funds for organized barangay health worker groups that have community-based income generating projects in support of health programs or activities.

Section 7. Security of Tenure. — All duly appointed BHWs shall not be terminated except for cause provided under existing civil service rules and regulations, and only after notice and hearing; provided, that if a BHW is found by the Civil Service Commission to be unjustly dismissed from work, he/she shall be entitled to reinstatement without loss of seniority rights and to his/her back wages with twelve percent (12%) interest computed from the time his/her compensation was withheld from his/her up to time of reinstatement.

Section 8. Implementing Agencies. — Within one (1) year from the effectivity of this Act, the DOH, DILG, TESDA and local government units shall immediately appropriate funds necessary for the full implementation of this Act.

Within the same period, the DOH, DILG, and TESDA shall formulate, launch and institutionalize the BHW training program, assessment, and national certification program.

Section 9. Implementing Rules and Regulations. — Within six (6) months from the effectivity of this Act, the DOH and DILG, in consultation with the local government units, and existing health workers union and barangay health workers organizations, shall provide the implementing rules and regulations to carry out the provisions of this Act.

Section 10. Repealing Clause. — Republic Act No. 7883 otherwise known as the "Barangay Health Workers Benefits and Incentives Act of 1995", is hereby repealed. All other laws, decrees, orders, circulars, issuances, rules and
regulations and parts thereof which are inconsistent with this act are hereby repealed, amended or modified accordingly.

Section 11. Separability Clause. – If any provision of this Act is subsequently declared unconstitutional, the validity of the remaining provisions hereof shall remain in full force and effect.

Section 12. Effectivity. - This Act shall take effect fifteen days (15) after its complete publication in at least two (2) newspapers of general circulation in the Philippines.

Approved,