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



'22 JUL -7 P 6 :00

SENATE
S.B. No. 232

RECEIVED BY:

INTRODUCED BY SENATOR ROBINHOOD PADILLA

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

EXPLANATORY NOTE

Article XIII Section 11 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 affordable cost.”

As frontliners in the delivery of primary health care services, the barangay health workers (BHWs) play an integral role in the provision of basic services to the underserved and in the promotion of meaningful community participation in the country’s health system.

With the onslaught of the COVID-19 pandemic which tremendously put health care systems in crisis, the BHWs have taken a pivotal role at the grassroots levels as they also stand in the communities’ first line of defense, in regular monitoring of vulnerable people, and as link of households to health providers and facilities.

Despite this, there still lies the fact that our BHWs are only considered volunteers in communities, and are thus only entitled to meager incentives and benefits.

It is thus the intention of this bill to mandate the provision of incentives and benefits to our active and regularly performing BHWs such as hazard allowance, retirement cash incentive, insurance coverage, and access to loan facilities, among

others. This measure also seeks to prohibit any form of discrimination against BHWs in the exercise of their functions and responsibilities.

This bill also includes the BHWs right to self-organization in order to freely form, join or assist organizations to obtain redress of their grievances through peaceful concerted activities, in a manner not contrary to law.

With the huge role that our BHWs perform in our health sector, it is only proper that the State likewise protect those who protect our people by giving them just compensation and other benefits and incentives that they rightfully deserve.

It is for these reasons that the passage of this measure is earnestly sought.



ROBINHOOD PADILLA

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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 of*
2 *Barangay Health Workers*".
3

4 **Section 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 integrated
6 and comprehensive approach to health development. Pursuant thereto, it shall
7 endeavor to make essential goods, healthcare, and other social services available to
8 all the people. In line with the country's commitment to accomplish health indicator
9 targets under United Nations Millennium Development Goals (MDGs), the State shall
10 adopt policies that promote the welfare and well-being of barangay health workers
11 who are at the forefront of the delivery of health care at the grassroots level, and
12 which shall effectively harness their potential as partners in development.
13

14 **Section 3. Definition.** – As used in this Act, the term "barangay health
15 worker" shall refer to a person who has undergone training under any accredited
16 government and non-government organization and who voluntarily renders primary
17 healthcare services in the community after having been accredited to function as such
18 by the local health board in accordance with the guidelines promulgated by the
19 Department of Health (DOH) pursuant to Section 3 of Republic Act No. 7883 otherwise
20 known as the "Barangay Health Workers' Benefits and Incentives Act of 1995."
21 *Provided that*, a barangay health worker shall be considered as a public health worker
22 as defined under Republic Act No. 7305 or the Magna Carta of Public Health Workers
23 for purposes of receiving any special risk allowance granted to health workers for the
24 COVID-19 pandemic, and any other pandemic that may occur hereafter.
25

26 **Section 4. Registration.** – Barangay health workers (BHWs) shall be
27 registered with the local health board in the city or municipality in which they render

1 service. The registered health workers shall be given appropriate proof of said
2 registration.

3
4 The municipal and city health offices shall regularly maintain and update the
5 BHW Registry with the assistance of the BHW Federation and shall submit the same
6 to the municipal or city health board. The local health offices shall submit a copy of
7 their respective updated BHW registry to the Provincial Health Office which shall
8 consolidate all registries. Upon the validation of the Provincial BHW Federation, the
9 consolidated Provincial Registry shall be submitted to the Provincial Health Board, and
10 the same shall be posted on the municipal or city bulletin boards and barangay health
11 centers.

12
13 The Provincial BHW Registry shall be submitted on or before April 30 of every
14 year to the DOH at the regional and national levels for consolidation. The DOH is
15 hereby mandated to maintain a national register of BHWs.

16
17 In order to qualify for registration, a barangay health worker must:

- 18
19 (a) Have rendered basic community health care services continuously and
20 satisfactorily for at least six (6) months immediately preceding the date
21 of the filing of an application for registration in the barangay as certified
22 by the Rural Health Midwife (RHM) or public health nurse assigned to
23 the barangay and by the head of the barangay health workers
24 association;
25
26 (b) Have completed the basic orientation and training for BHWs as
27 prescribed by the DOH and conducted by an accredited government
28 agency, or DOH-recognized academic institution, or non-governmental
29 organization (NGO);
30
31 (c) Be at least eighteen (18) years of age at the date of the filing of the
32 application for registration; and,
33
34 (d) Be physically and mentally fit.

35
36 It shall be the duty of the municipal and city health offices, in cooperation with
37 the Provincial Health Office and DOH, to provide the BHW applicants with basic
38 orientation and training within six (6) months from the date of approval of their
39 application.

40
41 **Section 5. Accreditation.** – To further professionalize the health care
42 services rendered by the BHWs and ensure the health and welfare of the community,
43 a duly registered BHW must be accredited by the municipal or city health board.

44
45 The municipal or city health board shall issue the certificate of accreditation to
46 qualified BHWs. In order to qualify for accreditation, the applicant BHW must:

- 47
48 (a) Be registered in accordance with Section 4 hereof;

- 1 (b) Have completed in the locality at least two (2) years of continuous and
2 satisfactory service immediately prior to the filing of an application for
3 accreditation;
4
- 5 (c) Have completed a regular training program on health care service and
6 community-based health program, that would upgrade and develop the
7 skills and competency of BHWs to perform their roles. The training
8 program shall be institutionalized by the DOH, in cooperation with local
9 government units.

10
11 It shall be the duty of the municipal and city LGUs, in cooperation with the
12 provincial government and the DOH, to provide the applicant BHWs the necessary
13 support and opportunities for accreditation.
14

15 A BHW must complete the regular training program on health care service and
16 community-based health programs within five (5) years from registration.
17

18 The municipal and city health boards or through their registration and
19 accreditation committee shall act on the applications for accreditation of BHWs not
20 later than thirty (30) days from the date of application.
21

22 The DOH shall also maintain an updated roster of accredited BHWs that is
23 accessible to the general public.
24

25 **Section 6. Number and Role of Barangay Health Workers.** –
26 Notwithstanding the limitations prescribed under Section 325 (a) of Republic Act No.
27 7160, as amended, otherwise known as the Local Government Code of 1991, each
28 barangay shall at least have one (1) BHW for every twenty (20) households.
29

30 As one of the key partners in a reformed health care delivery system, the DOH
31 and LGUs shall support the roles of BHWs as:
32

- 33 (a) Advocate - to support, promote and champion current health programs,
34 projects, and activities to improve access to quality health services
35 towards the improved health status of the community.
36
- 37 (b) Educator - to guide and advise the community on the current DOH and
38 health priorities of LGUs such as importance of birth plan and facility-
39 based delivery in reducing maternal and infant deaths; newborn
40 screening for the early detection of congenital metabolic disorders
41 which may leads to mental retardation and even death, among others;
42
- 43 (c) Disseminator - to maintain regular communication with local
44 professional health workers on health events and updates and concerns
45 relevant to the community and inform the same to the community for
46 appropriate action, if necessary;

- 1 (d) Coordinator - to facilitate access to any group or association of the
2 community with a relevant network of or specific health and non-health
3 service providers;
4
5 (e) Record Keeper - to maintain updated records of health data, health
6 activities and events in the community;
7
8 (f) Health Care Service Provider - to assist and provide basic health care
9 services as may be needed in the community in any health event.

10
11 A BHW shall not be required to engage in any partisan political activity.
12

13 **Section 7. Mandatory Appointment of Barangay Health Worker**
14 **(BHW).** – There shall be appointed at least one (1) BHW in every barangay for every
15 twenty (20) households who shall be under the supervision and control of the DOH.
16 The BHW so appointed shall coordinate closely with the local government health
17 officer in the implementation of health programs in the locality As far as practicable,
18 the BHW to be employed must be a resident of the barangay.
19

20 The DOH shall determine the ratio of barangay health workers according to the
21 number of households: *Provided*, That there shall be at least one (1) BHW for every
22 twenty (20) households: *Provided, further*, That the total number of barangay health
23 workers nationwide shall not be less than one percent (1%) of the total population.
24

25 **Section 8. Incentives and Benefits.** – All BHWs who are actively and
26 regularly performing their duties shall be entitled to monthly honoraria in the amount
27 of not less than Three thousand pesos (P3,000.00) subject to adjustment based on
28 the prevailing market value, in addition to the following incentives and benefits:
29

- 30 (a) *Privileges for the BHWs.* - All accredited BHWs shall be entitled to
31 twenty percent (20%) discount on all the items enumerated under
32 Section 4 (a) of Republic Act No. 9994 otherwise known as the
33 Expanded Senior Citizens Act of 2010: *Provided*, That the privileges
34 shall not be claimed if the BHW is eligible for a higher discount that
35 may be granted by the commercial establishment or other existing
36 laws.
37

38 The commercial establishment may claim the discount granted under
39 this section as tax deduction based on the cost of goods sold or services
40 rendered: *Provided*, that the discount shall be allowed as a deduction
41 from the gross income for the same taxable year that the discount is
42 granted: *Provided further*, that the total amount of the claimed tax
43 deduction net of value-added tax, if applicable, shall be included in their
44 gross sales receipt for tax purposes and shall be subject to proper
45 documentation and to the provisions of the National Internal Revenue
46 Code of 1997, as amended.

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- (b) *Hazard Allowance.* - All accredited BHWs shall be entitled to hazard allowance in an amount to be determined by the local health board of the local government unit concerned, which in no case shall be less than One thousand pesos (P1,000.00) per month, subject to existing laws, rules, and regulations;

- (c) *Subsistence Allowance.* - All accredited BHWs who render service within the premises of isolated barangay health stations shall be entitled to subsistence allowance equivalent to the meals they take in the course of their duty, which shall be computed in accordance with prevailing circumstances as determined by the local government unit concerned. such allowance shall, in no case, be less than One hundred pesos (P100.00) per day;

- (d) *Transportation Allowance.* - All accredited BHWs, in the performance of their official duties, shall be entitled to a transportation allowance of not less than One thousand pesos (P1,000.00) per month, subject to auditing rules and regulations;

- (e) *One-time Retirement Cash Incentive* - An accredited BHW who has continuously and satisfactorily served for at least fifteen (15) years shall be entitled to a one-time retirement cash incentive of not less than ONE HUNDRED thousand pesos (P100,000.00) in recognition of their loyalty and dedication, which shall be borne by the municipality or city concerned. The provincial government may provide assistance for this purpose, in the case of component cities;

- (f) *Training, Education and Career Enrichment Programs.* - The DOH shall, in coordination with the Department of Education (DepEd), Commission on Higher Education (CHED), Technical Education and Skills Development Authority (TESDA), DOH-recognized academic institutions, other concerned agencies, and non-government organizations, provide information on and opportunities for education and career enrichment for accredited BHWs, such as in the following programs:
 - (1) Educational programs which credit the years of primary health care service of the BHW towards higher education completion in institutions with step ladder curricula thus allowing them 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, grants, field immersion, and scholarships, among others;

 - (3) Scholarship benefits in the form of tuition fees in state colleges, to be granted to one (1) child of every barangay

1 health worker who will not be able to take advantage of
2 the above programs described in paragraphs (1) and (2)
3 hereof; and
4

5 (4) Special training programs such as traditional medicine,
6 disaster preparedness, and other programs that address
7 emergent community health problems and issues.
8

9 (g) *Health Benefits.* - All accredited BHWs shall be entitled to the following
10 health benefits during their incumbency: 1. Free medical care, including
11 surgery and surgical expenses, medicines, x-ray and other laboratory
12 fees, when confined in any public hospital or health institution; 2.
13 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 or
16 clinic in case of extreme emergency where there is no available public
17 hospital; 3. Mandatory and immediate membership in the Philhealth as
18 indirect contributors. The LGUs concerned shall also endeavor to
19 provide other health benefits to accredited BHWs not otherwise
20 provided by law;
21

22 (h) *Insurance Coverage.* - Accredited BHWs shall be granted insurance
23 coverage and benefits by the Government Service Insurance System
24 (GSIS) which shall be borne by the LGU concerned. For this purpose,
25 the GSIS shall design an insurance benefit package suited to the needs
26 and unique circumstances of the BHWs;
27

28 (i) *Sick, Vacation, and Maternity Leaves.* - All accredited BHWs shall be
29 entitled to sick, vacation and maternity leaves as may be prescribed in
30 the implementing rules and regulations of this Act: *Provided,* that, the
31 BHWs shall continue to receive their monthly honoraria while on leave,
32 for such period in accordance with existing laws and practices.
33

34 (j) *Cash Gift* - All accredited BHWs are entitled to a cash gift not less than
35 the minimum monthly honorary; to be given every December from the
36 general fund of the barangay or from such other funds appropriated by
37 the national government for the purpose;
38

39 (k) *Disability Benefit* - An accredited BHW who sustains an injury or falls ill
40 in the course of the performance of their duties shall be entitled to Two
41 thousand pesos (P2,000.00) for every year of service. *Provided,* That
42 when the BHW sustains permanent disability, the BHW shall be entitled
43 to Two thousand pesos (P2,000.00) monthly until his or her death;
44

45 (l) *Civil Service Eligibility.* - A first-grade eligibility shall be granted to
46 accredited BHWs who have rendered three (3) years continuous service
47 as such: *Provided,* That should a BHW become a regular employee of

1 the government, the total number of years served as such shall be
2 credited to the HW's service in the computation of retirement benefits.

3
4 No person duly accredited as a BHW shall be removed except for a valid
5 cause to be determined by the Local Health Board (LHB): *Provided,*
6 That if found to be unjustly removed from service, a BHW shall be
7 entitled to reinstatement without loss of benefits and incentives from
8 the time of termination up to the time of his reinstatement. The LHB
9 shall resolve termination cases against a BHW judiciously not later than
10 ninety (90) days from the receipt of a complaint;

11
12 (m) *Free Legal Services* - Legal representation and consultation services
13 shall be immediately provided by the Public Attorney's Office to a BHW
14 in cases of coercion, interference, and in other civil and criminal cases
15 filed by or against the BHW arising out of or in connection with the
16 performance of their duties as such, regardless on whether the BHW is
17 considered indigent or not; and

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

26
27 **Section 9. Review by the Local Health Board.** – Every incentive or benefit
28 for BHWs requiring expenditure of local funds shall be reviewed and approved by the
29 LHB. Such benefits and incentives may be increased, upon review of the LHB, after
30 considering, among others, the present Consumer Price Index (CPI) as published by
31 the Philippine Statistics Authority (PSA).

32
33 **Section 10. Discrimination Prohibited.** – Discrimination against any BHW
34 by reason of gender, civil status, creed, religious or political beliefs and ethnic
35 groupings in the exercise of their functions and responsibilities is hereby prohibited.

36
37 **Section 11. Protection of BHWs.** – The municipal, city, provincial
38 governments, and the Department of the Interior and Local Government (DILG) shall
39 establish a grievance mechanism as a means of processing complaints of BHWs
40 against alleged acts of discrimination and unjust removal from the service. A BHW
41 may appeal their grievances to the DILG.

42
43 **Section 12. Right to Self-organization.** – A BHW shall have the right to
44 freely form, join or assist organizations to obtain redress of their grievances through
45 peaceful concerted activities, in a manner not contrary to law, and with utmost regard
46 to service to patients and the continuous operation of barangay health services in the
47 interest of public health, safety, or survival of patients.

1 **Section 13. Representation in the Local Health Board and Primary**
2 **Health Care Provider Network.** – The president of the municipal or city association
3 of BHWs shall be a member of the municipal or city local health board. The presidents
4 of the association of BHWs of each component city and municipality associations of a
5 province shall elect from among themselves their representative to the provincial
6 health board: *Provided, That, the BHW representatives to the health boards shall not*
7 *be allowed to vote on the registration, accreditation and disciplinary or removal*
8 *complaints of BHWs.*

9
10 The BHWs shall also form part of the health care provider network and shall
11 participate in the implementation of health care services and programs.

12
13 **Section 14. Continuous Capacity Building for BHWs.** – The DOH shall
14 conduct continuous capacity building for BHWs to enhance and upgrade their
15 knowledge and skills, including training programs conducted online and in major
16 Philippine dialects.

17
18 The DOH shall, in coordination with TESDA and other concerned agencies, shall
19 also assist the LGUs in the development of education modules or materials that
20 highlight the collective experiences and learnings of BHWs and the use of traditional
21 and complementary medicine.

22
23 The LGUs shall endeavor to establish their own training centers for their BHWs
24 and other health workers in coordination with TESDA, NGOs, and other agencies
25 concerned.

26
27 The LGUs shall also implement a development program for BHWs that will allow
28 them to benefit from ladderized training as provided under Republic Act No. 10968,
29 otherwise known as the Philippine Qualification Framework Act, and Republic Act No.
30 10647, otherwise known as the Ladderized Education Act of 2014, including academic
31 credits for health-related courses.

32
33 **Section 15. Penalty Clause.** – Any local government official who violates any
34 provision of this Act may be administratively and criminally charged in accordance with
35 the law.

36
37 **Section 16. Appropriations.** – The amount necessary for the implementation
38 of this Act shall be charged against the National Tax Allotment (NTA) of the LGUs,
39 other local funds, and the special health fund under Republic Act No. 11223 otherwise
40 known as the Universal Health Care Act.

41
42 **Section 17. Implementing Rules and Regulation.** – The DOH and the
43 DILG shall, in consultation with the DepEd, the CSC, the GSIS, and other concerned
44 government agencies and nongovernmental entities, promulgate the rules and
45 regulations to implement this Act not later than one hundred eighty days (180 days)
46 from the effectivity of this Act.

1 **Section 18. *Separability Clause.*** – If any portion or provision of this Act is
2 declared invalid or unconstitutional, other provisions hereof shall remain in full force
3 and effect.

4
5 **Section 19. *Repealing Clause.*** – Republic Act No. 7883 otherwise known as
6 the "Barangay Health Workers 'Benefits and Incentives Act of 1995" is hereby
7 repealed. All laws, decrees, executive orders, rules and regulations, which are
8 inconsistent with this Act are hereby repealed, or modified accordingly.

9
10 **Section 20. *Effectivity.*** – This Act shall take effect fifteen days (15) after its
11 publication in the Official Gazette or in a national newspaper of general circulation.

Approved,