

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

17th CONGRESS
Regular Session

House Bill No. **3291**

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Introduced by **Congressman AURELIO "DONG" GONZALES, JR.**

EXPLANATORY NOTE

A large number of the Filipino population are students in public and private schools in the Philippines. For this reason, schools are well-positioned to contribute toward the maintenance, promotion, and protection of the health of a very large number of Filipinos, as well as foreign students enrolled in country.

Recognizing the importance of schools, the government has and continues to strengthen the roles that these institutional units can play in the health care of the population, through its policies on school health and student health services.

Laws, policies and guidelines pertaining to student health services include Republic Act (RA) 124, RA 951, and Department of Education and Culture (DECS) Memorandum No. 87 Series 1984. The 1947 RA 124, which is the "Act to Provide for the Medical Inspections of Students Enrolled in Private Schools in the Philippines", requires that schools with 300 or more enrollments provide for the yearly inspection of its pupils by a physician. Such was later amended in the same year by RA 951, or "An Act to Amend Republic Act Numbered One Hundred and Twenty-Four", stipulating that private schools with 1,300 or more students provide a part-time or full-time physician and dentist, and that the Department of Health (then the Bureau of Health) is to regulate such medical and dental service provision. The title of RA 124 was also amended to "An Act to Require Certain Private Schools, Colleges and Universities in the Philippines to Provide Medical and Dental Service for Pupils and Students". The DECS Memorandum No. 87 Series 1984 entitled "Organization of School Health Units in Private Schools" provides guidelines for the establishment of school health units and comprehensive school health programs in private schools "for the promotion, protection and maintenance of the health of the schooling population". Basic provisions required by the memorandum include: (1) school health unit housed in a space not less than 65 sq m (i.e., for schools with 3,000 or more students), which should be divided into separate rooms to ensure privacy: waiting room, examining room, dental evaluation area, office rooms, and toilet with lavatory facilities; and (2) the following manpower required based on enrollment size of a school: Enrollment Size


Required Manpower 1–299 1 full-time nurse 300–4,999 1 part-time medical officer 1 part-time dental officer 1 full-time nurse 5,000 or more 1 full-time medical officer 1 full-time dental officer 1 full-time nurse – one set of these officers for every 5,000 students.

Other key legal instruments with provisions on school health services in both private and public schools include the Sanitation Code, the Department of Education (DepED) school health manual, and the DepED educational facilities manual.

At present, the DepED and the Commission on Higher Education (CHED) are responsible for ensuring compliance and for monitoring student health services and activities in private schools up to the secondary level and private higher education institutions (HEIs), respectively. For schools to be granted the permit to open and to operate, both the CHED and DepED had included availability of student health services as requisites. The permit to operate is renewed yearly to ensure continuing compliance with the requirements.

However, it has become the practice of some schools to merely set-up a temporary clinic or a school health unit inside their respective campus to be granted a permit to open or for its permit to be renewed. Thereafter, they would close down the set-up and transform these units again into classrooms or for other purposes. The existing laws, policies and guidelines requiring the establishment of clinics in schools do not also apply to all public and private schools.

This bill proposes to establish permanent clinics in all public and private schools, irrespective of the number of enrollments.



Congressman Aurelio "Dong" Gonzales, Jr.

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House Bill No. **3291**

Introduced by **Congressman AURELIO “DONG” GONZALES, JR.**

AN ACT
REQUIRING THE ESTABLISHMENT OF A PERMANENT CLINIC FOR EVERY
PUBLIC AND PRIVATE SCHOOL AND APPROPRIATING FUNDS THEREFOR

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 “Mandatory School Clinic Act of 2016.”

SECTION 2. *Declaration of Policy.* – It is the policy of the State to protect and promote the right to health of the people and instill health consciousness among them. Pursuant to this policy, laws were enacted to establish health services in both public and private schools, including having medicines and medical supplies for emergency care and employing the services of health professionals, such as doctors, nurses, dentists and trained medical officers.

In line with the policy to protect the right to health and to render more operational the goal of the government to provide health services in schools, the State shall make it mandatory for every public and private school to have one permanent clinic.

SECTION 3. *Establishment of Clinics.* – Each school, whether public or private, shall be required to establish a permanent clinic inside its school campus.

Within one-hundred twenty (120) days from the effectivity of this Act, the Department of Education shall come up with its implementing rules, specifications, criteria and details for the mandatory establishment of clinics in schools.

SECTION 4. *On-the –spot inspection and monitoring of public and private schools.* – Each provincial or city officer of the DepED shall create a monitoring team whose main purpose is to conduct on-spot inspection or monitoring of schools within its area of responsibility to determine if the clinics established are in accordance with the required guidelines, policies and criteria.

SECTION 5. *Appropriations.* – The amount necessary to carry out the provisions of this Act shall be included in the General Appropriations Act of the year following its enactment into law.

SECTION 6. *Separability Clause.* – If any provision or part thereof is held invalid or unconstitutional, the remainder of the law or the provision not otherwise affected shall remain valid and subsisting.

SECTION 7. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.