EIGHTEENTH CONGRESS OF THE
REPUBLIC OF THE PHILIPPINES
First Regular Session

HOUSE OF REPRESENTATIVES
H. B. No. 3487

INTRODUCED BY REPRESENTATIVE FERDINAND L. HERNANDEZ

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

EXPLANATORY NOTE

Article XIII, Section 11 of the 1987 Constitution states the national health policy of
our country as follows: “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 affordable cost.” Pursuant to Section 17 of Title I of the
1991 Local Government Code, the delivery of basic services and facilities such as health and
social welfare services were devolved to the local government units down to the barangay
level.

In light of the foregoing, Barangay Health Centers are maintained with the help of
Barangay Health Workers who voluntarily provide for health care services to the respective
communities. As such, Barangay Health Workers serve as the frontliners in providing for
basic health services and, thus, play a vital role in accomplishing our country’s national
health care policy.

At present, it is unfortunate that our Barangay Health Workers are only considered
as volunteers, despite the vital service that they provide to their communities. Thus, our
Barangay Health Workers are only entitled to small benefits and they are not given security of tenure.

This bill, which is a counterpart of Senate Bill No. 392, seeks to address this policy shortfall and give our Barangay Health Workers the due recognition that they deserve by granting them a compensation and benefits package, as well as security of tenure.

And considering the vital role of Barangay Health Centers play in the delivery of basic health care services to our fellow Filipinos, this bill also proposes for the increase of the number of Barangay Health Workers commensurate to the population of each barangay.

In light of the foregoing, the immediate enactment of this proposed legislation is sought.

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Be it enacted by the Senate and 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."

Sec. 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 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.
Sec. 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 Section 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, sanitarium, 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.

Sec 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.

In accordance with the recommendation of the DOH as to the needed number of BHWs, the city or municipal mayor, as the case may be, shall appoint BHWs in each barangay 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.

Sec. 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-aid, 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.

Sec. 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, as such, the total number of years served as barangay health worker shall be credited to his/her service in computing retirement benefits. BHWs shall 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;

2.) Continuing education, study and exposure tours, training, grants, field immersion, scholarships, etc.; and

3.) 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.
d.) Civil Service Eligibility. — A second grade eligibility shall be granted to barangay
health workers who have rendered five (5) years continuous service.

Sec. 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.

Sec. 8. Appropriations. — The amount of the grant of compensation herein
authorized shall be chargeable to the annual General Appropriations Act under the budget
of the Department of Health.

Sec. 9. 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.

Sec. 10. 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.

Sec. 11. Non-dimination of benefits. — Nothing in this Act shall be construed to
eliminate or in any may diminish entitlements, or other benefits being provided to or
enjoyed by BHWs under Republic Act No. 7883 or other laws and issuances.

Sec. 12. 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.

Sec. 13. 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.

Sec. 14. 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,