





Republic of the Philippines PROVINCE OF LEYTE

Provincial Capitol Tacloban City

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PROVINCIAL LEGAL OFFICE

2nd INDORSEMENT

September 3, 2024

Respectfully returned to the Sangguniang Panlalawigan of Leyte, through SP Secretary, the attached Ordinance No. 05, series of 2024 of the Sangguniang Bayan of La Paz, Leyte.

Ordinance No. 05, series of 2024 entitled: "An Ordinance Establishing a Municipal Health Policy for the purpose of enhancing the delivery of Integrated Mental Health Services, promoting and protecting the rights of persons utilizing Psychosocial Health Services, appropriating funds therefor and for other purposes.

REVIEW/RECOMMENDATION/LEGAL OPINION:

This office is of the opinion that the Subject Ordinance is in accordance to its power under Section 16¹ General Welfare Clause, Section 447(1)(iii)² of the Local Government Code of 1991 (R.A 7160), in consonance with Article II, Section 153 of the 1987 Constitution.

Said ordinance is in line with the mandate of Republic Act 11036 "Mental Health Act", and Republic Act 7277 "Magna Carta for Person with Disability". Hence, recommending the declaration of its validity.

We hope to have assisted you with this request. Please note that the opinion rendered by this Office are based on facts available and may vary or change when additional facts and documents are presented or changed. This opinion is likewise without prejudice to the opinions rendered by higher and competent authorities and/or the courts.

ATTY, JOSE RAYMUND A. ACOL

Asst. Provincial Legal Officer

 $^{^{1}}$ Section 16 Every local government unit shall exercise the powers expressly granted, those necessarily implied therefrom, as well as powers necessary, appropriate, or incidental for its efficient and effective governance, and those which are essential to the promotion of general welfare. Within their respective territorial jurisdiction , local government unit shall promote health and

 $^{^2}$ Section 447(1)(iii) Approve ordinances imposing a fine not exceeding Two Thousand Five Hundred Pesos (P 2,500.00) xxx 3 Article II Section 15 of the 1987 constitution provides that the state shall protect and promote the right to health of the people and instill health consciousness among them.

Republic of the Philippines PROVINCE OF LEYTE Palo, Leyte

OFFICE OF THE SANGGUNIANG PANLALAWIGAN

1st INDORSEMENT 13 August 2024 lectived from 18.27.29

The Provincial Legal Office is respectfully requested to review and submit recommendations on the herein enclosed **MUNICIPAL ORDINANCE NO. 05**, series of 2024 of the Municipality of **LA PAZ**, **LEYTE**, entitled: An Ordinance establishing a **Municipal Health Policy** for the purpose of enhancing the delivery of Integrated Mental Health Services, promoting and protecting the rights of persons utilizing Psychosocial Health Services, appropriating funds therefor and for other purposes.

FLORINDA JILL S UNVICO Secretary to the Sanggunian





Republic of the Philippines Province of Leyte MUNICIPALITY OF LA PAZ -oOo-



PROVINCE OF

OFFICE OF THE SANGGUNIANG BAYAN

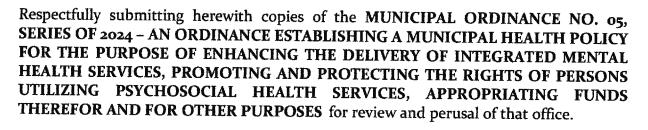
13 August 2024

FLORINDA JILL S. UYVICO
Secretary to the Sanggunian
Sangguniang Panlalawigan

Province of Leyte Legislative Bldg., Capitol Complex

Palo, Leyte

Madam:



Please acknowledge receipt hereof and requesting the same be given due course and appropriate action.

Early action hereon will be highly appreciated.

Thank you.

Very truly yours,

ERWIN M. CERNAL

Secretary of the Sangguniang Bayan





Republic of the Philippines Province of Leyte MUNICIPALITY OF LA PAZ -000-

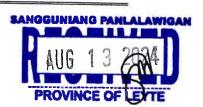


OFFICE OF THE SANGGUNIANG BAYAN

13 August 2024

HON. LEONARDO "SANDY" JAVIER, JR.

Vice Governor and Presiding Officer The Honorable Members Sangguniang Panlalawigan Province of Leyte Legislative Bldg., Capitol Complex Palo, Leyte



Dear Honorable Ladies and Gentlemen:

Respectfully submitting herewith copies of the MUNICIPAL ORDINANCE NO. 05, SERIES OF 2024 - AN ORDINANCE ESTABLISHING A MUNICIPAL HEALTH POLICY FOR THE PURPOSE OF ENHANCING THE DELIVERY OF INTEGRATED MENTAL HEALTH SERVICES, PROMOTING AND PROTECTING THE RIGHTS OF UTILIZING PSYCHOSOCIAL HEALTH SERVICES, APPROPRIATING FUNDS THEREFOR AND FOR OTHER PURPOSES for review and perusal of that office.

Please acknowledge receipt hereof and requesting the same be given due course and appropriate action.

Early action hereon will be highly appreciated.

Thank you.

Very truly yours,

ERWIN M. CERNAL

Secretary of the Sangguniang Bayan





Republic of the Philippines Province of Leyte MUNICIPALITY OF LA PAZ -oOo-



SANGGUNIANG PANLALAWIGAN

OFFICE OF THE SANGGUNIANG BAYAN

MUNICIPAL ORDINANCE NO. 2024 – 05 Series of 2024

AN ORDINANCE ESTABLISHING A MUNICIPAL HEALTH POLICY FOR THE PURPOSE OF ENHANCING THE DELIVERY OF INTEGRATED MENTAL HEALTH SERVICES, PROMOTING AND PROTECTING THE RIGHTS OF PERSONS UTILIZING PSYCHOSOCIAL HEALTH SERVICES, APPROPRIATING FUNDS THEREFOR AND FOR OTHER PURPOSES

Authored by: Hon. Araceli P. Go - Chair, Committee on Health and Sanitation

Explanatory Note

Republic Act No. 11036 otherwise known as Mental Health Act", declares the policy that the state affirms the basic right of all Filipinos to mental health as well as the fundamental rights of people who require mental health services.

The state commits itself to promoting the well-being of people by ensuring that; mental health is valued, promoted and protected; mental health conditions are treated and prevented, timely, affordable, high quality, and culturally-appropriate mental health case is made available to the public; mental health service are free from coercion and accountable to the service users; and persons affected by mental health conditions are able to exercise the full range of human rights, and participate fully in society and at work free from stigmatization and discrimination.

The State shall comply strictly with its obligations under the United Nations Declaration of Human Rights, the Convention on the rights of Persons with Disabilities, and all other relevant international and regional human rights conventions and declarations. The applicability of Republic Act No. 7277, as amended, otherwise known as the "Magna Carta for Disabled Persons", to person with mental health conditions, as defined herein, is expressly recognized.

NOW THEREFORE, be it ordained by the Sangguniang Bayan of La Paz, Leyte in Session Assembled:

SECTION I. Title. - This Ordinance shall be known as the "Mental Health Ordinance of the Municipality of La Paz, Leyte."

SECTION II. Objectives. - The objectives of this Ordinance are as follows:

- Strengthen effective leadership and governance for mental health by, among others, formulating, developing and implementing national policies, strategies, programs, and regulations relating to mental health;
- b) Develop and establish a comprehensive, integrated effective and efficient municipal mental health care system responsive to the psychiatric, neurologic, and psychosocial needs of the people of La Paz, Leyte;
- Protect the rights and freedom of persons with psychiatric, neurologic, and psychosocial needs of La Paznons;
- d) Strengthen information systems, evidence and research for mental health;
- e) Integrated mental health care in the basic health services, and conduct quarterly assessment of mental health patients by psychiatrist as the need arises;
- f) Integrate strategies promoting mental health in educational institutions, the workplace, and in communities.

SECTION III. Definition of Terms. - As used in this Ordinance, the following terms are defined as follows:

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- a) Addiction refers to a primary chronic relapsing disease of brain reward, motivation, memory, and related circuitry, Dysfunctions in the circuitry lead to characteristic biological, psychological, social, and spiritual manifestations. It is characterized by the inability to consistently abstain impairment and behavioral control, craving, diminished recognition of significant problems with one's behavior and interpersonal relationships and a dysfunctional emotional response;
- b) **Carer** refers to the person, who may or may not be patient's next-of-kin or relative, who maintains a close personal; relationship and manifests concern for the welfare of the patient;
- c) Confidentiality refers to ensuring that all relevant information related to persons with psychiatric, neurologic, and psychological health needs is kept safe from access or use by, or disclosure to, persons or entities who are not authorize to access, use, or possess such information:
- d) Deinstitutionalization refers to the process of transitioning service users, including persons with mental health conditions and psychosocial disabilities, from Institutional and other segregated settings, to community-based settings that enable social participation, recovery-based approaches to mental health, and individualized care in accordance with the service user's will and preference;
- e) Discrimination refers to any distinction, exclusion or restriction which has the purpose or effect of nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation, Special measure solely to protect the rights or secure the advancement of persons with decision-making impairment capacity shall not be deemed to be discriminatory;
- f) Drug Rehabilitation refers to the processes of medical or psychotherapeutic treatment of dependency on psychoactive substances such as alcohol, prescription drugs, and other dangerous drugs pursuant to Republic Act, 9165, otherwise known as the "Comprehensive Dangerous Drugs Act of 2002". Rehabilitation process may also be applicable to diagnosed behavioral addictions such as gambling, internet and sexual addictions. The general intent is to enable the patient to confront the psychological, legal, financial, social, and physical consequences. Treatment includes medication for co-morbid psychiatric or other medical disorders, counseling by experts and sharing of experience with other addicted individuals;
- g) Impairment or Temporary Loss of Decision-Making Capacity refers to a medically-determined inability on the part of a service user or any other person affected by a mental health condition, to provide informed consent. A service user has impairment or temporary loss of decision-making capacity when the service user as assessed by a mental health professional is unable to do the following:
 - 1. Understand information concerning the nature of a mental health condition;
 - 2. Understand the consequences of one's decisions and actions on one's life or health, or the life or health of others;
 - 3. Understand information about the nature of the treatment proposed, including methodology, direct effects, and possible side effects; and
 - 4. Effectively communicate consent voluntarily given by a service user to a plan for treatment or hospitalization, or information regarding one's own condition;
- h) Informed Consent refers to consent voluntarily given by a service user to a plan for treatment, after a fully disclosure communicated in plain language by the attending mental health service provider, of the nature, consequences, benefits, and risks of the proposed treatment, as well as available alternatives;
- i) Legal Representatives refers to a person designated by the service user, appointed by a court of competent jurisdiction, or authorized by this ordinance or any other applicable law, to act on the service user's behalf. The legal representative may also be a person appointed in writing by the service user to act on his or her behalf through an advance directive;
- j) Mental Health refers to a state of well-being in which the individual realizes one's own abilities and potentials, copes adequately with the normal stresses of life, displays resilience in the face of extreme life events, works productively and fruitfully, and is able to make a positive contribution to the community;
- k) Mental Health Condition refers to a neurologic or psychiatric condition characterized by the existence of a recognizable, clinically-significant disturbance in an individual's cognition, emotional regulation, or behavior that reflects a genetic or acquired dysfunction in the neurological, psychosocial, or developmental process underlying, mental functioning. The determination of



neurologic and psychiatric conditions shall be based on scientifically- accepted medical nomenclature and best available scientific and medical evidence;

- I) **Mental Health Facility** refers to any establishment, or any unit of an establishment, which has, as its primary function, the provision of mental health services;
- m) **Mental Health Professional** refers to a medical doctor, psychologist, nurse, social worker or any other appropriately-trained and qualified person with specific skills relevant to the provision of mental health services;
- Mental Health Service Provider refers to an entity or individual providing mental health services as defines in this ordinance, whether public or private, including, but not limited to mental health professionals and workers, social workers and counselors, informal community caregivers, mental health advocates and their organizations, personal ombudsmen, and persons or entities offering nonmedical alternative therapies;
- Mental Health Service refers to psychosocial psychiatric or neurologic activities and programs along the whole range of the mental health support services including promotion, prevention, treatment, and aftercare, which are provided by mental health facilities and mental health professionals;
- p) **Mental Health Worker** refers to a trained person, volunteer or advocate engaged in mental health promotion, providing support services under the supervision of a mental health professional;
- q) Psychiatric or Neurologic Emergency refers to a condition presenting a serious and immediate threat to the health and well being of a service user or any other person affected by a mental health facilities and mental health condition, or any other person affected by a mental condition, or to the health or well-being of others, requiring immediate medical intervention;
- r) **Psychosocial Problems** refers to a condition that indicates the existence of dysfunctions in a person's behavior, thoughts and feelings brought about by sudden extreme, prolonged or cumulative stressors in the physical or social environment;
- s) Recovery-Based Approach refers to an approach to intervention and treatment centered on the strengths of a service user and involving the active participation, as equal partners in care, of persons with experiences in mental health. This requires integrating a service user's understanding of his or her condition into any plan for treatment and recovery;
- t) Service User refers to a person with lived experience of any mental health condition including persons who require or are undergoing psychiatric, neurologic or psychosocial care;
- u) Support refers to the spectrum of informal and formal arrangements or services of varying types and intensities, provided by the State, private entities, or communities, aimed at assisting a service user in the exercise of his or her legal capacity or rights, including; community services; personal assistants and ombudsman; powers of attorney and other legal and personal planning tools; peer support; support for self-advocacy; non-formal community caregiver networks; dialogue systems; alternative, and manual communication; and the use of assistive devices and technology; and
- v) Supported Decision-Making refers to the act of assisting a service user who is not affected by an impairment or loss of decision-making capacity, in expressing a mental health-related preference, intention or decision. It includes all the necessary support, safeguards and measures to ensure protection from undue influence, coercion or abuse.

SECTION IV. Rights of Service Users. - Service users shall enjoy, on an equal and non-discriminatory basis, all rights guaranteed by the Constitution as well as those recognizes under the United Nations Universal Declaration of Human Rights and the Convention on the Rights of Persons with Disabilities and all other relevant international and regional human rights conventions and declarations, including the right to:

- a) Freedom from social economic, and political discrimination and stigmatization, whether committed by public or private actors;
- Exercise all their inherit civil, political, economic, social, religious, educational, and cultural rights respecting individual qualities, abilities, and diversity of background, without discrimination on the basis of physical disability, age, gender, sexual orientation, race, color, language, religion or nationality, ethnic, or social origin;
- c) Access to evidence-based treatment of the same standard and quality, regardless of age, sex, socioeconomic status, race, ethnicity or sexual orientation;

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- d) Access to affordable essential health and social services for the purpose of achieving the highest attainable standard of mental health;
- e) Access to mental health service at all levels of the municipal health care system;
- f) Access to comprehensive and coordinated treatment integrating holistic prevention, promotion, rehabilitation, care and support, aimed at addressing mental health care needs through a multidisciplinary, user-driven treatment and recovery plan;
- g) Access to psychosocial care and clinical treatment in the least restrictive environment and manner;
- h) Humane treatment free from solitary confinement, torture, and other forms of cruel inhumane, harmful or degrading treatment and invasive procedures not backed by scientific evidence;
- i) Access to aftercare and rehabilitation when possible in the community for the purpose of social reintegration and inclusion;
- j) Access to adequate information regarding available multidisciplinary mental health services;
- k) Participate in metal health advocacy, policy planning, legislation, service provision, monitoring, research and evaluation;
- Confidentiality of all information, communications, and records, in whatever form or medium stored, regarding the service user, any aspect of the service user's mental health, or any treatment or care received by the service user, which information, communications, and records shall not be disclosed to third parties without the written consent of the service user concerned or the service user's legal representative, except in the following circumstances:
 - 1. Disclose is required by law or pursuant to an order issued by a court of competent jurisdiction;
 - 2. The service user has expressed consent to the disclosure;
 - 3. A life-threatening emergency exists and such disclosure is necessary to prevent harm or injury to the service user or other persons;
 - 4. The service user is a minor and the attending mental health professional reasonably believes that the service user is a victim of child abuse; or
 - Disclosure is required in condition with an administrative, civil, or criminal case against a mental health professional ethics, to the extent necessary to completely adjudicate, settle, or resolve any issue or controversy involved therein;
- m) Give informed consent before receiving treatment or care, including the right to withdraw such consent. Such consent shall be recorded in the service user's clinical record;
- n) Participate in the development and formulation of the psychosocial care or clinical treatment plan to be implemented;
- Designate or appoint a person of legal age to act as his or her legal representative in accordance with this ordinance, except in cases of impairment or temporary loss of decision-making capacity;
- Send or receive uncensored private communication which may include communication by letter, telephone or electronic means, and receive visitors at reasonable times, including the service user's legal representative and representatives from the Commission on Human Rights (CHR);
- q) Legal services, through competent counsel of the service user's choice. In case the service user cannot the services of a counsel, the Public Attorney's Office, or a legal aid institution of the service user or representative's choice, shall assist the service user;
- r) Access to their clinical records unless, in the opinion of the attending mental health professional, revealing such information would cause harm to the service user's health or put the safety of others at risk. When any such clinical records are withheld, the service user or his or her legal representative may contest such decision with the internal review board created pursuant to this Ordinance authorized to investigate and resolve disputes, or with the CHR;
- s) Information, within the twenty-four (24) hours of admission to a mental health facility, of the rights enumerated in this section in a form and language understood by the service user; and



t) By oneself or through a legal representative, to file with the appropriate agency, complaints of improprieties, abuses in mental health care, violations of rights of persons with mental health needs, and seek to initiate appropriate investigation and action against those who authorized illegal or unlawful involuntary treatment or confinement, and other violations.

SECTION V. Rights of Family Members, Carers and Legal Representatives.- Family members, carers and duly designated or appointed legal representative of the service user shall have the right to:

- (a) Receive appropriate psychosocial support from the relevant government agencies;
- (b) With the consent of the concerned service user, participate in the formulation, development and implementation of the service user's individual treatment plan;
- (c) Apply for release and transfer of the service user to an appropriate mental health facility;
- (d) Participate in metal health advocacy, policy planning, legislation, service provision, monitoring, research and evaluation.

SECTION VI. Rights of Mental Health Professionals. - Mental health professionals shall have the right to:

- a) A safe and supportive work environment;
- b) Participate in a continuous professional development program;
- c) Participate in the planning, development, and management of mental health services:
- d) Contribute to the development and regular review of standards for evaluating mental health services provided to service users;
- e) Participate in the development of mental and health policy and service delivery guidelines;
- f) Except in emergency situations, manage and control all aspects of his or her practice, including whether or not to accept or decline a service user for treatment; and
- g) Advocate for the rights of a service user, in cases where the service user's wishes are at odds with those of his or her family or legal representatives.

SECTION VII. Informed Consent to Treatment. - Service users must provide informed consent in writing prior to the implementation by mental health professionals, workers, and other service providers of any plan or program of therapy or treatment, including physical or chemical restraint. All persons, including service users, person with disabilities, and minors, shall be presumed to possess legal capacity for the purpose of this ordinance or any other applicable law, irrespective of the nature or effects of their mental health conditions or disability. Children shall have the right to express their views on all matters affecting themselves and have such views given due consideration in accordance with their age and maturity.

SECTION VIII. Advance Directive. A service user may set out his or her preference in relation to treatment through a signed, dated, and notarized advance directive executed for the purpose. An advance directive may be revoked by a new advance directive or by a notarized revocation.

SECTION IX. Legal Representative. - A service user may designate a person of legal age to act as his or her legal representative through a notarized document executed for that purpose.

- a) Functions. A service user's legal representative shall:
 - 1. Provide the service user with support and help, represent his or her interests, and receive medical information about the service user in accordance with this Ordinance;
 - 2. Act as substitute decision maker when the service user has been assessed by a mental health professional to have temporary impairment of decision-making capacity;
 - 3. Assist the service user vis-a-vis the exercise of any right provided under this Ordinance; and

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- 4. Be consulted with respect to any treatment or therapy received by the service user. The appointment of a legal representative may be revoked by the appointment of a new legal representative or by a notarized revocation.
- b) Declining an Appointment. A person thus appointed may decline to act as a service user's legal representative. However, a person who declines to continue being a service user's legal representative must take reasonable steps to inform the service user, as well as the service user's attending mental health professional or worker, of such decision.
- c) Failure to Appoint. If the service user fails to appoint a legal representative, the following persons shall act as the service user's representative, in the order provided below.
 - The spouse, if any, unless permanently separated from the service user by a decree issued by a court of competent jurisdiction, or unless such spouse has abandoned or been abandoned by the service user for any period which has not yet come to an end;
 - 2. Non-minor children;
 - 3. Either parent by mutual consent, if the service user is a minor;
 - 4. Chief, administrator, or medical director of a mental health care facility, or
 - 5. A person appointed by a Court.

SECTION X. Supported Decision-Making. A service user may designate up to three (3) persons or "supporters", including the service user's legal representative, for the purposes of supported decision making. These supporters shall have the authority to: access the service user's medical information; consult with the service user vis-a-vis any proposed treatment or therapy; and be present during service user's appointments and consultations with mental health professionals, workers and other service providers during the course of treatment or therapy

SECTION XI. Exceptions to Informed Consent. During psychiatric or neurologic emergencies, or when there is impairment or temporary loss of decision-making capacity in whether physical or chemical, may be administered or implemented pursuant to the following safeguards and conditions:

- a. In compliance with the service user's advance directives, if available, unless doing so would pose an immediate risk of serious harm to the patient or another person;
- b. Only to the extent that such treatment or restraint is necessary, and only while a psychiatric or neurologic emergency, or impairment or temporary loss of capacity, exists or persists;
- c. Upon the order of the service user's attending mental health professional, which order must be reviewed by the Internal review board of the mental health facility where the patient is being treated within fifteen (15) days from the date such order was issued, and every fifteen (15) days thereafter while the treatment or restraint continues; and
- d. That such involuntary treatment or restraint shall be in strict accordance with guidelines approved by the appropriate authorities, which must contain clear criteria regulating the application and termination of such medical intervention, and fully documented and subject to regular external independent monitoring, review, and audit by the internal review boards established by this ordinance.

SECTION XII. COMPLIANCE. Quality of Mental Health Services. Mental health services provided pursuant to this Ordinance shall be:

- a. Based on medical and scientific research findings;
- b. Responsive to the clinical, gender, cultural and ethnic and other special needs of the individuals being served;
- Most appropriate and least restrictive setting,
- d. Age appropriate; and
- e. Provided by mental health professionals and workers in a manner that ensures accountability.

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SECTION XIII. Mental Heath Services at the Community Level Responsive primary mental health services shall be developed and integrated as part of the basic health services at the appropriate level of care, particularly at the municipal and barangay level. The standards of metal health services shall be determined by the MHO in consultation with stakeholders based on current evidences.

The Local Government Unit (LGU) and academic institution shall create their own program in accordance with the general guidelines set by the Municipal Council for Mental Health, created under this Ordinance, in coordination with other stakeholders. LGUs and academic institutions shall coordinate with all concerned government agencies and the private sector for the implementation of the program.

SECTION XIV. Reportorial Requirements. The LGU through the Municipal Health Office shall make a quarterly report to the Municipal Council for Mental Health. The report shall include, among others, the following data: number of patients/service users attended to and or served, the respective kinds of mental illness or disability, duration and result of the treatment, and patients/users' age, gender, educational attainment, and employment without disclosing the identities of such patients/service user for confidentiality

SECTION XV. Suicide Prevention. - Mental health services shall also include mechanisms for suicide intervention, prevention, and response strategies, with particular attention to the concerns of the youth. Twenty- four seven (24/7) hotlines, to provide assistance to individuals with mental health conditions, especially individuals at risk of committing suicide, shall be set up, and existing hotlines shall be strengthened.

SECTION XVI. Public Awareness. - The LGU through the MHO and MSWDO shall initiate and sustain a heightened municipal-wide multimedia campaign to raise the level of public awareness on the protection and promotion of mental health and rights including, but not limited to, mental health and nutrition, stress handling, guidance and counseling, and other elements of mental health.

SECTION XVII. Integration of Mental Health into the Educational System. The LGU shall ensure the integration of age-appropriate content pertaining to mental health into the curriculum at all educational levels.

SECTION XVIII. Mental Health Promotion in Educational Institutions. Educational Institutions, such as schools, public high schools, and technical schools, shall develop policies and programs for students, educators, and other employees designed to: raise awareness on mental health issues, identified and provide support and services for Individuals at risk, and facility access, including referral mechanisms of individual with metal health conditions to treatment and psychosocial support.

All public and private educational institutions shall be required to have a complement of mental health professionals.

SECTION XIX. Mental Health Promotion and Policies in the Workplace. Employers shall develop appropriate policies and programs on mental health issues, correct the stigma and discrimination associated with mental conditions, identify and provide support for individuals with mental health conditions to treatment and psychosocial support.

SECTION XX. Capacity Building, Reorientation, and Training. -in close coordination with mental health facilities, academic institutions, and other stakeholders, mental health professionals, workers, and other service providers shall undergo capacity building, reorientation, and training to develop their ability to deliver evidence-based, gender-sensitive, culturally appropriate, and human rights-oriented mental health services, with emphasis on the community and public health aspects of mental health.

SECTION XXI. Capacity Building of Barangay Health Workers (BHWs).- The MHO shall be responsible for disseminating information and providing training programs to BHWs. The LGU, with technical assistance from the DOH, shall be responsible for the training of BHWs and other barangay volunteers on the promotion of mental health. The DOH shall provide assistance to LGUs with medical supplies and equipment needed by BHWs to carry out their functions effectively.

SECTION XXII. Duties and Responsibilities of the Municipal Health Office. To achieve the policy and objectives of this Ordinance, the MHD shall:

- Formulate, develop, and implement a national mental health program. In coordination with relevant government agencies, create a framework for Mental Health Awareness Program to promote effective strategies regarding mental healthcare, its components, and services, as well as to improve awareness on stigmatized medical conditions;
- b. Integrate mental health into the routine health information systems and identify, collate, routinely report and use core mental health data disaggregated by sex and age, and health outcomes, including data on complete and attempted suicides, in order to improve mental health service delivery: promotion and prevention strategies;

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- c. Coordinate with the Philippine Health Insurance Corporation to ensure that insurance packages equivalent to those covering physical disorders of comparable impact to the patient, as measured by Disability-Adjusted Life Year or other methodologies, are available to patients affected by mental health conditions,
- d. Provide support services for families and co-workers of service users, mental professionals, workers, and other service providers;
- e. Develop alternatives to institutionalization, particularly community, recovery-based approaches to treatment Steed at receiving patients discharged from hospitals, meeting the needs expressed by persons with mental health conditions, and respecting their autonomy, decisions, dignity, and privacy;
- f. Ensure that all health facilities shall establish their respective internal review boards. In consultation with stakeholders, the MHO shall promulgate the rules and regulations, necessary for the efficient disposition of all proceedings, matters, and cases referred to or reviewed by the internal review board;
- g. Establish a balanced system of community-based and hospital-based mental health services at all levels of the public health care system from the barangay to the municipal level; and
- h. Ensure that all health workers shall undergo human rights trainings in coordination with appropriate agencies or organizations.

SECTION XXIII. Duties and responsibilities of the Municipal Social Welfare and Development (MSWD) Office. The MSWDO shall:

- a. Refer service users to mental health facilities, professionals, workers, and other service providers for appropriate care,
- b. Provide or facilitate access to public or group housing facilities, counseling, therapy, and livelihood training and other available skills development programs; and
- c. in coordination with the Municipal Health Office, formulate, develop, and implement community resilience and psychosocial well-being training, including psychosocial support services during and after natural disaster and other calamities,

SECTION XXIV. Duties and Responsibilities of the Local Government Unit (LGU). The LGU shall:

- Review, formulate, and develop the regulations and guidelines necessary to implement an
 effective mental health care and wellness policy within the territorial jurisdiction of each LGU,
 including the passage of a local ordinance on the subject of mental health, consistent with
 existing relevant national policies and guidelines;
- b. Integrate mental health care services in the basic health care services, and ensure that mental health services are provided in primary health care facilities and hospitals, within their respective territorial jurisdictions,
- Establish training programs necessary to enhance the capacity of mental health care service providers at the LGU level, in coordination with appropriate national government agencies and other stakeholders;
- d. Promote deinstitutionalization and other recovery-based approaches to the delivery of mental health care services;
- e. Establish, reorient, and modernize mental health care facilities necessary to adequately provide mental health services, within their respective territorial jurisdictions;
- f. Where independent living arrangements are not available, provide or facilitate access to public housing facilities, vocational training and skills development programs, and disability or pension benefits:
- g. Refer service users to mental health facilities, professionals, workers, and other service providers for appropriate care; and
- h. Establish a multi-sectoral stakeholder network for the identification, management, and prevention of mental health conditions.

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SECTION XXV. Hiring of Registered Psychologist/Psychiatrist. The LGU shall Hire/may enter into a memorandum, of agreement with a registered psychologist/ psychiatrist to avail her/her services and to conduct quarterly assessment to mentally challenged La Paznon, and provide reasonable amount for his/her honorarium.

SECTION XXVI. Mandate. The Municipal Council for Mental Health, herein referred to as the Council, is hereby established as a policy-making planning, coordinating and advisory body, attached to the DOH to oversee the implementation of this Ordinance, particularly the protection of the rights and freedom of persons with psychiatric, neurologic, and psychosocial needs and the delivery of rational, unified and integrated mental health services responsive to the needs of the Filipino people.

SECTION XXVII. Duties and Functions. The Council shall exercise the following duties;

- a) Develop and periodically update, in coordination with the MHO, a national multi-sectoral strategic plan for mental health that further operationalizes the objectives of this ordinance which shall include the following:
 - 1. The country's target and strategies in protecting the rights of Filipinos with mental health needs and in promoting mental health and the well-being of Filipinos, as provided in this ordinance;
 - 2. The government's plan in establishing a rational, unified and integrated service delivery network for mental health services including the developmental health human resources and information system for mental health; and
 - 3. The budgetary requirements and a corollary Investment plan that shall identify the sources of funds for its implementation;
- b) Monitor the implementation of the rules and regulations of this Ordinance and the strategic plan for mental health, undertake mid-term assessments and evaluations of the impact of the interventions in achieving the objectives of this Ordinance;
- c) Ensure the implementation of the policies provided in this Ordinance, and issue or cause issuance of orders, or make recommendations to the implementing agencies as the Council considers appropriate;
- d) Coordinate the activities and strengthen working relationships among national government agencies, LGUs, and nongovernment agencies involved in mental health promotion;
- e) Coordinate with foreign and international organizations regarding data collection, research and treatment modalities for persons with psychiatric, neurologic and substance use disorder and other addictions,
- f) Coordinate joint planning and budgeting of relevant agencies to ensure funds for programs and projects indicated in the strategic medium-term are included in the agency's annual budget;
- g) Call upon other government agencies and stakeholders to provide data and information in formulating policies and programs, and to assist the Council in the performance of its functions; and
- h) Perform other duties and functions necessary to carry out the purpose of this Ordinance.

SECTION XXVIII. Composition. The Municipal Council for Mental Health shall be composed of the following:

- a. Municipal Health Officer as Chairperson;
- b. Municipal Social Welfare and Development Officer as Co-Chairperson;

Members:

- c. District Supervisor of the DepED;
- d. PESO Manager,
- e. Municipal Local Government Operations Officer (MLGOO);
- f. SB Chairman, Committee on Human Rights;
- g. ARAMMS Coordinator
- h. One (1) from the academe/research;
- One (1) representative from medical or health professional organizations;
- One (1) one representative from Civil Society Organizations (CSOs) involved in mental health issues

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The members of the Council from the government may designate their permanent authorized representatives.

Within thirty (30) days from the effectivity of this Ordinance, the members of the Council from the academe/research, private sector and NGOs shall be appointed by the Local Chief Executive from a list of three (3) nominees submitted by the organizations, as endorsed by the Council.

Members representing the academe/research, private sector and NGOs of the Council shall serve for a term of three (3) years. In case a vacancy occurs in the Council, any person chosen to fill the position vacated by a member of the Council shall only serve the unexpired term of said member.

SECTION XXIX, Voluntary Submission of a Drug Dependent to Confinement, Treatment and Rehabilitation, Persons who avail of the voluntary submission provision and persons charged pursuant Republic Act No. 9165, otherwise known as the "Comprehensive Dangerous Drugs Act of 2002", shall undergo examination for mental health conditions and if found to have mental health conditions, shall be covered by the provision of this Ordinance.

SECTION XXX. Penalty Clause. Any person who commits any of the following ordinance shall, upon conviction by final judgment, be punished by imprisonment of not more than six (6) months or a fine of not more than Two Thousand Five Hundred Pesos (P2,500.00), or both, at the discretion of the court:

SECTION XXXI. Appropriations. The amount needed for the initial implementation of this Ordinance shall be charged against the MOOEs of the MHO and the MSWDO under Gender and Development (GAD) Fund, and 20% Development Fund for the capital outlays and formulation of the strategic plan for mental health.

SECTION XXXII. Rules and Regulations – Within sixty (60) days after the approval of this ordinance, Rules and Regulations necessary for the efficient and effective implementation of all provisions of this ordinance shall be formulated and issued thru an Executive Order. Such rules and regulations shall take effect fifteen (15) days after posting in the three (3) conspicuous places in the Municipality of La Paz, Leyte.

SECTION XXXIII. Separability Clause. If for any reason any section or provision of this Ordinance is declared unconstitutional, other provisions hereof which are not affected thereby shall continue to be in full force and effect.

SECTION XXXIV. Repealing Clause. All laws, rules and regulations, which are inconsistent with or contrary to the provisions of this Ordinance are hereby amended or repealed.

SECTION XXXV. Effectivity Clause. This Ordinance shall take effect upon its approval.

Enacted this 22nd day of July 2024.

I HEREBY CERTIFY to the correctness of the foregoing ordinance which was duly enacted by the Sangguniang Bayan during its regular session held on July 22, 2024.

ERWIN M. CERNAL Secretary to the Sanggunian

Áttested:

HON. LYNDO A. QUINA Municipal Vice-Mayor

HEEL ARAS SIA, JR.

Municipal Mayor





Republic of the Philippines Province of Leyte MUNICIPALITY OF LA PAZ



OFFICE OF THE SANGGUNIANG BAYAN

CERTIFICATION OF POSTING

TO WHOM THIS MAY CONCERN:

THIS IS TO CERTIFY that POSTING in prominent places in the Municipal Hall and other conspicuous places in the locality was undertaken and copies of said ordinances was remain posted for three (3) consecutive weeks pursuant to Section 59 (b) of Republic Act 7190, in relation on the ordinance - MUNICIPAL ORDINANCE NO. 05, SERIES OF 2024- AN ORDINANCE ESTABLISHING A MUNICIPAL HEALTH POLICY FOR THE PURPOSE OF ENHANCING THE DELIVERY OF INTEGRATED MENTAL HEALTH SERVICES, PROMOTING AND PROTECTING THE RIGHTS OF PERSONS UTILIZING PSYCHOSOCIAL HEALTH SERVICES, APPROPRIATING FUNDS THEREFOR AND FOR OTHER PURPOSES

Subject ordinance is being forwarded to that Body for review in compliance with Section 56 of Republic Act 7160.

ISSUED this $13^{\rm th}$ day of August 2024 at the office of Sangguniang Bayan, La Paz, Leyte.

Very truly yours,

ERWIN M. CERNAL

Secretary of the Sangguniang Bayan